

The Woman Abuse Community Report Card Project

Tools to Assist Communities in Carrying Out Self-Assessments Regarding the Effectiveness of Their Response to Woman Abuse

January 2004

A Joint Project of:

The Woman Abuse Council Toronto
The Grey Bruce Court Coordinating Committee
The London Domestic Violence Coordinating Committee
Kenora Coalition Against Violence and Abuse
Coordinating Committee to End Women Abuse in Thunder Bay and District

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PROJECT ADVISORY COMMITTEE AND TEAM LEADERS

The Project Advisory Committee was made up of the following:

Colleen Purdon - Grey Bruce
Jacquie Hetherington - Kenora
Tim Kelly - London
Vivien Green - Toronto

Team leaders in each community provided input regarding the design of assessment tools, tested the drafts and obtained feedback from their local communities. Their work is much appreciated:

Colleen Purdon - Grey Bruce
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Tim Kelly - London
Paula DiGiacinto - Thunder Bay
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Project Consultant:

Jan Richardson and Associates

Thanks to all of the communities, community workers, professionals and agency staff who participated in this work. We also extend our thanks to Jan Richardson who acted as a consultant to the project.

***** Please feel free to copy any aspects of the report and its content that may be relevant to your organization, coordinating body and/or community *****

I. COMMUNITY AND AGENCY ASSESSMENT TOOLS

BACKGROUND

There have been significant efforts by women's groups and women survivors across the Province of Ontario to address the issue of woman abuse. Much effort has gone into creating ways that services, delivered by a variety of sectors, can provide support to women and children while encouraging consistent and coordinated consequences for abusers.

In response to a number of murders of women by their partners, the Provincial Coroner held an Inquest into the death of Arlene May (Arlene May was murdered by her ex-partner Randy Iles who subsequently killed himself) in 1997. The Inquest reviewed the specifics of the murder as well as broader issues related to the community response to domestic violence. The jury provided 213 recommendations addressing a myriad of issues, including the need for better coordination of community services and interventions.

As recommended by the May/Iles Jury a community-government committee was formed so as to provide create a long term strategy to ensure implementation of the May/Iles jury recommendations. The Joint Committee on Domestic Violence submitted a report in 1999 providing a five-year strategic implementation plan that included 174 recommendations.

Two years later, another Coroner's Inquest was held regarding a murder-suicide that had characteristics similar to the Arlene May case. This Inquest into the death of Gillian Hadley, reiterated the need for the implementation of the May/Iles recommendations and made an additional 51 recommendations.

In all of these recommendations, there is a strong emphasis on the need for better coordination of services and programs among the various sectors and agencies. For example, the Joint Committee on Domestic Violence noted the importance of providing a "seamless" community response in order to most effectively support and assist survivors. The Joint Committee further noted :

"Individual domestic violence initiatives must be coordinated and integrated into a unified plan, and that each sector of the response system must work in concert with the other. Coordination among initiatives and sectors must occur at the local, community and provincial level"¹

¹ Working Toward A Seamless Community and Justice Response to Domestic Violence: A Five-Year Plan For Ontario. Joint Committee on Domestic Violence, August 1999

To help move towards this goal, the Joint Committee identified a number of specific provincial strategies including the establishment of coordinating committees in the catchment area of each provincial court. These committees would be composed of criminal justice and other sectors in each community. As part of this strategy, it was recommended that a community report card - or assessment - be developed. It was suggested that a report card be piloted and distributed as it would provide communities with a “vehicle for self-assessment and development in their work toward a seamless response to domestic violence and ultimately toward ending violence against women”²

Tools and resources like these can be an important way to help communities take concrete steps toward institutional and systemic change.

INTRODUCTION

This report includes two tools that will assist in assessment and development of a seamless community response to women abuse that focuses on the safety of women and children while holding abusers accountable. These tools consist of 1) a Community Response Assessment (Service Provider Survey) and 2) a Coordinating Committee Operations Assessment tool.

These two assessment tools emphasize different facets of the community response - the overall community response system and the functioning of local coordinating committees (or similar group).

A few communities created an additional tool - a survey for people who used community services in order to gather direct feedback. This tool is included later in the document on page 45.

WHY DO ASSESSMENTS?

Assessments are a formalized way of reviewing a community’s programs, services and structures in order to identify how well the community responds to the issue of woman abuse. Specifically, assessments can:

- map-out the range of services and programs available in the community and identify potential gaps in services;

² Working Toward A Seamless Community and Justice Response to Domestic Violence: A Five-Year Plan For Ontario. Joint Committee on Domestic Violence, August 1999

- ❑ identify which of these services are working well and point out areas in need of improvement;
- ❑ monitor the functioning of community coordinating committees (or other similar structures; and,
- ❑ identify whether the community is achieving a seamless and accountable community response to women abuse.

Assessments provide information that can be used to form an action plan for improving agency and community responses. When repeated over time, assessments can measure the progress toward the long-term goal of a seamless and effective response.

As well, using assessment tools allows communities and agency partners to develop, or strengthen, a community coordinating structure by:

- ❑ identifying key community stakeholders who are currently “ at the table” and those who are missing from the process;
- ❑ providing opportunities for victims of domestic violence and other service users to bring forward their knowledge and perspectives by providing feedback regarding system response; and,
- ❑ educating the community about the goals of the social service sector in addressing the issue of domestic violence.

WHAT THE SELF-ASSESSMENT CANNOT DO

A self-assessment cannot satisfy all stated needs for evaluation and monitoring. For example, this type of self-assessment is not able to determine whether or not women are safer. This type of analysis would be better achieved through a comprehensive research or evaluation project. In addition, the self-assessment will not:

- ❑ answer complex questions regarding changes in the community’s behaviours and attitudes regarding violence against women;
- ❑ directly increase the efficiency of service delivery;
- ❑ support funding allocations;
- ❑ be an entirely inclusive process (given the limitations of time and resources);
- ❑ critique the activities of an individual agency;
- ❑ tell communities or groups what steps to take.

A self-assessment will provide a summary of the current situation and will give direction as to what needs to be done. Ultimately, it is up to service agencies and the community at large to determine any specific course of action.

DEVELOPMENT OF ASSESSMENT TOOLS

The self-assessment process can be thought of as a snapshot in time that establishes outcomes, practices or current benchmarks to be maintained or exceeded in future years. The process also provides a consistent method of reporting information obtained - information that can be used to support a public release of information and/or consciousness raising activities among community members.

Several communities in Ontario have developed assessment tools - a version of a community report card was created in Owen Sound, accountability models in London and an agency Best Practice Checklist in Toronto. As part of the follow up to the Joint Committee, these three communities received funding from the Ministry of the Attorney General to pilot test self-assessment tools.

This report provides the two different assessment tools that were piloted in this specific community report card project and summarizes the experiences of the five communities that were asked to participate. The tools are designed to help a community or agency conduct a qualitative assessment based on input from front-line staff, agencies, and clientele.

These tools are offered to communities across the Province with the understanding that each community will want to adapt the materials in order to meet its own unique context and needs. As well, in many situations, the community may decide to supplement these tools by collecting quantitative data on services, demand and delivery.

II. ASSESSMENT TOOLS

ASSESSING THE COMMUNITY RESPONSE - Service Provider Survey

The Community Response Assessment Tool consists of survey forms and background documents that can be used to assess agencies, institutions and services in the community against benchmarks such as:

- community collaboration;
- common understanding and analysis of woman abuse;
- effective service delivery; and,
- accountability and prevention.

A community could use this tool as a means of exploring its response to domestic violence as well as the services and programs currently available in their geographic region. The results may be used to identify areas of strength, gaps in service and to facilitate effective planning around identified needs and problem areas. This tool also provides a means of publicizing the issue of woman abuse while drawing community attention to the issue and to shared responsibilities for solutions.

A sample tool is located on the following page

Service Provider Survey

Organization/Agency: _____

Completed By: _____ (name and position)

Date Completed: _____

If completed by a group:

Number of participants:

Senior Managers

Managers

Staff

Volunteers

Benchmark 1: Sectors, organizations and individuals work together collaboratively to provide a seamless system response to domestic violence.

1.1 Our organization/agency signed on as a partner in a formal, interagency protocol on domestic violence during the previous year.

Yes No

If yes, list the arrangement/protocols your agency has signed

1.2 Do you rate the effectiveness of protocols on domestic violence as:

Very Effective Effective Somewhat Effective Not Effective

1.3 Our Organization participated in regular meetings of Domestic Assault Review Team/Court Advisory Committee.

All of the time Most of the time Some of the time Never

1.4 Does your agency participate in case-reviews and case-management with other providers of domestic violence services in the community?

Regularly as part of established policy or procedure
 On an ***ad hoc*** basis based on staff initiative
 Never

1.5 Is there an effective mechanism to discuss and resolve issues with other organizations/agencies concerning their response to domestic violence.

Yes No

If yes, specify: _____

1.6. Is there an effective mechanism to discuss and resolve issues with other organizations/agencies concerning your organization/agency' s response to domestic violence.

Yes No

If yes, specify: _____

1.7 Over the last two years, did staff members of you organization participated in interagency training related to woman abuse:

More than once once not at all

Please provide an estimate of portion of staff from your organization/agency who participated in interagency training

50% or more 30 to 50% 10 to 30% less than 10%

Please provide an estimate of the portion volunteers from your organization/agency who participated in interagency training

50% or more 30 to 50% 10 to 30% less than 10%

1.8 Over the past year, victims of domestic violence identified by your organization/agency were referred to abuse-specific services and supports:

Always Sometimes Rarely

Why? _____

1.9 Over the past year, those identified as perpetrator of domestic violence by your organization/agency were referred to abuse-specific services and supports:

Always Sometimes Rarely

Why? _____

1.10 Our organization received domestic violence referrals from other organizations/agencies in the past year.

Always Sometimes Rarely

These referrals:

Exceeded Capacity Meet Capacity Below Capacity

Benchmark 2: A consistent understanding and response to domestic violence is demonstrated throughout all sectors, and in each geographic area.

2.1. Our organization uses an intake assessment procedure to routinely screen for domestic violence.

Always Sometimes Rarely

2.2 Our organization uses a procedure to assess client risk from domestic violence

Always Sometimes Rarely

2.3 Staff in our organization ensure that victims of domestic violence or those at risk for domestic violence have a safety plan.

Always Sometimes Rarely

2.4 How would you assess the general level of staff training and expertise on the issue of domestic violence in your organization?

High level of expertise Some areas of expertise More training needed

2.5 Staff and volunteers in our organization demonstrate a common understanding of domestic violence.

Always Sometimes Rarely

Benchmark 3: The community has the capacity and resources required to respond effectively and proactively to domestic violence in all parts of the community.

3.1 Our organization had up-to-date print resources and information on domestic violence and related services available for clients over the last year.

Yes No

3.2 Did your agency have the staff and funding resources that you believe are needed to respond effectively and proactively to domestic violence in the past year?

Yes No

What resources do you believe are most critically needed: _____

3.3 Our agency relied on local fundraising efforts to provide resources to support domestic violence services in the past year?

Yes No Don't Know

3.4 Our agency relies on user fees to provide domestic violence services in the past year?

Yes No Don't Know

3.5 Which of the following are barriers to obtaining service from your organization?

culturally appropriate services

language

mental health

physical challenges

developmental challenges

other, specify: _____

Benchmark 4: Sectors, organizations and individuals demonstrate a commitment to education, advocacy and proactive strategies to ultimately end domestic violence.

4.1 How would rate the level of public education activities on domestic violence in your community?

High Moderate Low

4.2 Did your organization dedicate funding/resources specifically to public education and prevention projects?

Yes No Don't Know

If yes, please list the types of activities undertaken in the past year: _____

4.3. Did you collect feedback from users of your organization domestic violence services?

From women: Yes No Don't Know

From Men: Yes No Don't Know

4.4 What is your overall sense of the community response to domestic violence?

Excellent Good Fair Poor

Additional Comments:

ASSESSING COORDINATING COMMITTEE EFFECTIVENESS - Coordinating Committee Operations Assessment Tool

The Coordinating Committee Assessment Tool focuses on the functioning and effectiveness of a community coordinating committee, council or coalition.

This survey form and attached background documents may be useful in a community that has established, or is in the process of creating, a coordinating committee (or similar structure). The tool assesses areas such as the level of participation on the coordinating committee by sectors, the extent to which the committee actively responds to issues and the effectiveness of the committee in representing the diversity of the community.

The results of this assessment are useful for strategic planning related to a coordinating body, identifying areas for outreach or policy development.

Next Steps

Returning the summarized information to the committee for discussion and analysis in a timely way can help to stimulate active discussion and the community planning process. Summarizing the key decision points from the surveys will support discussion. Having the right information available at the right time will help to improve the strategy. The following questions can be considered:

- ✓ How do our members perceive our collaborative efforts?
- ✓ Do we need to be collecting different statistics?
- ✓ Do we need to review our mission and develop an orientation and renewal strategy?
- ✓ Do we have a common definition of woman abuse?
- ✓ Do we need to establish conflict of interest guidelines or conflict resolution strategies that builds on our networking?
- ✓ What projects or activities could we be doing to support our beliefs?
- ✓ Are there segments of the community whose support is missing and needed?
- ✓ Are there partners we could add to our coalition?

- ✓ Should we be developing standardized safety plans and risk assessments?
- ✓ Do we have safe and meaningful ways for women, men and children to inform us of their needs for a coordinated approach?
- ✓ Are we, as a coordinating committee doing what we intended?
- ✓ Are we accomplishing the short- term actions to achieve our long-term vision?
- ✓ What are the realistic resources available to accomplish our goals?

Making a community action plan is a concrete way to guide the activities of the group and maintain some focus. There will always be urgent issues that capture the attention of the group and the community plan can help to propel or provide some focus on less urgent actions.

Begin planning for the future by evaluating the experience of the self-assessment process and incorporating changes to the design that reflect your community’s needs and interests. Completing a community plan does not need to be complex. Look at developing measurable outcomes with specific dates, times and anticipated maximum cost. Groups can use different approaches such as incorporating SMART goals as a method:

- S**pecific
- M**easurable
- A**ction Oriented
- R**ealistic
- T**ime and Resource Constrained

A chart outlining the tasks and the timelines can help the group to stay on track:

GOAL OR IDEAL STANDARD			
Current Benchmark or Best Practice	New Direction or Benchmark	Action Steps	Resources Needed and Timeline
		1. 2. 3. 4.	1. 2. 3. 4.

Embark on the actions - keep them respectful of the volunteer efforts, time limitations and resources of the group.

Consider your next steps including the possibility of engaging in community-based research. Looking back at on the *What the Self-Assessment Cannot Do* section may stimulate the group to consider questions like, “as a result of our efforts are women’s lives safer?” Complex questions such as this one require more sophisticated methodology and focus. They can also serve to add to the growing knowledge and understanding of the impact of violence against women in our own communities and in others.

Writing a Report for Distribution

** A sample newsletter can be found on page 23 **

There are likely two types of reports that emerge from the coordinating committee self-assessment process. The first is an internal report to the members of the committee that can help in the formation of a detailed action plan. The second report is one to the general public that will go out to the media, politicians and private citizens.

Some common points to consider when developing your report:

Consider your audience and adapt your writing style to the interests and understanding of those who will be reading the reports. What kinds of information would be interesting or appealing to the audience? What would make them refer to the report and use for future reference?

Use a common accessible vocabulary that may include a glossary of terms. Acronyms and jargon may confuse the audience and neutral language is suggested.

Include the obvious points. Be clear about the basics such as the purpose of the report, the activities and purpose of the committee, and the definition of abuse (as referred to above point). Some of the core points about the coordinating committee’s work should also be included.

Consider including statements and comments from women or service users. Comments by those engaging in the service and those providing the service bring the information to life and balance out the statistics.

Releasing the Report

Consider the timing of the release. Try and have it coincide with important events that recognize the issue such as Domestic Violence Awareness Month. You may wish to hold a press conference to take full advantage of the opportunity. Involve the 'right' participants at the press conference including those who participated in the survey and someone who put the results together. The press is always interested in having a victim tell her story, however the ethics of this, including a woman's safety, must be seriously considered.

Celebrate your group's accomplishments!!

Sample tools are located on the following pages

Coordinating Committee Operation Assessment Tool

Developing and maintaining an inter-agency structure to coordinate community responses to women abuse has been recommended as a key element to ensure a coordinated and effective community response. However, establishing and maintaining effective inter-agency dialogue can be challenging. Such processes frequently require on-going work to ensure that the structures are established and the work is supported.

This tool has been developed to assist new or on-going committees to regularly review their structure and processes. Such work is critical to providing a strong and effective community wide response where coordinating committees can provide necessary leadership.

Accountability

1.1 Coordinating committee members share a common definition and understanding of woman abuse.

- Yes Sometimes No

1.2 Open and frank discussions between members about woman abuse can take place at the coordinating committee.

- Always Sometimes Never

1.3 Committee members have mechanisms in place to deal with dissenting opinions.

- Yes Sometimes No

1.4. Mechanisms are in place to allow discussion and problem solving between the sectors/ agencies when one sector is identified as presenting challenges.

- Yes Sometimes No

1.5. There are opportunities for continuing education and professional training on woman abuse provided through the coordinating committee to members of the committee

- Often Rarely Never

1.6. The coordinating committee influences the practices and policies of individual agency/ and institutions

- Often Rarely Never

1.7. The coordinating committee influences laws, regulations and policies

- Often Rarely Never

1.8 A mechanism is in place for the wider community to review and comment on the activities and work of the coordinating committee.

- Yes Under Development No

1.9 If yes, what term best describes this mechanism:

- Ongoing Sporadic

Consistency

2.1. The coordinating Committee has formalized and documented guidelines and polices that govern its operations

- Yes Under Development No

2.2 If yes, what are the status of policies and guidelines in the following areas:

Membership Completed In process Not available

Definition of abuse Completed In process Not available

Conflict of interest Completed In process Not available

Terms of Office Completed In process Not available

Replacement of members Completed In process Not available

New member orientation Completed In process Not available

Responsibility and roles of members
 Completed In process Not available

Commitment to community collaboration
 Completed In process Not available

2.3. Projects and activities that necessitate a close working relationship have been successfully carried out through the coordinating committee.

- Often Rarely Never

Examples: _____

Commitment

3.1 Please identify the level of participation on the coordinating committees for the following services, sectors or agencies.

Crisis help line Active Limited Participation Never Participate

Police Active Limited Participation Never Participate

Assaulted women's shelter
 Active Limited Participation Never Participate

Crown Attorneys Active Limited Participation Never Participate

Victim Witness Assistance Program (if available)
 Active Limited Participation Never Participate

Women's Counselling and Support Services
 Active Limited Participation Never Participate

Batterer's or PAR programs
 Active Limited Participation Never Participate

Child Welfare Active Limited Participation Never Participate

Public Health Active Limited Participation Never Participate

Hospitals Active Limited Participation Never Participate

Family court Active Limited Participation Never Participate

Legal Aid Active Limited Participation Never Participate

Community Legal Clinics
 Active Limited Participation Never Participate

Family Service Agencies
 Active Limited Participation Never Participate

Settlement services Active Limited Participation Never Participate

Clergy Active Limited Participation Never Participate

Children's mental health services
 Active Limited Participation Never Participate

Others Active Limited Participation Never Participate

3.2. Members of the coordinating committee have established formal communication networks that are effective in sharing information.

Yes Under Development No

3.3 Members of the coordinating committee have established formal communication networks that are effective at facilitating discussion between members and problem solving.

Yes Under Development No

3.4 Members of the coordinating committee have informal communication networks that are effective in sharing information

Yes Under Development No

3.5 Members of the coordinating committee have informal communication networks that are effective at facilitating discussion between members regarding problems and issues and that promote problem solving.

Yes Under Development No

3.6 There is strong and effective leadership within the coordinating committee

Yes Sometimes No

3.7. The leadership of the coordinating committee promotes and facilitates inter-agency/inter-sectoral participation and problem solving

Yes Sometimes No

3.8. The Coordinating committee membership is representative of the diversity within the wider community.

Yes Somewhat No

Awareness

4.1. The coordinating committee releases an annual report/ newsletter or some form of document detailing its activities.

- Yes Sometimes No

4.2 A standard for safety planning practice and standard risk assessment are used across all agencies in the community response.

- Yes - used by most Use by some no common practice

4.3. The coordinating committee has a vehicle to discuss individual case studies either as an example of a representatives systemic problem that need to be addressed or as an example of good practice among the relevant agencies.

- Yes Sometimes No

4.4. Any other comments you would like to add:

Annual Report

Special Interest Articles:

- How Did We Help in 2001
- The Self Assessment of the Coordinating Committee
- Add a highlight or your point of interest here

Individual Highlights:

- Statistics 1
- What Did We Learn 2
- Next Steps 3
- Highlight, Reports, & Activities 4

Coordinator Name (111) 111-1111

What is Woman Abuse?

Provide your communities term and definition of woman abuse.

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Community Response

Provide a description of the coordinating committee and the background information

When it was formed
Who serves on it?
How often the committee meets

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How Did We Help in 2001

Highlight activities and actions.

You can also use this section to feature agencies.

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xxxxxxxxxxxxxxxxxxxx
xxxxxxxxxxxxxxxxxxxx

A great way to add useful content to this newsletter is to develop and write your own articles, or include a calendar of upcoming events or a

special offer that promotes a new product.

You can also research articles or find "filler" Articles by accessing the World Wide Web. You can write about a variety of topics but try to keep your articles short.

Much of the content you put in your newsletter can also be used for your Web site. Microsoft Word offers a simple way to convert your newsletter to a Web

publication. So, when you're finished writing your newsletter, convert it to a Web site and post it.

"Add quotes from women and abusers taken from the focus group".

Stats

In 2001 our community Supported a number of women, children and men.

Here are a few of the highlights. (Statistical information from the survey).

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"Add quotes from women and abusers taken from the focus groups".

The Self Assessment of the Coordinating Committee

A community self-assessment tool is designed to assist our community coordinating committee work toward a more seamless and consistent response to violence against women. The self-assessment contains key components that the coordinating

committee as a whole can work toward developing and implementing. The process of completing the self-assessment provides an opportunity for our community to analyze its' current response to woman abuse, assist in planning, and to share information. The process

is intended to be a practical approach that establishes beliefs (core values) and ideal standards (degrees of excellence) that will be developed through indicators (measurements).

What Did We Learn

“Add quotes from women and abusers taken from the focus groups”.

Summarize the key findings.

xxxxxxxxxxxxxxxxxxxx
xxxxxxxxxxxxxxxxxxxx
xxxxxxxxxxxxxxxxxxxx

The purpose of a newsletter is to provide specialized information to a targeted audience. Newsletters can be a great way to market your product or service, and also create credibility and build your organization’s identity among peers, members, employees, or vendors.

First, determine the audience of the newsletter. This could be anyone who might benefit from the information it contains, for example, employees or people interested in purchasing a

product or requesting your service.

You can compile a mailing list from business reply cards, customer information sheets, business cards collected at trade shows, or membership lists. You might consider purchasing a mailing list from a company.

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The Next Steps

“Add quotes from women and abusers taken from the focus groups”.

Select four or five Benchmarks that the Committee established and describe the goal, the need and the actions.

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xxxxxxxxxxxxxxxxxxxx
xxxxxxxxxxxxxxxxxxxx

One benefit of using your newsletter as a promotion tool is that you can reuse content from other marketing materials, such as press

releases, market studies, and reports. This is the basics of a newsletter.

While your main goal of distributing a newsletter might be to sell your product or service, the key to a successful newsletter is making it useful to your readers.

A great way to add useful content to your newsletter is to develop and write your own articles, or

include a calendar of upcoming events or a special offer.

In a few words, it should accurately represent the contents of the story and draw readers into the story. Develop the headline before you write the story. This way, the headline will help you keep the story focused.

The Next Steps Continued...

“Add quotes from women and abusers taken from the focus groups”.

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You can compile a mailing

list from business reply cards, customer information sheets, business cards collected at trade shows, or membership lists. You might consider purchasing a mailing list from a company.

If you are abused call your local helpline.

999-9999

For Local Services & Support

Police 999-9999

Highlight – Report – Activities

Describe in more detail some of the accomplishments such as a:

- Joint training session
- An award or ceremony
- An advocacy effort
- A joint protocol
- New members

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Examples of possible headlines include Product Wins Industry Award, New Product Can Save You Time, Membership Drive

Exceeds Goals, and New Office Opens Near You.

One benefit of using your newsletter as a promotional tool is that you can reuse content from other marketing materials, such as press releases, market studies.

About Our Organization...

Short Section on mission statement.

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Think about your article

and ask yourself if the picture supports or enhances the message you’re trying to convey. Avoid selecting images that appear to be out of context.

Microsoft includes thousands of clip art images from which you can choose and import into your newsletter. There are also several tools you can use to draw.

III. PILOTS OF ASSESSMENT TOOLS: THE COMMUNITY EXPERIENCE

Five communities offered to test the two different types of tools that had been created: London, Kenora, Owen Sound, Thunder Bay and Toronto. The goal of the pilot exercise was to highlight the experience of conducting assessments of this type within very distinct communities, including diversity of population and diversity of services. These communities also provided examples of different levels of organizational development toward a coordinated community response to woman abuse.

Each of the five communities had a different experience in their quest toward providing more effective and accountable services to women, and each community was interested in testing out different aspects of the assessment process.

Team leaders were identified in each community and they gathered in London, Ontario in November 2000 to discuss project implementation in their respective communities. Subsequently, the tools were pilot tested within a 6-month period.

Each community was asked to report on their unique experience. The following is a description of the process and results in each of the five communities. Each community included slightly different information based on what was relevant and useful them as they carried the community report card process.

KENORA

Profile:

The City of Kenora has a population of approximately 16,000 and is situated on the Lake of the Woods just east of the Manitoba border. There are five First Nation territories within a 40-mile radius of Kenora. There is one general hospital, which supports a Sexual Assault Treatment Program, Community and Addictions Counselling Services, and a Day Treatment Program. As with most northern Ontario towns, Kenora has a shortage of physicians. There are a variety of resources such as a women's shelter, a women's resource centre, detox or withdrawal management centre, a male and female transition home and a mobile crisis service.

The Kenora Coalition against Violence and Abuse (KCAVA) is an informal group made up of representatives from several different local agencies. It was formed in 1991 and meets three to four times a year to share information and apply for grants to support education, develop resources and increase public awareness on violence and abuse. Kenora has had a relatively informal organization and has focused on developing relationships between those individuals working in different sectors.

Results:

The working group consisted of two counsellors, one director of a women's shelter, and one Community Legal Clinic worker. The group met twice to review beliefs, principals, optimal standards, indicators, methods and definitions. This information was brought to KCAVA and a decision was made to distribute the Committee Operations Assessment to all KCAVA participating agencies.

Much of the strength of KCAVA has been personal relationship building and information networking. The informal nature of KCAVA has been, in part, due to the lack of resources available to the group and the choices that needed to be made regarding how to spend limited resources and energy. Limited effort was put into setting up a formal organizational structure and the requisite operating policies and procedures. All agencies involved with KCAVA support the need for networking, increasing awareness and development of innovative community initiatives. The informal approach has been relatively successful in supporting this work to date.

The Committee Operations Assessment attempts to examine the organizational elements of a group and as such this tool was not the most appropriate given the local structure. The Coordinating Committee Assessment also was not the most appropriate tool given Kenora's context. A format such as the Community Response Assessment, which was implemented in Owen Sound, may have produced more relevant information that could have been used in more effectively in planning initiatives.

KENORA'S SURVEY RESULTS

Year: 2001

Total Number of Abused Women Served: 99
 Total Number of Abused Women on Waiting Lists: no statistical data available
 Total Number of Children Witnessing Violence: 90
 Total Number of Children on Waiting Lists: 0
 Total Number of Abusers Served: 45

A. Accountability

	Yes	No	Don't Know
Common Understanding	7		1
Positive Environment	5		2
Continuing Education	8		
Changes in Policies, Laws, Regulations: <input type="checkbox"/> Police Protocols	3	1	3
Community Review and Comment	1	4	2
	Under Discussion	Ongoing Monitoring	Best Practice
Term Used for Community Review		1	

B. Consistency

	Yes	No	Don't Know
Guidelines and Policies		4	2
Multi-sectoral response <input type="checkbox"/> Police Protocols <input type="checkbox"/> Resource Videos <input type="checkbox"/> Resource Kits <input type="checkbox"/> Poster <input type="checkbox"/> KCAVA cards <input type="checkbox"/> Media Release	6		1
	Under discussion	Ongoing Monitoring	Best Practice
Terms used to describe status of guidelines and policies:			
<input type="checkbox"/> Membership		1	1
<input type="checkbox"/> Definition of Abuse		2	1
<input type="checkbox"/> Conflict of Interest		2	1
<input type="checkbox"/> Terms of Office		2	
<input type="checkbox"/> Replacement of Members			1
<input type="checkbox"/> New Member Orientation			1
<input type="checkbox"/> Collaboration			1

C. Commitment

Groups Participating	
Crisis Helplines	✓

Groups Participating	
Shelters	✓
Police	✓
Sexual Assault Centre	✓
Women's Counselling Centre	✓
Men's Program	✓
Victim Witness	✓
Crown Attorney	✓
Children's Aid Society	
Children's Mental Health Services	
Public Health	
Ontario Works	
Family Doctor	
Criminal Court	✓
Legal Aid	✓
Justice of the Peace	
Clergy	
Other	✓
<input type="checkbox"/> Teachers	
<input type="checkbox"/> Adult Mental Health	
<input type="checkbox"/> MCSS	
<input type="checkbox"/> Interpreter Services	
<input type="checkbox"/> District Hospital	

	Yes	No	Don't Know
Leadership	4	1	2
Understanding the Community - i.e.: <input type="checkbox"/> Respect and Awareness Shown in Discussions <input type="checkbox"/> Multi-Agency Concept <input type="checkbox"/> Support for Individual Agencies	8		
New Member/Multi-Agency Alliances <input type="checkbox"/> Membership Always Evolving	7		1
Communication Networks <input type="checkbox"/> Informal	6		2
	Under Discussion	Ongoing Monitoring	Best Practice
Terms to Describe Communication Policies <input type="checkbox"/> No Formal Policies	3	2	

D. Awareness

	Yes	No	Don't Know
Annual Report	1	4	1
Local Demographics Represented	5	2	1
Standard Safety Planning		5	2
Strategies Used That Maximize Diversity - i.e.: <input type="checkbox"/> Doing Projects That Are 'Doable', Not to Meet Statistical Goals <input type="checkbox"/> Outreach	3	1	2

Other Comments:

- ❑ Informal network to problem solve, educate, increase awareness, share resources, add resources; flexible response tailored to the community
- ❑ Limited involvement in direct services to abuse
- ❑ There is an interest in building safer communities
- ❑ Recognition of increased vulnerability for differently-abled women
- ❑ We are a small town environment, one that works more informally
- ❑ We are an informal network that shares resources and increases awareness

Community Report Card Process

What Was Positive About the Process

1. Process of assessment for coalition to re-visit exactly what we do, and make plans for future goals.
2. Began a process of agencies questioning how they're involved in the bigger picture of community.
3. Reinforced plan of agencies working together more cohesively to enhance available resources.
4. Process of forming a working group and discussing various aspects of the report card helped to increase awareness of the diversity of ways of thinking about and dealing with woman abuse. Although we may be saying the same words, we apply different meanings to them, thus it helped in adopting a standard for which we worked.

Problems and Areas for Improvement

1. Coming onto project late due to unforeseen circumstances was confusing as we were unsure exactly what the project was all about and what our role was.
2. Co-chair off sick for eight weeks; therefore, bigger workload than planned.
3. Time; too little time to do a more thorough job. Difficult to get advisory committee together in timely way. Agencies slow in returning surveys, even with a deadline and reminders.
4. Time of year (year-end) appears to be busier time for people.
5. Survey focused on coordinating committee specifically.
6. Groups that deal with abuse and are not part of the committee get missed.

LONDON

Profile:

London is located in the heart of South Western Ontario, at the forks of the Thames River, and has a population of 325,000. London serves as a regional health centre and the University of Western Ontario and Fanshawe College draws faculty, researchers and students from around the world. London is one of Canada's refugee settlement areas and has a significantly diverse population that, along with its First Nation communities, offers a culturally distinct city.

The London Coordinating Committee to End Woman Abuse (LCCEWA) was formed in 1980 and has continued to achieve results through action oriented projects. The LCCEWA is incorporated as a not for profit organization without charitable status and no staff or resources are allocated to the coordinating committee. With a membership of approximately 35 agencies, institutions and individuals, the committee meets monthly to share information and respond to social change actions. London has created a highly developed committee with a primary focus on maintaining positive working relationships between individuals across a broad variety of sectors. This strong focus on relationship building supports integrated planning and collaborative interventions and responses.

Results:

The LCCEWA reviewed the tools available within this project and chose to pilot test the Committee Operations Assessment among its 21 member agencies. One of the most significant aspects of the experience was that this assessment tool and implementation process provided a way to review and document the accomplishments of the LCCEWA.

The Committee reported that a number of key initiatives have been implemented by the group; which included working with the police to introduce policies and guidelines on the laying of criminal charges. This initiative began long before the provincially mandated practices had commenced. Other accomplishments include short-term projects such as conferences, workshops, an annual award ceremony and a series of responses to government initiatives. The committee responded to recommendations from the May/Illes Inquest by developing its own community audit process to examine how close London's community response matched the recommendations from the inquest. In addition, an accountability framework was developed to monitor the collaborative activities that were based on the principles of the LCCEWA. Comprehensive long-term responses have included the support and establishment of a program for abusers, a community based program for children witnessing violence and the London Centre for Research on Violence Against Women and Children.

The tools were effective in highlighting and documenting the accomplishments of the LCCEWA. For some questions in the assessment, there were significant differences in the responses that serve to highlight areas that may require further clarification of understanding and further discussion. The results of the assessment also demonstrate that there was some confusion among members of the LCCEWA about consistency of policies and practice of the coordinating body itself.

LONDON'S SURVEY RESULTS

Year: April 2001-March 2002

Total Number of Abused Women Served: 8702
 Total Number of Abused Women on Waiting Lists: 412
 Total Number of Children Witnessing Violence: 2060
 Total Number of Abusers Served: 507
 Total Number of Abusers on Waiting Lists: 0

A. Accountability

	Yes	No	Don't Know
Common Understanding	8		
Positive Environment	3	3	1
Continuing Education	5	2	
Changes in Policies, Law, Regulations: <input type="checkbox"/> DVCAC, Bill 117, Divorce Act, Police Laying Charges, Domestic Violence Court, Child Witness, Family and Children's Services Act, Funding Criteria, Role of Coordinating Committees, Meeting with MPPs, MPs, Municipal Council	7		
Community Review and Comment		1	
	Under Discussion	Ongoing Monitoring	Best Practice
Term Used for Community Review	1	2	1

B. Consistency

	Yes	No	Don't Know
Multi-Sectoral Response (<i>see below for examples</i>)	6		
Guidelines and Policies	8		
	Under Discussion	Ongoing Monitoring	Best Practice
Term Used to Describe Status of Guidelines and Policies:			
<input type="checkbox"/> Membership	7		1
<input type="checkbox"/> Definition of Abuse	1		7
<input type="checkbox"/> Conflict of Interest	1	1	6
<input type="checkbox"/> Terms of Office	2	1	5
<input type="checkbox"/> Replacement of Members	5	1	1

	Yes	No	Don't Know
<input type="checkbox"/> New Member Orientation	4	2	2
<input type="checkbox"/> Collaboration - informal ad hoc committees respond to a number of issues	2	1	2

Examples of multi-sectoral response:

- Annual award recognizing an agency or individual for outstanding leadership in advancing solutions regarding the issue of violence against women
- Twenty year celebration of LCCEWA
- Co-hosted national conference
- Sub-committee structure includes non-members of topics including; multicultural issues, domestic violence courts, response to government initiatives such as Crime Stoppers and regional strategies
- Developed a strategic plan
- Produced a booklet on the LCCEWA
- Supported establishment of the Centre for Research on Violence Against Women and Children, active board membership and participated in their research assessing an integrated response
- Incorporated as a not-for-profit without charitable status to support community based applications for funding and increase operating effectiveness
- Annual meeting for members
- No staff and agencies support administrative expenses such as hosting meetings and photocopies
- Membership fee structure in place including a sliding scale
- Outreach strategies to involve membership based on strategic plan actions
- Social justice actions including letters and meetings with politicians at all levels
- Orientation package developed for new members
- Endorsement policy to support agency funding requests
- Member of the Health Effects of Woman Abuse task force and endorsed the Routine Universal Screening Protocol
- Host delegations from around the world
- Meet monthly to review agency updates and current local, provincial and national issues

C. Commitment

Groups Participating	Number
Crisis Helpline	1
Shelters	2
Police	1
Sexual Assault Centre	1
Women's Counselling Centre	1
Men's Program	1
Victim Witness	1
Crown Attorney	1
Children's Aid Society	1
Children's Mental Health Services - FCC, Vanier	2
Public Health	1

Groups Participating	Number
Ontario Works	1
Family Doctor	0
Criminal Court	0
Legal Aid	1
Justice of the Peace	0
Clergy	1
Other Community Social Services	3
Family Court	1
Cultural Interpretation	1

	Yes	No	Don't Know
Understanding the Community	4	1	2
Leadership	5	2	
Communication Networks	6	1	1
	Under Discussion	Ongoing Monitoring	Best Practice
Terms to Describe Communication Policies	2	3	3

D. Awareness

	Yes	No	Don't Know
Annual Report	4	4	
Local demographics Represented	3	3	1
Strategies Used That Maximize Diversity - i.e.: <input type="checkbox"/> Multi-cultural Committee <input type="checkbox"/> Gay/Lesbian Outreach	2	3	1
Standard Safety Planning		3	3

Other Comments:

- There was some confusion expressed regarding consistency of practice and policy of the LCCEWA

THUNDER BAY

Profile:

The City of Thunder Bay is located in the centre of Canada. Thunder Bay has a metro population of more than 122,000 people including a large aboriginal population and a significant immigrant and multi-cultural community.

The Coordinating Committee to End Women Abuse in Thunder Bay and District has been in existence since 1986. In the first five or six years a great deal was accomplished - police training and a training manual; a woman assault services directory for local agencies; advocacy for additional services for victims; the development of police protocol for domestic violence; and the initiation of a criminal justice tracking project to assess the effectiveness of the current system and identify gaps. Unfortunately, in later years the Committee had to collapse its once extensive sub-committee structure into a single working group due to lack of available resources for participation from member agencies. It has evolved into an informal networking group for agency representatives. The Coordinating Committee to End Woman Abuse in Thunder Bay and District is not an incorporated entity, and is staffed according to receipt of project funding.

Results:

In the last few years, the Coordinating Committee has experienced a surge in membership, participation and general energy. The committee has partnered in development, implementation, delivery and evaluation of a Supervised Access Program in cooperation with a local agency and revised and expanded police/shelter protocol. In addition, it participated in an information gathering session with the Ministry of the Attorney General and Ontario Provincial Police on the use of Restraining Orders in Ontario Communities. Furthermore, the committee applied to the Department of Justice and was granted funding for a staff person to help in the coordination of the committee.

The committee developed, facilitated and initiated a Community Inquiry so as to identify gaps or areas needing improvement and/or reinforcing positive relationships within the system. This was followed by an agreement to implement the Coordinating Committee Operations Assessment Tool. These processes were successful in identifying gaps and areas needing improvement. The experience and information gained also brought to light areas where existing positive relationships required reinforcement and support in order to be able to be maintained. The process was successful in identifying specific gaps including a lack of consistent safety planning tools, policies and procedures specific to women abuse, education and accountability.

THUNDER BAY'S SURVEY RESULTS

Year: April 2000-January 2002

Total Number of Abused Women Served: 14679
 Total Number of Abused Women on Waiting Lists: 438
 Total Number of Children Witnessing Violence: 1097
 Total Number of Children on Waiting Lists: no statistical data available
 Total Number of Abusers Served: 160

Other Relevant Statistics:

Transitional Support Program: 92 women
 Violence Prevention Education in Schools: 650+
 Children referred to Psychologist: 10

A. Accountability

	Yes (%)	No (%)	Don't Know (%)
Common Understanding	72	22	6
Positive Environment	39	44	17
Continuing Education	94	6	
Changes in Policies, Laws, Regulations:	50	22	28
<input type="checkbox"/> E-mails from G. O'Reilly re: Regulations or Laws <input type="checkbox"/> Support Letters Written by Committee Members, Perpetrators Being Sentenced, Accountability <input type="checkbox"/> Domestic Violence Court <input type="checkbox"/> Protocol/Police Services <input type="checkbox"/> Coordinating Committee Does Not Have Policies			
Community Review and Comment	5	50	39
	Under Discussion (%)	Ongoing Monitoring (%)	Best Practice (%)
Term Used for Community Review:	17	0	0
<input type="checkbox"/> Domestic Assault Protocol <input type="checkbox"/> Domestic Violence Court <input type="checkbox"/> We Were Consulted by MAG re: New Possibility for Restraining Orders			

B. Consistency

	Yes (%)	No (%)	Don't Know (%)	No Response (%)
Multi-Sectoral Response (<i>see below for examples</i>)	72	11	6	11
Guidelines and Policies	72	11	11	
	Under Discussion (%)	Ongoing Monitoring (%)	Best Practice (%)	No Response (%)
Term Used to Describe Status of				

Guidelines and Policies:				
<input type="checkbox"/> Membership	33	28	22	17
<input type="checkbox"/> Definition of Abuse	28	17	39	16
<input type="checkbox"/> Conflict of Interest	50	17	17	16
<input type="checkbox"/> Terms of Office	33	28	22	17
<input type="checkbox"/> Replacement of Members	39	22	11	28
<input type="checkbox"/> New Member Orientation	44	11	6	39
<input type="checkbox"/> Collaboration	11	39	17	33

Examples of multi-sectoral response:

- White ribbon and newspaper ads
- Training, advocacy, funding, proposals
- Brochure, community report card and National Crime Prevention Community Mobilization Project Phase I and II
- Department of Justice Grant for the continued development of the coordinating committee and the local children's mental health agency. For the continued development of the analysis of VAW, risk assessment, safety planning, accountability, etc.
- Training on domestic violence for police offices, public education related to woman abuse
- Joint submissions/funding
- Lakehead Regional Family Centre and Coordinating Committee (* Supervised Access Program) - started out as partners
- Years ago there were sub-committees that were very active: education protocol
- Community awareness activities, social and workshops - domestic violence court, supervised access program
- Joint training, police/shelter protocol, supervised access centre development

C. Commitment

Groups Participating	(%)
Crisis Helpline	33
Shelters	100
Police	100
Sexual Assault Centre	83
Women's Counselling Centre	94
Men's Program	78
Victim Witness	100
Crown Attorney	89
Children's Aid Society	100
Clergy	0
Public Health	89
Ontario Works	0
Cultural Interpretation Centre	0
Family Doctor	6
Criminal Court	0
Family Court	56
Legal Aid	56
Justice of the Peace	28

	Yes (%)	No (%)	Don't Know (%)	No Response (%)
Leadership	44	22	17	17
<input type="checkbox"/> Ensure Regular Meetings <input type="checkbox"/> Invite Members to Join Committee				
Understanding the Community	56	22	17	55
<input type="checkbox"/> Participation on Committee <input type="checkbox"/> Committee Representation <input type="checkbox"/> Diverse Background of Members on Committee				
Communication Networks	61	22	11	6
	Under Discussion (%)	Ongoing Monitoring (%)	Best Practice (%)	No Response (%)
Terms to Describe Communication Policies	44	28	11	17

D. Awareness

	Yes (%)	No (%)	Don't Know (%)
Annual Report	17	56	33
Local Demographics Represented	61	28	11
Strategies Used That Maximize Diversity	22	33	45
Standard Safety Planning	0	61	39

Other Comments:

- Our local coordinating committee was integral to evaluating awareness of and creating meaningful responses to VAW within our community
- The committee is stronger than it has been in the past but it still is in a development phase
- Over the past year, two grants have been applied for on behalf of the committee but we have yet to engage in the accountability component of our work. Our biggest accomplishment has been to get everyone to meet regularly, have minutes, have a planning session every June, publish a brochure, develop a web page, and to work on this report card pilot project
- I would like to suggest that an orientation session be provided to new members of the committee. This orientation session could include but not be limited to the mandate of the committee and terms of reference. I believe that this would be helpful in ensuring common goals and clarity about each role of the committee. In addition, I believe that the mandate of all agency members needs to be respected. This will require committee members to be attentive to the issues that are discussed and how they are facilitated during the committee meeting. I believe that differences between agency mandates can enhance the committee. However, at present it seems to be hindering the committee's progress and ability to work collaboratively together
- While there appears to be a basic understanding of the issues pertaining to violence against women, there is a lack of broader understanding of the impact of violence on children
- The committee lacks clarity of how decisions are made. Often it appears decisions are made outside of committee meetings.

- ❑ Although the committee meets regularly, we continue to struggle to exercise and influence in a positive way, leadership on the issue of changes to policy, laws and regulations
- ❑ It is important to continue with the committee's annual planning meetings, to clearly set priorities. There is a need for further guidelines and policies, which sets the parameters to achieve these goals. If we wish to utilize this survey tool on an annual basis, it might be helpful to have a rating scale (1-5) rather than a straight 'yes or no' response. This would allow us as a coordinating committee to assess our growth over time. Our agency remains committed to working with the community to ensure a coordinated response to woman abuse, and commends the committee for their efforts to analyze and assess the effectiveness of the committee through this report card process
- ❑ With so many partner/sectors around the table, I believe it will always be difficult to struggle with some of the above issues, however the challenge is to find the medium and balance for all
- ❑ Our committee has had problems moving from a networking group to a coordination model. We are not all on the same page when it comes to the issue of violence against women. Members do not see themselves as being accountable to their agency regarding coordinating committee work and vice versa

TORONTO

Profile:

The Greater Toronto Area (GTA) remains one of the most dynamic regions in North America, growing to more than 4.6 million people since 1991. Toronto faces complex challenges particularly when developing a coordinated citywide response to woman abuse as a result of its high population, diversity and geographic size. As the largest city in the province, the challenges and opportunities are considerable in linking to a generic assessment model. As a result, piloting of the assessment tools was conducted in Scarborough, a smaller catchment area within the City of Toronto. Scarborough has not had an established its own coordinating committee although the Woman Abuse Council of Toronto has assisted in some initiatives to facilitate coordination between legal, health and social service sectors in the past.

The Woman Abuse Council of Toronto was created in 1991 to develop a coordinated community response to woman abuse in Metro Toronto. The Council operates as a policy development and planning body and has worked to provide a forum for innovative pilot projects, policy review and development and inter-sectoral/inter-agency collaboration and intervention. The Council membership includes health care practitioners, all facets of the criminal justice system, shelters, community agencies, advocacy and counselling services, etc. The eighteen member Council, composed of senior level representatives from all sectors within the community, has eight standing committees that meet regularly to provide ways for practitioners to work together to effect systemic change. The Woman Abuse Council of Toronto was incorporated as a not-for-profit corporation in 1999 and is staffed by an Executive Director, Office Manager, one administrative staff person as well as several staff members whose funding is derived from project grants.

Among the accomplishments of the organization has been the development of *Best Practice Guidelines* for various sectors/institutions. These guidelines propose a framework for how agencies/institutions should deal with woman abuse cases in order to ensure that the safety of women and children is the main priority. Since the guidelines were distributed, a variety of agencies and sectors have used the information as a basis for domestic violence policy and organizational development work in Toronto. The Council has also worked extensively within the health sector to facilitate training opportunities and promote changes to national hospital accreditation guidelines. The Council is in its third year of a special project to create a model for an enhanced response to situations where the victim is identified as being at high risk for death/serious injury. Finally, the Council has been closely involved with the criminal justice system and played a leadership role in the development and implementation of the specialized domestic violence courts.

Results:

A group of practitioners from various sectors was pulled together to meet and discuss the possibility of implementing the community assessment process in Scarborough. These individuals had not met formally before and there was interest in participating in the project primarily as a way to initiate discussion and planning toward building linkages and efficiencies between sectors to be able to better support abused women.

The group chose to implement the Community Response Assessment as this matched its intent and goals. The group reviewed the tool and changes/additions were made to adjust the survey to accommodate the region's needs. The survey was then circulated not only to those who had attended the group's meetings, but other key players in the community were also contacted and asked to respond to the survey.

The information gathered was useful in identifying priority areas for follow up and action. Key themes emerging from the process were the following:

- the need for inter-sectoral collaboration, in particular due to increasing shortages of resources
- the need to develop effective public education and outreach strategies
- the need to carry out a the community response assessment process on a regular basis so that base line data can be gathered and then subsequent changes across the community can be measured against the initial information.

Notwithstanding the strong support for this initiative, the major stumbling block in the Scarborough experience was a difficulty in sustaining active participation from various practitioners. Many individuals agreed to fill out the survey however, were unable to find the time to complete the survey and attend planning, debriefing meetings. In large part, the lack of active participation was attributed by various practitioners to over-work, lack of staffing resources and difficulties in handling their current workload making any additional demands difficult to carry out.

The information that was gathered was comprehensive and useful, however, the number of those who were able to respond and participate in the process was limited. This experience reinforced that effective collaborative assessment and planning requires staff time and resources and that there must be organization-wide support allowing this kind of process to take place. When staff operate in an environment of scarcity of resources and extremely high demand it is difficult to find the time for non-direct service planning and coordination work.

SCARBOROUGH'S SURVEY RESULTS

A. Accountability

	Yes	No	Don't Know
Common Understanding	X		
Positive Environment	X		
Continuing Education	X		
Changes in Policies, Laws, Regulations	X		
Community Review and Comment	X		
	Under Discussion	Ongoing Monitoring	Best Practice
Term Used for Community Review			X

B. Consistency

	Yes	No	Don't Know
Multi-Sectoral Response	X		
Guidelines and Policies	X		
	Under Discussion	Ongoing Monitoring	Best Practice
Term Used to Describe Status of Guidelines and Policies:			
<input type="checkbox"/> Membership		X	
<input type="checkbox"/> Definition of Abuse			X
<input type="checkbox"/> Conflict of Interest			
<input type="checkbox"/> Terms of Office		X	
<input type="checkbox"/> Replacement of Members		X	
<input type="checkbox"/> New Member Orientation		X	
<input type="checkbox"/> Collaboration			X

C. Commitment

Groups Participating	On Council	On Standing Committee
Crisis Helpline	X	X
Shelters	X	X
Police	X	X
Sexual Assault Centre	Not our mandate	Not our mandate
Women's Counselling Centre	X	X
Men's Program	X	X
Victim Witness	X	X
Crown Attorney	X	X
Children's Aid Society	X	X
Children's Mental Health Services		X
Public Health	X	X
Ontario Works	Not available	Not available
Family Doctor		X
Criminal Court	X	X
Legal Aid	X	X
Justice of the Peace	Not available	Not available
Clergy		

Groups Participating	On Council	On Standing Committee
Other:		
Hospitals	X	X
Community Health Centres	X	X
Community Legal Clinics	X	X

	Yes	No	Don't Know
Leadership	X		
Understanding the Community	X		
New Member/Multi-Agency Alliances	X		
Communication Networks	X		
	Under Discussion	Ongoing Monitoring	Best Practice
Terms to Describe Communication Policies			X

D. Awareness

	Yes	No	Don't Know
Annual Report		X	
Local Demographics Represented	X		
Strategies Used That Maximize Diversity	X		
Standard Safety Planning	X		

Woman Abuse Council of Toronto
Scarborough Report Card: 2001-2002

Survey for People who have used Domestic Violence Services

The Woman Abuse Council is carrying out a **Scarborough Community Report Card Project 2001-2002** to look at how well the Scarborough community responded to domestic violence. We will gather information from workers and organizations (police, crown attorneys, victim services, CAS, Men's Program etc.), and from women and men who have used these services in the past. In April 2002 we will complete a report and recommendations for an improved response. For a copy of the report please contact: Salima Jethani, Project Coordinator (416-944-9242).

Scarborough Community Report Card Project 2001-2002 is part of a **province wide pilot project** that is being carried out in London, Kenora, Thunder Bay, Toronto and Grey and Bruce counties to develop a report card process to help communities in Ontario improve their response to domestic violence. The Ministry of the Attorney General funds the project. For more information about this project or assistance in completing this survey please contact: Salima Jethani, Project Coordinator: at 416-944-9242

Thank you for participating in Scarborough Community Report Card – 2001-2002 process. Your answers to the following survey questions are important and valued!

Today's Date _____

How did you become involved in domestic violence services?

As a victim of domestic violence

As a perpetrator of domestic violence

I used the following services because of domestic violence (check more than one if needed).

• Police	
• Crown Attorney	
• Criminal Court	
• Family Court	
• Legal Aid	
• Justice of the Peace	
• Probation Office	
• Victim Assistance Program	
• Victim Witness Assistance Program	
• Sexual Assault Services	
• Women’s Shelter Services (crisis telephone, shelter, community counselling, children’s counselling, legal self help, group counselling, information and referrals, second stage housing, other)	
• Children’s Aid Society (parenting group, child abuse case, child custody case, supervision order, other)	
• Supervised Access Centre	
• Children’s Mental Health Services	
• Public Health Programs	
• Emergency Hospital Services	
• Mental Health Services	
• Men’s Program	
• Addiction Services	
• Ontario Works	
• Family Doctor	
• Clergy	
• Other (please list)	

1. Please tell us how well organizations and the people in them worked together when they responded to your situation.

1.1 The people I met from different organizations seemed to work together when they responded to my domestic violence situation.

All of the time Most of the time Sometimes Never

1.2 People in different organizations knew what other organizations provided and gave me this information.

All of the time Most of the time Sometimes Never

1.3 I was directed to the help and services needed.

All of the time Most of the time Sometimes Never

1.4 Were you asked to provide the same information about the abuse to different people as you moved from one service to another in the system?

Yes No

1.5 What kind of coordination would have helped you as you moved through the system?



2. The people who you meet in the justice and social services systems need to share a common understanding of domestic violence. Victims and perpetrators of abuse need to hear consistent messages from all services providers, and have a similar response from all parts of the system. Please tell us how consistent services were for you.

2.1 Workers from different organizations (police, crown, shelters, hospital) all told me similar things about what domestic violence is; for example they told me “domestic violence is a crime”, or “the victim is not to blame” or the “safety of women and children is important” .

All of the time Most of the time Sometimes Never

2.2 I was treated with respect by service providers.

All of the time Most of the time Sometimes Never

2.3 When I needed help the people in the system were truly helpful.

All of the time Most of the time Sometimes Never

2.4 I experienced a consistent response to domestic violence from the people in the system I talked to.

All of the time Most of the time Sometimes Never

2.5 If you are a victim of domestic violence, did people in different services work with you on safety planning to keep you and your children safe from further abuse?

Yes No

2.6 If you are a perpetrator of abuse, did people in different services hold you accountable for your abusive behaviour and support you to change?

Yes No

3. We would like to know if you believe the community has the resources and services that are needed for an early and effective response to domestic violence in all parts of Scarborough.

3.1 The kinds of services I needed were available to help me.

Yes No

If your answer was 'No', what services did you need?

3.2 I received the information and referrals that I needed to get help.

Yes No

3.3 Did you have to wait for services?

Yes No

If your answer was 'Yes', how long did you need to wait for the services you needed?

3.4 I experienced difficulties getting services because:

no transportation no money no childcare other _____

What would have made it easier for you to get the services you needed?

3.5 There were culturally sensitive services available for me, to meet my language or culture needs.

Yes No

If your answer was 'No', what kind of cultural supports would have been helpful?

3.6 I was asked to complete client evaluations on services. I had opportunities to make suggestions to improve services for victims and perpetrators of domestic violence.

Always Sometimes Hardly Ever Never

4. In order to end domestic violence it is important for organizations and individuals to educate our community, be advocates, and respond early to the problem. Please let us know about your experience.

4.1 Information about domestic violence and community resources was

Very easy to get Somewhat easy to get Hard to get Couldn't get information

4.2 I found information on domestic violence through (check more than one if needed):

brochures posters the newspaper a friend/relative the library
police shelter staff a hospital Other _____

4.3 The materials I got on domestic violence were
extremely helpful somewhat helpful not helpful

4.4 I received information on the impact of domestic violence on my children.

Yes No

4.5 My children got support and information to help them deal with the violence.

Yes No

4.6 The community needs more education about domestic violence and what can be done to prevent it.

Yes No

4.7 What do you think is the most important thing we need to do to prevent domestic violence abuse in Scarborough?

4.8 Overall, my experience of the way the system responded to domestic violence was

excellent good fair poor

Thank you for your time and for your feedback!

Please return to the Woman Abuse Council by fax or mail to:

**Salima Jethani, Project Coordinator
590 Jarvis Street, 6th Floor Toronto ON M4Y 2J4
phone: 416-944-9242 fax: 416-944-9753**

OWEN SOUND

Profile:

The Grey Bruce Court Coordination Committee (GBCCC) was formally founded in 1997 in the wake of the murder of Arlene May in Grey County and the subsequent Provincial May/Iles Inquiry. The GBCCC built upon 10 years of community work carried on by the Grey Bruce Family Violence Prevention Coalition, which lost its funding in 1995. The murder of Arlene May brought community justice and social service sectors together to develop new approaches to the persistent and serious issue of domestic violence. From 1998 until 2000 the GBCCC conducted a broad community consultation and developed the First Charge Intervention Process (FCIP), a rural model focusing on early interventions for women, children and men and a seamless community response to domestic violence. From 2000 until the present, the GBCCC has piloted components of the FCIP, and implemented many of the May/Iles recommendations.

The GBCCC has a formal structure, with an annual work plan and terms of reference. It is linked formally to the Domestic Abuse Review Teams (DART) and Domestic Violence Court Advisory Committees in each court jurisdiction. There are over 25 active members with broad sectoral representation including: Grey and Bruce Crown Attorney offices; Probation Services; PAR Program; Victim Services in Grey and Bruce (V/WAP; VAP; VAW); CAS services in Grey and Bruce; Municipal and OPP Police Services in Grey and Bruce; First Nations Police Services; the First Nations Cultural Resource Centre; Hospital Emergency Services; Sexual Assault Services; Supervised Access Centre; and women of experience. The GBCCC has several active sub-committees including: a Steering Committee, a Community Report Card Committee, and various Advisory committees that guide the implementation of the FCIP. The GBCCC is not an incorporated organization. It derives its funding based on the type of projects being embarked upon.

The GBCCC serves the counties of Grey and Bruce, a large area of 8,553 square kilometres with a population of 153,312. The area is well known for its beautiful landscape, farmland and the waters of Georgian Bay and Lake Huron. There is a low population density with only one city of 20,000 - Owen Sound in Grey County. The Grey Bruce area has a lower than average provincial income level and level of education, along with a higher than provincial average number of seniors and youth. There are two First Nations communities in Bruce County, and an active Native Cultural Resource Centre in Owen Sound. The provision of all services in the community is hindered by distance and the absence of public transportation.

Results:

Comments on Survey Completion from GBCCC

In General

The focus of this survey is not on how the community responds to domestic violence, but rather how the local coordinating committee does its work. We believe this process is not in itself a community report card, but is an evaluation of the coordinating committee. It does not provide information on how the community responds to domestic violence, but does give the coordinating committee an opportunity to evaluate its internal processes. Our community is using survey tools that gather information from service providers and service users, in addition to this tool to provide a complete picture from many different perspectives of the community response to domestic violence.

Feedback on the Survey Design

There are several specific areas of feedback on the use of the Coordinating Committee survey tool that we would like to pass on:

- The options of 'yes, no or don't know' are limiting and do not allow for a more varied response. A range of options would generate more accurate information.
- The option of 'under discussion, ongoing monitoring and best practice' lack clarity and a more precise scale would provide more accuracy.
- Some questions were in fact two questions, which made them difficult to answer.
- It is not clear why each member of the coordinating committee answers the survey. The tool may be more relevant and valuable when completed by the group as a whole, as part of a review of internal policies, procedures and operational structures.

Summary

Several of the questions prompted reflection and action by this committee to look at new ways of working together and ways to strengthen the work of the coalition:

- The need for a community mechanism to review and to comment on the work of the committee
- The need for additional policy development around terms of office, replacement of members and orientation of new members

The GBCCC chose to have the Steering Committee complete this survey. Many of the questions did not require a response from each member agency. In future, the GBCCC could use this tool for an annual committee evaluation at a scheduled committee meeting. This would allow for discussion and planning on the areas where the committee needs to improve its work or focus energy.

OWEN SOUND'S SURVEY RESULTS

A. Accountability

	Yes	No	Don't Know
Common Understanding	X		
Positive Environment	X		
Continuing Education	X		
Changes in Policies, Laws, Regulations (<i>see below for examples</i>)			
Community Review and Comment		X	

Examples of committee's influence in changes to policies, laws and/or regulations:

- Development of a rural model for a community response to domestic violence and evaluation for use in other communities
- Policies on early interventions with women and men
- Development of accountability framework for evaluation and program development
- Letters to provincial ministries re: domestic violence interventions, community supports and training.

B. Consistency

	Yes	No	Don't Know
Multi-Sectoral Response (<i>see below for examples</i>)	X		
Guidelines and Policies	X		
	Under Discussion	Ongoing Monitoring	Best Practice
Terms Used to Describe Status of Guidelines and Policies:			
<input type="checkbox"/> Membership		X	
<input type="checkbox"/> Definition of Abuse			X
<input type="checkbox"/> Conflict of Interest			
<input type="checkbox"/> Terms of Office			
<input type="checkbox"/> Replacement of Members		X	
<input type="checkbox"/> New Member Orientation		X	
<input type="checkbox"/> Collaboration			X

Examples of multi-sectoral response:

- Drafted inter-sector working agreement
- Inter-sector coordination with Men's Track, Women's Track
- Inter-sector training
- Community Report Card with Inter-sector and community participation
- Participation and input on other community planning bodies re: domestic violence
- Inter-sector case audits (DART)

C. Commitment

Groups Participating	
Crisis Helpline	X
Shelters	X

Groups Participating	
Police	X
Sexual Assault Centre	X
Women's Counselling Centre	X
Men's Program	X
Victim Witness Assistance Program	X
Crown Attorney	X
Children's Aid Society	X
Children's Mental Health Services	X
Public Health Services	
Ontario Works	
Family Doctor	
Criminal Court	
Family Court	
Legal Aid	
Justice of the Peace	
Clergy	
Other:	
<input type="checkbox"/> Supervised Access Centre	
<input type="checkbox"/> Victim Witness Assistance Program	
<input type="checkbox"/> Sexual Assault Care Centre	
<input type="checkbox"/> Emergency Department of Local Hospital	
<input type="checkbox"/> Women of Experience	

	Yes	No	Don't Know
Leadership	X		
Understanding the Community (<i>see below for examples</i>)	X		
New Member/Multi-Agency Alliances	X		
Communication Networks	X		
	Under Discussion	Ongoing Monitoring	Best Practice
Terms to Describe Communication Policies		X (formal communication)	X (informal)

Examples of how coordinating committee understands its community:

- Rural realities reflected in GBCCC work
- Active consultation with women and men who use services
- Linkages with First Nations people and communities
- Literacy levels considered in GBCCC work

D. Awareness

	Yes	No	Don't Know
Annual Report	X		
Local Demographics Represented	X		
Standard Safety Planning (<i>recommended by GBCCC, but not always used by all members</i>)	X		
Strategies Used That Maximize Diversity	X		
<input type="checkbox"/> Recruitment of diverse peoples for advisory committees so as to guide GBCCC's work			

Other Comments:

- ❑ No ongoing funding for coordinator for the committee
- ❑ Participating agencies stretched through cutbacks and volume
- ❑ Many changes in staffing with participant agencies

Pilot of an Annual Report Card
Community Response to Domestic Violence

Background Information

The Grey Bruce community has demonstrated a commitment to coordinated and preventative actions to address family violence since the 1980s. For over 10 years the Grey Bruce Family Violence Coalition brought together the justice, social service, health and education sectors to address family violence. Funding for the coalition was lost in 1996 due to changes in government funding priorities.

In 1996, the murder of Arlene May provided the impetus for members of the justice and social service sectors in Grey and Bruce to regroup and look at ways the community could respond more effectively to enhance the safety of victims of domestic violence and hold offenders accountable. The Grey Bruce Court Coordination Committee (GBCCC) was founded in 1997, with membership from the municipal, First Nations' and OPP police services, crown attorneys, probation and parole, victim services, child welfare, women's shelter, the Native Friendship Centre, the batterers program, addiction services, and women survivors.

The projects of the Grey Bruce Court Coordination Committee include:

- extensive community consultation;
- developed of a model for a coordinated criminal-justice response to domestic violence in rural areas called the First Charge Intervention Program (FCIP); and,
- pilot testing of a community report card.

The goals of The Pilot Community Report Card Project were to:

- map current services and identify gaps through a formal process that examines our community response to domestic violence
- support and strengthen opportunities for victims of domestic violence to bring their knowledge and perspective forward and for service users to provide feedback on the system response
- educate the community about goals, standards and activities to address domestic violence
- evaluate if current activities are on target with community standards and expectations, and promote change that will enhance the community response to domestic violence and,
- measure overall progress towards ending domestic violence.

Vision

A seamless, collaborative, justice, social service and community response to domestic violence in Grey and Bruce will enhance the safety of victims, hold abusers, accountable and prevent further violence in families.

Benchmarks for a Community Response to Domestic Violence

The Grey Bruce Court Coordination Committee, in consultation with community sector and service users, has developed four Benchmarks that set out the standards and best practices for an effective and collaborative community response to domestic violence.

Sectors, organizations and individuals work together collaboratively to provide a seamless system response to domestic violence -- ***Commitment.***

A common understanding and response to domestic violence is demonstrated throughout all sectors, and in each geographic area -- ***Awareness.***

The community has the capacity and resources required to respond effectively and proactively to domestic violence in all parts of the community -- ***Consistency.***

Sectors, organizations and individual demonstrate a commitment to education, advocacy and proactive strategies to ultimately end domestic violence -- ***Accountability.***

Indicators for Gathering Information:

Indicators are the signposts of change and provide clues to the direction the community is heading. They are the measuring sticks to tell us whether we are making progress towards goals, and measure the conditions in the community. For each of the benchmarks we have selected some key indicators that will give us information on how we are doing.

<i>Description</i>	<i>Indicators</i>
<p>Benchmark 1: Sectors, organizations and individuals work together collaboratively to provide a seamless system response to domestic violence.</p>	
<ul style="list-style-type: none"> □ Tools for collaboration include: working agreements, protocols and policies to hold agencies accountable for seamless work □ Agency policies support effective inter-sector communication and information sharing □ Effective mechanisms track cases through the justice and social service systems □ Audit processes review cases and identify services gaps, and emerging issues □ Inter-sector training and development on domestic violence takes place 	<ul style="list-style-type: none"> □ Number of organizations that are part of coordination committee (or similar organization), number of meetings, attendance □ Inter-sector working agreements and protocols on domestic violence (number in place and rating on effectiveness) □ A domestic violence assault Review Team (DART) meets regularly to review cases □ Intersector training on domestic violence □ Referral activity in domestic violence cases □ Organizations collect feedback from service users on the system response to domestic violence
<p>Benchmark 2: A consistent understanding and response to domestic violence is demonstrated throughout all sectors, and in each geographic area.</p>	
<ul style="list-style-type: none"> □ Respect and support for victims, regardless of their relationship with the perpetrator □ Safety planning and risk assessment with victims of domestic violence as a first priority intervention □ Perpetrators are supported and directed to change abusive behaviours, and are held accountable for actions □ Information about resources is provided to all victims and perpetrators □ Sectors work proactively to stop abuse of victims through protective actions directed at the perpetrator 	<ul style="list-style-type: none"> □ Completion of victim safety planning and risk assessments procedures □ Completion of routine screening procedures for domestic violence □ Staff training on domestic violence □ Collect statistics on domestic assault charges convictions and sentencing. □ Feedback from service users on consistency in sector response

<i>Description</i>	<i>Indicators</i>
<p>Benchmark 3 <i>The community has the capacity and resources required to respond effectively and proactively to domestic violence in all parts of the community.</i></p>	
<ul style="list-style-type: none"> □ Crisis and long-term services and supports for victims are accessible and affordable □ Mechanisms to hold perpetrators accountable for abusive behaviour are in place □ Early intervention and treatment programs for abusers are accessible and affordable □ Sectors work together to address service gaps and advocate for resources □ Sectors actively consult with service users to ensure services are helpful and relevant to community needs 	<ul style="list-style-type: none"> □ Review of length of time between referral and service provision, and waiting lists, complaints from clients about waiting for service, client identification of barriers to services, referrals to other agencies for clients on waiting lists □ Inventory on current services, presence of critical services (as defined by the May/Isles report) in the community □ Review of adequacy of resources for services and level of fund raising □ Identify where culturally appropriate services are and if people get culturally appropriate services that they need; are rural services accessible
<p>Benchmark 4: <i>Sectors, organizations and individuals demonstrate a commitment to education, advocacy and proactive strategies to ultimately end domestic violence.</i></p>	
<ul style="list-style-type: none"> □ Consultation and research on services and violence prevention strategies takes place □ The public is educated about domestic violence and the impact on family members and communities □ Community members, victims and offenders are actively involved in planning and evaluation of existing and new services □ Services respect the diverse, complex and changing needs of victims and perpetrators 	<ul style="list-style-type: none"> □ Resource materials are current, user friendly and coordinated □ Agency resources are dedicated to public education and prevention work on domestic violence □ Early detection and screening procedures for domestic violence are in place and used □ Elicits client feedback and uses results in development of services

Who Needs to Be Involved in the Report Card Process?

- Agencies participating as members of local coordinating committee (or similar organization)
- Organizations directly involved in work with victims and perpetrators of domestic violence
- Women and men who have used domestic violence services in the last year

How will surveys be completed?

- the survey can, and should be, used by a range of service providers within each agency to reflect a broad perspective of programs, and positions within the organization. It is suggested that at least 10% of staff within the organization complete the questionnaire to ensure that there is sufficient input from each organization.
- the survey could be filled out by individuals or within a group setting, such as a staff meeting. Interviews with staff members can be arranged and conducted by a peer interviewer who is a member of the coordinating committee.
- copies of the questionnaire can also be distributed to women and men who are users of agency services.
- the Survey should go out with a cover sheet explaining the goals, process and directions for participating and completing the survey. The cover sheet should also explain follow up activities such that the survey is meaningful in the long term.

IV. GLOSSARY OF TERMS

Community: a group that is linked by a common characteristic such as common history, common social, economic or political interests. For this project community is defined according to geographic area.

Coordinating Committee: an informal or formal networking group, coalition or system that supports a networked response and includes, as part of its membership, agencies, institutions or individuals working towards a collective or common goal. Coordinating committees often have a high inter-agency focus that supports a broad base or multi-sector response.

Member: agencies, groups, institutions or individuals that make up the membership of the coordinating committee. There may be a membership fee or formal sign up process, or it can be less formal and be based on who attends meetings.

Service User: these are the clients of a social service agency that are currently receiving support and/or intervention. For this project, this refers to those individuals that are survivors of woman abuse, perpetrators of abuse and/or child witnesses of woman abuse.

Woman Abuse: involves the intent to intimidate, either by actual or by threat of physical, sexual, financial, spiritual or emotional abuse of a woman by someone with whom she has an intimate relationship. An intimate partner includes: husband, common-law partner, boyfriend, or same sex partner, as well as ex-husband, ex-boyfriend or ex-partner. Woman abuse can take various forms that can include, but is not limited to:

- Physical - any unnecessary action that results in bodily harm, discomfort and/or injury. This can include: hitting, kicking, pushing, burning, use of weapons, restraining, withholding of food and/or medical attention
- Psychological - any act which provokes fear, diminishes an individual's self-worth and/or intentionally inflicts psychological trauma. Such actions include: ongoing criticism, degradation, threats, social isolation, destruction of property
- Sexual - any unwelcome or forced sexual activity, including sexually demeaning behaviour, denying the right to protected intercourse, infection with disease
- Verbal - the use of comments known, or that ought to be known, to be unwelcome, embarrassing, offensive, threatening and/or degrading
- Spiritual - denying the right to attend church, attacking an individual's spiritual beliefs, forcing a person to partake in a certain spiritual practice
- Financial - withholding and/or restriction of money, denying the right to seek and/or maintain employment, exclusion from financial decision-making

V. BIBLIOGRAPHY

Community Report Cards

Besleme, Kate, Elisa Maser, and Judith Silverstein. 1999. *A Community Indicators Case Study: Addressing the Quality of Life in Two Communities*. San Francisco, CA: Redefining Progress. Contact Redefining Progress for additional information at: info@redefiningprogress.org.

This paper provides definitions of indicators and examples of how indicators work. The purposes of this paper are to:

- Educate the public about what community indicator projects are and how they work
- Assess the successes, challenges and lessons learned so as to help orient present and future projects
- Highlight the ways in which Jacksonville and Reno are moving indicators into action

Campaign 2000. 2000. *Child Poverty in Canada Report Card 2000*. Available on-line at: <http://www.campaign2000.ca/rc>.

Canada's federal, provincial and territorial governments developed the National Children's Agenda, which sets out goals complementary to their vision of an inclusive society. This report card includes statistical information in the forms of figures and summaries, personalized anecdotes about child poverty (e.g. "Helen's Story"), and a summary of actions the government has taken to help children in 2000.

Domestic Violence Network. 2001. *2001 Domestic Violence Report Card*. Available on-line at: <http://www.dvnonline.org/reportcard2001.htm>.

This 35-page booklet contains an introduction, overview, and a report card. The report card's benchmarks include arrests and prosecutions, homicides, victim's services, children's services, policies in the workplace, emergency room advocacy and training of professionals who are in contact with families.

Family Violence Prevention Fund. 2001. *State-by-State Report Card on Health Care Laws and Domestic Violence*. Available on-line at: <http://www.endabuse.org/statereport/list.php3>.

This report card graded each state based on whether it has enacted effective laws to improve care response to domestic violence as of June 20, 2001. Researchers examined five critical areas: training, screening, protocols, reporting and insurance. This report is comprised of an introduction and methodology, grading criteria and the report card.

Greenpeace Canada. 2000. *The 2000 Federal Election Platforms - Environment Report Card*. Available on-line at: <http://www.sierraclub.ca/national/green-election>.

This is an example of a very brief and simple report card.

National Women's Law Center, University of Pennsylvania and The Lewin Group. 2000. *Making the Grade on Women's Health, A National and State-by-State Report Card*. Available on-line at:

[http://www.nwlc.org/display.cfm?section=health#\(Women's%20Health%20Report%20Card%202001\)](http://www.nwlc.org/display.cfm?section=health#(Women's%20Health%20Report%20Card%202001)).

This report card assesses the overall health care of women in the United States at both national and state levels. The report card provides "status" indicators that measure such things as women's access to health care services and the occurrence of key women's health conditions. It also includes a set of "policy" indicators based on statutes, regulation, policies and programs that address the problems identified by the health status indicators.

Sacramento County. 2000. *Sacramento County Children's Report Card*. Available on-line at: <http://www.co.sacramento.ca.us/children/report-card>.

Sacramento County's comprehensive annual report card reflects the health, safety and well being of children and their families. Their report card is divided into six main categories, which are subdivided by indicators. The six categories include: demographics, family economics, education, health, safety and social and emotional well being.

Santa Cruz County. 2000. *Community Assessment Project Community Report Card*. Available on-line at: <http://www.appliedsurveyresearch.org/cap6.htm>.

This publication is an evaluation of the quality of life for people in Santa Cruz County, California. The report card is primarily statistical in nature.

Community Assessments

Ministry of Attorney General. 1993. *Community Coordination to Stop Violence Against Women in Relationships: A Framework*. Victoria, BC: Province of British Columbia, Ministry of Attorney General.

This publication describes a framework for moving towards a greater cooperation and integration of services and approaches. It begins by addressing the need for intervention and community involvement in dealing with wife assault. It also details the steps involved in forming a local coordinating committee.

Burkell, Jacquelyn. 1993. *Huron County Voices: A Rural Community Responds to Woman Abuse*. Goderich, ON: Stop Woman Abuse Now.

The purpose of this project was to evaluate the effectiveness of the response in Huron County to women who experience abuse in intimate relationships. The section on "Community Attitudes and Understanding" outlines the responses to interview questions pertaining to attitudes and understanding about woman abuse (p.20).

Ellis, Diana, Gayla Reid and Jan Barnsley. 1990. *Keeping on Track: An Evaluation Guide for Community Groups*. Vancouver, BC: Women's Research Centre.

An evaluation guide that outlines a participant-focused evaluation method developed for a range of non-profit community groups. Participant-focused evaluation uses the perspectives and interests of the group as a basis for designing an evaluation that allows the group to assess how well it is meeting its aims.

Grant, Lorna. *Planning for Prevention: Ending Violence Through Coordinated Action*. Owen Sound, ON: Grey Bruce Family Violence Prevention Coalition.

The project's goals included developing a community model for coordination of family violence prevention services and enhancing strategies for accessing various funding bodies. The report is divided into four parts: *Current Organization of Services*, *Responding to Needs: Current Issues and Challenges*, *Developing an Action Plan* and *Implications for the Grey Bruce Family Violence Prevention Coalition*.

Health Canada. 1994. *Breaking the Pattern: How Communities Can Help*. Ottawa, ON: National Clearinghouse on Family Violence.

This report describes a process that individuals or groups can follow in responding to family violence in their communities. It outlines basic information on how concerned citizens can work together to ensure that 'what's needed' becomes available in their community. The *Working as a Community* section explains how to begin, define the problem, plan strategies, carry out plans and evaluate the community group (p.12).

Galey, Sherry. 1995. *From Crisis to Coordination: An Integrated Community Response to a Multi-Victim Child Sexual Abuse Crisis*. Brockville, ON: Children's Services Advisory Committee.

A case study from Prescott, ON is used to offer strategies for mounting a coordinated and child-centered community response to sexual abuse. It also provides suggestions for working together effectively as service providers and concerned community members. Section III (p. 93) examines how the Prescott project formed a partnership with the community. The section entitled "What to Do to Help a Community in Crisis Heal and Prevent Future Abuse" suggests how to define target groups and anticipate needs, define goals and priorities and devise strategies for achieving goals (p. 104). There is also a page on how to evaluate a project's impact (p. 113).

Hicks, Chris, Barbara Leavitt and Diane Peacock. 1993. *Jumping the Gap: More Ideas and Stories*. Milverton, ON: Community Involvement Council.

This is a collection of inspirational stories of community cooperation. The "Working Together" chapter contains stories demonstrating successful strategies for achieving cooperation between established groups in the community, including services, businesses and other groups (p. 60).

Introduction to Evaluation for Community Service Organizations. Victoria, BC: Victoria Volunteer Bureau, 1991.

The focus of this manual is on the practical use of information in decision making and problem solving, at all stages and levels of planning. The manual looks at different types of evaluation, followed by explaining the steps involved in the evaluation process.

Rinfret-Raynor, Maryse, Ann Paquet-Deehy, Ginette Larouche and Solange Cantin. 1992. *Intervening with Battered Women: Evaluating the Effectiveness of a Feminist Model*. Quebec: Editions Saint-Martin.

This resource introduces intervention practices that seem better adapted to the needs of battered women. The first chapter looks at the context of their study and methodology. Major findings are presented in the second chapter.

Roseland, Mark. 1992. *Toward Sustainable Communities: A Resource Book for Municipal and Local Governments*. Ottawa, ON: National Round Table on the Environment and the Economy.

This report chronicles a number of the practical outcomes of the "sustainable communities" movement. It attempts to identify the current range of municipal and local government initiatives toward sustainable communities. Chapter 11 (p. 247) explores sustainable community development in terms of local community livability and responsibility to the global community.

Spokane County. 2000. *Spokane Community Health: Survey Results*. Available online at:

<http://www.srhd.org/information/pubs/pdf/reports/CommunityHealthSurvey2002.pdf>.

This report provides an example of a report card used to evaluate the safety and environmental health of a community.

Toupin, Louise. 2001. *Social and Community Indicators for Evaluating Women's Work in Communities*. Ottawa, ON: Status of Women.

The publication offers recommendations for broadening the overall perspective of the social economy, its priorities, its targets and its criteria for grant funding and recommendations for developing qualitative instruments for measuring social

activities. Chapter 3 examines measurement of social profitability and chapter 4 looks at indicators.

Toronto Report Card on Homelessness (Appendix C). 2000. Available on-line at: <http://www.city.toronto.on.ca/homelessness/2000/introduction.htm>.

This report addresses what has happened since the Mayor's Homelessness Action Task Force released its reports and recommendations. This report card was to be used to make recommendations for future action. Appendix C contains a table summarizing the city's response to the Mayor's Homelessness Action Task Force.

Violence Prevention Council. *Creating a Community Response to Abused Women and Their Families: The Durham Region Experience*. Durham, ON: Violence Prevention Council.

This publication is divided into two main parts. Part 1 - "Creating a Community Response" describes the pitfalls and successes of taking a community through the process of developing new understandings, policies and approaches to woman abuse. Part 2 - "A Community Response for Abused Women and Their Families" outlines protocol guidelines developed for use within the Durham Region.

Welch, Terrill. 1994. *Process to Protocols in Response to Violence Against Women in Relationships*. Prince George, BC: Phoenix Transition Society.

A detailed outline of the process used to develop community protocols for responding to violence against women in relationships in Prince George, BC.

***Wife Assault Resource Manual*. 1990. Toronto, ON: Ministry of Community and Social Services.**

The purpose of this manual is to provide professional social workers with a consistent framework for delivering wife assault services. It review the methods used by several different agencies in dealing with wife assault.

*** Bibliography Compiled by Jan Richardson ***