

**INVENTORY OF SERVICES AND FUNDING SOURCES
FOR PROGRAMS DESIGNED TO PREVENT VIOLENCE AGAINST WOMEN**

Conducted by

Westat, Inc.

for

Centers for Disease Control and Prevention
National Center for Injury Prevention and Control

STATE COALITION QUESTIONNAIRE

The information you provide will be used to compile an inventory that will be helpful to public and private organizations that work to prevent violence against women. Your response, though important for an accurate inventory, is voluntary, and failure to provide some or all of the information will in no way affect you or your coalition. This information is solicited under the authority of Public Law 101-558, Section 392(b)(2) of the Public Health Service (42 USC 280b-1(b)(2) as amended.

Throughout this questionnaire, approximations and informed estimates are perfectly acceptable. There is space at the end of the questionnaire for your comments. They will be extremely helpful to us in the preparation of this inventory.

Please return this form by March 29, 1996. Your cooperation in returning the survey questionnaire promptly is essential to the timely completion of the inventory. Please return the completed survey either in the enclosed postage-paid envelope or to the following address:

DV/SA Inventory
Westat, Inc.
1650 Research Boulevard
TA2020F
Rockville, MD 20850

If you have any questions regarding this survey, please contact Terrie Squadere by e-mail at squadet1@westat.com or call Westat's Survey Information Line, toll-free at 1-800-937-8288.

Public reporting burden for this collection of information is estimated to be 45 minutes per survey. Send comments regarding this burden estimate or any other aspect of this survey, including suggestions for reducing this burden, to: Public Health Service, 200 Independence Avenue, S.W., Hubert Humphrey Building, Room 737F, Washington, DC 20201.

INSTRUCTIONS

This questionnaire has been designed to collect information about funding for both **domestic violence** and **sexual assault** services and prevention in your state.

Domestic violence refers to the physical or emotional abuse of a woman by a person with whom she has an intimate relationship. Often the abuser is the husband or domestic partner of the victim. **Sexual assault** refers to rape, attempted rape, or other forms of sexual abuse. The abuser may or may not be known to the victim.

Funding for domestic violence or sexual assault services and prevention includes funds to **support local programs** that provide direct services to victims, to **state coalitions** of local programs, to **other state or local government agencies** or to **nonprofit/nongovernmental agencies** for services or prevention that might include such activities as training law enforcement or medical personnel. These funds may be received from the federal government or raised by the state.

The survey pages are divided into two columns as shown below. Questions on funding for **domestic violence organizations** appear in the left column of the page and questions on funding for **sexual assault organizations** appear in the right column. Please answer the questions in both columns if your coalition is a joint domestic violence/sexual assault coalition. Otherwise, answer questions only in the column that pertains to your coalition. Please watch for instructions to skip questions that may not apply to you.

EXAMPLE:

DOMESTIC VIOLENCE	SEXUAL ASSAULT
1.	1.
2.	2.
3.	3.
ETC.	ETC.

*Thank you for your assistance in completing this survey.
Please keep a copy for your records.*

1. Is your coalition a dual domestic violence/sexual assault coalition?

- Yes..... 1 (Go to question 2.)
- No 2 (Skip question 2. Answer questions in the appropriate column for your coalition.)

2. Can you report separately on funding for domestic violence and funding for sexual assault services and prevention?

- Yes..... 1 (Go to question 3. Answer questions in both columns.)
- No 2 (**FOLLOW INSTRUCTION BOX BELOW.**)

IF YOU CANNOT REPORT SEPARATELY ON FUNDING FOR DOMESTIC VIOLENCE ORGANIZATIONS AND ON FUNDING FOR SEXUAL ASSAULT ORGANIZATIONS, ANSWER IN THE COLUMN THAT IS MOST APPROPRIATE FOR YOUR COALITION.

DOMESTIC VIOLENCE

SEXUAL ASSAULT

3. What year was your state coalition formed and what year was it incorporated?

Year formed 19_____

Year incorporated 19_____

4. When did your most recently completed fiscal year begin? _____/19_____

MONTH YEAR

b. When did it end? _____/19_____

MONTH YEAR

Please respond to the questions in this survey with information about your most recently completed fiscal year.

5. How many full-time-equivalent (FTE) staff members are employed by your coalition? (Full time equals 35 hours per week or more. So, for example, two staff members who each work 20 hours per week would equal one FTE.)

Number of FTE staff members..... _____

6. For the purpose of this study, domestic violence programs are programs that provide direct services to victims of domestic violence or their families, friends, or supporters. Not included are programs that provide services to batterers only. Based on this definition:

- a. How many domestic violence programs are currently in operation in your state?..... _____
- b. Of these, how many are members of the state coalition?..... _____
- c. How many programs in your state are dual domestic violence/sexual assault programs? _____
- d. How many programs currently operate onsite shelter facilities? _____

3. What year was your state coalition formed and what year was it incorporated?

Year formed..... 19_____

Year incorporated..... 19_____

4. When did your most recently completed fiscal year begin? _____/19_____

MONTH YEAR

b. When did it end? _____/19_____

MONTH YEAR

Please respond to the questions in this survey with information about your most recently completed fiscal year.

5. How many full-time-equivalent (FTE) staff members are employed by your coalition? (Full time equals 35 hours per week or more. So, for example, two staff members who each work 20 hours per week would equal one FTE.)

Number of FTE staff members..... _____

6. For the purpose of this study, sexual assault programs are programs that provide 24-hour hotline access with crisis intervention response and additional direct services to victims of sexual assault or their families, friends, or supporters. Not included are programs that provide services to sexual assault offenders only. Based on this definition:

- a. How many sexual assault programs are currently in operation in your state? _____
- b. Of these, how many are members of the state coalition? _____
- c. How many programs in your state are dual domestic violence/sexual assault programs? _____

DOMESTIC VIOLENCE

SEXUAL ASSAULT

DUAL COALITIONS: PLEASE ANSWER IN THE DOMESTIC VIOLENCE COLUMN ONLY FOR QUESTIONS 7 THROUGH 18.

INFORMATION ABOUT YOUR COMPUTER NEEDS AND CAPABILITIES

7. We are interested in how important it is for your coalition to exchange information on line (i.e., via a computer network) with other domestic violence organizations. Whether or not you currently have any computers, please indicate your priority for receiving the following types of information by circling 1, 2, or 3 for each. *(High priority means you are willing to allocate time and money to achieve this capacity.)*

	High priority	Medium priority	Low priority
a. Violence Against Women Act and other federal initiatives.....	1	2	3
b. Availability of public/private grants.....	1	2	3
c. Legislative issues (federal and state).....	1	2	3
d. Domestic violence research and its application to policy, program, education work.....	1	2	3
e. Organizational management...	1	2	3
f. Public policy advocacy.....	1	2	3
g. Media action alerts/information on dealing with the media.....	1	2	3
h. Model programs and policies..	1	2	3
i. Community outreach/public education.....	1	2	3
j. Print/video library listings.....	1	2	3
k. Other (<i>specify</i>) _____	1	2	3

8. Do you have any computers at your site?

Yes..... 1

No..... 2 (*Skip to question 19.*)

9. How many computers do you have? _____

INFORMATION ABOUT YOUR COMPUTER NEEDS AND CAPABILITIES

7. We are interested in how important it is for your coalition to exchange information on line (i.e., via a computer network) with other sexual assault organizations. Whether or not you currently have any computers, please indicate your priority for receiving the following types of information by circling 1, 2, or 3 for each. *(High priority means you are willing to allocate time and money to achieve this capacity.)*

	High priority	Medium priority	Low priority
a. Violence Against Women Act and other federal initiatives.....	1	2	3
b. Availability of public/private grants.....	1	2	3
c. Legislative issues (federal and state).....	1	2	3
d. Sexual assault research and its application to policy, program, education work.....	1	2	3
e. Organizational management..	1	2	3
f. Public policy advocacy.....	1	2	3
g. Media action alerts/information on dealing with the media.....	1	2	3
h. Model programs and policies..	1	2	3
i. Community outreach/public education.....	1	2	3
j. Print/video library listings.....	1	2	3
k. Other (<i>specify</i>) _____	1	2	3

8. Do you have any computers at your site?

Yes..... 1

No..... 2 (*Skip to question 19.*)

9. How many computers do you have? _____

DOMESTIC VIOLENCE

SEXUAL ASSAULT

10. Please record the number of computers in each of the following categories:

	IBM-compatible	Macintosh
a. 286 or older.....	_____	NA
b. 386 or newer	_____	NA
c. Mac 128, Mac Plus, SE, or Classic I	NA	_____
d. Power Mac (RISC) .	NA	_____
e. Other Macintosh.....	NA	_____
f. Other computers (specify) _____	_____	_____
g. _____	_____	_____
h. _____	_____	_____

11. How many computers ...

	IBM-compatible	Macintosh
a. Are laptops?	_____	_____
b. Are connected to a local area network?	_____	_____
c. Are connected to a modem?	_____	_____
d. Have Windows 3.1 installed?	_____	NA
e. Have Windows 95 installed?	_____	NA

12. How many staff are computer...

a. Experts?	_____	
b. Intermediates?	_____	
c. Novices?	_____	

13. Does your budget include a line item for computer hardware, software, or services?

Yes..... 1
 No 2 (Skip to question 15.)

10. Please record the number of computers in each of the following categories:

	IBM-compatible	Macintosh
a. 286 or older	_____	NA
b. 386 or newer	_____	NA
c. Mac 128, Mac Plus, SE, or Classic I.....	NA	_____
d. Power Mac (RISC)..	NA	_____
e. Other Macintosh	NA	_____
f. Other computers (specify) _____	_____	_____
g. _____	_____	_____
h. _____	_____	_____

11. How many computers ...

	IBM-compatible	Macintosh
a. Are laptops?	_____	_____
b. Are connected to a local area network?	_____	_____
c. Are connected to a modem?	_____	_____
d. Have Windows 3.1 installed?	_____	NA
e. Have Windows 95 installed?	_____	NA

12. How many staff are computer...

a. Experts?	_____	
b. Intermediates?	_____	
c. Novices?	_____	

13. Does your budget include a line item for computer hardware, software, or services?

Yes..... 1
 No..... 2 (Skip to question 15.)

DOMESTIC VIOLENCE

14. Approximately how much do you budget annually for computer...
- a. Equipment? \$ _____
 - b. Software? \$ _____
 - c. Training? \$ _____
 - d. Technical support? \$ _____
 - e. Online charges? \$ _____
15. During your most recently completed fiscal year, how much did you spend for computer...
- a. Equipment? \$ _____
 - b. Software? \$ _____
 - c. Training? \$ _____
 - d. Technical support? \$ _____
 - e. Online charges? \$ _____
16. How much would you be willing to pay annually for ongoing access to an electronic network specifically designed to provide information (e.g., on topics listed in question 7), analysis, and discussion areas for domestic violence coalitions and allied organizations?
- a. Up to \$200 1
 - b. Up to \$300 2
 - c. Up to \$400 3
 - d. Up to \$500 4
 - e. Other (*specify*) 5
17. Do you connect to computers outside this site?
- Yes 1
 - No 2 (*Skip to question 19.*)

SEXUAL ASSAULT

14. Approximately how much do you budget annually for computer...
- a. Equipment? \$ _____
 - b. Software? \$ _____
 - c. Training? \$ _____
 - d. Technical support? \$ _____
 - e. Online charges? \$ _____
15. During your most recently completed fiscal year, how much did you spend for computer...
- a. Equipment? \$ _____
 - b. Software? \$ _____
 - c. Training? \$ _____
 - d. Technical support? \$ _____
 - e. Online charges? \$ _____
16. How much would you be willing to pay annually for ongoing access to an electronic network specifically designed to provide information (e.g., on topics listed in question 7), analysis, and discussion areas for sexual assault coalitions and allied organizations?
- a. Up to \$200 1
 - b. Up to \$300 2
 - c. Up to \$400 3
 - d. Up to \$500 4
 - e. Other (*specify*) 5
17. Do you connect to computers outside this site?
- Yes 1
 - No 2 (*Skip to question 19.*)

DOMESTIC VIOLENCE

SEXUAL ASSAULT

18. Please indicate whether or not you connect to each of the following services.

	Yes	No
a. Commercial services:		
America Online	1	2
CompuServe	1	2
Prodigy	1	2
Delphi	1	2
GEnie	1	2
The WELL	1	2
Other (<i>specify</i>)	1	2
b. Special interest services:		
HandsNet	1	2
Women's Wire	1	2
ECHO	1	2
IGC	1	2
TCN	1	2
The Meta Network	1	2
WomensNet	1	2
Other (<i>specify</i>)	1	2
c. Internet:		
Mail lists	1	2
News groups	1	2
World Wide Web	1	2
Partners Against Violence Network (PAVNET)	1	2
HHS Administration for Children and Families	1	2
Minnesota Higher Education Center Against Violence and Abuse Electronic Clearinghouse	1	2
SafetyNet	1	2
Other (<i>specify</i>)	1	2
d. Other:		
Online state legislative information ...	1	2
Local bulletin board systems	1	2
Direct connection to other agencies (<i>please list them below</i>)	1	2

18. Please indicate whether or not you connect to each of the following services.

	Yes	No
a. Commercial services:		
America Online	1	2
CompuServe	1	2
Prodigy	1	2
Delphi	1	2
GEnie	1	2
The WELL	1	2
Other (<i>specify</i>)	1	2
b. Special interest services:		
HandsNet	1	2
Women's Wire	1	2
ECHO	1	2
IGC	1	2
TCN	1	2
The Meta Network	1	2
WomensNet	1	2
Other (<i>specify</i>)	1	2
c. Internet:		
Mail lists	1	2
News groups	1	2
World Wide Web	1	2
Partners Against Violence Network (PAVNET)	1	2
HHS Administration for Children and Families	1	2
Minnesota Higher Education Center Against Violence and Abuse Electronic Clearinghouse	1	2
SafetyNet	1	2
Other (<i>specify</i>)	1	2
d. Other:		
Online state legislative information ..	1	2
Local bulletin board systems	1	2
Direct connection to other agencies (<i>please list them below</i>)	1	2

DOMESTIC VIOLENCE

SEXUAL ASSAULT

INFORMATION ABOUT YOUR STATE COALITION FUNDING

19. What were the total revenues of the state coalition (i.e., federal, state, and other funding) for the most recently completed fiscal year, including those funds you pass through to member programs? \$
20. What was the amount passed to member programs and/or other agencies for direct services during the most recently completed fiscal year? \$ _____
21. What was the amount spent to support the work of the state coalition (i.e., office administration and operating expenses and/or special projects) during your most recently completed fiscal year? \$ _____
22. What was the amount retained by your coalition for expenditures in future fiscal years? \$ _____

The amount at question 20 plus the amount at question 21 plus the amount at question 22 should equal the amount in box at question 19.

INFORMATION ABOUT YOUR STATE COALITION FUNDING

19. What were the total revenues of the state coalition (i.e., federal, state, and other funding) for the most recently completed fiscal year, including those funds you pass through to member programs?..... \$
20. What was the amount passed to member programs and/or other agencies for direct services during the most recently completed fiscal year? \$ _____
21. What was the amount spent to support the work of the state coalition (i.e., office administration and operating expenses and/or special projects) during your most recently completed fiscal year? \$ _____
22. What was the amount retained by your coalition for expenditures in future fiscal years? \$ _____

The amount at question 20 plus the amount at question 21 plus the amount at question 22 should equal the amount in box at question 19.

DOMESTIC VIOLENCE

SEXUAL ASSAULT

DIRECT FEDERAL FUNDING FOR THE STATE COALITION

23. During your most recently completed fiscal year, what was the total amount of funding for domestic violence services and/or prevention received by the coalition **directly** from the **federal government**?

\$

Please specify the source of these federal funds.

<p>24. Total amount from each funding source received directly from the federal government: (See next section for federal funds passed through state government.)</p>	<p>25. Amount passed to member programs from each federal source listed in question 24:</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

<p>a. Family Violence Prevention and Services Act (FVPSA):</p> <p>1. State coalition grant \$ _____</p> <p>2. Other types of discretionary grants \$ _____</p> <p>b. Other (specify) _____ \$ _____</p> <p>c. Other (specify) _____ \$ _____</p> <p>d. Other (specify) _____ \$ _____</p> <p>e. Other (specify) _____ \$ _____</p>	<p>_____ \$ _____</p>
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DIRECT FEDERAL FUNDING FOR THE STATE COALITION

23. During your most recently completed fiscal year, what was the total amount of funding for sexual assault services and/or prevention received by the coalition **directly** from the **federal government**?

\$

Please specify the source of these federal funds.

<p>24. Total amount from each funding source received directly from the federal government: (See next section for federal funds passed through state government.)</p>	<p>25. Amount passed to member programs from each federal source listed in question 24:</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------

<p>a. Family Violence Prevention and Services Act (FVPSA):</p> <p>1. State coalition grant \$ <u>NA</u></p> <p>2. Other types of discretionary grants \$ <u>NA</u></p> <p>b. Other (specify) _____ \$ _____</p> <p>c. Other (specify) _____ \$ _____</p> <p>d. Other (specify) _____ \$ _____</p> <p>e. Other (specify) _____ \$ _____</p>	<p>_____ \$ _____</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------

DOMESTIC VIOLENCE

SEXUAL ASSAULT

STATE FUNDING FOR THE STATE COALITION

26. During your most recently completed fiscal year, what was the total amount of funding received from your **state government** (including state grants and state funds passed through state agencies and federal funds passed through state agencies)?

\$

Please specify the sources of these state funds:

27. Total amount from state-administered funds or state revenue sources or fees and passed through the coalition office:	28. Amount passed to member programs from each state source listed in question 27:
a. Family Violence Prevention and Services Act (FVPSA):	
State formula grant \$ _____	\$ _____
b. Victims of Crime Act (VOCA).....	\$ _____
\$ _____	\$ _____
c. Preventive Health Block Grant	\$ _____
\$ _____	\$ _____
d. Social Services Block Grant (SSBG)	\$ _____
\$ _____	\$ _____
e. Drug-Free Schools and Communities Act	\$ _____
\$ _____	\$ _____
f. Appropriated funds or general state funds	\$ _____
\$ _____	\$ _____
g. Dedicated funds (e.g., marriage license surcharge, divorce fees).....	\$ _____
\$ _____	\$ _____
h. Court fines.....	\$ _____
\$ _____	\$ _____
i. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____
j. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____
k. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____

STATE FUNDING FOR THE STATE COALITION

26. During your most recently completed fiscal year, what was the total amount of funding received from your **state government** (including state grants and state funds passed through state agencies and federal funds passed through state agencies)?.....

\$

Please specify the sources of these state funds:

27. Total amount from state-administered funds or state revenue sources or fees and passed through the coalition office:	28. Amount passed to member programs from each state source listed in question 27:
a. Family Violence Prevention and Services Act (FVPSA):	
State formula grant \$ <u>NA</u>	\$ <u>NA</u>
b. Victims of Crime Act (VOCA)	\$ _____
\$ _____	\$ _____
c. Preventive Health Block Grant	\$ _____
\$ _____	\$ _____
d. Social Services Block Grant (SSBG)	\$ _____
\$ _____	\$ _____
e. Drug-Free Schools and Communities Act	\$ _____
\$ _____	\$ _____
f. Appropriated funds or general state funds	\$ _____
\$ _____	\$ _____
g. Dedicated funds (e.g., marriage license surcharge, divorce fees)	\$ _____
\$ _____	\$ _____
h. Court fines.....	\$ _____
\$ _____	\$ _____
i. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____
j. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____
k. Other (<i>specify</i>) _____	\$ _____
\$ _____	\$ _____

DOMESTIC VIOLENCE

SEXUAL ASSAULT

OTHER SOURCES OF FUNDING FOR THE STATE COALITION

29. During your most recently completed fiscal year, what was the total amount received from sources other than federal or state funds? \$

Please specify other sources of funds below:

30. **Foundation or corporate grants:** total amount received during the most recently completed fiscal year \$ _____

31. **Private donations:** total amount received during the most recently completed fiscal year \$ _____

32. **Local program dues:** total amount received during the most recently completed fiscal year \$ _____

33. **General membership dues:** total amount received during the most recently completed fiscal year \$ _____

34. Other (*specify*)

a. _____ \$ _____

b. _____ \$ _____

c. _____ \$ _____

d. _____ \$ _____

35. Of the total in the box at question 29 (funding from other sources), what amount was passed to member programs? \$ _____

OTHER SOURCES OF FUNDING FOR THE STATE COALITION

29. During your most recently completed fiscal year, what was the total amount received from sources other than federal or state funds? \$

Please specify other sources of funds below:

30. **Foundation or corporate grants:** total amount received during the most recently completed fiscal year \$ _____

31. **Private donations:** total amount received during the most recently completed fiscal year \$ _____

32. **Local program dues:** total amount received during the most recently completed fiscal year \$ _____

33. **General membership dues:** total amount received during the most recently completed fiscal year \$ _____

34. Other (*specify*)

a. _____ \$ _____

b. _____ \$ _____

c. _____ \$ _____

d. _____ \$ _____

35. Of the total in the box at question 29 (funding from other sources), what amount was passed to member programs? \$ _____

DOMESTIC VIOLENCE

SEXUAL ASSAULT

FUNDING FOR DOMESTIC VIOLENCE SERVICES AND PREVENTION THROUGHOUT YOUR STATE

36. Can you provide the amount (or a reasonably accurate estimate) of the **total** funding available in your state for domestic violence services and/or prevention during your most recently completed fiscal year?

Yes..... 1
No..... 2 (Skip to question 40, page 12)

37. During your most recently completed fiscal year, what was the total amount of funding available in your state for domestic violence services and/or prevention (for state and local government agencies, other nonprofits, the coalition office, local programs, etc.)? \$

Is this an estimate? Yes No

38. Of the total amount that was available in your state for domestic violence services and/or prevention, what amount came from federal government agencies? \$ _____

Is this an estimate? Yes No

39. Of the total amount that was available in your state for domestic violence services and/or prevention, what amount was generated by your state government (e.g., from tax revenues, special fees, etc.)? \$ _____

Is this an estimate? Yes No

The amount at question 38 plus the amount at question 39 should equal the amount in box at question 37.

**GO TO PAGE 12:
FEDERAL/STATE AGENCIES PROVIDING FUNDS
FOR DOMESTIC VIOLENCE**

FUNDING FOR SEXUAL ASSAULT SERVICES AND PREVENTION THROUGHOUT YOUR STATE

36. Can you provide the amount (or a reasonably accurate estimate) of the **total** funding available in your state for sexual assault services and/or prevention during your most recently completed fiscal year?

Yes..... 1
No..... 2 (Skip to question 40, page 13)

37. During your most recently completed fiscal year, what was the total amount of funding available in your state for sexual assault services and/or prevention (for state and local government agencies, other nonprofits, the coalition office, local programs, etc.)? \$

Is this an estimate? Yes No

38. Of the total amount that was available in your state for sexual assault services and/or prevention, what amount came from federal government agencies? \$ _____

Is this an estimate? Yes No

39. Of the total amount that was available in your state for sexual assault prevention and/or response, what amount was generated by your state government (e.g., from tax revenues, special fees, etc.)? \$ _____

Is this an estimate? Yes No

The amount at question 38 plus the amount at question 39 should equal the amount in box at question 37.

**GO TO PAGE 13:
FEDERAL/STATE AGENCIES PROVIDING FUNDS
FOR SEXUAL ASSAULT**

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DOMESTIC VIOLENCE

40. What **federal** agencies provide funding for domestic violence services and/or prevention in your state?

a. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

b. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

c. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

41. What **state** agencies provide or administer funding for domestic violence services and/or prevention in your state?

a. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

b. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

c. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

d. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

e. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

**GO TO PAGE 14:
INFORMATION ABOUT STATE COALITION
DOMESTIC VIOLENCE PROGRAMS.**

SEXUAL ASSAULT

40. What **federal** agencies provide funding for sexual assault services and/or prevention in your state?

a. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

b. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

c. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

41. What **state** agencies provide or administer funding for sexual assault services and/or prevention in your state?

a. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

b. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

c. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

d. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

e. Agency _____

Contact person _____ Telephone # _____

Type of funding _____

**GO TO PAGE 14:
INFORMATION ABOUT STATE COALITION
SEXUAL ASSAULT PROGRAMS.**

INFORMATION ABOUT STATE COALITION PROGRAMS

Please keep the following definitions in mind as you answer questions about your state coalition programs:

Direct services are those provided to victims of domestic violence or sexual assault or to their families, friends, or supporters (e.g., emergency shelter, hotline, information and referral, direct legal advocacy services).

Services advocacy includes work to support the growth and development of community-based domestic violence or sexual assault programs in your state, including the provision of training and technical assistance to those providing direct services (e.g., providing training and technical assistance to hotline/shelter workers and legal advocates and developing program standards for domestic violence or sexual assault programs).

Systems advocacy is work to effect policy and/or procedural change in order to improve the institutional response to domestic violence or sexual assault (e.g., developing protocols for medical practitioners, training for those who work in the criminal and civil justice systems, the development of coordinated community interventions, public policy advocacy directed at changing state/local laws, policies, and practices related to domestic violence or sexual assault).

Statewide planning includes needs assessment and planning activities designed to document gaps in current response and prevention efforts and to guide future activities.

Public awareness/community education includes work designed to inform and mobilize the general public around domestic violence or sexual assault issues (e.g., education programs in elementary, middle, and high schools and expanded outreach to underserved populations).

Administration includes activities directed at supporting organizational functioning, such as fiscal and programmatic record keeping, staff management, and fundraising.

DOMESTIC VIOLENCE

SEXUAL ASSAULT

42. During the most recently completed fiscal year, what percentage of the effort of the state domestic violence coalition was spent on each of the following types of programs?

- a. Direct services provided directly by the coalition _____ %
 - b. Services advocacy _____ %
 - c. Systems advocacy _____ %
 - d. Statewide planning _____ %
 - e. Public awareness/community education..... _____ %
 - f. Administration..... _____ %
 - g. Other (*specify*) _____ _____ %
- Total..... 100%

42. During the most recently completed fiscal year, what percentage of the effort of the state sexual assault coalition was spent on each of the following types of programs?

- a. Direct services provided directly by the coalition _____ %
 - b. Services advocacy _____ %
 - c. Systems advocacy _____ %
 - d. Statewide planning _____ %
 - e. Public awareness/community education..... _____ %
 - f. Administration _____ %
 - g. Other (*specify*) _____ _____ %
- Total..... 100%

**GO TO PAGE 16:
INFORMATION ABOUT SPECIAL
DOMESTIC VIOLENCE PROJECTS**

**GO TO PAGE 17:
INFORMATION ABOUT SPECIAL
SEXUAL ASSAULT PROJECTS**

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DOMESTIC VIOLENCE

INFORMATION ABOUT SPECIAL DOMESTIC VIOLENCE PROJECTS

Special projects are discrete projects undertaken at the state coalition level to enhance prevention of and response to domestic violence, including law enforcement training projects, statewide needs assessments, medical advocacy projects, rural outreach projects, etc.

Please give the name and a one-sentence description of the special projects undertaken during your most recently completed fiscal year.

Also indicate the primary purpose of each project by circling a, b, c, d, e, or f.

a. = Direct services; b.= Services advocacy; c. = Systems advocacy; d. = Statewide planning; e. = Public awareness/Community education; f. = Administration

And indicate the primary source of funding by circling 1, 2, 3, or 4.

1 = Federal funding; 2 = State funding; 3 = Other funding; 4 = Pro bono/Volunteer (includes student interns)

43. (Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

44. (Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

45. Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

46. Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

**GO TO PAGE 19 TO PROVIDE SUPPLEMENTAL
INFORMATION ABOUT EACH MEMBER PROGRAM IN
YOUR STATE**

SEXUAL ASSAULT

INFORMATION ABOUT SPECIAL SEXUAL ASSAULT PROJECTS

Special projects are discrete projects undertaken at the state coalition level to enhance prevention of and response to sexual assault, including law enforcement training projects, statewide needs assessments, medical advocacy projects, rural outreach projects, etc.

Please give the name and a one-sentence description of the special projects undertaken during your most recently completed fiscal year.

Also indicate the primary purpose of each project by circling a, b, c, d, e, or f.

a. = Direct services; b.= Services advocacy; c. = Systems advocacy; d. = Statewide planning; e. = Public awareness/Community education; f. = Administration

And indicate the primary source of funding by circling 1, 2, 3, or 4.

1 = Federal funding; 2 = State funding; 3 = Other funding; 4 = Pro bono/volunteer (includes student interns)

43. (Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

44. (Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

45. Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

46. Name) _____

(Description) _____

Primary purpose (circle only one): a b c d e f

Primary funding source (circle only one): 1 2 3 4

**GO TO PAGE 19 TO PROVIDE SUPPLEMENTAL
INFORMATION ABOUT EACH MEMBER PROGRAM IN
YOUR STATE**

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INFORMATION ABOUT MEMBER PROGRAMS IN YOUR STATE

1. Please provide the following information about **each** of the programs that are members of your state coalition: *(PHOTOCOPY BOTH SIDES OF THIS PAGE TO PROVIDE INFORMATION ON ALL PROGRAMS THAT ARE MEMBERS OF YOUR STATE COALITION.)*

Name of program: _____

Address: _____

Contact: _____ Telephone: _____

2. How many years has this program has been a member of the state coalition? _____ years

	Yes	No	Don't know
3. Does this program have specific components for special populations? IF YES:	1	2	8
a. (specify population) _____			
b. (specify population) _____			
c. (specify population) _____			

4. During your most recently completed fiscal year, was this program evaluated (e.g., through oversight of statistical and financial records, site visits, or with reference to specific outcome measures or meeting contractual obligations) by...

	Yes	No	Don't know
a. A state agency?	1	2	8
b. The coalition office or peers?	1	2	8
c. An outside auditor?	1	2	8

5. Is this a domestic violence program, a sexual assault program, or a dual domestic violence/sexual assault program?

- Domestic violence program..... 1 *(Skip to question 7, Column A
Domestic Violence program services)*
- Sexual assault program..... 2 *(Skip to question 7, Column B
Sexual Assault program services)*
- Dual program..... 3 *(Go to question 6)*

6. If a dual program, what percentage of the services of this program are for

- a. Domestic violence? _____ %
- b. Sexual assault? _____ %

7. What services are provided by this program? (Circle yes, no, or don't know for each service provided. Use the left column for domestic violence programs, the right column for sexual assault programs, and both columns for dual programs. Please do not count referrals to other programs.)

A. Domestic violence program services				B. Sexual assault program services			
	Yes	No	Don't know		Yes	No	Don't know
a. Independently run domestic violence hotline	1	2	8	a. Independently run sexual assault hotline	1	2	8
b. Onsite shelter for abused women and their children	1	2	8	b. One-on-one counseling	1	2	8
c. Support group for women	1	2	8	c. Support group for adult women	1	2	8
d. Legal advocacy program	1	2	8	d. Support group for teenage girls	1	2	8
e. Medical advocacy program	1	2	8	e. Support group for male victims.....	1	2	8
f. Specific support program for sheltered children	1	2	8	f. Support group for adult survivors of child sexual abuse	1	2	8
g. Services for non-sheltered children.....	1	2	8	g. Secondary support group for spouses/partners of victims	1	2	8
h. Education programs in elementary or high schools.....	1	2	8	h. Secondary support group for parents of victims.....	1	2	8
i. Education programs in colleges or universities	1	2	8	i. Adult accompaniment and advocacy services	1	2	8
j. Community education programs/speakers bureau.....	1	2	8	j. Child accompaniment and advocacy services	1	2	8
k. Training for professionals (e.g., police, court personnel, social workers)	1	2	8	k. Legal advocacy program	1	2	8
l. Transitional/second stage housing.....	1	2	8	l. Medical advocacy program	1	2	8
m. Treatment/rehabilitation program for batterers	1	2	8	m. Prevention/risk reduction programs in preschool, elementary, middle, or high schools	1	2	8
n. Other (<i>specify</i>) _____	1	2	8	n. Education programs in colleges or universities	1	2	8
_____				o. Community education programs/speakers bureau	1	2	8
				p. Training for professionals (e.g., police, court personnel, social workers).....	1	2	8
				q. Technical assistance .	1	2	8
				r. Treatment/rehabilitation program for sexual offenders.....	1	2	8
				s. Other (<i>specify</i>) _____	1	2	8

PLEASE PROVIDE YOUR COMMENTS ON THE NEXT PAGE.

