

# **Community Assessment:**

## **Proactive Approaches to Domestic & Sexual Violence**

## Community Assessment Instructions

Please fill out the community assessment to the best of your knowledge. There may be some questions that do not directly apply to your work or you do not have information about. For these instances, please indicate as such in the space provided by writing unsure, not applicable, do not collect, etc.

These assessments are intended to be used for internal purposes only as a complement to the agency-self assessment. Thoughtful feedback that speaks to both strengths and areas for enhancement provides helpful insight to the law enforcement agency requesting your input. These assessments

**are:**

- an external perspective, which provides feedback to the law enforcement agency about its approach to domestic violence, dating violence, sexual assault, and stalking

**are not:**

- a supporting document for a grant
- a letter of support
- research

## Use of Findings

The responses provided will be shared directly with the agency. Your response, along with the responses of other community-based organizations, will be used to identify strengths, as well as opportunities for improvement and possible collaborative efforts for the agency.

## Organizational and Community Background

**1. Organization Name:**

**2. Organization Mission:**

**3. How does your organization work with the law enforcement agency that sent you this assessment?**

**4. How often does your organization interact with the law enforcement agency that sent you this assessment? You can provide this answer in estimated times per day, week, month, year.**

**5. Please indicate which option(s) best describes your organization (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> Coalition                                 | <input type="checkbox"/> Mental health services provider       |
| <input type="checkbox"/> Domestic violence direct service provider | <input type="checkbox"/> Children's advocacy program           |
| <input type="checkbox"/> Sexual assault direct service provider    | <input type="checkbox"/> Health care/medical services provider |
| <input type="checkbox"/> Shelter/housing provider                  | <input type="checkbox"/> Elder advocacy program                |
| <input type="checkbox"/> Compensation program                      | <input type="checkbox"/> Culturally specific service provider  |
| <input type="checkbox"/> Legal services provider                   | <input type="checkbox"/> Faith-based organization              |
| <input type="checkbox"/> Educational institution                   | <input type="checkbox"/> Criminal justice system agency        |
| <input type="checkbox"/> Other: _____                              |  |

# Community Assessment: Proactive Approaches to Domestic & Sexual Violence

## 6. What kind of services does your organization provide (check all that apply):

<input type="checkbox"/> Domestic/dating violence advocacy/assistance	<input type="checkbox"/> Stalking advocacy/assistance
<input type="checkbox"/> Sexual violence advocacy/assistance	<input type="checkbox"/> Strangulation advocacy/assistance
<input type="checkbox"/> LGBTQ-specific services	<input type="checkbox"/> Culturally specific services
<input type="checkbox"/> Civil legal services	<input type="checkbox"/> Criminal court accompaniments and other victim/witness support
<input type="checkbox"/> Batterer intervention program	<input type="checkbox"/> Policy/legislation analysis/advocacy
<input type="checkbox"/> Shelter (emergency or temporary)	<input type="checkbox"/> Education and awareness
<input type="checkbox"/> Trauma services for children	<input type="checkbox"/> Counseling on public benefits
<input type="checkbox"/> Family/protection order assistance	<input type="checkbox"/> Housing advocacy
<input type="checkbox"/> Mental health services counseling	<input type="checkbox"/> Medical assistance
<input type="checkbox"/> Substance use disorder counseling	<input type="checkbox"/> Other: _____

## 7. How many victims of domestic violence, dating violence, sexual assault, and stalking did your organization serve annually in each of the last three (3) years? If you are unsure or do not collect these data, indicate in the space provided for each item. In instances where co-occurring data are collected, please count each crime/victimization separately. (For example, if a client is a victim of sexual assault and strangulation, the instance would be counted under both crime categories.)

**Note:** Please consider the confidentiality of the victims when answering this question. If you cannot answer this without inadvertently revealing victim information that may impact victim confidentiality and safety, please skip this question.

	Sexual Violence	Domestic/ Dating Violence	Strangulation	Stalking	Total Number of People Served
Last Year					
2 Years ago					
3 Years ago					

## Community Assessment: Proactive Approaches to Domestic & Sexual Violence

**8. Of the domestic violence, dating violence, sexual assault, and stalking victims you served in the last twelve (12) months, approximately what percentage made a report with law enforcement for the crime of which they were a victim?**

	Sexual Violence	Domestic/Dating Violence	Strangulation	Stalking
0% – 10%				
11% – 25%				
26% – 40%				
41% – 50%				
51% – 75%				
76% – 100%				
Unknown				
Not applicable				

**9. Of the domestic violence, dating violence, sexual assault, and stalking victims your organization served in the last twelve (12) months, approximately what percentage have had a criminal investigation lead to prosecution?**

	Sexual Violence	Domestic/Dating Violence	Strangulation	Stalking
0% – 10%				
11% – 25%				
26% – 40%				
41% – 50%				
51% – 75%				
76% – 100%				
Unknown				
Not applicable				

## Community Assessment: Proactive Approaches to Domestic & Sexual Violence

### 10. Based on your interactions with victims, how would you rate the law enforcement response in each of the following categories:

With respect to domestic violence, dating violence, sexual assault, and stalking, the officer(s)	Strongly Agree	Agree	Neither Agree nor Disagree	Somewhat Disagree	Strongly Disagree
Demonstrated specialized expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated understanding of lethality factors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Used respectful language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Explained the role of an advocate (system-based advocate, community-based advocate, or both)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Permitted advocates (system-based advocate, community-based advocate, or both) to remain during victim interviews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knew about and offered additional appropriate support, resources, and referrals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provided information on how to contact the agency member assigned to the case	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Followed up in a timely manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treated the matter with a sense of urgency and importance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated trauma-informed interviewing skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively responded to non-physical coercive control (e.g., psychological abuse, emotional abuse, financial control)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrated culturally appropriate interactions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offered interpreters, when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**11. In general, is there anything you would like to add about the experiences described in the prior questions?**

## Collaboration

12. Do you currently collaborate with the law enforcement agency being assessed?

Yes

No (Skip to Question 14)

13. With respect to collaboration with this agency, please respond to the following:

The agency being assessed works with our organization in the following ways:	Frequently	Sometimes	Never	Unsure	Not Applicable
Receives roll call trainings/briefings on sexual violence, domestic/dating violence, stalking, and/or strangulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in a coordinated community response with a multidisciplinary team on domestic violence, dating violence, sexual assault and/or stalking, such as a SART, DVRT, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in a fatality review team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in cross-training on domestic violence, dating violence, sexual assault and/or stalking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides referrals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has a memorandum of understanding (MOU) or letter of agreement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receives support or training to enhance culturally appropriate law enforcement response, including language access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Community Assessment: Proactive Approaches to Domestic & Sexual Violence

**Continued 13.** With respect to collaboration with this agency, please respond to the following:

The agency being assessed works with our organization in the following ways:	Frequently	Sometimes	Never	Unsure	Not Applicable
Receives support or training to improve law enforcement outreach to communities, especially to underserved populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Receives support or training to help law enforcement incorporate trauma-informed <sup>i</sup> practices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has regular meetings or engagement with the victim services personnel of the agency being assessed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in our organization's events, including prevention and outreach effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**14.** Please provide any additional comments on collaborative efforts.

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**15. Does the agency being assessed have one or more specialized units to address domestic violence, dating violence, sexual assault, and stalking?**

- Yes  Unsure  
 No (skip to Question 17)

**16. If yes, in your experience has the specialized unit(s) provided a trauma-informed, victim-centered response? Please list the unit(s) and describe the response(s).**

**17. Does the agency being assessed have full-time victim services personnel on staff?**

- Yes  Unsure  
 No

**18. With respect to the collaboration with the agency being assessed, please add any additional information or impressions you would like to provide:**

## Community Confidence

19. With respect to the agency being assessed, overall the individuals who receive services at our organization:

**Note:** For this question, please circle your answer using the following scale: 5 – Strongly Agree; 4 – Agree; 3 – Neither Agree nor Disagree; 2 – Disagree; 1 – Strongly Disagree.

	Sexual Assault	Domestic/ Dating Violence	Strangulation	Stalking
Demonstrate confidence in calling for assistance with cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Consider law enforcement a safe and helpful option in cases that involve individuals who identify as LGBTQ in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Know the process for making a report (or where to find information) in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Consider the law enforcement response appropriate and timely in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Believe that law enforcement officers have specialized expertise in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Trust that law enforcement will follow up and follow through in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
Believe law enforcement will support prosecution efforts in cases of	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

**20. Please provide any additional comments on community confidence.**

**21. Based on your organization's experience with serving victims, describe the strengths of the agency's immediate response to calls for assistance from victims of domestic violence, dating violence, sexual assault, and stalking.**

**21.1. Based on your organization's experience with serving LGBTQ+ victims, describe the strengths of the agency's immediate response to calls for assistance from LGBTQ+ victims of domestic violence, dating violence, sexual assault, and stalking.**

**22. Based on your experience, please provide details of what you believe the opportunities are for the agency to strengthen its responses to domestic violence, dating violence, sexual assault, and stalking.**

**22.1 Based on your experience, please provide details of what you believe the opportunities are for the agency to strengthen their responses to cases of domestic violence, dating violence, sexual assault, and stalking that involve the LGBTQ+ population.**

**23. Are there any recent incidents that have impacted your organization's and/or the community's impressions of the agency being assessed, in terms of its responses to, and investigations of, domestic violence, dating violence, sexual assault, and stalking? If so, please describe the nature and impacts (positive and negative):**

## Notes

<sup>i</sup> “Trauma-informed” services understand and recognize the physical, psychological, and behavioral effects of trauma and create and provide services that are sensitive and responsive to those effects.

## Acknowledgements

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