

ALASKA LEGISLATURE COMMITTEE FILES

2007-2008

SHES

125

79. During the past 7 days, how many glasses of milk did you drink? (Include the milk you drank in a glass or cup, from a carton, or with cereal. Count the half pint of milk served at school as equal to one glass.)
- (A) I did not drink milk during the past 7 days
  - (B) 1 to 3 glasses during the past 7 days
  - (C) 4 to 6 glasses during the past 7 days
  - (D) 1 glass per day
  - (E) 2 glasses per day
  - (F) 3 glasses per day
  - (G) 4 or more glasses per day

The next 5 questions ask about physical activity.

80. During the past 7 days, on how many days were you physically active for a total of at least 60 minutes per day? (Add up all the time you spend in any kind of physical activity that increases your heart rate and makes you breathe hard some of the time.)
- (A) 0 days
  - (B) 1 day
  - (C) 2 days
  - (D) 3 days
  - (E) 4 days
  - (F) 5 days
  - (G) 6 days
  - (H) 7 days
81. On an average school day, how many hours do you watch TV?
- (A) I do not watch TV on an average school day
  - (B) Less than 1 hour per day
  - (C) 1 hour per day
  - (D) 2 hours per day
  - (E) 3 hours per day
  - (F) 4 hours per day
  - (G) 5 or more hours per day

82. On an average school day, how many hours do you play video or computer games or use a computer for something that is not school work? (Include activities such as Nintendo, Game Boy, PlayStation, Xbox, computer games, and the Internet.)
- (A) I do not play video or computer games or use a computer for something that is not school work
  - (B) Less than 1 hour per day
  - (C) 1 hour per day
  - (D) 2 hours per day
  - (E) 3 hours per day
  - (F) 4 hours per day
  - (G) 5 or more hours per day
83. In an average week when you are in school, on how many days do you go to physical education (PE) classes?
- (A) 0 days
  - (B) 1 day
  - (C) 2 days
  - (D) 3 days
  - (E) 4 days
  - (F) 5 days
84. During the past 12 months, on how many sports teams did you play? (Include any teams run by your school or community groups.)
- (A) 0 teams
  - (B) 1 team
  - (C) 2 teams
  - (D) 3 or more teams

The next 3 questions ask about other health-related topics.

85. Have you ever been taught about AIDS or HIV infection in school?
- (A) Yes
  - (B) No
  - (C) Not sure
86. Has a doctor or nurse ever told you that you have asthma?
- (A) Yes
  - (B) No
  - (C) Not sure

87. Do you still have asthma?
- A I have never had asthma
  - B Yes
  - C No
  - D Not sure

**This is the end of the survey.  
Thank you very much for your help.**

RECEIVED  
APR 12 2007

**George W. Brown, MD**  
**Community Pediatrician**  
1640 Second St. Douglas, AK 99824 907 364 2726 [gwbrown76@yahoo.com](mailto:gwbrown76@yahoo.com)

Representative Peggy Wilson  
Alaska State Capitol Room 403  
Juneau, AK 99801

April 11, 2007

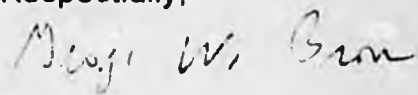
Dear Representative Wilson:

Thank you for the opportunity to speak on behalf of HB 207 yesterday. Since returning to Juneau after 1 & 1/2 years medical work in Kenya, I sense a fresh wind is blowing for the future of Alaska. The discussion about HB 207 is an example. I know you and your legislative colleagues must look hard at state government costs. It is also obvious that all the requests and worthwhile ideas thrown at you cannot be supported. Making and sticking with priorities is hard work. The study your HESS committee did last year is an example.

One of the most important priorities for Alaska's future is her children. I am most grateful SB 4 and CS for HB 198 have addressed Denali Kid Care (DKC). Yet for children, it is necessary to promote further improvements for child health care access. SB 87, as well as HB140, aims to do this. Their ultimate goal is extending DKC to 200% of the federal poverty level for all and to 300% for families willing and able to provide a co-pay. Such increase in access to child health care will cost us state dollars for many years. But, as Dr. Monica Gross said in her testimony for HB 140, the process of getting many more children into regular medical care (we call it their "medical homes") means work on prevention and on-going health education for parents and children. It is a pleasure to see hard working families bring in their children for regular well child and adolescent care to receive these preventive and education services. Public health and child health economists have calculated the cost savings from such regular care which decreases emergency room and hospital use. This gives back \$4.50 to DKC for every \$1 spent.

Please make HB 140 a priority for consideration through the necessary committee process so it, or a similar CS, will go for a floor vote this session. As citizens continue to see the legislative and administration work of consensus and cooperation this year, the "answer" truly seems to be "blowing in the wind".

Respectfully,



cc: House and Senate Finance and Rules members



American Heart Association | American Stroke Association

*Learn and Live.*

**Pacific/Mountain Affiliate**  
3700 Woodland Drive, Suite 700  
Anchorage, AK 99517-2555  
907.865.5303 (phone)  
888.276.0858 (toll-free)  
907.865.5310 (fax)  
americanheart.org

April 11, 2007

Representative Peggy Wilson  
State Capitol, Room 403  
Juneau, AK 99801-1182

Dear Representative Wilson:

The American Heart Association is writing to you in support of HB 207, a bill that would change the requirements of parental consent for students to participate in anonymous questionnaires and surveys. Currently, parents must actively consent in order for their child to participate in anonymous surveys about student health and behavior. If HB 207 were to become law, parents and students could still opt out of participation, but if they declined to opt out, their consent to participate would be implied.

The American Heart Association is a national voluntary health agency whose mission is to reduce disability and death from cardiovascular diseases and stroke. The American Heart Association supports HB 207 because it would make it feasible to collect weighted, statistically significant data to accomplish important public health tasks like tracking childhood physical activity levels, and ensuring that tobacco prevention programs directed at our youth are on-target and actually effective in reducing tobacco use.

By allowing the state to track the health of our children, HB 207 will result in better, more effective programs directed at Alaska's children, and ultimately reduce preventable threats to cardiovascular health like tobacco use and chronic obesity.

Thank you,

Suzanne Meunier  
Director of Advocacy

**From:** Chris Chandler & Randy Magen [mailto:chrisrandy@gci.net]  
**Sent:** Thursday, April 12, 2007 1:10 PM  
**To:** Rep. Peggy Wilson  
**Subject:** HB 207

Dear Representative Peggy Wilson,  
I support your efforts with HB 207:

HB 207, an act relating to questionnaires and surveys administered in schools, sponsored by Representative Peggy Wilson, changes the permission required for students to participate from active to passive. That means a student participates unless a parent/guardian says "no". As you may recall, the permission requirement was changed to active in the late 1990's with the result that survey data collected was insufficient or not valid for use. The Youth Risk Behavioral Survey (YRBS) suffered the most.

As a Family Nurse Practitioner Graduate Student and am currently completing a thesis on adolescent and young adult males and sexual risk taking behaviors. It has been extremely difficult, if not impossible to find appropriate outlets to gather information for my survey. I support your effort in bring this bill into action.  
Christine Chandler, RN, BSN, MSN/FNP graduate student

From: Redwood, Diana [mailto:dredwood@anmc.org]  
Sent: Thursday, April 12, 2007 9:55 AM  
To: Rep. Peggy Wilson  
Cc: Rep. Bob Roses; Rep. Anna Fairclough; Rep. Mark Neuman; Rep. Paul Seaton; Rep. Sharon Cissna; Rep. Berta Gardner  
Subject: \*\*\*\*\*SPAM\*\*\*\*\* FW: HB 207, House H&SS Thursday at 3PM, change permission for surveys

Good morning,

I just wanted to take a moment to voice my support for HB 207, an act relating to questionnaires and surveys administered in schools, changing the permission required for students to participate from active to passive. Information from surveys such as the YRBS are vital to preventing and reducing health risks.

I am in full support of this bill, and hope that it passes into law. Thank you for the opportunity to write.

Sincerely,  
Diana Redwood

Diana Redwood, MS, MPH  
Nutrition Research Specialist  
Office of Alaska Native Health Research  
Alaska Native Tribal Health Consortium  
4315 Diplomacy Dr  
Anchorage AK 99508  
Phone: 907.729.3959  
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# YRBSS

Youth Risk Behavior Surveillance System

## What is the Youth Risk Behavior Surveillance System (YRBSS)?

The YRBSS was developed in 1990 to monitor priority health risk behaviors that contribute markedly to the leading causes of death, disability, and social problems among youth and adults in the United States. These behaviors, often established during childhood and early adolescence, include

- Tobacco use.
- Unhealthy dietary behaviors.
- Inadequate physical activity.
- Alcohol and other drug use.
- Sexual behaviors that contribute to unintended pregnancy and sexually transmitted diseases, including HIV infection.
- Behaviors that contribute to unintentional injuries and violence.

## What are the purposes of the YRBSS?

The YRBSS was designed to

- Determine the prevalence of health risk behaviors.
- Assess whether health risk behaviors increase, decrease, or stay the same over time.
- Examine the co-occurrence of health risk behaviors.
- Provide comparable national, state, and local data.
- Provide comparable data among subpopulations of youth.
- Monitor progress toward achieving the Healthy People 2010 objectives and other program indicators.

## What are the components of the YRBSS?

The YRBSS includes national, state, and local school-based surveys of representative samples of 9<sup>th</sup> through 12<sup>th</sup> grade students. These surveys are conducted every two years, usually during the spring semester. The national survey, conducted by CDC, provides data representative of high school students in public and private schools in the United States. The state and local surveys, conducted by departments of health and education, provide data representative of public high school students in each state or local school district.

The YRBSS also includes additional national surveys conducted by CDC:

- The Youth Risk Behavior Survey, conducted in 1992 as a follow back to the National Health Interview Survey among nearly 11,000 persons aged 12-21 years.
- The National College Health Risk Behavior Survey, conducted in 1995 among a representative sample of about 5,000 undergraduate students.
- The National Alternative High School Youth Risk Behavior Survey, conducted in 1998 among a representative sample of almost 9,000 students in alternative high schools.
- A series of methodological studies conducted in 1992, 2000, 2002, and 2004 to improve the quality and interpretation of the YRBSS data.

Where can I find more information? Visit <http://www.cdc.gov/yrbss> or call 1-800-CDC-INFO (624-6343).



DEPARTMENT OF HEALTH AND HUMAN SERVICES  
CENTERS FOR DISEASE CONTROL AND PREVENTION





# ESEA Information Update

Wisconsin Department of Public Instruction/Elizabeth Burmaster, State Superintendent, P.O. Box 7841/Madison, WI 53707-7841

Bulletin No. 02.14

Created: April 11, 2003  
Updated: August 4, 2003

## Topic: Student Surveys

In January 2002, the Protection of Pupil Rights Amendment (PPRA) was amended by the Elementary and Secondary Education Act of 2001 (also known as the No Child Left Behind Act). The amendment added an additional category (religious practices, affiliations, or beliefs of the student or student's parent) to the existing categories that impact student surveys and made minor changes to the existing seven categories. If a survey contains one or more of the identified categories, schools and contractors must protect student privacy and give parents the right to inspect the survey. The eight categories are:

1. Political affiliations or beliefs of the student or the student's parent
2. Mental and psychological problems of the student or the student's family;
3. Sex behavior or attitudes
4. Illegal, anti-social, self-incriminating, or demeaning behavior
5. Critical appraisals of other individuals with whom respondents have close family relationships
6. Legally recognized privileged or analogous relationships, such as those of lawyers, physicians, and ministers
7. Religious practices, affiliations, or beliefs of the student or student's parent
8. Income (other than that required by law to determine eligibility for participation in a program or for receiving financial assistance under such program).

A local educational agency (LEA) that receives funds under any U.S. Department of Education program is required to develop and adopt policies, in consultation with parents, concerning student privacy. The policies relating to surveying of students must address:

- The right of parents to inspect, upon request, a survey created by a third party before the survey is administered or distributed by a school to students, and procedures for granting a parent request to access the survey within a reasonable period of time after the request is received
- Arrangements to protect student privacy in the event of the administration of a survey to students, including the right of parents to inspect, upon request, the survey if the survey contains one or more of the eight categories of information noted above.

However, an LEA is not required to develop and adopt new policies if it has in place -- and did so on the date of enactment of the Elementary and Secondary Education Act of 2001 -- policies covering the requirements set forth in the law.

LEAs must directly notify parents of these policies, and at a minimum, they shall provide the notice at least annually, at the beginning of the school year. Also, an LEA shall notify parents

Copies of this and other ESEA Information Updates can be found at [www.dpi.state.wi.us/dpi/esea](http://www.dpi.state.wi.us/dpi/esea)

within a reasonable period of time if any substantive change is made to the policies. In the notification, the LEA shall:

- Provide an opportunity for parents to opt out of (remove their child from) participation in the administration of any survey containing one or more of the eight categories of information noted above, and
- Provide parents with the specific or approximate dates during the school year when the surveys are scheduled.

Confusion often exists about prior written parental consent, also known as "active" parental permission, and if it is required before a student may participate in a survey that asks for personal information described in PPRA (e.g., sexual behavior, illegal or antisocial behavior, and mental or psychological problems). Examples of common surveys used in Wisconsin that collect personal information are the Youth Risk Behavior Survey (YRBS) and the Search Institute Profiles of Student Life: Attitudes and Behaviors. Currently, PPRA only requires active parental permission before minor students are required to participate in any survey, funded in whole or in part by the U.S. Department of Education that reveals information concerning one or more of the eight categories noted above. Most student surveys administered in Wisconsin, such as the YRBS, are voluntary, and if administered properly (students are instructed on the voluntary nature), active parental permission is not required and "passive" parental permission is allowable. "Passive" means the parent is provided an opportunity to opt out of (remove the child from) participation. The district may assume parental consent if they hear no timely objection from the parent.

Specific questions related to this bulletin should be directed to:

Doug White, Director  
Student Services/Prevention and Wellness Team  
(608) 266-5198  
douglas.white@dpi.state.wi.us

#### References:

- 1 U.S. Department of Education, Family Policy Compliance Office, (2002) Hot topics: Recent changes affecting FERPA & PPRA ([http://www.ed.gov/offices/OM/fpco/hot\\_topics/ht\\_10-28-02.html](http://www.ed.gov/offices/OM/fpco/hot_topics/ht_10-28-02.html)) Washington, D.C.
- 2 U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Adolescent School Health, (2002) Parental Permission: Conducting a successful Youth Risk Behavior Survey (YRBS) with Active Parental Permission. Atlanta, GA.



May 1, 2007

The Honorable Jay Ramras, Chair  
House Judiciary Committee  
Alaska State Capitol, Room 118  
Juneau, Alaska 99801-1182

RE: HB 207 (Wilson)--Support

Dear Chair Ramras:

On behalf of the members of AARP in Alaska, we strongly encourage you and your colleagues on the House Judiciary Committee to support HB 207, authored by Representative Peggy Wilson.

AARP is the world's largest organization of grandparents. There are over 89,000 AARP members in Alaska. Most of our members benefited from participating in America's public education program. We are strong supporters of public education. We understand that, to be successful, educators must be able to secure information that aids in their decision-making. This includes student surveys.

Currently parents must opt-in to have their students participate in surveys. HB 207 would return us to our previous system in which a parent would have to opt-out if they did not wish their child to participate in a survey.

Knowing how difficult the current situation has been for successful surveys, AARP supports HB 207, recognizing that surveys of students will only be worthwhile if sufficient numbers participate. The grandparents of AARP support public education and successful survey research for our Alaska students.

We urge an "AYE" vote on HB 207.

Should you have any questions about our position, please feel free to contact me (586-3637) or Patrick Luby, AARP Advocacy Director (907-762-3314).

Thank you for your consideration.

Sincerely,

*Marie Darlin*

Marie Darlin, Coordinator  
AARP Capital City Task Force  
415 Willoughby Avenue, Apt. 506  
Juneau, AK 99801  
586-3637 (voice)  
463-3580 (fax)

CC: Vice-Chair Nancy Dahlstrom  
Representative John Coghill  
Representative Ralph Samuels  
Representative Max Gruenberg  
Representative Lindsey Holmes  
Representative Bob Lynn  
Representative Peggy Wilson

May 1, 2007

Representative Peggy Wilson  
P.O. Box 109  
Wrangell, AK 99929

RE: HB207—Student Questionnaires and Surveys

Dear Rep. Wilson:

Please accept this letter from the Mat-Su Substance Abuse Prevention Coalition in support of HB 207, an Act relating to questionnaires and surveys administered in the public schools.

A project of United Way of Mat-Su and its diverse community partners, the Mat-Su Substance Abuse Prevention Coalition is a collaborative effort involving the following organizations: Alaska Family Services, Inc., Alaska State Troopers—Palmer Post, Daybreak Inc., the Matanuska-Susitna Borough, the Matanuska-Susitna Borough School District, Mat-Su Health Foundation, Mat-Su Health Services Inc., Mat-Su Regional Medical Center, Nugen's Ranch, Palmer Police Department, State of Alaska, Division of Behavioral Health, Wasilla Police Department, United Way of Mat-Su, Valley Christian Conference and Valley Pastors' Prayer Network.

Through the Mat-Su Substance Abuse Prevention Coalition, the above community agencies and their representatives have committed to develop and implement a comprehensive multi-faceted plan leading to measurable per capita reductions in one or more substance abuse problems. The recently signed Memorandum of Understanding among these organizations demonstrates a coordinated effort to maximize community resources and provide a more integrated approach to reduce substance abuse among youth and, over time, among adults by addressing the factors in our community that increase the risk of substance abuse and promoting the factors that minimize the risk of substance abuse.

To this end, the above agencies have agreed to participate at the agency level in the collection and assessment of data and to share that data with coalition members in order to define the problems, resources and readiness within the Matanuska-Susitna Borough to address needs and gaps with regard to the substance abuse issue. Our coalition is committed to developing a comprehensive, strategic and data-driven plan that includes policies, programs and practices to address problems identified through the assessment process.

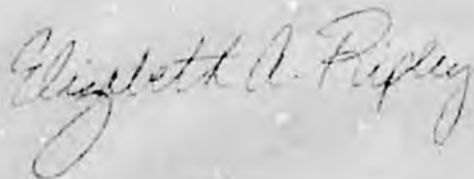
The Alaska Youth Risk Behavior Survey is an important tool in understanding how many youth are engaged in substance abuse, what substances they are using, at what age they started and how they obtained the substance. Due to current State statute AS 14.03.110, the response rate of the 2005 YRBS was so low that the results could not be tallied or released to Mat-Su Borough school district officials. Our coalition could not examine the data or adjust our goals and objectives to implement evidence-based prevention programs, policies and practices in our community. We can't combat what we don't thoroughly understand or know.

The language in HB 207 allows parents to opt out of the survey for their children, thereby providing those who object a fair and equitable way to prevent their children from participating in the survey. The

**Mat-Su Substance Abuse Prevention Coalition acknowledges that this opportunity to object is necessary and supports this measure. However, most of the research indicates that parental failures to provide a written permission are driven by apathy, oversight or student error, not by refusal. The current statute results in extremely low response by parents, an inadequate response rate for the survey, and therefore a statistically significant margin of error.**

**If the Mat-Su Substance Abuse Prevention Coalition succeeds in reducing substance abuse by youth in our community, everyone wins: every parent, child, school, business, neighborhood, and provider. To build this healthier community, we need access to valid and reliable anonymous data about our youth. We fully endorse HB 207 to this end. Many thanks for your efforts!**

Sincerely,

A handwritten signature in cursive script that reads "Elizabeth A. Ripley". The signature is written in dark ink and is positioned above the typed name.

**Elizabeth Ripley  
Chair, Mat-Su Substance Abuse Prevention Coalition**



**ALPHA**

# ALASKA PUBLIC HEALTH ASSOCIATION

Committed To Advancing Alaska's Public Health Since 1978

February 8, 2008

The Honorable Peggy Wilson, Chair  
House Health, Education and Social Services Committee  
Alaska State Capitol, Room 403  
Juneau, AK 99801-1182

RE: HB 207

Dear Representative Wilson:

The Alaska Public Health Association strongly supports HB 207. Creating effective programs to improve the health status of Alaska's children requires a means to gather accurate and meaningful data. School districts are having difficulty meeting the required 60% return rate for Youth Risk Behavior Survey data. HB 207, while retaining the parental notifications in current law that protect parents' right of involvement, returns Alaska to the previous system in which a parent may opt-out if they did not wish their child to participate in a survey.

ALPHA urges passage of HB 207.

Please feel free to contact me.

Sincerely,

Debra Caldera, RN, MPH  
Board President

## GUIDELINES FOR PASSIVE CONSENT

Based on recent change to state law,<sup>1</sup> CDE has determined that under certain circumstances LEAs conducting the California Healthy Kids Survey (CHKS) have the option of using passive parental consent, rather than active (written) consent as previously required.<sup>2</sup> Under passive-consent procedures, parents/guardians inform the school only if they *don't want* their child to participate in a study (opt out).<sup>3</sup> To adopt passive consent, the following conditions must be met:

- The survey is limited to grades 7 through 12. Passive consent cannot be used below grade 7.<sup>4</sup>
- It is anonymous, confidential, and voluntary. Active consent must still be used if respondent data are linked to a respondent's name in any form or manner, such as in longitudinal tracked surveys.
- The school board formally adopts, in consultation with parents, a written passive consent policy for the administration of the CHKS (and any other survey or test) consistent with California Education Code sections 51513 and 51938(b) and the federal Protection of Pupil Rights Act (PPRA), 20 USC 1232h.
- Parents/guardians are notified in writing at the beginning of the school year about the survey and when it is to be administered, and given a reasonable opportunity to review the survey and to decline their child's participation (opt out).
- Parents/guardians are notified of any substantive changes in survey policies, dates, or content that occur after the initial notification.
- The parental notice contains all the required elements specified in the CHKS Guidebook for protection of human subjects and in the federal Protection of Pupil Rights Act.
- Questions are not added to the survey that elicit reports of parental attitudes or behaviors or any other category that requires active consent under Ed Code 51513 but not exempted under Ed Code 51938.

The following guidelines are designed to help you determine whether you should switch from written to passive consent and the steps you should take if you decide to make the change.

### Benefits of Passive Consent

- Passive consent involves less cost and labor, particularly for the classroom teacher.
- If you have *not* been successful in meeting your target sample using written consent, passive consent will likely increase your response rates.
- Research also suggests that passive consent will result in a more representative sample, as many hard-to-reach subgroups, including groups at high-risk of substance use and other problem behaviors, are underrepresented in written consent surveys.<sup>5</sup>

<sup>1</sup> See Education Code 51938(b), which stipulates: "Notwithstanding Section 51513, anonymous, voluntary, and confidential research and evaluation tools to measure pupils' health behaviors and risks, including tests, questionnaires, and surveys containing age appropriate questions about the pupil's attitudes concerning or practices relating to sex may be administered to any pupil in grades 7 to 12, inclusive, if the parent or guardian is notified in writing that this test, questionnaire, or survey is to be administered and the pupil's parent or guardian is given the opportunity to review the test, questionnaire, or survey and to request in writing that his or her child not participate."

<sup>2</sup> Written consent requirements and strategies are detailed in the CHKS Guidebook, available online at [www.wested.or/hks](http://www.wested.or/hks)

<sup>3</sup> As described in the CHKS Guidebook, under active-consent procedures parents must confirm in writing that they consent or not, usually by signing and returning a form. If a form is not returned, it must be assumed that parental permission is not granted.

<sup>4</sup> Education Code 51938(b) authorizes passive consent only for grades 7 through 12 (see note 1)

## Considerations for Changing from Active to Passive Consent

- **Written consent provides extra protection** against surveying a student whose parents did not receive notification or did not approve of participation but failed to inform the school. This extra protection may be important if risk behavior surveys are a sensitive issue in your community.
- If passive consent reduces the burden on the classroom teacher, **schools must take special precautions** to demonstrate that they made every reasonable effort possible to inform parents about the survey (and any subsequent changes) and to give them opportunities to opt out.
- If your sample changes (e.g., becomes more representative), it will **complicate interpretation of current trends**. Did student behavior change or the sample? Most research suggests reported AOD use will increase. WestEd will provide talking points to address this issue.
- **If you have been meeting your target response rates using written consent**, you might want to continue using it to avoid the issues listed above, especially if your district will still need to use written consent with 5<sup>th</sup> grade.

## Recommendations for Passive Consent Implementation

Survey procedures must ensure that parents receive the consent materials, pay attention to them, and have sufficient time and opportunities to refuse participation. To assure PPRA compliance and reduce the risk of inadvertently surveying a child without parent permission, we recommend the following:

- **Stress that survey participation is voluntary in all communications.** This is a key requirement for the use of passive consent procedures in the PPRA. Notify students in writing and verbally (before survey administration) that they have the right to decline participation and to not answer any question that makes them uncomfortable. Make sure nothing is done that might cause a student to feel uncomfortable if he doesn't want to participate.
- **Send all consent information and forms via a method that guarantees receipt**, such as by mail. Preferably, use a method that documents receipt. For example, the information can be put into a parent handbook that the parent signs for.
- **Use multiple contact techniques.** Do everything possible to insure parents receive notification.
- **Make sure all materials are language appropriate** for parents with limited English reading ability.<sup>6</sup>
- **Make disapproval notification convenient.** Again, use multiple venues: a written form that can be turned into a teacher, a phone number to call, or email address. Each channel should reach a single person or office, identified in district policies, responsible for monitoring consent. This will help avoid parent refusals from slipping through the cracks.
- **Document** all your efforts to notify parents.

***For more information about consent procedures,  
call your regional CHKS advisor at 888.841.7536.***

<sup>5</sup> The application of active-consent procedures to anonymous, voluntary surveys with rigorous data safeguards and minimal risks to students—such as the CHKS—has been criticized for jeopardizing access to essential information by imposing overly rigid, stringent, and costly consent procedures.

<sup>6</sup> CDE policy is that, in addition to English, notification must also be in each primary language other than English where 15 percent of the students speak that primary language.

## 1998 Alaska Statute

Sec. 14.03.110. Questionnaires and surveys administered in public schools.

A school district, principal or other person in charge of a public school, or teacher in a public school may not administer or permit to be administered in a school a questionnaire or survey, whether anonymous or not, that inquires into private family affairs of the student not a matter of public record or subject to public observation unless written permission is obtained from the student's parent or guardian.

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## 1999 Alaska Statute

Sec. 14.03.110. Questionnaires and surveys administered in public schools.

(a) A school district, principal or other person in charge of a public school, or teacher in a public school may not administer or permit to be administered in a school a questionnaire or survey, whether anonymous or not, that inquires into personal or private family affairs of the student not a matter of public record or subject to public observation unless written permission is obtained from the student's parent or legal guardian.

(b) For an anonymous questionnaire or survey, written permission required under (a) of this section may be obtained annually and is valid until the commencement of the subsequent school year or until the parent or legal guardian who gave permission submits a written withdrawal of permission to the school principal. The school shall provide each student's parent or legal guardian at least two weeks' notice before administering a questionnaire or survey described under this subsection.

(c) If a school administers to a student a questionnaire or survey that is not anonymous, the school shall obtain the written permission required under (a) of this section from the student's parent or legal guardian at least two weeks before the questionnaire or survey is administered.

(d) The school shall give a student's parent or guardian an opportunity to review the questionnaire or survey described under (b) or (c) of this section and shall give the parent or guardian written notice regarding

- (1) how the questionnaire or survey will be administered to the student;
- (2) how the results of the survey or questionnaire will be used; and
- (3) who will have access to the questionnaire or survey.

(e) A student may refuse to participate in a questionnaire or survey administered in a public school. A student's parent or legal guardian may refuse to allow the student to participate in a specified questionnaire or survey.

**HB**

**215**

# SENATE COMMITTEE REPORT

DATE: 4/27/07

FURTHER: Finance

DATE TURNED  
IN TO OFFICE: 5/2/07

Health, Education and Social Services Committee considered CS FOR HOUSE BILL NO. 215(HES)

HB 215 TASK FORCE RE: COUNCIL ON DOM. VIOL.

"An Act relating to the establishment of a task force to review the Council on Domestic Violence and Sexual Assault."

and recommends:

- be replaced with  SCS or  CS \_\_\_\_\_ (\_\_\_\_\_)
- adopt previous  SCS or  CS \_\_\_\_\_ (\_\_\_\_\_)
- attached amendment(s)
- adopt \_\_\_\_\_ Letter of Intent
- further referral to \_\_\_\_\_ Committee

<b>SENATE BILL:</b>	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	New Title
<hr/>	
<b>HOUSE BILL:</b>	
<input type="checkbox"/>	Same Title
<input type="checkbox"/>	Technical Title Change
<input type="checkbox"/>	New Title w/ SCR # _____

**NEW FISCAL NOTE(S):**

Department	Date	Fiscal	Incl.	Zero	FN#

**PREVIOUS FISCAL NOTE(S):**

Department	Date	Fiscal	Incl.	Zero	FN#
HSS	4/16			✓	1
LAW	4/9			✓	2
LEG	4/16			✓	5
H.FIN/COR	4/16	✓			6
DPS	4/17	✓			7

APPROPRIATION - no fiscal note

SIGNATURES AND RECOMMENDATIONS	PRINTED LAST NAME	Do Pass	DO NOT Pass	NO REC	AMEND
	Elba			✓	
	Thomas	✓			
	Coody	✓			
	Dyson	✓			
CHAIR:	DAVIS	✓			

# FISCAL NOTE

**STATE OF ALASKA**  
**2007 LEGISLATIVE SESSION**

Fiscal Note Number: 1  
 Bill Version: CSHB 215(HES)  
 ( H ) Publish Date: 4/11/07  
 Dept. Affected: Health & Social Services  
 RDU Departmental Support Services  
 Component Commissioner's Office

Revision Date/Time (Note if correction):

Title TASK FORCE RE: COUNCIL ON DOM. VIOLENCE

Sponsor FAIRCLOUGH

Requester HOUSE (HES)

Component No. 317

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
<b>TOTAL OPERATING</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES (0)</b>						
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1037 GF/Mental Health						
Other(Specify Type-do not abbreviate)						
Other(Specify Type-do not abbreviate)						
<b>TOTAL</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2007) cost: \_\_\_\_\_

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time						
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

One employee of the Department of Health and Social Services, appointed by the Governor, would serve on the Task Force. Costs to the department associated with participation in the Task Force are assumed to be limited to travel and per diem for the appointee. These costs will be absorbed by the department.

Prepared by: Sherry Hill, Special Assistant  
 Division: Commissioner's Office  
 Approved by: Karleen Jackson, Commissioner  
 Agency: Department of Health and Social Services

Phone 465-1618  
 Date/Time 04/10/2007  
 Date 04/10/2007

# FISCAL NOTE

**STATE OF ALASKA  
2007 LEGISLATIVE SESSION**

Fiscal Note Number: 2  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/11/07

Revision Date/Time (Note if correction): \_\_\_\_\_ Dept. Affected: Law  
 Title An Act relating to a task force re: council on RDU Criminal  
domestic violence and sexual assault Component Criminal Justice Litigation  
 Sponsor REPRESENTATIVE(s) FAIRCLOUGH  
 Requester HOUSE HES Component No. \_\_\_\_\_

**Expenditures/Revenues (Thousands of Dollars)**

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
<b>TOTAL OPERATING</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES ( )</b>						
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**FUND SOURCE (Thousands of Dollars)**

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
<b>TOTAL</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time						
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

This bill would create a task force to review the Council on Domestic Violence and Sexual Assault. The task force is to report on the council's relationship with state agencies, statutory responsibilities, makeup and geographic location, funding, and mission. This proposed legislation should not have a significant fiscal impact on the Department of Law.

Prepared by: Robert Meiners, Admin. Services Manager  
 Division: Administrative Services Division  
 Approved by: Robert Meiners for Tails Colberg, Attorney General  
 Agency: Department of Law

Phone 465-5427  
 Date/Time 4/9/07 3:18 PM  
 Date 4/9/2007

# FISCAL NOTE

**STATE OF ALASKA**  
**2007 LEGISLATIVE SESSION**

Fiscal Note Number: 3  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/11/07

Revision Date/Time (Note if correction): \_\_\_\_\_ Dept. Affected: Corrections  
 Title: An Act relating to the establishment of a task RDU: Administration & Operations  
force to review the Council on Domestic Violence and Sexual . . . Component: Office of the Commissioner  
 Sponsor: Representative Fairclough  
 Requester: House HESS Component No.: 694

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	*	*	*	*	*	*
Travel	*	*	*	*	*	*
Contractual	*	*	*	*	*	*
Supplies	*	*	*	*	*	*
Equipment	*	*	*	*	*	*
Land & Structures	*	*	*	*	*	*
Grants & Claims	*	*	*	*	*	*
Miscellaneous	*	*	*	*	*	*
<b>TOTAL OPERATING</b>	*	*	*	*	*	*

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES ( )</b>						
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts	*	*	*	*	*	*
1003 GF Match	*	*	*	*	*	*
1004 GF	*	*	*	*	*	*
1005 GF/Program Receipts	*	*	*	*	*	*
1037 GF/Mental Health	*	*	*	*	*	*
Other (Specify Type--Do not abbreviate)	*	*	*	*	*	*
<b>TOTAL</b>	*	*	*	*	*	*

Estimate of any current year (FY2007) cost: 0.0  
 Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time	*	*	*	*	*	*
Part-time	*	*	*	*	*	*
Temporary	*	*	*	*	*	*

**ANALYSIS:** (Attach a separate page if necessary)  
 The Department of Corrections anticipates a fiscal impact due to passage of this legislation. Additional information such as the location and length of task force meetings and what departments are responsible to pay for employees travel and per diem costs are needed before the fiscal impacts can be determined.

Prepared by: Sharleen Griffin, Director Phone (907) 465-3339  
 Division: Administrative Services Date/Time 4/10/07 9:00 AM  
 Approved by: Dwayne Peoples, Deputy Commissioner Date 4/10/2007  
 Agency: Department of Corrections

# FISCAL NOTE

**STATE OF ALASKA**  
**2007 LEGISLATIVE SESSION**

Fiscal Note Number: 4  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/11/07

Revision Date/Time (Note if correction): \_\_\_\_\_ Dept. Affected: Public Safety  
 Title: "An Act relating to the establishment of a task force  
to review the Council on Domestic Violence and Sexual Assault." RDU: CDVSA  
 Sponsor: Representative Fairclough Component: CDVSA  
 Requester: House Health, Education & Social Services Component No.: 521

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel						
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
<b>TOTAL OPERATING</b>	*****	0.0	0.0	0.0	0.0	0.0

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES ( )</b>						
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF						
1007 I/A Receipts						
1171 PFD Crim						
Other (Specify Type--Do not abbreviate)						
<b>TOTAL</b>	*****	0.0	0.0	0.0	0.0	0.0

Estimate of any current year (FY2007) cost: 0.0  
 Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time	0	0	0	0	0	0
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

Travel will be required for the CDVSA Executive Director and other members to attend task force meetings. The costs of the travel cannot be determined without knowing the number of meetings, locations, and duration of each. Therefore, our fiscal note is indeterminate at this time.

Prepared by: Chris Ashenbrenner, Interim Program Administrator Phone 465-5504  
 Division: Council on Domestic Violence and Sexual Assault Date/Time 4/09/07 10:00AM  
 Approved by: Commissioner Walt Monegan Date 4/9/2007  
 Agency: Department of Public Safety

# FISCAL NOTE

**STATE OF ALASKA  
2007 LEGISLATIVE SESSION**

Fiscal Note Number: 5  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/23/07

Revision Date/Time (Note if correction): \_\_\_\_\_ Dept. Affected: Legislature  
 Title "An Act relating to the establishment of a task force to review the Council on Domestic Violence and Sexual..." RDU Legislative Council  
 Sponsor "Representatives Fairclough, Stoltze, Meyer,....." Component Council and Subcommittees  
 Requester House Finance Committee Component No. 783

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services	0.0	0.0	0.0	0.0	0.0	0.0
Travel	0.0	0.0	0.0	0.0	0.0	0.0
Contractual	0.0	0.0	0.0	0.0	0.0	0.0
Supplies	0.0	0.0	0.0	0.0	0.0	0.0
Equipment	0.0	0.0	0.0	0.0	0.0	0.0
Land & Structures	0.0	0.0	0.0	0.0	0.0	0.0
Grants & Claims	0.0	0.0	0.0	0.0	0.0	0.0
Miscellaneous	0.0	0.0	0.0	0.0	0.0	0.0
<b>TOTAL OPERATING</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURES</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
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<b>CHANGE IN REVENUES ( )</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (Specify Type--Do not abbreviate)						
<b>TOTAL</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time	0	0	0	0	0	0
Part-time	0	0	0	0	0	0
Temporary	0	0	0	0	0	0

**ANALYSIS:** (Attach a separate page if necessary)

CSHB 215(HES) establishes a 15 member Task Force to Review the Council on Domestic Violence and Sexual Assault. The Task Force will submit a report of its findings and recommendations about the Council to the Legislature by March 1, 2008. The Task Force ends on April 16, 2008. For purposes of this fiscal note it is assumed an existing staff member of a Legislator appointed to the Task Force will staff the Task Force. The Task Force will hold at least four meetings around the State. Travel and per diem for the six Legislators appointed to the Task Force will be absorbed within existing budgets. Travel for the other members of the Task Force will be paid for by Executive Branch Departments. The Legislative Affairs Agency will absorb the cost for teleconferencing the meetings and the Legislative Printshop will print the report.

Prepared by: Karla Schofield, Deputy Director  
 Division: Legislative Affairs Agency  
 Approved by: Pamela Varni, Executive Director  
 Agency: Legislative Affairs Agency

Phone 465-6626  
 Date/Time 4/16/07 2:12 PM  
 Date 4/16/2007

# FISCAL NOTE

**STATE OF ALASKA**  
**2007 LEGISLATIVE SESSION**

Fiscal Note Number: 6  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/23/2007

Revision Date/Time (Note if correction): \_\_\_\_\_ Dept. Affected: Corrections  
 Title Task Force Re: Council on Dom. Violence RDU Administration & Operations  
 Component Office of the Commissioner  
 Sponsor Representative Fairclough  
 Requester \_\_\_\_\_ Component No. 694

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel	3.0					
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
<b>TOTAL OPERATING</b>	<b>3.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES ( )</b>						
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	3.0					
1005 GF/Program Receipts						
1037 GF/Mental Health						
Other (specify type)						
<b>TOTAL</b>	<b>3.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2007) cost: 0.0

Mark this box (X) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time						
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

The Department of Corrections will incur a small fiscal impact due to the passage of this legislation. A department employee will travel to three communities throughout the year to meet with the task force and the department is required to pay for per diem and travel expenses related to these meetings.

Since the task force is set to sunset on April 16, 2008, the department will only incur costs in FY 08.

Prepared by: House Finance Committee  
 Division \_\_\_\_\_  
 Approved by: Representative Mayer  
Representative Chenault

Phone 465-4945  
 Date/Time 04/16/07 2:03 P.M.  
 Date 4/16/2007

# FISCAL NOTE

**STATE OF ALASKA**  
**2007 LEGISLATIVE SESSION**

Fiscal Note Number: 7  
 Bill Version: CSHB 215(HES)  
 (H) Publish Date: 4/23/07

Revision Date/Time (CORRECTED): 4/17/2007 10:13  
 Title "An Act relating to the establishment of a task force  
to review the Council on Domestic Violence and Sexual Assault."  
 Sponsor Representative Fairclough  
 Requester House Finance

Dept. Affected: Public Safety  
 RDU CDVSA  
 Component CDVSA  
 Component No. 521

**Expenditures/Revenues** (Thousands of Dollars)

Note: Amounts do not include inflation unless otherwise noted below.

OPERATING EXPENDITURES	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Personal Services						
Travel	8.0					
Contractual						
Supplies						
Equipment						
Land & Structures						
Grants & Claims						
Miscellaneous						
<b>TOTAL OPERATING</b>	<b>8.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

<b>CAPITAL EXPENDITURES</b>						
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<b>CHANGE IN REVENUES ( )</b>						
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**FUND SOURCE** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	8.0					
1007 I/A Receipts						
1171 PFD Crim						
Other (Specify Type--Do not abbreviate)						
<b>TOTAL</b>	<b>8.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of any current year (FY2007) cost: 0.0

Mark this box ( ) if funding for this bill is included in the Governor's FY 2008 budget proposal:

**POSITIONS**

Full-time	0	0	0	0	0	0
Part-time						
Temporary						

**ANALYSIS:** (Attach a separate page if necessary)

Travel will be required for the CDVSA Executive Director, the Commissioner of Public Safety, two public members, and the Executive Director of ANDVSA to attend task force meetings. This fiscal note is an estimate of the travel costs for four meetings, one each in Anchorage, Juneau, Fairbanks, and a rural location.

Prepared by: Chris Ashenbrenner, Interim Program Administrator  
 Division: Council on Domestic Violence and Sexual Assault  
 Approved by: Commissioner Walt Monegan  
 Agency: Department of Public Safety

Phone 465-5504  
 Date/Time 4/17/07 10:13 AM  
 Date 4/17/2007



# Alaska State Legislature

## Representative Anna Fairclough — House District 17

### HB 215 TASK FORCE RE: CDVSA

#### Sponsor Statement Representative Anna Fairclough

Last month the Legislature voted to reauthorize the Council on Domestic Violence and Sexual Assault (CDVSA). Alaska continues to rank among the highest in the nation for rates of domestic violence and sexual assault and the Council has a vital role in prevention, education and response to those incidents in our state.

During the Reauthorization process, a number of questions arose on a variety of issues related to the Council, including its placement in the Department of Public Safety, the Council's mission, and concerns brought forth in Legislative Audit Reports released in 2006 and 2002. The work done by CDVSA and its role in the battle to end sexual assault and domestic violence is essential, but the Legislature and the public deserve to have their questions addressed.

The Task Force would bring members of the legislature and administration together with members of the public to have thoughtful, comprehensive discussions about the Council and the issues at hand.

This Task Force would prepare and present a report to the full legislature, in an effort to bring increased awareness of the Council's role as well as answer on-going questions that members have with its extension.

This act will be repealed April 16, 2008.

I urge your support in the creation of this Task Force.



## Preventing Intimate Partner Violence, Sexual Violence, and Child Maltreatment

### Public Health Burden

Intimate partner violence, sexual violence, and child maltreatment have a significant effect on public health. Victims of violence can experience physical injury; adverse mental health consequences such as depression, anxiety, and low self-esteem; and harmful physical health consequences such as suicide attempts, cardiovascular disease, and substance abuse. Any of these consequences can lead to hospitalization, disability, or death.

Intimate partner violence is actual or threatened physical, sexual, psychological, or emotional abuse by a current or former spouse (including common-law spouse), dating partner, or boyfriend or girlfriend. Intimate partners can be of the same or opposite sex. Nearly 25% of women have been raped and/or physically assaulted by an intimate partner and more than 40% of the women who experience partner rapes and physical assault sustain a physical injury. Women experience more chronic and injurious assaults from intimate partner violence than men.

Sexual violence is committed by an intimate or non-intimate perpetrator such as a spouse, family member, person in position of power or trust, friend, acquaintance, or stranger. Although there is some overlap between intimate partner violence and sexual violence, sexual violence is committed by a wider range of perpetrators. Sexual violence includes completed or attempted sex acts against the victim's will or involving a victim who is unable to consent; abusive sexual contact; and non-contact sexual abuse, including sexual harassment. Women are the primary victims of sexual violence. Approximately 15% to 25% of women experience an attempted or completed rape at some time in their lives. More than half of the women reporting rape are sexually assaulted before age 18.

Child maltreatment is any recent act or failure to act resulting in imminent risk of death, serious physical or emotional harm, sexual abuse, or exploitation of a child by a parent or caretaker who is responsible for the child's welfare. Much of the child maltreatment field divides child maltreatment into four categories: physical abuse, child neglect, sexual abuse, and emotional abuse (e.g., psychological or verbal abuse; mental injury). In the United States, child protective services identify more than 825,000 children annually as victims of maltreatment. Childhood exposure to maltreatment, parental violence, and other adverse experiences is associated with risky behaviors, such as smoking, overeating, suicidal behavior, and perpetrating youth and intimate partner violence, and with negative health outcomes such as heart disease and cancer.

These three types of violence are interrelated. They share common risk and protective factors and often co-occur within the same households.

Elder abuse is an emerging problem that may usefully be studied alongside intimate partner violence, sexual violence, and child maltreatment. Although data are poor, the best national estimate is that nearly 450,000 people ages 60 and older experienced abuse and/or neglect in domestic settings in 1996. Of these cases of abuse, only 16% (nearly 71,000) were reported to and substantiated by Adult Protective Service (APS) agencies; the remaining 379,000 were either not reported to APS or not substantiated.

### **The Injury Center's Niche in Preventing Intimate Partner Violence, Sexual Violence, and Child Maltreatment**

Many agencies and organizations have developed programs to prevent violence against women and children. As noted in the Institute of Medicine report *Reducing the Burden of Injury*, however, very few of these programs have been evaluated rigorously to assess their effectiveness and to determine which among them merit widespread adoption. CDC's Injury Center provides leadership in developing and assessing the effectiveness of violence prevention programs and policies.

Numerous federal agencies conduct research about many aspects of intimate partner violence, sexual violence, and child maltreatment. In its work, the Injury Center emphasizes research with direct implications for prevention. This research perspective complements the work of other federal agencies. For example, the Injury Center's focus on identifying ways to prevent the development of perpetration of intimate partner violence, sexual violence, and child maltreatment complements the U.S. Department of Justice's focus on persons already charged with violent offenses associated with these behaviors. The Injury Center's focus on applied dimensions of prevention in these areas complements the National Institutes of Health's focus on basic scientific questions.

Currently, efforts to prevent or intervene in intimate partner violence, sexual violence, and child maltreatment focus on reducing victims' risks for future violence and on mitigating the consequences of exposures to such violence. The field is dominated, therefore, by an emphasis on secondary and tertiary prevention strategies tailored to victims. Many leaders in the field are calling for greater attention to primary prevention of intimate partner violence, sexual violence, and child maltreatment. To prevent these types of violence from occurring in the first place, researchers and practitioners must place greater emphasis on approaches directed at perpetrators and potential perpetrators. Many questions, especially about young perpetrators, remain unanswered, seriously hindering the development and identification of effective violence prevention strategies. Thus, even though research on perpetration is still in the foundational stage, it is essential that the Injury Center focus on perpetration research to support future development of effective prevention programs. Parallel efforts must continue to prevent re-victimization.

### **The Injury Center's Research Priorities in Preventing Intimate Partner Violence, Sexual Violence, and Child Maltreatment**

Every research priority in this agenda is important. After considering input from experts in the field, Injury Center staff identified the seven most important priorities, those that warrant the greatest attention and intramural and extramural resources from the Injury Center over the next three to five years. They are

designated with asterisks.

## Priorities

### **A.\* Evaluate strategies to disseminate and implement science-based parenting interventions to prevent child maltreatment.**

Research has shown that parenting interventions can reduce and prevent child maltreatment. For these interventions to reach the broadest audience possible, more applied research about their dissemination and implementation is necessary. For example, a program's effectiveness may vary depending on the setting in which it is delivered; research should examine the impact of delivering parenting programs in a variety of specific settings, such as the work place and primary care settings, and through the media. Research to guide the adaptation of interventions to specific communities, subcultures, and populations will further enhance their effectiveness.

Victims of child maltreatment are at risk for other types of violence later in life, including youth violence, suicide, and intimate partner violence. Therefore, it is plausible that parenting interventions may also reduce the likelihood of experiencing these other types of violence.

### **B.\* Evaluate the efficacy and effectiveness of interventions and policies to prevent perpetration of intimate partner violence, sexual violence, and child maltreatment.**

The key to preventing intimate partner violence, sexual violence, and child maltreatment is to intervene with individuals, families, and communities in ways that stop the perpetration of violent behaviors. Programs and policies that provide counseling for batterers, improve parenting skills, or prevent dating violence, for example, intervene with perpetrators and potential perpetrators *before* the violence occurs or recurs. Research should focus on evaluating these programs and policies with a particular emphasis on those that attempt to address two or more types of perpetration simultaneously. Identifying programs and policies that can effectively address multiple types of perpetration will facilitate a more efficient allocation of prevention resources. Further, large public demand exists for effective programs and policies in this area.

### **C.\* Identify social norms that support intimate partner violence, sexual violence, and child maltreatment and evaluate strategies to change them.**

Research has demonstrated the importance of changing social norms to reduce major public health problems such as smoking and HIV. In some social contexts, intimate partner violence, sexual violence, and child maltreatment are considered normative behavior. To design effective interventions, researchers must first identify the particular social norms and beliefs that support these types of violence and then find ways to alter or replace them with ones that prevent violence. Even when such violent behaviors are not considered "acceptable," cultural attitudes and beliefs may exacerbate these problems by blaming victims or by supporting attitudes and behaviors that create social atmospheres conducive to, or tolerant of, such violence. Given CDC's role in addressing the contribution of social norms to other public health problems, the Injury Center—as part of CDC—is well-positioned to address this research opportunity. Research about social norms related to intimate partner violence, sexual violence, and child maltreatment will also apply to

other forms of violence.

**D.\* Evaluate training programs about intimate partner violence, sexual violence, child maltreatment, and elder abuse for health professionals.**

According to the Institute of Medicine, programs to train health professionals about intimate partner violence, sexual violence, child maltreatment, and elder abuse have received insufficient attention and evaluation. Few studies investigate whether curricula have the desired impact on delivery of health care to victims. Evaluation research is needed to determine the impact of training programs on the practices of health professionals as well as their effects on victims. Factors that affect the development, implementation, and maintenance of such programs include the nature of accreditation, licensure, and certification; characteristics of health professional organizations; views of the stakeholder groups; attitudes of health professionals; and the existence of mandatory laws and education requirements. It is also important to consider whether a health professional's own experience with violence may influence his or her response to victims and to identify training strategies that account for that influence.

**E.\* Evaluate the health consequences of intimate partner violence, sexual violence, and child maltreatment victimization across the life span.**

Research has linked intimate partner violence, sexual violence, and child maltreatment to a wide range of negative health outcomes and risk behaviors. However, little information exists about the mechanisms that may be responsible for these negative outcomes or the factors that may diminish them. Further understanding of the relationship between victimization and various health outcomes is important to guide interventions. Research in this area will guide development of interventions tailored to victims' needs.

**F.\* Examine the development of intimate partner violence, sexual violence, and child maltreatment perpetration to identify at-risk populations, modifiable risk and protective factors, and optimal times and settings for intervention.**

Ultimately, the cause of and responsibility for intimate partner violence, sexual violence, and child maltreatment lie with the perpetrators. Programs and policies that address the needs of victims (including same-sex victims), while critically important, fail to address the root causes for the behaviors that lead to the violence. However, important knowledge about these root causes is lacking. To understand how the propensity to behave violently toward partners and children develops, researchers must follow study populations for extended periods. A better understanding of the developmental pathways and social circumstances that contribute to perpetration will greatly enhance the development of effective primary prevention programs and guide refinement of existing prevention programs. Research about the development of perpetration may also apply more broadly to areas of youth violence and suicide prevention because of their association with intimate partner violence, sexual violence, and child maltreatment.

**G.\* Develop and evaluate surveillance methods for intimate partner violence, sexual violence, and child maltreatment.**

Few data are available to monitor intimate partner violence, sexual violence, and child maltreatment, and those that exist are of questionable validity and reliability;

better tracking and monitoring methods are necessary to support prevention efforts. To develop better surveillance systems, research should determine the sensitivity and specificity of alternative definitions, the utility of alternative surveillance methodologies, and the validity and reliability of the specific measures. Biomechanics research may be useful in diagnosing intimate partner violence and child maltreatment, identifying specific injuries that are highly predictive of these types of violence and establishing appropriate case definitions. Data sources for information about intimate partner violence, sexual violence, and child maltreatment differ to some extent, so evaluation of the methods for each must frequently be done independently. Improved surveillance methods will render better information to guide program development and evaluation. Because states and localities often lack adequate monitoring systems, research findings will be particularly valuable to them as they expand their efforts to address violence as a public health issue.

Dissemination of research findings is especially important to guide prevention and intervention activities, but little research to assess alternative dissemination strategies has been done in the violence prevention field. Moreover, information dissemination activities present many opportunities for collaboration with agencies and organizations working to prevent intimate partner violence, sexual violence, and child maltreatment. It is important to identify and evaluate methods to facilitate collaboration across advocacy, consumer, research, and practice settings in conducting dissemination. Encouraging collaboration among these groups is necessary to maintain the public's interest and meet policy makers' need for information to guide development of appropriate policies, legislation, and litigation procedures.

The prominence of the Rape Prevention and Education Grant Program (RPE), administered by the Injury Center, presents a unique opportunity to test models of dissemination through the sexual violence service infrastructure. The RPE distributes funds to states to support sexual violence prevention services and programs. It is crucial that state programs have access to and distribute the most up-to-date information. Research should identify the most effective strategies for translating and disseminating knowledge about sexual violence victimization and perpetration.

### **I. Evaluate the efficacy and effectiveness of interventions and policies for preventing intimate partner violence, sexual violence, and child maltreatment victimization and its consequences.**

Federal, state, and local government agencies and private organizations currently invest many resources in services for battered and sexually assaulted women and maltreated children. It is critically important to determine the effectiveness of these programs and policies in preventing victimization and its consequences. This type of research can help agencies and organizations that provide victim services determine whether their investments actually reduce violence and maltreatment.

Intimate partner violence, sexual violence, and child maltreatment often overlap in families, so evaluating the effectiveness of programs and policies that address two or more of these behaviors simultaneously is of high priority. Identifying programs that can effectively address multiple types of victimization (including same-sex violence) at once will facilitate a more efficient allocation of prevention resources. One area requiring particular attention is the evaluation of screening instruments for intimate partner violence, sexual violence, and child maltreatment used in health care and social service settings to identify victims needing additional

services.

**J. Evaluate models for integrated community responses to intimate partner violence, sexual violence, and child maltreatment.**

Collaboration among various members of a community and various groups working in intimate partner violence, sexual violence, and child maltreatment prevention is essential to preventing such violence. Expanding prevention research to include the development of integrated community responses to these public health problems will significantly advance prevention and intervention research. Further development of integrated community responses depends largely on advances in effectiveness research about specific prevention policies and interventions.

**K. Examine the development of intimate partner violence, sexual violence, and child maltreatment victimization to identify at-risk populations, modifiable risk and protective factors, and optimal times and settings for intervention.**

The Injury Center's mission of violence prevention emphasizes primary prevention of intimate partner violence, sexual violence, and child maltreatment. Currently, many research efforts focus on secondary or tertiary prevention, that is, preventing revictimization. Research is needed to identify the different risk and protective factors related to victimization in order to prevent first-time victimization. In addition, research should explore the commonalities and differences among risk factors for victimizations involving these kinds of violence.

To understand the characteristics that place people at risk of victimization, researchers must follow study populations for extended periods. Longitudinal research helps researchers specify optimal times and methods for intervention and prevention. For example, research indicates that early exposure to violence in the home can lead to future risk of victimization. Identifying potential moderators will aid in designing prevention programs. Longitudinal research can also identify patterns of coping and resilience across the life span for victims of intimate partner violence, sexual violence, and child maltreatment; this information can enhance prevention and intervention activities. As with preventing perpetration, a better understanding of the risk factors associated with victimization would greatly enhance the development of effective primary prevention programs.

**L. Identify risk and protective factors and effective prevention strategies for elder abuse.**

Elder abuse is an emerging area of public health concern. As the population ages, this form of abuse may become a much greater problem. Little research about risk and protective factors for elder abuse victimization and perpetration currently exists. Risk factors appear to differ according to the type of elder abuse; physical and psychological abuse, for example, share risk factors that are distinct from those for neglect and financial abuse. Absent important foundational research, program development is difficult. Similarly, little information is available about the effectiveness of existing interventions to prevent elder abuse and mitigate its consequences. Given the limited body of scientific knowledge about elder abuse, this is an important priority for the future.

**M. Study the role(s) of substance use and abuse as precursors to and consequences of intimate partner violence, sexual violence, and child**

## **maltreatment victimization and perpetration.**

Researchers do not clearly understand the roles of substance use and abuse as precursors to and consequences of victimization and perpetration across intimate partner violence, sexual violence, and child maltreatment. Studies investigating substance use and its co-occurrence with perpetration of and victimization by these types of violence should identify key components for prevention and intervention programs. Other federal agencies such as the National Institute of Drug Abuse and the Substance Abuse and Mental Health Services Administration support research and programs in this area. Injury Center research activities should complement the efforts of these agencies whenever possible.

## **N. Evaluate the impact of extreme community and environmental stressors on intimate partner violence, sexual violence, and child maltreatment.**

Natural and man-made disasters such as floods and terrorism may exacerbate intimate partner violence, sexual violence, and child maltreatment in affected communities. Research should assess the impact of community and environmental stressors on these three types of violence. Findings from this research can aid service agencies as they develop appropriate responses during periods of extreme stress. Injury Center research on this issue would complement other CDC work related to disaster response and terrorism.

## **O. Describe service delivery use, impact, and costs of interventions for intimate partner violence, sexual violence, and child maltreatment.**

Better information about service delivery use, impact, and costs of interventions for intimate partner violence, sexual violence, and child maltreatment is needed to support research about the cost effectiveness of interventions and policies designed to prevent these problems and their consequences. This research will become more important as more information about the efficacy and effectiveness of prevention programs and policies becomes available.



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This page last reviewed September 07, 2006.

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November 23, 2005

Members of the Legislative Budget  
and Audit Committee:

In accordance with the provisions of Title 24 and Title 44 of the Alaska Statutes (sunset legislation), the attached report is submitted for your review.

DEPARTMENT OF PUBLIC SAFETY  
COUNCIL ON DOMESTIC VIOLENCE  
AND SEXUAL ASSAULT

November 23, 2005  
Audit Control Number  
12-20039-06

This audit was conducted as required by AS 44.66.050 and under the authority of AS 24.20.271(1). Alaska Statute 44.66.050(c) lists criteria to be used to assess the demonstrated public need for a given board, commission, agency, or program subject to the sunset review process. Currently under AS 44.66.010(a)(5), the Council on Domestic Violence and Sexual Assault is scheduled to terminate on June 30, 2006. The Council would have one year from that date to conclude operations.

In our opinion, the termination date for the Council on Domestic Violence and Sexual Assault should be extended. The Council serves a public need and is operating in the public's interest. We recommend that the legislature extend the Council's termination date to June 30, 2014.

The audit was conducted in accordance with generally accepted government audit standards. Fieldwork procedures utilized in the course of developing the findings and discussion presented in this report are discussed in the Objectives, Scope, and Methodology.

Pat Davidson, CPA  
Legislative Auditor

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## OBJECTIVES, SCOPE, AND METHODOLOGY

In accordance with Titles 24 and 44 of the Alaska Statutes, we have reviewed the activities of the Council on Domestic Violence and Sexual Assault (Council) to determine if there is a demonstrated public need for its continued existence and if it has been operating in an efficient and effective manner. Currently, under AS 44.66.010(a)(5) the Council will terminate on June 30, 2006, having one year from that date to conclude its operations.

### Objectives

There are two central, interrelated objectives of our report. They are:

1. To determine if the termination date of the Council should be extended.
2. To determine if the Council is operating in the public's interest. The assessment of the operations, and performance of the Council, was based upon AS 44.66.050(c). This statute sets out criteria to be used in determining a demonstrated public need for the Council.

### Scope and Methodology

Our audit reviewed the operation and activities of the Council on Domestic Violence and Sexual Assault for the period of July 1, 2001 through June 30, 2005.

During the course of our examination, we attended the June 2005 funding meeting in Anchorage and interviewed various council members, staff, grantees, and individuals from state agencies. We also reviewed and evaluated the following:

- Applicable statutes and regulations
- Budget documents, session laws, and other legislative information related to the Council's operations
- Minutes of the Council meetings
- Grantee on-site monitoring performance and fiscal reviews prepared by the Council staff
- Statistical reports submitted by grantees
- Financial reports from the State Accounting System
- Other documents related to the Council's operations and mission, as necessary

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## ORGANIZATION AND FUNCTION

The Council on Domestic Violence and Sexual Assault (Council) was established in the Department of Public Safety in 1981 by Alaska Statute 18.66. This statute gives the Council the authority "*...to provide for planning and coordination of services to victims of domestic violence or sexual assault or to their families and to perpetrators of domestic violence and sexual assault and to provide for crisis intervention and prevention programs.*"

The primary functions of the commission include:

- developing, implementing, maintaining, and monitoring crisis intervention and prevention programs in coordination with authorities in the field of domestic violence and sexual assault;
- coordinating services with the Departments of Law, Education and Early Development, Public Safety, Health and Social Services, Corrections, and other state agencies and community groups;
- consulting with public employers, state and community agencies to provide continuing education programs for employees, and to formulate standards and procedures for health care employees;
- providing technical assistance to programs, state and community agencies; and
- dispensing, overseeing, monitoring, and coordinating existing services and developing expanded services/programs to meet the needs of victims of domestic violence, sexual assault, and other violent crimes.

The Council consists of seven members—four of whom are the commissioners or their designees—from the Departments of Public Safety (DPS), Health and Social Services (DHSS), Education and Early Development (DEED), and Law (DOL). The balance of the Council is comprised of persons from the public, appointed by the governor.

By statute, before making an appointment, the governor receives recommendations from and consults with the Alaska Network on Domestic Violence and Sexual Assault (Network) which is a nonprofit, private organization.<sup>1</sup>

The Council is staffed by an executive director, an administrative manager, three associate coordinators, a statistical technician, an administrative assistant, and an administrative clerk.

<sup>1</sup> The Alaska Network on Domestic Violence and Sexual Assault is comprised of 20 programs, many of which are council-funded programs.

### Council Members As of November 23, 2005

Janna Stewart, Public Member, Chair  
Susan Parkes, DOL, Vice Chair  
Ann House, Public Member  
Barbara Thompson, DEED  
Karleen Jackson, DHSS  
Kimberly Williams, Public Member  
William Tandeske, DPS

The Council is authorized to receive and disperse both state and federal funds. Traditionally, a large part of the Council's responsibilities involve administering grants made to local community organizations for domestic violence, sexual assault, and crisis intervention and prevention programs. Grant administration includes providing technical assistance and monitoring the activities of the various grantees and contractors.

The community programs funded by the Council provide a variety of services to the public. Most importantly, their efforts are directed toward providing victims a safe environment, either through housing at a community shelter or the use of a network of designated "safe homes." Additionally, the programs are involved in educating and counseling the victim about domestic violence and sexual assault issues and providing a batterer's intervention services.

The Council's coordination role and responsibilities with other state and local agencies is extensive. For FY 06, the Council approved 19 community-based victim services programs, four community-based batterer's intervention programs, and two prison-based batterers' programs. (See Appendix A)

#### Funding Sources

The Council receives state general funds from two separate funding sources: the state general revenue and withheld Permanent Fund Dividends from convicted felons and misdemeanants who are incarcerated.

The Council also receives state and federal funds through the use of interagency receipts from the Department of Corrections (DOC) and DHSS. DHSS funds are: Sexual Assault Prevention (SAP), Rape Prevention and Education (RPE), Temporary Assistance for Needy Families (TANF), and Behavioral Health Alcohol Grant. Both SAP and RPE funds are part of the large Centers for Disease Control and Prevention grant administered by DHSS.

Additionally, many of the grants issued by the Council are supported by direct federal funds. Federal funds are received by the Council from sources such as:

- Family Violence Prevention Services Act  
U.S. Department of Health and Human Services

The Family Violence Prevention Services Act provides federal funding to all states. This funding is used for domestic violence programs throughout Alaska. The programs receiving grants provide assistance funds to victims of domestic violence and their children. These programs operate shelter facilities which are staffed around the clock and provide a full spectrum of services, including basic food and immediate shelter, crisis intervention, counseling, and medical/legal/personal advocacy.

- Crime Victims Assistance  
U.S. Department of Justice

This grant authorizes financial compensation for victims of crime and financial support for state and local agencies that provide services to crime victims. This fund is a U.S. Treasury account, generated entirely by the fines and penalties levied against criminals convicted of federal crimes. The majority of this funding is awarded directly to programs providing services to victims of domestic violence, sexual assault, and other violent crimes.

- Violence Against Women Act (VAWA)  
U.S. Department of Justice

The grant services combine a series of federal sanctions and initiatives—as well as national, state, and local resources—to improve the response to crimes against women. These funds are delineated to five specific areas: prosecution, law enforcement, victim services, judicial, and discretionary. In April 1995, Governor Knowles designated the Council as lead agency for coordination and management of VAWA funds for the State of Alaska.

To accomplish this mission, the statewide Violence Against Women Planning and Implementation Committee (committee) was created.<sup>2</sup> The committee developed the annual plan for VAWA funding upon the Council's approval. The Council was then responsible for funding distribution, and subrecipient monitoring, of these projects.

In FY 04 the Council decided to disband the committee, citing inefficiency and duplication of duties performed by Council members and staff. The Council approves the spending plans of the Departments of Law and Public Safety, the Alaska Court System, and the Alaska Network on Domestic Violence and Sexual Assault for the prosecution, law enforcement, judicial, and victim services components, respectively. For the discretionary component, the Council distributes the fund through its Request for Proposal (RFP) grant process.

- Grants to Encourage Arrest Policies  
U.S. Department of Justice

The Grants to Encourage Arrest Policies Program is a component of VAWA. This grant was focused on the development and implementation of laws, policies, and protocols that encourage or mandate the arrest of domestic violence offenders.

The Council currently receives supplemental funds to assist community-driven initiatives in providing regional state-tribal forums on domestic violence. The forums are attended by state troopers, local prosecutors, tribal/state judiciary, village public safety officers,

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<sup>2</sup> The committee was comprised of 21 representatives of the VAWA components.

tribal members/citizens, victim advocates, probation/parole and other social service/care providers, to enhance their skills and develop a greater understanding of topics critical to the safety of women and their children, offender accountability, and coordinated response to domestic violence. The training is also designed to promote communication, cooperation, and a mutual respect among the tribal/state/federal response systems.

- Rural Domestic Violence and Child Victimization  
U.S. Department of Justice

The Rural Domestic Violence and Child Victimization Enforcement Grant implements certain provisions of the Violence Against Women Act. While this grant closed out in FY 03, the program provided a unique opportunity for law enforcement and prosecution agencies, the courts and nongovernmental victim services, community organizations, businesses in rural communities, and Indian tribes to collaborate in creating protocols and strategies tailored specifically to meet the needs of rural populations.

- Supervised Visitation, Safe Havens for Children  
U.S. Department of Justice

The Safe Havens programs provides an opportunity for communities to support the supervised visitation and safe exchange of children, by and between parents, in situations involving domestic violence, child abuse sexual assault, or stalking.

The State of Alaska through the Council—and in a collaborative effort with the Cook Inlet Tribal Council, Inc., Alaska State Court System, and Abused Women's Aid in Crisis—implemented the only supervised visitation center in the State.

- Denali Commission

To continue the capital improvement project started in FY 02 with private grants from the Wells Fargo Bank and the Rasmuson Foundation, the Council pursued grant funding with the Denali Commission. In FY 04, the Denali Commission received congressional direction to allocate \$5 million toward the upgrade and construction of shelters for victims of domestic violence. The Council has provided the Denali Commission with preaward, advisory input, and technical assistance to make optimal funding allocation decisions. As of March 2005, \$3.95 million has been committed for repair/renovation, new construction projects, or conceptual planning/design of shelter buildings.

## REPORT CONCLUSIONS

Under AS 18.66, the Council on Domestic Violence and Sexual Assault (Council) is authorized to provide for the State's planning and coordination of full-range services to victims, their families, and perpetrators of domestic violence and sexual assault. Combating domestic violence and sexual assault is identified as an ongoing priority at both the state and national level.

Aside from the operational concerns addressed in this report, the Council is serving a public need and is operating in the public's interest. Currently, AS 44.66.010(a)(5) requires the Council to be terminated on June 30, 2006. We recommend the legislature extend the Council's termination date to June 30, 2014.

The Council is still facing personnel issues resulting from continual staff turnover. The Council has worked on developing personnel policies, procedures, and desk manuals to assist the staff; but due to limited staff, the Council was forced to focus primarily on grant maintenance and monitoring responsibility. Two of the Council's statutory mandates were not addressed. (See Recommendation 2)

The Council intends to work on a strategic plan to assess the effectiveness of services currently being provided by grantees and other state and local entities. The plan's overall goal is to identify and address existing gaps in service. One of the missions of the Council is to provide leadership in meeting the needs of domestic violence and sexual assault victims. A long-term strategic plan is certainly needed to assist the staff in establishing priorities. The work plan will help Council staff to effectively plan and coordinate services with state and community agencies, as well as provide services previously not offered to reduce the causes and incidence of domestic violence and to alleviate their effects.

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## FINDINGS AND RECOMMENDATIONS

The Council on Domestic Violence and Sexual Assault's (Council) prior sunset audit<sup>3</sup> reported several administrative weaknesses. Recommendation No. 1 is not resolved and reinstated below as Recommendation No. 2. Prior audit Recommendations No. 2 and 3 were resolved. Recommendations No. 4 and 5 were partially resolved and are readdressed and combined into Recommendation No. 1 below.

### Recommendation No. 1

The Council should address its statutory responsibilities to consult with the Department of Education and Early Development and the Department of Health and Social Services.

### Prior Finding

Statutory changes implemented in July 1, 1996, significantly increased the scope of the Council's responsibilities. In response, the Council's budgeted staff increased from four to eight positions. During our last sunset audit, the Council was unable to or ineffective in addressing some of their statutory responsibilities due to administrative weaknesses and lack of prioritization.

The prior sunset audit reported that grantees had varying degrees of success in gaining access to their local schools and used a variety of methods to address domestic violence and sexual assault education needs. In addition, although the Council collaborated with the Alaska Family Violence Prevention Project, Department of Health and Social Services (DHSS), on a domestic violence and child abuse workshops, the Council has not worked with DHSS to develop standards and procedures as required in AS 18.66.300.

Alaska Statute AS 18.66.050(3) and (12) states the Council shall:

*(3) consult with authorities in the field, develop, implement, maintain, and monitor domestic violence, sexual assault, and crisis intervention and prevention programs, including education programs...and school curricula on the cause, prevention, and treatment of domestic violence and sexual assault. [emphasis added]*

*(12) consult with the Department of Health and Social Services in the formulation of standards and procedures for delivery of services to victims of domestic violence by health care facilities and practitioners of healing arts and personnel in those facilities as required in AS 18.66.300.*

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<sup>3</sup> Audit Control Number: 12-20014-02, Department of Public Safety, Sunset Audit on Council on Domestic Violence Assault dated October 31, 2001.

### Legislative Audit's Current Position

The Council has faced personnel issues resulting from position turnover since FY 01, particularly in the executive director and associate coordinator positions. During the past four years, three individuals were hired for the executive director's position. The executive director and associate coordinators are key positions for the Council to fulfill its 14 mandates.

With limited staffing and several mandates, the Council chose to focus primarily on their grant funding and oversight role. This is to ensure continued funding of grant programs. Grant accountability and reporting is time consuming, but essential for the programmatic and administrative oversight of grants for victim services and batterers intervention programs.

However, there is still a need for a more coordinated effort with the Department of Education and Early Development (DEED) towards education in school districts throughout the State. AS 14.30.360(b) states "*the state board shall establish guidelines for a health and personal safety education program. Personal guidelines shall be developed in consultation with the Council on Domestic Violence and Sexual Assault...*" There are currently no health and personal safety education guidelines available on domestic violence and sexual assault for school personnel to use. The Council should consult with DEED, school district representatives, and grantees who have worked toward curriculum development, in creating a comprehensive standardized curriculum to be used within the schools statewide.

There is also a need for the Council to become involved with DHSS to ensure that standards and procedures are available for the delivery of services by health care facilities and its personnel. Council-funded grantees are often approached by health care providers on issues of domestic violence and sexual assault.

However, as the statewide representative, the Council should coordinate this effort at the departmental-level rather than at the grantee-level. The Council should consult with DHSS regarding development of comprehensive standards and procedures to be used by all agencies for the victims of domestic violence and sexual assault, including council-funded grantees and health care providers within the State.

AS 18.66.050(3) and AS 18.66.050(12) discuss the Council working with state departments to develop standards, procedures, and education programs. However, due to limited staffing and the Council's focus on grant maintenance and monitoring, the Council has been unable to fully address these statutory mandates. Given the significance of these mandates, we recommend that the Council take immediate action and implement procedures to address both statutes.

## Recommendation No. 2

The legislature should amend the Council on Domestic Violence and Sexual Assault's statutes related to appointment of council members.

### Prior Finding

The Network on Domestic Violence and Sexual Assault (Network) submits recommendations, to the Governor, of public members qualified to serve on the Council. The Network also receives grant funds from the Council. The Council consists of four state officials and three public members appointed by the governor. Alaska Statute 18.66.020(a)(1) and AS 18.66.020(b), in part, states:

*(a)(1) The council consists of three persons appointed by the governor after consultation with the Network on Domestic Violence and Sexual Assault, a non profit corporation; The Network on Domestic Violence and Sexual Assault shall submit a list to the governor of persons recommended for appointment.*

*(b) ... A vacancy on the council shall be filled for the unexpired term by appointment by the governor after consultation with the Network on Domestic Violence.*

The Network also annually receives a grant from the Council for a legal advocacy project. The grant is the victim services<sup>4</sup> allocation of the Violence Against Women Act (VAWA) federal funding received by the Council.

The appearance of a conflict of interests exists when a council member reviews, evaluates, approves, and monitors a grant to the same nonprofit corporation which was responsible for recommending that individual to the council membership.

It is entirely appropriate for the governor to consult with any interested parties when making appointments to the Council. However, it is a statutory mandate for the governor to consult with the Network, over the appointment of public members, when the Network itself is a subgrantee of the Council that raises an appearance of a conflict of interest.

### Legislative Audit's Current Position

Since the last audit, AS 18.66.020 has not been revised and the Network continues to get funding from the Council. However, of the last five public members appointed to the Council, only two were recommended by the Network.

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<sup>4</sup> The VAWA federal funds are distributed in the following manner: 5% for judicial; 25% for law enforcement; 25% prosecution; 30% for victim services; and 15% to discretionary funds.

To avoid any appearance of a conflict of interest between public member appointments and receiving funding, we continue to recommend the legislature amend AS 18.66.020 to: (1) eliminate the mandate for the Network to recommend individuals to the governor for appointment to the Council, and (2) eliminate the requirement for the governor to consult with the Network on the appointment or reappointment of the council's public members.

## ANALYSIS OF PUBLIC NEED

The following analyses of board activities relate to the public need factors defined in AS 44.66.050(c). These analyses are not intended to be comprehensive, but address those areas we were able to cover within the scope of our review.

*Determine the extent to which the board, commission, or program has operated in the public interest.*

The Council has awarded and administered grant funds to local community organizations and programs that provide services to victims of domestic violence and sexual assault, batterer intervention services to perpetrators of domestic violence, and crisis intervention and prevention programs. The presentation element of the funding meeting is generally accepted and approved by all of the grantees. Public participation was encouraged and legislative intent was considered in the funding process. The Council strives to treat urban and rural participants fairly throughout the grant award process. The Council exercises oversight and performs on-site audits of most grant recipients.

The Council coordinates the efforts of many state and community agencies, working toward a comprehensive statewide system, to combat domestic violence and sexual assault. Overall, we conclude that the Council is performing its coordination duties.

The Council provides technical assistance in various forms to state agencies, law enforcement agencies, grantees, and community groups on a regular basis.

The Council worked on getting private and federal funding for capital improvement projects for the facilities of victim services providers. In addition, the State of Alaska, through the Council—in a collaborative effort with the Cook Inlet Tribal Council, Alaska State Court System, and Abused Women's Aid in Crisis—implemented the only supervised visitation center in the State with federal funding.

The Council has provided funds to assist in the development of training materials and participation in training events related to domestic violence and sexual assault. The Council has also provided statewide training with the regional State-Tribal forum on domestic violence. Training has been used by law enforcement officers, prosecutors, judicial officers, tribal citizens, probation/parole officers, social service providers, grantees, and community groups.

The Council provides domestic violence and sexual assault education on a local level through its grantees. The Council maintains a lending library with educational and reference materials available that are both adequate and appropriate to address the cause, prevention, and treatment of domestic violence and sexual assault.

*Determine the extent to which the operation of the board, commission, or agency program has been impeded or enhanced by existing statutes, procedures, and practices that it has adopted, and any other matter, including budgetary, resource, and personnel matters.*

The Council's board members have been appointed in accordance with Alaska statutes. All appointed members have shown an interest in matters dealing with the domestic violence and sexual assault. In addition, the Council is in a position to facilitate the resolution of coordination issues at the local level with representatives who oversee these areas at the state level.

The Council installed a new web-based database system in early FY 05. Although fairly new, the database system will be able to provide accurate, unduplicated statistical programmatic information for decision making. Overall, this system is expected to meet a critical need for coordinated standardized measurement and recording of statistical data between agencies.

AS 18.66.050(10) requires the Council to submit an annual report to the governor, and notify the legislature about the availability of the report. Although the statute is silent if such report is to be based on the calendar year or fiscal year, customarily the Council has submitted reports on fiscal year basis. The Council submitted the report to the governor on time for FY 02; but a few months late for FY 03 and FY 04 due to staff vacancy.

For the FY 06 grant award, the Council did not fund new programs choosing to maintain core services with existing council-funded programs. With a shrinking budget, the Council faced tough grant-funding decisions. The Council's grant award process is objective. The Council members reviewed the overall needs, economies of scale, duplication of services within geographic areas, and sustainability of existing programs. During the FY 05 funding meeting, grantees presented their financial struggle in keeping staff due to increasing operational costs, such as heating, lighting, and health insurance.

Other than occasional operational costs, the victim services programs have not received substantial core services funding increases.<sup>5</sup> In addition, the batterers intervention programs have not seen any increase in their grant awards. In fact, the community-based batterers intervention programs had their budget reduced from \$320,000 to \$200,000 in FY 04. The schedule of grants awarded between FY 03 through FY 06 is located on Appendix A.

The financial schedule shown in Exhibit 1 (on the following page) depicts the Council's actual operating expenditures and funding sources between FY 02 through FY 05. The Council's funding sources are federal, state general funds, permanent fund dividends<sup>6</sup>, and interagency receipts from DHSS and the DOC. Overall, the Council's operating budget has decreased between FY 02 and FY 05 and amounts paid by the general fund continue to fall.

<sup>5</sup> Using carry over authorization from prior year federal grants, the Council funded an extra \$513,159 to cover health insurance cost increases in FY 03 for victim services programs. For the FY 06 grant awards, the legislature also appropriated an additional \$200,000 for the victim services programs to cover operational costs.

<sup>6</sup> These are Permanent Fund Dividend amounts withheld from convicted felons and misdemeanants who are incarcerated. The PFD is the main source of funding for the Council's batterers intervention program.

**Exhibit 1**  
**Schedule of Operating Expenditure and Funding Sources**

	<u>FY02</u>	<u>FY03</u>	<u>FY04</u>	<u>FY05</u>
<b>Expenditures:</b>				
Personal Services	432,156	486,533	441,162	380,137
Travel	54,548	47,743	87,933	116,594
Contractual	544,252	536,279	539,782	529,788
Supplies	7,233	15,273	6,001	14,418
Equipment	4,474	1,997	9,382	-
Grants to Programs <sup>7</sup>	7,950,647	8,555,081	8,262,676	7,742,461
<b>Total Operating Expenditures</b>	<b>\$ 8,993,310</b>	<b>\$ 9,642,906</b>	<b>\$9,346,936</b>	<b>\$8,783,398</b>
<b>Funding Sources</b>				
Federal Receipts	2,363,358	2,966,083	4,452,958	3,627,593
Interagency Receipts from DHSS <sup>8</sup>	1,351,840	1,592,114	494,237	1,007,221
Interagency Receipts from DOC <sup>9</sup>	155,382	174,565	174,700	157,990
Other Miscellaneous Receipts	291	507	701	438
General Fund Appropriations	5,122,439	4,909,637	4,224,340	3,990,156
<b>Total Funding Sources</b>	<b>\$ 8,993,310</b>	<b>\$ 9,642,906</b>	<b>\$9,346,936</b>	<b>\$ 8,783,398</b>

Additionally, in order to maintain funding for the grantee programs, the Council decided to fill their FY 05 budget shortfall through vacancies in Council staff. Although this is a reasonable decision, the Council has not fulfilled its statutory mandates due to limited staff resources, see Recommendation No. 1.

*Determine the extent to which the board, commission, or agency has recommended statutory changes that are generally of benefit to the public interest.*

The Council is generally asked by other agencies to review statutory changes contained in proposed legislation. Typically, Council members/staff review and comment on proposed legislation rather than developing and seeking support for its own measures. The Council discusses pertinent bills deciding which legislation the Council should support, remain neutral on, or oppose. The executive director develops, analyzes, and testifies on bills at the direction of the Council.

<sup>7</sup> Grant amounts exclude capital improvement expenditures funded through capital appropriations.

<sup>8</sup> Department of Health and Social Services' RSA mostly funds the victim services programs.

<sup>9</sup> \$98,238 of the Department of Corrections' RSA funds the prison-based batterers intervention programs, with the remainder amount funding the administrative costs for both community-based and prison-based batterers intervention programs.

Legislation that was supported by the Council include the following:

- HB 322 (Chapter 91 SLA 2002) – amended the Council's statute where the Council hires the executive director and the executive director now hires the staff. This legislation also placed the executive director and staff into exempt service.
- HB 328 (Chapter 15 SLA 2004) – related to certain victim's rights and the Violent Crimes Compensation Board.
- HB 385 (Chapter 11 SLA 2004) – related to awarding child custody
- HB 398 (Chapter 19 SLA 2004) – established the domestic violence fatality review teams in areas of the State.

***Determine the extent to which the board, commission, or agency has encouraged interested persons to report to it concerning the effect of its regulations and decisions on the effectiveness of service, economy of service, and availability of service that it has provided.***

The Council encourages interested parties to comment on its decisions or regulations by publicly announcing its meetings. The Council holds at least four meetings per year, normally in Anchorage or Juneau. Meetings held in Juneau are typically teleconferenced statewide.

***Determine the extent to which the board, commission, or agency has encouraged public participation in the making of its regulations and decisions.***

The Council encourages public participation by posting the Council's meeting schedule on their website. Time is provided on the agenda of every public meeting for public comment. Grantee agencies are allocated time to speak directly to the Council at the main "funding" meeting. Also at each of its meetings, the Council schedules time for presentations from the Network and other community groups involved in the field of domestic violence and sexual assault.

***Determine the efficiency with which public inquiries or complaints regarding the activities of the board, commission, or agency filed with it, with the department to which a board or commission is administratively assigned, or with the office of victims' rights or the office of the ombudsman have been processed and resolved.***

We found no problems in this area. Complaint procedures are in place, followed when complaints are made, and files are maintained. No complaint activity was noted from FY 02 through FY 05.

***Determine the extent to which a board or commission that regulates entry into an occupation or profession has presented qualified applicants to serve the public.***

Since the Council does not regulate any occupations or professions, this is not applicable.

*Determine the extent to which state personnel practices, including affirmative action requirements, have been complied with by the board, commission, or agency to its own activities and the area of activity or interest.*

No complaints against the Council were identified.

*Determine the extent to which statutory, regulatory, budgeting, or other changes are necessary to enable the agency, board, or commission to better serve the interests of the public and to comply with the factors enumerated in this subsection.*

The previous sunset audit reported administrative issues with the line of authorities and undefined job responsibilities with the staff. Although the administrative weaknesses have been resolved, the Council is still facing personnel issues related to constant staff turnover. It takes considerable time to train new personnel and finish projects due to staff turnover.

The Council chose to concentrate on fulfilling its mandates through grant funding although with fewer resources, and focused less on its other mandates such as: (1) consultation with Department of Education and Early Development (DEED) to develop and implement standardized school curricula, and (2) Department of Health and Social Services (DHSS) to formulate standards and procedures for health care personnel.

There is still need for a more coordinated effort towards education in school districts across the State. The Council should consult with DEED's school district representatives and grantees, who have worked toward creating a comprehensive standardized curriculum to guide schools across the State.

There is also a need for statewide coordination efforts between the Council and DHSS, ensuring standards and procedures are available to health care facilities and practitioners of the healing arts and personnel in those facilities that provide services for victims of domestic violence in the communities across the State.

*Determine the extent to which the board, commission, or agency has effectively attained its objectives and purposes and the efficiency with which the board, commission, or agency has operated.*

The Council's purpose is to provide planning and coordination of services for victims of domestic violence or sexual assault or to their families, to perpetrators of domestic violence and sexual assault, and to provide for crisis intervention and prevention programs.

The Council, as the state agency responsible for administering the majority of crime victim assistance funding resources in Alaska, has been very effective with their coordination of services and outreach efforts through their grant award process. As an effective means to use and spread limited funds, the Council has ensured that Council-funded programs provide