

O-A-E-S-V

Building an Anti-Sexual Violence Coalition in Ohio

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Stakeholder Survey Summary



This report was prepared by I.S.P. Consulting for the
Steering Council of the Ohio Alliance to End Sexual Violence
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OVERVIEW

Introduction of Issue

Sexual violence is pervasive in the United States and has been declared a public health and human rights issue. It has long-term devastating consequences that impact victims, families and communities. Although the majority of victims are female, sexual violence is perpetrator across all gender, age and demographic categories. A high percentage of rapes go unreported in the United States causing available data to underestimate significantly the true magnitude of the problem. Notwithstanding this, research has shown that in the United States:¹

- ✓ Every 2.5 minutes someone is sexually assaulted.
- ✓ One in six women and one in thirty-three men will experience an attempted or completed rape at some time in their life.
- ✓ 20% to 25% of college women experience attempted or completed rape during their college career.
- ✓ Sexual assaults represented 10% of all assault-related injury visits to the emergency department by females in 2006.
- ✓ 60.4% of female and 69.2% of male victims were first raped before age 18.
- ✓ Nearly 25% of women and 7% of men have been raped or sexually assaulted by a current or former partner.
- ✓ Between one-third and one-half of all battered women are raped by their partners at least once during their relationship.
- ✓ 62% of sexual assaults are not reported to the police.



Turning to Ohio, a report from 2003 estimated that 14.3% of adult women in Ohio have been victims of one or more completed forcible rapes during their lifetime.² With an approximate population of 4.4 million women age 18 or older,³ that means 634,000 adult women have been victims of sexual assault. While conservative, this estimate begins to describe the scope of the issue in Ohio. Research has shown specialized services can limit the amount of time a person experiences symptoms of rape-related post traumatic stress disorder. As President Obama cited in his declaration of April as sexual violence awareness month, “victims need an array of services to heal from the

¹ See, Sexual Assault Fact Sheet, National Alliance to End Sexual Violence at <http://www.naesv.org/Resources/SAFactSheet.pdf> and Sexual Violence: Facts at a Glance, Centers for Disease Control and Prevention, National Center for Injury and Prevention Control (Spring 2008) <http://www.cdc.gov/ViolencePrevention/pdf/SV-DataSheet-a.pdf>.

² Ruggiero, K.J., & Kilpatrick, D.G., Rape in Ohio: A Report to the State, National Violence Against Women Prevention Research Center, Medical University of South Carolina (2003).

³ See, U.S. Census Bureau, 2000 Census at http://factfinder.census.gov/servlet/QTTable?_bm=n&_lang=en&_qr_name=DEC_2000_SF1_U_DP1&_ds_name=DEC_2000_SF1_U&_geo_id=04000US39.

trauma of sexual assault ...victim service providers are essential to this effort and work tirelessly to help victims cope with the trauma of sexual assault and transition from 'victim' to 'survivor.'⁴

Role of Coalitions in Combating Sexual Violence

During the last thirty years there has been increased attention on sexual violence with primary response systems collaborating to raise public awareness about the crime, bring perpetrators to justice, and address the rights and needs of victims.⁵ The importance of anti-sexual violence work was recognized and formalized through the Violence Against Women Act (VAWA) that was enacted as Title IV of the Violent Crime Control and Law Enforcement Act of 1994.



A coalition is a diverse group of individuals and/or organizations with a common interest working together to reach a common goal.⁶ Coalitions often contain elements of one or more of the following:⁷

- Influencing or developing public policy;
- Changing people's behavior; and
- Building a healthy community.

They are most commonly formed to: bring about more effective and efficient delivery of programs and use of resources; increase communication among groups; break down stereotypes; revitalize members; plan and launch community-wide efforts; and create social change.⁸

State sexual assault coalitions and state domestic violence coalitions play a critical role in the implementation of VAWA, providing a unified presence and serving as a collective voice for local programs to end violence against women through collaboration with federal, state, and local organizations. In some states and territories, these support services are provided through one dual sexual assault and domestic violence coalition and in others through dedicated coalitions for each issue.⁹ Coalitions vary in their structure and their relationships with the rape crisis centers in their states with some serving purely as membership and technical assistance associations and others managing and dispersing funding to local programs. However, when examining coalitions the National Sexual Assault Coalition Resource Sharing Project found the following commonalities:¹⁰

⁴ National Sexual Assault Awareness Month 2009, Declaration by the President of the United State of America A Proclamation, The White Office, Office of Press Secretary (April 8, 2009) at http://www.whitehouse.gov/the_press_office/Presidential-Proclamation-Marking-National-Sexual-Assault-Awarness-Month-2009/.

⁵ Moyer, Diane, History and Analysis of the Sexual Assault Services Program, Pennsylvania Coalition Against Rape (September 24, 2008) at <http://resourcesharingproject.org/ResourceFiles/NonprofitTopics/HistoryAnalysisSASP.pdf>.

⁶ The Community Tool Box, Coalition Building I: Starting a Coalition (contributed by Phil Rabinowitz, Ed. by Tom Wolff) at http://ctb.ku.edu/tools//sub_section_main_1057.htm.

⁷ Id.

⁸ Ohio Center for Action on Coalition Development, Building Coalitions Reference Manual, The Ohio Center for Action on Coalition Development, Ohio State University (1992).

⁹ U.S. Department of Justice, Office on Violence Against Women, Grants to State Sexual Assault and Domestic Violence Coalitions at http://www.ovw.usdoj.gov/state_grant_desc.htm.

¹⁰ Coalitions as Pass-Through Entities for the Sexual Assault Services Program, National Sexual Assault Coalition Resource Sharing Project at <http://resourcesharingproject.org/ResourceFiles/NonprofitTopics/RSPCoalitionPassThrough.pdf>.

- Coalitions and their networks work to eliminate sexual violence; that is the ultimate goal.
- Coalitions provide technical assistance on a wide variety of issues such as public policy, prevention, organizational development and service delivery.
- Coalitions provide training opportunities on a wide array of topics including innovative and promising practices in service provision.
- Coalitions develop and disseminate materials to respond to a diverse community and engage in train the trainer programs to develop information and practices.
- Coalitions provide assurance to governmental sources that the funding is being spent in a way that is both effective and efficient.
- Coalitions have a social change perspective and knowledge of the history of the anti-sexual violence movement that serves as the foundation for ensuring that both services and message are true to the intent of the movement.
- Coalitions can define what is seen as current best practice and work to ensure that all service provision rises to that level.

Current Status of Ohio's Coalition

For the past three years, Ohio has not had a sexual assault coalition. It is one of few states to be in this position. This has left sexual assault survivors, prevention educators, traditional¹¹ and non-traditional responders and service providers without support or coordination.¹² Without a state-level entity, Ohio providers have felt isolated. There has not been a cohesive means to address gaps in resources, standardization of practices, stewardship, and advocacy.

In order to address this void, a small group of concerned service and public policy providers (known as the Steering Council)¹³ have convened on a regular basis since April 2008, with the goal of jump starting the establishment of a new coalition, called the Ohio Alliance to End Sexual Violence (OAESV). The mission of OAESV is *to work to eliminate all forms of sexual violence and to advocate for the rights and needs of survivors and co-survivors of sexual violence*. The purpose of the coalition is not only to meet the needs of victims and co-victims, but to address the issues of oppression, ensure well-coordinated responses to sexual assault survivors, support the work of those attending to their needs, increase education and awareness, and address the societal norms that permit rape and sexual violence to exist.

During the past year, the OAESV Steering Council has been working on the infrastructure to secure a federal not-for-profit status and create the vision and mission for the coalition.¹⁴

¹¹ Traditional providers and responders for the purposes of this report include rape crisis services, sexual assault forensic nurse examiners, law enforcement, victim advocates, prevention educators, and others sectors of the criminal justice system.

¹² The entity that provided state-level services was known as the Ohio Coalition on Sexual Assault (OCOSA) and it closed in July 2006. Ohio does have a state coalition dedicated to domestic violence issues (Ohio Domestic Violence Network).

¹³ Representatives on OAESV's steering council include rape crisis centers, community-based service providers, anti-violence and justice focused agencies, a forensic nurse association, and community members. For more information about OAESV and the steering council go to www.oaesv.org

¹⁴ OAESV received its 501(c)(3) status from the federal government in April 2009. To learn more about the mission and vision of OAESV see Appendix A.

INFORMATION GATHERING PROCESS

Rationale for Stakeholder Needs Assessment

The OAESV Steering Council felt it was imperative to hear from stakeholders prior to formalizing the structure of OAESV. Since OAESV is in its early stages of formation, the Steering Council did not want to miss the opportunity to inform stakeholders of the coalition building effort and receive input into its initial priorities and activities, including the makeup of the board of directors. It is critical that the coalition reflect the collective voice of survivors and those working on their behalf. Due to the absence of a coalition, there has not been a dedicated and uniform way to gather information about the needs of survivors and service providers. The last formal needs assessment conducted by the Ohio Department of Health Sexual Assault Task Force was more than six years ago.

This is a wonderful step to take, particularly getting detailed information from service providers. I am excited to see this process underway.

With the economic downturn and lack of statewide advocacy, accurate contact lists for providers in Ohio were no longer available and there was no organized way to receive input into the state of the field. Therefore, a decision was made to conduct a needs assessment via an online survey tool that could reach individuals and agencies working across the state to end and respond to sexual violence (stakeholders).¹⁵ The Steering Council plans to hold regional forums across the state and conduct outreach to stakeholders and survivors through other venues as the coalition building process continues. However, the online survey was the initial step to quickly identify stakeholders' areas of concern.

Structure of Survey & Dissemination Process

With the assistance of I.S.P. Consulting, a comprehensive needs assessment survey tool was designed and disseminated (in both English and Spanish). In addition to the purpose of the survey and a section on OAESV's mission, values and purpose, the needs assessment was organized into three main areas of inquiry:¹⁶

1. Demographics: This section included 12 questions dedicated to the finding out more about the stakeholder's area of expertise, service area, existing partnerships, and populations served.
2. Coalition Organization and Focus: This section included 6 questions pertaining to OAESV's priorities, activities, structure and needs of stakeholders.
3. Membership: This section included 12 questions relating to the stakeholders' intention to join OAESV and effective ways to engage and communicate with stakeholders.

The Steering Council's goal was to receive input from both traditional and non-traditional sexual assault providers. To meet that goal, the survey was broadly disseminated to various professionals in

¹⁵ For purposes of this survey, stakeholders were defined as any individual, agency, group, or system that is working on issues related to sexual violence or interacts with survivors of rape/sexual assault in either a formal or informal way. OAESV intends to design a process to receive input specifically from survivors and co-survivors.

¹⁶ The survey included a variety of types of questions, including multiple choice, rating scales, open-ended responses, and matrices of choices. See Appendix B for a copy of the English version and Appendix C for the Spanish version.

Ohio even if their primary duty was not to work with victims of rape and sexual assault. Emails were also sent directly to known sexual assault and rape crisis service providers. The following list is a sampling of agencies that assisted in the dissemination and listservs that posted the link to the survey:

- Alliance Against Sexual Violence Listserv
- AIDS Taskforce of Cleveland
- Alliance for Immigrant Women
- ARC of Ohio
- Berea Children's Homes and Family Services
- Cleveland Legal Aid Society
- Dartmouth.edu Listserv
- Facebook
- Governor's Council on People with Disabilities
- Interfaith Association of Central Ohio
- Jewish Family Services/Federations
- Mental Health Advocacy Coalition
- NARAL
- NASW Ohio
- National Alliance of Mental Illness of Ohio
- Ohio Association of Child Caring Agencies
- Ohio Association of Secondary School Administrators
- Ohio Counsel of Behavioral Health Providers
- Ohio Counseling Association
- Ohio Department of Aging
- Ohio Department of Alcohol and Drug Addiction Services
- Ohio Department of Health Grantees
- Ohio Department of Mental Health
- Ohio Domestic Violence Network
- Ohio Governor's Office of Faith-Based and Community Initiatives
- Ohio Judicial College
- Ohio Juvenile Justice Network
- Ohio Medical Association
- Ohio Network of Children's Advocacy Centers
- Ohio Nurses Association
- Ohio Prosecutor's Association
- Ohio Rural Development Partnership
- Ohio STOP Grant Administrator
- Ohio Women, Inc
- Ohio Women's Health Listserv
- OLA.net
- Portage County Family Services
- School for the Deaf
- Sexual Assault Ohio Listserv
- Supervised Visitation Network
- Ohio Members
- The Public Children Services Association of Ohio
- Victim/Witness Cuyahoga County
- Voices of Children of Ohio

The survey could be accessed by stakeholders from February 10, 2009 to March 15, 2009 through SurveyMonkey.com and <http://www.ispconsults.com/OAESV.html>.¹⁷ The comprehensive data which is more than 150 pages in length will be used by OAESV to guide the ongoing development of the coalition as well as the next steps in the information gathering process.

The remainder of this report summarizes stakeholder responses. Text boxes throughout this document contain direct quotes from survey respondents and are representative of general sentiments offered by respondents.

¹⁷ While the survey remains open for collection of responses, those responses received by the end of the day March 15, 2009 were used to develop this summary.

THEMES

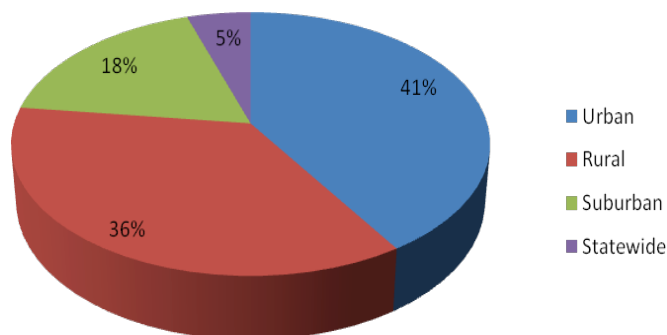
Many people echoed similar sentiments when it came to needs in the field and priorities for OAESV. The following are the common themes:

- There is tremendous support around the state for the establishment of a coalition focused on sexual assault.
- The lack of funding and resources in Ohio has had devastating impact on the sexual assault field resulting in loss of jobs, training opportunities, and services. This has created an environment where help for survivors is not accessible and prevention efforts are disappearing.
- There is a need for coordinated effort from the state level in order to provide direction as to best practices, offer training, and assist in leveraging funding.
- Enhanced collaboration and linking among stakeholders is essential. Currently, even stakeholders do not have a sense of services they can refer survivors to around the state.
- Helping survivors from underserved communities is critical and there are many groups that are not being served due to lack of expertise, resources, and understanding.
- Outreach and input by stakeholders and survivors should continue.
- OAESV's structure should account for the diversity around the state and to facilitate representation of such on the board and in membership.
- Stakeholders are interested in becoming members of OAESV if it is affordable, aligned with their work, and a benefit is received.
- Ongoing training for stakeholders is essential and should be done in all regions of the state.
- Transparency and communication are key elements to building OAESV successfully.

DEMOGRAPHICS OF RESPONDENTS

Three hundred and eighty-five individuals (385) completed some portion of the needs assessment survey; four of whom completed the Spanish version.¹⁸ Of Ohio's 88 counties, 86 were served by participating stakeholders.¹⁹ The majority of respondents described their service area as either urban or rural (see chart). There were 34 different categories from which stakeholders could select from to describe their profession. Director, Sexual Assault/Rape Crisis Program, Law Enforcement and Other were selected more than any other option. No one selected Victim Advocate in the military or Public Policy/Lawmaker. All other listed professional affinity groups

Service Area of Respondents



¹⁸ Not all questions required responses and therefore respondents could select to skip questions where a mandatory response was not required. For example, the final question had 217 responses.

¹⁹ Hardin and Pike were the two counties not served by any respondents.

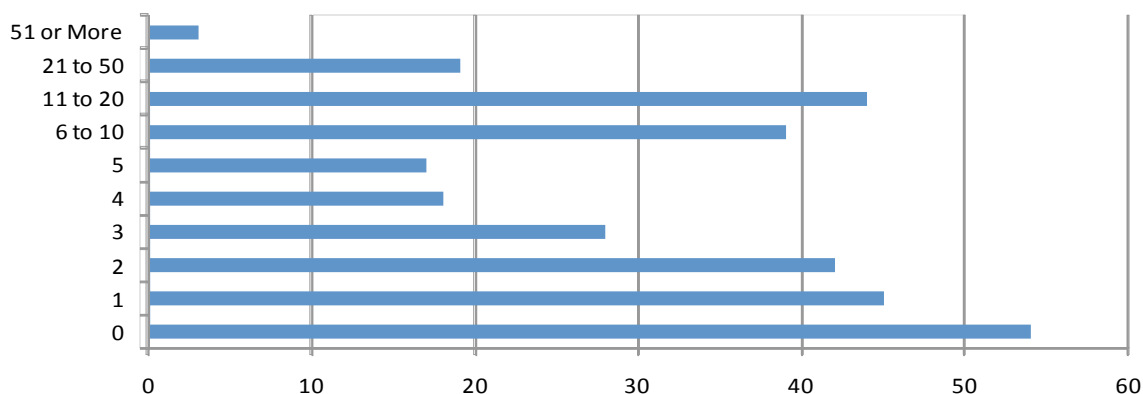
had some representation. The greatest number of individuals worked in the following five professional settings:

- Law Enforcement
- Dual Domestic Violence/Sexual Assault Agency
- Hospital/Other Healthcare
- Other Community-Based Organization
- Government/County

CURRENT STATE OF AFFAIRS

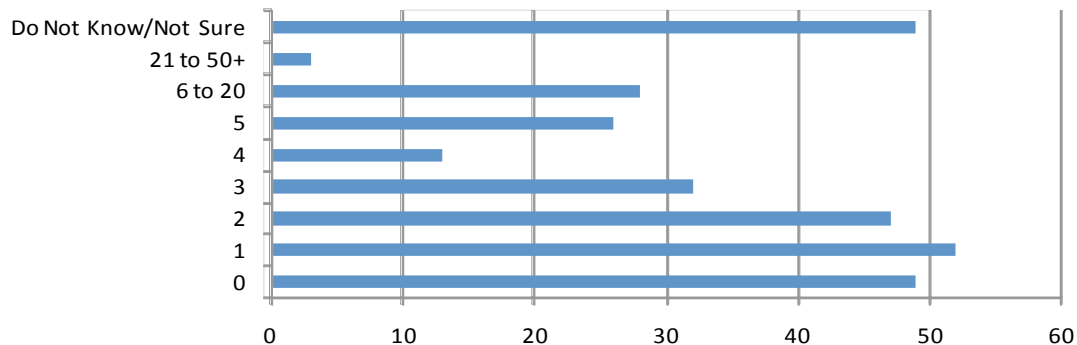
The survey was an opportunity to find out how many people in Ohio are working specifically on sexual assault related issues. The chart below shows how many people in *addition to the respondent* work within their agency on sexual assault. Law enforcement and the courts had the greatest number of individuals within their agency/organization working directly on sexual assault issues. Most stakeholders indicated that they are the only person in their agency responding to sexual assault.

Number of Individuals Working on Sexual Assault Issues in Addition to Stakeholder Within Own Organization



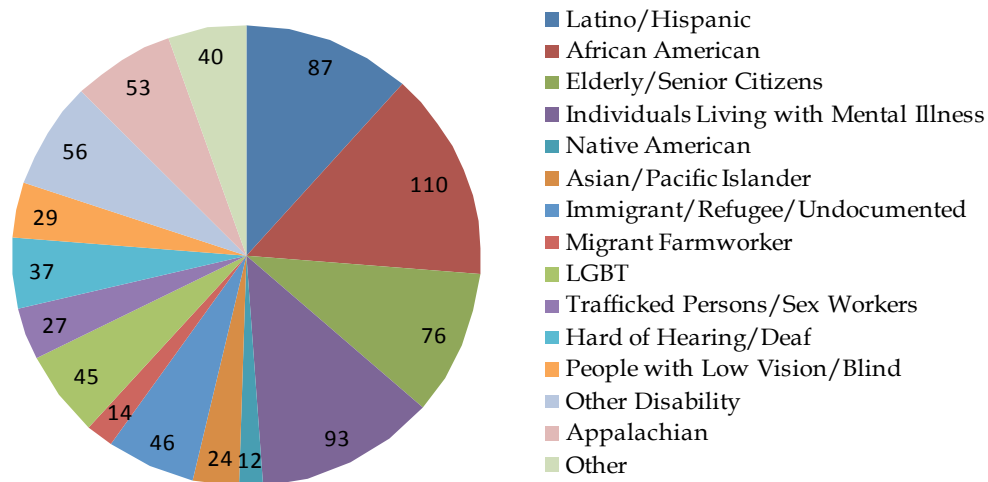
The survey attempted to ascertain by community the number of individuals whose work involves sexual assault issues. When stakeholders were asked about their community, many responded that they were alone, one of a few, or unaware of others in their community working on sexual assault or allied issues.

Number of Agencies/Individuals in Stakeholders Communities Responding to Sexual Assault



Sixty-four percent (64%) of all respondents intentionally attempt to reach and assist underserved populations. The graph below shows the underserved populations that stakeholders most frequently serve. Latino, African American, senior citizen, and individuals with mental illness are the largest of these underserved groups

Underserved Populations



Stakeholders were asked about barriers or issues underserved populations face and what they would like to see addressed at the state level. There were 145 responses to this question, indicating substantial interest and need. Stakeholders emphasized the following:

- The need for professionals to overcome misconceptions and have greater knowledge and sensitivity about the barriers and unique needs of underserved populations;
- The lack of resources, including funding, to conduct outreach and respond to needs of populations in culturally and linguistically respectful ways;

Lack of knowledge, sensitivity and desire to understand the unique needs of persons with disabilities has continuously been a barrier to reporting, investigating and providing support to those individuals surviving rape/incest/violence.

- The need to offer holistic services including, transportation, civil legal representation, medical care, financial assistance, and housing;
- The lack of trust by underserved populations in the criminal justice system; and
- The need to help many communities overcome the shame and stigma associated with sexual assault.

In order to obtain a better understanding of who stakeholders work with in their communities several questions were asked about collaborative efforts. Stakeholders indicated they most commonly collaborated with rape crisis centers, law enforcement, mental health providers, prosecutors, victim-witness advocates, domestic violence agencies, child protection entities, and hospitals.

Only 24 % of survey respondents stated that they were part of a Sexual Assault Response Team (SART). Most survey respondents collaborated with at least one other stakeholder. However, stakeholders wanted to make existing collaborative relationships more effective and create a shared framework for responding to survivors and crimes.

Overall, stakeholders wanted to collaborate with non-traditional agencies including schools, daycare centers, faith communities, workforce centers, and drugs/alcohol/addiction services. Here is a snapshot of responses from a few different stakeholder professions:

- The *legal community* regularly collaborates with law enforcement, rape crisis centers, victim assistance groups, and victim advocates. The legal community is interested in collaborating more with hospitals, and child sexual abuse agencies.
- While *law enforcement* regularly collaborates with prosecutors, adult/child victim services, child protection offices, sexual assault nurse examiners, and rape crisis centers, many law enforcement respondents wish for more collaboration with all the providers, especially prosecutors.
- *Rape crisis centers* acknowledged the most collaboration with a wide range of multidisciplinary agencies. They desire to collaborate more with schools/universities, law enforcement, hospitals, and cultural-specific organizations.

While we work with/serve these populations, there is much room for improvement in how we serve them. From a statewide coalition, I would like to see more support and training regarding the specific issues related to these populations.

The absence of a coalition in conjunction with the poor economy has taken its toll on stakeholders. When asked to identify the greatest challenge their agencies faced during the past two years, the number one response was lack of resources. The term “resources” encompassed everything from funding, to what funding supports such as staff, programs, and materials.

Several respondents indicated positions or entire programs have closed down with some comments being:

- *We cannot meet the needs of our community and there is a waiting list for all programs.*
- *Our original rape crisis center closed due to lack of funding.*
- *Our area was served by a sexual assault victim advocate, but due to budget cuts, that position was eliminated.*
- *Last year we lost our sexual assault survivor advocacy program.*

Other common challenges cited by stakeholders included:

Lack of understanding on the part of the general population about sexual assault, attitudinal barriers posed by school systems, and the court system's response is a significant challenge for us

- The lack of available, centralized information about where survivors can access assistance. The difficulty in prosecuting cases.
- The need for heightened community awareness and prevention about sexual assault.
- The lack of available training about best practices.
- The fragmentation among stakeholders and need for enhanced collaboration.
- The limited amount of resources for working with underserved populations.
- The resistance of schools to allow prevention programming.
- Ongoing revictimization of survivors by stakeholders.

OAESV PRIORITIES & STRUCTURE

OAESV’s Steering Council sought input from stakeholders on the development of the structure and priorities of the coalition. Historically, anti-sexual violence coalitions have tried to fill many roles, such as:

- Advocating for state and national level policies that best serve survivors of sexual assault.
- Supporting the creation of multi-disciplinary response teams and other innovative collaborations.
- Ensuring that services to survivors meet a high standard by providing training and assistance and developing standards.
- Serving as a collective voice to the state legislature on important issues to the anti-violence community.
- Serving as a centralized information and referral resource.
- Integrating community partners (e.g. communities of color, faith-based partners, and non-traditional service providers).
- Increasing capacity of sexual assault providers to respond to and partner with underserved and marginalized communities to end sexual violence.

Without a statewide coalition, standards have been lost. Our community’s rape crisis center is losing ground with the local hospitals making SANE exams more difficult to get.

I think that it would be great to have a coalition that deals with sexual assault on a statewide level. I think that there are a lot of issues the Board needs to address in order to make sure that victims are getting the assistance that they need

The stakeholders were provided a list of activities that a statewide coalition usually performs and asked to identify their greatest needs from OAESV pertaining to that category. The following list provides the percentage of all respondents who selected that coalition activity and offered specific suggestions for actions to be undertaken.

78%	Training
53%	Raising Awareness
48%	Funding/Resource Development
47%	Advocacy
47%	Networking
43%	Providing Direct Services
40%	Standard/Protocol Development
35%	Identifying and Responding to Gaps/Barriers in Services for Survivors
33%	Technical Assistance
32%	Lobbying
31%	Mobilizing
29%	Offering Leadership and Organizational Support

The categories that received the greatest responses are listed below with an overview of the stakeholder's suggestions.

Training

Training was the activity that stakeholders had the most to say about. Respondents conveyed that training is always needed, particularly on the fundamentals of sexual assault. Additional comments were that OAESV should:

- Offer locally-based training.
- Help secure funding for training.
- Update members on laws and public policy.
- Train on best practices pertaining to criminal justice response and SANE/SART, and working with underserved populations.

It would be great to have a statewide approach to reduce duplication of efforts and expenditures.

Raising Public Awareness

Raising public awareness is an essential primary prevention component. Stakeholders want to work more closely with the media and develop messaging that reaches children of all ages and underserved populations. Reducing stigma and dispelling myths would be critical components. Additional comments included:

- A coalition would help to secure public broadcasts, facilitate programs, and get public awareness in their area/county.
- Community outreach about immediate and long term effects is critical.
- Media coverage is necessary in order to remove the taboo of talking about sexual assault and abuse.
- Community members often seem to be shocked by sexual assault arrests and frequently assert that they are not aware of such crimes being committed.
- Public awareness and subsequent support can provide the catalyst necessary to allow a newly created program the opportunity to perform as intended.

The coalition should act as a resource and provide support to service providers, connecting providers to best practices, networking and other help.

Funding/Resource Development

Funding/resource development is “the greatest need” according to one survey respondent. Currently, it is even more difficult than ever to develop local support for sexual assault issues. Resources are sorely needed for hiring more advocates, conducting training, and paying for general operating costs. Resources are also needed to support development efforts so as to increase and diversify funding sources. Respondents would

like to OAESV assist with:

- Funding for linguistically and culturally specific prevention/ advocacy programs is needed.
- Securing funds that do not have restrictions impacting work.
- Keeping programs informed of funding opportunities and how to help make local programs sustainable.
- Providing resources for communities in need and guide them toward funding opportunities.
- Supporting intervention and direct services. Right now funding prioritizes prevention which impacts direct service delivery.

Stakeholders were asked to help prioritize OAESV's activities for the first two years of its operation. The survey contained a laundry list of possible undertakings and respondents rated each activity as either extremely important, semi-important or not important. The activities that received the highest ratings (in order of importance) are to:

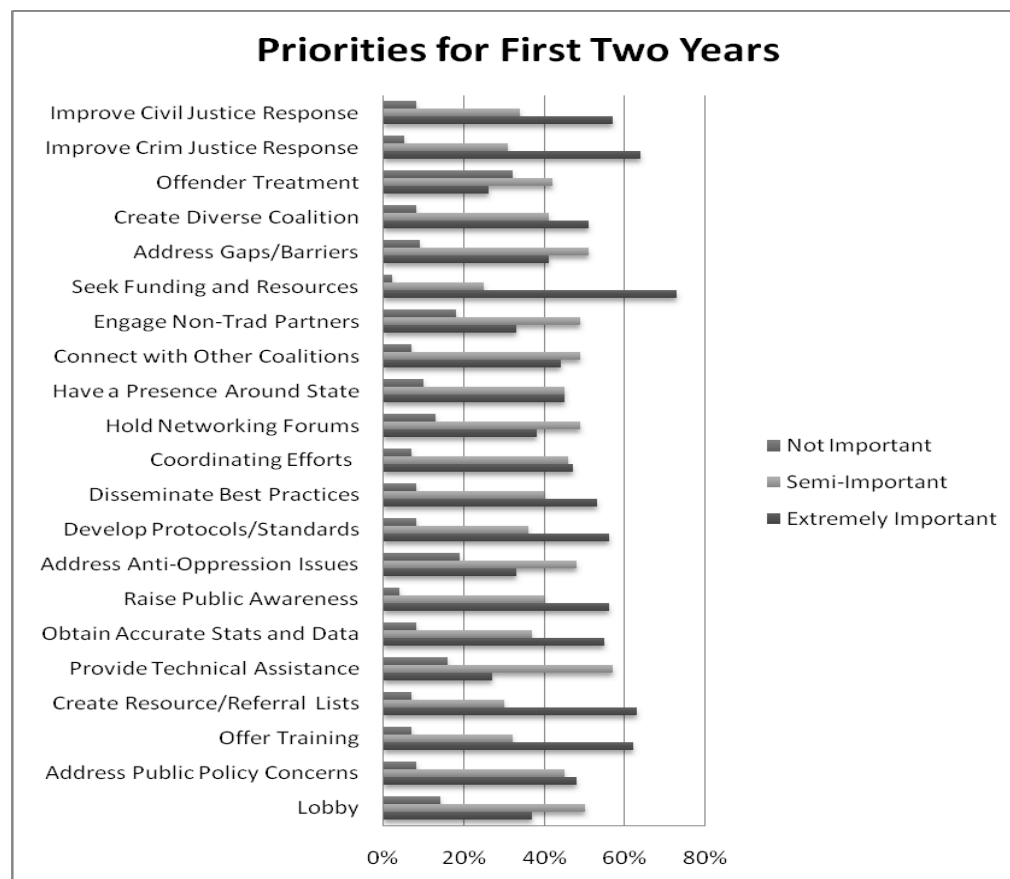
- Seek funding and resources for programs;
- Improve criminal justice response to rape and sexual assault;
- Create current resource and referral list;
- Offer training to members;
- Improve the civil justice response to rape and sexual assault;
- Raise public awareness/creating a media campaign; and
- Develop protocols and standards.

This is a wonderful list of activities and if only a few were undertaken, I believe it would make a large impact on Ohio.

If OASEV is going to rely on its membership to do much of the work, at least in the short term it should focus on building supports for the providers first. They are often working in great isolation, especially in rural counties.

The activities that were rated least important (although overall stakeholders rated all activities as either extremely or semi-important) were:

- Increasing the focus on and treatment for perpetrators;
- Addressing anti-oppression issues;
- Engaging non-traditional sexual assault service providers;
- Providing technical assistance to programs; and
- Engaging in lobbying activities.

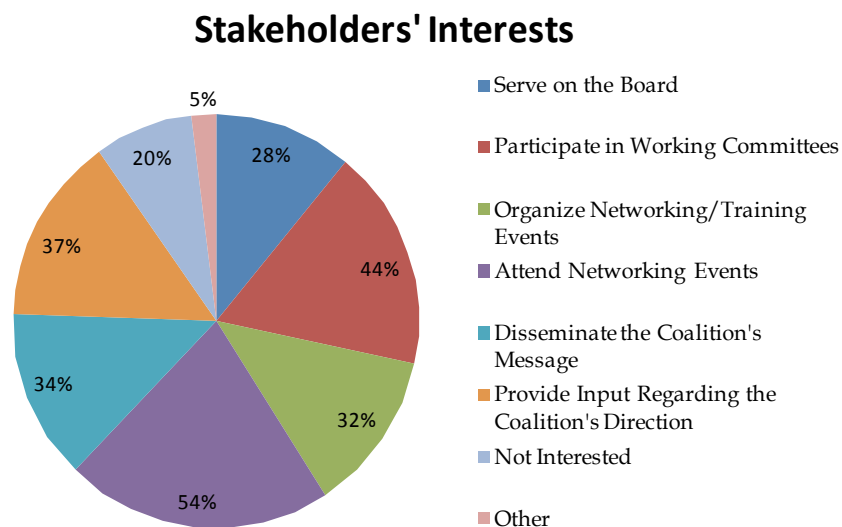


Stakeholders were also asked to list the top three things that they would like OAESV to accomplish in the first two years of operation. The following were the most popular responses:

- Develop a comprehensive resource list;
- Assist with funding and resources;
- Provide training;
- Revise laws;
- Develop protocols; and
- Establish OAESV around the state and work toward goals.

Structure, Board and Membership

Stakeholders demonstrated a great interest in being members of OAESV and participating in other ways. Eighty percent (80%) of respondents indicated that they would become members of OAESV. Of those not interested in joining, many of them stated their membership depends on the goals and objectives of the coalition and how closely it aligned to their own work. Overall, time and resources (most importantly, cost of membership) was the number one factor that would impact the decision to join. The following chart shows other ways, in addition to becoming members, that stakeholders want to be involved with OAESV:



The Steering Council wants OAESV to be structured in a way that brings the needs of the diverse state to the forefront and creates a strong and sustainable organization and thus elicited input from stakeholders. Stakeholders stressed that the structure and the makeup of the board must be one that fosters participation from a wide variety of people. According the respondents, the board of directors should have different perspectives and be representative of all the stakeholder groups listed on the survey, including board members who are survivors.

Another major theme that emerged was that OAESV must be structured in a way to provide statewide access. It was recommended numerous times that activities should not only occur in Columbus, but must also happen around the state, preferably regionally. Many people suggested there be regional OAESV leaders, local boards or committees, or even board members from each county represented on OAESV. They felt this was the only way to get true participation and diverse representation. In addition, the state coalition should see its role as supporting local programs and be responsive to their needs.

When it came to board member selection, most stakeholders again acknowledged the importance of diversity (geographic, discipline, and cultural) and preferred a nomination and voting process (by the membership). Stakeholders believed board members qualifications, their motivation for wanting to be on the board, and the skills they bring to the coalition are critical pieces of information for voting. It was suggested that job descriptions for board members be developed, that criteria for board membership be determined (to ensure diversity), and that stakeholders from across the state be engaged in identifying and nominating potential board members.

The survey results also revealed that board members should wholly support OAESV's mission and actively work to achieve it. Stakeholders wanted board members that have expertise in the area of sexual assault and are passionate about improving responses to survivors and ending rape. Additionally, cultural diversity and representation should be in the coalition's by-laws and a commitment to inclusivity should be made by every individual serving on the board. Finally, their activities should be transparent and they should be guided by clear goals and objectives. Stakeholders would expect regular updates about activities through minutes, reports, and meetings.

Due to lack of economic resources for sexual assault service providers, OAESV wanted to get a sense of what stakeholders comfortably believed they could afford for membership fees. According to respondents, membership fees should vary for individuals and organizations. Eighty-four (84%) of stakeholders said that individual membership fees should be less than \$50 while 43% of respondents said that an organizational/agency membership should range from \$50 - \$100. Additional comments about membership fees included having a sliding fee scale depending upon number of people in organization and budget; the desire to have both individual and agency memberships available; consideration of making membership free; and ensuring that if a fee is charged, members receive benefits.

Survey Comments Pertaining to Structure and Board Selection

Diversity will add strength and will add a broad perspective to the board. This will be an incentive to any victim because it will ensure appropriate services for them.

Meetings should not only be statewide. Areas meetings close to providers are needed.

Just like this survey – get input from the field.

A central office at the state level and several regional offices which are more in tune with local needs and services.

I think the coalition should have a strong leadership but also have committees to give providers around the state a chance to get involved.

A lot of coalitions are located in Columbus, which makes it difficult for agencies in counties further away to attend meetings/trainings. Perhaps offer regional trainings/meetings or form regional teams/committees.

Make the coalition accessible to service providers and survivors. Don't structure yourself in a way that promotes power and control from the top down.

There needs to be an incentive if you are going to charge fees, but overall a sense of membership must be worthwhile.

When asked what would help keep stakeholders engaged as members in OAESV, many asked for consistent updates and communications about the coalition's activities. The best ways to communicate with members are a combination of email and an updated coalition website. People indicated that to keep them engaged with the coalition or as active members, the coalition must:

- Provide clear and ongoing communication regarding the coalition's activities and regular programmatic updates.
- Provide ongoing opportunities to participate in trainings that are planned and implemented around the state, not only in one central location.
- Demonstrate tangible results and provide updates on progress, even small steps. Participants want to see OAESV include them in their work, but to also move forward and accomplish their stated goals.

Additionally, the respondents want transparency and opportunities for input, clarity of mission and purpose, strong leadership, a commitment to public policy issues, and measurable results.

CONCLUSION

Not having a state-level coalition for the past three years in conjunction with the downturn of the economy has left stakeholders working with survivors or in the sexual assault field without resources, training, leadership, and most importantly a way to stay connected to each other. The initial information gathering process revealed immense interest and support from stakeholders across the state in the development of a sexual assault coalition in Ohio. Stakeholders want to be kept informed of OASEV's activities and suggest that small goals be set in its development so that progress and success is seen and shared. Some final comments from stakeholders were:

- *I appreciate what OAESV is trying to do.*
- *I commend you for taking this to the next level and will be happy to assist in any way that I can.*
- *Glad we are getting it back on track.*
- *This is a wonderful step to take - getting detailed input from service providers. I am excited to see this process get under way.*
- *Thank you for the opportunity to provide input and best wishes for a successful effort in addressing the needs of victims of sexual assaults.*
- *Thank you for doing this.*