Sexual Assault
DEMONSTRATION INITIATIVE
Enhancing Sexual Assault Services

COMPREHENSIVE SERVICES FOR SURVIVORS OF SEXUAL VIOLENCE

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A publication of the Sexual Assault Demonstration Initiative

By Kelly Wilt, Resource Sharing Project

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Please note that this publication uses they/them/theirs in the singular to recognize there are more than two genders and affirm survivors who are transgender or who identify outside the gender binary.

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INTRODUCTION

Community-based sexual assault service programs have the unique ability to support survivors at all stages of the healing process with wide-ranging services and foundational values of advocacy that aspire to validate, believe, and empower survivors. When programs listen to survivors, support their strengths, and offer hope for healing, they can provide services that are responsive to the range of needs that survivors have along the healing journey.

Sexual assault service programs provide advocacy and support to survivors of sexual violence and work toward the elimination of sexual violence. Some are single-purpose agencies, while others are merged with domestic violence or other social and crime victim response services. These dual/multi-service agencies provide a broad and diverse offering of intervention, prevention, and systems change programming. Dual/multi-service agencies have historically centered their efforts on domestic violence and crisis response, often addressing the immediate physical safety needs of the survivors they serve. Some survivors of sexual violence have immediate and tangible needs that advocates can fulfill, like accompaniment to emergency medical care. Far more often, however, survivors need support related to a wide range of immediate

and long-term issues that affect their whole selves. To provide comprehensive services, programs must address the entire scope of survivors' experiences and needs beyond immediate crisis response.

Comprehensive services provide opportunities for survivors to heal and communities to prevent violence. Comprehensive services address the physical, social, emotional, and spiritual needs of survivors of sexual violence, their families, and friends. These services support holistic healing and empowerment. This guide describes the broad range of services that advocacy agencies may provide and offers recommendations for the development and expansion of services. It is intended to help programs think about the ways they currently provide services and to reflect on if they are best meeting the needs of survivors of sexual violence. This guide is not intended to be a tool for setting inflexible requirements or monitoring program compliance, but rather a resource for programs to develop an agency-specific vision for meeting the needs of survivors in their community. While this guide can be used across cultures, there may be unique needs within cultures that may not be reflected in this guide. Culturally and linguistically specific and tribal programs are encouraged to connect with resources tailored to their specific community's need in addition to any information provided within this publication. Through engaging one's community and learning about the unique services that help support survivors' healing and growth, programs can develop services reflective of their communities and responsive to survivors' diverse needs and experiences.

GUIDING PRINCIPLES

The methods by which sexual assault service programs provide services are just as important as services themselves. Whether in the context of a single-purpose or dual/multi-service agency, all services available to survivors of sexual violence should be rooted in an understanding of the complex effects that trauma and oppression have in a survivor's life. Programs should provide services in a manner that demonstrates integrity, ethics, respect for diversity, and survivor autonomy and empowerment. Services based on learning about a survivor's resources and strengths can help to establish a strong foundation for healing. Sexual assault service programs must consider the holistic needs of survivors of sexual violence — across the lifespan and throughout the healing journey — to provide relevant and responsive services that honor the unique needs of each survivor. Such deliberate attention to an ethic of care is fundamental to any service a program offers. This approach to service provision incorporates the following characteristics, and can be found in expanded form in the Building Cultures of Care: A Guide for Sexual Assault Services Programs" [Resource Sharing Project [RSP] & National Sexual Violence Resource Center [NSVRC], 2013].

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ROOTED IN ANTI-OPPRESSION & EMPOWERMENT-BASED FRAMEWORK

Poet Cleo Wade wrote, "The future of feminism is only as powerful as the future of anti-racism" [Wade, 2016]. This statement highlights the intersections that all forms of oppression have with one another and the integral nature of understanding how oppression, whether related to race, gender identity, sexual orientation, religion, immigration status, class, or other form of identity, affects survivors' experiences. Sexual assault advocacy programs grow and strengthen their ability to support survivors by seeking learning opportunities to expand the knowledge and capacity to serve survivors of varying backgrounds and experiences. An empowerment-based approach to services recognizes that healing is not prescriptive and is attentive to the unique needs and strengths of each survivor. When rooted in anti-oppression and empowerment-based frameworks, programs are responsive to the multidimensional needs of survivors and employ the belief that survivors are the best experts on their own experiences, while also recognizing the historical, cultural, or ongoing trauma of interlocking oppressions that a survivor may face.

ROOTED IN TRAUMA-INFORMED CARE PRINCIPLES

A trauma-informed approach to services understands the effects of trauma on the lives of survivors and those who serve them (RSP & NSVRC, 2013). Trauma-informed care comprises six basic elements: cultural relevance, safety, trustworthiness, choice, collaboration, and empowerment. These philosophical principles help to shape the culture of advocacy organizations and the services provided to survivors. This approach benefits the holistic well-being and growth of survivors, staff, and programs. At the organizational level, a trauma-informed approach ensures that programs are mindful of organizational capacity, including its strengths and the areas it must grow in order to better serve survivors. This should be reflected in organizational culture, staffing, and services. It also supports the active building of vicarious resilience and the prevention and lessening of vicarious trauma. At the service delivery level, programs using a trauma-informed approach can support survivor growth and autonomy through collaboration and survivor-led decision-making.

SERVICES MADE AVAILABLE ACROSS THE LIFESPAN

Sexual violence affects individuals of all ages, including infants, children, adolescents, young adults, adults, and adults later in life. Many survivors, for a variety of reasons, choose not to or are unable to immediately seek services after experiencing sexual violence. Comprehensive programs provide relevant services that are accessible to survivors across the lifespan and responsive to all stages of the healing journey, regardless of when the incident(s) and disclosure(s) take place.

ACCESSIBLE ACCOMMODATIONS

Lack of fully accessible services can be a barrier to seeking help. Programs should strive to ensure they have evaluated all aspects of their services for ease of access for all survivors. Services should be fully accessible to all survivors, regardless of physical or cognitive ability. Accessible services are designed to welcome the broadest range of survivors, no matter their location, physical or developmental ability, or other individual or environmental circumstances. Services should be free of cost to survivors and made available at times when individuals are most likely to access them. Services and materials should be written at a sixth grade reading level or below to reach survivors of all education levels and should be available in the preferred language of the survivor. Accommodations should be made for survivors according to each person's self-identified needs.

CULTURALLY ROOTED RESPONSE

A culturally rooted approach to service development and implementation requires an understanding of the culture and sub-cultures in a community and an interest in meeting needs in a way that is responsive to both the resources and challenges in each community. Programs can build culturally rooted services by listening to and learning about the impact of trauma for different populations. An awareness of the complicating impact of historical and intergenerational trauma is critical to serving survivors from historically oppressed communities. A culturally rooted response also works to ensure that services are available and relevant to survivors of all genders and sexual orientations as well as available in the preferred language of a survivor. Service location is also important to consider when building culturally rooted services, as program proximity to centralized areas can ensure that services are easily accessible and that common methods of transportation can be used to reach services. Programs should also consider the importance of meeting survivors within pre-existing community settings. When possible, collaboration or referral to culturally specific service providers allows the survivor to select the best healing supports, and is strongly recommended.

AVAILABLE IN A WIDE RANGE OF SETTINGS

Survivors of sexual violence may not be aware of the resources available in their community. Programs can increase awareness of resources and services in their community and accessibility of services by having a presence in a wide range of settings. Such settings may include community institutions, faith and spiritual communities, social service settings, medical settings, legal and criminal system settings, community service groups, neighborhood organizations, K-12 schools, institutions of higher education, and prisons, jails and juvenile detention settings.

Programs should also ensure that survivors are provided options for the setting where they would like to receive services. Survivors may have preferences for location based on safety, comfort, or privacy and these preferences should be honored. Dual/multi-service programs that primarily reach survivors of sexual violence via their domestic violence services such as shelter or assistance with obtaining a protection order should expand their reach so that services are made available to the broader continuum of people who experience sexual violence.

TYPES OF SERVICES

Services for survivors of sexual violence should be wide-ranging and attentive to the impact of trauma on all aspects of a survivor's life, their significant others, and their community. Strong services are rooted in an understanding of the needs of each community, with attention to the needs of those historically un- or underserved.

Survivors of sexual violence endure harm that extends beyond the physical and includes injury that is emotional, psychological, spiritual, and sexual. Not unlike other forms of trauma, sexual violence can threaten a survivor's sense of control, trust, and perception of safety in the world. Traumatic incidents trigger a person's natural instinct for survival. This experience can result in forms of involuntary responses while the violence is happening (Yuan, Koss & Stone, 2006). The impact can stay with survivors long after the violence ends, and can continue in the mind, body, and spirit in a variety of ways.

Many survivors find that it can take time to re-adjust and cope for a period after experiencing sexual violence. The lasting effects can affect the daily lives of survivors, making it difficult to heal and (re)gain a sense of normalcy in the world. Trauma affects individuals differently and healing is rarely linear, meaning that survivors' needs often change and evolve over time. For some, there are severe effects in the immediate aftermath of an assault that may or may not last. For others, the effects of sexual violence come in waves or shift over time. For survivors who have endured historical trauma or face multiple forms of oppression, sexual violence may be experienced as one of many forms of trauma that they have experienced throughout their lives. For survivors of child sexual abuse, ongoing effects of trauma are common and may be experienced across the lifespan.

Given the diverse and wide-ranging needs of survivors of sexual violence, strong services require active awareness that survivors are not a homogenous group, and further, that the impact of sexual trauma is likely to change for survivors along the healing journey. Services that are rooted in such awareness support the continuum of needs of survivors and avoid using a narrow or prescriptive lens by which to view healing.

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SURVIVOR-FOCUSED SERVICES

INDIVIDUALIZED SUPPORT

Survivors of sexual violence benefit from opportunities where they can share their experiences or needs and be met with supportive listening and validation. Advocates and therapists share this foundational skill and can all be supportive of survivors who seek help.

Each state, tribe, and territory has unique guidelines and language to refer to the different roles of professionals who serve in this supportive role at dual/multi-service programs and within the context of mental health care. For example, some programs refer to their advocacy staff as "Advocates" and others refer to them as "Counselor Advocates." Mental health professionals range in title from counselor and licensed professional counselor to therapist and psychologist. For the purpose of this section, we will discuss the beneficial nature of individual supportive interventions of different forms and distinguish between two main forms of individual interventions by referring to "Advocacy" as the service available to survivors by those certified by their state or program to provide advocacy services to survivors and "Therapy" as the service available to survivors by trained and licensed mental health professionals.

Programs may find that survivors benefit from utilizing both advocacy and therapy services, or that that survivors may choose to use one form of individual support over the other.

Some programs elect to have therapy services within their agency, while other programs contract with or refer to trusted therapists in the community. Regardless of the structure, both forms of support are valuable to survivors and essential to comprehensive services. Outlined on the next page are the similarities and distinctions between these two forms of support.

ADVOCACY

Advocacy involves:

- Using active listening skills
- Providing emotional support, validation, empathy, and empowerment
- Providing information and education about effects of trauma
- Providing assistance with developing coping skills and trigger plans
- Assessing need for and assisting with physical or emotional safety planning
- Providing information and options so that each survivor can make the best choices for themselves
- Assisting with access to culturally rooted healing practices
- Assisting the survivor in navigating systems and asserting their rights and needs in systems such as healthcare, education, and legal
- Recognizing the survivor as the best expert on their experience and using approaches and techniques reflective of the survivor's self-identified needs
- Reviewing and explaining survivor's rights
- Affirming a survivor's strengths and resources
- Providing advocacy in multiple settings, prioritizing where the survivor feels safe and comfortable
- Availability by scheduled appointment or drop in, including immediate support (commonly known as crisis intervention) and support provided on a long-term basis
- Provision of services by a trained advocate or advocate counselor

THERAPY

Therapy may include:

- Using active listening skills
- Providing emotional support, validation, empathy, and empowerment
- Providing information and education about effects of trauma
- Providing assistance with developing coping skills and trigger plans
- Using planned interventions and goals
- Using specific clinical based interventions and modalities
- Providing information, options, and referrals
- Assisting with access to culturally rooted healing practices
- Recognizing the survivor as the best expert on their experience and using approaches and techniques reflective of the survivor's self-identified needs
- Demonstrating ongoing evaluation of therapy delivery and outcomes
- Reviewing survivor's rights
- Affirming a survivor's strengths and resources
- Provision by a trained and/or licensed therapist or counselor

ADVOCACY THAT MEETS THE WHOLE SURVIVOR

Advocacy is a set of skills employed across multiple settings, cultures, and languages, depending on the survivor's needs. The core skills of advocacy are the same, regardless of the setting where advocates support survivors. Meeting the whole needs of survivors means that advocates are willing and prepared to provide advocacy in a range of settings, such as schools, employment, or long-term healthcare. Two common settings are healthcare and criminal legal systems. Below are detailed examples of how advocacy skills are applied and focused for those settings.

MEDICAL ADVOCACY

Medical advocacy is one form of advocacy that can support survivors seeking medical care immediately after an assault or with follow up and routine medical care that may be difficult or triggering. Medical advocacy can take many forms and is likely to look different for each survivor based on their self-identified needs. At its foundation, it is rooted in helping survivors navigate medical systems and experiences that may be unfamiliar, overwhelming, or re-traumatizing.

Medical advocacy may include:

- Providing education about medical options and navigating medical systems
- Providing medical accompaniment and advocacy during forensic exams and other emergency care
- Assisting with access to culturally rooted healing practices
- Providing medical accompaniment and advocacy for non-emergency medical services that survivors may find triggering or re-traumatizing, such as routine medical check-ups, dental visits, and OBGYN appointments.
- Assisting with access to doulas or other trauma-informed birthing professionals
- Facilitating conversations about disclosure and confidentiality in medical settings

LEGAL ADVOCACY

Legal advocacy is a form of advocacy that focuses on supporting survivors who engage with civil or criminal legal processes. Similar to medical advocacy, this form of advocacy can take many forms and is likely to look different for each survivor based on their self-identified needs. At its foundation, it is rooted in helping survivors navigate legal systems and experiences that may be unfamiliar, overwhelming, or re-traumatizing.

Legal advocacy may include:

- Providing education about legal process, options, and help navigating legal systems
- Providing accompaniment and advocacy during reporting and through prosecution
- Providing assistance in filing sexual assault protection orders
- Providing accompaniment and advocacy through protection order process
- Providing accompaniment and advocacy during civil law cases
- Providing accompaniment and advocacy through diversion programs and community/restorative justice opportunities
- Providing accompaniment and advocacy through an adjudication system within a campus context
- Supporting survivors who may be facing criminal charges, within the scope of the advocacy role
- Providing information on the advocate's mandatory reporting duties, and supporting the survivor through any procedures with child protective or dependent adult protective services

HELPLINE

Helplines provide human connection regardless of a survivor's location or the time of day. Helplines, sometimes also known as crisis lines or hotlines, may be the first point of contact a survivor has with a program. Seeking help can be hard due to the shame and stigma often associated with sexual violence. Helplines offer anonymous and prompt access to support, validation, and resources. Additionally, for survivors who may have difficulty accessing in-person resources, helplines meet a critical need for connection.

Helpline services may include:

- 24 hours/7 days a week availability
- Private phone, text, chat, and email components
- Services to survivors, significant others, and community members
- Support for emotional needs, such as establishing emotional safety and developing coping plans
- Support for physical needs, such as assistance navigating family systems and formal systems, attending to health care needs, and accessing other resources

Best practices in helpline structures and procedures include:

- Staffing by fully trained staff or volunteer advocates
- Staffing that allows for helpline staff to give sole and immediate attention to callers during calls
- A foundation in active listening practices
- Recognition that supportive listening may be the only intervention requested or needed
- Responsiveness to callers of all genders
- Flexibility, both with the amount of times a person can call and the length of times a call can last
- Awareness that procedures may vary for culturally and linguistically specific services and specific populations of survivors

SUPPORT GROUPS/CIRCLES OF SUPPORT

Connection with peers and an opportunity to share and learn from others with common experiences can be an integral part of healing for survivors of sexual violence. Sexual violence is isolating and survivors often feel alone in their feelings and experiences. Support groups are a method for providing a safe space for survivors to share and hear from each other. Talk therapy isn't the only form for group support. Art, movement, culturally rooted practices, crafts, and more can be used to support survivors in a group setting.

SUPPORT GROUP SERVICES MAY INCLUDE:

- Offering sexual violence specific groups
- The exchange of information, sharing techniques for problem-solving, and exploring feelings
- Groups that are planned and designed with clear intent and structure
- Groups that are run by advocates or therapists
- Groups that are peer-led support groups
- Using culturally relevant types of groups and approaches
- Mind/body approaches such as yoga or equine therapy groups
- Groups that are available in multiple languages, determined by community needs
- Groups organized, named, and marketed in culturally appropriate ways
- Groups that use ongoing evaluation of delivery and outcomes
- Groups that are provided for survivors of different identities and experiences, such as:
    - For adult survivors of child sexual abuse
    - For male and male-identified survivors
    - For parents of child survivors
    - For partners of adult survivors of child sexual abuse
    - For LGBTQ survivors
    - For age-specific groups
    - For survivors with disabilities

HOLISTIC HEALING

Sexual violence affects all aspects of a person's being: mind, body and spirit, and requires a holistic response to attend to all parts of a survivor's self. Opportunities that address the emotional, spiritual, sexual, and physical healing of survivors support holistic growth and resilience. These methods of healing are likely to vary based on community and cultural norms, and should be considered within the context of appropriateness for each community and with avoidance of cultural appropriation. For more information, see *How Does Cultural Appropriation Affect Rural Sexual Assault Services?* [Green, 2017].

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Examples of holistic healing opportunities may include:

- Creative art opportunities such as: knitting circles, sewing circles, writing or poetry, cooking, art therapy or activities, drumming circles, music therapy or activities that are provided individually or in groups
- Mind and body focused opportunities such as: meditation and mindfulness classes and groups, yoga, Ta'i Chi, Qi gong, walking or running groups, acupuncture
- Outdoor-based healing activities such as gardening, activities to explore herbal nutrition, hiking, spending time in nature
- Culturally rooted approaches to healing such as: ceremony, acupuncture, music, gathering with food, and other opportunities reflective of the culture of the survivor

Engaging in ongoing evaluation of survivor interests as well as delivery outcomes of holistic opportunities. For more information, see *Holistic Healing Services for Survivors* [Poore, Shulruff, & Bein, 2013].

SURVIVOR ACTIVISM & INVOLVEMENT

Survivors of sexual violence may seek a variety of outlets for healing and growth in the aftermath of trauma. For some survivors, becoming involved in awareness-raising and social change efforts are integral aspects of their healing journey. Such opportunities can help survivors to make new connections with a trusted community and can also serve as an opportunity to regain a sense of strength and voice.

Survivor activism and involvement activities may include:

- Survivor participation in program advisory board
- Volunteer opportunities
- Opportunities for survivors to speak publicly about their experiences (e.g., Speak Outs, Clothesline Projects, art exhibits, publications, speakers' bureaus)
- Survivor-led political action committees
- Restorative or community justice based approaches
- Survivor-led philanthropic events
- Peer-led groups
- Program recruitment strategies that ensure that survivors can and are encouraged to apply
- Survivor engagement across social justice issues to raise awareness and advocate for change

SUPPORT FOR SIGNIFICANT OTHERS

Significant others — meaning family, friends, partners, or loved ones of survivors of sexual violence — are also impacted by sexual violence. Significant others may experience guilt, disbelief, or uncertainty as to how to be supportive of survivors. Learning about the trauma of a loved one may also be a trigger of their own trauma. Programs can help support significant others to manage their own responses and to learn about how to be helpful to survivors through a variety of methods.

Support for significant others may include:

- Using active listening practices
- Recognizing and normalizing the impact sexual violence has on significant others
- Responding to emotional needs
- Providing assistance with developing coping strategies
- Providing support in-person, phone, or electronically
- Upholding the confidentiality of survivor and the utilization of appropriate measures to honor the needs of everyone seeking services without cross-sharing information
- Offering significant other support groups
- Offering counseling/therapy
- Offering referrals for child care, if applicable
- Providing referrals, as necessary

INFORMATION & REFERRAL

Sexual assault service programs strive to provide a broad range of services to meet the wide-ranging needs of survivors, and they also often serve as a connection to other resources that can address additional needs a survivor may have. Strong collaborative relationships with trusted community partners and a good understanding of resources available in the community aid in supporting the holistic response to survivors.

Information and referral services may include:

- Maintaining a list of a variety of service providers to offer as referrals to survivors and their significant others, such as:
  - Social services, legal aid, housing assistance, employment assistance, primary care physicians, OB/GYN, dentists, therapists, psychiatrists, mental health focused hotlines, suicide hotlines, nutritionists, chiropractors, eating disorder specialists, sex therapists, doulas and midwives, massage therapists, herbalists, acupuncturists, spiritual guidance

- Conducting regular screening of agencies and service providers on referral list so that the list is up to date and advocates are able to give informed referrals. An example of screening can include surveying providers about their fees, approach, and experience working with survivors of sexual violence.
- Having policies for maintaining confidentiality when communicating with agencies and service providers
- Maintaining up-to-date and culturally and linguistically relevant brochures on facts and resources for survivors and their significant others
- Maintaining up-to-date website with information and resources for survivors and their significant others

COMMUNITY AND SYSTEMS FOCUSED SERVICES

PREVENTION

Prevention includes efforts to create sustainable social change to prevent the occurrence of sexual violence. Programs may engage in prevention work in a variety of ways and prevention efforts may look different in each community. Approaches are likely to vary based on the age, role, and characteristics of the audience. Prevention work is an ongoing process and most effective when offered in multiple doses and tailored to each unique group. It differs from awareness-raising efforts in that its goal extends beyond increasing awareness of sexual violence to also include the deconstruction of systems, beliefs, and behaviors that support a culture where sexual violence is enabled. Prevention work is long-term and focuses on individual, community, and societal responsibilities to prevent sexual violence.

Prevention efforts may include:

- Facilitating an understanding of the root causes of sexual violence
- Promoting social norms campaigns
- Promoting healthy sexuality
- Facilitating conversations about bystander intervention
- Youth-based organizing and activism
- Engaging in policy work to support the prevention of sexual violence
- Reflecting on, acknowledging, and critiquing systems of oppressions within all communities

AWARENESS-RAISING & EDUCATION

Awareness-raising and educational efforts include those that aim to increase community or individual awareness of the existence and/or impact of sexual violence on individuals and communities. Awareness-raising often focuses on increasing basic knowledge of sexual violence and may include the sharing of statistics on prevalence and impact, highlighting services or resources, or sharing other general information. Awareness-raising and education may go hand-in-hand, as both involve carefully crafting messages for each unique audience and sharing age and role appropriate information related to the identification of sexual violence, exploration of its roots, its prevention and available resources. Awareness-raising events may present a platform for survivors to speak and share about their experiences or for programs and advocates to inform communities and systems about sexual violence. Awareness-raising and education differ from prevention work in that their role is to increase attention to the issue and your organization, but do not work to change social norms.

Awareness-Raising & Education may include:

- Coordinating or participating in Sexual Assault Awareness Month
- Coordinating or participating in Take Back the Night
- Participating in fundraisers (5Ks, galas, benefits, etc.)
- Participating in local town halls
- Authoring op-ed pieces
- Participating in topical news interviews
- Authoring position statements
- Developing or implementing poster campaigns
- Using social media: topical news sharing, information sharing, promotion of events, social norms campaigns, promotion of services available
- Speaking to social service or civic groups
- Programming in K-12 schools
- Educational training and programming at colleges and universities
- Community teach-ins
- Community listening circles
- Cross-training for community partners
- Skill-building workshops
- Bringing awareness to the intersection of sexual violence and other social justice issues

SYSTEMS ADVOCACY

Systems advocacy refers to the integral work programs do with community partners and agencies to strive toward the optimal treatment of survivors of sexual violence. Systems advocacy works to create better systems and response for survivors (as a whole or large populations of survivors) so that they are treated with respect and dignity. Systems advocacy often focuses on effective strategies for collaboration, cross-training, and policy development. It also brings a voice to the experiences of survivors. Advocates engaged in systems advocacy actively work to educate, challenge, and engage systems so that they are responsive to survivors' collective needs. Systems advocacy strives to avoid and lessen re-traumatization by promoting an understanding of trauma-informed care for all involved in response and support.

Programs can proactively act with an awareness of the many systems, formal and informal, survivors may interact with and learn about these systems. Strong knowledge about how other systems operate can help to strengthen the program's understanding of how each system works and to positively influence the system's ability to respond to survivors. Such systems may include: educational institutions, faith-based institutions, child protective services, supportive services and assisted living for elderly and people with disabilities, prisons and detention centers, healthcare providers, including those beyond acute care to include doctor's offices, dentists, physical therapists, etc., criminal legal systems, tribal governments, local or county governments, other forms of community leadership, sex offender management programs, and social services systems such as housing, Temporary Assistance for Needy Families (TANF), and Women, Infants & Children (WIC).

Systems advocacy may include:

- Working with community partners and agencies to create policies and protocols that reflect the needs of survivors of sexual violence
- Working collaboratively with systems in specific cultures (for example, tribal or community elders)
- Working collaboratively with medical, civil and criminal legal systems, to provide education and awareness about survivor needs
- Advocating on behalf of legislation that supports survivors
- Bringing awareness to systems where survivors encounter barriers
- Challenging policies or protocols that are harmful or insensitive to the needs to survivors
- Speaking and advocating on behalf of intersecting social justice issues present within systems that are rooted in and uphold oppression
- Training systems professionals

LOOKING AHEAD AND ENGAGING IN GROWTH

Sexual assault service programs can develop strong services through thoughtful planning, assessment, and evaluation. Involving communities, survivors, community partners, and program staff in providing feedback on the needs of the community is one critical method of developing strong services. Learning about unmet needs, barriers to accessing services, and community awareness of and likelihood to use resources can help inform planning and resource allocation.

Approaching service development with a mindset of flexibility, growth, inclusivity and learning allows for an openness to feedback about what survivors need, what's working, and what's not. When programs actively elicit this feedback, it demonstrates an organizational attitude that embraces change and intentionality in action. Evaluation of services delivered — whether helpline services, one-on-one advocacy meetings, awareness campaigns, or efforts to shift social norms — provides valuable information about whether services provided have met the needs of the individuals a program serves.

Sexual assault service programs meet an essential need of survivors through providing care, knowledge, and a supportive environment for healing. As programs strive to meet the critical needs that extend beyond immediate crisis to also support the wide-ranging experiences of survivors over time, they must plan for how they will provide comprehensive services. Enhancing sexual assault services in dual/multi-service programs requires openness to more radical change than mere minor tweaks to existing programs. Programs must bravely engage in an honest and critical self-assessment and practice openness to feedback about how they can grow (Townsend, 2017). When organizations listen to the needs of the community and understand their strengths and areas for improvement, they have a strong foundation for building comprehensive services that meet the holistic needs of survivors.

To continue your growth and learning about creating meaningful services for survivors of sexual violence, please get support from your state, territorial, or tribal sexual assault coalition. You can also utilize the resources from the Resource Sharing Project http://www.resourcesharingproject.org; the National Sexual Violence Resource Center https://www.nsvrc.org; the Minnesota Indian Women's Sexual Assault Coalition http://www.miwsac.org; and the National Organization of Asians and Pacific Islanders Ending Sexual Violence http://www.napiesv.org.

REFERENCES

Green, L. (2017). *How does cultural appropriation affect rural sexual assault services?* Retrieved from the Resource Sharing Project: http://www.resourcesharingproject.org/sites/resourcesharingproject.org/files/How%20Does%20Cultural%20Appropriation%20Affect%20Rural%20Sexual%20Assault%20Services_0.pdf

Poore, T., Shulruff, T., & Bein, K. (2013). *Holistic healing services for survivors.* Retrieved from the Resource Sharing Project: http://www.resourcesharingproject.org/sites/resourcesharingproject.org/files/Holistic%2BHealing%2BSASP%2BPaper%2BFINAL.pdf

Resource Sharing Project, & National Sexual Violence Resource Center. (2013). *Building cultures of care: A guide for sexual assault services programs.* Retrieved from http://www.resourcesharingproject.org/sites/resourcesharingproject.org/files/BuildingCulturesOfCare8.pdf

Townsend, S. M. (2017). *Sexual Assault Demonstration Initiative: Final report.* Retrieved from the National Sexual Violence Resource Center: https://www.nsvrc.org/publications/nsvrc-publications/sexual-assault-demonstration-initiative-final-report

Wade, C. [Cleo]. (2016, August 23). [Instagram post on African American Women's Equal Pay Day]. Retrieved from https://www.instagram.com/p/BJd-ve7AK7w/?utm_source=ig_embed

Yuan, N. P., Koss, M. P., & Stone, M. (2006). *Psychological consequences of sexual trauma.* Retrieved from VAWnet: https://vawnet.org/material/psychological-consequences-sexual-trauma

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