California Department of Public Health (CDPH)  
Safe and Active Communities Branch  
Rape Prevention Education (RPE) Program  

RPE Program Guidance for Developing Comprehensive and Effective Primary Prevention Programs

The National Rape Prevention and Education (RPE) Program is administered by the Centers for Disease Control and Prevention (CDC). CDC funds all 50 states and 8 territories according to a population-based formula. Federal legislation specifies the major areas of activities for preventing sexual violence, and the CDC has established program priorities for all states and territories for implementing the RPE Program. These RPE Program Guidelines were developed by the California Department of Public Health’s (CDPH) RPE Program to share the guidance and expectations of CDC, and to help local RPE-funded rape crisis centers (RCCs) develop their program strategies, goals, and objectives for the next contract period.

Local RPE grantees are expected to incorporate principles of effective prevention programs (see page 3) into the educational and training sessions they provide. RCC staff are not expected to demonstrate mastery in every aspect of the concepts described in this guidance document (e.g., primary prevention, public health approach, ecological model, evaluation, etc.) in order to continue to receive funding. However, they are required to demonstrate a commitment to the direction of the program, as described in this guidance document.

Purpose of CDC’s National RPE Program

The purpose of CDC’s National RPE Program is to effectively address sexual violence in communities by:
1. using a public health approach;
2. supporting comprehensive primary prevention strategies at multiple levels using a social ecological model or the Spectrum of Prevention;
3. building individual, organizational and community capacity for prevention;
4. applying the principles of effective prevention strategies; and,
5. evaluating sexual violence primary prevention strategies and activities.

CDC’s working definition of sexual violence prevention for the National RPE Program is: population-based and/or environmental and system-level strategies, policies, and actions that prevent sexual violence from initially occurring. Such prevention efforts work to modify and/or reduce the events, conditions, situations, or exposures to influences (risk factors) that are associated with the initiation of

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1 Excerpted from the April, 2006 draft version of “Sexual Violence Prevention and Education Program Announcement” by the Department of Health and Human Services, Public Service and the Centers for Disease Control (CDC), National Center for Injury Prevention and Control’s (NCIPC), Division of Violence Prevention (DVP).
sexual violence and related injuries, disabilities, and deaths. Additionally, sexual violence prevention efforts should address perpetration, victimization, and bystander attitudes and behaviors, and seek to identify and enhance protective factors to impede the initiation of sexual violence.\(^2\)

State and local prevention programs should incorporate:
- **Primary Prevention**: any action, strategy or policy that prevents sexual violence from initially occurring;
- **Ecological Framework**: strategies that work at various levels, including individual, relationship, community, institutional and societal;
- **Partnerships and Collaboration**: that help achieve intended outcomes and sustain efforts;
- **Cultural Relevance and Specificity**: prevention strategies should be appropriate for the populations for whom the strategy is intended and take into account the community’s culture;
- **Surveillance**: population based data to assess and track changes in sexual violence behaviors over time; and
- **Outcome and Process Evaluation**: indicators and measures to document a change in attitudes, behaviors, and norms related to sexual violence (outcomes) and help to assess actions taken to realize goals (processes).

**A review of the CDC publication Sexual Violence Prevention: Beginning the Dialogue** ([http://www.cdc.gov/violenceprevention/pub/SVPrevention.html](http://www.cdc.gov/violenceprevention/pub/SVPrevention.html)) is strongly recommended. It provides additional information about CDC’s vision for the National RPE Program and primary prevention of sexual violence.

**Models for Developing Comprehensive Programs**

A “strategy” is how you are going to get things done. Examples of primary prevention strategies include, but are not limited to:
- community mobilization;
- social norms change and social marketing;
- bystander engagement;
- media advocacy; and
- changing public or organizational policies.

To be more effective, strategies should integrate, link, and reinforce each other, and should align with the overall vision of the prevention program.

**The article Sexual Violence Prevention, published in the Prevention Researcher, provides an excellent discussion and examples of comprehensive program strategies. It can be downloaded for free at**

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Ecological Model

The four-level Ecological Model can be used to better understand the root causes of sexual violence and to recognize and develop potential points of prevention. The Ecological Model is a way to describe violence in terms of the complex interaction of four levels of influence, including individuals, interpersonal relationships, the community, and the society levels. For a clear description of each level of the ecological model and examples of sexual violence prevention strategies targeting each level, see Beginning the Dialogue (pages 4 and 5). An example showing how the Ecological Model is applied to develop school-based primary prevention strategies is included at the end of this document.

Spectrum of Prevention


10 Principles of Effective Prevention Programs/Strategies

CDC is utilizing the following principles to design and implement RPE programs and strategies. Many RCCs are already using some of these principles, but may identify others that can strengthen program efforts.

1. Comprehensive: strategies address risk and protective factors for sexual violence at multiple levels of the Ecological Model or Spectrum of Prevention.

2. Varied teaching methods: multiple strategies that increase awareness and understanding as well as enhance and build new skills.

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3 Nation M; Crusto C; Wandersman A; Kumpfer KL; Seybolt D; Morrissey-Kane E; Davino K. What Works in Prevention: Principles of Effective Prevention Programs. American Psychologist. 58(6-7); Jun-Jul 2003:449-456.
3. **Sufficient dosage**: exposure to enough of the intervention to produce the desired effect (i.e. multiple sessions). Research shows that 7-9 “doses” are needed to affect changes in attitudes and behaviors.

4. **Theory driven**: strategies that have a scientific justification or logical rationale for why they should work.

5. **Positive relationships**: strategies that promote strong positive relationships between children/youth and adults, youth to youth, and adult to adult.

6. ** Appropriately timed**: strategies are initiated early enough and at the appropriate developmental time to have an impact on the development of positive and negative behaviors.

7. **Socioculturally relevant**: tailored to the community and cultural norms, beliefs and practices; inclusion of community representatives in planning and implementation phases.

8. **Outcome evaluation**: systematic measurements that can document how well the intervention works.

9. **Well-trained staff**: programs are implemented by staff that are sensitive, competent, and sufficiently trained, supported, and supervised.

10. **Evidence-based**: efforts that are informed by the best available research or expertise.

**Developing Local RPE Program Strategies, Goals, and Objectives**

Local RCCs have accomplished tremendous goals with their RPE Program funds over the years. While integrating these guidelines into an existing program, it is important to be realistic and strategic about what can be accomplished in a given period considering the limitations of funding, time, and organizational and community support.

Reaching a large number of individuals and making a large number of presentations traditionally drives many grant-funded programs. However, the National RPE Program is not pursuing this goal. Instead of “sprinkling” prevention efforts far and wide, the National Program is now emphasizing “saturation” of efforts with comprehensive, in-depth, multi-component, multi-session strategies that reach fewer individuals, but have a higher likelihood of creating lasting change in order to eliminate sexual violence.

Therefore, RCCs are encouraged to focus their strategies as much as possible on a few specific groups of participants (e.g., do not focus on reaching every
school, youth or community center, etc. in an entire county, but rather focus on a specific group such as one school, or one community or cultural group). Additionally, programs should consider each step that needs to occur for one activity to take place and account for the time and resources each step will require. Programs are encouraged to focus more on quality rather than quantity.

The following are questions to consider when developing local RPE Program strategies, goals, and objectives:

1. What does your sexual violence surveillance or other sources of data indicate about sexual violence trends, priority populations and where to focus efforts?

2. What is your current capacity (personnel, funding, and partners) to implement program strategies? Are there other resources in the community that can contribute to these efforts?

3. Based on data, resources available, and your experience with past RPE efforts, what priorities should be established for future RPE strategies?

4. Are your proposed strategies (content) primary prevention focused?

5. Do your strategies incorporate the 10 Prevention Principles outlined above?

6. Are your proposed strategies supported by work at different levels of the Ecological Model or Spectrum of Prevention, and do each of these strategies link together in a comprehensive way?

7. What do you hope to achieve by implementing your strategies? How will you know when you have been successful?

8. How will you measure changes (in knowledge, attitudes, and behaviors) that occur as a result of your strategy?

**Program Evaluation**

Process evaluation involves collecting data or information in order to assess progress in accomplishing activities or tasks related to stated program objectives. Grantees are required to list process evaluation measurements under “Performance Measure and/or Deliverables” in the RPE scope of work. Examples of process evaluation measures are: sign-in sheets demonstrating the number of people attending a presentation; a calendar of training activities; a copy of developed curriculum; etc.
Outcome evaluation involves collecting data or information to provide evidence that the program is making a difference. Outcome evaluation ensures that you are accomplishing what you set out to do and that you know when a part of your program needs some improvement. Grantees are encouraged to keep evaluation feasible and useful by choosing methods that will give the most accurate information without overburdening resources or capacity. Outcome evaluation methods that measures changes in knowledge, attitudes, perceptions, behaviors, or behavioral intentions may include: surveys; questionnaires; pre/post-tests, interviews; focus groups; stories; observations; or case studies. The results of outcome evaluation will be reported in the annual report submitted by RPE grantees.

Additional informational resources for evaluation can be found on CALCASA’s website at: http://calcasa.org/category/prevention/ and http://calcasa.org/tag/rpe-resources/. The following are podcasts on evaluation subjects:

Patrick Lemmon on creative strategy to evaluate http://calcasa.org/prevention/creative-ways-to-measure-prevention/
Wendi Siebold on using online tools for evaluation http://calcasa.org/prevention/online-tools-help-evaluate-prevention/

Additional Considerations for RPE-Funded Strategies

Educational Sessions

CDC recommends educational sessions that select the appropriate audience and will result in changes in a participant’s knowledge, attitudes, behaviors, or norms. Sessions that focus exclusively on prevalence, dynamics of sexual violence, laws and statutes, intervention-based information (e.g., how to help a victim, recognizing warning signs, community resources; what to do if you have been raped; etc.) are not sufficient to change behavior and prevent sexual violence from occurring. Educational sessions can include general sexual violence and intervention-based topics or information, as long as they are part of a broader primary prevention session. Educational topics may include (but are not limited to): bullying; consent; dating violence; drug-facilitated rape; gender roles; healthy relationships; masculinity and sexual violence; consent and coercion, media advocacy; oppression; role of bystanders; and sexual harassment.

Training for Professionals

CDC recommends selection of professional audiences who have the capacity and opportunity to impact primary prevention of sexual violence. Training topics may include (but not limited to) those similar to educational sessions above, and
those that impact policy, organizational practices, etc. Professional training that has a goal to educate or improve the response to victims (e.g., SART training, training for judges on statutes, training for health professionals and law enforcement on appropriate response, investigation and prosecution) is not an appropriate use of RPE funds.

Informational Materials

These may include (but are not limited to) billboards, newspaper ads, radio ads, brochures, posters, website, and curricula that supports education and training sessions or other prevention strategies. (Please note the restrictions on the purchase and use of promotional items stated below).

Ineligible Expenses

State and local programs cannot use RPE funds to support the following activities:

- Victim Services/Response: RPE funds may not be used for direct victim service activities. This includes crisis intervention, case management, advocacy, counseling, support groups, and community outreach efforts in support of direct client services.

- Offender Treatment: These funds may not support offender treatment programs. The focus of RPE will be on preventing first-time perpetration, NOT on offender treatment for the purpose of preventing repeat perpetration.

- Victim Response Training: These funds may not be used for training that focuses on how service providers should respond to victims of sexual violence (e.g., advocates, Sexual Assault Nurse Examiner (SANE) programs, law enforcement or judicial response, etc.).

- Lobbying: Expenses associated with lobbying, whether conducted directly or indirectly, are not eligible for funding.

- Food/Refreshments: Because there are regulations that govern the use of federal and state funds for food expenses, these costs are ineligible.

- Promotional Items: On February 1, 2011, Governor Brown issued a memo directing all state agencies and departments to stop the purchase and distribution of “gifts” or “giveaway items” used to promote programs. Examples of restricted items include (but not limited to): mugs or cups; lapel or stick pins; pens or pencils; clothing (t-shirts, hats); and, key chains.
Using the Ecological Model to Develop School-Based Comprehensive Primary Prevention

To increase effectiveness, sexual violence prevention strategies should address several levels of the social ecological model. For example, a school-based comprehensive primary prevention strategy might include:

**Individual**
A school-based 6 week program to build bystander skills and explore healthy, respectful relationships for 8th graders.

**Relationship**
8 week pilot program for boy’s basketball team to change peer group norms that are supportive of sexual harassment.

**Community**
Local sexual violence prevention program is a lead organization in a community coalition initiative that focuses on positive youth development.

**Institutional**
School working group to change policies & procedures to change school climate to promote respect and model positive behavior.

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Individual  
A school-based curriculum focused on shifting gender roles and defining healthy relationships for a group of 8th graders works to influence the student (individual level change) to change individual knowledge, attitudes and behaviors. Although it is set in a school, the change doesn’t occur school-wide as the culture of the school has not been addressed. This change is being pursued one student at a time through the curriculum. To make this effort comprehensive, additional activities are necessary.

Relationship  
A pilot program focused on young boys works to influence peer group norms (relationship level change) that support sexual harassment and sexual violence.

Institutional  
A school working group might be formed to change the policies and procedures of the school (institutional level change) thereby changing the climate and environment from acceptance of violence as a norm to honoring and modeling respect and positive interactions.

Community  
Ideally, individual, relationship and institutional changes would be pursued within this school and supported by a community-wide sexual violence prevention initiative (community level change) that includes a focus on positive youth development.

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4 Excerpted from the April, 2006 draft version of “Sexual Violence Prevention and Education Program Announcement” by the Centers for Disease Control (CDC), National Center for Injury Prevention and Control’s (NCIPC), Division of Violence Prevention (DVP).
# Approaches to Primary Prevention of Sexual Violence

## COMPREHENSIVE SCHOOL-BASED

Primary sexual violence prevention education commonly addresses attitudes about sexual assault, the impact of gender roles, healthy relationships, consent, conflict resolution, respecting personal boundaries, and skill building for these topics (CDC, 2004). Impacting individual knowledge and attitudes is more effective as part of a broader comprehensive approach, which also addresses how those attitudes interact with interpersonal influence, and the manner in which norms, policies, and institutions shape the environment in which it all occurs.

**Resources**

- RESPECT! Campaign [http://www.giverespect.org/about/](http://www.giverespect.org/about/)
- Know More Campaign [www.knowmoresaymore.org](http://www.knowmoresaymore.org)

## SOCIAL NORMS CHANGE

The social norms approach suggests that peer pressure is the primary influence on shaping people’s behavior. However, many behaviors are influenced by incorrect perceptions of how peers think and act. The social norms approach can be applied to the prevention of sexual violence by correcting these misperceptions of group norms to decrease problem behaviors or increase healthy behaviors. Social norms strategies lead to an increased perception among community members that the social norms are non-violent and that there are /more social pressures and rewards for non-violent norms.

**Resources**

- The Social Norms Approach to Violence Prevention [http://www.vawnet.org/Assoc_Files_VAWnet/SocialNorms.pdf](http://www.vawnet.org/Assoc_Files_VAWnet/SocialNorms.pdf)

## ENGAGING MEN /BOYS

These programs commonly address the cultural and collectively learned biases that support physical, emotional and sexual abuse toward women. They examine how the social and psychological dimensions of masculinity affect men and create conditions for violence and abuse. Men are encouraged to respect the full range of their feelings, where they do not have to deny pain, fear, anger or joy, and learn to express themselves clearly and honestly.

**Resources**

- Engaging boys [http://calcasa.org/tag/engaging-boys/](http://calcasa.org/tag/engaging-boys/)
- Men Can Stop Rape [www.mencanstoprape.org](http://www.mencanstoprape.org)
- Men’s Resource Center for Change [www.mrcforchange.org](http://www.mrcforchange.org)

## BYSTANDER INTERVENTION

Bystander programs represent an opportunity to influence individual decisions across a variety of communities. A common goal among bystander programs is developing ways to increase people’s awareness of knowing when to intervene and how to do it safely and effectively. Bystander Intervention;

- Discourages victim blaming
- Shifts responsibility to men and women
- Provides role models of helping behavior
- Fosters bystander sense of responsibility for intervening

**Resources**

- Engaging Bystanders in Sexual Violence Prevention
COMMUNITY MOBILIZATION
(a.k.a. community organizing or development)

Community mobilization is a participatory process focused on changing community norms, basic patterns of social interaction, values, customs, and institutions in ways that will significantly improve the quality of life in a community. Effective implementation of any community mobilization requires promoting positive changes in community norms. The process of community mobilization is as important as the output. "When people have an opportunity to participate in decisions and shape strategies that vitally affect them, they will develop a sense of ownership in what they have determined, and commitment to seeing that the decisions are sound and that the strategies are useful, effective and carried out" (Lofquist, 1996).

Community Mobilization can:
- Engage all sectors in a community-wide effort to address sexual violence
- Empower individuals and groups to take action to facilitate change
- Help a community overcome denial
- Infuse new energy into an issue through community buy-in and support.
- Expand the base of community support for an issue or organization.
- Promote local ownership and decision-making about sexual violence.
- Encourage collaboration between individuals and organizations.
- Limit competition and redundancy of services and outreach efforts.
- Provide a focus for prevention planning and implementation efforts.
- Bring new community volunteers together (due to increased visibility).
- Increase cross-sector collaboration and shared resources.
- Create public presence and pressure to change laws, polices, and practices — progress that could not be made by just one individual or organization.
- Increase access to funding opportunities for organizations and promote long-term, organizational commitment to social and health-related issues.

Resources
- Close to Home http://www.c2home.org/

OTHER RESOURCES
- National Sexual Violence Resource Center www.nsvrc.org
- National Online Resource Center on Violence Against Women www.VAWNET.org
- 2011 SAAM Campaign Materials http://www.nsvrc.org/saam/current-campaign
An “X” indicates the topics/areas covered in the program /curriculum. Some topics/areas may be more comprehensive than others.

<table>
<thead>
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<th>School Based</th>
<th>Social Norms</th>
<th>Engaging Men/Boys</th>
<th>Community Mobilization</th>
<th>Bystander Intervention</th>
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Sexual Violence and the Spectrum of Prevention:
Towards a Community Solution

Sexual violence is preventable. Communities are vital in the development of effective sexual violence prevention strategies. Local initiatives are in a good position to respond to the needs of their community and involve participation of community members. This fact sheet provides information about the Spectrum of Prevention, a tool developed by the Prevention Institute and tailored by the NSVRC, to assist communities in developing comprehensive sexual violence prevention initiatives. Designed for broad scale change, it focuses not just on individuals, but also on the environment, including systems and norms that contribute to sexual violence. An outline of the six levels of the Spectrum follows. By working at all six levels simultaneously, communities can design an effective strategy that results in a comprehensive initiative/program which promotes confidence that their relationships, homes, neighborhoods, schools, places of worship and work places are safer.

<table>
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<tr>
<th>Level of Spectrum</th>
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<tr>
<td>Level 1</td>
<td>Strengthening Individual Knowledge &amp; Skills</td>
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<td>Level 2</td>
<td>Promoting Community Education</td>
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<td>Level 3</td>
<td>Educating Providers</td>
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<td>Level 4</td>
<td>Fostering Coalitions &amp; Networks</td>
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<td>Level 5</td>
<td>Changing Organizational Practices</td>
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<td>Level 6</td>
<td>Influencing Policy &amp; Legislation</td>
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Enhancing an individual’s capability of preventing violence and promoting safety

Reaching groups of people with information and resources to prevent violence and promote safety

Informing providers who will transmit skills and knowledge to others and model positive norms

Bringing together groups and individuals for broader goals and greater impact

Adopting regulations and shaping norms to prevent violence and improve safety

Enacting laws and policies that support healthy community norms and a violence-free society

A detailed description of the Spectrum of Prevention can be found at:

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**Spectrum of Prevention: Sample Activities**

**Level 1: Strengthening Individual Knowledge and Skills**
- Provide multiple session skill-building programs that teach healthy sexuality and healthy and equitable relationship skills to high school students
- Build the skills of bystanders to safely interrupt behavior such as sexist and homophobic harassment

**Level 2: Promoting Community Education**
- Teach parents to address unhealthy attitudes and behaviors in their children that support sexual violence
- Stage community plays that reinforce positive cultural norms, portray responsible sexual behavior, and models of bystander action
- Hold religious and political leaders accountable for providing clear and consistent messages that sexual violence is not appropriate; model healthy, equitable relationships and healthy sexuality
- Develop awards programs to publicly recognize responsible media coverage and community leadership to prevent sexual violence

**Level 3: Educating Providers**
- Train little league coaches to build skills to interrupt and address athletes’ inappropriate comments and behaviors that promote a climate condoning sexual harassment and sexual violence
- Train health care providers, mental health professionals, educators, foster parents and other professionals on the principles of healthy relationships
- Collaborate with musicians, song writers, artists and other role models about positively impacting young people

**Level 4: Fostering Coalitions and Networks**
- Foster partnerships between researcher/academics and community providers to strengthen evaluation approaches
- Engage art organizations to promote community understanding and solutions
- Engage the business sector to foster workplace solutions and build support

**Level 5: Changing Organizational Practices**
- Implement and enforce sexual harassment and sexual violence prevention practices in schools, workplaces, places of worship and other institutions
- Implement environmental safety measures such as adequate lighting and emergency call boxes, complemented by community education and enforcement of policies
- Encourage insurers to provide resources and materials promoting healthy sexuality

**Level 6: Influencing Policies and Legislation**
- Promote and enforce full implementation of the Title IX law
- Establish policies at universities to provide sexual violence prevention curriculum to all students and training to all staff, and include funding as a line item in the university’s budget
- Pass middle and high school policies to offer comprehensive sex education programs that include sexual violence prevention and address contributing factors in the school environment
GOAL # 1: Promote a climate free of sexual harassment and sexual violence in middle school.

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<tr>
<th>MEASURABLE OBJECTIVES</th>
<th>MAJOR ACTIVITIES</th>
<th>TIME LINE</th>
<th>PERFORMANCE MEASURE AND/OR DELIVERABLES</th>
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| 1. By July, 2013, 50% of 50 7th graders at Sutter Middle School who attended eight education sessions will be able to:  
• Name 3 characteristics of both healthy and unhealthy relationships and,  
• Name 2 considerations for safely intervening as a bystander to gender based harassment. | 1. Identify effective multi-session curriculum, materials, and evaluation tool  
1.2 Train staff and volunteers  
1.3 Promote availability of education sessions  
1.4 Administer pre-test and conduct education sessions  
1.5 Administer post-test and summarize evaluation | 1.1 Nov. - Dec. 2012  
1.2 Jan. 2013  
1.3 Jan. - Feb. 2013  
1.4 March - May 2013  
1.5 May - July 2013 | 1.1 Curriculum and materials  
1.2 List of qualified trainers  
1.3 Contact letter, announcement flyer  
1.4 Pre-test results, calendar of session dates  
1.5 Evaluation summary |
| 2. By March, 2013, 12 Sutter Middle School administrators, teachers, and coaches completing 2 training sessions will adopt one change in school policy to support the prevention of sexual violence. | 2.1 Identify effective multi-session curriculum, materials, and evaluation tool  
2.2 Promote and schedule training sessions  
2.3 Administer pre-test and conduct trainings  
2.4 Administer post-test and summarize evaluation  
2.5 Draft and finalize school policy | 2.1 Nov.-Dec. 2012  
2.2 Jan. 2013  
2.3 Feb-Mar. 2013  
2.4 Mar.-April 2013  
2.5 May 2013 | 2.1 Curriculum and materials  
2.2 Training dates  
2.3 Pre-test results, participant sign-in sheets  
2.4 Evaluation summary  
2.5 Copy of policy |
GOAL # 1: (continued) Promote a climate free of sexual harassment and sexual violence in middle school.

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<th>MEASURABLE OBJECTIVES</th>
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<td>3. By October, 2013, 50% of 100 parents of incoming 7th grade students that attend a Sutter Middle School orientation session will be able to identify 2 ways they can support their children to prevent sexual violence.</td>
<td>3.1 Schedule session with school administration</td>
<td>3.1 March 2013</td>
<td>3.1 Session date</td>
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<td>3.2 Prepare presentation, materials, and evaluation tools</td>
<td>3.2 June-Aug. 2013</td>
<td>3.2 Curriculum and materials</td>
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<td>3.3 Conduct focus group of parents</td>
<td>3.3 Sept. 2013</td>
<td>3.3 Summary of focus group results</td>
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<td>3.4 Conduct presentation</td>
<td>3.4 Oct. 2013</td>
<td>3.4 Participant sign-in sheets and completed evaluation surveys</td>
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<tr>
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<td>3.5 Conduct post-presentation focus group of parents</td>
<td>3.5 Oct. 2013</td>
<td>3.5 Summary of focus group</td>
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<td>3.6 Summarize evaluation</td>
<td>3.6 Oct. 2013</td>
<td>3.6 Evaluation summary</td>
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