

Michigan Department of Community Health

Rape Prevention and Education Program

Evaluation Report – FY09

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MPHI

Jessie Jones, MPA

Julia Heany, Ph.D.



*Michigan Department
of Community Health*



Jennifer M. Granholm, Governor
Janet Olszewski, Director

Introduction

The Rape Prevention and Education (RPE) program at the Michigan Department of Community Health (MDCH) has contracted with the Center for Healthcare Excellence at the Michigan Public Health Institute (MPHI-CHE) to conduct an evaluation of RPE program activities. The MDCH RPE program is funded by the Centers for Disease Control and Prevention (CDC) and is intended to strengthen and support sexual violence prevention efforts. With an overall long-term goal of reducing the incidence of sexual violence in the state, the Michigan RPE program comprises three components: the Sexual Violence Prevention Grants Program, run through the MDCH RPE program; the Statewide Strategic Planning Project, housed at the Michigan Coalition Against Domestic and Sexual Violence (MCADSV); and the Rape Prevention and Services (RPS) Grants Program, housed at the Michigan Department of Human Services (MDHS).

The statewide evaluation of the RPE program is designed to assess the implementation and outcomes of the program. The evaluation is aligned with the RPE logic model (see Appendix A), and measures progress in four specific areas that reflect state-level strategies for reducing sexual violence: collaboration, planning, capacity building, and funding prevention activities.

Key evaluation questions were developed based on the logic model (see Appendix B). Core questions include:

- What role did collaboration play in the planning and implementation processes?
- What was the nature of the SVP planning process?
- How was capacity built among RPE grantees?
- How is funding for preventive programming being used by funded agencies?
- What are the outcomes of RPE funded activities?

This is the first year of a multi-year evaluation of the RPE program, and this report focuses on program implementation. Over subsequent grant years, the evaluation team will collect additional evidence regarding program outcomes.

Methodology

During this project year, the evaluation design involved using multiple methods to respond to the evaluation questions described above. When possible, data from existing documents was used to reduce the burden on funded agencies and other stakeholders. The two primary data collection methods utilized this project year are described below.

Project Documentation

Existing reports and other documents provided by RPE grantees were used when possible to collect data that answered the research questions. Grant applications from funded agencies, as well as annual reports, were collected and analyzed. Relevant data were abstracted and entered into a form created to capture data elements of interest to the evaluation. Other materials created by funded agencies, the planning committee, and the overall RPE program were also collected and reviewed as they were made available to the evaluation team. These data sources reflected most prominently the activities of RPE

grantees, and, as such, they offered insight regarding local collaboration, local programming and other activities, and local outcomes.

Grantee Survey

A brief survey was created and implemented with staff from funded agencies. This survey asked individuals to report on program activities, outcomes, and knowledge and use of training and technical assistance resources. Grantees of the RPE program, as well as those funded through DHS, were surveyed. The survey was administered online. Respondents were invited to participate via email and multiple follow-up attempts were made in order to increase participation.

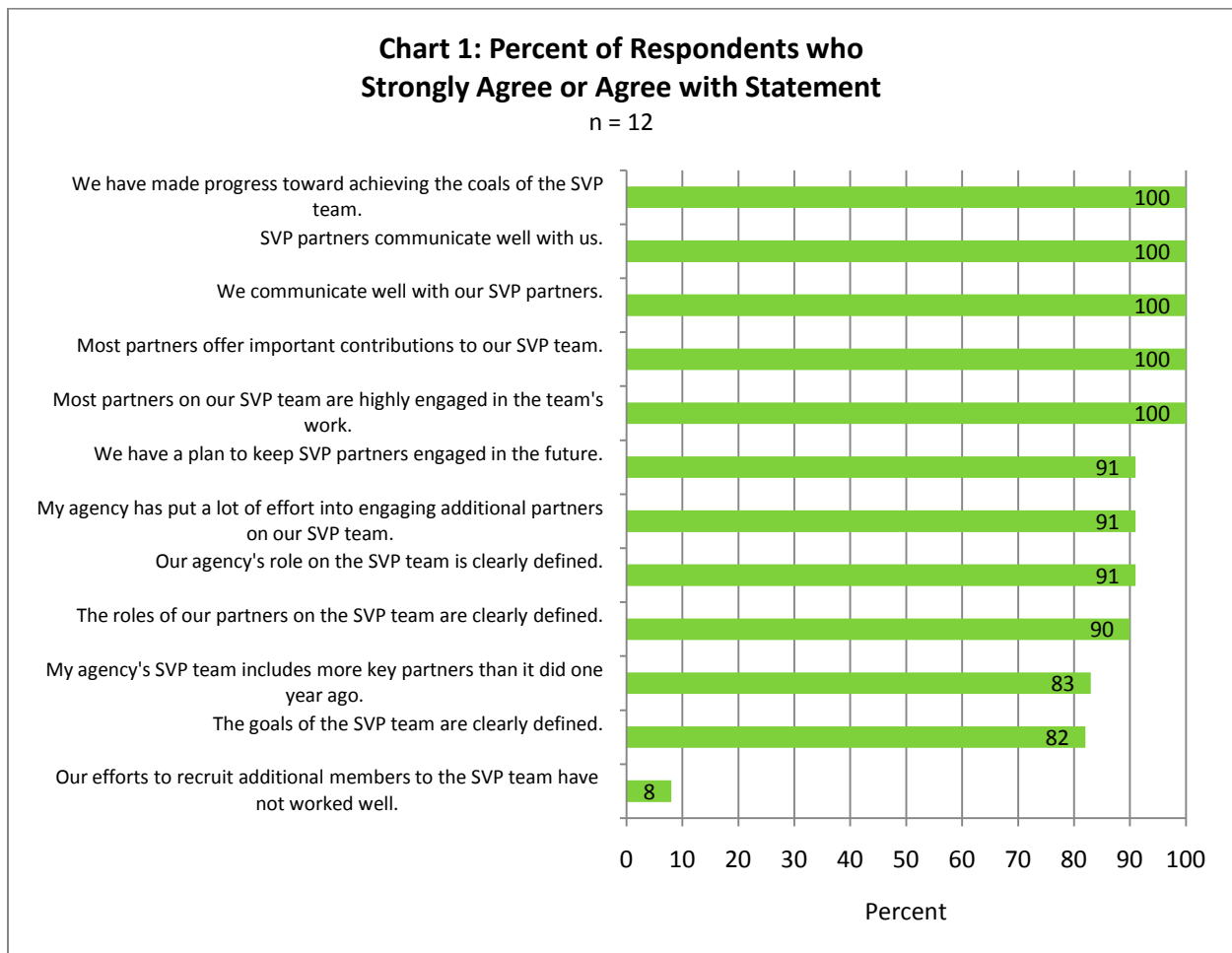
Organization of this Report

The next section of this report presents findings by key evaluation question, including sections on collaboration, planning, capacity building, funding preventive programming, and preliminary program outcomes. The following section includes a discussion of findings, and the final section offers recommendations regarding both programming and evaluation.

Findings

Collaboration

Collaboration played a key role in what the program was able to accomplish during the project period. Most prominently, as a result of their efforts to engage new stakeholders, grantees indicated that they were able to reach populations that they had previously not been able to serve. Each community formed a Sexual Violence Prevention (SVP) team, as required by the grant, which played a key role in accomplishing project tasks. These teams expand over the year, as new priority populations or key agencies were identified and successfully recruited. The grantee survey included several questions related to the SVP team, and answers are presented in Chart 1, below.



Grantees were generally quite pleased with their SVP teams, and have committed resources toward developing strong and clearly defined relationships with their partners. However, there were differences between the two groups of grantees surveyed. While 100% of DHS grantees felt that they had all of the needed partners at the table, only about 38% of RPE grantees expressed the same. When asked what partners they felt were missing from their SVP teams, responses varied, but several indicated that they were missing strong partners from schools and the medical community, specific subpopulations, or community representation in general. The majority of RPE grantees indicated that despite not having all

desired groups as partners, they have been successful in reaching out to specific groups when necessary to reach certain segments of the community with their message.

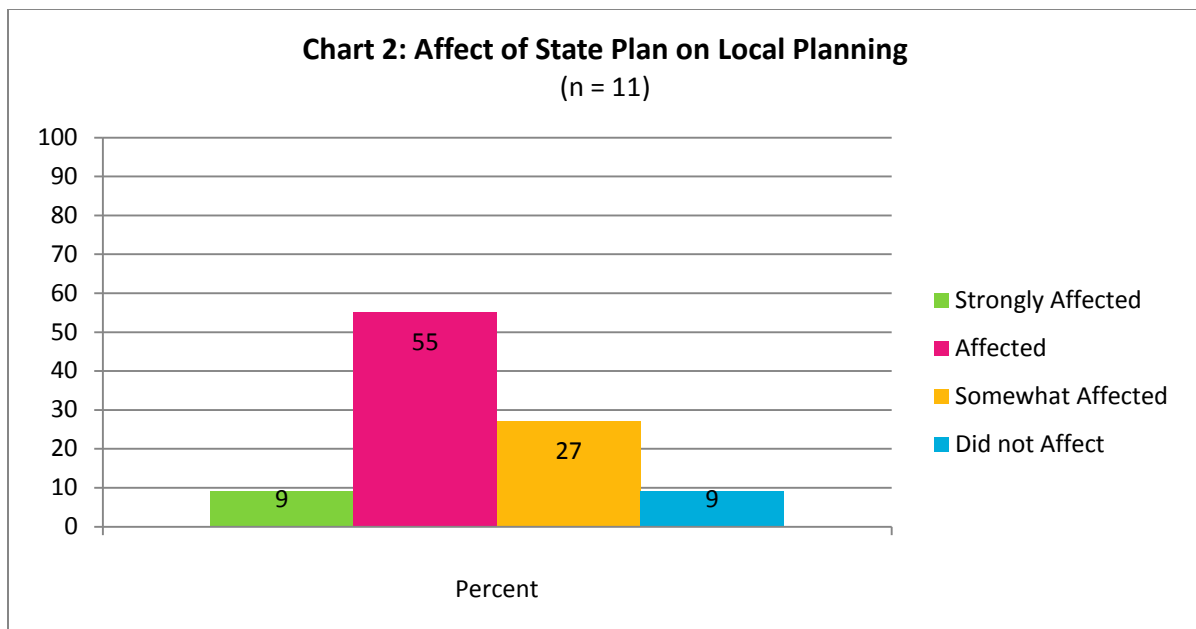
RPE grantees had SVP teams that varied greatly in size, from about ten members to more than 30. Most tended to have between 10 and 20 members on their team. Communities whose teams had more members tended to meet more often than the communities with smaller SVP teams. Several grantees indicated that while they had the needed partners in place, it was often difficult to get partners to attend meetings or project-related events. Another commonly cited issue was keeping partners reigned in and on task, including keeping the focus on primary prevention instead of on direct services.

Over the project year, RPE grantee SVP teams have successfully implemented many programs and created presentations for use with certain segments of the community. Commonly cited successes include well attended and positively received programs and events, as well as reaching new populations with programming.

Planning

Planning at the state level occurred through the Statewide Strategic Planning Project. The planning project was housed at the Michigan Coalition Against Domestic and Sexual Violence, and the group brought together a statewide coalition including key stakeholders at the state and local levels. These individuals were tasked with developing, implementing, and evaluating a state-wide plan for the prevention of sexual and intimate partner violence. The plan, titled, “Preventing Intimate Partner and Sexual Violence in Michigan 2010-2015” was finalized in 2009.

RPE and DHS grantees were asked several questions about the state plan on the survey. One hundred percent of respondents were familiar with and had read the state plan. Communities are in the midst of planning at the community level, and were asked to what extent the state plan had affected their local-level strategic planning process. Chart 2, below, describes their responses.



Most respondents indicated that the Michigan plan caused them to reach out to key community groups and add them to their SVP team, and that it made them think more about how the work affects and is affected by partners.

When asked if there were needs not addressed by the Michigan plan, 27% of respondents did not think there were gaps in what the plan addressed. The highest percentage, 54% were unsure if there were needs not addressed by the Michigan Plan. Those that did identify gaps indicated that resources to implement objectives and goals were not clearly identified by the plan. All respondents thought the plan was at least somewhat feasible, with most indicating the plan was feasible or very feasible.

Grantees were also provided with a training opportunity related to local-level planning. A 50 Year Visioning Workshop was held and representatives from each community that holds an RPE grant attended. This workshop gave the grantees tools and opportunities to learn more about local-level planning and what is needed to create a long-term plan to prevent sexual and domestic violence in their communities.

Capacity Building

When asked about opportunities for training and technical assistance provided, 100% of respondents indicated that they were receiving all of the information and opportunities they required. Most respondents indicated that they reached out to their state-level contacts on average once every four to six months or less. One hundred percent of respondents were satisfied or very satisfied with the training and technical assistance information they received from the state program. None of the respondents indicated that they had unmet technical assistance needs.

RPE grantees were provided with one training session through the RPE program during this program year, the 50 Year Visioning Workshop. One month following the training session attendees were given an opportunity to report back about how the information and training materials provided at this session were being used in their community. Overall, respondents to the survey (n = 8) seemed pleased with the training session, with 62.5% of respondents agreeing or strongly agreeing that they were very satisfied with the 50 Year Visioning Workshop. The same proportion agreed or strongly agreed that the session prepared them to be able to apply the 50 year visioning process in their own community planning efforts. While the majority of respondents were unsure that the 50 year visioning process would be beneficial to their program, no respondents indicated that it would not be beneficial, and 37.5% agreed that it would be beneficial for their program to engage in the process.

When asked about the most helpful outcome of this training, respondents tended to indicate that they thought the materials provided during the training session would be helpful for their planning process. Respondents also said that the training helped them see who would be important partners to have involved in the planning process. One respondent really appreciated that the training helped to refocus planning on the bigger, long-term process rather than specific activities and events that are typically the focus of their planning efforts.

Funding Preventive Programming

RPE funding must be spent on primary prevention, and RPE grantees are focused on preventive activities. According to grantee reports, nearly all grantees spent the largest portions of their budget on educational seminars, training for professionals, and informational materials. All of the RPE grantees provided educational sessions to local adolescents through schools. Educational activities for adolescents typically involved multi-session presentations covering topics such as sexual harassment, domestic/dating violence, sexual assault, and healthy relationships. Several curricula were used for these activities; most RPE grantees used curricula developed by outside sources, but curricula developed in house were also used. A few of the RPE grantees also provided educational sessions to college age individuals, and all held at least one training session for targeted groups of professionals, for example, public health nurses or individuals involved in the justice system. Little to none of the budgets of most grantees was spent on education on date rape drugs, coalition building, or strategic planning.

In the survey, respondents were asked if their programs included interventions of various types, including educational sessions, interventions to improve media literacy, interventions designed to shift community norms, or if they had worked to leverage additional funds or affect policy change. Follow-up questions regarding outcomes of these activities were also included. When asked if their agency's funded program included educational interventions, 27% indicated that this was mostly what they do, and the remaining 73% indicated that this was part of what they do. Ninety-one percent of respondents indicated that the evaluation of these activities indicated that had increased knowledge about sexual violence among participants, and the remaining respondent indicated that the activity had somewhat increased this knowledge among participants. When asked if educational interventions had a positive influence on attitudes about sexual violence among participants, 72% indicated that interventions did have a positive influence, and the remaining 28% indicated that the interventions had a somewhat positive influence.

Approximately 82% of respondents indicated that media literacy interventions were at least part of what their agency did. One respondent indicated that this was their primary focus, and two indicated they did not implement any activities related to media literacy. Of those that evaluated activities related to media literacy, 54% found that the interventions had somewhat improved media literacy among participants. Eighteen percent had not evaluated these interventions.

When asked about interventions designed to shift community norms, 91% indicated that this was at least part of what they did, and only one grantee indicated they did not implement any activities designed to shift community norms. Thirty-six percent of respondents did not evaluate these types of interventions, but of those that had, 27% indicated interventions had somewhat of a positive influence on community norms, and the remaining 27% indicated that interventions did have a positive influence on community norms.

Ninety-one percent of survey respondents indicated that part of what they did was work toward leveraging additional funds for sexual violence prevention, services for survivors, partnership activities, offender treatment, or activities influencing key risk and protective factors. Of those that applied for

additional funding, nearly a third were successful in securing new monies for programs, and 20% had applied for additional funding but were awaiting award notification.

Of the eleven survey respondents that answered questions related to policy change, only one, or 9%, indicated that this was not part of what they did this year. Those programs that indicated that they work toward policy change indicated that their policy activities focus on sexual harassment policies at local schools and workplaces. Just over half of respondents were successful in getting desired policies enacted.

Finally, respondents were asked how successful they were in meeting their project's objectives as stated in their workplan. Seventy-two percent of respondents indicated that they were successful in meeting stated objectives, and 18% indicated that they were very successful in doing so.

Although all grantees report engaging in a variety of intervention activities, RPE grantees tend to focus on educational sessions and other training activities when describing their work, structuring their evaluations, and reporting their spending. They provided few details regarding the other types of intervention activities they engage in, including the outcomes of these activities.

Outcomes

Grantees under the RPE program identified program outcomes in their reports, and several themes related to outcomes were apparent across grantees. Nearly all of the RPE grantees indicated that their educational sessions and other events were well received by the intended audiences, and evaluation of educational sessions held with adolescents generally showed positive changes from the pre- to post-test. More specifically, grantees saw that knowledge improved following educational interventions. Grantees also found that participants reported positive changes in attitudes and behavior following these sessions.

In addition to positive feedback from participants, some RPE grantees were able to increase participation from existing partners or to add new partners to their SVP team following successful events. In fact, many of the RPE grantees indicated that they experienced increases in participation and/or the number of partners on their SVP team during the project year. Grantees also noted that communication and the strength of their relationships with partners improved over the course of the project year. In some cases, this led to additional opportunities for programs to reach new audiences with their messages. Partners continued to play an important role in the successes RPE grantees were able to achieve.

In addition to these successes, several challenges were identified by RPE grantees. Some RPE grantees indicated that attendance was low at events and programs other than their educational sessions for adolescents. There also seemed to be more of a focus on the educational sessions and less of a focus on other types of events and activities, which could be a part of the cause of the attendance issue.

While most grantees were pleased with who was currently part of their SVP team, there were issues with getting representation from specific groups, often including groups that represent minority or

cultural populations. Grantees also reported that getting SVP team partners to the table at the same time and focused on the same issues was challenging at times.

Grantees were not able to identify program outcomes, other than those gathered using surveys conducted following educational sessions. Although there were grantees that indicated on the survey that they saw evidence of shifting community norms or increased media literacy following related activities, RPE grantees did not report on these activities, how they were evaluated, or their outcomes in their annual report. In addition, several RPE grantees indicated both in their reports and on the survey that they were not sure how to evaluate activities other than educational sessions.

Discussion

These results suggest that Michigan's RPE program has established a firm foundation on which it can build a multi-level approach to the prevention of sexual violence. At the community level and statewide, relationships between key partners are strong and growing. Planning activities are underway and linkages are being formed between planning at the state and local levels. Training and technical assistance is available and grantees are pleased with what they receive. Finally, grantees are working toward a comprehensive approach to prevention, gradually expanding on their educational activities.

Collaboration is a key component of the RPE statewide logic model, and the program's focus on partnership building has already led to positive outcomes. Collaboration helped to build a strong statewide plan that is well regarded and widely known, and it helps community grantees to accomplish their goals. While partnerships are quite extensive in some communities, some grantees continue to report gaps in their partnerships. However, grantees indicate that, where gaps exist, they are actively working toward engaging needed partners in their activities. Generally, grantees report that existing partners are engaged and support sexual violence prevention by bringing valuable resources and knowledge to the table.

Community grantees are currently engaging in community-level planning, and have reported that the state-level plan has provided them with guidance and a framework for their future work. The most commonly indicated effect of the state-level plan on community-level planning was that it increased the emphasis on building local partnerships and highlighted for RPE grantees how critical partners are in the achieving their program's objectives. Overall, respondents seemed to appreciate the guidance for their own planning efforts provided by the state-level plan and the 50 Year Visioning Workshop.

Grantees are generally pleased by the support they receive from the state agency that awarded their grant (either the RPE program at MDCH or through DHS), indicating that they have no pressing technical assistance needs at this time. However, based on reports and survey feedback, there are some areas where technical assistance could be quite useful, including implementing and evaluating prevention activities that do not target the individual and on reaching specific groups within their communities.

The results of the survey and grantee reports indicate that grantees have achieved some successes as the result of their activities. Although it is much too soon to measure the impact of activities on rates of sexual violence in communities, grantees report that educational sessions are having a positive impact on participants. Grantees have also reported success in collaborating with additional partner groups, increasing the reach of their message.

Recommendations

Based on these findings, several recommendations have emerged. Recommendations for the RPE program include:

Reporting

The reporting forms completed by grantees ask that they identify activities related to partnerships, educational sessions, and professional training; however, several other types of activities, such as shifting community norms and increasing media literacy, are also part of their work. Including sections of the report that request more detailed information regarding these other types of activities would be a useful way to collect information regarding the extent to which grantees are implementing multi-level prevention activities.

One strategy for collecting this information could be to require that grantees specify their program's objectives and discuss the tasks they completed under each workplan objective. This would ensure that all activities are included in project reports. Space to recount anecdotal evidence regarding the effect of activities on participants could also be included and would provide additional information on program successes and challenges.

Evaluation Strategies

RPE grantees indicated in their reports and on the survey that they would find it useful to receive information or training on evaluation methods other than pre/post tests. Grantees struggled with evaluating activities like media campaigns or community events, and they would find information on evaluating such activities helpful. As such, training or technical assistance related to evaluation methods appropriate to these types of activities would be useful for grantees.

Reaching Specific Audiences

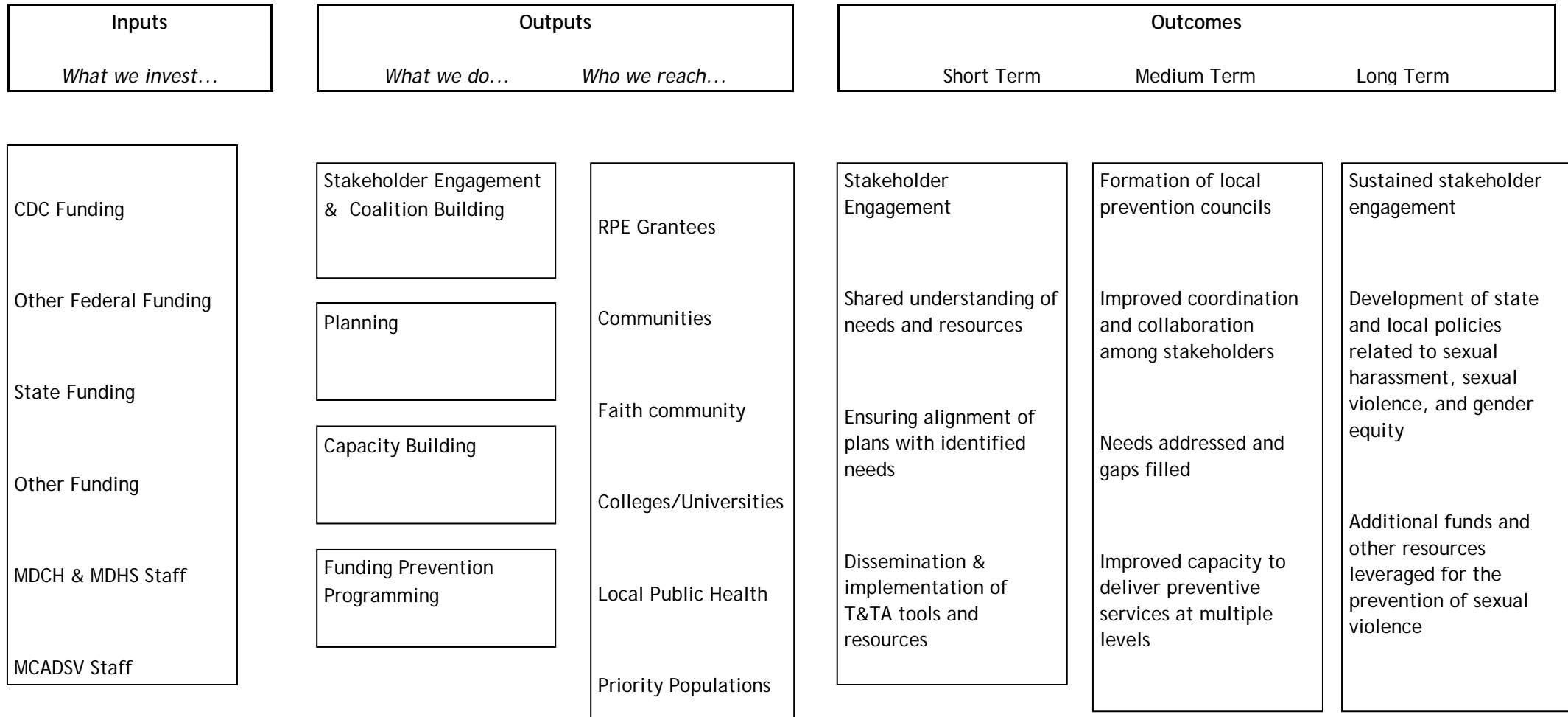
RPE grantees indicated that they have found it difficult to involve some specific partner groups, such as minority or cultural groups in the community, in program activities. Technical assistance on developing messages that can be used to reach specific audiences could be a useful tool in furthering grantees' work.

Ensuring Activities Address Risk & Protective Factors at Multiple Levels

Many of the activities the grantees implemented addressed individual, but few addressed the community level, and the relationship and societal levels were not commonly addressed. Requiring plans to indicate how each level will be addressed by planned activities would be useful in getting grantees to start thinking past individual interventions.

Appendix A: RPE Logic Model

Rape Prevention and Education Program Logic Model



Assumptions

1. Primary prevention is the key to ending sexual violence.
2. Sexual violence is caused by factors at the individual, relationship, community, and societal levels, all of which must be addressed.
3. Multiple sectors can and should play a role in ending sexual violence.
4. Key stakeholders must address sexual violence in a way that is coordinated and well planned.

External Factors

1. Powerful social norms and gender roles
2. Media portrayal of women, relationships, and sex
3. Differences across communities, social groups, and racial and ethnic groups
4. Availability of resources to implement primary prevention activities
5. Lack of surveillance data that would give a stronger picture of actual situation.

Appendix B: RPE Evaluation Plan



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Rape Prevention and Education Evaluation Plan

Purpose & Research Questions

The Rape Prevention and Education (RPE) program at the Michigan Department of Community Health has contracted with MPHI-CHE to conduct an evaluation of RPE program activities. The RPE grant program is funded by the Centers for Disease Control and Prevention (CDC) and is intended to strengthen sexual violence prevention efforts by supporting increased awareness, education and training, and the operation of hotlines. The Michigan RPE program has the overall goal of reducing the incidence of sexual violence in the state, and comprises three components, including the Sexual Violence Prevention Grants Program, the Statewide Strategic Planning Project, and the Rape Prevention and Services Grants Program. This evaluation will collect data pertaining to each of these programs in order to evaluate the processes and outcomes of the RPE program in Michigan.

MPHI-CHE created an RPE Program logic model (Figure 1). This model describes program activities and links them to outcomes and is the basis for the evaluation questions, which follow:

1. What role did collaboration play in the planning and implementation processes?
 - a. What strategies were implemented to engage key stakeholders and build or strengthen rape prevention coalitions?
 - b. Were any gaps in representation from priority populations identified?
 - i. What was done to fill these gaps?
 - c. To what extent were local prevention councils formed?
 - d. Did key stakeholders improve coordination and collaboration over the life of the program?
 - e. Are strategies in place to facilitate sustained stakeholder involvement and collaboration?
2. What was the nature of the SVP planning process?
 - a. To what extent were needs and resources assessed at the State level?
 - i. How were the results of the assessment used to inform State level planning?
 - b. To what extent were needs and resources assessed at the local level?
 - i. How were the results of the assessment used to inform local level planning?
 - c. What needs were and were not addressed through the planning process?
 - i. Was a plan developed that stakeholders believe is feasible and useful?
 - ii. What components of the plan were implemented?
 - iii. What plan components were not implemented?

1. Why were they not implemented?
3. How was capacity built among RPE grantees?
 - a. What training and technical (T&TA) resources were identified and made available to RPE grantees?
 - i. Were T&TA resources identified that are appropriate for a variety of audiences?
 - ii. Were T&TA resources identified that incorporate multiple levels of prevention?
 - iii. What dissemination methods for T&TA resources were implemented?
 - iv. Are local RPE grantees aware of T&TA resources that were identified?
 - v. Are local RPE grantees using T&TA resources that were identified?
 - vi. Are other prevention councils aware of and using these tools?
4. How is funding for preventive programming being used by funded agencies?
 - a. Have funded agencies increased focus on primary prevention?
 - b. Are funded agencies across the state implementing both universal and selected prevention activities?
 - c. Are funded agencies across the state using culturally appropriate prevention strategies and curricula?
 - d. Are funded agencies across the state implementing prevention strategies that address risk and protective factors and the individual, relationship, community, and societal levels of analysis?
5. What are the outcomes of RPE funded activities?
 - a. Were State and/or local policies implemented that address sexual harassment, sexual violence, and/or gender equity?
 - b. Were additional funds leveraged at the state and/or local level sexual violence prevention, victim services, opportunities to partner, and/or offender treatment?
 - c. What outcomes did local programs find?
 - i. Did local programs designed to shift norms find evidence supporting their efficacy?
 - ii. Did local programs designed to improve media literacy find evidence supporting their efficacy?
 - iii. Did local programs designed to educate and inform find increased knowledge and concern about sexual violence following the intervention(s)?
 - iv. Did rates of service utilization (prevention programming, hotlines, and offender treatment) increase over time in RPE communities?
 - v. Did rates of volunteerism for sexual violence prevention increase over time in RPE communities?
 - vi. Have rates of sexual violence decreased in communities with RPE programs in comparison with communities without such programs?

Methods

This study will use multiple methods to respond to the research questions described above. As much as is possible, the evaluation will utilize data from existing reporting forms in order to reduce the burden of the evaluation on funded agencies and other stakeholders. Evaluation methods are described in more detail below. Table 1 links the research questions listed above to the methods that will be used to gather data to answer each question. Table 2 presents the methods, the related indicators, and the audience with which each method will be used.

Project Documentation

As described above, existing reports and data collection forms will be used as much as possible to collect data that answer the research questions. Grant applications from funded agencies, as well as annual reports will be collected and examined. Relevant data will be abstracted and entered into a form created to capture data elements of interest to the evaluation. Other materials created by funded agencies, the planning committee, and the overall RPE program, such as training materials, technical assistance materials, strategic plans, meeting minutes, stakeholder websites, and any other documents created will also be collected and reviewed.

Key Informant Interviews

State-level staff, individuals who participated in the planning process, key informants from funded agencies, and other important stakeholders will be interviewed using a structured interview protocol. These interviews will provide insight into program processes that may not be reflected in written documents. Interviews will be conducted in the last quarter of each fiscal year of the grant.

Grantee Survey

A brief survey will be created and implemented with staff from funded agencies. This survey will ask individuals to report on knowledge and use of T&TA resources, program activities, and program outcomes. These surveys will be implemented in the last quarter of each fiscal year of the grant.

Secondary Data

Data sources such as Behavioral Risk Factor Surveys, Youth Behavior Risk Factor Surveys, State Police data, and other secondary data sources will be examined in order to identify trends in rates of sexual violence in funded and unfunded counties.

Table 1: Method by Evaluation Question

Evaluation Question	Method(s)
Collaboration	
What role did collaboration play in the planning and implementation processes?	Project Documentation Key Informant Interviews
What strategies were implemented to engage key stakeholders and build or strengthen rape prevention coalitions?	Project Documentation
Were any gaps in representation from priority populations identified? What was done to fill these gaps?	Project Documentation
To what extent were local prevention councils formed?	Project Documentation
Did key stakeholders improve coordination and collaboration over the life of the program?	Key Informant Interviews
Are strategies in place to facilitate sustained stakeholder involvement and collaboration?	Key Informant Interviews
Planning	
What was the nature of the SVP planning process?	Project Documentation Key Informant Interviews
To what extent were needs and resources assessed at the State level?	Project Documentation
How were the results of the assessment used to inform State level planning?	Project Documentation Key Informant Interviews
To what extent were needs and resources assessed at the local level?	Project Documentation Key Informant Interviews
How were the results of the assessment used to inform local level planning?	Key Informant Interviews Grantee Survey
What needs were and were not addressed through the planning process?	Key Informant Interviews Grantee Survey
Was a plan developed that stakeholders believe is feasible and useful?	Key Informant Interviews
What components of the plan were implemented? What components of the plan were not implemented? Why were these components not implemented?	Project Documentation Key Informant Interviews

Capacity Building	
How was capacity built among RPE grantees?	Project Documentation Key Informant Interviews
What T&TA resources were identified and made available to RPE grantees?	Project Documentation Key Informant Interviews
Were T&TA resources identified that are appropriate for a variety of audiences?	Project Documentation Key Informant Interviews
Were T&TA resources identified that incorporate multiple levels of prevention?	Project Documentation Key Informant Interviews
What dissemination methods for T&TA resources were implemented?	Project Documentation Key Informant Interviews
Are local RPE grantees aware of T&TA resources that were identified?	Grantee Reports Grantee Survey
Are local RPE grantees using T&TA resources that were identified?	Grantee Reports Grantee Survey
Are prevention councils aware of and using these tools?	Project Documentation Key Informant Interviews
Funding Preventive Programming	
How is funding for preventive programming being used by funded agencies?	Project Documentation
Have funded agencies increased focus on primary prevention?	Project Documentation Grantee Survey
Are funded agencies across the state implementing both universal and selected prevention activities?	Project Documentation Grantee Survey
Are funded agencies across the state using culturally appropriate prevention strategies and curricula?	Project Documentation Grantee Survey
Are funded agencies across the state implementing prevention strategies that address risk and protective factors and the individual, relationship, community, and societal levels of analysis?	Project Documentation Grantee Survey
Program Outcomes	
Were state and/or local policies implemented that address sexual harassment, sexual violence, and/or gender equity?	Grantee Survey Key Informant Interviews
Were additional funds leveraged at the state and/or local level for sexual violence prevention, victim services, opportunities to partner,	Grantee Survey Key Informant Interviews

and/or offender treatment?	
What outcomes did local programs find?	Project Documentation
Did local programs designed to shift norms find evidence supporting their efficacy?	Project Documentation Grantee Survey
Did local programs designed to improve media literacy find evidence supporting their efficacy?	Project Documentation Grantee Survey
Did local programs designed to educate and inform find increased knowledge and concern about sexual violence following the intervention(s)?	Project Documentation Grantee Survey
Did rates of service utilization (prevention programming, hotlines, and offender treatment) increase over time in RPE communities?	Project Documentation Grantee Survey
Did rates of volunteerism for sexual violence prevention increase over time in RPE communities?	Project Documentation Grantee Survey
Have rates of sexual violence decreased in communities with RPE programs in comparison with communities without such programs?	Secondary Data

Table 2: Methods, Indicators, and Audiences

Method	Indicators	Audiences
Project Documentation (including Grantee Reports)	Collaboration Level of engagement in planning Gaps in representation in planning Local Prevention Council formation Nature of planning process Assessment results – state and local Use of assessment results Plan implementation Capacity-building Nature of T&TA resources identified Awareness and use of T&TA resources Dissemination of T&TA resources Use of preventive programming funding Increased focus on primary prevention Nature of implemented activities Local outcomes Efficacy of local programs Local levels of knowledge Service utilization levels Rates of volunteerism	State-Level Staff Funded Agency Staff
Key Informant Interviews	Collaboration Sustainability of collaboration Assessment results Use of assessment results How assessed needs were addressed Capacity-building Nature of T&TA resources identified, Use of T&TA resources Dissemination of T&TA resources Policies Implemented Leveraging of Funds	State-Level Staff Funded Agency Staff SVP Planning Committee Members
Grantee Survey	Awareness and use of T&TA resources Increased focus on primary prevention Nature of implemented activities Policies Implemented Leveraging of Funds Local outcomes Efficacy of local programs Local levels of knowledge Service utilization levels Rates of volunteerism	Funded Agency Staff
Secondary Data	Rates of sexual violence in RPE-funded and non-RPE-funded communities	n/a

Analysis

The analysis process will be designed to answer the research questions and to assess program implementation and outcomes in relationship to the program's logic model.

Qualitative data gathered from project documentation, key informant surveys, grantee surveys and the network analysis will be reviewed using qualitative analytic techniques such as content analysis to generate themes and respond to the evaluation question questions. The results of the surveys and secondary data will be analyzed using both descriptive and inferential statistics.

Reporting

Quarterly reports will be provided to the RPE program every three months for the duration of the project. These reports will provide a mechanism for ongoing communication between the RPE program and the evaluation team, will keep the RPE program up-to-date regarding status of evaluation activities, and will report emerging results that can be used by the RPE program to inform project activities. In addition, the Project Leader will contact program staff on a monthly basis to provide an update on progress, to review key documents and processes, and to discuss any emerging issues.

A final report will be provided to the RPE program at the end of the project year. This report will describe the implementation process over the project year and any outcomes identified. This report will be prepared by the evaluation team and submitted to RPE program staff for review. Any comments or suggestions will be incorporated into the final report as appropriate. The evaluation team will be available to support the RPE program as recommendations are implemented.