Welcome to the Coalition Prevention Infrastructure Questionnaire

Please note that the term "**Coalition**" refers to your State Domestic Violence Coalition (SDVC). This survey has been sent to you as the primary DELTA Impact contact at the Coalition. However, you may complete the survey with any other Coalition staff that you feel would be appropriate. Please submit only ONE survey per Coalition.

Primary Prevention refers to activities and strategies that keep intimate partner violence (IPV) or domestic violence (DV) from first occurring.

Community and Societal Level IPV Prevention refers to prevention strategies that are designed to impact characteristics of the settings (e.g., school, workplace, and neighborhood) in which social relationships occur, or social and physical environment factors such as reducing social isolation, improving economic and housing opportunities, and improving climate within school and workplace settings. This is different from individual level strategies (usually designed to promote attitudes, beliefs, skills, and behaviors) and relationship level strategies (focused on parenting, family, mentoring, or peers to reduce conflict, foster problem solving skills, promote healthy relationships, and address factors related to the social circle, peers, partners, family members and other adult allies who influence an individual behavior and experience).

Program staff refers to any staff at your coalition that work on any programs, practices or policy efforts of the coalition including response. It would not include staff that are only involved in administrative or operational tasks at the Coalition.

Protective factors are characteristics that decrease the likelihood of a person becoming a victim or perpetrator of violence because they provide a buffer against risk. Factors associated with lower chances of perpetrating or experiencing IPV include high empathy, good grades, high verbal IQ, a positive relationship with one's mother, and attachment to school. Community and societal factors such as lower alcohol density, community norms that are intolerant of IPV, and increased economic opportunities may also be protective against IPV.

Risk factor refers to a characteristic that increases the likelihood of a person becoming a victim or perpetrator of violence. Factors that put individuals at risk for perpetrating IPV include (but are not limited to) demographic factors such as age, low income, low educational attainment, and unemployment; childhood history factors such as exposure to violence between parents, experiencing poor parenting, and experiencing child abuse and neglect. Relationship level factors include hostility or conflict in the relationship, aversive family communication and relationships, and having friends who perpetrate/experience IPV. Community and societal level factors include poverty, low social capital, low collective efficacy in neighborhoods, and harmful gender norms in societies.

It should take you no more than 60 minutes to complete this survey.

In what state is your SDVC?_____

Expertise and Knowledge

In general, how knowledgeable is Coalition program staff about preventing domestic violence from first occurring (primary prevention)?

- ◯ Not at all
- ◯ A little
- ◯ Moderately
- ◯ Very

How well do Coalition program staff understand the difference between the primary prevention of IPV and responding to IPV?

- ◯ Not at All
- ◯ A Little
- ◯ Moderately
- ◯ Very

In general, how knowledgeable is Coalition program staff about primary prevention at the community and societal level?

- ◯ Not at all
- ◯ A little
- ◯ Moderately
- ◯ Very

How well do Coalition program staff understand the difference between primary prevention approaches at the individual/relationship level and at the community/societal level?

- ◯ Not at All
- ◯ A Little
- ◯ Moderately
- ◯ Very

In general, how knowledgeable is program staff about the risk and protective factors that IPV shares with other types of violence?

○ Not at all

○ A Little

○ Somewhat

○ Very much

What % of your program staff have previous experience planning and implementing community and societal level primary prevention?

○ none   ○ between 51%-75%

○ less than 25%   ○ more than 75%

○ between 25% and 50%

What % of your program staff have previous experience evaluating community and societal level primary prevention?

○ none   ○ between 51%-75%

○ less than 25%   ○ more than 75%

○ between 25% and 50%

What percentage of your program staff has expertise or knowledge in the area of social norms change (efforts to change group-level beliefs and expectations for behavior)?

○ none   ○ between 51%-75%

○ less than 25%   ○ more than 75%

○ between 25% and 50%

What percentage of your program staff has expertise or knowledge in the area of environmental change (a physical or material change to the social or physical environment)?

○ none   ○ between 51%-75%

○ less than 25%   ○ more than 75%

○ between 25% and 50%

What percentage of your program staff has expertise or knowledge around policy change related to IPV prevention (this includes analyzing data to identify areas where policy change may be needed, analyzing and understanding policy options, collaborating with stakeholders to educate about policy issues, providing evidence and education to key stakeholders and policymakers, educating the public about existing policies, or evaluating the impact of policy efforts or policies)?

○ none

○ less than 25%

○ between 25% and 50%

○ between 51%-75%

○ more than 75%

Is there anything else you would like us to know about the expertise of your Coalition staff as it relates to Community and Societal Level Primary Prevention

Training

To what extent is information or training about community and societal level primary prevention included in new program staff orientation/onboarding?

○ Not included at all

○ We have started discussing this kind of change, but no formal changes to training yet

○ Community and societal level primary prevention is included in trainings, but not as much of a focus as other areas of training

○ Community and societal level primary prevention is included above or at the same level as other areas of training

○ N/A - We do not have a new staff orientation or onboarding process

Is this information is included in new staff orientation or onboarding, is it only provided to program staff that will be directly involved with Community or Societal Level Primary Prevention

○ It is provided only to staff who will be working directly on community or societal level primary prevention

○ It is provided to staff working on any kind of prevention

○ It is provided to all staff regardless of if they are working on prevention or response

○ N/A - Information is not included in new staff orientation or onboarding

To what extent is ongoing training or professional development related to community and societal level primary prevention offered to coalition program staff?

○ Not offered at all

○ We have started discussions, but no formal training opportunities offered yet

○ Community and societal level primary prevention is included in trainings, but is not as much as other areas of professional development/training

○ Community and societal level primary prevention is included above or at the same level as other areas of professional development/training

Are these training opportunities only available to program staff that are directly involved with Community or Societal Level Primary Prevention?

○ It is offered only to staff who are working directly on community or societal level primary prevention

○ It is offered to staff working on any kind of prevention

○ It is offered to all staff regardless of if they are working on prevention or response

○ N/A - Training opportunities are not offered

Is there anything else you would like us to know about training or professional development as it relates to Community and Societal Level Primary Prevention at your Coalition?

Leadership and Prioritization

How much does leadership at the Coalition support IPV prevention efforts compared to other Coalition priorities?

○ A lot lower

○ Somewhat lower

○ About equal

○ Somewhat higher

○ A lot higher

How much does leadership at the Coalition support IPV prevention at the community and societal levels compared to other Coalition priorities?

○ A lot lower

○ Somewhat lower

○ About equal

○ Somewhat higher

○ A lot higher

Across all staff at your Coalition, approximately what percentage of program staff work on primary prevention (versus response) at any level (individual, relationship, community or societal)?

○ none

○ less than 25%

○ between 25% and 50%

○ between 51%-75%

○ more than 75%

Across staff at your Coalition, approximately what percentage of program staff work on primary prevention at the community and societal levels?

○ none

○ less than 25%

○ between 25% and 50%

○ between 51%-75%

○ more than 75%

What percentage of the total programs or policy efforts that the Coalition funds or implements focus on primary prevention?

○ None

○ less than 25%

○ between 25% and 50%

○ between 51%-75%

○ more than 75%

Of the <u>primary prevention</u> programs or policy efforts that the Coalition funds or implements, what percentage focus on <u>community and societal levels</u> (versus individual/relationship level)?

○ none

○ less than 25%

○ between 25% and 50%

○ between 51%-75%

○ more than 75%

In your opinion, which two areas are most important for your Coalition to focus its prevention work on during the next year? (Select Two)

☐ Work internally: spend time defining primary prevention and developing a common language and understanding of community and societal level primary prevention among staff and board members

☐ Change Coalition organizational structures and processes (such as mission statement, job descriptions, meeting agendas and staff retreats) to better support community and societal level primary prevention

☐ Work with Coalition leadership to improve their support for IPV community and societal level primary prevention

☐ Other (please specify)

[   ]

☐ Improve Coalition partnering and coordination of state-level IPV prevention resources and activities

☐ Improve Coalition staffing to support community and societal level primary prevention (such as staff training and time devoted to prevention)

Is there anything else you would like us to know about prioritization of Community and Societal Level Primary Prevention at your Coalition?

[   ]

Structures and Processes

What percentage of time does your prevention workgroup/team/committee focus on primary prevention at the community and societal levels?

○ none   ○ between 51%-75%

○ less than 25%   ○ more than 75%

○ between 25% and 50%   ○ Not Applicable

Does your state Coalition mission statement include primary prevention?

○ Yes

○ No

To what extent does your Coalition's strategic plan (or equivalent document) include discussion of primary prevention?

○ Not at all

○ We have started discussions, but no formal changes yet

○ Prevention is included, but is not as much of a focus as other work of our coalition

○ Prevention is included at the same level of focus as every other focus of our coalition

○ Prevention is included more than other focus areas of our coalition

○ Unsure

Does the strategic plan include specific goals or action steps related to primary prevention at the<u>community and societal level</u>?

○ No

○ We have started discussions but no specific goals or action steps at this time

○ Yes

○ Unsure

To what degree is a shared risk and protective factor framework used when planning the Coalition's work?

○ Not at all

○ A Little

○ A Moderate Amount

○ A Lot

To what extent is your Coalition's strategic plan aligned with the state-level priorities identified in the State Action Plan (SAP)?

○ No alignment

○ Our plan is aligned with a few of the SAP priorities

○ Our plan is aligned with many of the SAP priorities

○ Our plan is aligned with all of the SAP priorities

○ Unsure

Please mark whether your state domestic violence coalition has done any of the following IN THE PAST YEAR: (check all that apply)

☐ Included primary prevention messages in promotion materials (e.g., newsletter, web site)

☐ Made primary prevention resources available (e.g., curricula or materials in resource library, web site)

☐ Distributed written materials specific to primary prevention to your membership agencies

☐ Trained local programs (e.g., victim service providers) on primary prevention

☐ Provided technical assistance to local programs related to primary prevention

☐ Implemented or coordinated online trainings specific to primary prevention of IPV (e.g. webinars, web conferences)

☐ Implemented or coordinated a statewide or regional primary prevention campaign

☐ Implemented or coordinated regional trainings specific to the primary prevention of IPV

☐ Initiated and/or participated in a campaign to secure more state resources or influence statewide policies to promote primary prevention of IPV

☐ Served as IPV prevention representative/expert on state task forces or committee

☐ Added questions concerning IPV risk and protective factors to statewide health survey

To what extent does your Coalition use data (such as publicly available data, surveys, interviews, reports, focus groups) in planning prevention efforts?

○ Not at all

○ A Little

○ A Moderate Amount

○ Very much

To what extent does your Coalition track risk and protective factors related to IPV at the state and/or local level?

○ Not at all

○ A Little

○ A Moderate Amount

○ Very much

To what extent does your Coalition collect information about the outcomes of the primary prevention programs or activities it implements?

○ Not at all

○ A Little

○ Somewhat

○ Very much

To what extent do you feel that the Coalition staff have adequate access to data needed for planning community and societal level IPV primary prevention activities?

○ Not at all

○ A Little

○ Somewhat

○ Very much

Is there anything else you would like us to know about the structure and processes related to primary prevention at your Coalition?

Partnerships

How much interaction, specifically related to primary prevention, has your Coalition had with the following state-level organizations or entities in the past year?

	Yes	No	Don't Know
Governor's Office	○	○	○
Legislators and Politicians	○	○	○
Child Welfare Agencies	○	○	○
Civic/Volunteer Organizations	○	○	○
Cooperative Extension of a University	○	○	○
Racial/Ethnic Organization or Group	○	○	○
Specific Population Focused Organizations or Groups (e.g., Gay/Lesbian, Disability)	○	○	○
Victims Service Providers/Advocates	○	○	○
Domestic Violence Survivors	○	○	○
State Public Health Agency	○	○	○
Department of Education	○	○	○
Health Services (including Mental Health)	○	○	○
College/University/Higher Education	○	○	○
Justice Systems/Courts	○	○	○
Law Enforcement	○	○	○
Local or Regional Government	○	○	○
Military	○	○	○
Religious/Faith-Based Organization	○	○	○
Media	○	○	○

	Yes	No	Don't Know
Youth-Focused Organizations or Groups	○	○	○
Business Leaders	○	○	○
Community Leaders	○	○	○
State Coalitions	○	○	○

Other (please specify)

[   ]

Is there anything else you would like us to know about the partnerships related to primary prevention at your Coalition?

[   ]

Local Coalitions

In general, how knowledgeable are the local IPV community coalitions and providers that you work with about preventing intimate partner violence from first occurring (primary prevention)?

- ○ Not at all
- ○ A Little
- ○ Somewhat
- ○ Very much
- ○ Don't know

In general, how knowledgeable are the local IPV community coalitions and providers that you work with, about community and societal level primary prevention?

- ○ Not at all
- ○ A Little
- ○ Somewhat
- ○ Very much
- ○ Don't know

In general, how would you rate the willingness or openness of the IPV community coalitions and providers that you work with, to implement community and societal level primary prevention?

- ○ Not at all
- ○ A Little
- ○ Somewhat
- ○ Very much
- ○ Don't know

In general, how would you rate the capacity of the IPV community coalitions and providers that you work with, to implement community and societal level primary prevention?

- ○ Not at all
- ○ A Little
- ○ Somewhat
- ○ Very much
- ○ Don't know

In general, how would you rate the capacity of the IPV community coalitions and providers that you work with, to evaluate community and societal level primary prevention?

- ○ Not at all
- ○ A Little
- ○ Somewhat
- ○ Very much
- ○ Don't know

How much do local IPV community coalitions and providers support primary prevention efforts at the individual or relationship levels compared to other priorities?

◯ A lot lower   ◯ Somewhat higher

◯ Somewhat lower   ◯ A lot higher

◯ About equal   ◯ Don't know

How much do local IPV community coalitions and providers support <u>community and societal level</u> primary prevention efforts compared to other priorities?

◯ A lot lower   ◯ Somewhat higher

◯ Somewhat lower   ◯ A lot higher

◯ About equal   ◯ Don't know

Is there anything else you would like us to know related to primary prevention at local coalitions?

Summary

What do you see as the major barriers or challenges to increasing capacity, resources and prioritization of community and societal level primary prevention of IPV?

How can CDC best support you in increasing the resources, capacity and prioritization of community and societal level primary prevention of IPV?

Is there anything else you would like to share with us?

Thank you for taking the time to complete this questionnaire! Please let us know if you have any questions!