

Domestic Violence

February 2011

Steve March
Multnomah County Auditor

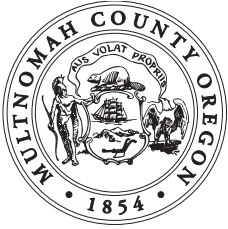
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We conducted this special report in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

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Date: February 22, 2011

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District Attorney Schrunk
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Chiquita Rollins, Domestic Violence Coordinator
Family Violence Coordinating Council Executive Committee

From: Steve March, County Auditor

Subject: Special Report on Domestic Violence

Multnomah County's Domestic Violence system is at a critical juncture. The County is losing its long-time Domestic Violence Coordinator, Chiquita Rollins, PhD, who is retiring. Funding for social services is shrinking even though the need is not. The decisions made and strategic collaboration with existing and additional partners moving forward will make the difference between implementing effective prevention and outreach strategies and struggling to keep up with the demand for essential crisis and post-crisis victim services.

The existing domestic violence system has a long history of successes in crisis and post-crisis response to domestic violence. The Domestic Violence Coordinator's Office, the Family Violence Coordinating Council, and its member agencies have worked hard to develop partnerships across agencies and jurisdictions, many of whom are our Local Public Safety Coordinating Council partners, toward enhanced communication, coordination, and collaboration of domestic violence intervention efforts. On the other hand, effective collaboration with the education and the healthcare communities as well as non-domestic violence social service agencies could be enhanced to bring resources and expertise toward service outreach and prevention.

In this report, we make recommendations regarding how the County, through the Chair's Office and the Board of County Commissioners' commitment and efforts, can help build upon the existing components of the domestic violence system by using strategic collaboration to build systemic capacity.

We would like to thank the members of the Multnomah County domestic violence community who assisted us throughout this special report through interviews, assistance, and insight into the struggles inherent in their fight to end domestic violence.

Executive Summary

Domestic violence* is a problem that Multnomah County is committed to reducing. In 2000, the Multnomah County Board of Commissioners signed Resolution 00-149 establishing a policy to increase the safety, well being, and stability of all members of families, especially women and children, in Multnomah County and to reduce domestic violence. In continuing support for the intent of the resolution and to acknowledge combined efforts of many groups and organizations, the Board of County Commissioners recently proclaimed October 2010 Domestic Violence Awareness Month in Multnomah County.

Each year approximately 28,000 women in Multnomah County are physically abused by an intimate partner and 21,000 children are exposed to domestic violence. In 2009, domestic violence programs in Multnomah County received more than 34,000 calls for services. Arrests for domestic violence offenses resulted in 8,440 jail bookings. Almost 1,400 victims and their children received emergency shelter for nearly 33,800 nights in shelter.

Domestic violence affects the broader community as well as the victims** and their families. Across Oregon, the cost of domestic violence exceeds \$50 million each year, nearly \$35 million of which is for direct medical and mental health care services. The Oregon Bureau of Labor and Industries estimates that domestic violence also costs Oregon industries \$50 million per year.

No one individual or organization can solve the problem of domestic violence. In Multnomah County a number of dedicated individuals, organizations, programs, and groups have worked

* Domestic violence is sometimes referred to as intimate partner violence

** Domestic violence advocates commonly use the term “survivor” rather than “victim” in recognition of survival, despite on-going emotional and physical abuse.

together to protect victims in crisis. While these partners in the domestic violence system are committed to coordinating their efforts, we identified barriers to full collaboration. These include competition for scarce resources, communication difficulties between disciplines and professions, as well as differences about how best to protect and empower victims, hold perpetrators accountable, and promote healthy families. Further, not all potential community partners and resources are engaged in addressing domestic violence, in part, due to these barriers.

A holistic response to domestic violence requires crisis and post-crisis intervention, prevention, and outreach to all populations. The considerable majority of resources are currently dedicated to crisis and post-crisis intervention, with little capacity for prevention or outreach. The community needs a broad strategic direction for domestic violence that includes and supports all aspects.

Strategic collaboration means deliberately cultivating skills in inter-organization collaboration to enhance the County's capacity to uncover new solutions to existing problems. Through strategic collaboration, the entire community can work together to build the capacity to create a solution greater than the sum of its parts. It is time to engage the community in implementing a broad strategic vision. This includes not only responses and services to victims, but also working to strengthen families, empower individuals, and increase operational capacity for more partnerships across government, non-profit organizations, and in the community.

In this special report we do not claim to have found all the answers. Rather, our recommendations are based on methods that have demonstrated success in the promotion of successful collaboration across diverse groups and professions outside of domestic violence. There are also methods for system development specific to domestic violence that should be considered.

If the community can come together to address the problem of domestic violence, we believe groups, organizations, professions, the community, and all stakeholders can improve the community's response to victims and reduce the incidence and likelihood of domestic violence.

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The primary report objectives were to:

- Determine whether current methods for communication and collaboration are adequate to address identified needs.
- Determine whether current processes to support communication and collaboration are adequate to support systemic collaboration needs.
- Determine whether current practices are adequate to promote broad-based resource improvement.

Although this report tells the story of the domestic violence system in Multnomah County, strategic collaboration is not limited to those providing domestic violence-related services. The recommendations in this report are broadly based on best practices in the implementation of collaborative practices rather than those specific to domestic violence, though those should be considered as well.

The identified themes raise questions about the development of systemic practices rather than only improvements to existing functions and operations. For this reason, the findings and recommendations focus on the role of the Chair and the Board of County Commissioners to support change that builds capacity to address domestic violence more broadly.

We recommend that:

- The Chair's office and the Board of County Commissioners promote leadership to support the County's domestic violence strategic collaboration and develop expectations for outcomes.
- The Chair's office and the Board of County Commissioners facilitate collaboration with partners that have not previously been part of the domestic violence system.
- The Chair's office and the Board of County Commissioners ensure that key participants receive training, have the authority to commit resources to agreed upon strategies, and have the support of neutral facilitators.

Domestic violence is a problem

Domestic violence is a problem in Multnomah County, the State of Oregon, and the community. Domestic violence harms victims and their families in devastating ways. It also hurts the larger community.

Domestic violence has been defined as “a pattern of coercive behavior perpetrated by one person against another in order to maintain control in an intimate relationship.”¹

It includes emotional, physical, psychological abuse or neglect, sexual abuse or threats thereof, perpetuated against a person by an intimate partner or household member. Abuse may include threats, harm, injury, harassment, exertion of power and control over another person, terrorism, or damage to other people, animals, or property. It may be a single incident, and may range in intensity from harassment to homicide. Most often it is a systematic pattern of abuse that escalates over time in frequency and severity. The pattern of abuse may include both criminal and non-criminal behavior and may or may not result in physical injury.²

Victims of domestic violence are at increased risk for death, physical injuries, post-traumatic stress disorder, depression, suicide attempts, substance abuse, work-related absences, job loss, and homelessness. Children exposed to domestic violence are also at risk for physical injuries, behavioral and developmental problems, substance abuse, suicide, and being the victim or perpetrator of domestic violence later in life.³ In that sense, the actions of abusers are far reaching, with effects throughout the lives of victims, their families, and the community at large.

The most recent study of domestic violence in Multnomah County, conducted in 1999, showed that an estimated one of every seven women* in Multnomah County (28,000) aged 18-

* Although men can also be victims of domestic violence, intimate partner violence is primarily committed against women. Nationally research indicates that about 85% of victimizations by intimate partners are against women. Intimate Partner Violence. (2000). Bureau of Justice Statistics Special Report. NCJ 178247.

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64 is physically abused by an intimate partner each year.⁴ More than a third (37%) suffered an injury from their abuse. Forty percent of women who experienced physical abuse were severely abused.* In addition, according to the Multnomah County Health Department, approximately 21,000 children in Multnomah County are exposed to domestic violence every year. While rates of abuse in Multnomah County are high, studies show that they are comparable to those for the state of Oregon and for the nation as a whole.

According to the Domestic Violence Coordinator's Office, in Multnomah County during 2009, the Oregon Department of Human Services estimates that domestic violence programs received 34,085 calls from victims seeking services. Almost 1,400 victims and children received emergency shelter for a total of 33,762 nights in shelter. The Portland Police Bureau, Multnomah County's largest enforcement agency, wrote over 5,000 police reports in which domestic violence was listed as an offense. Arrests for domestic violence offenses throughout the County resulted in 8,440 jail bookings.⁵

Across Oregon, the cost of intimate partner sexual and physical assault exceeds \$50 million each year, nearly \$35 million of which is for direct medical and mental health care services.⁶ In 2009-2010, 52 Oregonians died as the result of domestic violence.**

* Researchers classified the following examples as "severe physical abuse": using a knife or gun; punching; kicking; hitting with an object that can cause injury; choking; slamming against a wall; burning or scalding on purpose; forcing someone to have sex by using a weapon, hitting, holding them down, using threats of violence; being knocked unconscious; broken bones; damage to the face, eyes, ears or teeth; needing hospital treatment; going to see a doctor; needing to see a doctor (without seeing one).

** As of March 17, 2010, the total number of deaths included 28 adult victims, 5 child victims, 17 perpetrators (16 of whom committed suicide after the murders). Recommendation to Governor: Statewide Response to Domestic Violence Fatalities. (2010). Domestic Violence Advisory Work Group. Department of Human Services and Oregon Health Authority.

Multnomah County is committed to reducing domestic violence

In 2000, the Multnomah County Board of Commissioners signed Resolution 00-149 stating that domestic violence is a pervasive and serious problem in Multnomah County. Over the past six years, the County has committed an average of more than \$4.9 million annually in County General Fund domestic violence services, which includes funding for probation, prosecution, and law enforcement related to domestic violence. In continuing support for the contents of the resolution, and to acknowledge combined efforts of many groups and organizations, the Board of County Commissioners proclaimed October 2010 Domestic Violence Awareness Month in Multnomah County.

Assistance for victims and families affected by domestic violence often involves an array of programs and services. The following illustration demonstrates a few of the processes battered women may encounter when involved with child protection, civil and criminal justice systems, and the complexity of the responses needed.⁷

Multnomah County has demonstrated its commitment to coordinating efforts to respond to domestic violence with a broad array of partners. For instance, the Board of County Commissioners approved a proclamation stating:

The County has funded and helped to develop a systemic response to domestic violence that includes a victim services system and specialized criminal justice intervention by the Department of Community Justice and the District Attorney's Office. It has instituted a Domestic Violence Fatality Review Team, the Domestic Violence Enhanced Response Team (DVERT), and partnered with the City of Portland to fund staffing for the Family Violence Coordinating Council (FVCC) and opened the Gateway Center for Domestic Violence Services.⁸

Additionally, Multnomah County, largely through the Domestic Violence Coordinator's Office (DVCO), supports the efforts of many community organizations. These include: Bradley-Angle House; Portland Women's Crisis Line; Raphael House; Salvation Army West Women's and Children's Shelter; Volunteers of

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America Home Free; YWCA Yolanda House; Catholic Charities; Self-Enhancement Inc.; Russian Oregon Social Services; the Native American Youth and Family Center; Immigrant and Refugee Community Organization (IRCO); and the Gateway Center for Domestic Violence Services in providing assistance to victims.

Multnomah County and its inter-jurisdictional partners are actively working to help coordinate domestic violence services. For example, the DVCO provides assistance and leadership in the implementation of the domestic violence policy passed by the Multnomah County Board of Commissioners, as well as managing contracts for County-funded domestic violence victim services including emergency shelters, outreach services, and culturally specific services. DVCO also staffs many of the collaborative groups created to address domestic violence.⁹ These include:

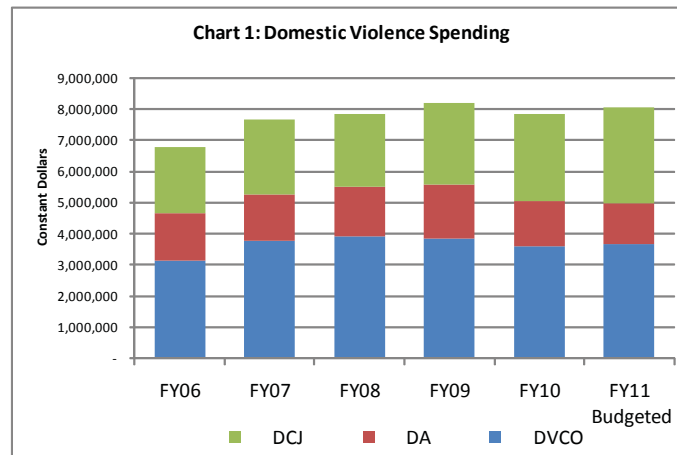
- Domestic Violence Enhanced Response Team (DVERT) - a multi-disciplinary team providing a coordinated, interagency response to high-risk/high lethality domestic violence crimes in Multnomah County.
- Domestic Violence Fatality Review Team – a multi-disciplinary team, authorized by the Oregon Legislature,* convened to review domestic violence fatalities and make recommendations for intervention in high risk domestic violence cases.
- Family Violence Coordinating Council (FVCC) – a multi-agency, multi-jurisdictional forum for the coordination of domestic violence intervention efforts within Multnomah County.
- Safe Start Project – a multidisciplinary response for domestic violence victims and their children involved with Oregon Department of Human Services and Child Welfare.¹⁰
- Defending Childhood Initiative – a year long strategic planning effort aimed at addressing children’s exposure to violence.¹¹

* Oregon Revised Statutes §418.712 through §418.718, Appendix A

These groups and others in the domestic violence system have worked together on many projects designed to address systemic concerns.

- Special projects ranging from evaluation of the criminal justice system to ad hoc committees and work groups as well as data collection and analysis.
- Working to align many disciplines in prioritizing the most dangerous domestic violence offenders for prosecution, legal sanction, community-based supervision, and batterer's intervention programs.
- Tracking city, county, and state budgets and laws related to domestic violence in order to advocate for changes to better support victims.

Over the past six years, five County departments and the District Attorney's Office received funds for domestic violence. The DVCO, the Department of Community Justice (DCJ), and the District Attorney's Office (DA) spent the majority of these funds.¹² Chart 1 shows actual spending for these three departments for FY06 through FY10 and the budgeted expenditures for FY11 (adjusted for inflation*).¹³

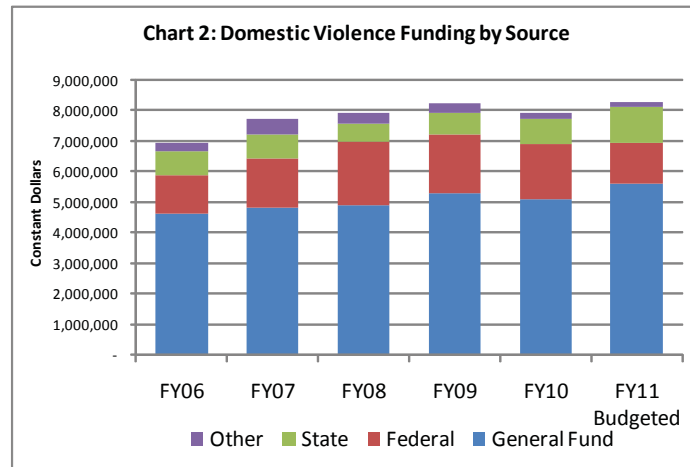


Source: Multnomah County Auditor's Office

* When inflation is not taken into account, overall spending in the County for domestic violence has increased from \$6.5 million to \$8.3 million since FY06. Of these amounts general fund spending has increased from \$4.2 million to \$5.6 million.

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Taking inflation into account, overall spending in the County has increased from \$7.0 million to \$8.3 million, since FY06. DA spending has decreased by 15% from FY06 to FY11 while DCJ and DVCO spending has increased by 46% and 18% respectively.



Source: Multnomah County Auditor's Office

Since FY06, general fund allocation for domestic violence, when adjusted for inflation, has increased from \$4.6 million to \$5.6 million and makes up 68% of all domestic violence funds in FY11. Chart 2 shows county-wide domestic violence funding by source.

Prevention and outreach are needed

Crisis intervention and post-crisis stabilization and rehabilitation are the primary focus of domestic violence services in Multnomah County, but outreach to all populations, prevention, and community engagement is also needed. The stereotypical picture of domestic violence is physical abuse that results in injury. When physical abuse occurs, the victim may need emergency crisis intervention services such as police, medical assistance, or emergency shelter. Additionally, long-term stability assistance and rehabilitation programs such as housing assistance, support groups, job training, batterer's intervention, and probation are needed post-crisis. These types of services are essential for victims who face life threatening abuse.

However, as discussed previously, physical abuse is only one point on a much larger continuum of abusive behavior. Domestic violence also includes psychological, verbal, financial, emotional

abuse, stalking, and harassment that can be as devastating as the physical violence. Helping victims overcome abuse requires a broad array of the types of domestic violence services available in Multnomah County.¹⁴

Crisis and post-crisis intervention services are critical. They most often include assistance such as: safety planning; crisis hotlines; emergency housing (shelters) and longer term transitional housing assistance; support groups; civil and criminal legal remedies; counseling; children's programs; and batterer's intervention programs. A focus on crisis and post-crisis intervention and batterer prosecution necessarily requires a tradeoff, both in funding and attention, with other methods of service.

For instance, in Multnomah County, the most closely coordinated elements of the domestic violence system are those designed to take action during a crisis situation or hold batterers convicted of domestic violence legally accountable. These types of crisis responses may include: an emergency response by police; an intervention by child protective services; a request for emergency shelter or housing; a civil legal intervention such as a restraining order; and criminal prosecution or court ordered probation.

Of the \$8.3 million budgeted through Multnomah County in FY2011, most is earmarked for crisis intervention and holding batterers accountable for their behavior. However, in Multnomah County and across the nation, only a small percentage of victims seek support from domestic violence programs. Only an estimated 11%* of physically abused women call victims' programs or shelters and only around 35% ever call the police.

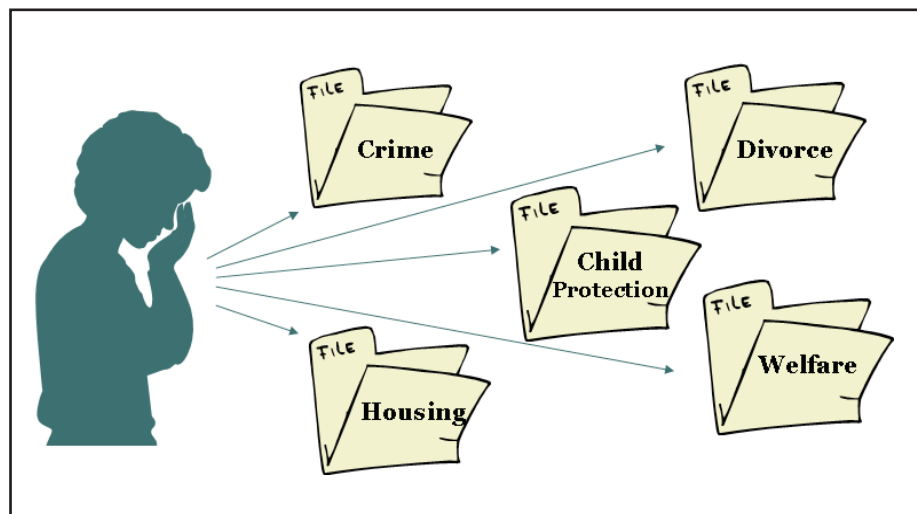
In part, this may be due to a lack of physical capacity to meet the needs of victims who are reaching out for help. In 2009, domestic violence programs in Multnomah County reported providing

* Estimates vary between five and eleven percent. In her November 2010 presentation at the United Way Columbia-Willamette Domestic Violence Leaders Summit, keynote speaker, Sujata Warrior, PhD, used five percent. Studies most commonly cited in Multnomah County report 11%.

33,762 nights of emergency shelter. However, during that same time, programs also reported that they were unable to provide shelter for 10,646 requests.¹⁵

Lack of the organizational capacity to tie services together across systems may also hinder effective service to victims. Victims' often need to navigate multiple services that are not coordinated effectively. In essence, victims' complex circumstances are segmented into distinct cases served by different agencies and organizations. Absent partnerships with non-domestic violence service providers and programs, domestic violence systems can struggle to help victims access services in a way that would be most helpful to meet the victims' individual needs.

Figure 1: Complex lives become distinct cases



Source: *Creating Collaboration for Community Change*. Sujata Warriar, PhD. Presented at the United Way Domestic Violence Summit. November 30, 2010. Portland, Oregon.

Members of the domestic violence system recognize the need to improve access to services and proposed two ways of doing that: multi-disciplinary walk-in center and placing domestic violence advocates in local agencies that serve women, children, and families.¹⁶ The DVCO and other agencies have sought grants to

place advocates in Child Welfare and Self-Sufficiency offices, with the Portland Police Bureau, and mental health agencies. Recently Multnomah County, the City of Portland, and a wide array of service providers have recently opened The Gateway Center for Domestic Violence Services.¹⁷

The Center is a secure environment that houses a variety of services under one roof. Its goal is to help victims protect themselves and their children from continued violence and to enhance the ability of police, prosecutors, and the courts to hold perpetrators accountable for their actions. The feasibility study for the Center reports that similar programs have experienced “a significant increase in the number of domestic violence victims obtaining assistance and the number of domestic violence perpetrators held accountable for their actions”.¹⁸ While this is undoubtedly a step in the right direction, it still may not reach the majority of victims.

Victims with diverse needs and concepts of domestic violence do not seek traditional crisis intervention services

The ability to respond to a domestic violence crisis is essential and makes an immediate difference in the lives of victims and their children. However, most victims tend to seek assistance in ways that are not primarily focused on domestic violence nor part of Multnomah County’s crisis intervention system. For instance, the 1998 Oregon Domestic Violence Needs Assessment states:

More than 90% of physically abused women seek support and protection from [non domestic violence oriented] individuals and agencies, but the most frequently sought sources are not the most helpful. They most often turn to family or friends (80%), followed by police (35%), mental health providers (34%), and supervisors or coworkers (32%).¹⁹

The Governor’s Domestic Advisory Work Group reported a specific need to reach out to all populations.

There are also specific communities and populations in Oregon that have special needs that are not being met. This may include those for whom English is not their primary language,

immigrants, refugees, people of color, people with physical or cognitive disabilities, sexual minorities, older and younger people and those from diverse ethnic backgrounds.²⁰

In addition, there are many reasons why victims of domestic violence, whether facing a crisis situation or not, may never choose to contact domestic violence programs, crisis hotlines, or emergency shelters. Even in cases where physical abuse occurs, victims may see domestic violence as only a symptom of a bigger problem affecting the relationship. They may not see themselves as victims of domestic violence because there is no physical abuse. They may not see emergency shelter or leaving the relationship as their best option. They may also be afraid of a police response for many reasons including their own criminal history or immigrant status as well as fear of racism in the criminal justice system.

The following examples, drawn from summaries of interviews of individuals working in domestic violence in Multnomah County, illustrate how individual needs can vary.

- My problem is racism not domestic violence

While interviewing African-American women in Multnomah County who had been the victims of serious physical domestic violence, researchers discovered that the women considered their main problem to be one of race and not domestic violence.²¹ Despite repeated questions, researchers found that the women were not interested in discussing the abuse done to them. Rather, they talked about witnessing violence toward their husbands and sons. While the women in the study were domestic violence victims, they would be unlikely to call a crisis hotline or seek services from a domestic violence program.

- I'm being abused, but the help you are offering is not what I need

As domestic violence advocates reach out to a wider range of populations in the community, some domestic violence

advocates report that the services being offered do not fit the needs of some victims. For example, some women experiencing domestic violence are not willing to stay in a shelter. For some, their cultural expectations do not work with the shelter environment. Others are not willing to follow the restrictive shelter rules or may not feel that they should have to leave their home while the abuser remains stable and comfortable. Still other victims may want the abuse to stop, but do not see leaving the relationship as the best option. Victims who are part of a close extended family may count on their relatives rather than domestic violence services for support and assistance in addressing the violence. Immigrants who are being abused may be dependent upon the marriage to remain in the country.

- What I'm experiencing is not domestic violence

Domestic violence is not restricted to any population demographic or socio-economic group. However, stereotypes and lack of awareness about domestic violence may keep victims from seeking help. For example, victims of financial or emotional abuse may not seek assistance because they believe that only physical abuse constitutes domestic violence. Others may have a stereotypical concept of victims or abusers that does not fit with what they are experiencing. Many of these individuals are part of the hidden problem of domestic violence who, until or unless the abuse escalates to physical violence, are unserved in the community.

The domestic violence system recognizes the need for adequate prevention services and measures

Domestic violence is preventable and there are variables that put individuals, families, and communities at higher risk for victimization and abusive behavior.²² Policy-makers, scholars, elected officials, and service providers have called domestic violence an epidemic that is a public health and safety threat to individuals, families, workplaces, schools, and communities across Oregon.

The Governor's Domestic Violence Advisory Work Group recently recommended that primary prevention programs should

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be developed with the assistance of experts who can help identify best practices for developing, supporting, and evaluating domestic violence prevention programs that take all socio-economic levels into consideration and incorporate the nine principles* of effective prevention programs documented by the Centers for Disease Control.²³

The domestic violence partners in Multnomah County have recognized the need for prevention as well as crisis intervention.²⁴ To address this need, domestic violence service providers in the region report that they add prevention activities to existing workloads when they can. Additionally, some in-home family nursing programs screen for violence in the home and provide education, suggestions, counseling, and advice about domestic violence.

No one profession or discipline can solve the problem of domestic violence

Domestic violence is not an isolated problem. It is a social justice and human rights issue, a criminal justice and public health issue. It impacts the victims' physical and mental health and has a significant impact on the workplace. Domestic violence costs employers lost days of work and reduced productivity.

The Oregon Bureau of Labor and Industries estimates that domestic violence costs Oregon industries \$50 million per year.²⁵ Safe@work, a coalition of private employers, trade unions, domestic violence advocacy groups, and government organizations reports:

An estimated 74% of employed battered women report being harassed while at work by their abusive partners in person or by telephone. National studies have found that 50% to 85% of

* Nine Principles of Effective Prevention Programs: 1) Comprehensive, 2) Varied teaching methods, 3) Sufficient dosage, 4) Theory driven, 5) Promote positive relationships, 6) Appropriately timed, 7) Socio-Culturally relevant, 8) Include an outcome evaluation, 9) Well-trained staff. Based on *What works in prevention: Principles of effective prevention programs*. (2003). Nation, M., et al. *American Psychologist*. 58, 449-456.

abused women miss work because of domestic violence and over 60% report arriving late to work due to abuse.²⁶

Larger societal factors can also influence the likelihood of domestic violence. The risk of intimate partner violence is greatest in societies where violence is socially accepted in a variety of situations. Relationships with high conflict, especially conflict related to finances, jealousy, and gender roles tend to be at risk for violence.²⁷ Other factors such as alcohol or drug abuse, unemployment, and education levels have also been associated with increased risk of domestic violence.²⁸ Research suggests that programs intended to improve the educational, economic, and social status of women would help to prevent domestic violence. Additionally, programs intended to reduce societal norms of violence, and reduce poverty and financial instability would help to prevent domestic violence.²⁹

Domestic violence affects the success of social service and educational programs

Domestic violence overlaps with other risks for individuals and families. For example, homelessness and housing instability are strongly associated with inadequate food and medical care, and inconsistent education for children, as well as domestic violence.³⁰ Victims of domestic violence may experience housing and financial instability that leads to homelessness. In Multnomah County, service providers report considerable instances of domestic violence in families whose housing is unstable. As service providers work with their clients, an awareness of how to identify and assist families experiencing violence increases the likelihood of success for the families. Education, problem solving skills, and safety planning to avoid future violence will promote familial stability both at their time of greatest need and into the future.

Exposure to violence also has a lasting impact on children. Violence results in physical, mental, and emotional harm for children, and increases risk of difficulties with attachment, regressive behavior, anxiety, depression, aggression, and conduct problems. Children exposed to violence may be more likely to experience dating violence, delinquency, further victimization,

and involvement in the child welfare and juvenile justice systems. Exposure to violence may make it more likely that children continue the cycle of violence into the next generation; it can impair children's capacity for partnering and parenting later in life. However, early identification, intervention, and continued follow up by families, teachers, police, judges, pediatricians, mental health providers, child protection workers, and others in the child's life can decrease the impact of exposure to violence.

It is necessary that the entire community engage in addressing the problem of domestic violence and be aware of how they can help reduce the long term damage it causes. Community organizations such as schools, churches, youth organizations, civic and social groups have opportunities to assist victims and provide intervention, prevention, and education as well as send a strong message to the perpetrators that domestic violence is unacceptable.

Increases in system capacity are needed

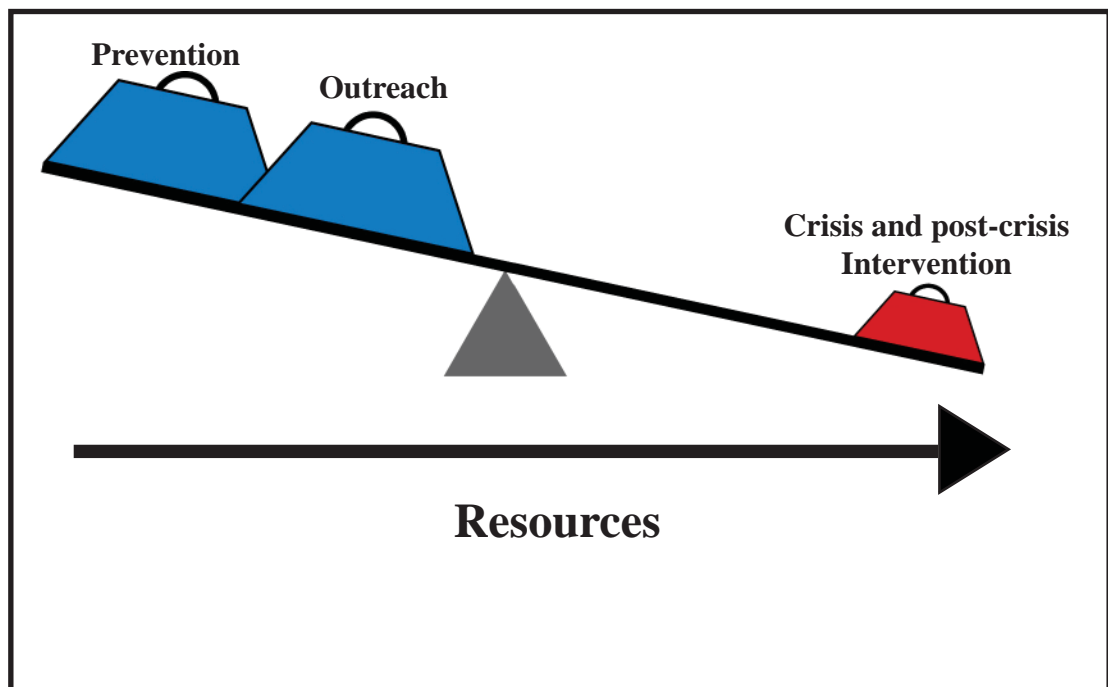
The domestic violence system does not currently have the capacity for crisis intervention as well as prevention and outreach to all communities. Currently, the majority of Multnomah County's domestic violence resources are dedicated to crisis intervention and post-crisis stabilization and rehabilitation. Resources include funding as well as staffing, facilities, organizational structure, time dedicated to planning, and political support. At this time, the domestic violence system has little capacity to address prevention and outreach to all populations because most of the resources and operational structures are focused on engaging in crisis intervention.

Crisis and post-crisis intervention is an essential component of addressing domestic violence. For that reason, emergency assistance for victims and their families must continue. However, current crisis and post-crisis intervention strategies are reactive. Although intended to stop future violence, they are largely designed to react to violence that is already taking place not reduce the likelihood that domestic violence will ever occur in relationships in the first place. Prevention strategies, on the other

hand, are proactive and designed to help communities reduce the environmental and societal risk factors that are associated with domestic violence.

Crisis response services are unlikely to have as great an impact on reducing domestic violence as prevention strategies will. Further, the domestic violence community acknowledges that only a small percentage of individuals experiencing domestic violence are reached through current services. Unless changes are made to incorporate prevention strategies and reach more victims, domestic violence services will not reach the majority of the community. The illustration below demonstrates the imbalance created when resources are only allotted to crisis intervention and not expanded to include both prevention and efforts to reach all populations.

Figure 2: Domestic violence resource allocation



Source: Multnomah County Auditor's Office

Expand capacity to meet need

To expand capacity and meet community needs, the domestic violence system needs to engage existing and new partners through purposeful synergy. As Multnomah County's domestic violence system is currently structured, a broader focus on reaching more victims and engaging in prevention would require either allocating new resources into the system or diverting resources out of crisis and post-crisis response efforts. Put simply, the existing system is structured and funded for crisis and post-crisis response, not outreach and prevention. Without new resources, efforts to expand the system's focus to include prevention and outreach would mean shifting funding away from services for crisis intervention.

Purposeful synergy means that when partners come together to collaborate effectively, they are more successful than they could have been independent of each other.³¹ In effect, the whole is greater than the sum of the parts. Strategic collaboration with an expanded number of partners whose work overlaps risk areas for domestic violence will expand the domestic violence system's capacity by drawing on resources and professional insights not currently directed at domestic violence. As discussed previously, potential partners might include those that focus on issues related to healthy families, services to a wide range of at risk populations, strengthening communities, and education.

Improved collaboration will also benefit the existing domestic violence system. Members of the domestic violence community interviewed for this report gave many examples of successful information sharing and working together to solve problems. For example, members of the domestic violence community; often supported by the FVCC, its members agencies, committees, and the relationships and discussions it foster on-going efforts to:

- Identify strengths and needs of the system.
- Monitor processes and needed changes based on new information, new laws or procedures, changes in resources.
- Encourage relationships across disciplines and jurisdictions in order to promote easy access to those in other disciplines.
- Develop shared values and priorities.
- Facilitate detailed understanding of policies, procedures,

-
- expectations and limitations of what an agency can and cannot do in response to domestic violence incidents.
- Support a feeling of solidarity for members of the domestic violence community to decrease isolation and vicarious traumatization in light of the difficult work they do.
 - Provide a forum for agencies and individuals new to domestic violence or to Multnomah County to meet others and begin to integrate into the system.

Members of the domestic violence community also talked about on-going struggles with openly discussing contentious issues, maximizing problem solving efforts, and resolving disagreements in a way that draws on the best skills and knowledge of all participants.

Collaboration is always difficult. Competition for resources, differing agency focus, and lack of staff to dedicate to implementing innovative ideas makes collaboration even more difficult. Although many of the domestic violence partners that are active in crisis response work together to provide a cohesive system of services, they are frequently in competition for scarce funding. This makes open communication about developing new ways of doing things difficult. Members of partner agencies may legitimately fear that changes in current practices would result in defunding their programs.

Differences between professional practices and the law and rules* under which agencies operate also make collaboration difficult. The various organizations focus on different issues and operate based on differing or even opposing philosophies. For example, even though domestic violence advocates and child protective services workers are both committed to stopping violence within the home, the two groups have sometimes been at odds with each other when they attempted to work together. The advocates generally focus services on the adult victim while the child

* For example, mandatory child abuse reporting laws and rules related to client confidentiality.

protection workers take a child-centered approach. At times, this can result in disagreements about the best course of action for the case. For instance, in situations where child safety is at risk, child protective services policies may require them to recommend removing the child from the victim's care until the living environment becomes safe from violence. Victim's advocates, on the other hand, are more likely to try to encourage a safety plan that keeps victims and their children together. This example is only one of the many focus-related disagreements that have to be addressed for collaboration to take place.

Finally, organizational support and strong commitment from decision-makers is necessary for successful collaboration.³² This requires an intentional shift of focus and reallocation of resources to support collaboration while still meeting the existing service expectations. In addition, as collaborative partners make decisions about how they will work together, their agreements must be documented in written commitments about what will be done and how resources will be allocated.³³

Use strategic collaboration to solve problems and increase service capacity

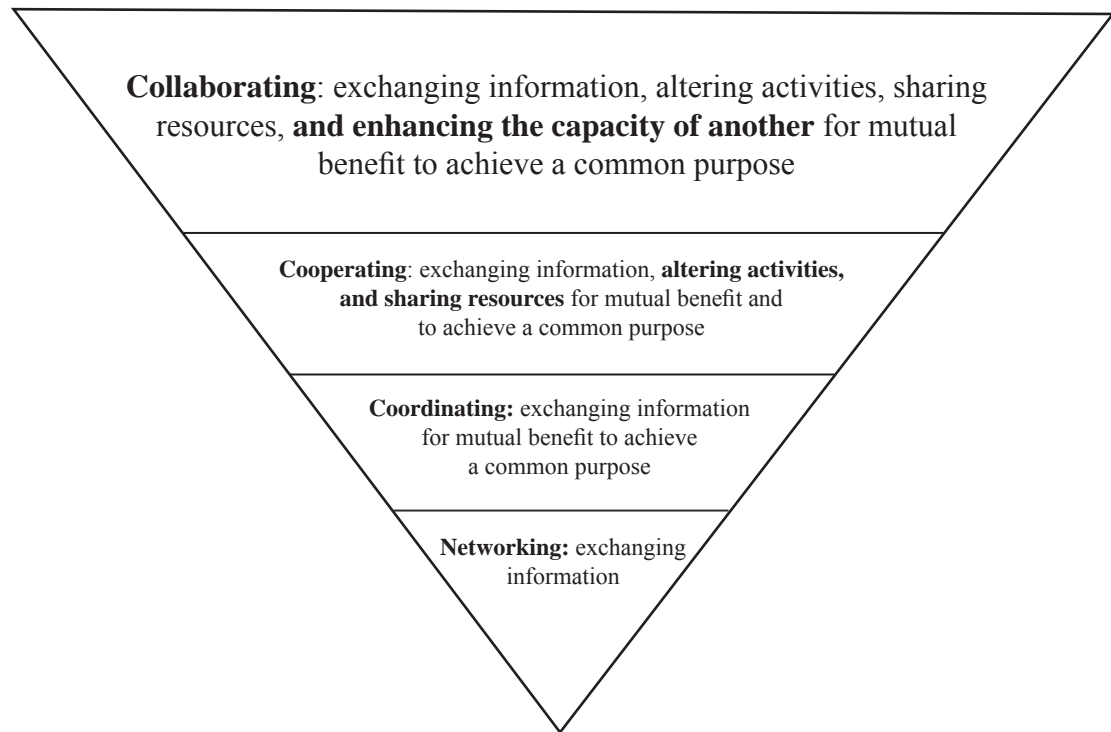
Strategic collaboration will uncover new ways to solve problems and increase service capacity. Strategic collaboration requires an intentional effort to develop the knowledge, attitudes, skills,³⁴ and processes³⁵ needed for success. Research in the field of social work and other non-service oriented fields demonstrates that collaborative decision making will produce:³⁶

- More effective and creative solutions
- Less fragmentation and duplication of services
- More effective use of resources
- Fewer people falling through the cracks in the system
- Greater advocacy and emotional support for the people served
- Improved ability to influence public policy
- An improved working environment
- A greater sense of accomplishment

Collaboration is a learned skill.³⁷ It is “exchanging information, altering activities, sharing resources, and enhancing the capacity of another for mutual benefit of all and to achieve a common

purpose.”³⁸ The term collaboration is commonly interchanged with terms such as networking, cooperation, and coordination.³⁹ However, collaboration is actually quite different in that the goal is to enhance capacity by way of working together using existing resources and practices. Figure 3 illustrates the difference between the terms.

Figure 3: Definition of Collaboration



Source: Kovener, M. & Stark, E. (2002). *Making collaboration work: The experience of Denver Victim Service 2000*. U.S. Department of Justice Office for Victims of Crime. NCJ 194177.

Successful collaboration is dependent on a common language for decision-making and a set of principles for interaction. This lies at the heart of the definition of collaboration because it allows all participants to confidently engage in the process with a clear understanding of what is expected of them and what they can expect of others.⁴⁰

Strategic collaboration means deliberately cultivating skills in inter-organization collaboration to enhance the County's capacity to uncover new solutions to existing problems. This level of collaboration requires knowledge, attitude, a clear process, and skills. It is important that collaborators have knowledge about the services they provide as well as the services and practices of their colleagues from other agencies. They need to have a positive attitude about engaging in collaborative work. Finally, they have to be aware of and respect the other disciplines they are working with and the work they do.⁴¹

A clear process or structure is essential to successful strategic collaboration. Each established group, agency, and profession has its own unique culture and method of doing business.⁴² When groups come together to collaborate, they must have a framework that allows them to bridge the gap between their differences to work together and begin to trust each other. This means a mutually acceptable set of clearly defined expectations to: define the purpose and goals they are working toward; make decisions; develop strategic plans; identify actions items; and resolve disagreements.⁴³ Without a clearly understood process, the individual groups will be considerably less effective at building capacity because they will tend to focus on their organizational differences rather than their ability to collaboratively solve the problem.

In the absence of a collaborative process, groups tend to be hesitant to share information and bring options to the table. They often fall back on protecting their own interests rather than seeking to help solve the problem because they cannot be certain that other participants won't use the information to their advantage

rather than for mutual benefit. The unfortunate result tends to be an imbalance of power in which the group with the most power makes the decisions and the others are forced to go along or walk away from the project. The result of this type of decision making may promote an adversarial rather than collaborative relationship between the very organizations working to address the problem.

Skills in interdisciplinary communication and collaboration make it possible for facilitators and participants to collaborate effectively. This requires a multi-step training process to address identified needs, build team development skills, including conflict management, and create a cohort of participants who can work well across systems.⁴⁴

First, the participants learn the collaboration concepts and begin to practice them. Second, using a train the trainer model, the participants learn how to teach others and support expanded use of the strategic collaboration within the County. Finally, follow-up training and monitoring reinforces these skills over time.⁴⁵

**The community
needs a broad
strategic direction
to address
domestic violence**

The Community needs a broad strategic direction to address Domestic Violence. Multnomah County has experienced budget cuts for the past 11 years. Although recent cuts have been more severe than normal, current trends indicate that sharp budget cuts will continue. The Board of County Commissioners continues to struggle with the need to make cuts to social services and other programs. These cuts greatly impact the assistance the County can provide to the people in the greatest need. The Chair and others have recently asked all members of Multnomah County to think differently about how to do the work that needs to be done. To assist families affected by domestic violence, the community needs a broad direction using strategic collaboration to build capacity to serve those in need.

As the County continues to have to do more with less, this report proposes a fundamental change in the way people work together and find new ways to solve old problems. Members of the domestic violence system currently coordinate efforts

and collaborate to solve important problems. Building system capacity will require new skills for greater collaboration with new partners. There will be a cost associated with this shift in the way the County strategically collaborates to meet the needs of the community. However, the investment will produce a return that outweighs the cost.⁴⁶

Recommendations

Recommendation 1: The Chair's Office and the Board of County Commissioners provides leadership to support domestic violence strategic collaboration in the County

Existing structures such as the DVCO and the FVCC currently support the functions and direction of the domestic violence system. Any overarching change in practices to build capacity through enhanced collaboration also requires strong support and leadership from the County. It takes long-term focus on a well defined strategic plan. The domestic violence system will need support, resources, encouragement, and direction from the highest levels of County government. Leadership in this form facilitates change over time.

Facilitative leadership “empower[s] people to work together to achieve a common goal because [the leaders have] the power and influence to make the process easier for the participants in a collaboration.”⁴⁷ Facilitative leadership from the Chair and the Board of County Commissioners will draw together groups from the community and other jurisdiction and support broad-based engagement in the process. Although there are many methods for developing this skill set, the County, through the Talent Development department, currently teaches a course in facilitative leadership that may be useful in achieving the goal of strategic collaboration.

Recommendation 2: The Chair and the Board of County Commissioners, in conjunction with members of the domestic violence community, develops a set of expectations for strategic collaboration

The collaborating groups will need strong support from the Board of County Commissioners to make a successful change

to this new way of doing business. The Board needs a template to help collaborating groups bring forward plans for strategic collaboration. This template should include the following types of questions:

- What is the specific goal of the collaboration or problem to be addressed?
- Who are the participating partners?
- What is the strategic plan of action?
- What are the anticipated deliverables?
- How will this collaboration increase our capacity to serve the community?

Recommendation 3: The Chair and the Board of County Commissioners facilitate collaboration with partners that have not previously been part of the domestic violence system

To truly expand the capacity of the domestic violence system, many new partners should be welcomed to discuss how to expand the County's response to domestic violence. The schools, the medical and health professions, the business community, labor organizations, and many others can have a voice in this conversation. However, they will first need an opportunity to consider how their insights can help to build a system that responds to domestic violence, reaches every member of our community, and prevents domestic violence from ever taking place. One way to do this might be through a summit conference to begin the conversation and draw everyone together under a common goal of strategically addressing domestic violence.

Recommendation 4: The Chair and the Board of County Commissioners ensure that all key participants receive appropriate training in strategic collaboration

Skills and established processes are essential for successful strategic collaboration. Managers and staff tasked with coordinating strategic collaboration meetings and processing must have the skills necessary to confidently guide the diverse

participants through the process. This means on-going training for County personnel who will be able to provide training and support that is not dependant on an external consultant. This will give staff the expertise they need to coordinate collaborative meetings and move forward on action items.

Recommendation 5: Participating partners develop or use a pool of neutral facilitators to moderate strategic collaboration meetings

Neutral facilitators from outside domestic violence system are also essential to success. This is important because, in order to perpetuate open collaboration, the person leading the meeting should not have a vested interest in the outcome. A pool of neutral facilitators with whom all members of the group are comfortable working will allow participants to focus on collaboration and maximize the positive outcomes of their work. While the neutral facilitators may have professional knowledge about the issues being discussed, the collaborators must be confident that they can remain objective about the outcomes and support balanced communication.

Recommendation 6: Staff participating in the collaboration meetings must have the authority to commit or to strongly support committing Department or agency resources and to assure implementation of the agreed-upon strategies.

Inability to make decisions and commit resources on behalf of their organizations hinders participants' engagement in effective collaboration. It also slows implementation of action items.

Objectives Scope and Methodology

The primary report objectives were to:

- Determine whether current methods for communication and collaboration are adequate to address identified needs.
- Determine whether current processes to support communication and collaboration are adequate to support systemic collaboration needs.

-
- Determine whether current practices are adequate to promote broad-based resource improvement.

An audit of the Domestic Violence system was included in the FY09-10 audit schedule. As supported by Multnomah County Auditor's Office Policies and Procedures, this audit was conducted as a special report. The special report format was selected to facilitate an evaluation of extra-organizational factors impeding systemic effectiveness. As such, the identified themes raise questions about the development of systemic practices rather than improvements to existing functions and operations. For this reason, the findings and recommendations focus more on the role of the Board of County Commissioners to support change that builds capacity to address domestic violence more broadly.

For several reasons, we determined that a special report of the Domestic Violence system would be more appropriate than an audit report. First, this report was not a non-audit function. It was conducted in accordance with Generally Accepted Auditing Standards. Second, this report is intended to provide meaningful insight into barriers that exist among agencies, groups, and organizations both within and outside of Multnomah County government. The Auditor's Office has no formal authority to audit extra-jurisdictional entities. For this reason, we asked participant agencies to work with us voluntarily. Finally, since the domestic violence partner agencies, organizations, and groups participated voluntarily, a special report as opposed to an audit more appropriately conveyed our desire to collect and disseminate information to a broader audience and address an overarching benefit to the extended system rather than just one internal department.

During the course of this special report, we conducted an extensive series of interviews, observations, and discussions with primary stakeholders from each of the domestic violence partner categories. These included more than 50 interviews with representatives from community-based non-profit advocacy and batterer's intervention organizations, the Department of Human Services and the Multnomah County Health Department. We also interviewed medical and education professionals as well as

Special Report

representatives from the business and faith-based community and the criminal justice system.

Strategic collaboration findings and recommendations resulted from a review of the multi-disciplinary literature as well as interviews and intensive brainstorming sessions with acknowledged professionals in the field of non-adversarial decision-making.

We reviewed:

- County funding for domestic violence and Domestic Violence Coordinators Office practices related to grant management and resource allocation.
- Professional and scholarly literature related to domestic violence prevalence and practices as well as studies and reports making recommendations about problems and suggested improvements in the local domestic violence system.
- Audits and audit related reports of domestic violence from King County, Washington; Kansas City, Missouri; and the Government Accountability Office.

Of note is the lack of audits related to domestic violence and domestic violence systems.

We used information collected from interviews to identify and quantify common themes related to communication and collaboration among partners, collaboration processes, and resource development practices. We then conducted a vetting process to assess the validity of the identified common themes and identify whether the stakeholders' anecdotal observations of the system match the themes expressed during interviews. This was accomplished through a series of follow up interviews with key stakeholders and presentations to key groups participating in domestic violence system coordination efforts.

Endnotes

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³ Wallpe, C.S. (2010). Engaging a systems approach to evaluate domestic violence intervention with abusive men: Reassessing the role of the community. Dissertation. Portland State University.

⁴ Domestic Violence in Multnomah County. (1999). Multnomah County, Portland Multnomah Progress Board, Portland Police Bureau.

⁵ Summary of regional data collected by the Multnomah County Domestic Violence Coordinator's Office.

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⁷ The Story of Rachel. Praxis International. http://www.praxisinternational.org/praxis_products.aspx

⁸ Multnomah County Proclamation No. 2010-143.

⁹ For more information about the Multnomah County Domestic Violence Coordinator's Office visit the website at <http://mints.co.multnomah.or.us/jsp/MINT/EntryPoint?ch=205fcb1a644c7010VgnVCM1000003bc614acRCD>

¹⁰ Safe Start Initiative: Safe Start promising approaches communities 2005-2009. (2008). Safe Start Center. Retrieved on-line at <http://www.safestartcenter.org/about/communities-i.php>

¹¹ For more about the Multnomah County Defending Childhood Initiative visit the website at <http://web.multco.us/defending-childhood>

¹² For more about the Multnomah County Defending Childhood Initiative visit the website at <http://web.multco.us/defending-childhood>

¹³ This and all references to County spending are based on Multnomah County annual budget data compiled and reviewed by the Multnomah County Auditor's Office.

¹⁴ Multnomah County Domestic Violence Resource Manual (2003). Available on-line at <http://mints.co.multnomah.or.us/jsp/MINT/EntryPoint?ch=205fcb1a644c7010VgnVCM1000003bc614acRCD>

¹⁵ Data compiled by the Multnomah County Domestic Violence Coordinator's Office.

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¹⁷ For more information about the Gateway Center for Domestic Violence Services visit the website at <http://www.gatewaycenterdv.org/gatewaycenter/>

¹⁸ Feasibility study for a One-Stop domestic violence service center: City of Portland, Multnomah County. (2008). Prepared by Technical Assistance for Community Services.

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¹⁹ 1998 Oregon Domestic Violence Needs Assessment. (1998). A Report to the Oregon Governor's Council on Domestic Violence.

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Multnomah County Department of County Human Services 2010 Budget program offer #25044. Domestic Violence Prevention – High School.;

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²⁶ DV and the Workplace. Safe@workcoalition. For more information visit their website at www.safeatworkcoalition.org.

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²⁹ Jewkes, R. (2002). Intimate partner violence: Causes and prevention. *Lancet*. 359:9315, p.1423.

³⁰ Lubell, J. & Brennan, M. (2007). The positive impacts of affordable housing on education: A research summary. Center for Housing Policy. Available on-line at www.nhc.org/housing/intersections. ; Lubell, J. & Brennan, M. (2007). The positive impacts of affordable housing on health: A research summary. Center for Housing Policy. Available on-line at www.nhc.org/housing/intersections

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**Responses
to Audit**



Jeff Cogen, Multnomah County Chair

501 SE Hawthorne Blvd., Suite 600
Portland, Oregon 97214
Phone: 503-988-3308
Email: mult.chair@multco.us

Date: February 22, 2011

To: Steve March, Multnomah County Auditor

From: Jeff Cogen, Multnomah County Chair

Re: February 2011 Special Report on Domestic Violence

Domestic violence is a serious problem facing our community- touching every part of our society with devastating long term and short term affects. The depth of the problem combined with limited resources to address it force us to consistently evaluate our approach, and strive for improvement. The work you do as Multnomah County Auditor along with your skilled staff allow us do just that – thereby providing excellent and deserved accountability to tax payers.

It is my hope that this report allows us to build on what we're already doing well, and starts meaningful dialogue around how to improve. It is with that hope that I accept the recommendations of this report and will work to follow through to the extent our limited resources allow. As we enter our eleventh consecutive year of budget cuts, we must cultivate our partnerships and do all we can to effectively collaborate.

The analysis in this report would not be possible without the work of the Domestic Violence Coordinator's Office (DVCO). Being uniquely poised in our ability to convene the social service system and the criminal justice system, we have lived our values of partnership and collaboration through a number of existing structures. I am proud of the work of the Family Violence Coordinating Council (FVCC), the Domestic Violence Enhanced Response Team (DVERT) and the Domestic Violence Fatality Review Team. Through partnership with the City of Portland and the FVCC, the Gateway Center for Domestic Violence Services opened in September of 2010 – and has served over 500 victims in its first four months of operation – illustrating clearly the immense community need.

Broad coordination is not simple, and I would like to acknowledge the work of Chiquita Rollins – who is retiring this spring - for her tremendous leadership in this way and excellence in this field. I am looking forward to working with our partners and the new DVCO Director around the recommendations in this report.

Thank you for this good work.



MULTNOMAH COUNTY OREGON

DEPARTMENT OF COUNTY HUMAN SERVICES
DOMESTIC VIOLENCE COORDINATOR'S OFFICE
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PORTLAND, OREGON 97204-1618
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BOARD OF COUNTY COMMISSIONERS
TED WHEELER · CHAIR OF THE BOARD
DEBORAH KAFOURY · DISTRICT 1 COMMISSIONER
JEFF COGEN · DISTRICT 2 COMMISSIONER
JUDY SHIRACK · DISTRICT 3 COMMISSIONER
DIANE MCKEEL · DISTRICT 4 COMMISSIONER

DATE: February 23, 2011

MEMO TO: Steve March, Multnomah County Auditor

FROM: Chiquita Rollins, Multnomah County Domestic Violence Coordinator

SUBJECT: Special Report on Domestic Violence

I first want to say how much I appreciate the work that you and Shea Marshman have done to put together this report and your interest in helping to develop a more comprehensive response to domestic violence in our County.

The report provides a substantial overview of the domestic violence response system in Multnomah County, and demonstrates the level of support and resources that the Board of County Commissioners and Departments have provided to this system. Many of our efforts here are considered model programs nationally, and I believe we have one of the most comprehensive response systems in the country.

Your findings will help the County and community to continue to develop an effective multi-faceted solution to domestic violence. You have rightly pointed out that we need to increase the capacity in the existing system and to increase our prevention and outreach capacity. The strategies that you recommend for accomplishing these include building on our current collaboration efforts and expertise, involving partners from additional disciplines and sectors of our community in our efforts, and to help the community develop a broad strategic direction to address domestic violence.

I believe that there is another goal that we need to keep in the forefront as we move forward. It is to include and empower survivors, communities of color and immigrants in our processes, planning, collaborations and evaluation efforts, and to develop strategies to address the needs specifically raised by them.

I will be leaving the County for retirement soon. However, I know that the County Chair, Board of County Commissioners, other elected officials, Multnomah County Family Violence Coordinating Council and our many partners will continue to work to improve our response, expand our ability to address the needs of victims and increase their safety, deter future domestic violence, and provide children who have been exposed to a batterer with safety and a path to healing.

Thank you for your commitment to the County and to this issue.

MULTNOMAH COUNTY FAMILY VIOLENCE COORDINATING COUNCIL

Abuse Recovery Ministry & Services, Allies in Change, Bradley-Angle, Bridges to Safety, CASA For Children, Catholic Charities' El Programa Hispano-Project UNICA, ChangePoint, Choices Domestic Violence Intervention Program, City of Portland Office of Neighborhood Involvement, Communities Against Domestic Violence, Gateway Center for Domestic Violence Services, Gresham Police Department, IRCO, Legal Aid Services of Oregon-Multnomah County Office, Lewis & Clark Legal Clinic, Lifeworks NW, Listen to Kids, Men's Resource Center/Women's Counseling Center, Metropolitan Public Defenders, Multnomah County Department of Community Justice, Multnomah County Aging & Disability Services, Multnomah County Circuit Court, Multnomah County District Attorney's Office, Multnomah County Family Court Services, Multnomah County Health Department, Multnomah County Sheriff's Office, Native American Family Healing Circle, Oregon Department of Human Services, Oregon Health & Science University, Oregon Medical Association, Portland Health Institute, Portland Police Bureau, Portland Women's Crisis Line, Raphael House of Portland, Russian Oregon Social Services, SAWERA, The Salvation Army West Women's & Children's Shelter, Self Enhancement Inc., SoValTi, Volunteers of America Home Free, YWCA of Greater Portland, 211Info

DATE: February 23, 2011

MEMO TO: Steve March, Multnomah County Auditor

FROM: Laura Ritchie, Chair
Multnomah County Family Violence Coordinating Council
Laura Davis Ritchie

SUBJECT: Special Report on Domestic Violence

Thank you for providing the Multnomah County Family Violence Coordinating Council with the opportunity to comment on your Special Report on Domestic Violence. As you know, the Council's Executive Committee met with Shea Marshman and provided her with information about our system, the Council's functions and the challenges we face.

We hope that you will be able to attend a Council meeting in the near future and present the findings in person to the membership. In the coming month, we will more closely review the report, findings and recommendations and incorporate those that we find to be the highest priority in our future efforts.

The Council was founded in 1987 to be a forum for information sharing, and coordination and collaboration in the development of a more effective response to domestic violence. The Council has been in many ways very successful in their efforts over the years and stands as a national model. Your report accurately describes collaboration as "always difficult." However, reducing the difficulty of collaboration is one of the roles the Council plays in this community. It provides an opportunity for member agencies to develop the prerequisites for successful collaboration: a shared vision, an understanding of and alignment with common goals and objectives, relationships between individuals and agencies, a deeper appreciation of the roles, strengths and limitations of agencies, and a forum for addressing sometimes contentious problems.

We will be pleased to work with you, the County Chair and Commissioners, other elected officials and our many community partners in the future to expand the capacity of our current efforts, to increase prevention and outreach efforts, to develop new partners and new collaborations, and to improve our communication and collaboration skills.

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