

## V. Proposal Abstract

The NCCADV/NCCASA Enhancing Rural Strategies (ERS) Project will serve North Carolina adult and child victims of sexual assault and domestic violence. This project is collaboration between the North Carolina Coalition Against Domestic Violence, the North Carolina Coalition Against Sexual Assault, Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter. ERS will serve 11 rural counties.

The goal of ERS is to support and enhance the capacity of our partner rural communities to provide a strong system of direct assistance to survivors of sexual assault and domestic violence and build community capacity to prevent first time perpetration of these crimes, through the creation of Coordinated Community Response (CCR) and Sexual Assault Response Teams (SART). These efforts will increase the capacity of communities to provide coordinated, safe and effective services to victims and to reduce the incidence of these crimes. This goal will be addressed, by September 30, 2014, through the following objectives:

- Increase the identification, assessment of and appropriate response to child, youth and adult victims of sexual assault and domestic violence, in rural communities through building collaborative efforts among sexual assault and domestic violence victim service providers; law enforcement agencies; prosecutors; courts; other criminal justice service providers; human and community service providers; educational institutions; and health care providers; by encouraging and supporting collaboration and coordination of services to victims of sexual assault and domestic violence and their families.
- Increase the safety and well-being of women and children in rural communities by dealing directly, immediately, appropriately and effectively with sexual assault and domestic violence occurring in rural communities; and
- Create and implement relevant strategies to increase awareness and prevent first time perpetration of sexual assault and domestic violence.

A. Purpose of Application

- Describe the geographic area to be served (size and demographics);

Enhancing Rural Strategies (ERS) will serve North Carolina adult and child victims of sexual assault and domestic violence. This project is collaboration between the North Carolina Coalition Against Domestic Violence (NCCADV), the North Carolina Coalition Against Sexual Assault (NCCASA), Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter. The service area includes a total square mile area of 5,425 and a total population of 417,039 (10 local agencies providing services in 11 counties) in the **following counties in North Carolina:** Camden, Cherokee, Cleveland, Hyde, Lee, Mitchell, Pasquotank, Sampson, Tyrrell, Wilson and Yancey.

North Carolina is a geographically large, diverse state. NC is 65% urban and 35% rural compared to the national distribution of 84% urban and 16% rural (Kaiser Family Health Foundation).

NC poverty rates are consistently above US rates. Poverty rates for white North Carolinians (10.4%) are close to the US rate (10.5%). When data for people of color are examined, discrepancies begin to appear. In NC, 16.2% of women (14.7% US) and 13.1%

Below Federal Poverty Rate	White alone	African American alone	Native American alone	Hispanic alone
NC	10.4%	23%	21%	25%
Camden	7%	21%	-	-
Cherokee	15%	23%	13%	21%
Cleveland	10%	12%	13%	33%
Hyde	12%	24%	-	8%
Lee	12%	23%	5%	25%
Mitchell	14%	13%	6%	32%
Pasquotank	8%	33%	29%	19%
Sampson	11%	27%	16%	32%
Tyrrell	11%	40%	-	61%
Wilson	9%	30%	25%	40%
Yancey	15%	23%	5%	44%
AVERAGE	11.3%	24.5%	10%	31.4%

of NC men (11.9% US) are below the poverty level. (2006 Census American Community Survey)

- Identify the problem and describe the need the project intends to address;

ERS will serve North Carolina adult and child victims of sexual assault and domestic violence. It will not address dating violence and stalking. While dating violence and stalking are

important crimes, we believe that by first enhancing and strengthening rural services for SA and DV we will build a strong platform to address dating violence and stalking in the future. The goal of ERS is to support and enhance the capacity of the identified rural communities to provide a strong system of direct assistance to survivors of sexual assault and domestic violence and to build community capacity to prevent first time perpetration of these crimes, through the creation of Coordinated Community Response Teams (CCR) and Sexual Assault Response Teams (SART). These efforts will increase the ability of communities to provide coordinated, safe and effective services to victims and to reduce the long-term incidence of these crimes.

# served in 2009	Domestic Violence	Sexual Assault
Camden	135	49
Cherokee	939	258
Cleveland	1,003	132
Hyde	80	7
Lee	1,944	155
Mitchell.	609	92
Pasquotank	723	158
Sampson	1,046	18
Tyrrell	47	6
Wilson	446	87
Yancey	650	81

NC Dept. Of Administration/Council for Women

In FY 2009-2010, the NC DV service providers responded to 120,666 crisis calls and sheltered 13,513 women and children. In addition, 53,904 individuals were assisted with court and legal issues. Women comprised 85% of the total survivors and men comprised 15%. Children were 46% of the shelter residents. (NC Council for Women/DV Commission)

In FY 2009-2010, NC sexual assault programs answered 22,141 crisis calls and helped 13,392 victims of SA. Women comprised 90% of assault victims. Of the total number of assaults, 35% (4,740) were child sexual offenses. Adult rape accounted for 3,103 and date rape accounted for 983 of the assaults. Educational and professional trainings (12,212) were presented by programs. (NC Council for Women/Domestic Violence Commission)

An August 2000 report by the US DHHS, Emerging Public Policy Issues and Best Practices on Rural Health Response to DV, states: “*Very few data-based studies of rural battered women exist, but the already significant problems of battered women are likely exacerbated by rural factors. Poverty, lack of public transportation systems, shortages of health care providers, under-insurance or lack of*

*health insurance, and decreased access to many resources (such as advanced education, job opportunities and adequate child care) all make it more difficult for rural women to escape abusive relationships."* Research to date has pointed to higher rates of SA and DV in rural communities.

*Describe the services currently provided and resources available, and explain why they are not sufficient;*

The local partner programs all provide or coordinate emergency shelter. All 10 organizations provide 24 hour crisis response, court advocacy, advocacy with other community resources, support groups, transportation, outreach and prevention education, hospital response for victims, referrals for therapy, safety planning, referral for legal assistance and assistance with filling out victims compensation forms. All partners involved in ERS promote the dignity and self sufficiency of victims, improve their access to resources, and create options for victims seeking safety from perpetrator violence, while ensuring that strict confidentiality is maintained.

The gaps identified at both the state and local levels are similar. There is a lack of coordination between agencies and a lack of capacity to work towards primary prevention of SA and DV. This gap impacts the safety of women and decreases the chance that victims will follow through on criminal and civil judicial proceedings. These 10 communities were chosen because each had either a beginning CCR or SART, or the stated community capacity and interest of multiple agencies. Five of the 10 agencies report specific gaps with SANE services and the need for a SART. Also reported are gaps of available affordable housing, transportation, geographic challenges and the difficulty of working within communities where law enforcement and perpetrators are often linked by family and familiarity. Attachment 1 is a chart delineating the services, gaps and how ERS will alleviate these issues.

*Describe how funding will address the identified problem and how the proposed project will help alleviate the gaps in services;*

ERS will work to enhance coordination between community service providers, including: victim advocates, law enforcement officers, pre-trial service personnel, prosecutors, judges and other court personnel, probation and parole officers, and leaders of faith-based and community

organizations, to create SART and/or CCR teams in each community. These teams will increase the identification, assessment of and appropriate response to child, youth and adult victims of SA and DV. Community capacity will increase to deal directly, immediately, and effectively with SA and DV, thereby increasing the safety and well-being of women and children in these rural communities. ERS will also work with local coordinators to create and implement relevant strategies to increase awareness and prevent first time perpetration of SA and DV.

*describe how services and/or activities will be accessed and/or implemented in each county;*

Each county will work closely with either the CCR and/or the SART Specialists to develop an individual, county-driven plan. The plan will address the building of community capacity to provide support and assistance to survivors of sexual assault and domestic violence, and for the primary prevention of these crimes, through the creation of CCR and SART teams. Each local agency will hire a part time local CCR/SART Coordinator to guide the process and ensure that goals and objectives are developed and implemented. NCCADV and NCCASA will support each community through assessment, training, and evaluation.

*Describe how the proposed project complements the priorities included within the State's STOP Violence Against Women Implementation Plan*

Members of NCCADV and NCCASA staff and Boards were integral members of the NC State STOP Violence Against Women Implementation Planning Committee. They were instrumental in the development of the Plan Priorities and Focus Areas. The NC Governor's Crime Commission, NC's STOP program coordinator, places a high emphasis on community collaboration in its grant-making process. This project will support those directives by building the structural capacity of rural communities to have deep and successful collaborations.

The mission of the NC STOP Implementation Plan is to advocate for victims by promoting the development of effective programs that improve the response of human service professionals

and the criminal justice system to crime victims. The Plan highlights the underfunding of sexual assault programs in NC. ERS will help to address this imbalance in rural communities.

*Describe how the proposed project will complement other OVW-funded projects (if applicable), and not duplicate efforts.*

NCCADV's Advocacy Project receives funding from OVW under the Grants to State Coalition program. As an integral part of its activities, the Advocacy Project oversees training and technical assistance for court advocates based in local DV agencies across the state. The Advocacy Project coordinates work with NCCADV's legislative committee and develops materials to inform member programs and allied professionals on advocacy and legislative issues. This project increases public awareness of DV and the Coalition's work through responding to media requests, producing publications and coordinating public awareness events.

ERS will enhance the Advocacy Project through increased outreach to rural communities and efforts to strengthen the network of services and responsiveness to survivors. ERS will coordinate capacity building among a consortium of rural community stakeholders to identify, implement and evaluate CCR and SART teams to support and enhance the capacity of partnering rural communities to provide a strong system of direct assistance to survivors of sexual assault and DV and build to community capacity to prevent first time perpetration of these crimes, through the creation of CCR and SART teams.

#### B. What Will Be Done

*Describe the goals and objectives for the project;*

The overarching goal of ERS is to support and enhance the capacity of the identified rural communities to provide a strong system of direct assistance to survivors of sexual assault and domestic violence and to build community capacity to prevent first time perpetration of these crimes, through the creation of Coordinated Community Response Teams (CCR) and Sexual Assault Response Teams (SART). These efforts will increase the ability of communities to

provide coordinated, safe and effective services to victims and to reduce the long-term incidence of these crimes. This goal will be addressed through the following objectives:

- Increase the identification, assessment of and appropriate response to child, youth and adult victims of SA and DV, in rural communities through building collaborative efforts among SA and DV victim service providers; law enforcement agencies; prosecutors; courts; other criminal justice service providers; community service providers; educational institutions; and health care providers; by supporting collaboration and coordination of services to victims of SA and DV.
- Increase the safety and well-being of women and children in rural communities by dealing directly, immediately, appropriately and effectively with SA and DV occurring in rural communities; and
- Create and implement relevant strategies to increase awareness and prevent first time perpetration of SA and DV.

Describe the specific tasks and activities necessary for accomplishing each goal and objective; Include a timeline that identifies when the tasks and activities will be accomplished;

The National Network to End Domestic Violence and the National Resource Center on Domestic Violence as well as the National Sexual Violence Resource Center have all conducted research in the field of the provision of services to survivors in rural communities This research has identified several common best practice themes. Among these practices are:

- Conducting an in-depth assessment of service providers and the community's ability to effectively respond to the needs of survivors.
- Creation of multidisciplinary teams to: identify local barriers to services; to prevent first time perpetration; and to develop community based solutions;
- Ensuring widespread knowledge throughout the community of available services and creating multiple access points;
- Inclusion of all key stakeholders, including victim advocates, law enforcement officers, pre-trial service personnel, prosecutors, judges and other court personnel, probation and parole officers, and leaders of faith-based and community organizations and especially survivors and those representing traditionally underserved populations.

ERS will incorporate all of these best practices in its design and implementation. The partnering local agencies were selected by NCCADV and NCCASA using a capacity and readiness assessment tool designed by NCCADV (Attachment 2) using indicators from research literature and tools designed by the Centers for Disease Control.

The selected local community partners demonstrate a commitment to partnership with underserved communities, a willingness to attend training and to solicit technical assistance, and the capacity to build strong working relationships among providers/systems to secure funding for the long-term sustainability. NCCASA and NCCADV will provide wrap-around support for the selected communities, including facilitating forums in each community to help broker relationships among key partners, and by providing ongoing training, technical assistance and on-the-ground support for the selected communities. Training and technical assistance will focus on: engagement and partnership with underserved communities; collaborative approaches to services, primary prevention and training to develop capacity to achieve financial stability. Each of the agreements between all parties is outlined in the attached signed MOU.

<b>GOAL: support and enhance the capacity of the ten identified rural communities to provide support and assistance to survivors of sexual assault and domestic violence, and to build community capacity to prevent 1<sup>st</sup> time perpetration of these crimes, through the creation of Coordinated Community (CCR) and Sexual Assault (SART) Response Teams.</b>			
<b>OBJECTIVE 1:</b> Increasing the identification, assessment of and appropriate response to child, youth and adult victims of SA and DV, in rural communities through building collaborative efforts among SA and DV victim service providers; law enforcement agencies; prosecutors; courts; other criminal justice service providers; human and community service providers; educational institutions; and health care providers; by encouraging and supporting collaboration and coordination of services to victims of SA and DV and their families.			
<b>Strategy:</b> Establish cooperative efforts and projects among all key community stakeholders through SART and/or CCR activities to enhance services, investigate and prosecute incidents of SA and DV.			
<b>Activity</b>	<b>Timeframe</b>	<b>Outcome</b>	<b>Evaluation</b>
NCCADV's CCR and/or NCCASA's SART Specialists will provide training to local CCR and/or SART Coordinator on best practices and necessary structures to establish cooperative relationships and projects among all key community stakeholders. Trainings will include a focus on working with underserved communities.	Months 1-5	Local CCR/SART Coordinators will demonstrate increased skills and knowledge about community collaboration, including building sustainable collaborations with underserved communities.	At each training session, training participants (local CCR/SART Coordinators will be asked to complete on-site evaluations indicating their increase in skills and knowledge about community collaboration and sustainable collaborations with underserved communities.
With support from NCCADV CCR Specialist and/or NCCASA SART Specialist, communities will conduct written assessment	Months 2-6 & 20-24	Local CCR/SART Coordinators will have an enhanced understanding of the	Local CCR/SART Coordinators will submit analysis of the service provider assessments.



of service providers to identify strengths and barriers within the community to create a coordinated response to incidents of SA and/or DV.		strengths and barriers to support collaboration among service providers in their communities.	Community assessments will be conducted at the beginning of the project to establish a baseline, and re-administered at the end of the project to measure change in strengths and barriers to community collaboration.
NCCADV CCR Specialist and NCCASA SART Specialist will train local CCR/SART Coordinators on how to establish leadership and structure of CCR/SART.	Months 2-6	Local CCR/SART Coordinators will demonstrate an understanding about effective structures and leadership for community collaboration.	At each training session, training participants and local CCR/SART Coordinators will be asked to complete on-site evaluations indicating their increase in skills and knowledge about community collaboration.
Based on assessment results, local CCR and/or SART Coordinators will invite interested stakeholders to become members of CCR/SART team, establish a leadership structure and begin convening monthly meetings	Months 6-8	Increased collaboration in communities regarding services and prevention initiatives. CCR teams will represent the diversity of their communities.	Local CCR/SART Coordinators will present membership rosters, description of leadership structure, and inclusion plan for underserved communities, and meeting minutes to NCCADV CCR and NCCASA SART Specialists.
<b>OBJECTIVE 2.</b> Increasing the safety and well-being of women and children in rural communities by dealing directly, immediately, appropriately and effectively with SA and DV.			
<b>Strategy:</b> Work in cooperation with the community to develop activities (such as standardization of protocols) that increase coordination of services for victims of SA and DV.			
<b>Activity</b>	<b>Timeframe</b>	<b>Outcome</b>	<b>Evaluation</b>
NCCADV CCR Specialist and NCCASA SART Specialist will provide training on community education and awareness and about creating multiple access points for survivors.	Months 9-12	CCR/SART team members will demonstrate increased knowledge and skills about how to facilitate community awareness and how to create multiple points of entry to service system.	Training participants (local CCR/SART Coordinators will be asked to complete on-site evaluations indicating their increase in skills and knowledge about facilitation of community awareness and creation of multiple points of entry.
NCCADV CCR Specialist and NCCASA SART Specialist will provide technical assistance on facilitating cross-training sessions among providers.	Months 10-13	CCR and SART teams will begin to implement cross-training events.	Local CCR and SART Coordinators will submit to NCCADV and NCCASA reports on number of cross-training sessions conducted.
NCCADV CCR Specialist and NCCASA SART Specialist will provide training and technical assistance as needed concerning the creation of inter-agency referral and service protocols.	Ongoing	Local CCR and SART team member organizations will create inter-agency referral and service protocols.	Local CCR and SART Coordinators will submit samples of newly-developed protocols developed to NCCADV and NCCASA.

NCCASA SANE Consultant will work with local CCR/SART teams and local healthcare providers to establish and/or strengthen SANE programs.	Ongoing	Numbers of survivors who are served by SANE programs will increase in communities served by the SANE Consultant.	Existing SANE programs will be asked to submit baseline and post-project service numbers for people served through SANE project.
<b>OBJECTIVE 3:</b> Creating and implementing relevant strategies to increase awareness and prevent first time perpetration of SA and DV.			
<b>Strategy :</b> State and local CCR/SART Coordinators will work to develop local strategies to increase awareness and change attitudes, norms and policies that condone, support or ignore SA and DV.			
<b>Activity</b>	<b>Timeframe</b>	<b>Outcome</b>	<b>Evaluation</b>
Local CCR/SART Coordinator will receive tools and training from NCCADV and NCCASA about engaging their SART/CCR team to conduct a community-wide forum to assess attitudes, beliefs and behaviors which condone, perpetuate or combat violence against women. They will receive tools to assist with analyzing assessment results.	Months 12-17	Local CCR/SART Coordinators will have the capacity to host community-wide forums about domestic and sexual violence, to assess the attitudes, beliefs and behaviors of community members, and to analyze the assessment results.	Local CCR/SART teams will submit forum plans to NCCADV and NCCASA for review and/or technical assistance as they prepare to host the forums in their areas.
Local CCR/SART teams will plan a community forum on preventing first time perpetration of DV and/or SA.	Months 15-18	Communities will have well-organized and effective forums which assess, educate and engage their community members.	Local CCR/SART teams will submit forum plans to NCCADV and NCCASA for review and/or technical assistance as they prepare to host the forums in their areas.
Local CCR/SART teams will conduct a community forum on preventing first time perpetration of SA and DV.	Months 18-22	CCR/SART team will have an enhanced understanding of the knowledge, attitudes, beliefs and behaviors which may condone, perpetuate or combat violence against women. Community members will have increased participation in primary prevention.	Assessment results will be submitted to NCCADV and NCCASA. Local CCR/SART Coordinators will report to NCCADV and NCCASA the number of new volunteers who are engaged in prevention work as a result of the forums.
Local CCR/SART teams will hold a forum and follow-up meetings for community members interested in developing/engaging in prevention efforts.	Months 22-24	Increased community capacity to prevent SA and DV. Communities will develop a list of focus areas for primary prevention efforts in their areas.	Local CCR/SART Coordinators will submit to NCCADV and NCCASA reports on post-forum activities including focus areas identified and any preliminary action steps identified.

Describe any tangible products that are proposed for development with grant funds,

This project will produce the following products with grant funds:

1. Training Curriculum and Evaluations
  - a. Building, Structuring and Securing Leadership for Coordinated Community Response and Sexual Assault Response Teams.
  - b. Engaging Underserved Communities in Preventing and Responding to Violence Against Women
  - c. Raising Community Awareness and Engagement about Violence Against Women
2. Community Stakeholder Assessment Tool
3. Toolkit for Hosting a Community Forum About Violence Against Women
4. Community Attitudes, Norms and Beliefs About Violence Against Women Assessment Tool
5. Local Inter-Agency Referral and Service Protocols

Detail what you are currently doing to address victim safety and autonomy; describe how you plan to address victim safety and autonomy in the project;

All of the agencies who are participating in ERS have as a central tenet of their work ensuring the safety of all victims. This includes strict confidentiality policies and protocols that cover both the agency and all referrals to other agencies. Programs also meet state guidelines which ensure that safety planning is conducted, facility safety is addressed and that there are no restrictive conditions imposed on victims in order to receive services, such as requiring legal action or alternative dispute resolution settlements. All agencies have broad and inclusive non-discrimination policies that ensure equal access for all victims regardless of age, immigration status, race, ethnicity, religion, sexual orientation, mental health condition, physical health condition, work in the sex industry, or the age and/or gender of their children.

Under the ERS project, NCCADV and NCCASA will provide training to community stakeholders that uphold the safety of victims as the central guiding principle of all services. Practices such as: time limited and specific release of information forms, confidentiality considerations, protocols to ensure that all victims are empowered to make their own autonomous decisions based upon full disclosure of all resources and processes available to them, will be fully covered and implementation will be assessed through training and evaluation.

Describe details of any proposed training or educational course content.

NCCADV and NCCASA will sponsor trainings to build the following skills in the local partner communities: ability to build effective and productive partnerships, meeting facilitation, community-based strategic planning, effective responses to domestic violence and sexual assault, and cultural competence. All of our trainings employ strategies designed to promote adult learning, such as experiential exercises blended with lecture and ample time for discussion and input from the group. We will build these capacities through a combination of on-site, community-specific trainings and statewide trainings marketed to the partner communities. Resource materials will be available in hard copy and electronically, so that partner communities can replicate the trainings in their local area as needed.

#### C. Who Will Implement the Project

Identify the agency (ies) or office(s) responsible for carrying out the activities included within the proposed project;

For 30 years, **NCCADV** has been the leading voice for ending domestic violence in NC.

NCCADV's core services include training, technical assistance and public policy advocacy.

Annually, NCCADV facilitates a wide array of statewide trainings aimed at increasing multiple systemic responses to DV and the skills of DV service provider staff and allied professionals.

**NCCASA** was organized in 1986 to address the issues surrounding SA in North Carolina. NCCASA facilitates a biennial statewide conference with over 150 participants, including rape crisis advocates, law enforcement, nurses, campus administrators and other allied professionals. NCCASA also provides an array of supportive services, technical assistance public policy advocacy and community education for its member programs and allied professionals.

All 10 local agencies are dual DV and SA programs. As such they all provide comprehensive and consistent services to adult and child victims. All have collaborative partners within their respective communities. These partnerships include law enforcement, the court

system, the Departments of Social Services, the hospitals and health care services as well as other important key community stakeholders.

**Albemarle Hopeline**, now in its 29th year of service, provides a comprehensive, consistent response to domestic and sexual violence. Guided by the mission of guaranteeing services until the elimination of these crimes becomes a reality, Hopeline has been innovative in its philosophy and implementation. Hopeline has encouraged community improvement through knowledge, awareness and action. Recognizing the importance of community ownership in ensuring safety and non-violence, Hopeline has promoted collaborative efforts and individual and group participation to address these issues.

**Cleveland County Abuse Prevention Council** is a dual DV/SA agency. APC has a strong relationship with the faith community and routinely receive both monetary and in-kind donations to support the housing, transportation, medication and employment needs of the victims we serve.

**Family Violence Coalition of Yancey County, Inc.’s** (FVC) mission is to provide direct service and support to victims of DV and SA, educate victims about choices/options, and educate the community on the causes of DV/SA as well as the barriers that victims face to prevent the cycle of violence from continuing. FVC is an agency dedicated to helping break the cycle of violence within the community. FVC knows that in order to achieve results it must simultaneously provide education to victims/survivors and the entire community to help prevent violence.

**HAVEN in Lee County** opened its doors in 1985, to serve all victims of DV and SA – men, women and children. Originally staffed by one person, housed in a small downtown office, HAVEN provided crisis intervention and emergency services to victims. Through the years

HAVEN has grown into an 18-member team. The mission of HAVEN is to help people heal from abuse as it works to prevent DV and SA through community education and intervention.

**SafePlace of Mitchell County** was established in 1995. It is the only agency in the community providing housing and services for victims of DV and SA. SafePlace's board reflects a cross-section of the community stakeholders including faith-based organizations, Mitchell County Sheriff Dept., area physicians, the legal community, as well as the financial and business community.

The mission of the **Hyde County Hotline, Inc** is to work to eliminate domestic abuse and sexual victimization in Hyde County, NC through the collaborative efforts of a compassionate community. We promote dignity, respect and safety at home, resulting in safer communities. A long standing community service, the Hotline has deep roots in the community and has begun the development of a CCR team to improve responses to domestic violence, sexual assault and dating violence victims.

The **Tyrrell County Inner Banks Hotline (IBX)** was a program of the Outer Banks Hotline. As of July 2011, Tyrrell County Inner Banks Hotline will be an independent non-profit organization. As an essential part of the Inner Banks community, IBX works daily with individuals, organizations and local agencies to promote a safe and compassionate community to end domestic violence and sexual assault through prevention, education, and volunteerism.

The **Task Force on Family Violence/Reach** has been in Cherokee County for 28 years. REACH has a strong volunteer base. The Task Force on Family Violence/Reach works with both the Murphy and Andrews Police Departments.

The mission of **U Care, Inc.** is to break the cycle of DV and SA in Sampson County and surrounding areas. U Care is committed to the development and utilization of community

resources in an effort to decrease DV and SA through prevention services. U Care has worked diligently to provide free comprehensive services to all victims regardless of age, gender, ethnicity, income, or demographics.

**Wesley Shelter's** mission is to end violence and build healthy, self-sufficient families. In 1983, Wesley Shelter began providing shelter to DV victims and their children. The agency benefits from a broad base of support that includes the faith community as well as state and federal grants, city and county funding, United Way support, private foundation grants and general contributions from local citizens.

**NCCADV** and **NCCASA** have collaborated for more than a decade on many issues affecting the delivery of services for victims of SA and DV locally and statewide. As statewide organizations, there is a strong connection between NCCASA and NCCADV. We have shared the podium on several occasions, in varied counties, regions and statewide arenas, presenting information about our services and options for victims of SA and DV. Representatives from each organization usually intersect bi-monthly at committee meetings, trainings or community outreach events. The two organizations work collaboratively on numerous projects including the implementation of a statewide DV/SA Data Collection System. The organizations work in tandem to implement intimate partner violence and sexual assault prevention activities under the DELTA and EMPOWER programs.

Each organization has a long term relationship and commitment to its members. Each of the identified rural counties in this application is a member of both of the Coalitions. NCCADV has a Rural Training and Technical Assistance Project that works on an in-depth basis with the rural DV programs in North Carolina. Each local partner participated in an initial assessment to determine eligibility for participation and initial capacity. Upon selection, each organization

signed the attached Memorandum of Understanding and when the program begins will be a full partner in the continuing development and direction of ERS.

*Describe the expertise or experience of key staff, or include a description of the qualifications for any positions not filled;*

**NCCADV CCR Specialist:** The CCR Specialist will be responsible for developing and implementing training, technical assistance and on-site support, with SART Specialist and local partners, concerning best practices for community collaboration to respond to and prevent DV. This position will support local communities with coalition-building, data collection, program design and evaluation to enhance their collaborative approaches to DV services and prevention. Qualifications for this position are Bachelor's degree or equivalent experience; experience in DV field, preferably at a rural local community based program; demonstrated experience in technical assistance and training; management and program development experience; excellent writing and communications skills, and commitment to multicultural perspective in outreach, and services delivery and commitment to social change.

**NCCADV Financial Coordinator:** Bruce Clatterbuck has over 18 years of experience with non-profits in the finance and administrative arenas. Under this project the Financial Coordinator will ensure that all cost reports are completed and submitted in a timely manner; that all partners submit accurate and complete requests from NCCADV and that all appropriate financial reports and accounting practices are observed. Primary duties with NCCADV include accounts payable and receivable, financial grant reporting to government agencies and other funders, implementation and oversight of administrative policies and procedures and human resource management, including payroll and related benefits.

*Partner Project Staff:*

**NCCASA Executive Director:** Monika Johnson-Hostler is the Executive Director of the NC Coalition Against Sexual Assault. She has been with NCCASA since 1999. Monika has been working to end SA and DV for the past 13 years, both on the local and national level. Monika



serves as the first woman of color to be the board president of the National Alliance to End Sexual Violence. She serves on various boards and committees, and she was recently appointed by the Lt. Governor to the North Carolina Criminal Justice Partnership and by Secretary General Holder to the National Advisory Committee on Violence Against Women.

**NCCASA SART Specialist** will be responsible for, in collaboration with NCCADV and project partners, developing and implementing educational and training materials; providing training and technical assistance to local partners, and supervising the SANE consultant. Qualifications for this position are Bachelor's degree or equivalent experience; experience in sexual assault field, preferably at a rural local community based program; demonstrated experience in technical assistance and training; management and program development experience; excellent writing and communications skills, and commitment to multicultural perspective in outreach, and services delivery and commitment to social change.

**NCCASA SANE Consultant:** will work with hospitals, SANEs to develop protocol; work with NCIAFN to provide training and TA qualification-SANE certified. Qualifications include at least 3 years experience as a SANE.

**Albemarle Hopeline:** The Executive Director directs, administrates and supervises all activities and personnel of Albemarle Hopeline and provides counseling support as needed. An MSW, LCSW, she has provided leadership and consistency for more than 27 years. She has served on both state and local committees/boards to promote the elimination of DV and SA, to ensure victim rights, and the improvement of community services. The Director of Non-Residential Services coordinates, oversees, and/or provides comprehensive clinical services to all Hopeline clients who are victims of DV and/or SA. With 10 years of agency service, she holds an MSW, LCSW and has received specialized training in DV and SA.

**Cleveland County APC:** The Executive Director, an MSW, has 20 years experience working with not for profit and government programs and has been with this agency for two years. The Executive Director is responsible for staff hiring, ensuring the provision of quality services by evaluation of staff and programs, training and supervision, procurement of funds, ensuring internal controls compliance, grant writing, community education and public relations. The Director of Counseling and Outreach Services, an LPC, with 15 years experience working with victims of DV and SA would be responsible for supervising a CCR/SART coordinator.

**FVC Yancey County:** The Executive Director handles public relations activities, client relations and interagency relations functions. She interprets the function of the agency to the community through direct involvement by personal contact, program literature and the media. She is responsible for maintaining effective client relations under all agency programs and appropriate relations with other professional and social agencies in the community and coordination with funding sources, federal, state and government units and other agencies.

**Haven in Lee County:** The Executive Director/Victims Advocate will be the key staff involved with this project. The current ED has been in this position for 3 years. The CCR/SART Coordinator will provide administrative support the Task Force, provide input regarding protocol, and be integral in establishing members of and organizing trainings and meetings for the Task Force. Ideally this person would be trained in a field directly related to DV and SA and would have some previous experience as a part of a CCR/SART Task Force.

**Mitchell County SafePlace:** The Executive Director, in addition to the normal roles and responsibilities of an ED, will oversee the implementation of ERS in Mitchell County. This will include the hiring and supervision of a CCR/SART Coordinator as well as ensuring that all grant requirements, including statistical and fiscal data are collected and submitted as required.

**Hyde County Hotline, Inc:** The Executive Director has worked in the domestic violence and sexual assault advocacy field for over 10 years. She is committed to the establishment of ongoing services that are designed to provide relief to survivors and their families. She recently completed the Duke University Intensive Track Course for Nonprofit Management. In addition to the regular roles and responsibilities of an ED she will oversee the work of ERS in Hyde County. Community outreach and prevention are a primary focus of her work at this time.

**Tyrrell County Inner Banks Hotline:** The Executive Director has worked at the Hotline for 2 years. Prior to this she was the site director for a local after school program for 8 years. She is deeply connected to the Tyrrell County community and has served as a member, and as Chair, of the Tyrrell County Board of Education for many years. Her unique position within the community has increased the strength of the collaborative network within Tyrrell County that addresses the response to survivors of sexual and domestic violence.

**Family Violence Task Force/REACH:** The Executive Director, Vicky Taylor has worked for REACH since 1993 and has been the executive director since 2000. Within this project she will work closely with the CCR/SART Coordinator to increase collaboration with other local agencies and build community capacity to enhance services to DV and SA survivors.

**U Care, Inc.:** Executive Director has a BA in Psychology with a concentration in Social Work. She is bilingual in Spanish and a native of the County. The Director is well known for her proactive approach involving community action in all areas. She is a survivor of DV and SA. The Sexual Assault Coordinator and the Court Advocate will also be involved in this project as they can help the Project Coordinator gain a firm understanding of the area, trends, and by using their own connections in the community to open doors.

**Wesley Shelter:** The Executive Director helped to start Wesley Shelter 27 years ago. She has had extensive training in the area of domestic violence. She has a BS in Business. As a lifelong resident of Wilson, she has served on numerous local boards within the community and has worked as a volunteer throughout the community. She has served as ED for Wesley Shelter for the past 2 years. She will be responsible for the oversight of this project, staff supervision and the overall implementation of ERS in Wilson County.

*Identify and describe the role of any and all project partners, specifying their respective responsibilities, and the collective relationship to be developed or enhanced.*

As the lead organization and applicant, NCCADV will assume the role and responsibilities involved in administering the grant funds; implementing the training provisions under the grant, including oversight of the terms and responsibilities of the MOU; providing an accounting system to account for grant expenditures; preparing and timely submitting quarterly and financial reports to OVW; employing personnel to perform services pursuant to the grant terms; providing supervision for grant personnel; collecting and maintaining required statistical information on services provided under the grant in order to determine baseline data to measure project impact and reporting on the progress toward goals semi-annually and at the end of the project; participating in grant evaluation; and monitoring, making adjustments as necessary during the term of the grant mutually agreed upon by the partners; attending regularly scheduled partner meetings; and participating in outreach.

NCCADV will provide support, guidance and facilitation in the development and implementation of all activities necessary to create CCR teams in the identified communities. This will include, but is not limited to: training, technical assistance, meeting and group facilitation, on-on-one support and other identified capacity building activities.

NCCASA will employ a SART Specialist and secure the services of a consultant who specializes in SANE training and incorporation of SANE policies within the hospital setting.

NCCASA will be responsible for providing support, guidance and facilitation in the development and implementation of all activities necessary to create SART teams in the identified communities. This will include, but is not limited to: training, technical assistance, meeting and group facilitation, on-on-one support and other identified capacity building activities.

With support from the appropriate CCR or SART Specialist, each partner will: develop a community based multidisciplinary group of key stakeholders; conduct an assessment about barriers and strengths for enhanced collaboration; recruit a diverse team of allies to form a CCR/SART team in their community, develop a community specific set of deliverables (such as a certain number of trained SANEs) to be completed by the end of the grant period; conduct a community assessment to gauge attitudes about violence against women; host a community-wide forum to present results and increase buy-in to prevention and intervention activities; use results of community assessment to provide the basis for the future development of a 1-2 year plan for intervention and prevention activities which will include a sustainability plan; participate in all meetings of ERS Project partners (held quarterly), and participate in train the trainer activities so that the model developed under this grant can be shared with other communities.

#### D. Sustainability Plan

ERS will work with each community to employ community organizing as its primary change strategy. Through this process, community partners and local leaders will be identified who can continue to carry this work out through their own auspices. This model will help to ensure the long-term sustainability of the project, as well as its success, by providing community-based ownership of the change it seeks to create. In addition, NCCADV has a clear commitment to the initiatives outlined within this application; to this end, we will continue to seek federal, state and foundation funds to support these initiatives and will also dedicate our unrestricted resources when needed to see these activities to fruition.

**Enhancing Rural Strategies 2011-2014  
Budget Narrative and Summary**

This budget represents the costs associated with the Enhancing Rural Strategies program undertaken by NCCADV in partnership with NCCASA, Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter as delineated in the attached program narrative and Memorandum of Understanding.

**A. Personnel**

**Total \$159,016.00**

<i>Position Title and Name</i>	<i>Annual</i>	<i>Time</i>	<i>Months</i>	<i>Amount Requested</i>
CCR Specialist, To Be Hired	\$48,000.00 (yr 1) \$50,400.00 (yr 2) \$52,920.00 (yr 3)	100%	36	\$151,320.00
Financial Coordinator, Bruce Clatterbuck	\$48,825.00 (yr 1) \$51,266.00 (yr 2) \$53,829.00 (yr 3)	5% 5% 5%	36	\$ 7,696.00

**CCR Specialist- To Be Hired-** The CCR Specialist will be responsible for developing and implementing training, technical assistance and on-site support, with NCCASA SART Specialist and local partners, concerning best practices for community collaboration to respond to and prevent domestic violence. This position will support local communities with coalition-building, data collection, program design and evaluation to enhance their collaborative approaches to domestic violence services and prevention. Qualifications for this position are Bachelor’s degree or equivalent experience; experience in domestic violence field, preferably at a rural local community based program; demonstrated experience in technical assistance and training; management and program development experience; excellent writing and communications skills,

and commitment to multicultural perspective in outreach, and services delivery and commitment to social change.

**Financial Coordinator-** Bruce Clatterbuck- Under this project the Financial Coordinator will ensure that all cost reports are completed and submitted in a timely manner; that all partners submit accurate and complete requests from NCCADV and that all appropriate financial reports and accounting practices are observed.

**B. Fringe Benefits Total \$ 60,724.00**

Fringe benefits are calculated according to the following formulas:

FICA 7.65% of \$159,016	=	\$ 12,165.00
Health Insurance based on average of employees at \$10,300 /FTE	=	\$ 35,535.00
Workers Comp. 0.15% of \$159,016	=	\$ 2,385.00
Unemployment .7% of \$159,016	=	\$ 1,114.00
Retirement 5% of salary	=	\$ 7,951.00
Staff Parking \$500 per year per FTE	=	\$ 1,575.00
<b>Total:</b>		<b>\$ 60,724.00</b>

**C. Travel Total \$16,620.00**

Purpose of Travel	Location	Item	Computation	Cost
OVW mandated Training and Technical Assistance	TBA	Airfare (avg)	\$510 x 3 people x3 trips	\$ 4,590.00
		Hotel (avg)	\$100 x 3 nights x 3 people x 3 trips	\$ 2,700.00
		Per Diem (avg)	\$50/day x 3 days x 3 people x 3 trips	\$ 1,350.00
To / From Airport	TBA	TAXI	\$100/roundtrip x 3 trips	\$ 300.00
Local NC Travel to meet with communities-	In state	mileage	6,615 miles x .39/mile	\$ 2,580.00
	1 x 10 counties x 3 years	In State lodging	\$70/night	\$ 2,100.00
	2 days x 10 counties x 3 years	In State Per Diem	\$50/day	\$ 3,000.00
<b>Total</b>				<b>\$16,620.00</b>

\$8,940 of the required \$15,000 in OVW mandated technical assistance and training funds has been allocated to cover the cost of travel for NCCADV staff in accordance with program guidelines. The applicant's travel policies have been applied. Travel estimates are based on the agency's written travel policies. National meetings are based on average travel from North Carolina for 3 persons per training for 1 training per year (3 during the grant period) to OVW sponsored training and technical assistance events.

**D. Equipment** **Total \$ -0-**

**E. Supplies** **Total \$14,862.00**

*Lap top Computer, Docking Station and peripherals* *\$1,200.00*

This line item represents the cost of a laptop computer, docking station, monitor and associated peripherals for the CCR Specialist. The CCR Specialist will need this item to perform the responsibilities of the position.

*Office Supplies -* *\$ 7,022.00*

This line item is for office supplies such as paper, note pads, pens, pencils and in house copying. \$195.00 per month for 36 months

*Postage-* *\$ 1,795.00*

\$49.86 per month for 36 months

*Subscriptions, Publications and Dues* *\$4,845.00*

\$134.58 per month for 36 months This line item covers the cost for dues to national organizations (such as NNEDV) and the costs for project-relevant publications. Costs are shared across agency programs on a pro rata share of the total cost.



**F. Construction Costs** **Total \$ -0-**

**G. Consultants and Contracts** **\$853,493.00**

***Local Partner agencies (CCR/SART Coordinators)*** **\$630,500.00**

Each of the 10 local partner agencies will receive \$20,000 in the first year, 21,000 in the second year and 22,050 in the 3<sup>rd</sup> year for a total of \$63,050 to hire a part time CCR/SART Coordinator. These positions (10) will be responsible for the coordination of all CCR/SART activities within their local communities; development of relationships and strengthening ties amongst local providers, hospitals, law enforcement, pre-trial service personnel, prosecutors, judges and other court personnel, probation and parole officers, schools, faith communities, judicial districts and other community groups; coordination of local training and technical assistance needs; provision of statistical and other reporting requirements of the project. These positions will work in collaboration with the NCCADV CCR and the NCCASA SART Specialists to fulfill all agreements and activities as delineated in the Memorandum of Understanding, signed by the applicant and all partners.

***NCCASA Contractual Costs*** **\$204,913.00**

This figure represents all NCCASA costs associated with the partnership undertaken by NCCASA with NCCADV and Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter as delineated in the attached Memorandum of Understanding.

These costs will include personnel (SART Specialist and a percentage of the Executive Director’s time), associated fringe benefits and supplies as necessary to fulfill the duties of the contract and the attached Memorandum of Understanding.

**NCCASA SART Specialist** will be responsible for, in collaboration with NCCADV and project partners, developing and implementing educational and training materials; providing training and technical assistance to local partners, and supervising the SANE consultant.

**NCCASA Executive Director:** Monika Johnson Hostler is responsible for ensuring the provision of training and TA services, overall program supervision and coordination with the organizational mission and vision.

NCCASA will contract with a SANE Consultant to facilitate the obligation of the ERS MOU.

**SANE Consultant** this consultant will work with local hospitals, local SANEs to develop protocol; work with NCIAFN to provide training and TA qualification-SANE certified;

Qualifications include having worked as a Sane at least 3 years. This position will be reimbursed at \$56.25 per hour.

*NCCASA Travel*

**\$ 11,610.00**

<b>Purpose of Travel</b>	<b>Location</b>	<b>Item</b>	<b>Computation</b>	<b>Cost</b>
OVW mandated Training and Technical Assistance	TBA	Airfare	\$510 x 2 people x3 trips	\$ 3,060.00
		Hotel	\$100 x 3 nights x 2 people x 3 trips	\$ 1,800.00
		Meals	\$50/day x 3 days x 2 people x 3 trips	\$ 900.00
To / From Airport Travel for mandatory training	TBA	Taxi	\$100/roundtrip x 3 trips	\$ 300.00
Local NC Travel to meet with communities-	In state	mileage	6,538 miles x .39/mile	\$ 2,550.00
	2 days x 10	In State Per Diem	\$50/day	\$ 3,000.00

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	counties x 3 years			
<b>Total</b>				<b>\$ 11,610.00</b>

\$6,060 of the required \$15,000 in OVW mandated technical assistance and training funds has been allocated to cover the cost of travel for NCCASA staff in accordance with program guidelines. The applicant’s travel policies have been applied. Travel estimates are based on the agency’s written travel policies. National meetings are based on average travel from North Carolina for 3 persons per training for 1 training per year (3 during the grant period) to OVW sponsored training and technical assistance events.

***Other Contractual Labor***

**\$ 6,470.00**

*NCCADV Computer Technical Support*

**\$ 3,163.00**

Computer technical support is necessary to ensure that all technology performs smoothly, with full integration into the agency network and that technology is maintained at optimum capacity.

This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project. We estimate 53 hours at \$60 per hour dedicated to ERS.

*NCCADV Web Site Updates*

**\$ 1053.00**

The NCCADV website is used as a means of communication with member programs. This is especially true for rural programs where income for transportation and travel costs are limited and expenses are higher. The website is a portal for technical assistance and access to the electronic library and a multitude of resources. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project. We estimate 18 hours at \$60 per hour dedicated to ERS.

*NCCADV Outsourced Printing and Publication Design*

**\$ 2,254.00**

This line item represents the cost for the preparation of printed materials for training, outreach and education for local programs and communities. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project.

**H. Other** **Total \$45,293.00**  
*Professional Liability Insurance* *\$ 1,667.00*

This line item represents a portion of the cost of Director's and Liability Insurance. This protection is critical coverage to ensure organizational safety and compliance with government regulations. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project.

*Communications (cell phones and land line)* *\$ 6,846.00*

Cell phone and office telephone are critical components to ensure that staff is available to the partner programs. The CCR Specialist will be traveling extensively and will need to have a cell phone to remain available. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project

*Equipment leasing and maintenance* *\$ 3,932.00*

This line item covers the cost of copier and postage meter leasing and maintenance. These items are necessary so that staff can readily produce in house materials for the provision of training and technical assistance to the local programs. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project.

*Rent* *\$ 29,583.00*

NCCADV leases office space to house staff members and provide a central meeting place in the state to house statewide meetings on an as needed basis. This figure is based on agency actual

costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project. Total agency cost is \$82,660.00 per year- \$16.67 per square feet for 4,960 sq. feet. This cost is in line with fair market value in the area.

*Staff Training Registration* \$ 1,405.00

This line item covers the cost for training registrations for project staff (for trainings other than OVW sponsored training) and staff development activities such as job specific skill development. These activities are necessary to ensure that NCCADV staff are current on the most recent best practices in the field. This figure is based on agency actual costs, divided by the number of employees and multiplied by the number of FTEs dedicated to this project.

*Speaker's Fees* \$ 983.00

Outside speakers will be engaged to provide additional training to local communities on strategies for developing and maintaining CCR and SAR Teams. Speakers will be paid a minimal stipend, not to exceed \$250 per training, to offset their time and travel costs.

*Training Site Rental* \$ 877.00

This line item represents the cost of renting training sites in the rural communities to host trainings and community forums. All efforts will be made in all instances to procure reduced rental fees or in kind donated training sites.

**Indirect Cost** **Total -0-**

**Budget Summary:**

A. Personnel	\$ 159,016.00
B. Fringe Benefits	\$ 60,724.00
C. Travel	\$ 16,620.00
D. Equipment	\$ -0-
E. Supplies	\$ 14,862.00
F. Contractual Costs	\$ 853,493.00
G. Construction	\$ -0-
H. Other	\$ 45,293.00
I. Indirect Cost	\$ -0-
<b>Total Request</b>	<b>\$ 1,150,008.00</b>

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	2011- 2012	FTE %	Year 1	2012- 2013	FTE %	Year 2	2013- 2014	FTE %	Year 3	Total all 3 years
<b>Financial Coordinator</b>	48825	0.05	2441.25	51266	0.05	2563.3	53829	0.05	2691.45	7696
<b>Rural CCR Specialist</b>	48000	1	48000	50400	1	50400	52920	1	52920	151320
<b>Total Salaries</b>	96825	1.05	50441.25	101666	1.05	52963.3	106749	1.05	55611.5	159016
<b>Employer FICA</b>			3859			4052			4254	12165
<b>Insurance Premiums</b>			10815			11845			12875	35535
<b>Retirement (@ 5%)</b>			2522			2648			2781	7951
<b>Unemployment Insurance (SUI)</b>			353			371			389	1113
<b>Workers' Compensation</b>			757			794			834	2385
<b>Staff Parking</b>			525			525			525	1575
<b>Total Benefits</b>			18831			20235			21658	60724
<b>Total Personnel</b>			69272			73198			77270	219740
<b>Contract/Consultants</b>										
<b>NCCASA contract</b>			68683			72117			75723	216523 <small>includes national and local travel</small>
<b>Local programs- CCR/SAR Team Coordinators</b>			200000			210000			220500	630500
<b>Website Updates</b>	3037.5		334	3189		351	3349		368	1053
<b>Publications and Printing (Out-</b>	6500		715	6825		751	7166		788	2254
<b>Computer Technical Support</b>	9121		1003	9577		1053	10056		1106	3162
<b>total contract/consultants</b>			270735			284272			298485	853493
<b>Operating Expenses</b>										
<b>Agency (D&amp;O Liability) Insuran</b>	4809		529	5049		555	5302		583	1667 other
<b>Communications</b>	19744		2172	20731		2280	21768		2394	6846 other
<b>Equipment Lease and Maintain</b>	11340		1247	11907		1310	12502		1375	3932 other
<b>Office Operating</b>	20250		3428	21263		2339	22326		2456	8222 <small>supplies + laptop and peripherals</small>

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VIII- Budget

<b>Postage</b>	5177	569	5436	598	5708	628	1795 supplies
<b>Rent - Durham Office</b>	85308	9384	89573	9853	94052	10346	29583 other
<b>Staff Development &amp; Recogniti</b>	4050	446	4253	468	4465	491	1405 other
<b>Subs, Pubs &amp; Dues</b>	13973	1536	14672	1614	15405	1695	4845 supplies
<b>Staff Travel - in state</b>	38148	2560	40055	2560	42058	2560	7680 travel- see narrative
<b>Nat'l OVW Travel</b>		2980		2980		2980	8940 travel- see narrative
<b>total operating</b>		24851		24557		25508	74916
<b>8410 · Speaker Fees</b>	2835	312	2977	327	3126	344	983 other
<b>8420 · Training Site Rental</b>	2531	278	2658	292	2790	307	877 other
<b>total training</b>		590		619		651	1860
<b>Total Cost</b>		365448		382647		401914	1150008





**123 W. Main Street. Suite 700. Durham,  
Durham, North Carolina 27701**

**Memorandum of Understanding**

WHEREAS, **the North Carolina Coalition Against Domestic Violence (NCCADV), the North Carolina Coalition Against Sexual Assault (NCCASA), Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter** have come together to collaborate and to make an application for **the OVW 2010 Rural Sexual Assault, Domestic Violence, Dating Violence and Stalking Assistance Program** grant; and

WHEREAS, the partners listed above have agreed to enter into a collaborative agreement in which **NCCADV** will be the lead agency and named applicant and the other agencies will be partners in this application; and

WHEREAS, the partners herein desire to enter into a Memorandum of Understanding setting forth the services to be provided by the collaborative; and

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WHEREAS, the application prepared and approved by the collaborative through its partners is to be submitted to the Office on Violence Against Women on or before **March 22, 2011**.

*I) Description of Partner Agencies*

The **North Carolina Coalition Against Domestic Violence (NCCADV)** is a statewide non-profit membership organization providing support services to local domestic violence agencies and allied professionals. NCCADV was founded in 1981 and provides training and technical assistance to 92 domestic violence programs serving the 100 counties of North Carolina. The mission of NCCADV is to create social change through the elimination of the institutional, cultural, and individual oppressions that contribute to domestic violence. The purpose of NCCADV is to strengthen the network of people working to end domestic violence in NC. NCCADV provides an average of 125 trainings each year to more than 4500 domestic violence service providers, allied professionals and community members. NCCADV responds to more than 6500 direct email, telephone or in-person requests for technical assistance each year.

The **North Carolina Coalition Against Sexual Assault (NCCASA)** is an inclusive, statewide alliance working to end sexual violence through education, advocacy, and legislation. NCCASA incorporated in 1988 to address the issues surrounding sexual assault in North Carolina. NCCASA provides support, information, advocacy, and education for North Carolina's rape crisis programs, college campuses, organizations, and individual members. NCCASA provides trainings and technical assistance to over 70 rape crisis centers that represent the 100 NC counties, sexual assault nurse examiners, law enforcement and numerous allied professionals

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through direct contact, mailings and the use of our on-line resource center. NCCASA is a legislative change agent by sponsoring important pieces of legislation that affect survivors of sexual violence, local rape crisis programs, and allied professionals.

The local partners in this project are all dual sexual assault and domestic violence programs.

**Albemarle Hopeline**, as the only program of its kind in the area, provides a comprehensive, consistent response to domestic and sexual violence. Now, in its 29th year of service, Hopeline has been a recognized leader in both direct services to victims and prevention to the community-at-large and has received numerous state and local awards. Guided by the mission of guaranteeing services until the elimination of these crimes becomes a reality, Hopeline has been innovative in its philosophy and implementation. It has pioneered new ideas through several different pilot projects and has brought trainings to professionals, funding to the community, awareness to its citizenry and hope to those in need. Hopeline has encouraged community improvement through knowledge, awareness and action. Recognizing the importance of community ownership in ensuring safety and non-violence, Hopeline has promoted collaborative efforts and individual and group participation to address these issues. Hopeline collaborates with the District Attorney's Office of the First Judicial District; Albemarle Commission Area Agency on Aging; Sheriff's Offices in six counties and four police departments; Albemarle Hospital; and Albemarle Regional Health Services.

**Cleveland County Abuse Prevention Council**, APC, was begun as a grassroots organization that has benefitted from strong community support that has lead to the creation of a shelter and many support services for victims. Functional collaborative relationships have existed

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between APC and local law enforcement entities, the prosecutor's office and the medical community for many years and have resulted in progressively improved services for victims at all levels. Through current partnerships APC receives free, dedicated office space at the courthouse for the Court Advocate and, in the past, has been granted similar space at both local hospitals. APC has a strong relationship with the faith community and routinely receive both monetary and in-kind donations to support the housing, transportation, medication and employment needs of the victims we serve. Local law enforcement works in tandem with the shelter to assure that victims can access shelter after hours in the safest way possible. APC's Counseling Program continues to partner with UNCC, Gardner-Webb University and other colleges to provide internship experiences for Master's-level students seeking experience with providing victim services.

The mission of the **Family Violence Coalition of Yancey County, Inc.** (FVC) is: "To provide direct service and support to victims of domestic violence and sexual assault, educate victims about the choices/options they have, and educate the community on the causes of DV/SA as well as the barriers that victims face to prevent the cycle of violence from continuing." The Family Violence Coalition of Yancey County, Inc. was incorporated in 1995, with the shelter opening as a domestic violence shelter in 1996. During 2003 the FVC became a dual program and has been serving victims of both domestic violence and/or sexual assault ever since. FVC is an agency dedicated to helping break the cycle of violence (DV and SA) within the community. FVC knows that in order to achieve results it must be a reactionary agency (i.e. providing

immediate relief for crises and provision of shelter, etc.), while simultaneously providing education to victims/survivors and the entire community to help prevent violence.

When **HAVEN in Lee County** opened its doors in 1985, its founders dreamed of creating an agency that would serve all victims of domestic violence and sexual assault – men, women and children. Staffed by one person, housed in a small downtown office, HAVEN provided crisis intervention and emergency services to victims. Through the years HAVEN has grown into a 18-member team. The mission of HAVEN is to help people heal from abuse as it works to prevent domestic violence and sexual assault through community education and intervention. HAVEN serves over 1,000 victims, facilitates nearly 150 presentations to civic groups and youth, and shelters 350 survivors annually. We have established collaborations with the Sheriff's Department, Sanford Police Department, Boys and Girls Club of Sanford/Lee County, YMCA, Coalition for families, and many others.

**SafePlace of Mitchell County** was established in 1995. SafePlace is a dual agency (sexual assault and domestic violence). It is the only agency providing housing and services for victims of domestic violence and sexual assault. We have a close partnerships with other community agencies including Mayland Community College, Mitchell County DSS, law enforcement including Mitchell County Sheriff Dept. and Spruce Pine Police, HUD housing, Blue Ridge Regional Hospital, and Mitchell County Health Dept. SafePlace's board reflects a cross-section of the community stakeholders including faith-based organizations, Mitchell County Sheriff Dept., area physicians, the legal community, the financial community as well as the business community.

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The mission of the **Hyde County Hotline, Inc** is to work to eliminate domestic abuse and sexual victimization in Hyde County, North Carolina through the collaborative efforts of a compassionate community. We promote dignity, respect and safety at home resulting in safer communities. The Hyde County Hotline provides advocacy, crisis counseling, 24-hour hotline, Spanish interpreter, therapy sessions, court advocacy, community education and referrals to shelter and hospital. The Hyde County Hotline has been a program of the Outer Banks Hotline and as of July 2011 will be an independent non profit organization. A long standing community service the Hotline has deep roots in the community and has begun the development of a CCR team to improve responses to domestic violence, sexual assault and dating violence victims.

The **Tyrrell County Inner Banks Hotline** has been a program of the Outer Banks Hotline for many years. As of July 2011 Tyrrell County Inner Banks Hotline will become an independent non profit organization. Building on strong community support and a collaborative network of alliances, Tyrrell County Inner Banks Hotline will continue to provide crisis intervention, temporary shelter, information and referrals, advocacy and prevention education/services to residents of and visitors to the Inner Banks. As an essential part of the Inner Banks community, the Tyrrell County Inner Banks Hotline works daily with individuals, organizations and local agencies to promote a safe and compassionate community to end domestic violence and sexual assault through prevention, education, and volunteerism.

The **Task Force on Family Violence/Reach** has been in Cherokee County for 28 years, first serving Clay and Graham Counties. The overall community is very supportive of REACH.

REACH has a strong volunteer base. Law enforcement Sheriff's Dept. victims advocate works

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will with the Victims Advocate in providing services to victims. The Task Force on Family Violence/Reach works with both the Murphy and Andrews Police Departments. The shelter is located in Murphy.

The mission of **U Care, Inc.** is *“to break the cycle of domestic violence and sexual assault”* in Sampson County and surrounding areas. The agency has provided 24 hour crisis line support, direct services, emergency shelter, and community awareness activities on behalf of domestic violence and sexual assault victims for over 14 years. The city of Clinton donated a facility for 10 years to be used for the shelter (recently renewed for another 10 years). In lieu of rent the agency is asked to provide upkeep of the building. The home can house up to 20 people, and maintains staff onsite round the clock. U Care is committed to the development and utilization of community resources in an effort to decrease domestic violence and sexual assault through prevention services. Since opening its 24 hour shelter in April 1997, the organization has worked diligently to provide free comprehensive services to all victims regardless of age, gender, ethnicity, income, or demographic location. U Care has assisted over 26,544 men, women, and children in the past 14 years and has provided community awareness activities focused on prevention throughout its tenure.

Throughout its history, **Wesley Shelter's** mission has been to end violence and build healthy, self-sufficient families. In 1983 Wesley Shelter began providing shelter to domestic violence victims and their children. The agency benefits from a broad base of support that includes the faith community as well as state and federal grants, city and county funding, United Way support, private foundation grants and general contributions from local citizens. The agency

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partners with Wilson Co. Police Dept., Wilson Co. Sheriff's Dept., Legal Aide, Wilson Co. DSS, Wilson Co. Health Dept, Wilson Co. Medical Center, Wilson Co Schools, and the judicial branch.

Although no law enforcement or criminal justice agencies, schools, faith-based organizations, and/or other community organizations were directly involved in the development of this proposal; each local partner agency has provided assurances that they are involved with each of these entities in their respective communities and that they are active partners in addressing sexual assault and domestic violence. NCCADV and NCCASA conducted an assessment to determine eligibility for participation based on each agency's provision of direct services to victims of sexual assault and domestic violence and their demonstrated readiness and capacity to initiate, maintain and sustain coordinated community responses to and prevention efforts focused on sexual assault and domestic violence. Each of the selected local partners demonstrates strong, collaborative relationships with partners throughout the community and will be partnering with them in fulfilling the activities and responsibilities of this Memorandum of Understanding.

## ***II) History of Relationship***

This will be the first time that the partners in this MOU have collaborated collectively to pursue the objectives of this project. However, many of the partners have previously collaborated with individual partners on other projects both formally and informally. As statewide agencies,

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there is a strong connection between NCCASA and NCCADV. They have shared the podium on several occasions, in varied counties, regions and statewide arenas, presenting information about services and options for victims of sexual assault and domestic violence. Representatives from each agency often intersect bi-monthly at committee meetings, trainings or community outreach events. The two agencies work collaboratively on numerous projects including the implementation of a statewide DV/SA Data Collection System. The agencies also work in tandem to support the implementation and evaluation of North Carolina's first state plans to prevent intimate partner violence (IPV) and sexual violence (SV). North Carolina is only one of two states in the country chosen by the Center for Disease Control and Prevention to plan, implement and evaluate state plans to prevent both IPV and SV under the CDC-funded DELTA and EMPOWER programs respectively.

NCCADV and NCCASA have a long history of cooperation and collaboration. Together they have led numerous successful legislative and public policy campaigns, including the VAWA Compliance Act in 2002 and 2007, the civil no-contact order legislation in 2004, and the stalking amendments in 2008. In addition, NCCADV and NCCASA have conducted numerous trainings together, topics including marital rape and domestic and sexual violence prevention in schools.

This application represents a first time collaboration between all 12 agencies. However, it is built on a strong foundation of history and trust established through previous collaborative work.

Each Coalition has a history of positive relationships with its membership; that relationship is defined by support, commitment, and mutual respect. Each of the identified rural counties in this application is a member of one or both of the Coalitions. NCCADV also has expertise in

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providing training and technical assistance to its member agencies in rural settings. NCCADV supports a Rural Training and Technical Assistance Project that works on an in-depth basis with the rural domestic violence programs in North Carolina.

Each local partner participated in an initial assessment to determine eligibility for participation in this collaborative project. The assessment measured responding agency's provision of direct services to sexual assault and domestic violence victims, identified community strengths and gaps as well as, demonstrated readiness and capacity to initiate, maintain and sustain coordinated community responses to and prevention efforts focused on sexual assault and domestic violence. NCCADV and NCCASA then selected local partners based on demonstrated readiness, capacity, program type, geographic considerations, and history of providing safe, effective, and appropriate services to clients and families of clients.

This project is based on needs and identified gaps in services that local partners, and rural communities throughout the state, have communicated to NCCADV and NCCASA. Through meetings, conversations and trainings over the past 5 years local rural programs have increasingly identified the critical need for coordination of services for victims of sexual assault and domestic violence, and their families and for prevention work to decrease first time incidence of this violence. Although the local partners were not directly part of the design of this project, they will be an integral part of defining the timing and the scope of project activities and will implement and evaluate all local activities. To ensure that local activities draw on community strengths and align with expressed needs in the community, at a minimum, the

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collaborating partners (all local partners and the Coalitions) will meet quarterly, whether in person or by electronic conferencing.

The overarching goal of the NCCADV/NCCASA Enhancing Rural Strategies Project is to support and enhance the capacity of the identified rural communities to provide a strong system of direct assistance to survivors of sexual assault and domestic violence and to build community capacity to prevent first time perpetration of these crimes, through the creation of Coordinated Community Response Teams (CCR) and Sexual Assault Response Teams (SART). These efforts will increase the ability of communities to provide coordinated, safe and effective services to victims and, in the long term, to reduce the incidence of these crimes. This goal will be addressed through the following objectives:

- Increase the identification, assessment of and appropriate response to child, youth and adult victims of sexual assault and domestic violence, in rural communities through building collaborative efforts among sexual assault and domestic violence victim service providers; law enforcement agencies; prosecutors; courts; other criminal justice service providers; human and community service providers; educational institutions; and health care providers; by encouraging and supporting collaboration and coordination of services to victims of sexual assault and domestic violence and their families.
- Increase the safety and well-being of women and children in rural communities by dealing directly, immediately, appropriately and effectively with sexual assault and domestic violence occurring in rural communities; and
- Create and implement relevant strategies to increase awareness and prevent first time perpetration of sexual assault and domestic violence.

### ***III) Development of Application***

This application was developed collaboratively by April Burgess-Johnson, Co-Executive Director, NCCADV; Monika Johnson Hostler, Executive Director of the North Carolina

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Coalition Against Sexual Assault; Leah Perkinson, Prevention Coordinator, NCCADV; Jane Allen Wilson, Rural Training and Technical Assistance Specialist, NCCADV; and Judy Chaet, Resource Engagement Coordinator, NCCADV.

These individuals, representing the local member programs and the Coalitions, began discussing the expressed need for coordinated responses to sexual assault and domestic violence and prevention efforts for local programs in rural communities informally over the past 18 months in a directed and focused manner. Given the identified need, the announcement of the OVW 2011 Rural Assistance Program was timely and presented the Coalitions with the opportunity to directly address the concerns of rural communities in North Carolina. The above named individuals began meeting on a regular basis in the days after the funding announcement and met collectively on a bi-weekly basis throughout development of the application. The partners met on a weekly basis during the last 3 weeks in preparing the application with almost daily email communication. All local partners participated in developing the application in the final two weeks prior to submission.

The partner agencies have been working together in a variety of programmatic and policy arenas. Most recently the need in rural communities for additional training and technical assistance has become more immediate and pronounced. The economic downturn, funding cuts and increased service requests have impacted rural communities more substantially than their urban counterparts. The vision of this project was developed in direct response to the urgent needs expressed by domestic violence and sexual assault service providers serving survivors in North Carolina's rural jurisdictions. The vision: to provide support and technical assistance to

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these communities in responding in a safe, appropriate and coordinated way to sexual and domestic violence survivors; and, to plan, implement and evaluate prevention efforts that decrease the incidence of sexual assault and domestic violence; addresses and enhances the safety of victims of sexual assault and domestic violence.

***IV) Roles and Responsibilities***

NOW, THEREFORE, it is hereby agreed by and between the partners as follows:

NCCASA and NCCADV will provide wrap-around support for the local communities, including facilitating forums in each community to help broker relationships among key partners, and by providing ongoing training, technical assistance and on-the-ground support for the selected communities. Training and technical assistance will focus on: engagement and partnership with underserved communities; collaborative approaches to services; primary prevention, and, financial stability and sustainability. Local community partners must demonstrate a commitment to partnership with underserved communities, a willingness to attend training and to solicit technical assistance, and the capacity to build strong working relationships among providers/systems which will be utilized to secure funding for the long-term sustainability of the project.

As the lead agency and applicant, NCCADV will assume the role and responsibilities involved in administering the grant funds; implementing the training provisions under the grant, including oversight of the terms and responsibilities of the MOU; providing an accounting system to account for grant expenditures; preparing and timely submitting quarterly and financial

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reports to OVW; employing personnel to perform services pursuant to the grant terms; providing supervision for grant personnel; collecting and maintaining required statistical information on services provided under the grant in order to determine baseline data to measure project impact and reporting on the progress toward goals semi-annually and at the end of the project; participating in grant evaluation; and monitoring, making adjustments as necessary during the term of the grant mutually agreed upon by the partners; attending regularly scheduled partner meetings; and participating in outreach.

NCCADV will employ a CCR Specialist who will provide support, guidance and facilitation in the development and implementation of all activities necessary to create Coordinated Community Response Teams in the identified communities. This will include, but is not limited to: training, technical assistance, meeting and group facilitation, on-on-one support and other identified capacity building activities.

NCCADV will provide additional in-kind services in the form of training for partner programs about financial stability, assistance with locating funding resources to ensure long-term project sustainability, advocating with stakeholders and policy makers to create supportive policy and climate for project-related activities, and providing supervision to key staff included in this project. NCCADV will also provide in-kind services such as: hosting conferences, trainings and discussion forums to address areas of need outside of the scope of this project identified by project partners.

NCCASA will: prepare and timely submit quarterly and financial reports to NCCADV; employ personnel to perform services pursuant to the grant terms; provide supervision for grant

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personnel; collect and maintain required statistical information on services provided under the grant in order to determine baseline data to measure project impact and reporting on the progress toward goals semi-annually and at the end of the project; participate in grant evaluation; and monitoring, making adjustments as necessary during the term of the grant as mutually agreed upon by the partners; attend regularly scheduled partner meetings; and participate in outreach.

NCCASA will employ a SART Specialist and secure the services of a consultant who specializes in Sexual Assault Nurse Examiner (SANE) training and incorporation of SANE policies within the hospital setting. NCCASA will be responsible for providing support, guidance and facilitation in the development and implementation of all activities necessary to create Sexual Assault Response Teams in the identified communities. This will include, but is not limited to: training, technical assistance, meeting and group facilitation, on-on-one support and other identified capacity building activities. NCCASA will provide additional in-kind services in the form of training for partner programs about financial stability, assistance with locating funding resources to ensure long-term project sustainability, advocating with stakeholders and policy makers to create supportive policy and climate for project-related activities, and providing supervision to key staff included in this project. NCCASA will also provide in-kind services such as: hosting conferences, trainings and discussion forums to address areas of need outside of the scope of this project identified by project partners.

With support from the appropriate CCR or SART Specialist, each project partner (Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc.,

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Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter) will: develop a community based multidisciplinary group of key stakeholders; conduct a stakeholder assessment about barriers and strengths for enhanced collaboration; recruit a diverse team of allies to form a CCR/SART team in their community, develop a community specific set of deliverables (such as a certain number of trained SANEs) to be completed by the end of the grant period; host a community-wide forum to gauge community attitudes about violence against women, which will serve as the basis for future development of a 1-2 year plan for intervention and prevention activities which will include a sustainability plan; participate in all meetings of the Enhancing Rural Strategies Project partners (held at least quarterly), and participate in train the trainer activities so that the model developed under this grant can be replicated in other communities.

Each local partner (**Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter**) will: prepare and timely submit quarterly and financial reports to NCCADV; employ a part time CCR and/or SART Coordinator to perform services pursuant to the grant terms; provide supervision for grant-funded personnel; collect and maintain required statistical information on services provided under the grant in order to determine baseline data to measure project impact and reporting on the progress toward goals semi-annually and at the end of the project; participate in grant evaluation; and monitoring, making adjustments as necessary during the term of the grant

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as mutually agreed upon by the partners; attend regularly scheduled trainings (at least 2 per year) and partner meetings; and participate in outreach. **Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter** each agree to provide in-kind services to the project in the form of staff support, shared office space, telephone, computers and necessary operating support (such as office supplies and travel support). These in kind services will be provided either directly by the partner agencies or through a cooperative agreement with other agencies in their respective communities.

1) **NCCADV** will provide support, guidance and facilitation in the development and implementation of all activities necessary to create Coordinated Community Response Teams in the identified communities. This will include, but is not limited to: providing training, technical assistance, meeting and group facilitation, on-on-one support and other identified capacity building activities to local programs and other community agencies who serve victims of sexual assault and domestic violence. NCCADV will provide support to communities to enhance the safety of victims of sexual assault and domestic violence by supporting projects uniquely designed to address and prevent these crimes in rural jurisdictions.

2) **NCCASA** will provide support, guidance and facilitation in the development and implementation of all activities necessary to create Sexual Assault Response Teams in the identified communities. This will include, but is not limited to: training, technical assistance,

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meeting and group facilitation, on-on-one support and other identified capacity building activities to local programs who serve victims of sexual assault and domestic violence.

NCCASA will provide support to communities to enhance the safety of victims of sexual assault and domestic violence by supporting projects uniquely designed to address and prevent these crimes in rural jurisdictions.

3) **Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter** will provide **direct assistance** to victims of domestic violence, dating violence, sexual assault, and stalking including: crisis call response, shelter, advocacy, referral to appropriate resources and intensive efforts to enhance the safety of victims of sexual assault and domestic violence by supporting projects uniquely designed to develop CCR and/or SART teams in their communities and to ensure that victim safety is paramount while providing services to victims.

4) **NCCADV** and **NCCASA** will collaborate in the following manner: each partner will employ and supervise grant-specific staff who will work closely together with each of the local partners (Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter) to develop and implement local strategies (including CCR and/or SART teams) to respond to and prevent sexual assault and domestic violence. The

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partners will meet on a regular basis with local partner agencies and coordinate between the Coalitions all training and technical assistance.

**5) NCCADV, NCCASA and Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter**

will collaborate in the following manner: develop a community based multidisciplinary group of key stakeholders, ensuring full partnership with under-served communities in alignment with the demographics of the service area; conduct a stakeholder assessment about barriers and strengths for enhanced collaboration; recruit a diverse team of allies to for a CCR/SART team in their community, develop a community specific set of deliverables (such as a certain number of trained SANEs) to be completed by the end of the grant period; host a community-wide forum to gauge community norms, attitudes and beliefs about violence against women , which will serve as the basis for future development of a 1-2 year plan for intervention and prevention activities which will include a sustainability plan; participate in all meetings of the Enhancing Rural Strategies Project partners (held quarterly), and participate in train the trainer activities so that the model developed under this grant can be replicated among other rural communities.

***V) Timeline***

The roles and responsibilities described above are contingent upon NCCADV receiving funds requested for the project described in the OVW grant application. Responsibilities under

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this Memorandum of Understanding would coincide with the grant period, anticipated to be **10/01/2011** through **09/30/2014**.

***VI) Commitment to Partnership***

1) The collaboration includes 10 local agencies providing services in 11 counties. The service area includes a total square mile area of 5,425 and a total population of 417,039 in the

**following counties in North Carolina:**

- |                    |                     |                  |
|--------------------|---------------------|------------------|
| ○ Camden County    | ○ Lee County        | ○ Tyrrell County |
| ○ Cherokee County  | ○ Mitchell County   | ○ Wilson County  |
| ○ Cleveland County | ○ Pasquotank County | ○ Yancey County  |
| ○ Hyde County      | ○ Sampson County    |                  |

2) The partners agree to collaborate and provide **training and technical assistance to support and enhance the capacity of the identified rural communities to provide a strong system of direct assistance to survivors of sexual assault and domestic violence and to build community capacity to prevent first time perpetration of these crimes, through the creation of Coordinated Community Response Teams (CCR) and Sexual Assault Response Teams (SART). These efforts will increase the ability of communities to provide coordinated, safe and effective services to victims and, in the long term, to reduce the incidence of these crimes pursuant to the program narrative of the grant application attached to this agreement.**

3) Compensation for **Albemarle Hopeline, Cleveland County Abuse Prevention Council, Family Violence Coalition of Yancey County, Inc., HAVEN in Lee County, Mitchell County SafePlace, Hyde County Hotline, Inc., Tyrrell County Inner Banks Hotline, Task Force on Family Violence/REACH, Inc., U Care, Inc. and the Wesley Shelter** partners' contribution to this project will be provided as outlined in the attached OVW budget detail worksheet.

4) We, the undersigned have read and agree with this MOU. Further, we have reviewed the proposed project and approve it.

By \_\_\_\_\_  
April Burgess- Co-Executive Director,  
**NCCADV Applicant**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Monika Johnson Hostler, Executive  
Director, **NCCASA**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Patricia Youngblood, Executive Director, **Albemarle Hopeline**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Cathy Robertson, Executive Director, **Cleveland County Abuse Prevention Council**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Samantha Phipps, Executive Director, **Family Violence Coalition of Yancey County, Inc.**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Kay Ring, Executive Director, **HAVEN of Lee County**  
Date \_\_\_\_\_

By \_\_\_\_\_  
David H. Pike, Executive Director, **Mitchell County SafePlace**  
Date \_\_\_\_\_

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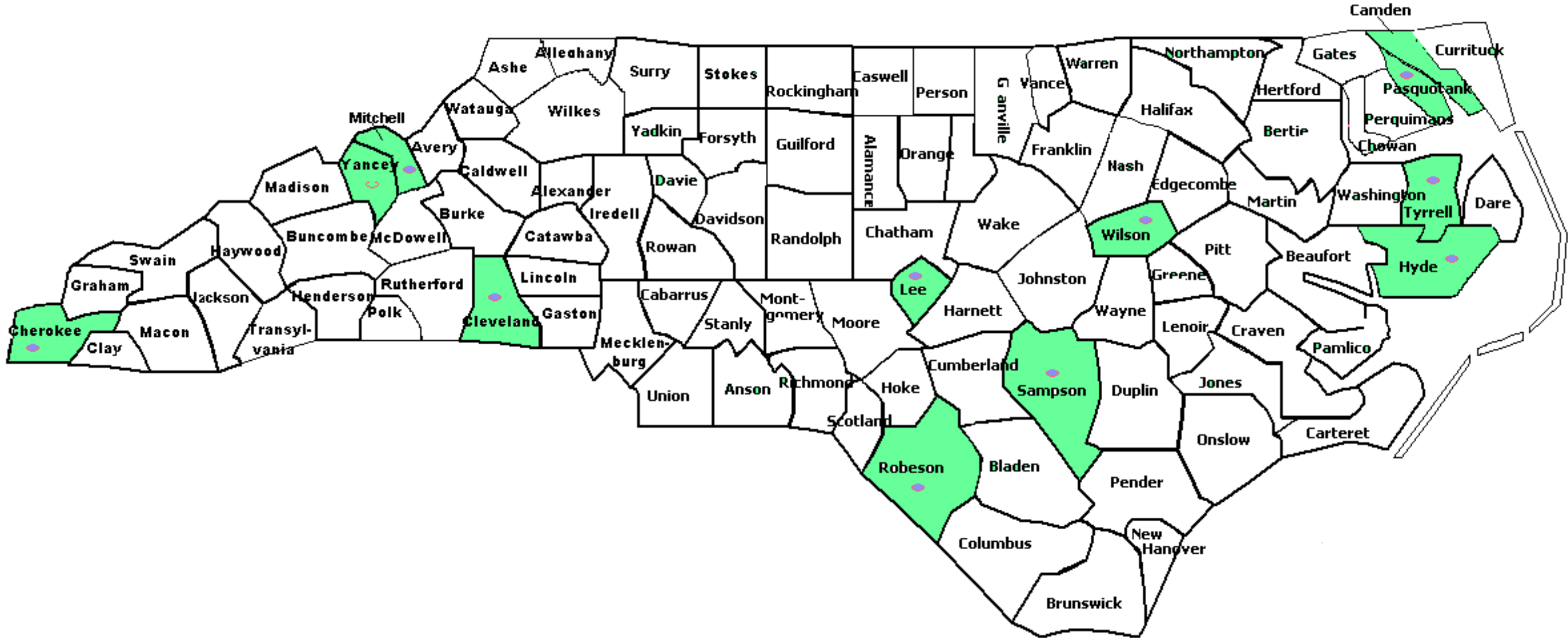
By \_\_\_\_\_  
Kathy Ballance, Executive Director, **Hyde County Hotline, Inc.**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Janie Spencer, Executive Director, **Tyrrell County Inner Banks Hotline**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Vicky Taylor, Executive Director, **Task Force on Family Violence/REACH, Inc.**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Pamela Gonzales, Executive Director, **U Care, Inc.**  
Date \_\_\_\_\_

By \_\_\_\_\_  
Janet Hesner, Executive Director, **Wesley Shelter, Inc.**  
Date \_\_\_\_\_



Attachment 1- Services, Gaps and how ERS will help

County	Services	Gaps	How ERS will help
Camden Co. and Pasquotank	24-hour crisis line; emergency shelter, medical triage offered on a part time basis by an RN; food and transportation; individual and group counseling; personal and court advocacy; prevention education; information and referral; Displaced Homemaker Program; and Children's Program, are all provided by licensed/credentialed professional staff, with support from well-trained volunteers.	There is no formal SANE/SART team or community-wide task force; transitional housing; adequate legal assistance; public transportation; affordable and safe housing; and comprehensive, accessible mental health services. Lack of collaboration among LE and DSS depts. Statistical data is not consistently maintained across departmental, agency and county lines.	This project will allow community service providers to work collectively and become more uniformly responsive. It will increase safety for women through services and the development of zero tolerance for domestic and sexual violence. Bridging gaps and minimizing inconsistencies in approaches to violence will be central to this project.
Cherokee Co.	Shelter, counseling, support groups and domestic violence education. 24 hour crisis line, weekly support groups, medical and legal advocacy, hospital, court and DSS accompaniment, information and referral, community education dating violence prevention programs court advocacy	Local community agencies need more coordination and support to work together and share critical information.	This funding would offer support to the community through education of agencies. The funding would open the eyes of every one at the table. Pastors would be involved in the process. We think the time is right in our community to work together, to start a CCR/SART Task Force would fill a gap in Cherokee County.
Cleveland Co.	We provide individual and group counseling, and legal and medical advocacy services to victims of domestic violence and sexual assault, shelter to victims of domestic violence, sexual assault, and homeless women and children. We also provide supportive housing for chronically homeless disabled individuals and services to Displaced Homemakers and	Victims receiving help at local hospitals are rarely offered access to on-site APC advocates so they have no link to counseling, case management or advocacy to help them cope, heal or move forward with prosecution. Court Advocacy is only sporadically provided for victims of sexual assault due to APC's	Community outreach and engagement, including convening a taskforce or response team is currently an activity added on to existing staff's full time responsibilities. Cleveland County has a nascent CCR team. This project would help the community to conduct outreach, prevention and coordination efforts



Attachment 1- Services, Gaps and how ERS will help

	community education, prevention and awareness presentations about domestic violence and sexual assault.	inability to receive advance information about charges filed the scheduling of court cases. Lack of staff makes it difficult to provide outreach and prevention services.	and additional training.
Hyde Co.	24 hour crisis line; individual and group counseling; support groups and community education; medical and legal advocacy, hospital, court and legal advocacy and accompaniment. Referrals and accompaniment to DSS, magistrates, law enforcement and other agencies, information, dating violence prevention programs and safety planning. Professional training for law enforcement and other departments.	County agencies work alone and rely on personal relationships rather than formal agreements and protocols for issues on which there is a need to collaborate. Lack of housing is prohibitive for victims who desire to leave abusive relationships. Employment and educational opportunities are minimal. There are limited legal services and the nearest Legal Aid office is approximately 2 hours away. Transportation services are limited. The nearest hospital is one hour away.	This project would promote community collaboration and assist in developing formal protocols to address family and interpersonal violence. Safer communities will be the result as a consistent effort to engage each department in the process is established.
Lee Co.	Crisis Intervention, 24 hour crisis line, Hospital accompaniment, liaison with law enforcement, emergency shelter, food and clothing, emergency transportation, emergency childcare, Bilingual services, Community Education, MOVE (Batterer's Intervention Program), Strong Youth/Healthy Relationships Programming, Volunteer Training, presentations to civic groups, Safe Sanford Campaign, DV/SA Vigil Victims Services, support during criminal justice	There are large gaps because of lack of formal protocol. Communications between all agencies that could contribute services and support to a survivor are not happening. Gaps in service occur because staff and personnel do not have a working protocol that encourages interagency support and communication on the regular basis.	Funding to support a project leader and organizer was the greatest hurdle in making creating a protocol with a team of people dedicated to serving victims in our community correctly and effectively. Enhancing Rural Strategies would help our community be allowing us to devote time to developing, organizing and implementing an interagency response protocol to assist

Attachment 1- Services, Gaps and how ERS will help

	proceedings, Emotional support for clients, family or friends, case management, and professional therapy.		victims of sexual assault and domestic violence.
Mitchell Co.	DV/SA, shelter, transition house, displace homemaker program, legal assistance program, support group, education, assistance with clothing, food and household items.	There is a need for increased services to the economically disadvantaged, minorities (esp. Hispanics), rural, disabled and elderly. Jobs, mental health services, substance abuse services and housing.	Enhancing Rural Strategies would help Mitchell County develop unified protocols and policies to provide safety and enhance services for victims of domestic violence and sexual assault through the development of a CCR/SART.
Sampson Co.	Services include but are not limited to: a 24 hour hot-line, 24 hour emergency shelter, outreach/direct services, victim advocacy, legal advocacy, child advocacy, court accompaniment, transportation, Spanish translation, referrals, training, presentations, abuser treatment, displaced homemaker programming, some immigration issues.	The major gaps in our community are as a result of hiring freeze leaving us with no female assigned officer specific to sexual assaults and domestic violence, budget constraints, no funds to train nurses for a SART, and we are very limited in training opportunities in our public schools.	Participating in this project would provide us the necessary staff and expertise through the coalition to address these gaps in services and implement positive change in our community. Staff shortages due to budget cuts, have forced us to place prevention and many educational activities on hold.
Tyrrell Co.	24 hr crisis line, emergency shelter, transportation, court escort, advocacy, outreach and prevention education, information and referrals, safety planning, hospital response for sexual assault victims, referrals for legal assistance, training for LE and assistance filing out victims compensation forms	No comprehensive mental health care, no SANE/SART team, affordable housing is extremely difficult to secure, there is no public transportation, lack of uniform services to victims and lack of consistent collaboration between agencies.	The project will allow the Hotline to work with agencies to become more uniformly responsive to victims of DV and SA. It will help build community capacity to involve the whole community in the fight against abuse.
Wilson Co.	Case management, assisting clients in the development and implementation of personal goals plans. Parenting Classes and support groups are provided weekly. Therapy is provided on-site.	The gaps are with the Magistrates office. They are hesitant to issue warrants in matters concerning DV, one which just resulted in a double murder suicide. They need a	This funding would allow us to have a person within the community whose priority is to coordinate agencies and build a team that would collaborate to address

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	<p>Children's programs include: child care, children's support groups, tutoring, after-school, evening and summer camp programs.</p>	<p>better understanding of DV issues. There are also gaps in SA with the lack of SANE nurses in the county. The agency needs the ability to better work with Wilson Medical Center on this issue</p>	<p>the following issues: Information sharing between agencies; To decrease duplication of services for better utilization funds; bring involved parties together to trouble shoot issues and address unmet needs in the community. provide a forum for all issues to be put on the table and discussed, and, work together more effectively to get the information out to the public.</p>
<p>Yancey Co.</p>	<p>shelter services for DV/SA clients and their children; 24 hour crisis line; crisis counseling/peer based counseling; support groups for both DV and SA as well as for children; Overcomers Group – focus on substance abuse and other issues in addition to DV/SA issues; Employability Group; case management services; legal and medical advocacy; transportation; emergency financial assistance; information/referrals; follow up contact services; assistance in filing Victims Comp claims; personal advocacy; Outreach/Community Education</p>	<p>There is a lack of resources, particularly mental health. We have a lack of affordable housing and a shortage of jobs in Yancey County. Transportation is another large barrier for women. Other gaps include noting that some law enforcement officers still do not seem to understand dynamics involved with DV/SA and victims of these crimes. We are concerned that many sexual assaults/rapes do not get reported in our county and often when they do get reported local law enforcement does not follow up with these crimes as they should.</p>	<p>We are excited about the possibility of having a person who would focus on getting the CCR and SART teams started. This person will be able to get all entities together and team building and many of these gaps between agencies can be solved and client service delivery, safety, and prevention will increase.</p>