

California Statewide Policy Recommendations for the Prevention of Violence Against Women

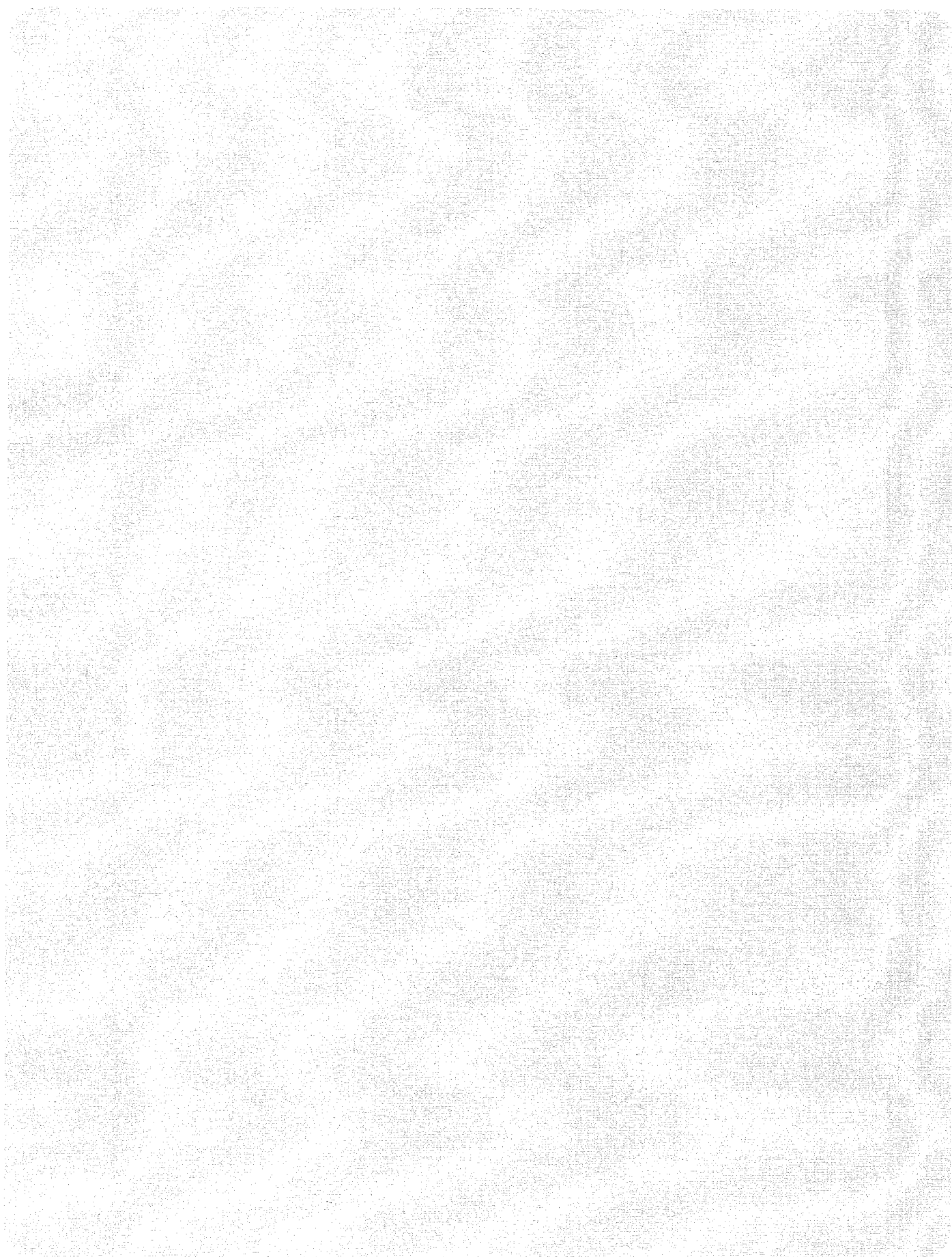
A Final Report to the
National Centers for Disease Control and Prevention

CALIFORNIA DEPARTMENT OF HEALTH SERVICES

EPIDEMIOLOGY AND PREVENTION FOR INJURY CONTROL BRANCH

VIOLENCE AGAINST WOMEN STATEWIDE PREVENTION PROJECT

JUNE 2006

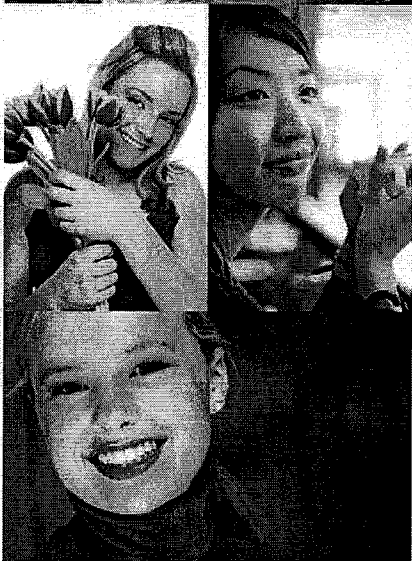




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VIOLENCE AGAINST WOMEN: FROM A WOMAN'S PROBLEM TO A COMMUNITY RESPONSIBILITY

The entire community must take responsibility for ending violence against women. If violence against women is perpetrated primarily by men, it is a men's issue. If violence against women involves the young children who witness it, then it is a children's issue. If violence against women begins in adolescent relationships, it is a critical issue for young men, boys, young women, and girls. Because violence against women can include intimate partner violence, sexual assault, forced prostitution, trafficking, genital mutilation, forced criminal acts, and in many cases homicide, it is also a devastating public health and safety issue that affects us all.

To date, efforts have focused on categorical strategies rather than a comprehensive to intervene and prevent sexual assault, while others strive to end domestic violence, or trafficking. Most of our resources have been spent on a criminal justice response and in providing critical direct services and intervention for women and children. The problem cannot be solved working within a single field or in continuing to focus solely on victims.

The issue of violence against women crosses the boundaries of race, ethnicity, class, socioeconomic status, religion, language, and nationality. If we are to succeed in ending violence against women and girls, we must view it as a human rights issue and draw upon lessons gained from the civil rights movement and other social movements. We must create the norm that it is expected that everyone is safe, and where the entire community shares responsibility for creating an environment that fosters safety for women and children. Men must stand alongside women, sharing the leadership role in initiating actions that demonstrate their commitment to safety and justice for women and girls, and for violence-free communities.

Finally, we will need to ground our efforts in public health practice, utilizing a broad spectrum of approaches, and developing comprehensive linkages among multi-disciplinary groups and systems. Public health practice provides the necessary framework to do prevention work. It seeks to identify the cause of the problem, and then propose strategies to solve it, thereby ultimately preventing it from happening in the first place. This is far "upstream" from most of our current efforts that have been dedicated to helping victims after the damage is done. The need is clear, and a growing willingness exists on the part of communities to pay for prevention.¹ All that remains is to capitalize upon the convictions of constituencies and communities across the state to develop comprehensive, collaborative prevention approaches to end violence against women and girls.

¹ Susan B. Sorenson, PhD, "Funding Public Health: The Public's Willingness to Pay for Domestic Violence Prevention Programming," *American Journal of Public Health* Nov. 2003: 1934-1938.

THIS IS A DIFFERENT KIND OF DOCUMENT

This document is important and noteworthy because it represents agreement on policy recommendations for the prevention of sexual assault, intimate partner violence, trafficking, and other forms of violence against women and girls.

The California Department of Health Services (DHS), with support from the Centers for Disease Control and Prevention (CDC), worked in concert with state agencies, statewide coalitions, and service providers to take a hard look at existing priorities to elevate just a handful of cross-cutting recommendations that would advance the work of us all. The goal was clear: To value work that has already been done, and to identify those priorities that created “common ground.” The question was simple: If you were to make one policy recommendation to facilitate and strengthen our work to prevent violence against women and girls, what would it be? The resulting document was not meant to be a compendium of pressing issues. Thoughtful consensus building has resulted in a concise document to assist policymakers and advocates to translate overarching priorities into action.

DHS convened a multidisciplinary and multisectoral group of stakeholders to identify changes in policy and institutional practice that would prevent all forms of violence against women. The process was guided by a coordinating committee comprised of 18 staff from State Government agencies and statewide coalitions, and 23 statewide representatives (see Acknowledgements). In addition, considerable attention was paid to include the voices of over 30 community-based advocates through regional forums.

To capitalize on previous work, the process included the collection, review, and integration of ideas and policy issues from 22 existing statewide and national planning and policy documents relevant to the prevention of violence against women. This process helped to identify commonalities across issues and elevate important work that has already been done. Staff also conducted interviews with 20 “key informants” who provided statewide or national perspectives.

The resulting policy recommendations emphasize primary prevention to prevent violence from occurring in the first place, and span the full continuum of prevention activities, including responsive services to keep women and girls safe and to prevent further abuse or harm.

PRIORITY POLICY RECOMMENDATIONS

Of the 14 policy recommendations included in this document, 5 were consistently identified as priorities across disciplines, constituencies, planning documents, and key informant interviews, and were viewed as essential to developing an effective prevention platform. Further, constituencies unanimously expressed commitment for taking action on these areas within the next one to three years.

- Support a long-term statewide campaign to shift social norms so that violence against women is no longer tolerated in our society.
- Create common messages that articulate violence against women as a violation of human rights, a serious public health problem, and a threat to public safety.
- Establish policies and programs within local school districts that provide resources and education to create a school environment that exemplifies and supports healthy, violence-free relationships for personnel, families, and students.
- Identify and/or institute incentives, core competencies, and resources for health, mental health, and social service professionals to promote and sustain the prevention, identification, and intervention of violence against women and girls.
- Institute improvements in governmental practice, identifying service gaps, and maximizing use of resources through interagency collaboration.

All 14 policy recommendations are presented for consideration. They are grouped into seven categories to help frame the issues. Each category includes a brief rationale in support of the policy recommendations. Additional background information and documentation to support the recommendations can be found at www.dhs.ca.gov/epic.

CALL TO ACTION

As leaders, stakeholders, and advocates, we must work together to share strategies, leverage our resources, and establish a strong foundation for the prevention of violence against women in California. The Violence Against Women Statewide Prevention Project (VAWSPP) Coordinating Committee has voiced its long-term commitment to developing the strategies and alliances that will work toward the implementation of these policy recommendations. Although the approach for this document was to view violence against women as an inclusive issue, it does not detract from the ongoing efforts of advocates at the state and local level who may tailor these recommendations to their own initiatives, and help further policies within specific constituencies and programs.

For additional information on how to participate in this project, or to share your perspectives on the practical application of the information included in this document, please contact Nancy Bagnato, Project Coordinator, at (916) 552-9846 or nbagnato@dhs.ca.gov. You can find project information, this document, and other background resources at the EPIC website at www.dhs.ca.gov/epic.

SHIFT SOCIAL NORMS TOWARD AN INTOLERANCE OF VIOLENCE AGAINST WOMEN

POLICY RECOMMENDATIONS:

- Support a long-term statewide campaign to change social norms so that violence against women is no longer tolerated in our society.
- Create uniform messages that articulate violence against women as a violation of human rights, a serious public health problem, and a threat to public safety.

RATIONALE:

The prevention of violence against women and girls is a process of changing attitudes, behaviors, beliefs, and institutional norms of "acceptable" violence and discrimination to support the creation of a safe, just, equitable, and healthy environment, so that women and girls and men and boys may live violence-free lives.¹

¹ Marin Abused Women Services, *Transforming Communities Technical Assistance and Training Project*, Marin, California, 2004.

³ California, State of California Department of Health Services, Domestic Violence Advisory Council, *Preventing Domestic Violence: A Blueprint for the 21st Century* (California: GPO, 1998) 22, 27.

⁴ California, Attorney General Daniel Lungren's Policy Council on Violence Prevention, *Violence Prevention: A Vision of Hope* (California: Crime and Violence Prevention Center, Attorney General's Office, 1995) 16-20.

⁵ California, California Coalition Against Sexual Assault, *A Vision to End Sexual Assault: The CALCASA Strategic Forum Report* (California: CALCASA, 2001) 18.

⁶ California, California Institute for Mental Health, *Gender Matters: Building a System of Services and Treatment for Women in California* (California: CIMH, 1999) 20.

⁷ Geneva, World Health Organization, *World Report on Violence and Health* (Switzerland: Office of Publications, 2002) 27, 32.

⁸ Family Violence Prevention Fund, *Promoting Prevention, Targeting Teens: An Emerging Agenda*, (San Francisco, CA: 2003) 14.

The complex nature of violence in our society requires multifaceted approaches that challenge our societal norms and behaviors. Current norms and beliefs about violence against women hold women responsible for violence (she was asking for it), deem it a private issue (it's not in my home), label it appropriate (she deserved it) or in other ways explain it away or make it acceptable. Throughout the review of policy documents and participant responses for this project, the need for long-term statewide campaigns and educational initiatives directed toward challenging the social norms that perpetrate or tolerate violence against women was consistently ranked the highest.³⁴⁵⁶⁷ Toward this end, participants recommended discussing violence against women as a human rights issue within a public health framework.

This thinking was based on evidence that interventions and programs directed at an individual's behaviors and attitudes are ultimately more effective and have a greater chance of permanence if the environment surrounding that individual supports those changes.⁸ Creating an environment that is intolerant of violence against women will have long lasting effects on the attitudes and behaviors in the community as a whole and, as such, will then influence the generations to come.

All aspects of our society must reflect this intolerance if we are to shift social norms and impact the broad spectrum of violence against women and girls. In our homes, our schools, our workplaces, our health care settings, our recreational activities—campaigns and initiatives which use consistent messages and themes must be developed that saturate our lives with positive messages to support, respect, and ensure the safety of women and girls in our communities.

ADVANCE PRIMARY PREVENTION OF VIOLENCE AGAINST WOMEN

POLICY RECOMMENDATION:

- Establish new and/or sustainable sources of state-level funding for violence against women primary prevention programs.

RATIONALE:

Law enforcement and criminal justice responses to violence against women are vital and help victims of violence once it has occurred. But that is not enough. We must concentrate our efforts on the root factors that give rise to violence in the first place refocusing not on women but on the community, and the complex social and cultural factors that contribute to the existence of violence.

Directing resources to primary prevention marks a commitment to turn from expending resources solely on the problem toward expending resources on the solution. Even in times of economic prosperity, resources for preventing violence against women and girls have been inadequate. However, the magnitude of the problem, as indicated in many of the resource planning documents, demands that new funding streams be established and sustained to support both prevention efforts and the evaluation of those efforts.⁹

Research suggests that prevention enjoys high levels of public support across the state. For instance, 94 percent of those surveyed in a cross-sectional sample said they supported primary prevention funding. Similarly, over 70 percent of respondents indicated that they would support any of the following revenue collection methods: increased fees paid by perpetrators, increased marriage license costs, alcohol taxes, a check-off option on tax returns, dedicated license plate frames/holders, taxes on rental and sales of violent videos, as well as surcharges on violent films.¹⁰

Equally important, service providers, although strong advocates for the need for increased funding for critical direct services, are also committed to the need for primary prevention programs and funding specifically earmarked for these purposes. These dedicated professionals see first hand the devastated lives of victims and their families, and want to participate in putting an end to the violence, to stop it from happening in the first place through primary prevention programs.

⁹ World Health Organization 31.

¹⁰ California Attorney General's Office 25.

¹¹ Sorenson 1938.

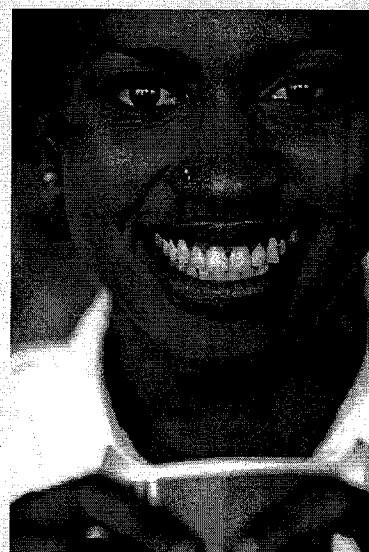
Support for the recommendation also comes from elected officials. For example, in 1995, the California Elected Women's Association for Education and Research (CEWAER) convened a Violence Against Women Summit, where a group of experts evaluated the data and created an important document which identified policy priorities, and articulated specific policy options for both local and state policymakers. These experts called for a statewide prevention initiative to combat violence against women, which included a comprehensive approach to developing prevention programs and public awareness campaigns. Also included was a policy option to establish new fees and tax sources to support violence prevention and public awareness programs.¹

The California State Commission on the Status of Women, with a mandate to advise the Governor and Legislature on issues impacting women, has regularly advocated not only for legislation addressing the issues of violence against women, but also for increased fees to support funding of primary prevention programs.²

Research, leadership, and practice changes follow funding streams. Without dedicated funding for primary prevention programs, there is little chance for sustained and progressive efforts to interrupt the cycle of violence in our communities.

¹ California, California Elected Women's Association for Education and Research, California Women's Health Project, *Violence Against Women in California* (California: CEWAER, 1995) 21-25.

² California, California Commission on the Status of Women, *Special Report on Domestic Violence: A Profile of Legislation from 1984-1994* (California: CCSW, October, 1994).



FOSTER SAFE AND HEALTHY SCHOOL ENVIRONMENTS

POLICY RECOMMENDATION:

- Establish policies and programs within local school districts that provide resources and education to create a school environment that exemplifies and supports healthy, violence-free relationships for personnel, families, and students.

RATIONALE:

Advocates across the state are in agreement that curricula and activities in all schools should include concepts on building healthy, respectful, nonviolent or abusive relationships, and address those attitudes and behaviors that contribute to relationship abuse, sexual assault, stalking, and other issues related to violence against women in our society.^{14,15,16} Research indicates that efforts in middle schools, where children are developing critical social skills and self-image with peers, may be the most important school years for violence prevention programs.¹⁷

Directing physical and sexual assault prevention education toward youth is also critical, since in addition to optimum child development years, young people make up the largest percentage of victims and a large percentage of perpetrators.¹⁸

However, curricula aimed at individual behaviors and attitudes are not enough. Just as critical is creating an overall school climate of respect, healthy relationships, and safety for everyone on the school campus.¹⁹ Advocates and experts in the field of violence against women can provide training and education for school personnel on gender and violence, including training that helps school staff model appropriate behavior in the classroom, in the halls, and on the sports fields.^{20,21,22}

Despite the challenges of building partnerships with schools that are already under significant budgetary and testing pressures, there is reason to be optimistic about developing effective school-based strategies to address violence against women and girls. Research indicates that sustained, long-term, school-based programs have considerable promise as effective tools for preventing violence.²³ In addition, a growing body of literature suggests that young men are uncomfortable when their male peers use language or engage in behavior that contributes to violence against women, and are receptive to messages about manhood that redefine notions of strength and respect and promote healthy relationships.^{24,25}

¹⁴ CALCASA 40, 41.

¹⁵ California Department of Health Services 38.

¹⁶ California Attorney General's Office 20-22.

¹⁷ California Institute for Mental Health 8.

¹⁸ Family Violence Prevention Fund 11.

¹⁹ CALCASA 38.

²⁰ U.S. Department of Health and Human Services, Youth Violence: A report of the Surgeon General, (Rockville, MD: GPO, 2001)

²¹ California Department of Health Services 21.

²² California, State of California, Little Hoover Commission, *Executive Summary* (Sacramento, California: 2001) viii.

The California Department of Education has voiced strong commitment to supporting healthy school environments as reflected in its *Safe Schools: A Planning Guide to Action* which states, "In California, creating safe schools that are conducive to learning is required by the state's Constitution which states in part that all students and staff of public primary, elementary, junior high, and senior high schools have the inalienable right to attend campuses that are safe, secure, and peaceful."¹³

If broad-based commitment and research are not strong enough testimony, it is state law (Education Code Section 35294, Statutes of 1998) that all schools, grades K-12 conduct safe school planning and develop safer schools. In 2002, the Carl Washington School Safety and Violence Prevention Act established funding for schools with grades 8-12 to develop programs that would contribute to providing safe schools and preventing pupil violence. The California Department of Education's *Safe Schools: A Planning Guide to Action* provides a sound framework for schools in support of this Act. Although this guide is a good first step, existing requirements can be strengthened with effective school policies and resources to prevent violence against women and girls.

Development of policies to support existing school-based efforts can best be nurtured by setting up processes that encourage schools and other key stakeholders to come together to figure out appropriate responses, and to institutionalize these efforts. The goal must be to enforce those actions that integrate prevention strategies into all aspects of school activities, and set appropriate responses for intervention and accountability for those acts of abuse and violence that do occur.

And finally, although VAVSPP participants identified schools as a primary strategy, it was also noted that schools are just one example of a system where we can reach young people, impact social norms, and provide educational prevention messages. We need to reach youth with consistent messages across all systems and environments where youth receive education and services.

¹³ California Attorney General's Office 195.

¹⁴ California Institute for Mental Health 8.

¹⁵ World Health Organization 25-26.

¹⁶ Northeastern University's Center for the Study of Sport in Society, "Mentors in Violence Prevention: A Gender Violence Education and Prevention Program," Boston, Massachusetts.

¹⁷ Family Violence Prevention Fund, "Coaching Boys into Men Campaign", San Francisco, California.

¹⁸ SafePlace, "Expect Respect Program," Austin, Texas.

¹⁹ California, California Department of Education, *Safe Schools: A Planning Guide to Action* (California: CDE, 2002) 2.

CREATE DATA, RESEARCH, AND EVALUATION PROTOCOLS

POLICY RECOMMENDATIONS:

- Create a state center of expertise with responsibility for analysis and interpretation of violence against women including: acquiring and analyzing diverse health and police data, providing technical assistance on best practices and program evaluation, coordinating crime victimization surveys, and serving as scientific experts for policy support.
- Create a state capacity to implement regular surveys of victimization of females, conduct analysis, and make victimization data readily available via the Internet.

RATIONALE:

Evaluation of programs and surveillance of violence will put science behind efforts to curb violence to women. Few programs are evaluated or designed according to rigorously proven evaluation of previous programs. Resources and consultation on evaluation and best practices are hard to find. Surveillance information is scattered, confusing, and difficult to acquire. California has no established effort to gain victimization survey data to allow victims to report their experiences, including the many sexual and other violent assaults that are never reported or treated. Thus, we have no systematic method for tracking this large category of violent acts directed at women.

What we need are more effective systems to standardize data collection, articulate data benefits, make data accessible, and study data that have been collected. We must also capture "lessons learned" from the field, cross-train/share best practices statewide, and better publicize what we know works so that research informs practice.

For example, one key strategy for moving our data collection systems forward would be to improve the Office of Statewide Health Planning and Development (OSHPD) capacity to compile emergency department data on intentional injury/violence against women. Managers also need to work with health care providers to more accurately record hospital discharge codes that disclose violent injuries among female patients.

Every local, state, and national policy document acknowledges the need for better data, evaluation, and research on violence against women issues.

Leadership needs to emerge that will prioritize this issue and establish coordinated and effective systems to not only collect essential data across

³⁰ Nevada, National Council of Juvenile and Family Court Judges, Family Violence Department, *Effective Intervention in Domestic Violence and Child Maltreatment Cases: Guidelines for Policy and Practice* (Reno, Nevada: NCJFCJ, 1999) 46-47.

³¹ CALCASA 31.

³² World Health Organization 29.

³³ California Department of Health Services 36, 42.

³⁴ California Attorney General's Office 24.

³⁵ California Little Hoover Commission xxiii.

³⁶ California, California State Leadership Team, California Medical Training Center and Family Violence Prevention Fund, National Standards Campaign, *The Domestic Violence Health Cares Initiative: Strategies to Improve the Health and Safety of Victims of Domestic Violence* (Sacramento, CA: 2004) 13.

California, but to analyze and disseminate this critical information to local and state agencies for application in program and policy development. In addition to data collection, formalized evaluation and research needs to be conducted to gain a better understanding of the work we are doing in this field, and how to efficiently use our resources in future efforts.



INCREASE ACCOUNTABILITY AND RESPONSIBILITY FOR VIOLENCE AGAINST WOMEN

POLICY RECOMMENDATION:

- Identify and support effective recommendations for appropriate identification, intervention, and consequences for those who commit violent acts against women.

RATIONALE:

A comprehensive approach to increasing the accountability of offenders must focus on the development of strategies to discourage these behaviors before they can occur, and when they do occur, to intervene before the violence can escalate.³⁸ To accomplish this, we must address both criminal and noncriminal behavior, and work within all institutionalized settings, such as the workplace, to promote the idea that violence against women—whether it be sexual assault, intimate partner violence, forced illegal acts, or other forms of violence or abuse—will not be tolerated in any form. Additionally, as many cases of abuse and violence against women may go unrecognized and may be linked with other forms of violent and abusive behavior, we must also call upon systems that are working with young offenders of all types of violent crimes to include issues related to violence against women within their intervention strategies.

Constituencies across the state also support the need for enforcing existing legal sanctions, funding probation departments to develop specialized protocols that monitor convicted offenders, and providing increased training within civil and criminal justice systems that define the role and responsibility of each in protecting victims and holding abusers accountable.^{39,40}

However, holding perpetrators of violence against women accountable for their actions is not merely about punishing individuals. It is the fact that there are consequences for those actions that is critical to shifting the underlying societal norms that tolerate violence against women. Criminal justice systems reflect society's determination as to acceptable and unacceptable behaviors. What is needed is a comprehensive, community-centered approach that demonstrates society's intolerance for violence and abuse, and supports strong consequences for those who victimize women and girls.

³⁸ CALCSA 36.

³⁹ California Department of Health Services 20, 25.

³⁹ National Council of Juvenile and Family Court Judges 86-88.

⁴⁰ California Department of Health Services 27.

ENHANCE PREVENTION SERVICES AND RESPONSES TO VIOLENCE AGAINST WOMEN

POLICY RECOMMENDATIONS:

- Identify and/or provide early options for women experiencing violence prior to the need for crisis intervention services.
- Identify and/or institute incentives, core competencies, and resources for health, mental health, and social service professionals to promote and sustain the prevention, identification, and intervention of violence against women and girls.
- State agencies that administer violence against women services are encouraged to establish practices that offer practical solutions and incentives to increase inclusiveness for women with (physical, mental, sensory, and developmental) disabilities and compliance with the Americans with Disabilities Act.
- Establish criteria and guidelines to ensure that all victims of human trafficking have access to comprehensive, culturally sensitive and victim centered services, including the right to health care, social services, and mental health care as well as compensation and restitution.

RATIONALE:

If we are to effectively intervene with victims of violence against women, it is essential that we establish ongoing improvements in the services provided, and in the coordination of these services at the local and state level. To facilitate these improvements, education and training must be conducted for every level of staff and volunteers who may interact with victims and perpetrators of violence against women, including laypersons in communities who may be the first to see signs of violence and abuse.^{41,42,44,45}

⁴⁶These efforts must span the systems of public health, health care, criminal justice, and education as well as related community-based services.

⁴¹ CALCASA 22, 35-40.

⁴² National Council of Juvenile and Family Court Judges 39.

⁴³ California Institute for Mental Health 20.

⁴⁴ California Department of Health Services 16-39.

⁴⁵ California Attorney General's Office 20-23, 172.

⁴⁶ Family Violence Prevention Fund, The Domestic Violence Health Cares Initiative 19.

Conduct Training

Training resources and expertise currently exist in many organizations throughout the state and nationally. And for those who have conducted training, it is clear that training in and of itself will not have the impact on systems that we need in order to prevent violence against women. What is needed are incentives to nurture more support within organizations and systems to operationalize the tenants of training sessions. Examples of incentives could be medical reimbursement, compliance with institutional policies, or any other positive responses that visibly support organizations, providers, advocates, and others in their efforts to build awareness, conduct interventions, or hold perpetrators accountable.

Coordinate Approaches

Additionally, a growing body of clinical experience and research find that child abuse, domestic violence, and youth violence occur in the same families, with devastating effects on children, families, and communities, and are highly associated with similar social and economic factors that put families at risk of exposure to and perpetration of violence.⁴⁷ Despite these connections, separate programs have usually offered interventions that address only one form of violence or abuse, fragmenting responses to families. In addition, service-based responses to families that compartmentalize problems and offer single-issue interventions generally fail to include measures to prevent future violence or abuse.

For these reasons, it is critical that leaders and policy makers promote approaches to break out of “silos” that focus on discrete parts of the problem. More integrated and coordinated responses should address both the manifestations and root causes of the interrelated forms of violence against women and other violence within families.⁴⁸ This is especially important if we are to continually shift toward more primary prevention and reduce the impact of violent acts. New alliances to help intervene as early as possible, prior to the need for shelters and other crisis intervention services, will need to become part of our coordinated approach.

⁴⁷ National Council of Juvenile and Family Court Judges 9.

⁴⁸ California Department of Health Services 38.

Address Diversity

Additionally, in a state the size of California with its tremendous diversity of peoples and languages, it is imperative to extend efforts to reach out to women of all backgrounds. Many women face unique challenges not only in their increased vulnerability to victimization by perpetrators or caregivers, but in accessing information or services to assist them in preventing or stopping the violence or abuse. For example, immigrant women and girls all too often endure abuse because of cultural and linguistic barriers to services and because they are also unaware of their rights. Women and girls with disabilities and elderly women similarly struggle to find appropriate and accessible services. Although the Americans With Disabilities Act addresses many important concerns and requirements related to persons with disabilities, solutions and incentives for the practical application of these requirements are needed.⁴⁹

A generic, one-size-fits-all approach will not suffice. And although there are common issues surrounding violence against women, strategies focused on prevention, as well as the identification, referral, and provision of services or treatment for victims must be tailored to the needs of the women we seek to serve. For example, much work has been done to educate providers on domestic violence or sexual assault, but this does not prepare these providers for the complexities of human trafficking. In fact, few providers are aware that in October 2000 the federal Victims of Trafficking and Violence Protection Act of 2000 was enacted, offering significant protection to victims.⁵⁰ Clearly, resources, training, and education are needed to increase the visibility and magnitude of this problem in our communities. Collaboration at the state level is needed to address the issue of trafficking from a statewide perspective.

⁴⁹ CALCASA 27.

⁵⁰ California Institute for Mental Health 15.

⁵¹ California, California State Leadership Team, California Medical Training Center and Family Violence Prevention Fund, National Standards Campaign, *The Domestic Violence Health Cares Initiative: Strategies to Improve the Health and Safety of Victims of Domestic Violence* (Sacramento, CA: 2004) 11.

⁵² Coalition to Abolish Slavery and Trafficking, Los Angeles, California, 2004.

INCREASE THE EFFECTIVENESS OF GOVERNMENT PRACTICE

POLICY RECOMMENDATIONS:

- Institute improvements in government practice, identify service gaps, and maximize use of resources through interagency collaboration.
- Re-evaluate California's reformed welfare policies to assess how well the needs of families are met within the context of the prevention of violence against women, including housing, adequate support for children, personal safety, and self-protection.
- Establish legislation for the implementation in California of principles from the Convention on the Elimination of Discrimination Against Women.

RATIONALE:

The VAWSP Coordinating Committee, comprised of state agency representatives, recognized the potential for collaboration and coordination on many levels, and made a commitment to work together on identifying effective policy and program changes related to participant recommendations.

For example, steps could be taken to assess the current administrative practices and propose improvements such as planning and coordination of funding cycles, consolidation of funding criteria, and conducting joint training.^{84,85} State agencies could also establish criteria and funding to integrate violence prevention into current services to families and children, such as the Supplemental Food Program for Women, Infants, and Children; Family PACT; Comprehensive Perinatal Services Program; Healthy Start; CalWORKS; etc. In addition, the State could mandate that government contracts and all services or programs funded by the State include requirements for policies and procedures supporting the prevention of violence against women.

Examining and modifying existing state law and administrative policies may also be accomplished without additional funding and, in some cases, may create more cost-effective programs. For example, California's welfare policies could be evaluated to ensure that, whenever possible, we are adding to protections to prevent the unintended consequence of undermining families and modify them to support committed, caring, and responsible family relationships.^{86,87,88}

⁸³ California Department of Health Services 42.

⁸⁴ Little Hoover Commission xv.

⁸⁵ California, California State Leadership Team, California Medical Training Center and Family Violence Prevention Fund, National Standards Campaign, *The Domestic Violence Health Cares Initiative: Strategies to Improve the Health and Safety of Victims of Domestic Violence* (Sacramento, CA: 2004) 21-A.

⁸⁶ California Attorney General's Office 19.

⁸⁷ World Health Organization 28.

⁸⁸ California, California State Leadership Team, California Medical Training Center and Family Violence Prevention Fund, National Standards Campaign, *The Domestic Violence Health Cares Initiative: Strategies to Improve the Health and Safety of Victims of Domestic Violence* (Sacramento, CA: 2004) 10-E.

It is essential that we continue to examine and modify governmental policies, practices, and programs to ensure support for the prevention of violence against women. Toward this end, the formal adoption and implementation of the principles of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) is fundamental in our commitment to address the underlying causes of violence against women.

CEDAW, an international human rights treaty adopted by the United Nations in 1979, provides a universal definition of discrimination against women and brings attention to the range of issues concerning women's human rights, especially in the areas of economic development and employment, violence against women and girls, and health care. Many states and cities (including San Francisco and Los Angeles) have adopted referendums and resolutions supporting the treaty. In 1997, California adopted a resolution, Assembly Joint Resolution 18, which calls for the adoption of CEDAW by the United States. Legislation which calls for the implementation of the principles within CEDAW is necessary if we are to effectively examine, identify, and facilitate policy changes that will hold our institutions accountable to reduce discrimination and ensuring safety and justice for women and girls.



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VAWSPP Coordinating Committee

Gwendolyn Aldridge	California Department of Alcohol and Drug Programs
Vanessa Baird	California Department of Health Services, Office of Multicultural Health
Ellyne Bell	California Alliance Against Domestic Violence
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SUPPORTIVE DOCUMENTS

We would also like to acknowledge the work that produced the following important documents that were referenced and integrated into the process, and that should serve as supportive documentation in the implementation of this document:

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