

Alaska Safety Planning and Empowerment Network Collaboration Charter

July 30, 2008

VISION

The vision of the Alaska Safety Planning and Empowerment Network (ASPEN) is that survivors with disabilities will encounter a system where they feel empowered, can tell their stories, be believed without judgment, and receive appropriate services that are attitudinally, physically, culturally, and programmatically accessible. Service delivery systems in Alaska will have expertise and a clear understanding of their roles and responsibilities and will provide collaborative, effective person-centered services for survivors with disabilities.

MISSION

The mission of the Alaska Safety Planning and Empowerment Network (ASPEN) is to build capacity of the service delivery systems (e.g., disability, victim advocacy, and others) by creating systems change designed to enhance the provision of collaborative, effective person-centered services for survivors with disabilities. ASPEN will strengthen response to survivors with disabilities by:

- identifying and resolving barriers (e.g. attitudinal, physical, cultural, and programmatic) to safety, empowerment and access to appropriate, non-judgmental services provided by both the disability and DVSA systems;
- fostering local collaborations to link survivors with disabilities to services and resources;
- providing cross-training, technical assistance, and information that changes organizational cultures and practices; and
- developing sustainable, innovative policies and practices designed to prioritize safety, empowerment and access.

VALUES

ASPEN's values are the product of many lengthy group discussions and represent a truly collective set of ideals. These values guide and inform all aspects and phases of our work as a collaborative towards ending violence against survivors with disabilities. We nurture these values in our own organizations and will cultivate them in our community partners.

Autonomy/Self-determination/Empowerment

We work within our own organizations and with our community partners to foster an atmosphere in which survivors with disabilities have options and choices; have all

information needed to make informed decisions; guide and direct services; and have choices respected.

Collaboration

ASPEN respects the contributions and opinions of the collaborative and those of each community partner. Together we will share the challenges, responsibilities, resources, and rewards of our work. We honor and appreciate humor and levity.

Confidentiality

We work to ensure that the collaborative and its community partners respect each person's right to privacy, are knowledgeable of and adhere to confidentiality as it relates to multiple systems and adhere to mandatory reporting statutes for each system.

Diversity

We foster an environment of honor and respect among ASPEN organizations and our community partners for people of all cultures, races, ethnicities and national origins, abilities, genders and sexual identities, ages, belief systems, and socio-economic and geographic backgrounds.

Grassroots Input

We insist our community partners value the experience of survivors with disabilities in all stages of their collaboration (assessment, planning, implementation, and sustainability) as we do ourselves.

Inclusive Language

We believe respectful language fosters understanding and values personal experiences. We foster the use of respectful, inclusive, person-centered language within our collaborative and amongst our community partners. People First language and Feminist communication both serve as an affirmation of inclusion as fundamental to our work and the work of our community partners.

Justice

We believe safety, empowerment and access are critical elements necessary to provide fair and equitable services and advocacy for all survivors with disabilities. Therefore, we support equal attitudinal, physical, cultural, and programmatic access to services prioritizing on-going safety and empowerment. ASPEN respects the inherent rights of all people, does not blame survivors with disabilities, acknowledges the role of perpetrators; and will encourage community partners to do the same.

Respect

ASPEN recognizes that collaboration among multiple partners to change systems and practices is a challenging enterprise. We agree to resolve any differences in a manner respecting the unique approaches, constraints, and values of our members. ASPEN will expect its community partners to adopt this approach as they work towards change at the local level.

Safety

ASPEN believes safety includes freedom from abuse, neglect, and exploitation and requires environments in which survivors with disabilities are welcomed, valued, and respected. Additionally, safety includes maintaining an environment where disclosures of abuse can be made without fear of judgment or victim blaming and empowering options are available. We will foster this value with our community partners.

MEMBER DESCRIPTIONS AND COLLABORATION HISTORY

Access Alaska, Inc. (Access), incorporated in 1983, is a federally funded Center for Independent Living (CIL) with two regional centers for Southcentral, Western, Interior, and Northern Alaska. Services include information/referral, advocacy, peer mentoring/support, independent living skills training, and deinstitutionalization.

The **Alaska Native Justice Center** (ANJC) is a private, non-profit agency created in 1993 to address the civil and criminal justice needs of Alaska Natives. ANJC addresses a wide range of issues: victim advocacy services, prisoner re-entry services, training/technical assistance, and tribal court development. ANJC staff has expertise and extensive knowledge regarding Alaska Native culture, history and values.

Alaska Network on Domestic Violence and Sexual Assault (ANDVSA) is a nonprofit statewide coalition of 20 direct service domestic violence and sexual assault programs promoting social change to eliminate personal and societal violence in the lives of women and children in Alaska for over 28 years. It provides legislative and legal advocacy, training, technical assistance, coalition building, policy development and public education.

Center for Human Development (CHD) is the University of Alaska Anchorage's center on disability education, training, and research; 30% of its employees experience disabilities or are parents of individuals with disabilities. In 1991, CHD founded a nonprofit clinic to fill service gaps for women with cognitive disabilities who were violent crime victims. CHD specializes in staff development, multi-media and distance training/education, and research and evaluation and is needs assessment project lead.

Governor's Council on Disabilities and Special Education (GCDSE) is a state agency composed of people with disabilities and family members (60%) and state agency, service provider, and special education representatives appointed by the governor. Its 28 years of experience and expertise in capacity building, systems change and integration, advocacy and interagency collaboration reflect its mission to create change that improves the lives of people with disabilities.

The relationships between ASPEN organizations are long-standing and multi-faceted; providing a strong foundation for this collaboration. We all knew each other coming into this project and bring a fellowship and respect built on years of working together.

All ASPEN members served on the GCDSE's Justice Advisory Board. GCDSE, CHD, and ANJC collaborate to reduce victimization of people with disabilities. CHD and ANDVSA agencies have served jointly on the Anchorage Domestic Violence and Child Abuse Prevention Caucus since 2001. ANJC and ANDVSA have a decade's collaboration on victim service referral, Domestic Violence Awareness Month planning, and statewide and local training enhancement. GCDSE, CHD, ANJC, and Access have collaborated since 1994 on systems change projects. GCDSE, CHD, and Access regularly collaborate on accessibility initiatives such as setting up an ADA Partners Project in 1992 that spurred national proliferation of similar projects.

Most of Aspen team collaborated on the 2004 version of this grant, Alaskans Speak Up, and all were involved in the 2006 application for this grant. Finally, the first part of this project by each member to the group provided intensive cross-trainings on their own organization and the system within which it operates to the group. The entire group participated in a root cause analysis that allowed us all as individuals to further explore and explain our own motives for involvement in the project and to define our own beliefs in two key areas: what we believed our own system needed to know about other systems in order for us to achieve our vision and, conversely, what we all believed the other systems needed to know about our system to ensure success.

ROLES AND RESPONSIBILITIES

ASPEN team members represent the five organizations collaborating on this project. Individually and collectively, we commit to being change agents at the system, community, and organization levels to strengthen support for survivors with disabilities. Each individual and organization pledges to fulfill the roles and responsibilities outline in this section to that end.

Each agency and individual brings to the project a set of strengths and resources that frame our approach to addressing our collective and individual roles and responsibilities

- Access' status as Alaska's foremost CIL brings entrée and credibility with women with disabilities to participate in needs assessment and planning activities. It also brings technical assistance, training and multi-disciplinary service delivery expertise.
- ANJC strengths revolve around its position as a collaborator between local, tribal and state agencies and its long experience in DV/SA initiatives.
- ANDVSA role as the DV/SA network in Alaska ensures participation by the domestic and sexual violence community in needs assessment and planning. It also has provides training and technical assistance capacity.
- CHD brings strong research, data and analysis capacity, along with proven technical assistance and training qualifications
- GCDSE has extensive project and fiscal management experience. It has strong ties to and credibility with the disability community. It provides proven leadership in systems change initiatives and service integration.

Common Responsibilities for Partner Agencies

1. Each agency will foster a culture of change within and with community partners through:
 - Visionary/effective leadership and management structures
 - Ongoing, embedded professional development, including engaging in cross-training and enhancing awareness
 - Policy and protocol recommendations
 - Appropriate resource plans
2. At least one partner agency representative or designated back-up representative will participate at every project meeting, training or conference.
 - Should a partner agency be unable to cannot participate in any event, it is the responsibility of the representative to notify, in a timely manner, the Collaborative Co-facilitators of their pending absence.
 - In the event a partner agency cannot participate in a meeting, it is the responsibility of the representative to debrief with the Collaborative Co-facilitators.
 - Participation may be in person, by phone, or by eLive.
3. Agency representatives will perform duties as assigned for the success of the Collaborative and as enumerated in project contracts.
4. Every partner agency will contribute substantively to the five (5) planning phase deliverables:
 - Collaboration Charter
 - Initial focus identification
 - Needs Assessment proposal
 - Needs Assessment final report
 - Five-year strategic plan that addresses sustainability
5. Executive Officers at each agency are responsible for their agency's participation.
6. Note taking and meeting facilitation will be rotated among collaboration team members.
7. At least one meeting each year will be hosted at each partner agency. The hosting agency will ensure proper accommodations are made for each meeting.

Unique Responsibilities of Partner Agencies

1. As lead agency, the State of Alaska, Governor's Council on Disabilities and Special Education is responsible for fiscal and programmatic reporting; providing cross-training/technical assistance; and representing the disability community.
2. The Center for Human Development is responsible for administering all contracts relating to the project; providing cross-training/technical assistance; evaluating the project; and representing the disability provider community.
3. Alaska Network on Domestic Violence and Sexual Assault is responsible for providing cross-training/technical assistance and representing the DV/SA community.
4. Access Alaska is responsible for providing cross-training/technical assistance and representing the Independent Living movement and disability provider community.
5. Alaska Native Justice Center is responsible for providing cross-training/technical assistance and representing Alaska Native tribal communities, rural stakeholders, and the DV/SA community.

Responsibilities of All Partner Agency Representatives

1. Commit to attending each meeting or securing a person to attend the meeting.
2. Review all meeting materials in advance and actively participate in each meeting.
3. Involve others from their respective agencies as needed.
4. Communicate grant activities to their organization, per internal communication plan.
5. Communicate organizational activities to collaborative per internal communication plan.
6. Communicate collaborative activities to others per external communication plan.

Additional Responsibilities of Individual Representatives:

1. Millie Ryan, GCDSE, and Karen Ward, CHD, are responsible for overall project direction.
2. Karen Heath, CHD will conduct the root cause analysis and take the lead on the needs assessment.
3. Richard Rainery, RainStorm Concepts, as the project director, is responsible for convening meetings and ensuring adequate preparation for the same. He is also responsible for DOJ program reporting. As project co-facilitator, he is responsible for ensuring balanced program development rooted in both the Disability and DV/SA fields, communicating with OVW and Vera, communicating internally with the Collaborative members, and serving as liaison with stakeholder systems.
4. Patti Bland, ANDVSA, as project co-facilitator, is responsible for ensuring balanced program development rooted in both the Disability and DV/SA fields, communicating with OVW and Vera, communicating internally with the Collaborative members, and serving as liaison with stakeholder systems.

CONFIDENTIALITY PLAN

Historically, ASPEN partners came together to build capacity and create systems change to better meet the needs of survivors with disabilities. In our continued work together to realize our vision, we will collect community level information on: current system resources and strengths; existing relationships, partnerships and collaborations between agencies; and gaps in knowledge, education, and services. Our data collection process will use a variety of assessment tools (i.e., surveys, focus groups, and interviews).

ASPEN will ensure that confidentiality serves as a guiding principle in promoting the safety of and respect for survivors with disabilities. All project members agree that no communication, documents, or other information that could identify a survivor with disabilities will be shared unless that individual has signed a release or unless compelled under Alaska statute.* Any and all information gathered during any phase of the project is to assist ASPEN in developing a strategic plan and sustainable systems change.

**See Appendix for Alaska statutes defining mandatory reporters.*

ASPEN does not provide direct services to survivors with disabilities, but understands that while working together some information pertaining to survivors with disabilities may need to be shared. We will ensure confidentiality is maintained regarding all

disclosures by requiring confidentiality from all members of the collaborative. ASPEN will compile data in aggregate form without identifying individuals. ASPEN will not use personal identifying information when communicating about survivors with disabilities without informed consent.

ASPEN understands that while working together some information pertaining to collaborative members or agencies or community partners may be shared. We will ensure confidentiality is maintained by requiring signed confidentiality agreements from all ASPEN members and community partners. By signing this charter, ASPEN members commit to maintaining confidentiality as described in this section. Community partners will be asked to sign confidentiality agreements as a condition of participating in the project.

All ASPEN members and community partners, with the possible exception of some volunteers, are mandatory reporters under Alaska statute (see appendix) and will inform stakeholders of our statutory obligations at the earliest opportunity. Therefore, we will design our processes and tools to discourage voluntary disclosures. If any reportable disclosures come to light, ASPEN members and community partners will give the disclosing party the opportunity to make the initial report to the appropriate agency prior to submitting a report. Regardless of the disclosing party's decision to report or not, ASPEN members are required to report within 24 hours. ASPEN will not retain records of mandatory reports. Individual organizations will retain mandatory reporting records according to their policies and procedures.

Needs Assessment Data Protection

Data collected from interviews, focus groups, or surveys will not contain any personal identifiers nor be linked in any way to the participant. Focus group interviews will be audio taped. Participants will be fully informed that the interviews are being recorded. Tapes will be transcribed with no personal identifiers.

Paper data and audio-tapes will be stored in a locked filing cabinet at CHD for three years. Electronic data will be stored on a secure hard-drive in the CHD Research Team offices. The hard-drive is password-protected, stored in a locked cabinet, and not connected to a computer network or the Internet. De-identified data in an electronic format will be archived.

Each participant will be fully informed by a written consent and/ or assent form or oral statement that indicates the purpose of the project, the benefits to be derived, risks to participants, a full description of the procedures to be carried out in which the participants are involved, that participation is voluntary, and that any language barrier has been taken into account. The amount of time; hours, and time-span; days, weeks, months, required of participants will also be explained. Consent forms will state that researchers are not acting in the role of advocates. Although confidentiality will be maintained, information disclosed will not be subject to protection under the victim advocate confidentiality statute. The consent forms will be locked file cabinet within the CHD Research Team offices.

Paper data and consent forms will be shredded in a crosscut shredder after three years. Audiotapes will be destroyed after 3 years.

DECISION-MAKING AUTHORITY

The majority of decisions will be made in accord with the process and the roles and responsibilities outlined in this charter. Decisions that involve budget and/or policy changes will be forwarded to the key decision makers (executive director, director, president, CEO) of each ASPEN member organization for approval or action.

The project director has the authority, in consultation with the co-facilitator, to make decisions on the day-to-day operation of the collaboration.

DECISION-MAKING PROCESS

ASPEN is committed to a consensus model of decision-making that is guided by group discussion in which all members are encouraged and expected to freely participate. All members' opinions and comments hold the same value and will be regularly solicited during dialogue concerning each issue. In most cases, a group consensus will be apparent after appropriate discussion. In circumstances in which consensus cannot be reached by this informal process, ASPEN will seek common ground and explore all avenues of reaching consensus. Decisions affecting the collaboration may be made at scheduled partner meetings or through phone, email or other direct contact.

Issues in which we cannot reach consensus using the group discussion model will be addressed through a gradient decision-making system. Utilizing a 1 – 5 scale, ASPEN members will indicate their position via a method that accommodates the needs of individual members. The following scale will be used:

5 = I absolutely support this decision.

4 = I can support this decision, but have some concerns.

3 = I'm neutral about this decision, but will go along with it.

2 = I don't feel comfortable supporting this decision.

1 = I absolutely can't support it, or it goes against our guiding values.

Any member of ASPEN can call for a check-in using the gradient decision making process at any time to provide clarification or encourage discussion. A discussion will be considered "complete" when a consensus based on everyone indicating a 3, 4, or 5 prevails.

CONFLICT RESOLUTION PROCESS

All partners are invested in resolving conflicts within the collaboration. If conflicts arise, they will be addressed by ASPEN members through informal discussions in a manner that respects the differing approaches, constraints, and values of the members. When we are unable to reach consensus, a decision will be tabled until the next meeting. Conflict resolution can occur during scheduled partner meetings or through other methods that allow for direct dialogue. Email is not an option for conflict resolution.

If the conflict is not resolved at the next meeting, we will initiate a formal conflict mediation process. Project members will first use a facilitator employed by a member organization to work out a solution to everyone's satisfaction. If the conflict cannot be resolved within the collaboration, an outside mediator will be engaged to facilitate conflict resolution. A similar process will be used at the community partner level.

COMMUNICATION PLAN

ASPEN agrees that effective communication is key to building and maintaining a successful collaboration. Our communication will be conducted in a respectful manner, whether in writing, by phone, in-person or by email. ASPEN is committed to preserving our environment and will use paperless communication to the maximum extent possible.

Internal Communication Plan

ASPEN will meet in person, by teleconference, or eLive (a secure web-based meeting tool) monthly or more frequently as needed. All meetings will last at least one hour, but typically will be half-day or longer. ASPEN co-facilitators will communicate weekly, informing other ASPEN members as appropriate. The co-facilitators will share with ASPEN a summary of their meetings with VERA representatives.

All project members will inform the decision makers and/or appropriate staff of their respective agencies of ASPEN's progress (including, but not limited to, internal and external activity, collaboration development, systems innovations, and the status of community partnerships) according to each organization's standard practice. Decision makers will inform their respective board members of ASPEN activities according to each organization's standard practice. Communications will be disseminated through informal and formal modalities, including email updates, newsletter, reports, staff and board meetings. ASPEN members will bring back to the collaboration information relevant to the project.

External Communication Plan

ASPEN will collectively develop a message describing the project's vision, missions, goals, and activity, which will be shared publicly according to each member's resources. These resources may include web sites, member or external newsletters, speaking engagements, DVDs, and media communications. As the project evolves, ASPEN will

seek opportunities to inform the public of the project's status. The project co-facilitators will coordinate this process.

ASPEN will develop talking points outlining its vision, missions, goals, and activity as a resource that may be shared publicly as needed by any member without prior approval. Aside from these talking points, no one is authorized to speak for ASPEN without prior agreement as noted below.

ASPEN will develop site-specific communication plans with each project pilot site that make explicit the expectations that both ASPEN and each pilot site partner commit to fulfilling.

Designated ASPEN members will engage in ongoing communication regarding technical assistance with community partners. Technical assistance activities include, but are not limited to, needs assessment, strategic planning, policy adaptation/development, capacity building, and accessibility planning.

Requests for information or communication beyond the talking points will be directed to the co-facilitators who will inform the collaborative of the opportunity and request approval to proceed. In the event each member does not respond to the request in a timely manner, the co-facilitators will have the discretion to approve the communication. The co-facilitators must approve any communication with the media or public presentation that extends beyond the talking points. A summary of the approved communication will be provided at the next ASPEN meeting.

The project director will complete all progress reports to OVW in a timely fashion. The project co-facilitators will be the voice of ASPEN to OVW and will be responsible for communication with VERA representatives on a weekly basis.

WORK PLAN

1. Charter submission - middle of June
2. Defining the Focus/Picking Pilot Sites - end of August
3. Needs Assessment Plan - end of September
4. Tools to OVW - end of October
5. Conduct Needs Assessment – November - December
6. Analyze Data/Write Report – January - February 2009
7. Develop Strategic Plan – March - April
8. Submit to OVW – May

GLOSSARY

The glossary is an “active document” developed by all ASPEN members to define the terms used in this collaboration charter. We will communicate these definitions to our community partners.

Abuse

Domestic Violence: A pattern of assaultive and coercive behaviors, including physical, sexual and psychological attacks, as well as economic coercion, that adults or adolescents* use to gain or maintain power and control. Domestic violence includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone.

**See Appendix for Alaska statutes.*

Sexual Assault/Sexual Abuse: Coercing or attempting to coerce any sexual contact or behavior without informed consent.* Sexual abuse includes, but is certainly not limited to marital rape, attacks on sexual parts of the body, forcing sex after physical violence has occurred, engaging in sexual activity with an incapacitated individual or treating anyone in a sexually demeaning manner.

**See Appendix for Alaska statutes defining sexual assault/sexual abuse, consent and incapacitation, etc.*

Stalking: A pattern of repeated and unwanted attention, harassment, contact, or any other course of conduct directed at a specific person that would cause a reasonable person to feel fear.

Access/Accessible

The inherent right of survivors with disabilities to receive information, communication, advocacy, and services in a welcoming and supportive environment appropriate for the widest range of potential users and circumstances

The Americans with Disabilities Act (ADA)

An Act that gives civil rights protections to individuals with disabilities that are like those provided to individuals on the basis of race, sex national origin, and religion. It guarantees equal opportunity for individuals with disabilities in employment, public accommodations, transportation, State and local government services, and telecommunications (Independent Living Resource Utilization Center, retrieved from ILRUC website: http://www.ilru.org/dlrp/html/topical/Disability/Dis_definition.html on June 16, 2008).

Alaska Native

An Alaska Native is a citizen of the United States with one-fourth degree or more Indian, Aleut or Eskimo ancestry, including Natives who had been adopted by one or more non-Native parents. Native Alaskans, on the other hand, are people born in Alaska.

Capacity Building

Activities to assist and support disability and victim advocacy systems to successfully implement and sustain changes in how they serve survivors with disabilities

Collaboration

A well-defined long-term relationship between the disability and victim advocacy systems designed to achieve results more likely to be attained together than alone. It

involves a jointly developed structure and shared responsibility and challenges, as well as sharing of resources and rewards.

Cultural Competency

Cultural competency refers to the process disability and victim advocacy systems use to incorporate a set of attitudes, knowledge, and behaviors to enhance diverse care. Cultural competency is a long term process reflecting each system's ability to appropriately respond to the needs of diverse populations. It includes awareness of systemic bias and belief systems and how these impact survivors with disabilities.

Disability

Under the Americans with Disabilities Act a disability is:

- a physical or mental impairment that substantially limits one or more major life activity, or
- a record of such a physical or mental impairment, or
- being regarded as having such impairment.

Examples of a major life activity include activities such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, or working (ADA, 1990).

DVSAS (Battered Women's) Movement

The Battered Women's Movement grew out of consciousness-raising groups during the 1960's and 70's and coincided with second-wave feminism and the civil rights movement. Advocacy for individuals and for system change supporting autonomy, safety and justice are critical elements of this grass roots movement. Rooted in the experience of survivors, the movement continues to emphasize empowerment through social change and links violence against women with other forms of oppression.

Independent Living Philosophy

A social paradigm which emphasizes that people with disabilities are the best experts on their own needs, have crucial and valuable perspectives to contribute to society, and are deserving of equal opportunities to decide how to live, work, and take part in their communities.

Person-centered Services

The experience of survivors with disabilities is the fundamental source from which all services are derived.

Perpetrators

People who abuse through use of violence, threats, coercion, manipulation, pressure, deception, or taking advantage of an individual who is incapacitated or under duress.*

**See Appendix for Alaska statute.*

Survivors

Those who have experienced abuse as defined in this charter glossary.

Systems Change

A sustainable, transferable, and replicable change in disability and victim advocacy systems that promotes collaborative, person-centered services for survivors with disabilities

Victim-blaming

An overt or covert judgmental response that holds survivors with disabilities to be in whole or in part responsible for the abuse they experienced. Victim-blaming serves as a barrier preventing survivors with disabilities from sharing their experience of abuse with others.