

Supplemental Report on Improving Family Violence Prevention in Ohio



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This document supplements the *White Paper on Improving Family Violence Prevention in Ohio*, copies of which can be found on the Web site of the Health Policy Institute of Ohio, <http://www.healthpolicyohio.org>.

HOW TO READ THIS REPORT

This report supplements our previous publication, *White Paper on Improving Family Violence Prevention in Ohio*. The *White Paper* articulates a vision of how Ohio's leaders should think about family violence and its prevention. To move this vision closer to reality, this report discusses people's reaction to the *White Paper* since its release in February 2008. We also

provide examples of how our recommendations currently exist in Ohio and describe existing family violence data sets that can help build Ohio's capacity for prevention. In presenting this material, we refer frequently to themes and findings from the *White Paper*. As such, reading that document first will make the present one much more understandable.

THE OHIO FAMILY VIOLENCE PREVENTION PROJECT

With the support of the Anthem Foundation of Ohio, the Ohio Family Violence Prevention Project began in January 2007. The project's goals are:

- to increase awareness of the scope and consequences of family violence in Ohio;
- to identify realistic and promising policies and programs for prevention; and
- to build support for implementing recommended policies and programs.

The main product of these efforts was the *White Paper on Improving Family Violence Prevention in Ohio*. To generate this work, the project directors convened a working group of leading academic researchers, agency personnel and practitioners (see acknowledgements). The group met quarterly in Columbus to insure that our descriptions of family violence, prevention and the related recommendations are both realistic and based on the most current, best available evidence.

On January 3, 2008, we completed a draft of the document which we then circulated to an external review panel of researchers, agency leaders and practitioners throughout Ohio and across the United States. After another series of revisions, the *White Paper* publicly debuted at a conference at The Ohio State University in Columbus on February 19, 2008.

From March to May 2008 we organized series of regional meetings throughout Ohio (including Athens, Canton, Cleveland, Cincinnati, Lima, Toledo, Youngstown and Zanesville) to solicit further feedback from local practitioners and decision-makers and build support for the vision. This document — *Supplemental Report on Improving Family Violence Prevention in Ohio* — describes our experience building support for the vision and includes an expanded version of the *White Paper* with greater detail on existing family violence prevention efforts and a blueprint for moving forward.

EXECUTIVE SUMMARY

In an earlier document – the *White Paper on Improving Family Violence Prevention in Ohio* – we aimed to change how Ohio’s government and community leaders think about family violence and its prevention. We organized this vision around three themes, each supported by an extensive and thoughtful examination of research: (1) Family violence causes tremendous harm in Ohio; (2) Existing efforts to address it are critical but insufficient; and (3) Prevention can work.

By focusing on prevention of child maltreatment, intimate partner violence (IPV) and elder abuse before they begin, we also articulated a vision of what prevention should look like. Our approach emphasized that prevention should: (1) Engage and coordinate multiple agencies; (2) Focus on communities and perpetrators, not just individuals and victims; and (3) Consider both research findings and practitioner feedback. We also provided specific, realistic recommendations for how to move forward. These included increasing the quality of home visitation programs; creating school environments that support healthy relationships; supporting interagency teams in counties to coordinate prevention and treatment of elder abuse; and educating banking professionals about elder abuse.

The current document – the *Supplemental Report on Improving Family Violence Prevention in Ohio* – builds on this work by describing stakeholders’ reactions to the *White Paper* and reviewing how current prevention efforts around the state relate to our recommendations. We organize this work around three questions, the answers to which we summarize below. We then conclude with a description of the Project’s next steps.:

(1) What do practitioners, government and community leaders think of the vision of family violence and prevention articulated in the White Paper?

To assess this question, we solicited feedback from people who participated in the Project’s public events. Excellent attendance at our statewide conference (n=105) and eight regional forums (n=579) indicated interest in the topic and highlighted the value of addressing child maltreatment, IPV and elder abuse in a coordinated fashion.

Regarding the specific recommendations, most respondents supported home visitation programs like *Help Me Grow* to prevent child maltreatment. There was, however, some concern about the challenges of delivering such programming through home visitors who were themselves victims or survivors of abuse. School-based programming on teen dating violence also enjoyed broad support, especially if it could be coordinated with anti-bullying programs. Nonetheless, participants’ enthusiasm was tempered by the challenge of working with schools that are already overwhelmed with numerous programs and tight schedules. In the area of elder abuse, we heard few ideas about prevention. Instead, people recommended raising awareness of the issues to enable greater funding for surveillance and developing evidence-based practices.

Participants’ comments suggested several important ways for the Project to move forward. Many asked us to examine the relevance of the Project’s findings and recommendations to ethnic minorities, gay/lesbian/bisexual/transgendered and other communities (see below). Gathering and disseminating family violence data was also of great interest, especially if it was accessible, understandable and available at the local level. Not surprisingly, there was great interest in funding with many providers

expressing concerns that a focus on prevention could come at the expense of existing intervention services. Others questioned whether the Project would endure after this year.

(2) What examples of our recommendations currently exist in Ohio?

In the *White Paper*, we identified four realistic and promising recommendations for improving family violence prevention in Ohio. We updated these and summarized how such current efforts currently operate in Ohio.

Our recommendation to increase the quality of home visitation programs specifically involves working with select programs to strengthen their ability to prevent child maltreatment and IPV. The most realistic approach will involve working with the *Help Me Grow* program at the Ohio Department of Health's Bureau of Early Intervention Services. Because of the large budget and the numerous state and local agencies involved, such work will likely require developing good working relationships with different stakeholders and a sustained, patient effort over several years.

Creating school environments that support healthy relationships – even as demonstration projects in select schools – will also require a sustained effort. State and local education agencies express limited enthusiasm for such work given competing demands on their time. There is, however, broader interest in more focused programming related to family violence. School-based teen dating violence prevention programs continue to grow in popularity, although relatively few districts have well-established programs. We list 12 organizations that provide such programming across the state.

Virtually all professionals we contacted continue to support the development of interagency teams for coordinating prevention and treatment of elder abuse (I-Team). In practice, however, we only could identify 10 counties with formal, active I-Teams. Those counties that have I-Teams tend to be very satisfied with the arrangement, although it remains unclear why some I-Teams persist whereas others disband. Many smaller, rural counties have informal mechanisms for coordinating care, especially when professionals already know one another. In major metropolitan counties the number and range of agencies may be too large to accommodate an I-Team. As such, the value of I-Teams may be greatest in medium-sized counties.

We found little current activity in Ohio involving training banking professionals on financial exploitation of elders. Some efforts aim to educate human service professionals and the general public about this type of elder abuse, but we were unable to locate any banks that provide formal training on elder abuse to their staff. The Attorney General's Office had been active in this area, but currently is inactive.

(3) Next steps: Using existing data sets to support family violence prevention in Ohio

The recommendations from the *White Paper* can help focus statewide efforts in family violence prevention, yet it is beyond the scope of this Project to operationalize them. Rather, our role is to build the capacity of agencies, coalitions and communities to develop such efforts together. Towards this end, the next phase of the Ohio Family Violence Prevention Project (OFVPP) will involve gathering, analyzing and summarizing existing data sets related to family violence.

To date, we have identified eight data sets that can enable us to better understand the scope and consequences of family violence in our state. These data sets include the State Automated Child Welfare Information System (SACWIS), the Ohio Department of Health's Early Track System, the Bureau of Criminal Investigation & Identification Domestic Violence Incident data, and the Ohio Mental Health Consumer Outcomes System. Two data sets from the Ohio Department of Job and Family Services could also prove useful: case reports submitted by adult protective service agencies in each county could illustrate abuse and neglect among community-dwelling elders. Also, it will be possible to document county Job and Family Service Agencies' use of the domestic violence waiver to extend benefits through Temporary Aid to Needy Families. To illustrate the challenges and potential of using these data, we include one example of how we could summarize and present data from 881 Ohio law enforcement agencies across the state.

Each of these data sets has limitations, yet taken together they will provide a compelling picture of the burden family violence places on Ohio. Summarizing and disseminating such information in a credible, understandable format will strengthen Ohio's capacity for family violence prevention. Agencies and coalitions at the state and local level will have compelling information to demonstrate the scope of the problem. Planners and funders at the state level will have a powerful tool to help determine where family violence needs are greatest. Moreover, efforts to evaluate community-level interventions will benefit from a new ability to compare different jurisdictions and track trends over time. Such work will be critical to protecting Ohio's families from violence.

What do practitioners, government and community leaders think of the vision of family violence and prevention articulated in the *White Paper*?

On February 19, 2008, the Ohio Family Violence Prevention Project (OFVPP) organized a statewide conference at The Ohio State University in Columbus. The conference was the culmination of a group effort to articulate a vision of family violence prevention in Ohio. As such, we presented findings from the *White Paper on Improving Family Violence Prevention in Ohio*. In order to solicit feedback about the *White Paper* and build support for its vision, OFVPP conducted eight regional forums around the state between March and May 2008. Forum sites included Canton, Athens, Youngstown, Parma, Toledo, Lima, Cincinnati and Zanesville. This section summarizes our experience. The first part describes the methods we used to organize the forums, including marketing, event format and attendance. The second section summarizes our findings from the forums, including participants' satisfaction with the forum and the questions and comments they raised.

METHODS

This section reviews the methods we used to organize the regional forums.

MARKETING

Our marketing strategy expanded and improved with each workshop. Both the Anthem Foundation of Ohio (AFO) and the Health Policy Institute of Ohio (HPIO) advised their respective networks of the workshops. We also contacted advertised workshops through the following statewide listservs and networks:

- a. Area Agencies on Aging (Penny Lovett)
- b. Association of Ohio Health Commissioners (Beth Bickford)
- c. Early Childhood Cabinet (Alicia Leatherman)
- d. Family and Children First Councils (Angela Sausser-Short)
- e. National Association of Social Workers – Ohio Chapter (Amanda Stevens)
- f. Ohio Association of County Behavioral Health Authorities (Liz Henrich)
- g. Ohio Association for the Education of Young Children (Kim Tice)
- h. Ohio CASA/GAL (Jeanne Dhyer)
- i. Ohio Coalition Against Gun Violence (Toby Hoover)
- j. Ohio Dept of Education Center for Students, Families & Communities (Jennifer Vargo)
- k. Ohio Domestic Violence Network (Jo Simonsen)
- l. Ohio Grantmakers Forum (Theresa Wukusick)
- m. Ohio Public Health Association (Ruth Schrock)
- n. Public Children Services Association of Ohio (Crystal Ward Allen)

During the last six forums, we also did considerable local marketing, sending individual emails (and occasionally mailing flyers) to the following audiences in each host county and all contiguous counties.

- o. Administrators and Chairs of Family and Children First Councils
- p. Executive Directors of United Ways
- q. School board members (host city only)
- r. County Sheriffs and Police Departments of large cities
- s. Mayor's offices of large cities (host counties only)
- t. County Commissioners (host counties only)

- u. State Senators and Representatives
- v. US Congressional Representatives
- w. Members of ADAMH boards
- x. Members of MRDD boards
- y. Long Term Care Ombudsman’s Office
- z. Other agencies listed on Attorney General’s County Directory of Victims Services

We believe these local efforts were worthwhile, as average attendance increased from 54 during the first two forums (i.e., Canton & Athens) to 79 at later forums (see below).

EVENT FORMAT

Each meeting was held on a Friday from 10am to 12pm. We chose Fridays because that was the day state legislators are most likely to be in their home districts. Venues included colleges/universities (Canton, Athens, Cincinnati) and health departments (Parma, Zanesville), as well as auditoriums in a library (Toledo), hotel (Youngstown) and automobile plant (Lima). The format of each meeting consisted of six sections:¹

- (1) *Welcome by a local dignitary.* Typically this person was a local elected or appointed official.
- (2) Overview of the meeting. Tim Sahr briefly reviewed the goals of the meeting and the order of presentations.
- (3) *What is Prevention?* After the first two workshops, we revised the format to include 5-minute section on “What is Prevention?” Jo Simonsen or Rebecca Cline, of the Ohio Domestic Violence Network, quickly described the Project’s focus on preventing family violence before it begins.
- (4) *Panel discussion: Local family violence prevention.* On this panel, 3-4 local practitioners involved with child maltreatment, IPV and elder abuse discussed local examples of prevention efforts. After revising the format of the forums, we provided greater structure to this session by asking panelists specific questions, such as:
 - “Is the scope of child maltreatment, IPV or elder abuse different in this region compared to the rest of Ohio? If so, how?”
 - What sorts of programs or policies can prevent family violence from occurring before it begins? Can you give any local examples?²
- (5) *Understanding and Preventing Family Violence in Ohio.* Kenny Steinman gave a 40-minute talk with slides to cover the main findings of the *White Paper*.
- (6) *Expert Panel Q & A.* Kenny Steinman, 1-2 members of the OFVPP working group and 1-2 local officials each provided a brief reaction to the *White Paper* and/or Dr. Steinman’s presentation. Following this, Tim Sahr moderated a 40 minute discussion that included written and verbal questions and comments.

1 A sample agenda appears in Appendix A.

2 For a complete list of questions, see Appendix B.

ATTENDANCE

As noted in Table 1, attendance at the meetings was very good, averaging 72 persons per workshop. By using the online CVENT system, we also gathered contact information for 691 people who registered for the workshop. The number of people signing in at the workshops was 85% of those who pre-registered, although the figures for each workshop ranged from 67% in Cincinnati to 106% in Zanesville.

Table 1. Attendance at OFVPP regional forums

| | <i>Date</i> | <i># registered</i> | <i># signed in</i> | <i># counted</i> | <i>% of registrants who signed in</i> |
|--------------|-------------|---------------------|--------------------|------------------|---------------------------------------|
| Canton | 3/7 | 47 | 42 | 42 | 89% |
| Athens | 3/14 | 61 | 64 | 65 | 105% |
| Youngstown | 4/4 | 103 | 85 | 90 | 83% |
| Parma | 4/11 | 108 | 82 | 85 | 76% |
| Toledo | 5/2 | 92 | 64 | 65 | 70% |
| Lima | 5/9 | 66 | 56 | 56 | 85% |
| Cincinnati | 5/16 | 131 | 88 | 88 | 67% |
| Zanesville | 5/23 | 83 | 88 | 88 | 106% |
| TOTAL | -- | 691 | 569 | 579 | 85% |

Media coverage of the forums was fairly good. At each forum at least one local newspaper (typically the largest local daily), covered the meeting. At least four meetings also were covered by local television and radio stations.

FINDINGS

The regional meetings were intended to build support for the vision of family violence prevention articulated in the *White Paper*. We assessed this goal by quantitatively measuring participants’ satisfaction with the events and by summarizing and analyzing the qualitative comments and questions. In our effort to understand participants’ feedback about the Project’s vision, we summarized their qualitative comments and identified themes across the forums.

PARTICIPANT SATISFACTION

We assessed participants’ satisfaction through a brief online follow up survey that HPIO administered through CVENT. Overall, 177 of 569 people who signed in later filled out a survey (31%; see table 2). This rate of participation is low, but typical for this type of survey. Overall ratings were very good, with 80% of respondents rating the forum as a “4” or “5,” and individual workshops ranging from 68% (Parma) to 91% (Canton).

Table 2. Participants' rating of regional forums during follow up survey

| | <i># signed in</i> | <i># responding</i> | <i>% responding</i> | <i>% giving overall value of 4 or 5*</i> |
|--------------|--------------------|---------------------|---------------------|--|
| Canton | 42 | 11 | 26% | 91% |
| Athens | 64 | 18 | 28% | 83% |
| Youngstown | 85 | 28 | 33% | 89% |
| Parma | 82 | 28 | 34% | 68% |
| Toledo | 64 | 20 | 31% | 75% |
| Lima | 56 | 19 | 34% | 74% |
| Cincinnati | 88 | 31 | 35% | 87% |
| Zanesville | 88 | 22 | 25% | 77% |
| TOTAL | 569 | 177 | 31% | 80% |

**In response to question, “Overall, please rate this event on a scale of 1 to 5 (5 being the best)”*

In terms of individual sessions, roughly 7 in 10 respondents rated highly “What is prevention?”, “Panel discussion of local violence prevention”, and the “Expert panel Q & A”, while 8 to 9 out of 10 rated Dr. Steinman’s presentation highly (see Table 3). There were, however, two notable departures from these findings: In Toledo, only 50% rated the local panel highly, and in Lima only 53% rated Dr. Steinman’s presentation highly. The lower satisfaction in Lima may have been due to attendees mostly including representatives from law enforcement and the court system. Given their criminal justice perspective, they may have been less interested in broader approaches to prevention. There were no detectable trends over time, as responding participants from later workshops reported similar ratings as did those from earlier workshops.

Table 3. Percentage of participants' rating individual sessions as "4" or "5"*

| | Median (across workshops) | Range (across workshops) |
|--|------------------------------|-----------------------------|
| What is prevention? | 68% | 63-77% |
| Panel discussion of local prevention | 69% | 53-78% |
| Understanding and Preventing Family Violence in Ohio (K. Steinman) | 88% | 53-100% |
| Expert panel Q & A | 75% | 50-82% |

*In response to question, “Overall, please rate this event on a scale of 1 to 5 (5 being the best)”

PARTICIPANTS' COMMENTS AND QUESTIONS

We recorded participants’ feedback by taking field notes and by collecting the index cards onto which they had written comments and questions for the expert panel. We planned to examine these data around the four *White Paper* recommendations: (1) increasing the quality of home visitation; (2) creating school environments that promote healthy relationships; (3) creating local interdisciplinary “I-Teams” to coordinate elder abuse prevention and intervention; and (4) working with banks to prevent financial abuse. Unfortunately, there were few comments relating to the elder abuse recommendations. As such, we combined them into a single topic (“elder abuse.”). In addition, we identified other themes that occurred repeatedly, but did not relate to the recommendations. These included: special populations; OFVPP’s future, and the current needs for data, funding and capacity-building.

HOME VISITATION

The regional forums found broad support for the potential of home visitation programs like *Help Me Grow* to prevent family violence. In the words of one Cincinnati participant, “I think *Help Me Grow* has been an unbelievable missed opportunity.” Several participants thought local health departments should be more active in this area.

Don't public health nurses offer an opportunity to provide in-home screening for family violence? Why isn't our health department more active? (Parma)

Why not use public health departments to go into homes? They have many programs that go into the home (Lima)

Where are local public health agencies in this issue? Is violence prevention not a major issue for them? (Youngstown)

Ohio is one of the few states that certifies community health workers. Have you considered using them for home visitation – especially considering the nursing shortage for public health? (Parma)

...given what we know about the success of home visitation, how hard is it to get public health nurses etc. to have a consistent family violence message? (Cincinnati)

Participants also noted that nurses and other professionals who might be involved in family violence prevention often have their own experiences with victimization.³ Training these providers may also require helping them understand and work through their own experiences. In Cincinnati, for instance, panelist Tom Welch of the Hamilton County Department of Job and Family Services said this is certainly a concern among home health aides who work with the elderly. Fellow panelist Kristin Shrimplin, agreed with his comment, noting that home visitors often have trouble addressing violence in the home since “it was too painful because they are experiencing it their own homes.” In Athens, one audience member cited a study of abuse and violence comparing pregnant women and nurses. The researchers found that domestic violence appeared to be more common in nurses because the nurses were often trained enough to identify their experiences as abuse and violence. Others spoke of the need to provide such training for child care workers.

It is important for this group not forget early childcare providers...many of them are uneducated, at risk themselves, they see family violence as none of their business... (Cincinnati)

Child care providers and early childhood educators are required to receive child abuse education and renew that education every 3 years. How can family violence prevention be incorporated into this? (Parma)

A smaller segment of early childhood educators are in-home providers who care for children in their homes. Many are certified by the county Department of Job and Family Services. They too have little training on child maltreatment. Is there a strategy for these local DJFS agencies to force a heightened training program to prevent violence? (Cincinnati)

CREATE SCHOOL ENVIRONMENTS THAT SUPPORT HEALTHY RELATIONSHIPS

Participants voiced broad support for school-based programming to address teen dating violence. Alyson Bechtel, a panelist in Canton and Kristin Shrimplin in Cincinnati spoke of their experiences with school-based teen dating violence prevention programming. Nonetheless, enthusiasm for this approach was tempered by the challenge of working with schools that are already overwhelmed with numerous programs and tight schedules.

Schools would be an excellent area for focus, but they have so many requirements and so little time. (Lima)

My agency offers community education services for family violence to local middle schools, but only one school takes the services. How do we stress to schools the importance of letting [us] have access to middle schools? (Parma)

[There is great] difficulty in cooperating with the schools because they are already stretched to the max with being under some kind of watch...I sat on a school board and the last thing you wanted to hear was Columbus or Washington saying here's another thing you need to do. (Youngstown)

3 See also: Chamberlin LW, Levenson, R. Addressing domestic violence within the context of home visitation. *Family Violence Prevention & Practice* 2007;6:1-10.)

Another aspect of working in schools was the desire to integrate work on teen dating violence with broader instruction about healthy relationships. In particular, there was great interest in coordinating with bullying prevention programs, with panelists in Youngstown, Lima and Cincinnati specifically citing the Olweus program.⁴

Relationship training should be a part of the total school experience. Start with the basics in preschool and elementary and move to trainers in primary and secondary schools. At all universities, require a class in domestic and societal violence. (Cincinnati)

Are domestic violence prevention programs presented to local school districts as part of the health education plan for students? With increasing numbers of teen dating violence, it makes sense to present this type of instruction. (Toledo)

How might the new state mandates regarding school bullying policies affect the White Paper recommendations? (Toledo)

Will the project be considering bully prevention in Ohio's schools and in the adult work place? (Youngstown)

... violence creates a bully in the home, and a bully in the home can not always but can lead to a bully at the school. How can I start a ... program to address the need for coordination and referral? (Youngstown)

ELDER ABUSE

Participants had far fewer comments related to elder abuse compared to other types of family violence. One Youngstown participant noticed this as well, asking, “Why is elder abuse under-emphasized when compared to child maltreatment and IPV?” Susan Sigmon in Canton and Sylvia Pla-Raith in Parma stated that one of the major barriers to prevention in this area is the miniscule amount of state funding available. (For instance, the \$500,000 in government-sponsored funds for the entire state in FY2008 translates to an average of \$5,681 for each of Ohio’s 88 counties.). Another major barrier is the lack of well-studied, promising approaches to prevention. The few comments about specific prevention approaches either asked whether such approaches even existed (e.g., “Has there been any experience where elder abuse (prevention) education has been incorporated into teen/high school programs...?” [Toledo]) or asked about respite care – an approach we had studied but did not recommend.⁵

Perhaps one key to moving forward is simply to raise awareness of the issue. In Youngstown, an exchange between a participant and panelist Dottie Kane discussed how building public awareness of elder abuse will eventually lead to better funding and more experience with prevention:

The awareness of prevention is lost when there are no investigative services, etc. without awareness of the problem how can we get prevention? ... An increase in awareness may lead to an increase in reporting, and we will need the resources to handle that, so it will have to stay on people's minds.

In summary, the dearth of comments on elder abuse suggests that prevention in this area is much less developed than for child maltreatment or IPV. As a result, OFVPP’s broad approach to different types of family violence risks underemphasizing elder abuse. Instead, the two approaches we do recommend should also aim to build awareness of this issue.

⁴ Clemson University. Olweus Bullying Prevention Program. Accessed June 2, 2008 at: <http://www.clemson.edu/olweus/>

⁵ The *White Paper* did not include respite care as a recommended strategy because there is no compelling evidence that lowering caregiver stress has a demonstrable effect on elder abuse.

SPECIAL POPULATIONS

At nearly every meeting, participants questioned why the White Paper did not address issues specific to particular populations such as ethnic minorities, people with disabilities or gay, lesbian, bisexual and transgendered people. As one Lima participant asked succinctly, “What about minorities?”

Did the Health Policy Institute and Ohio State not concentrate on minorities, women, people in poverty or different ethnic groups? Will they be looking at these populations who probably have higher rates for being abused? (Cincinnati)

Has there been much research done on intimate partner violence in the LGBT community in this project? If so, will results be released? (Parma)

There is normative behavior towards violence in the black community (and as a black person) that is passed down from generation-to-generation that increases the chances of issues not being reported. Even though it was reported today that there is a limited ability to identify and intervene, minority domestic violence is growing faster than other groups. Please consider an applied policy that deals with my community. (Toledo)

Will the project be addressing gay/lesbian experiences of violence and how to prevention violence perpetrated by heterosexuals and others on the gay/lesbian communities? (Youngstown)

What type of intervention strategies are being implemented to penetrate the minority communities? (Toledo)

Dr. Steinman and others typically responded that the Project planned to first craft a broad vision of family violence prevention and then engage community leaders and professionals to discuss how to tailor this vision. Because the Project addresses three enormous topics – child maltreatment, IPV and elder abuse – we felt it would be presumptuous to try and also address issues of cultural competence and relevance in the Project’s initial phase. Doing so, we feared, would only shortchange such critical concerns.

During debriefing sessions after some forums, the Project staff and other panelists typically felt that the audience was comfortable with this response, although they still expected that the Project to consider such issues in future written materials (see separate HPIO report *Family Violence Prevention in Ohio: Perspectives of Special Populations*). In addition, we agreed that future forums should try to include panelists with expertise working with special populations whenever possible.

Pregnant women were another special population that elicited comments across multiple forums. Specifically, participants voiced great interest in collecting statistics on IPV among pregnant women as well as learning about approaches to prevention.

Will you be addressing pregnancy and IPV? In Clinton County, we often see pregnant women suffering IPV events. (Cincinnati)

Has OSU considered the role of pregnancy in IPV? I did not hear anything about pregnancy. (Youngstown)

Does being pregnant result in more incidents of family violence? (Lima)

We need to think about teen pregnancy too. Child welfare can’t serve pregnant moms, but Help Me Grow can. (Athens)

Pregnancy and IPV connection – what can be done to build a statewide standard to address this link? (Parma)

Have you addressed the issue of violence against pregnant women? There have been multiple stories in the news about the murder of pregnant women (some in Ohio, some outside of the state) and an estimate that homicide is the third leading cause of death for pregnant women (#1 complications from pregnancy, #2 motor vehicle accidents). I think analyses concerning pregnant women would be relevant and timely. (Parma)

In addition, participants in Athens and Lima also spoke about the importance of coordinating prevention with offender re-entry services. Some programs (e.g., batterer treatment) are already available on a very limited basis for prisoners incarcerated for domestic violence. Such work is important, but may be more related to intervention than prevention. Also, there is little for offenders who are in prison for other crimes yet who still may be at great risk for perpetrating family violence. Many prisoners have histories of child abuse and neglect as well as substance use disorders; efforts to support their successful re-entry may represent another approach to family violence prevention.

CURRENT NEED: DATA

In looking through participants' comments and questions, we identified three needs that appeared across multiple forum sites. These included better data collection, information about funding sources and coordination at the local and state level. Regarding improved data collection, several panelists and participants noted that such work will be critical to improve services and build support for prevention. Fulfilling these needs could be an important guide to OFVPP's future work.

Service providers have to get comfortable with collecting data and reporting it to legislators, etc. in a meaningful way. We need to get comfortable with words like "evidence-based," "outcomes"—we have to get comfortable with those concepts. (Canton)

How can we do a better job of getting meaningful data collection? How can we share these data to make a case for prevention? (Youngstown)

Participants said this work would be especially valuable if it included local statistics that were up-to-date, easy to understand and accessible. (One Cincinnati participant suggested a "follow-up website.") Other comments and questions suggested the specific types of local and state data that would be of interest to family violence prevention professionals:

How can I get an accurate number of investigated sexual abuse cases (against kids) in Cuyahoga County? (Parma)

How does Ohio compare to the other states in child maltreatment, IPV and senior abuse? (Parma)

How do rural or small-city areas differ from larger metropolitan areas like Columbus or Cleveland? (Lima)

If Ohio's rate of IPV is less than the national average, what does that mean? Is it a tracking issue or real? (Cincinnati)

As a local coordinator, we could really use your group's assistance with local statistics and evaluation. Often the state's top-down approach to program evaluation is not very applicable to local needs. (Cincinnati)

CURRENT NEED: FUNDING

Not surprisingly we found widespread interest in funding. Several people asked if OFVPP could provide funding (it cannot), but most asked for help identifying potential sources. Such information could help local practitioners seek funding and state planners distribute resources more appropriately. Discussions with the Ohio Domestic Violence Network suggest that there is still a great need for such a guide to funding family violence prevention in Ohio.

Do we know what is already being funded so organizations can contribute grant funds to the most needed unfunded violence prevention programs? (Parma)

How does one find out where Ohio [Children's] Trust Fund dollars are being spent in their counties? What amount of resources from OTF are spent on preventing violence? (Cincinnati)

Others noted that finding funding is often difficult because many sources support efforts that address family violence only incidentally. As one participant asked:

Are there state funds that are aimed at only violence prevention? It appears that most funds are tied to other programs and do violence prevention as an added benefit. (Youngstown)

Despite our assurances that OFVPP did not aim to redirect funding from intervention to prevention, several participants expressed just such a concern.

...resources are very limited and everyone is struggling to keep programs that are already in the field. I agree that prevention needs a bigger role, but how can this be done practically without diverting resources from already starved service agencies? Even if not intentionally, your efforts will divert the emphases upon intervention, resulting in a resource challenge. (Parma)

What does examining policy options really mean? Will HPIO be requesting a redirection of state and private funds? If so, in such hard economic times, how will they rob Peter to pay Paul? I suggest that HPIO be careful on how they prioritize adjusting programs such as Help Me Grow. (Youngstown)

Another current need in this area involved educating potential funders. Many participants were surprised that so few foundations in Ohio had an explicit focus on family violence given the magnitude of the problem. Educating foundations and agencies could help them understand how family violence prevention relates to their mission and how they can best support it.

Besides some efforts with state agencies (e.g., TANF), is the Anthem Foundation the main non-governmental funding source for this type of work? If so, does this mean that the funding communities (foundations, corporations) do not really see the raw nature of violence in Ohio? I find the resource drought to be disturbing, given your presentation. (Cincinnati)

How do we teach/convince funders of the need for sustained funding and of effective practices? It seems to me that too much energy and too many resources are invested in chasing program dollars. (Cincinnati)

Is the Anthem Foundation of Ohio the only funding source for violence prevention in Ohio? It appears that the other foundations and state agencies are not very supportive of prevention. (Parma)

What steps has Ohio taken to get federal efforts to match local programs to address violence? Compared to the numbers presented, a couple of foundations and a university are really just a drop in the bucket to the problem. (Youngstown)

Why does there only appear to be one private funding source for such an important project? Where is the state, governor and private foundations? If this affects over a million people and costs that much money, how can it be de-emphasized? (Parma)

Encouragingly, potential funders (e.g., foundation officials; United Way executives) attended the regional forums and articulated the same theme.

Can you suggest some specific directed role for foundations... to help in this family violence prevention effort in Ohio? (Parma)

CURRENT NEED: CAPACITY-BUILDING

Another series of comments related to the ongoing need for capacity-building around family violence prevention. The term “capacity-building” can assume different meanings. In this document, we use it to describe an environment of institutional development and appropriate legal/administrative frameworks that enables continuous improvement in planned efforts to prevent family violence.

Several participants wanted to learn how to become more involved in prevention by collaborating with other agencies in their area.

In Columbiana County, we primarily use volunteers for projects such as the Parent Advocate program. Can the project committee assist Columbiana County with unifying various efforts that are all resource and personnel poor? (Youngstown)

Typically, who are the key stakeholders that need to come together to address family violence in a community? (Cincinnati)

Each county has to have a Board of Health, a Department of Job and Family Services and county commissioners. Are we having difficulty preventing violence because our agencies would rather do other things? Do these agencies coordinate with each other concerning violence? Do they tend to default to stressed school systems? (Youngstown)

In the panel it was mentioned that services may be around the corner, but people may not be aware of them. Do you see the greater problem being lack of assessment to identify gaps in service or underutilization of existing services whether attempting risk prevention or crises intervention? Maybe a role for public health. (Parma)

This raised the issue of which types of agencies should be involved in coordinated, collaborative prevention. At different forums, participants regularly asked whether we planned to work with religious congregations and other faith-based groups. In addition, participants regularly critiqued OFVPP for not including certain constituencies on local panels at the forum. Examples include: law enforcement (Athens, Youngstown, Parma); hospitals (Youngstown, Lima); schools (Lima, Cincinnati). These criticisms

are reasonable, yet it is worthwhile to note that all of these agencies (except hospitals) were indeed represented at other regional forums besides the ones at which the comment appeared.

Beyond the local level, several participants expressed interest in developing an inventory of programs to better understand their potential for collaboration statewide.

Are you aware of programs in other states that have been effective and efficient, besides the home visiting program. Are there model states to mirror? (Lima)

What are the capacities of the Adult Protective Services programs across Ohio's counties? Could they be a factor in developing senior abuse capacities? (Youngstown)

Is there a website that provides a list of all family violence intervention and prevention activities in Cuyahoga County? What about the State of Ohio through HPIO? (Parma)

OFVPP FUTURE

Many participants asked what would happen with OFVPP at the end of Phase I. Implicit in their questions were a history of state initiatives that raise awareness of an issue but fail to follow up. As one participant in Athens put it, “don’t throw a problem on the table if you don’t have a solution.” At nearly every forum participants asked directly whether HPIO, OSU and Anthem would continue to work after the regional forums.

Is there funding to do next year's work and will Cleveland and the Cuyahoga County Health Department be included? We have a big network in this county that could use some direction and assistance (Parma)

If funding continues for your work, will your efforts stop once the funding stops? You obviously know that that family violence will not stop. (Toledo)

Will the Health Policy Institute stick with Cuyahoga County after their research funds cease? What is their commitment to family violence in the county beyond this project? The next phase was mentioned as being community-based applied policy, will the institute stick with Cuyahoga County for this phase? (Parma)

Will the Health Policy Institute of Ohio commit to assisting northwest Ohio with family violence after this project? I like the applied policy angle, but our community providers would need help participating in a process that usually does not include providers. (Toledo)

In summary, the regional forums were tremendously successful in helping the OFVPP meet its goals. Through terrific attendance and good media coverage, we continued to increase awareness of family violence throughout the state. The frank, respectful discussions with participants also build support for our recommended approaches to prevention.

What examples of our recommendations currently exist in Ohio?

In the *White Paper* we recommended four concrete strategies for improving family violence prevention in Ohio:

- Increase the quality of Ohio’s home visitation programs
- Create school environments that promote healthy relationships
- Support county-level demonstration projects of inter-agency elder abuse “I-Teams” to coordinate prevention, investigation, treatment services
- Expand training of elder abuse among banking professionals.

This section updates our recommendations and summarizes how such current efforts currently operate in Ohio.

INCREASE THE QUALITY OF OHIO’S HOME VISITATION PROGRAMS

Numerous home visitation programs⁶ operate in Ohio and address a wide range of outcomes, from reducing low birth weight to improving school readiness.⁷ Unfortunately relatively few programs measure how their work is reducing, or is being undermined by, family violence.⁸ In the *White Paper*, we recommended increasing the quality of these programs in three ways: (1) Develop a unified approach to recording suspected child maltreatment; (2) Strengthen coordination and standardization of training, technical assistance and evaluation procedures; and (3) Support demonstration projects that expand home visitation programs to include prevention of IPV.

To increase the quality of home visitation programs, the most realistic approach will involve working with the *Help Me Grow* (HMG) program at the Ohio Department of Health’s Bureau of Early Intervention Services.⁹ No program in Ohio comes close to HMG in terms of the size of its budget and the breadth of its reach across all 88 counties. Moreover, its Early Track Data System (see below) could eventually provide a useful framework for standardizing suspected instances of child maltreatment. Yet because of its large budget and the numerous state and local agencies involved, working with HMG to increase the quality of the programs will require a sustained, patient effort over several years. First steps must involve developing good working relationships with different stakeholders such as the Bureau of Early Intervention Services, Family and Child First Councils, the Ohio Children’s Trust Fund and the Ohio Department of Mental Retardation and Developmental Disability, among others. When discussing OFVPP, many stakeholders remarked that they were already trying to increase the quality of home

6 Home visitation programs typically involve a nurse, social worker or trained paraprofessional regularly visiting a mother and child during pregnancy and/or up to three years after birth. The home visitor provides education, advice and emotional support.

7 Home Instruction for Parents of Preschool Youngsters (<http://www.hippyusa.org/>) and Parents as Teachers (<http://www.parentsasteachers.org>) focus primarily on school readiness; Healthy Families America (<http://www.healthyfamiliesamerica.org>) focuses on positive parenting, child health and development and preventing maltreatment. Healthy Start (<http://www.healthystartassoc.org/>) is a federally-funded program that focuses primarily on birth outcomes. It currently funds programs in Cleveland and Columbus. Nurse Family Partnership (<http://www.nursefamilypartnership.org>) focuses on a variety of birth outcomes using funds from diverse sources. Ohio has four NFP sites in Cincinnati, Columbus, Dayton, and Hamilton.

8 Personal communication, Pat Lyons, Executive Director, Prevent Child Abuse Ohio, Nov. 16, 2007.

9 Ohio Department of Health. *About Help Me Grow*. Columbus, OH: Author; n.d. Accessed September 1, 2007 at: <http://www.ohiohelpmegrow.org/aboutus/AboutHelpMeGrow.aspx>.

visitation programs. Our efforts to examine how to focus more of these programs on child maltreatment and, perhaps, intimate partner violence will require a careful consideration for how this work can dovetail with existing efforts to improve program quality.

CREATE SCHOOL ENVIRONMENTS THAT PROMOTE HEALTHY RELATIONSHIPS

Schools represent an especially promising setting for prevention, as they afford access to a wide range of young people, including potential perpetrators as well as victims. Many schools provide an environment – distinct from the family – that is relatively stable, safe and offers regular contact with adults who genuinely care about them. Especially for young people who experience violence within their families, schools are a critical domain for developing healthy social relationships. To work in schools we recommend ecological approaches that include adapting school policies, training staff and conducting media campaigns to change the culture of a school. More traditional health education programming will also be important. The *Youth Relationships Project*¹⁰ in Ontario and *Safe Dates*¹¹ in North Carolina have produced impressive reductions in teen dating violence. Efforts to replicate these successes, however, have met with mixed results.¹²

After speaking with people in the field, we recognize that this work – even limited to demonstration projects in select schools – will require sustained effort. State and local education agencies (e.g., the Ohio Department of Education) continue to express little enthusiasm for such work, given competing demands on their time. The Safe and Drug Free Schools program that might be a natural home for such work is being phased out at the state and federal level. As such, professionals in this area are concentrating more than ever on their traditional focus on alcohol, drugs, and (non-intimate) youth violence.

Nonetheless, in IPV networks, there is broad interest in more limited programming related to family violence. School-based teen dating violence prevention programs are growing in popularity, although relatively few districts have well-established programs. Rather they tend to be organized by external organizations that work collaboratively with schools to provide school-based curricula on the topic. Table 5 lists 13 such organizations in Ohio. Some of these programs use formal curricula such as *Safe Dates*, whereas most have developed their own curricula adapted from different sources.

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- 10 Wolfe DA, Wekerle C, Scott K, Straatman A, Grasley C, Reitzel-Jaffe D. Dating violence prevention with at-risk youth: A controlled outcome evaluation. *J Consult Clin Psychol* 2003;71:279-291.
- 11 Foshee VA, Bauman KE, Ennett ST, Linder GF, Benefield T, Suchindran C. Assessing the long-term effects of the Safe Dates program and a booster in preventing and reducing adolescent dating violence victimization and perpetration. *Am J Public Health* 2004;94:619-624.
- 12 Whitaker DJ, Morrison S, Lindquist C, Hawkins SR, O'Neil JA, Nesius AM, et al. A critical review of interventions for the primary prevention of perpetration of partner violence. *Aggression and Violent Behavior* 2006;11:151-166.

Table 5. Ohio organizations involved in school-based teen dating violence prevention (partial list)

| County/Countries | Contact person | Organization | Email |
|--|-----------------------|--|-------------------------------|
| Allen | Donna Dickman | The Partnership for Violence Free Families | wfs-rc@defnet.com |
| Athens, Hocking, Vinton | Lindsey Daniels | Tri-County Mental Health and Counseling Services | saprevention@gmail.com |
| Clark, Greene, Miami, Montgomery, Preble, Shelby | Alessa Hubbell | Planned Parenthood of Southwest Ohio | ahubbell@pppswo.org |
| Cuyahoga, Geauga | Dahlia Harris | Jewish Family Service Association | dharris@jfsa-cleveland.org |
| Franklin | Julie Harmon | IMPACT Safety | jharmon@impactsafety.org |
| Gauga | Tracy Jordan | Gauga County Sheriff's Office | tjordan@co.geauga.oh.us |
| Greene | Cherie Dixon | Family Violence Prevention Center of Greene County | belbrokdoc@yahoo.com |
| Hamilton | Kristin Shrimplin | Family Violence Prevention Project, YWCA of Greater Cincinnati | kshrimplin@ywcacin.org |
| Knox | Judi Mosely | New Directions Domestic Abuse Shelter of Knox County | jmoseleydelta@columbus.rr.com |
| Lucas | Cindy Pisano | Family and Child Abuse Prevention Center | cpisano@fcapc.org |
| Summit | Karen Mascolo | Akron Children's Hospital | kmascolo@chmca.org |
| Warren | Megan Crouch | Abuse and Rape Crisis Shelter of Warren County | arcs-crouch@bizcinci.rr.com |
| Warren | Chuck Duerre | Lebanon Police Department | cduerre@lebanonohio.gov |

Not included in the above list are numerous other organizations that provide single session guest speakers on the topic for a class presentation or all-school assembly.¹³ Such efforts undoubtedly raise awareness of teen dating violence, but it is unlikely they have any consistent effect on behavior.

SUPPORT COUNTY-LEVEL DEMONSTRATION PROJECTS OF INTER-AGENCY ELDER ABUSE "I-TEAMS" TO COORDINATE PREVENTION, INVESTIGATION, TREATMENT SERVICES

When the Ohio Elder Abuse Task Force issued its landmark report in 2005,¹⁴ one recommendation was to create I-teams (i.e., inter-agency elder abuse teams to coordinate prevention, investigation and treatment services) for each county in Ohio. That same year, Senators Goodman, Stivers, Clancy and Amstutz introduced SB 175 that would have mandated relevant agencies in each county to write a memorandum of understanding governing such teams. The bill, however, has not been reintroduced.

During this time, the Ohio Department of Job and Family Services surveyed adult protective service agencies in each county to ask whether such a team already existed.¹⁵ Only 25 of 88 counties (28%) returned the survey, but six counties (Cuyahoga, Fairfield, Lorain, Medina, Muskingum and Ross) did report having a formal I-Team or something similar. In 2008, we followed up with these and other counties to try and determine which counties currently have I-Teams.¹⁶ Although not exhaustive, Table 6 presents such a list. Notably, only two of the counties that had reported having an I-Team still had one in 2008. Also, in 2008 the only major metropolitan area to have a county-wide I-Team was Hamilton. (Cuyahoga's disbanded because the number of agencies was too large and unwieldy.¹⁷) We also noted that counties with I-Teams tend to cluster around northeast and southwest Ohio.

Many contacts around the state reported that the professionals in their county operated "like an I-team" even though they were not formally organized as one. Especially in smaller rural counties, professionals already know one another well, and discuss difficult cases. Nonetheless, many still liked the idea of formalizing the process through a written memorandum of understanding. One person who coordinated a formal I-Team for his county remarked, "Forming a I-Team was simply formalizing something we had already been doing informally."

In many counties, I-Teams – especially informal ones – tend to disband and regroup every few years. Results from the 2005 survey and correspondence with local providers suggested that teams in Adams, Fairfield, Highland, Muskingum all had I-teams that disbanded in recent years often for lack of funding and staff turnover.

13 Perhaps the most popular such program in Ohio is *Citizens Against Domestic Violence* in Middletown, OH (www.cadv-ohio.com).

14 Petro J, Lawrence JW. *Ohio Elder Abuse Task Force Report*. Columbus, OH: Ohio Attorney General's Office; 2004. Accessed May 1, 2007 at: http://www.ag.state.oh.us/citizen/pubs/eatf/04eatf_rpt.pdf.

15 Ohio Department of Job and Family Services, Ohio Elder Abuse Steering Committee. *Memorandum of Understanding Survey*. Unpublished report; 2005.

16 In addition to asking our existing contacts throughout the state, we emailed all long term care ombudsmen and followed up on all referrals. We also cold called adult protective services workers in three counties about which we had heard nothing. All three reported that there was no I-Team in their county.

17 Oral personal communication, Lynn Wieland, Coordinator, Office on Aging, Cuyahoga County Department of Senior and Adult Services, August 20, 2008.

Table 6. Ohio counties with known Elder Abuse I-Teams

| County | Contact | Email |
|----------|---------------------|-------------------------------|
| Hamilton | Tom Welch | welcht@jfs.hamilton-co.org |
| Jackson | Rex Sanders | rsanders@aaa7.org |
| Lawrence | Rex Sanders | rsanders@aaa7.org |
| Lorain | Kathryn Griffin | griffk01@odjfs.state.oh.us |
| Ross | Kelly Mettler | mettln@odjfs.state.oh.us |
| Scioto | Kaye Mason-Inoshita | kinoshita@aaa7.org |
| Summit | Lorrie Warren | lwarren@SummitOhioProbate.com |
| Trumbull | Cindy Miklus | cmiklus@neo.rr.com |
| Warren | Karen Hill | karenh@wccsinc.org |
| Wayne | Susan Sigmon | ssigmon@services4aging.org |

EXPAND TRAINING OF ELDER ABUSE AMONG BANKING PROFESSIONALS

Unlike other forms of elder abuse, financial exploitation unavoidably involves contact with an institution or trained professional (e.g., bank, court, or attorney). Also, exploitation often precedes other types of elder abuse, so identifying and intervening with cases may prevent other forms of abuse. Toward this end, the *White Paper* recommended developing a campaign to train Ohio's banking and financial service professionals in the area of elder financial abuse.

We found little current activity in Ohio involving training banking professionals on financial exploitation of elders. A few efforts aim to educate human service professionals and the general public about this type of elder abuse,¹⁸ but to our knowledge, none of Ohio's largest banks (i.e., Fifth Third, Huntington, National City) currently provide any formal training on elder abuse to their staff.¹⁹ Moreover, representatives from the Community Bankers Association of Ohio and the Ohio Banking League said they were not aware of any such training. David Kessler, formerly of the Ohio Attorney General's Office, had been active in this area but left in early 2008.²⁰ As a leading expert in the field of elder financial exploitation, he continues to lecture around the country, but reports that there are few ongoing programs in Ohio.

18 Examples include the Ross County Sheriff's Office *Safe Bank Project* (contact: Lt. Dale Gillette, crimediv@rosssheriff.com), Fifth Third Bank's Office of Fraud Prevention & Education (contact: Faith Porter, faith.porter@53.com)

19 Scott Blashford, Loss Avoidance and Investigations at National City Bank, reported that National City had conducted trainings in the past, but was not aware of any current training.

20 Personal oral communication, David Kessler, August 15, 2008.

Next steps: Using existing data sets to support family violence prevention in Ohio

The recommendations from the *White Paper* can help focus statewide efforts in family violence prevention. Yet it is beyond the scope of this Project to operationalize them. Rather, our role is to build the capacity of agencies, coalitions and communities to develop such efforts together. Towards this end, the next phase of the OFVPP will involve gathering, analyzing and summarizing existing data sets related to family violence. This work will have three aims: (1) to educate government and community leaders about the tremendous scope and profound consequences of family violence; (2) to help practitioners and funders determine where needs are greatest; and (3) to support efforts to evaluate prevention activities. This section describes some of the data sets we could use in this process and present family violence data from 881 Ohio law enforcement agencies.

WHAT DATA ARE AVAILABLE

Through background research and meetings with agency officials, we identified eight data sets that can enable us to better understand the scope and consequences of family violence in Ohio. We focused on data sets with the following characteristics:

- accurate (or at least with well-understood limitations);
- up-to-date;
- available annually over multiple years; and
- available at the local (e.g., county) level.

Many of the following data sets are publicly available but remain difficult to access. Retrieving the data will require persistent requests and the cooperation of state agencies. Even once the data are provided, summarizing and analyzing it accurately will demand considerable effort and research skills. Table 7 briefly summarizes these data sets and their availability. More complete descriptions appear in the text.

STATEWIDE AUTOMATED CHILD WELFARE INFORMATION SYSTEM (SACWIS)

The State of Ohio's Statewide Automated Child Welfare Information System (SACWIS) is a new, ambitious effort to consolidate 88 separate county-based child welfare systems. The system was designed to replace paper based and automated systems in the state's 88 counties that were often poorly coordinated and led to lost cases and poor service. Despite some initial problems, the system now appears to be on track and is operational in 86 counties. While the major focus of the system is to improve handling active cases, it will also greatly improve Ohio's ability to track county and state level trends in child maltreatment. Preliminary conversations with Jennifer Justice, SACWIS Implementation Manager at ODJFS, suggest that data could become available by 2009.

These data will enable researchers to examine county-level differences in child maltreatment. One major challenge is that different counties employ different definitions of child maltreatment and vary in their organizational capacity to investigate suspected cases. As a result, observed differences are not necessarily due to differences in the true, underlying prevalence of abuse and neglect. Nonetheless, each county does not have its own unique definition and organizational capacity. Rather, it would be possible to classify counties into groups that employ relatively similar definitions of maltreatment, have similar organizational capacity and are demographically similar. Doing so could enable researchers to provide several "apples to apples" comparisons across the state.

EARLY TRACK

Help Me Grow (HMG) is a program in the Ohio Department of Health's Bureaus of Early Intervention Services (ODH-BEIS) that funds family-centered services for expectant parents, newborns toddlers and their families through Family and Children First Councils in each county. Most of these services involve home visitation programs, in which a nurse, social worker, other professional or paraprofessional visits families with, or at risk for developmental disabilities or delays. All HMG programs track the intake and progress of their client families through the Early Track system. Because one of the eligibility criteria for HMG is child maltreatment or IPV, it may be possible to use this data to determine which home visitation programs in which counties encounter the most cases of child maltreatment and IPV. Given OFVPP's interest in home visitation programs, these data could be quite relevant and valuable to our work. Discussions with researchers at ODH-BEIS indicate that it is possible to retrieve program specific outcomes relevant to our interests.

OHIO FAMILY HEALTH SURVEY

The 2008 Ohio Family Health Survey (OFHS) is one of the largest health surveys in the United States (n=43,000). Last conducted in 2004, the survey includes a representative sample of Ohio households and focuses largely on health insurance and health outcomes for adults and children. For the first time, the 2008 OFHS will ask several questions about violence that will enable researchers to estimate the prevalence of IPV for specific demographic groups and individual counties. Such information will be critical for government leaders, foundations and others to distribute resources where the need is greatest. These data will also serve as a valuable comparison to other state and local data sets that rely on case reports (e.g., domestic violence arrest incidents) to document the extent of IPV. Doing so will help highlight gaps in these other data collection efforts and thus further improve agencies' abilities to allocate resources appropriately.

The interviewers are currently in the field and expect to have 50% of the data collected by October 15, 2008 with the remainder by December 31, 2008. The raw data will be free and are publicly available, but will require statistical expertise to analyze appropriately.

OHIO MENTAL HEALTH CONSUMER OUTCOMES SYSTEM (ODM)

The Ohio Mental Health Consumer Outcomes Data Mart (ODM) is a organized repository of information on outcomes measures for consumers served by Ohio's public mental health system. Most users analyze the data to improve service delivery, but it also may be an important tool for assessing violence in a population that are often not represented on population-based surveys. Currently 50 residence boards and more than 300 providers across the state provide data on more than 300,000 unique consumers. One domain that they track among adult consumers is "safety and health," which includes questions on violent victimization. It is unclear, however, whether it will be possible to distinguish family violence from other types. Nonetheless, it is worthwhile to explore this data since it represents a large number of Ohioans who are often excluded from other surveillance efforts.

* * *

Each of these data sets has limitations, yet taken together they will provide a compelling picture of the burden family violence places on Ohio. Summarizing and disseminating such information in a credible, understandable format will strengthen Ohio's capacity for family violence prevention. Agencies and coalitions at the state and local level will have compelling information to demonstrate the scope of the problem. Planners and funders at the state level will have a powerful tool to help determine where family violence needs are greatest. Moreover, efforts to evaluate community-level interventions will benefit from a new ability to compare different jurisdictions and track trends over time. Such work will be critical to protecting Ohio's families from violence.

Table 7. Available data sets with statewide data on family violence outcomes in Ohio.

| Name of data set | Type of violence | Clusters available | Availability | Types of questions asked |
|---|---|---|--|---|
| Statewide Automated Child Welfare Information System (SACWIS) | Child maltreatment | 86 counties | Preliminary data are available immediately; will require formal request | How do reported rates of child maltreatment differ among counties with similar definitions and organizational capacity? |
| ODH-BEIS Early Track | Child maltreatment; IPV | All 88 counties; dozens of Help Me Grow funded programs statewide | Immediately; but requires formal request; will provide analyses but not raw data | Which home visitation programs encounter the child maltreatment? IPV? |
| Ohio Family Health Survey | IPV | Possibly all 88 counties; certainly major metro counties and rural multi-county regions | December 2008; raw data publicly available | How common is IPV among different communities in Ohio? |
| Ohio Attorney General: Domestic violence Incident data | All types; may not be able to differentiate | Hundreds of local police jurisdictions statewide | Immediately; published data publicly available; uncertain if raw data can be requested | (see example in Appendix D) |
| Ohio Mental Health Consumer Outcomes System | All types; may only be able to differentiate by age | Varies; approved provider agencies, residence boards | Immediately; published data publicly available; will provide analyses but not raw data | How common is violence among consumers of mental health services (a group often excluded from other data sets)? |
| ODJFS – TANF Family Violence Option | IPV | All 88 counties | Immediately; but requires formal request | In each county, how many women on TANF (i.e., “welfare”) experience IPV? |
| ODJFS - Adult protective services | Elder abuse | All 88 counties | Immediately; but requires formal request | How many cases of elder abuse are reported in each county? |

HOW CAN WE USE FAMILY VIOLENCE DATA? AN EXAMPLE OF DOMESTIC VIOLENCE INCIDENTS IN OHIO COUNTIES

Our efforts to locate local level data on family violence were often frustrating, yet we remained convinced that future work will greatly improve our ability to collect and summarize data in a meaningful way.

One way to encourage such work is to demonstrate how we might gather, summarize and present data on family violence outcomes. This appendix illustrates how we could do so to create information that is accurate, easy to access and easy to use for advocacy or program planning.

The data set is *Domestic Violence Incidents by County and Agency, 2007* prepared by the Attorney General's Bureau of Criminal Identification and Investigation (BCI). By law (Ohio Revised Code 3113.32), law enforcement agencies in Ohio must record domestic dispute and domestic violence problems within their jurisdictions and send a monthly report to the BCI. Each year, BCI compiles an annual report which breaks down the domestic violence incident reports by how the reporting agency responded to incidents, the relationship of the parties involved, and their demographic information.

These data are easily accessed on the internet, yet the 75 page .pdf file is difficult to sort through and (in its present form) useless for identifying patterns across the state. With considerable effort, we took the published data, converted them to a spreadsheet, and then worked through how best to summarize the data. In the process of doing so, we identified problems with the data set as well as approaches for correcting these problems. We also explored what questions we could answer with reasonable confidence, given the data's limitations. *It should be noted that the definition of domestic violence in these data includes much more than IPV.* A rough approximation of the data suggests that about 57% of cases could be classified as IPV, whereas the remainder occurs among other family and household members, both current and former. Because we were not able to distinguish IPV cases in these data, the reader should keep in mind that findings relate to a broader definition of family violence.

The findings below are preliminary and still need to be reviewed and critiqued by independent experts. Nonetheless, they can help illustrate the potential for how we might use existing data to understand family violence and plan prevention efforts. We identified three questions that we could answer using these data, each of which we discuss below.

(1) ARE OHIO'S LAW ENFORCEMENT AGENCIES FOLLOWING MANDATED REPORTING REQUIREMENTS FOR DOMESTIC VIOLENCE?

Of the 881 law enforcement agencies reporting to BCI, 50% (n=441) submitted DV incident reports each month, while 28% submitted some monthly reports (median=9 months) and 22% submitted none. Of the 88 sheriff's offices, 61% submitted reports each month, 31% submitted some and seven (Brown, Lake, Logan, Hardin, Harrison, Ross, Scioto) submitted no reports.

Reporting varied considerably by county. In Portage County for instance, 11 of 12 agencies (92%) submitted reports each month and 1 submitted reports for 11 months. In contrast, 4 of the 5 agencies in Van Wert County submitted no reports. Many of the counties with especially high percentages of reporting agencies were rural counties with very few agencies. Yet many others had several agencies, few of which submitted reports each month: in Belmont County, 8 of 13 agencies submitted no reports; in Lawrence 5 out of 8; in Columbiana 8 out of 18.

DO DIFFERENT AGENCIES RESPOND DIFFERENTLY TO DOMESTIC VIOLENCE?

Considerable anecdotal evidence suggests that law enforcement agencies in Ohio vary in their responses to incidents of domestic violence. Even with the limitations of uneven reporting rates, we found marked variation in the percentage of domestic violence calls that resulted in an arrest on related charges (see Appendix E). On average, 47% of total calls resulted in an arrest, although individual agencies' arrest rates ranged from 3% to 100%.²¹ At 15 agencies (including smaller towns and major metropolitan areas) over 95% of calls resulted in a DV arrest. We also identified some agencies at the other end of the distribution, i. Table D1 presents agencies where less than one in ten calls resulted in an arrest.

Table D1. Ohio law enforcement agencies with the lowest reported % of domestic violence (DV) calls resulting in a domestic violence arrest, 2007.

| Agency (county) | Totals # calls | # DV arrests | % of calls resulting in DV arrest |
|---|----------------|--------------|-----------------------------------|
| Euclid Police Department (Cuyahoga) | 1,020 | 94 | 9% |
| East Palestine Police Department (Columbiana) | 52 | 4 | 8% |
| New Boston Police Department (Scioto) | 175 | 10 | 6% |
| Heath Police Department (Licking) | 146 | 4 | 3% |

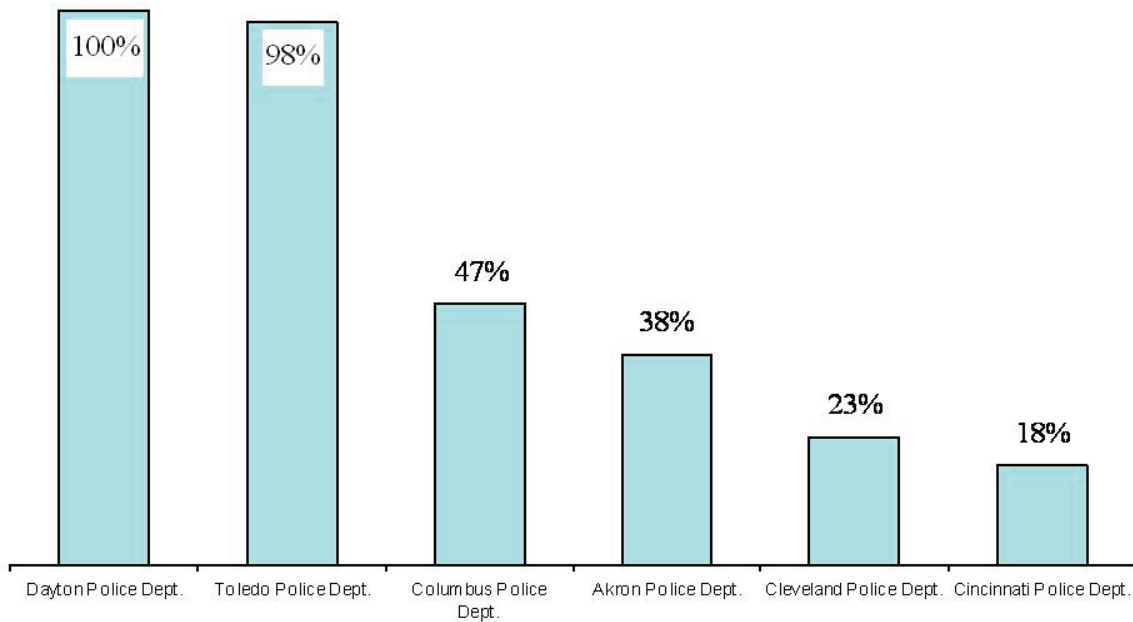
Arrest rates varied for all different types of communities. Figure 1 presents results for five large urban forces (all with complete reports for 2007). Even within a single county, there were often differences as Figure 2 demonstrates for agencies in Portage County.

Such variation likely results from policy differences, specifically a mandatory arrest policy that some law enforcement agencies have enacted to guide their response to a domestic violence call. The data we present here could be used to identify which agencies are following such policies and how well they are doing so. Over time, such information at the local level could also indicate a local domestic violence coalition's success in collaborating with law enforcement.

These two graphs merely hint at the myriad ways one might present such data. The data from all 881 agencies would be too voluminous to include as an appendix, yet we would be happy to respond to requests for specific agencies or counties.

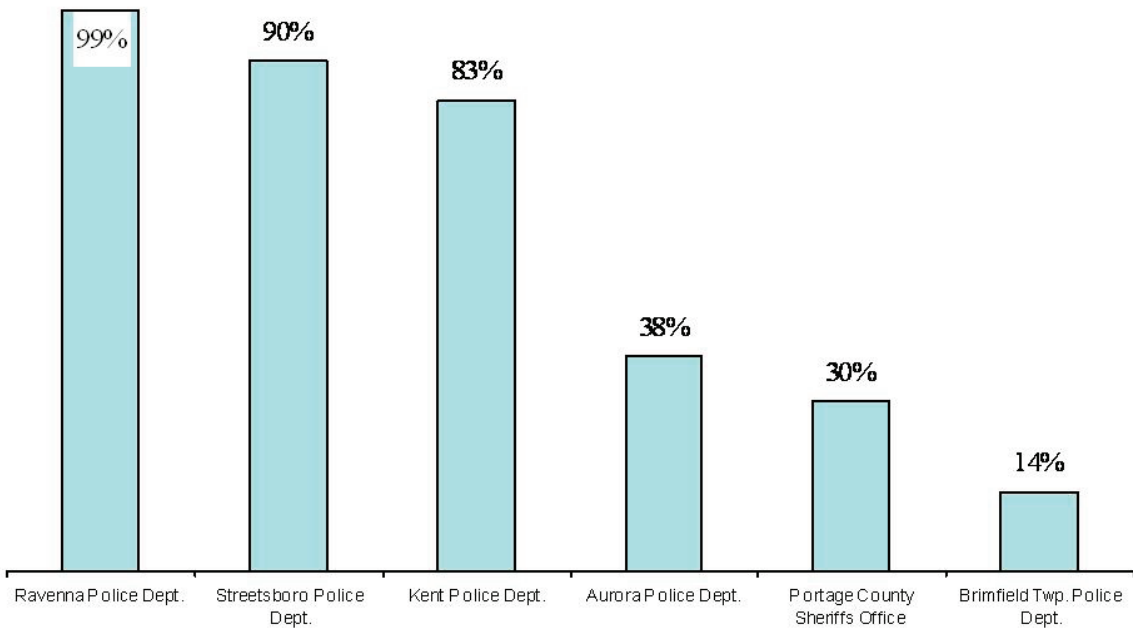
²¹ Among the 239 agencies with at least 50 domestic violence calls.

Figure 1. % of domestic violence police calls resulting in an arrest on related charges: 5 urban law enforcement agencies, 2007



Source: Ohio Attorney General, Bureau of Criminal Identification & Investigation

Figure 2. % of domestic violence police calls resulting in a domestic violence arrest: Law enforcement agencies* in Butler County, 2007



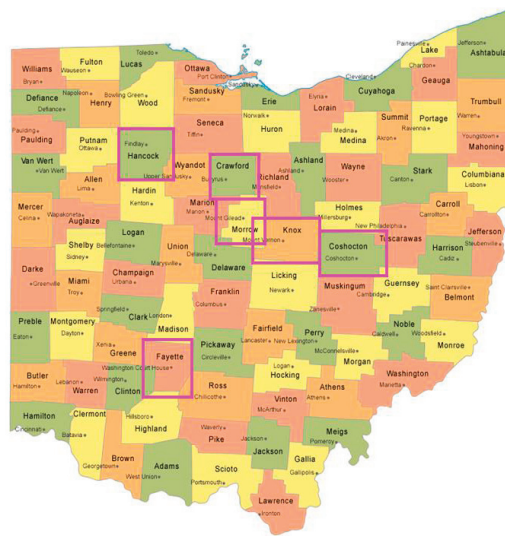
*agencies with ≥ 50 DV arrests

Source: Ohio Attorney General, Bureau of Criminal Identification & Investigation

DO RATES OF DOMESTIC VIOLENCE IN OHIO DIFFER BY COUNTY?

Research would suggest that the answer to this question is “yes,” but we have little evidence to suggest how such patterns might look in Ohio. Even the BCI data are far too incomplete to provide a statewide picture. We were, however, able to identify several counties that are relatively similar and whose law enforcement agencies all submitted complete²² reports for 2007: Crawford, Coshocton, Fayette, Hancock, Knox, Madison and Morrow. Examining variation among these counties may provide some insight into how the BCI data can detect county level differences in domestic violence. Rather than look at the number of arrests for domestic violence – that may vary due to differences in agency policy (see above) – we instead focused on the total number of domestic violence calls. To account for differences in each county’s population,²³ we calculated the number of domestic violence calls per 10,000 residents.

Figure 3. Location of Six Rural Ohio Counties with complete BCI domestic violence data



The counties are all rural and demographically similar: populations range from 28,308 to 74,204, are >95% white with 6.6 to 7.8% of families living below the poverty line. All except Fayette are located in north central part of the state (Figure 3).

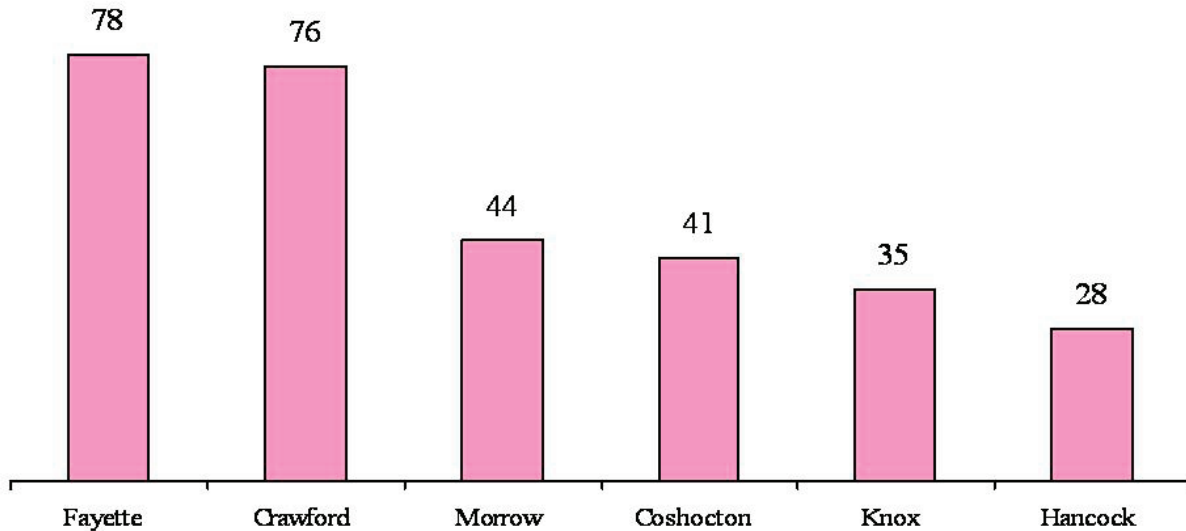
Given these similarities, our findings were quite interesting (Figure 4). Coshocton, Knox and Morrow counties had relatively similar rates, yet Crawford county was much higher; with a rate more than 2 ½ times that of nearby Hancock county. Fayette’s rate resembled Crawford’s, being much higher than the others.

These findings raise a number of questions. Why is Hancock’s rate lower and Crawford’s rate so much higher than rates in other nearby counties? Compared to Coshocton and Morrow, is the slightly lower rate in Knox attributable to the presence of an active domestic violence coalition? Is the higher rate in Fayette evidence of a regional trend?

22 Three counties were missing some reports from a single agency in a small town. We omitted from our analysis, and adjusted the county population accordingly but do not believe these meaningfully affected the results. Specific instances include: New Washington in Crawford County (population=934); Fredericktown in Knox County (population=2,428); Edison in Morrow county (population=434).

23 Using estimates from the 2006 American Community Survey, US Census Bureau.

Figure 4. # of domestic violence police calls per 10,000 residents in 6 Ohio counties, 2007



Sources: Ohio Attorney General, Bureau of Criminal Identification & Investigation;
US Census Bureau

Another comparison of similar counties with complete data involves Hocking, Monroe²⁴ and Morgan counties. All three counties are located in southeast Ohio, have similar populations (range 14,987 – 28,241) and high percentages of families living in poverty (10.3 – 15.7%). The number of domestic violence calls per 10,000 residents was 84.9 in Hocking, 78.4 in Monroe and 98.5 in Morgan. These findings are curious in two respects. First, there was less variation, although Morgan was somewhat higher than the other two. Second, all three counties had higher reported rates than those in the previous example. This may suggest that even among rural counties, BCI data may be able to detect differences in domestic violence based on region or other factors. Further analyses will be necessary to confirm such findings, however.

The BCI data we used in these comparisons do not, of course, include the vast majority of family violence incidents that never come to attention of authorities. In addition, agencies differ in their ability and willingness to detect domestic violence. Because of these limitations, it is important that we not simply attribute county-level differences in BCI data to differences in the true underlying prevalence. More extensive examination of the data may enable us to determine the extent to which this is the case, but such work is beyond the scope of this report.

24 BCI data for Monroe county does not include figures for the county seat, Woodsfield (population, 2,485). We adjusted the county population accordingly in reporting results.

APPENDIX A: SAMPLE AGENDA FOR OFVPP REGIONAL FORUM

Ohio Family Violence Prevention Project Regional Forum Agenda Toledo/Lucas County; May 2, 2008

10:00 AM - 10:05 AM

Welcome

- Tina Skeldon-Wozniak, President of the Board of Lucas County Commissioners

10:05 AM - 10:10 AM

Introduction and Purpose of the meeting

- Tim Sahr, Director of Research, Health Policy Institute of Ohio

10:10 AM - 10:15 AM

What is prevention?

- Jo Simonsen, Prevention Trainer, Ohio Domestic Violence Network

10:15 AM - 10:40 AM

Panel Discussion: Local Family Violence Prevention Activities

- Cindy Pisano, Associate Director of Family and Child Abuse Prevention Center, DELTA Project
- David Kontur, Director of Lucas County Family Council
- Barbara Van Wormer, Senior Services Coordinator, Lucas County Department of Job & Family Services

10:40 AM - 11:20 AM

Findings of the Ohio Family Violence Prevention Project

- Kenneth Steinman, Ohio State University College of Public Health

11:20 AM - 12:00 PM

Expert Panel Q&A

- David Grossman, Health Commissioner, Toledo-Lucas County Health Department
- Kenneth Steinman, Ohio State University College of Public Health
- Nancy Neylon, Executive Director, Ohio Domestic Violence Network

APPENDIX B: QUESTIONS FOR LOCAL PANELISTS AT OFVPP REGIONAL FORUM

The Discussion Panel involves a moderated discussion about what family violence prevention does and should look like in this area. Here is a list of the type of questions you might expect from the moderator. The moderator will pose these questions to all the panelists and will facilitate a discussion among them.

- Family violence is a serious concern throughout Ohio, but there may also be some differences from region to region. Is the scope of child maltreatment, IPV or elder abuse different in this region compared to the rest of Ohio? If so, how?
- Now let's turn to prevention. What sorts of programs or policies can prevent family violence from occurring *before* it begins?
- Can you give any local examples?
- Many agencies and organizations that address family violence are so busy working with perpetrators and victims that they have little or no time for prevention. To expand the scope of family violence prevention in Ohio, what are the benefits of working through these same agencies? What are the risks?
- Which other agencies and organizations would be useful collaborative partners in developing prevention efforts?
- We have a little time for closing comments. Is there anything you'd like to add about family violence prevention in this region?

APPENDIX C: % OF DOMESTIC VIOLENCE CALLS THAT RESULT IN A DOMESTIC VIOLENCE ARREST: BY COUNTY AND AGENCY, 2007

This list includes all 197 law enforcement agencies in Ohio that submitted domestic violence data for all 12 months in 2007 and reported ≥ 50 domestic violence (DV) calls. Other agencies are not included.

| County | Agency | # of total calls | # of DV arrests | % of calls resulting in DV arrest |
|------------|----------------------------------|------------------|-----------------|-----------------------------------|
| Allen | Lima Police Department | 597 | 172 | 29% |
| Ashland | Ashland County Sheriff | 90 | 41 | 46% |
| Ashtabula | Ashtabula County Sheriff | 260 | 118 | 45% |
| Ashtabula | Ashtabula Police Department | 141 | 79 | 56% |
| Ashtabula | Conneaut Police Department | 82 | 56 | 68% |
| Ashtabula | Geneva Police Department | 154 | 38 | 25% |
| Athens | Athens County Sheriff | 738 | 167 | 23% |
| Athens | Nelsonville Police Department | 56 | 21 | 38% |
| Auglaize | Auglaize County Sheriff | 94 | 16 | 17% |
| Auglaize | Saint Mary's Police Department | 102 | 33 | 32% |
| Belmont | Belmont County Sheriff | 200 | 128 | 64% |
| Brown | Mount Orab Police Department | 52 | 38 | 73% |
| Butler | Butler County Sheriff | 526 | 309 | 59% |
| Butler | Fairfield Police Department | 152 | 129 | 85% |
| Butler | Fairfield Twp. Police Department | 99 | 86 | 87% |
| Butler | Hamilton Police Department | 834 | 337 | 40% |
| Butler | Middletown Police Department | 767 | 408 | 53% |
| Butler | Monroe Police Department | 94 | 52 | 55% |
| Butler | West Chester Police Department | 303 | 265 | 87% |
| Clark | Clark County Sheriff | 816 | 211 | 26% |
| Clermont | Clermont County Sheriff | 908 | 364 | 40% |
| Clermont | Goshen Twp. Police Department | 92 | 74 | 80% |
| Clinton | Clinton County Sheriff | 261 | 27 | 10% |
| Clinton | Wilmington Police Department | 66 | 39 | 59% |
| Columbiana | East Liverpool Police Department | 73 | 71 | 97% |
| Columbiana | East Palestine Police Department | 52 | 4 | 8% |
| Coshocton | Coshocton County Sheriff | 101 | 40 | 40% |
| Crawford | Bucyrus Police Department | 112 | 112 | 100% |
| Crawford | Crawford County Sheriff | 89 | 25 | 28% |
| Crawford | Galion Police Department | 94 | 40 | 43% |
| Cuyahoga | Berea Police Department | 75 | 34 | 45% |
| Cuyahoga | Brook Park Police Department | 66 | 50 | 76% |
| Cuyahoga | Cleveland Heights Police Dept | 126 | 67 | 53% |
| Cuyahoga | Cleveland Police Department | 5,653 | 1,324 | 23% |
| Cuyahoga | Euclid Police Department | 1,020 | 94 | 9% |
| Cuyahoga | Garfield Heights Police Dept. | 272 | 221 | 81% |
| Cuyahoga | Lakewood Police Department | 147 | 102 | 69% |
| Cuyahoga | Maple Heights Police Department | 311 | 168 | 54% |
| Cuyahoga | Olmsted Falls Police Department | 89 | 21 | 24% |
| Cuyahoga | Parma Heights Police Department | 146 | 91 | 62% |
| Cuyahoga | Parma Police Department | 185 | 165 | 89% |
| Cuyahoga | Rocky River Police Department | 152 | 29 | 19% |
| Cuyahoga | South Euclid Police Department | 200 | 35 | 18% |
| Cuyahoga | Strongsville Police Department | 102 | 58 | 57% |

Appendix C continued

| | | | | |
|-----------|----------------------------------|-------|-------|-----|
| Darke | Darke County Sheriff | 108 | 52 | 48% |
| Darke | Greenville Police Department | 53 | 43 | 81% |
| Delaware | Delaware County Sheriff | 197 | 85 | 43% |
| Delaware | Delaware Police Department | 170 | 35 | 21% |
| Delaware | Genoa Twp. Police Department | 67 | 11 | 16% |
| Erie | Erie County Sheriff | 377 | 67 | 18% |
| Erie | Huron Police Department | 153 | 32 | 21% |
| Erie | Sandusky Police Department | 397 | 208 | 52% |
| Erie | Vermilion Police Department | 102 | 54 | 53% |
| Fairfield | Lancaster Police Department | 591 | 337 | 57% |
| Fairfield | Pickerington Police Department | 100 | 38 | 38% |
| Fayette | Fayette County Sheriff | 110 | 84 | 76% |
| Fayette | Washington CH Police Dept. | 110 | 99 | 90% |
| Franklin | Columbus Police Department | 6,829 | 3,243 | 47% |
| Franklin | Dublin Police Department | 91 | 40 | 44% |
| Franklin | Franklin County Sheriff | 646 | 304 | 47% |
| Franklin | Grove City Police Department | 90 | 70 | 78% |
| Franklin | Groveport Police Department | 133 | 34 | 26% |
| Franklin | Hilliard Police Department | 104 | 49 | 47% |
| Franklin | Madison Twp. Police Department | 158 | 45 | 28% |
| Franklin | Reynoldsburg Police Department | 298 | 91 | 31% |
| Franklin | Westerville Police Department | 121 | 55 | 45% |
| Franklin | Whitehall Police Department | 186 | 142 | 76% |
| Fulton | Fulton County Sheriff | 117 | 52 | 44% |
| Gallia | Gallia County Sheriff | 73 | 19 | 26% |
| Geauga | Bainbridge Twp. Police Dept | 53 | 7 | 13% |
| Greene | Beavercreek Police Department | 203 | 89 | 44% |
| Greene | Fairborn Police Department | 179 | 134 | 75% |
| Greene | Xenia Police Department | 323 | 214 | 66% |
| Hamilton | Colerain Twp. Police Department | 149 | 68 | 46% |
| Hamilton | Delhi Twp. Police Department | 180 | 46 | 26% |
| Hamilton | North College Hill Police Dept | 140 | 35 | 25% |
| Hamilton | Norwood Police Department | 181 | 107 | 59% |
| Hamilton | Saint Bernard Police Department | 82 | 12 | 15% |
| Hamilton | Sharonville Police Department | 73 | 22 | 30% |
| Hamilton | Springfield Twp. Police Dept | 218 | 191 | 88% |
| Hancock | Findlay Police Department | 137 | 111 | 81% |
| Hancock | Hancock County Sheriff | 64 | 47 | 73% |
| Hocking | Hocking County Sheriff | 139 | 74 | 53% |
| Hocking | Logan Police Department | 106 | 39 | 37% |
| Holmes | Holmes County Sheriff | 136 | 65 | 48% |
| Huron | Huron County Sheriff | 230 | 31 | 13% |
| Huron | Norwalk Police Department | 66 | 51 | 77% |
| Jackson | Jackson County Sheriff | 86 | 73 | 85% |
| Jefferson | Steubenville Police Department | 210 | 185 | 88% |
| Jefferson | Wells Township Police Department | 57 | 18 | 32% |
| Knox | Knox County Sheriff | 89 | 68 | 76% |
| Knox | Mount Vernon Police Department | 89 | 43 | 48% |
| Lake | Eastlake Police Department | 52 | 32 | 62% |
| Lake | Madison Twp. Police Department | 309 | 113 | 37% |
| Lake | Mentor On The Lake Police Dept | 93 | 21 | 23% |
| Lake | Mentor Police Department | 304 | 77 | 25% |
| Lake | Painesville Police Department | 67 | 54 | 81% |

Appendix C continued

| | | | | |
|------------|-----------------------------------|-------|-------|-----|
| Lake | Willoughby Police Department | 54 | 12 | 22% |
| Lake | Willowick Police Department | 62 | 29 | 47% |
| Lawrence | Ironton Police Department | 91 | 89 | 98% |
| Licking | Heath Police Department | 146 | 4 | 3% |
| Licking | Licking County Sheriff | 462 | 139 | 30% |
| Licking | Newark Police Department | 454 | 381 | 84% |
| Logan | Bellefontaine Police Department | 140 | 70 | 50% |
| Lorain | Amherst Police Department | 113 | 32 | 28% |
| Lorain | Elyria Police Department | 480 | 169 | 35% |
| Lorain | Lorain Police Department | 770 | 531 | 69% |
| Lorain | North Ridgeville Police Dept | 69 | 56 | 81% |
| Lucas | Lucas County Sheriff | 299 | 296 | 99% |
| Lucas | Maumee Police Department | 79 | 53 | 67% |
| Lucas | Oregon Police Department | 98 | 73 | 74% |
| Lucas | Sylvania Police Department | 54 | 42 | 78% |
| Lucas | Toledo Police Department | 3,298 | 3,216 | 98% |
| Madison | London Police Department | 247 | 59 | 24% |
| Madison | Madison County Sheriff | 84 | 78 | 93% |
| Madison | West Jefferson Police Department | 66 | 22 | 33% |
| Mahoning | Austintown Police Department | 751 | 553 | 74% |
| Mahoning | Boardman Police Department | 170 | 111 | 65% |
| Marion | Marion County Sheriff | 63 | 58 | 92% |
| Medina | Brunswick Police Department | 127 | 44 | 35% |
| Medina | Medina Police Department | 235 | 51 | 22% |
| Medina | Wadsworth Police Department | 94 | 50 | 53% |
| Meigs | Meigs County Sheriff | 146 | 62 | 42% |
| Mercer | Celina Police Department | 149 | 52 | 35% |
| Miami | Miami County Sheriff | 190 | 55 | 29% |
| Miami | Piqua Police Department | 425 | 89 | 21% |
| Miami | Troy Police Department | 72 | 69 | 96% |
| Monroe | Monroe County Sheriff | 92 | 52 | 57% |
| Montgomery | Montgomery County Sheriff | 454 | 430 | 95% |
| Montgomery | Trotwood Police Department | 303 | 271 | 89% |
| Montgomery | Vandalia Police Department | 56 | 52 | 93% |
| Montgomery | West Carrollton Police Department | 123 | 70 | 57% |
| Morgan | Morgan County Sheriff | 138 | 76 | 55% |
| Morrow | Cardington Police Department | 56 | 12 | 21% |
| Morrow | Morrow County Sheriff | 74 | 45 | 61% |
| Muskingum | Muskingum County Sheriff | 391 | 143 | 37% |
| Ottawa | Ottawa County Sheriff | 85 | 64 | 75% |
| Ottawa | Port Clinton Police Department | 73 | 34 | 47% |
| Perry | New Lexington Police Department | 54 | 33 | 61% |
| Perry | Perry County Sheriff | 110 | 86 | 78% |
| Pike | Pike County Sheriff | 248 | 183 | 74% |
| Pike | Piketon Police Department | 66 | 22 | 33% |
| Portage | Aurora Police Department | 50 | 19 | 38% |
| Portage | Brimfield Twp. Police Department | 90 | 13 | 14% |
| Portage | Kent Police Department | 89 | 74 | 83% |
| Portage | Portage County Sheriff | 756 | 224 | 30% |
| Portage | Ravenna Police Department | 68 | 67 | 99% |
| Preble | Eaton Police Department | 203 | 55 | 27% |
| Preble | Preble County Sheriff | 241 | 73 | 30% |

Appendix C continued

| | | | | |
|--------------|---------------------------------|---------------|---------------|------------|
| Richland | Lexington Police Department | 61 | 15 | 25% |
| Richland | Ontario Police Department | 82 | 14 | 17% |
| Richland | Richland County Sheriff | 256 | 94 | 37% |
| Richland | Shelby Police Department | 65 | 32 | 49% |
| Sandusky | Fremont Police Department | 349 | 110 | 32% |
| Scioto | New Boston Police Department | 175 | 10 | 6% |
| Scioto | Portsmouth Police Department | 136 | 114 | 84% |
| Seneca | Fostoria Police Department | 62 | 59 | 95% |
| Shelby | Sidney Police Department | 185 | 77 | 42% |
| Stark | Alliance Police Department | 209 | 118 | 56% |
| Stark | Canton Police Department | 728 | 346 | 48% |
| Stark | Jackson Twp. Police Department | 127 | 87 | 69% |
| Stark | Perry Twp. Police Department | 124 | 56 | 45% |
| Stark | Stark County Sheriff | 1,226 | 481 | 39% |
| Summit | Akron Police Department | 3,067 | 1,156 | 38% |
| Summit | Barberton Police Department | 455 | 124 | 27% |
| Summit | Franklin Twp. Police Department | 83 | 49 | 59% |
| Summit | Lakemore Police Department | 61 | 6 | 10% |
| Summit | Norton Police Department | 84 | 23 | 27% |
| Summit | Springfield Twp. Police Dept | 217 | 68 | 31% |
| Summit | Stow Police Department | 102 | 43 | 42% |
| Summit | Summit County Sheriff | 281 | 223 | 79% |
| Trumbull | Brookfield Twp. Police Dept | 58 | 35 | 60% |
| Trumbull | Howland Twp. Police Department | 157 | 67 | 43% |
| Trumbull | Hubbard City Police Department | 95 | 10 | 11% |
| Trumbull | Liberty Twp. Police Department | 66 | 25 | 38% |
| Trumbull | Niles Police Department | 138 | 128 | 93% |
| Trumbull | Trumbull County Sheriff | 94 | 66 | 70% |
| Trumbull | Warren Police Department | 477 | 444 | 93% |
| Tuscarawas | Dover Police Department | 69 | 55 | 80% |
| Tuscarawas | New Philadelphia Police Dept | 414 | 104 | 25% |
| Union | Marysville Police Department | 75 | 47 | 63% |
| Union | Union County Sheriff | 66 | 33 | 50% |
| Warren | Lebanon Police Department | 99 | 90 | 91% |
| Warren | Warren County Sheriff | 177 | 145 | 82% |
| Washington | Marietta Police Department | 54 | 54 | 100% |
| Wayne | Orrville Police Department | 73 | 23 | 32% |
| Wayne | Wayne County Sheriff | 443 | 62 | 14% |
| Wayne | Wooster Police Department | 279 | 170 | 61% |
| Williams | Montpelier Police Department | 90 | 28 | 31% |
| Wood | Bowling Green Police Department | 81 | 65 | 80% |
| Wood | Perrysburg Twp. Police Dept | 112 | 33 | 29% |
| Wood | Wood County Sheriff | 258 | 80 | 31% |
| TOTAL | | 57,448 | 27,296 | 48% |

Source: Ohio Bureau of Criminal Identification and Investigation. Domestic violence incidents by agency and county, 2007. Columbus, OH: Ohio Attorney General; 2008. Available: <http://www.ag.state.oh.us/victim/pubs/07dvp/07DVI.pdf>

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