

Collaboration Charter

Community Alliance



for

Individuals with Disabilities

Promoting choices for healthier lives and safer communities

COASTAL HORIZONS CENTER, INC.



17 September 2014

Table of Contents

TABLE OF CONTENTS	I
INTRODUCTION.....	1
VISION STATEMENT.....	1
MISSION STATEMENT.....	2
VALUES WE HOLD	2
COLLABORATION TEAM AGENCIES	3
COMMITMENTS AND CONTRIBUTIONS	3
COMMUNICATION PLAN.....	6
DECISION-MAKING	8
CONFLICT MANAGEMENT.....	10
CONFIDENTIALITY & MANDATORY REPORTING	11
<i>Mandatory Reporting</i>	12
CHARTER AUTHORS.....	13
CONTACT INFORMATION	13
TERMS AND ACRONYMS.....	15
APPENDIX I, TALKING POINTS.....	23

“This project was supported by Grant No. 2013-FW-AX-K003 awarded by the Office on Violence Against Women, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.

Introduction

The Community Alliance for Individuals with Disabilities (C-AID) is a regional collaboration in southeastern North Carolina between the Rape Crisis Center (RCC) of Coastal Horizons Center, Inc., and the disAbility Resource Center (dRC), both headquartered in Wilmington, NC. Outside of occasional referrals between the two organizations, we have never worked together in any sustained initiatives until this opportunity.

Sexual assault is an under-reported serious issue for individuals of all ages with disabilities. These individuals have a much higher risk of sexual assault when compared to individuals without disabilities. In North Carolina, adults with disabilities are victims of sexual assault at a rate five times higher than adults without disabilities, with the rates even higher among women.¹ Research also suggests persons with disabilities experience longer durations of abuse by multiple perpetrators.²

There are several risk factors for sexual violence among people with disabilities including a learned culture of compliance; dependency on staff, caregivers, and other residents in group homes, fear of reprisals, fear of isolation, and often being less physically able to defend or escape from abuse. People with disabilities often have been given little or no education about body space/boundaries and healthy sexuality. Both organizations have done their best to meet the needs of their particular populations. Regardless of the dedicated service both organizations have provided to the community, we acknowledge the gaps that exist in both organizations when addressing the complexities of serving individuals with disabilities.

The focus of this grant through the U.S. Department of Justice, Office of Violence Against Women (OVW), is to build capacity in our two organizations to serve individuals with any disability who are victims of sexual assault. We will use this initiative to ensure we provide accessible, safe, and effective services to survivors with disabilities as well as other survivors who face accessibility barriers to our services.

Vision Statement

We envision a day when sexual violence is unacceptable and perpetrators are held accountable. We envision our entire community to be disability-aware, trauma-informed and fully accessible to persons with disabilities. We envision a day when all victim service providers will have responsive, effective, and healing services for sexual assault survivors with disabilities and that these individuals will feel physically and emotionally safe, valued,

¹State Center for Health Statistics (2001). *Health Risks Among North Carolina Adults*.

² J. Schaller and J.L. Fieberg, 1998. Issues of abuse for women with disabilities and implications for rehabilitation counseling. *Journal of Applied Rehabilitation Counseling*, 29(2), 9-17.

and respected. We envision a day when sexual assault survivors with disabilities, to the maximum extent possible, become advocates for their own rights and well-being.

Mission Statement

Within our service area of New Hanover and Brunswick counties of North Carolina, we will work to attain this vision by making sustainable improvements in our two organizations in the areas of (1) enhancements to facility accommodations, culture, policies and protocols for sexual violence survivors with disabilities(2) staff knowledge, skills, and attitudes regarding sexual violence survivors with disabilities, and (3) building effective relationships between the organizations in our collaboration. In addition to survivors with disabilities, we include any other survivors who need access to our services. In the future, we hope to address the needs of the Deaf community and to provide training in best practices to other victim service providers.

Values We Hold

1. We feel strongly that sexual violence is unacceptable and perpetrators should be held accountable.
2. All individuals have the right to decide on what path they will take in life and to have healthy, compassionate relationships.
3. We believe people with disabilities who have been sexually assaulted deserve services that are physically, emotionally, culturally and financially accessible and appropriate to their individual needs.
4. Our collaboration can create solutions more powerful than those made by a single individual. We believe in the value of this consensus-driven decision process.
5. We will work to make people more aware of the scope of sexual violence against individuals with disabilities and to change how people think about perpetrators, victims, and the very nature of sexual violence.
6. We will work to educate victim-service providers on how best to serve individuals with disabilities since this knowledge will remove a major barrier to accessibility.
7. Disability is an experience we all have at some point in our lives because disability is not inside us but results when we cannot meet the demands a specific culture imposes upon us.
8. We will support all individuals with disabilities, especially survivors with disabilities, and teach them coping skills on their path to independence and healing
9. We understand the Deaf community is a separate culture whose members sometimes encounter barriers to accessing our services. At this point, we extend our services to them and will address their needs as our capacity building progresses.
10. Life is about growing and healing. We will teach others they can heal and grow even if they are survivors of sexual violence.

11. Everyone needs to get involved if we are to move our culture to one that supports people with disabilities and holds sexual violence to be unacceptable.
12. We will wake up to the inter-connectedness of all living beings on this planet.

Collaboration Team Agencies

The Rape Crisis Center (RCC). RCC provides crisis response, supportive counseling, advocacy, and court accompaniment to those who experience sexual assault or abuse. In addition, RCC provides outreach and training in schools and in the community to raise awareness about the dangers and prevalence of sexual violence. Coastal Horizons Center, Inc., the parent organization, provides professional assistance to those in need of substance abuse and mental health treatment services, prevention, crisis intervention, criminal justice alternatives, and community outreach.

disAbility Resource Center (dRC). dRC, founded in 2008, is a community based, non-profit, non-residential program that provides free services to persons with any type of disability. The dRC is dedicated to empowering all persons, regardless of disability, to make choices about their own lives and experience success and well-being as active participants in society. The dRC is one of eight Centers for Independent Living (CIL) in the state of North Carolina. A CIL is defined as, "A private, nonprofit corporation that provides services to maximize the independence of individuals with disabilities and the accessibility of the communities they live in". The dRC provides an array of independent living services including information and referral with counseling, help with accessible living situations, job searches, prescription assistance, computer classes, and advocacy. The services are provided by staff members who are disabled or who have had a personal life experience with a disability.

Commitments and Contributions

C-AID is committed to the vision, mission, and the implementation of organizational changes that will allow us to provide accessible, safe, and effective service to individuals with disabilities who are victims of sexual assault. This includes creating environments where individuals are comfortable disclosing sexual violence. As collaboration, we have developed well-defined commitments for team members, the project director, and each partner organization including their senior management.

Commitments and Contributions of Collaboration Team Members

- Serve as a representative for their participating organization.
- Attend weekly collaboration team meetings prepared to review documents and discuss issues.

- Attend webinars, trainings, and meetings provided by OWV and Vera and any others required by the grant.
- Provide updates and applicable information to the collaboration regarding individual organization values, policies and dynamics, as well as anything occurring that could impact the collaboration's work. Examples include staffing changes of key decision makers, policy changes related to the project, or crisis communication.
- Complete assigned projects as determined by their collaboration team.
- Maintain the commitment of their organization to the collaboration's work by engaging their organization's personnel and governing board in the collaboration's work.
- Communicate between the collaboration team and their organization's management about updates relevant to each other.
- Use the experience of serving on the collaboration team to enrich their own understanding of sexual assault, survivors, people with disabilities, and the Deaf community.

Commitments and Contributions of Partner Organizations

- This is a collaboration between the dRC and the Rape Crisis Center whose parent organization is Coastal Horizons Center, Inc. Only the Rape Crisis Center is involved in this collaboration, which, at this point, does not include the remainder of the 300+ parent organization.
- Acknowledge each organization's best practices, ethics and legal requirements.
- Ensure representatives attend the collaboration meetings.
- Engage in respectful communication with the other partner organization.
- Maintain a commitment to the project for the full three-year grant period.
- Honor the Memorandum of Understanding signed with the partner organization.
- Engage in the planning and development of the collaboration charter, needs assessment, strategic plan, and any other deliverable or project.
- Maintain compliance with grant requirements.
- Participate in all collaboration-related webinars, trainings, and meetings.
- Provide collaboration updates to their respective organizations at staff meetings.
- Make agreed upon changes that affect policies, procedures, budget and personnel within their organization that the collaboration identifies through the collaborative process.
- Provide cross training between organizations in their areas of expertise to increase staff knowledge, skills, and comfort level in providing services to individuals with disabilities who are victims of sexual assault.

- Work through conflicts and disagreements while recognizing the strength and growth that comes from facing challenges. Recognize survivors of sexual assault who have disabilities as individuals who can provide valuable insights into their needs, fears, likes and dislikes and who can help shape the work of this collaboration.

Commitments and Contributions of the Project Manager

- Promotes the investment of collaboration members and partner organizations in the change process.
- Coordinates and facilitates collaboration meetings.
- Disseminates meeting agendas, notes, and information to collaboration members.
- Assigns and coordinates deliverable work to members of the collaboration.
- Prepares and finalizes products for submission to OVW and Vera.
- Takes the lead in developing and submitting documents to Vera and required deliverables to OVW.
- Serves as liaison with Vera and OVW.
- Drafts and leads team review of semi-annual reports of the collaboration to OVW.
- Keeps each collaboration organization apprised of grant activities and plans.
- Works with RCC on the financial stewardship of the grant projects.
- Drives the collaboration to meet their goals and deliverables.

Commitments and Contributions of the Rape Crisis Center (RCC)

- Provides expertise on sexual violence and abuse, disclosure, crisis counseling, therapy, advocacy, and outreach education.
- Provides expertise on victims of sexual violence, advocacy, and training.
- Submits all financial documents to OVW.
- Provides financial stewardship of the grant that includes on-time payments to dRC for billable time, mileage, and travel expenses as outlined in the Memorandum of Understanding (MOU) with dRC.
- Provides staff time to participate in the needs assessment of this grant.

Commitments and Contributions of the disAbility Resource Center (dRC)

- Provides expertise on the civil rights laws pertaining to people with disabilities, communication strategies with individuals with disabilities, independent living, and the (d) Deaf and HOH communities.
- Provides expertise on disability sensitivity and etiquette.
- Recruits interpreters for collaboration meetings.
- Designs and develops graphics for collaboration products.
- Serves as liaison between the Deaf community and fellow team members.
- Provides staff time to participate in the needs assessment of this grant.

- Provides invoices to RCC for all costs associated with the collaboration, including billable time, mileage and travel expenses as outlined in the MOU.

Letters of Support. In addition, we have letters from the RCC's parent company, the Coastal Horizons Board of Trustees, and the dRC Board of Directors supporting their participation in this grant's needs assessment, including staff time, as well as embracing the system changes that will occur at dRC and RCC. Throughout the three years of this grant, our team will encourage management to engage with the goals of our collaboration work.

Communication Plan

In order to function effectively, a collaboration depends upon honest, respectful, timely and efficient communication. C-AID has developed the following guidelines to ensure all communications, whether they are internal or external communication, met a high level of integrity to ensure consistent and productive communication.

Internal Communication (Two Levels)

- The first level of internal communication, as defined here, is within the collaboration team. The second level is within the two collaborating organizations--RCC and dRC.
- Collaboration members will uphold and maintain direct and transparent communication with one another.
- Members of the collaboration team will use email for communication for both levels of internal communication. If a response is required, it should be stated in the subject line of the email. If no response is received within 24 hours, another email will be sent to those members. If time is critical, then phone calls or text messaging will be used. All members of the team will be copied on emails sent to stakeholders outside of the team but within the two organizations.
- When communicating with collaboration team members who need accommodations, the initiating person will find appropriate assistive technologies for effective communication with that person.
- Collaboration team members should keep other team members informed of relevant developments within and between organizations. The method of communication is at the discretion of each member but can include emails, text messages, written memos, or face-to-face meetings.
- Team members should find appropriate venues to involve and update other personnel in their organizations with the progress of the collaboration. In the first six months of this grant, these venues have included presentations at weekly and monthly staff meetings, a presentation for the dRC Board of Directors and for the Board of Trustees of RCC's parent organization, Coastal Horizons Center,

Inc. "Interesting Fact of the Week" regarding sexual violence and disabilities is presented each week at RCC staff meetings.

- The project director will draft and collaborate with other team members on any presentations to personnel outside of the team but within RCC and dRC.

Collaboration Meetings

- During this Planning and Development phase, the collaboration team meets every Thursday morning from 9:30am. – 11:00 am.
- The project director develops and emails a draft agenda for the meeting the day before each meeting.
- If one or more team members will be absent and a virtual meeting cannot be held, then the meeting will be rescheduled.
- The meetings are closed to the public and are confidential to foster open and honest communication.
- Meetings typically consist of action items and information items relevant to the collaboration. This could include project deliverables as well as social issues that can affect or be affected by our collaboration work.
- Should a member of the collaboration need any type of communication accommodations, such as an ASL interpreter, large-print or Braille, or Video Relay Services, then those accommodation needs will be met through the most effective means.

External Communication

- "External" is defined here as outside the two partner organizations. The project director is the key contact for communication with OVW, the Vera Institute of Justice, and any additional "external" stakeholders.
- **VERA Institute of Justice** is the designated technical assistance provider for this grants program. The project director will communicate at least twice a month with our Vera program associate. Collaboration team members need to communicate with the project director first for needs or information. If he cannot provide what is needed, then he can refer them to the Vera program associate. The Vera program associate will talk with the entire collaboration team at least once a month via telephone, Skype, or Webex. The project director will coordinate with Vera on schedules and accessibility for webinars and conferences to ensure all members of our team have equal access.
- **Office of Violence Against Women (OVW)**, under the Department of Justice, provides funding for this grants program. The project director is the designed

contact person with OVW. Information between OVW and our collaboration could include sending documents for final approval, budget modifications and updates, grant adjustment notifications, semi-annual reports, and any programmatic changes to the collaboration.

- The project director will draft and collaborate with other team members on any presentations to additional external stakeholders.
- All collaboration members will be alert for technical assistance from individuals with disabilities and survivors with disabilities for the valuable technical assistance they can give to our work.

Reactive Media. We have developed a set of Talking Points (see Appendix I) if a team member needs to respond to an immediate request from media or an external stakeholder about our project. The Talking Points give an overview of the grant with our goals and current work. The Talking Points are in the process of being approved by senior management of RCC and dRC. If the request is for information outside of the Talking Points, the team member will refer the request to the project director who will then communicate with the remainder of the collaboration team to draft a response. Before release, the response will be reviewed and approved by the CEO of Coastal Horizons and the Chairman of the dRC Board of Directors. In a crisis response, this approval process could be expedited through the use of phone calls and/or text messaging.

Proactive Media. Proactive media is outgoing communication that is not solicited by the media or public agencies and is designed to inform agencies about the highlights of our work. The point person for such proactive media is the project director. He will work with the team to ensure the outgoing message or presentation reflects the current work of the collaboration as a whole. The outgoing message or presentation additionally will be approved by the CEO of Coastal Horizons and the Chairman of the dRC Board of Directors.

Decision-Making

We have selected a consensus decision-making model for arriving at primary decisions that advance the agenda of our collaboration. A consensus model incorporates diverse experiences and opinions that are vital to the success of our work. As shown in our value statements, we feel that a collaborative, consensus-building approach to decision making will provide more robust solutions.

Administrative Decisions. Our collaboration recognizes that not all decisions require consensus. For administrative-based decisions, we turn to our project director for decisions involving:

1. Program logistics for guests and OVW/Vera staff;

2. Vendor selection that have an impact-neutral effect on the budget;
3. Assignment of appropriate duties to collaboration team members;
4. Schedule and timing of assignments within deliverable deadlines;
5. When time or circumstances do not permit the participation of collaboration partners, represent the collaboration to external agencies by answering questions and providing general information;
6. Provision of regular, timely reports to Vera and OVW involving grant activities and deliverables.

Consensus-based Collaborative Decisions. All other decisions relating to the project will be reached by the entire collaboration team using a consensus-based process. The collaboration is responsible for decisions not specified under administrative decisions and not in conflict with any collaboration agreements. These decisions could include the:

1. Development of the collaborative charter
2. Collaborative structure and protocols
3. Needs assessment protocols
4. Strategic plan development and implementation
5. Selection of new team members or the removal of members as the need arises.
6. Allocation of resources.
7. Travel/training of team members.

Decision-making Process. We consider conflict within the decision-making process as a great opportunity to reach a deeper understanding of the issues around the proposal. If one or more member cannot fully endorse an approach supported by the remainder of the team, our collaboration will use a compromise process to see if a consensus can be reached.

On team discussions, any team member can propose to gauge agreement by using the *Gradients of Agreement Scale*³. The scale avoids the use of a simple yes/no opinion and allows the team to focus on specific divisive issues. We have added a column with responses by the collaboration to each level of the scale.

Stage	Description	Collaboration Response
1	Full endorsement of topic	Move ahead with discussion
2	Agree with reservations	Discuss the reasons for the reservations and compromise as needed. If all members are at 1 or 2, then move ahead with the discussion

³We adapted our gradient scale from the one developed by Dr. Sam Kaner.

Stage	Description	Collaboration Response
3	No opinion or need more info	What information do the dissenting members need? What changes would they need to support the idea?
4	Formal disagreement	What do the dissenting members suggest? How can we compromise? How can their concerns be addressed?

The collaboration will move ahead with the discussion if all members are at stages #1 or #2. If the discussion involves a proposal, those members at #2 must agree to support fully the proposal. If any member is at Stage #3 or #4, then the collaboration will not move ahead, will research the issue dividing the team, and brainstorm additional compromises. If the collaboration team remains hung up on issues around the topic or proposal, then we will contact Vera for guidance and/or meditation.

Revisiting Decisions. Once a decision is reached, should new information come to light that would alter a decision previously made, or if a team member wishes to revisit a previous decision, then the team can discuss it again.

Conflict Management

We recognize conflict to be an important part of the collaboration process. Well managed conflict can make a great contribution toward arriving at robust solutions much stronger and healthier than decisions arrived at if conflict is hidden and destructive in nature. Poorly managed conflict can interrupt and sometimes stop the collaborative process and the achievement of goals. As a collaboration, we agree to manage conflict in a way that promotes new understanding and strengthens relationships.

Specifically, we will use respectful and ethical communication practices and negotiate compromises so all parties reach a satisfactory outcome. In our definition, in “ethical communication” we respect client confidentiality, give expertise but no biases or opinions, and say only what we would be comfortable saying in a court of law.

If appropriate, we will employ the previously described *Gradients of Agreement Scale* used in our consensus decision-making model to help identify the issues over which team members have conflict.

Action Items & Information Items. The strategy for dealing with conflict depends to a great extent on whether the conflict is an *action item* or an *information item* and whether it is priority or non-priority. An action item on the agenda needs a decision by the collaboration team whereas information items provide useful background information to a

relevant topic. This is not to say information items cannot become action items within the span of a discussion.

Priority action items require attention at that team meeting if possible whereas non-priority action items can be tabled until a future meeting if needed. With non-priority information items, just noting the conflict may be sufficient.

If there is conflict with action items, our team will:

- Make sure all team members get a chance to contribute their thoughts to the issue.
- Identify the specific issues causing the conflict. Any team member can propose the use of the Gradient Agreement Scale to help identify specific issues.
- Brainstorm possible solutions to the conflict.
- If a proposed solution meets with agreement, move ahead.
- With no proposed solution, table the issue for research and assistance from Vera or agree to acknowledge the disagreement and move ahead.

Personal Conflict. If conflict of a personal nature arises between collaboration team members, and is disruptive to collaboration work, the project director (even if he himself is involved) will speak to those involved and ask them to either (a) resolve the conflict on their own or (b) seek mediation from someone on the team or from Vera. The goal is to keep the team functional and to manage conflict in a way that is respectful and fair with a positive *intent* of goodwill by all members.

Confidentiality & Mandatory Reporting

We believe all people, especially survivors with disabilities, have a right to confidentiality. Our collaboration will not disclose any information about individuals unless:

- We have their written permission that specifies to whom this information can be shared;
- The information is already in the public domain; or if
- Disclosure of the information is required by law.

Internal Communication. All internal communication (see Section on Communication) will be kept confidential, regardless of the mode of communication, such as email, phone calls, discussions, texting, or sharing discussions of personal life experiences in a collaborative meeting.

Confidentiality of Consumer Information. Our collaboration recognizes that RCC and dRC each has its own policies regarding confidentiality and these will be respected by the collaboration. No member will be expected to break their organization's confidentiality policies. No potentially identifying information will be shared about individuals with

disabilities or survivors with disabilities who are participating in collaboration work unless that individual signs a release of information.

Politically-Sensitive Information. In the process of our collaboration work, members from dRC or RCC may disclose information about their organization that they do not wish to have repeated outside of the collaborative group (e.g., resistance within their organization to systems change, etc.). We agree to keep disclosures about RCC and dRC confidential when requested to do so.

Confidentiality of Information about Staff. All collaboration team member information, especially for those with disabilities will be kept in strict confidence unless that staff person signs a release of information to do so.

External Communication. All drafts of external communication will be kept confidential within the collaboration team until the team agrees to its release.

Mandatory Reporting

In accordance with North Carolina State Law, any person or institution is a mandatory reporter if: (a) a child was or is being abused or neglected, (b) a person discloses a plan to harm herself/himself or someone else, or (c) there was or is abuse or neglect of what the State of North Carolina terms "disabled adults." These are specified by North Carolina General Statutes §§ 108A-99, 7B-101, 7B-301, and 14-27.1 (2010).⁴

We recognize that mandatory reporting requirements may eliminate or compromise some choices a survivor may choose to make. Therefore, prior to engaging in any discussion of sexual violence when a survivor is a minor or a vulnerable adult, an RCC or dRC employee will take the following steps:

- (1) The survivor shall be made aware of potential implications (e.g., the local county Department of Social Services will need to be contacted, the case could be dismissed or left open, guardians will need to be notified, etc.) and has an opportunity to decide whether to continue the conversation.
- (2) RCC and dRC employees will inform the individual of all available options and, if the individual decides to report the abuse and/or neglect, the employee will encourage the individual to do so themselves.
- (3) This communication shall be conducted in a manner ensuring the individual understands mandatory reporting requirements.

⁴All NC Statutes are available for online viewing at <http://www.ncleg.net>

A person who reports does not have to have actual knowledge or proof that sexual violence or abuse is occurring but merely a “reasonable cause to believe that the person is in need of protection services.”

Charter Authors

This charter was a collaborative work by our team:

- Hal Campbell, , Project Director, RCC
- Jessica Green, Supervisor, RCC
- Gloria Garton, Executive Director, dRC
- Liz Constantinou, Disability Specialist, RCC
- Melea Williams, Resource Specialist, dRC

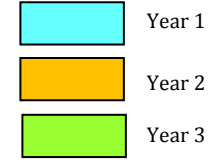
Once we enter the needs assessment and implementation phases of the grant, we will review the charter to see if revisions to specific sections are required.

Contact Information

- Contact Hal Campbell (910.392.7185) for information about our collaboration grant.
- Contact Jessica Green (910.392.7185) for information specific to RCC
- Contact Gloria Garton (910.815.6618) for information specific to dRC.

Collaboration Work Plan

MONTHS	0	6	12	18	24	30	36
Collaboration Action Items	Develop collaboration charter	Develop focus memo and needs assessment	Develop strategic plan	Roll out strategic plan	Continue and complete implementation of strategic plan		
	<ul style="list-style-type: none"> Define vision, mission, values, etc. Conduct mutual visits Get board letters of support Submit to OVW 	<ul style="list-style-type: none"> Submit focus memo If needed, Vera site visit to plan needs assessment Submit needs assessment plan to OVW and agencies and conduct 	<ul style="list-style-type: none"> Develop and submit needs assessment findings As needed, Vera site visit for strategic planning Submit strategic plan 	<ul style="list-style-type: none"> Roll out strategic plan (details to follow) 	<ul style="list-style-type: none"> Implement strategic plan (details to follow) 	<ul style="list-style-type: none"> Implement strategic plan (details to follow) 	



Terms and Acronyms

Term/Acronym	Meaning
504 of the Rehabilitation Act	<p>(1) Individuals with disabilities are defined as those persons with physical or mental impairment that substantially limits one or more major life activities--caring for one's self, walking, seeing, hearing, speaking, breathing, working, performing manual tasks, and learning</p> <p>(2) For purposes of employment, qualified individuals with disabilities with reasonable accommodation (employer is required to take reasonable steps to accommodate the person's disability unless it would cause the employer undue hardship) must be able to perform the essential functions of the job for which they have applied or have been hired to perform.</p> <p>(3) The USA Department of Labor also indicates that "Small Providers" do not have to make significant structural alterations to their existing facilities to accommodate the individual with the disability.</p>
ableism	Ableism is a pervasive system of discrimination that oppresses and marginalizes people with disabilities by those who consider themselves without disabilities through a set of attitudes, behaviors, social structures, rewards, privileges and benefits of the society. <i>See also audism.</i>
access	Full access includes not only physical and language accessibility of service but also the removal of all barriers to service that meets the needs of the widest possible spectrum of individuals.
accessibility	In the context of a victim-service, the level to which an individual has the ability to communicate, understand, and fully participate in the services of an organization.
ADA	Americans with Disabilities Act is a law enacted in 1990 and later amended with changes effective January 1, 2009. The ADA prohibits, under certain circumstances, discrimination at state, local, public, and commercial facilities of any person with a disability defined as a physical or mental impairment that substantially limits a major life activity. Certain conditions are excluded such as substance abuse and visual impairment correctable by lenses. The act affords similar protections against discrimination to Americans with disabilities as the Civil Rights Act of 1964 that made discrimination based on race, religion, sex, national origin, and other characteristics illegal. The ADA also requires phone companies to provide relay services for people with hearing or speech disabilities.

Term/Acronym	Meaning
ADAAG	Americans with Disabilities Act Accessibility Guidelines. This document contains scoping and technical requirements for accessibility to buildings and facilities (applied during their design, construction, and alteration) by individuals with disabilities under the ADA of 1990.
Adult Protective Services	APS are social services provided to adults with disabilities who are abused, neglected, or exploited. In North Carolina, APS is administered by the Department of Health and Human Services and includes a multidisciplinary approach to helping adults with disabilities who are victims. Services range from the initial investigation of mistreatment, to health and supportive services and legal interventions. Vulnerable adults include those over the age of 18 with disabilities due to developmental disabilities, physical disabilities, mental illness or cognitive impairments. Forms of abuse include physical, emotional, verbal, and sexual abuse as well as financial exploitation. "Neglect" can be perpetrated by any caregiver assisting an older vulnerable person.
advocacy	In the sexual violence context, advocacy is the way survivors (1) assert their preferences on the systems in order to get their needs met (self-determination); (2) navigate and eliminate barriers to their well-being when systems are inadequate or have institutional biases that are not responsive or may even foster conditions that increase the risk of victimization.
ASL	American Sign Language. A visual language that follows its own rules of grammar and syntax different from the English language. Information is expressed through a combination of hand shapes, body movements, and facial expressions.
audism	Audism is the notion that one is superior based on one's ability to hear or to behave in the manner of one who hears. Tom Humphries coined the term in 1975. People who practice audism are called audists. Audism is a form of ableism--discrimination on the basis of disability. Linguistic audism occurs when schools ban the use of ASL. Audism can also occur between groups who are deaf if some choose not to use ASL or choose not to identify with Deaf culture, considering themselves superior to those who do--or vice versa.
assistive technology	Any device or service that a person with a disability can use to function in his or her daily life. Such devices include communication and information accessibility devices, wheelchairs and canes, prosthetics and other durable medical equipment
autism spectrum disorder	ASD is a developmental brain disorder where the person has difficulty understanding verbal/non-verbal communication as well as relating to people, objects, and events.

Term/Acronym	Meaning
caregiver abuse	The misuse of power in a caregiving relationship where persons who have disabilities may depend upon caregivers in order to function independently. Abuse here could mean financial, emotional, sexual, physical, or over-protection.
CIL	Center for Independent Living means a consumer-controlled, community-based, cross-disability, non-residential private nonprofit agency designed and operated within a local community by individuals with disabilities. CILs are mandated by Section 702 of the Rehabilitation Act as amended in 1973. CILs must ensure 51% of their staff and Board of Directors have disabilities, and they must provide four independent living services: (1) information & referral, (2) independent living skills training, (3) individual and systems advocacy, and (4) peer counseling.
collaboration	A mutually beneficial and well-defined relationship entered into by two or more organizations to achieve results they are more likely achieved together than alone. This relationship includes commitment to mutual relationships and goals; a jointly developed structure and shared responsibility; mutual authority and accountability for success; and sharing of resources and awards. From: www.accessingsafety.org
confidentiality	This involves organizational and individual behaviors that ensure the privacy of client and personnel information unless the individual gives consent permitting disclosure or unless the disclosure is required by law. Confidentiality must be protected through the protocol and practices of an organization.
consensus	Consensus has been defined by Dr. Michael Roberto of Bryant University to mean people comprehend the final decision, have committed themselves to executing the chosen course of action, feel a sense of collective ownership about the plan, and are willing to cooperate with others during the implementation effort.
consent	To permit, approve or agree, comply or yield to.
Child Protective Services (CPS)	CPS are state agencies whose purpose is to ensure safe, permanent, nurturing families for children by protecting them from abuse, neglect, exploitation, or mental injury by a person responsible for a child's health or welfare while attempting to preserve the family unit. Child Protective Services also help protect children who have no parent, guardian, or custodian to provide care and supervision, or whose parents or guardians or custodian is unable to provide for the care or supervision and lacks an appropriate alternative child care arrangement. <i>See also Adult Protective Services (APS)</i>

Term/Acronym	Meaning
cultural and disability humility	Collaborative partners avoid an assumption of cultural competence, and work from an approach of respectful inquiry, non-judgment and support. Cultural humility is a practice of awareness of bias and oppression with respectful communication that permits exploration of similarities and differences. The collaborative acknowledges the value of approaching everything with such a unique perspective.
dear/Deaf/ hard-of-hearing	Lower case "d" deaf refers to individuals with a total or partial hearing loss who associate largely with the hearing community and do not necessarily rely on American Sign Language to communicate. Capital "D" Deaf refers to individuals with a profound loss of hearing who communicate primarily through the use of American Sign Language, associate with the Deaf community, and identify with Deaf culture. Hard-of-hearing refers to individuals with a partial or progressive hearing loss who use residual hearing and speech and assistive technologies to communicate with the hearing culture.
developmental disability (DD)	A person with a chronic set of limitations affecting three or more of the following areas: learning, self-care, language, movement, self-direction, capacity for independent living, or economic self-sufficiency. The onset of DD must be before the age of 22 unless it is caused by traumatic brain injury, then it can be at any age. <i>See also Intellectual Disability.</i>
disability	"Disability" as defined by the World Health Organization is a product of the interaction between a person's functional abilities and the environment. A person has a disability if the physical, information, communication, social and/or policy environment are NOT accommodating of his or her level of ability. At some point in life, every person experiences disability due to factors involving age, information, physical/mental abilities and/or skills.
disability-aware	This term is primarily used to evaluate the quality of service providers of individuals with disabilities. It measures the degree to which service has been made accommodating to individuals with disabilities.
DOJ	Department of Justice. The United States Department of Justice (DOJ), also known as the Justice Department, is the U.S. federal executive department responsible for the enforcement of the law and administration of justice. It is equivalent to the Justice or Interior Ministries of other countries.
domestic violence	A pattern of physical and/or verbal abuse in which the perpetrator intentionally chose to cause fear, injury, and/or pain in order to gain and maintain power and control over a partner or someone that relies on him/her for regular care. This also includes non-contact offenses such as harassing phone calls/texts, stalking, or abuse through social media.

Term/Acronym	Meaning
EEOC	Equal Employment Opportunities Commission is responsible for enforcing federal laws that make it illegal to discriminate against a job applicant or an employee because of the person's race, color, religion, sex (including pregnancy), national origin, age (40 or older), disability or genetic information. It is also illegal to discriminate against a person because the person complained about discrimination, filed a charge of discrimination, or participated in an employment discrimination investigation or lawsuit. Most employers with at least 15 employees are covered by EEOC laws (20 employees in age discrimination cases). Most labor unions and employment agencies are also covered. The laws apply to all types of work situations, including hiring, firing, promotions, harassment, training, wages, and benefits.
effective communication	When an individual who has a disabling experience receives the same information provided to the general population using a method that is understandable and timely.
empowerment	“The process of increasing the capacity of individuals or groups to make choices and to transform those choices into desired actions and outcomes.” www.worldbank.org
Fair Housing Law	This law was enacted as part of civil rights legislation that prohibits discrimination of home sales, rentals and financing based on race, color, national origin, religion, sex, familial status or those with disabilities.
functionally independent	A scale of measurement for disabilities on the International Classification of Impairment, Disabilities and Handicaps that measures the level of a person's disability and indicates how much assistance is required for the individual to carry out activities of daily living.
guardians	A person who is entrusted by law with the care of the person or property, or both, of another, as a minor or someone legally incapable of managing his or her own affairs.
healthy relationship	For our purposes, this is subjectively defined as two people who have a relationship when the perceived behaviors of one significantly improve the holistic health, functioning, and growth of the other.
IEP	Individualized Education Plan used in school districts that defines an individualized educational plan with defined goals and objectives over a specified length of time. An IEP is evaluated on a regular basis with the student and caregivers to ensure it meets their needs within the scope of what a school can do.

Term/Acronym	Meaning
inclusion	The intentional action or state wherein, to the greatest extent possible, the collaborative welcomes others, assures full accessibility and promotes the greatest level of autonomy and independence so all may include or be included within a long--term care setting.
inclusiveness	The right of an individual to use his/her abilities to contribute in a meaningful way while embracing the value of diversity.
intellectual disability (ID)	A person with significant limitations in reasoning, learning, problem solving, and adaptive behavior that originates before the age of 18. <i>See also Developmental Disability.</i>
NAMI	National Alliance on Mental Illness is the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raise awareness and build a community for hope for all of those in need. There are hundreds of NAMI State Organizations, NAMI Affiliates and volunteer leaders who work in local communities across the country
NCATP	North Carolina Assistive Technology Program leads the state's efforts to carry out the federal Assistive Technology Act of 2004. They promote independence for people with disabilities through access to technology.
NCDSB	North Carolina Division of Services for the Blind. Since 1935, the mission of NCDSB has been to enable people who are blind or visually impaired to reach their goals of independence and employment. They serve blind and blind/hearing impaired and have a long partnership with the Lions Clubs and other consumer and advocacy groups throughout the State. They provide services through seven district offices.
NC-DSDHH	The North Carolina Division of Services for the Deaf and the Hard of Hearing (DSDHH) is a state-based provider of direct services to individuals with hearing loss and the agencies and businesses that serve them. DSDHH is housed in seven regional centers.
perpetrator	In the field of sexual violence prevention, a perpetrator is a person who has been determined to have caused or knowingly allowed the abuse of or neglect of a child or vulnerable adult or who has committed sexual abuse against any person.
personal care attendants	Paid professionals who assist individuals with physical disabilities, mental impairments, and other health care needs with their activities of daily living (ADLs) and provide basic nursing procedures — all under the supervision of a registered nurse, licensed practical nurse or other health care professional.

Term/Acronym	Meaning
person- first-language	The collaboration acknowledges the importance of defining survivors first as people, rather than defining them by the disability they may have. In person-first-language we are people with disabilities rather than disabled people.
rape	The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the informed consent of the victim.
re-victimization	As relating to sexual violence, re-victimization is where a victim has a statistically higher risk to be victimized again. This vulnerability to sexual abuse may include physical abuse as well. Revictimization in the short term is often the result of risk factors such as living or working in dangerous areas, chaotic familial relations, having an aggressive temperament, drug or alcohol usage and unemployment. The reasons for the Revictimization of adults who were sexually abused as children include the belief that such abusive behavior is normal.
safety	An individually determined perception of protection from physical, emotional, and psychological harm or situations which may threaten harm. Our Collaboration believes that survivors, when informed, are the best judge of what is safe for them, and we agree to support survivors by providing a safe environment for service delivery, and by engaging in best practices as established by the disability and sexual assault movements.
sexual assault	An act or any attempted act by an aggressor and a victim that involves (1) unwanted sexual contact, comments or advances, (2) acts to traffic the victim or (3) acts directed against the victim's sexuality in any setting.
Sexual Assault Nurse Examiner (SANE)	A Sexual Assault Nurse Examiner is a forensic nurse who received special training to conduct sexual assault exams. SANE nurses are available 24-hours a day and may arrive at the hospital ER within an hour of a sexual assault victim's arrival. If the patient is in critical condition and admitted to the hospital, the SANE can perform a 'mobile exam' and bring their exam supplies and camera to the hospital. SANE nurses usually work in tandem with a local rape crisis center and can conduct STI testing, drug testing if drug-facilitated rape is suspected, and emergency contraception.
sexual violence	Any type of sexual conduct or contact that is nonconsensual. Sexual violence is categorized by use of force, not just physical, but also verbal threats, intimidation, or coercion. It also includes non-contact offenses, such as stalking, pornography, genital exposure, peeping, obscene phone calls/e-mails, or abuse through other social media.

Term/Acronym	Meaning
SSDI	Social Security Disability Insurance/Income (SSD or SSDI) is a payroll tax-funded, federal insurance program of the United States government that provides income supplements to people who are physically restricted in their ability to be employed because of a notable disability, usually a physical disability. SSDI can be supplied on for both temporary and permanent disabilities.
Supplemental Security Income (SSI)	SSI is a United States government program that provides stipends to low-income people who are either aged (65 or older), blind, or disabled.
survivor	An individual who has experienced an incident or a series of incidents of sexual violence and has begun the physical, cognitive and emotional healing process.
thriver	An individual who has completed treatment for his/her sexual violence history and has experienced post-traumatic growth.
trauma-informed	The knowledge, awareness and understanding that affect and behavior is directly impacted by trauma. Being trauma informed allows organizations to deliver services that accommodate vulnerabilities and to adopt policies and procedures that minimize re-victimization.
treatment	For our purposes, a meeting or a series of meetings between a licensed professional counselor and a survivor of sexual violence.
vicarious trauma	The term vicarious trauma (Perlman & Saakvitne, 1995), sometimes also called compassion fatigue, describes the phenomenon generally associated with the “cost of caring” for others. Counselors working with trauma survivors experience vicarious trauma as they are hearing their trauma stories and become witnesses to the pain, fear, and terror that trauma survivors have endured. Vicarious trauma is a state of tension and preoccupation of the stories/trauma experiences described by clients. It should not be confused with burnout that happens over time.
victim	An individual who is threatened, harmed, or adversely affected by an act or a series of acts of sexual violence. <i>See also re-victimization.</i>
Vocational Rehabilitation (VR)	VR is a process that enables persons with functional, psychological, developmental, cognitive and emotional impairments or health conditions to overcome barriers to accessing, maintaining or returning to employment or other useful occupation.
vulnerable adult	Any person over the age of 18 who lacks the most basic human life skills by reason of not having the capability of learning them through the formative years of childhood, adolescence and young adulthood; or a person who has lost the capability of the most basic human life skills due to dementia or traumatic brain injury.

Appendix I, Talking Points

Preparing to Serve Survivors with Disabilities

Overview

The disgrace and destructiveness of sexual violence, primarily against women, have been swept under the rug for centuries. Only now, at least in this country, this enormous problem is getting some well-deserved attention. Every two minutes, an American is sexually assaulted and only 40% are reported to police. Perpetrators in 97% of the cases never get convicted. The statistics are even worse for a far more vulnerable population--people with disabilities--many of whom are physically incapacitated or have been raised in a culture of compliance. In North Carolina, a person with a disability is 5 times more likely to be sexually assaulted than a person without a disability.

Our Grant Collaboration

The Rape Crisis Center(RCC) of Coastal Horizons Center, Inc. and the disAbility Resource Center (dRC) here in Wilmington recently won a 3-year grant from the U.S. Department of Justice's Office of Violence Against Women to respond to this problem. In the seven-year history of this grant, our collaboration is the first to be selected in North Carolina.

The grant is part of a national movement to expand acceptance and inclusion of neglected and vulnerable segments of our population when it comes to public services. Individuals with disabilities who have been sexually assaulted are a neglected population when it comes to receiving appropriate and effective service. The grant signals a cultural shift in responding to and empowering this population.

Our Goal

The goal of our collaboration is to build capacity in RCC and dRC to provide accessible, safe, and effective service to individuals with disabilities who have experienced sexual violence. This capacity building could involve:

- Improving the accessibility and safety of our facilities for survivors with disabilities;
- Ensuring policies and procedures are written to promote safe and effective service;
- Training staff to ensure they provide effective service or referrals to survivors with disabilities;
- Using assistive technologies so survivors who are deaf, have low vision, or who have physical or cognitive disabilities can effectively communicate with our staff and access information;
- Ensuring our facility environments foster a feeling of comfort and protection to survivors if they wish to disclose incidents of sexual violence.

In addition, we extend an invitation to the Deaf community whose members sometimes encounter barriers to accessing our services.

Current Work

For over 20 years, RCC and dRC have been providing direct services to sexual violence survivors and individuals with disabilities in our communities. We are now 6 months into our three-year grant. Our current work involves preparing to conduct a needs assessment of both organizations to identify gaps in our service capacity including accessibility, policies, procedures, staff training, and assistive communication technologies. The needs assessment will give us a clear roadmap to design and implement a strategic plan for system change in our organizations. Our goal by 2016 is for both organizations to provide accessible, safe, and effective service to survivors with disabilities including any other populations encountering problems accessing our services.

Contact Information

Please contact the following individuals with specific questions.

- Hal Campbell (910.392.7185) for information about our collaboration grant.
- Jessica Green (910.392.7185) for information specific to RCC.
- Gloria Garton (910.815.6618) for information specific to dRC.