

# What Does **Better** Look Like?

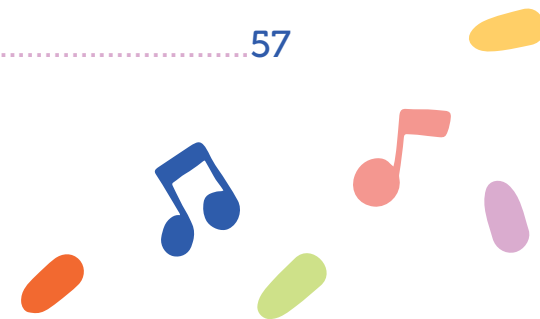
Strategic Plan | FY 2022 - 2024





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# What does **music** have to do with a **strategic plan**?



What, some may ask, does music have to do with a strategic plan? Aside from “Can you tell me how to get to Sesame Street,” “Conjunction Junction” (#IYKYK), Gracie’s Corner, and other wonderful music created just for children, what makes the theme of music relevant to Safe Shores – The DC Children’s Advocacy Center?

Music **amplifies**, music **brightens the darkest of moments**, music **conveys our feelings when words cannot**, music **connects across all the fabricated differences of race, class, and gender** – reminding us of and making us curious about our shared humanity, music **comforts**, music **teaches**, music **celebrates what’s unique and best in people**, music **makes us think**, music **makes us want to move**, music **activates**, music **heals**, music **inspires**, music **brings joy!**

All of these actions reflect what everyone at Safe Shores works to accomplish each day and, just as importantly, embody in how we provide intervention, hope, and healing to child victims of abuse and their families.

Given that the world is ever-changing, we strive to show up consistently for the children and families we serve with excellence, compassion, and cultural humility. We want the people we serve to feel seen and heard. That requires us to plan thoughtfully and to be intentional about implementation.

A guiding principle in our planning is asking ourselves,

## Listen to the Playlist

Scan the QR code to see the full playlist for the SafeShores Strategic Plan FY 2022 - 2024



**“What does better look like?”** In that context, we are intentional about what we can plan and how we respond to the unexpected. For Safe Shores, “better” for child victims includes:

- ensuring high quality, comprehensive, and coordinated services
- centering people and working with a racial equity lens,
- eliminating barriers to accessing crucial services and resources,
- meeting people where they are,
- offering a broader range of clinical therapies and resources,
- providing specialized support for teen victims,
- developing a diverse cadre of nonprofit leaders, and
- creating a safer world for children through prevention training, education, and outreach.

The progress highlighted in this report and the strategies outlined for the path forward represent a collective vision of what better looks like. Our entire staff was part of creating this plan since everyone is part of carrying out the plan.

You’ll notice that songs have been paired with each section of the plan. Tune in as you continue to read, let us know what you think, and tell us some of the tunes that inspire and give you hope at [team@safeshores.org](mailto:team@safeshores.org).

So join us in envisioning what better looks like for every child and making it happen, one moment and one child at a time.

**Let the music play!**

*Michele Booth Cole*

**Michele Booth Cole, J.D.**

Executive Director

Safe Shores – The DC Children’s Advocacy Center

# What Does Better Look Like?

In the midst of a pandemic, economic instability, political and social tensions, and the ever-present stresses of everyday life in the District of Columbia, Safe Shores – The DC Children's Advocacy Center remains a source of intervention, hope, and healing for children and families affected by abuse, trauma, and violence, while also targeting the prevention of child abuse and neglect through ongoing education and training.

Throughout 2020 and 2021, our program and administrative teams responded to new levels of unprecedented need with urgency, ensuring high-quality service delivery and critical prevention education. During that time, the Board of Directors and staff of Safe Shores committed themselves once again to intentional strategic planning – responding to unmet child and family needs, reviewing and strengthening current services while also addressing our challenges, and prioritizing sustainable organizational growth.

Our planning was informed by the input of more than 70 key stakeholders and thought partners, including our board and staff, familiar with our work and impact, along with the review and refinement of our Theory of Change. This led to the development of strategic goals and targeted outcomes for client service delivery, prevention education, MDT partnership, community engagement, resource development, and as a result, expanded reach and impact.





# How We Define Better

## Accessibility and Compassion

Free and accessible, compassionate, life-affirming services for children and families affected by abuse, trauma, and violence in the District of Columbia.

## Connecting with Intention

Intentional client and caregiver connection to resources, people, and places that ensure equitable access to all the supports needed to reclaim personal strength frequently disrupted by inequities and trauma.

## Responsive Service

Survivor-focused service delivery that is culturally relevant and responsive.

## Targeting Prevention

Outreach, education, and partnerships that target the prevention of child abuse and neglect, making protecting children everybody's business!

## Focus on Hope and Healing

Safe, confidential, and best-practice interventions that move children and their caregivers from the trauma of violence to hope and healing.

**This, and more, is the work of Safe Shores.**

*Over 70 key stakeholders and thought partners familiar with our work and impact, including our board and staff, informed our planning and the review and refinement of our Theory of Change.*

Those activities led to the development of strategic goals and targeted outcomes for client service delivery, prevention education, the MDT partnership, community engagement, resource development, and as a result, expanded reach and impact.

This presentation of Safe Shores' strategic plan is guided by the question "What Does Better Look Like?" We have

outlined our response with a next-level strategic plan that will drive the next three years of work, which are already underway. Throughout the plan we have kept the guiding question before us– What Does Better Look Like? – to intentionally and consistently demonstrate our best in the intervention and healing of child sexual abuse and the prevention of future cases in the District of Columbia.

**For more information about Safe Shores and/or the strategic plan, contact:**

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**Safe Shores – The DC Children's Advocacy Center, 429 "O" Street, NW, Washington, DC 20001**

# This is Our Story

Safe Shores – The DC Children’s Advocacy Center is central to child abuse investigations and provides coordinated and vital resources for around 1,000 children, from three to 17 years of age, impacted by abuse, violence, and neglect in the District of Columbia. (DC).



Working in partnership with the Multidisciplinary Team (MDT) on child abuse investigations and prosecution, Safe Shores is aligned with first responders to provide services 24 hours a day, seven days a week. We train over 1,000 adults in an average year on how to recognize and react to child abuse, as all adults have a role to play in protecting children.

In 1995, Safe Shores’ founders – Patricia A. Riley, Esq.; Lavdena Orr, M.D.; and Arlene Robinson, Administrative Judge – joined forces to establish a Children’s Advocacy Center in DC, believing that the Nation’s Capital could do much better for children and families affected by abuse.

First developed in the mid-1980s, the Children’s Advocacy Center Model prevents child victims of abuse from being retraumatized by having to go to several locations and tell their story multiple times. With the CAC Model, the once fragmented system is now a multidisciplinary team approach that provides comprehensive and coordinated services in a central location so children only have to share their story once.

In 2002, the DC Council formally recognized Safe Shores as DC’s CAC and mandated a multi-agency response for cases involving child victims of sexual and physical abuse. As codified by the DC Code §4-1301.5, the MDT includes: Safe Shores as CAC and MDT organizer, the DC Child and Family Services Agency (CFSA), Metropolitan Police Department



of the District of Columbia (MPD), Office of the Attorney General for the District of Columbia (OAG), United States Attorney's Office for the District of Columbia (USAO), and Children's National Medical Center.

More than 25 years later, Safe Shores continues to serve children who have been affected by sexual or physical abuse and neglect and/or have witnessed extreme violence, as well as their siblings and non-offending caregivers. We have expanded our services to include:

- A broader range of survivor-centered clinical therapies for children and support groups for non-offending caregivers, offered in English and Spanish.
- Greater support of teen victims of sexual assault, 13 to 17 years of age, helping them to understand their rights under the DC's Sexual Assault Victims' Rights Act Amendment (SAVRAA), including the support of a Safe Shores Teen Advocate.
- Prevention training and outreach to a wider range of organizations and caring adults to recognize, respond to, and prevent child abuse and child trauma.

*As a result of our experience, we continue to be acknowledged for our work with children and families, in the community, as well as for outstanding leadership in our field, all in service to our mission and vision.*

### **Our Mission**

Safe Shores provides survivor-centered intervention, hope, and healing for children and families affected by abuse, trauma, and violence in the District of Columbia, and works to prevent and end child abuse and neglect through promising practices, policies, and partnerships.

### **Our Vision**

Safe Shores is working toward a vision of an equitable, just, and caring world where children and families are safe and live free from all forms of violence.

# These are Our Services

The **Client Advocacy Services Program** is most often the first point of contact at Safe Shores for children and their families.

We provide a supervised, welcoming, and stabilizing environment for children and families awaiting interviews, therapy, or court appearances.

We provide crisis support and advocacy, referral to community services, information on crime victims' rights and other programs of assistance, and other support dependent on the client's needs. .

The **Safe Shores Forensic Services Program** coordinates and conducts neutral, developmentally sensitive, fact-finding interviews with child victims on behalf of our fellow MDT agencies. Having a place designed for these highly specialized interviews means that children don't have to repeatedly disclose what happened to them to multiple adults, in a variety of separate locations.

Among our newer services, the **Teen Advocacy Initiative** allows us to expand our reach with teens, 13 to 17, who have been sexually assaulted but who might not otherwise come to our CAC. As a result of SAVRAA, teens have a right to an advocate who can accompany them to interviews and medical appointments relating to the sexual assault. Safe Shores Teen Advocates can also connect teen victims to a variety of resources and provide ongoing emotional support.

The **Clinical Services Program** helps children and their families heal from the trauma of violence by providing free therapeutic services to those affected by child abuse in DC. Using Trauma-Focused Cognitive



Behavioral Therapy (TF-CBT) and Child-Parent Psychotherapy (CPP) as their frameworks, the Clinical Services team provides a safe space for clients to process trauma, identify and overcome challenges, develop positive coping skills, and build healthy self-perception and relationships. We also offer non-offending caregivers therapeutic support groups in English and Spanish.

*Safe Shores is at the center of DC's multi-agency response to children and families impacted by abuse and violence. Our MDT Advancement and Support Program is dedicated to this work.*

Our efforts have improved systemic responses to child abuse victims in DC. We work to strengthen caregivers' knowledge about child protection and improve their sense of agency to advocate for and support their children throughout the healing process. Ultimately, we build caregivers' trust that there are professionals who respect them and are committed to supporting them in the ways that they need.

### **The Impact of Training**

Through training based on evidence-informed curricula, **Prevention and Outreach** has provided over 10,000 adults with information about the impact of child abuse and child trauma, and equipped them with skills to recognize, respond to, and prevent child abuse. By preparing communities of caring adults to recognize the signs of child sexual abuse, we can prevent harm from occurring and encourage individuals to act when they identify a child in crisis. As a provisional chapter of Prevent Child Abuse America (PCAA), we now have greater access to research and resources that will expand the reach of these efforts.

# The Theory of Change

Children Advocacy Centers are recognized by the U.S. Department of Justice and the American Bar Association as a best practice in responding to child victimization. Informed by and committed to research-supported practices, they facilitate the investigative process and help child victims and their families heal.

CACs also incorporate procedures endorsed by both policymakers and professionals, including trained forensic interviewers, videotaped child interviews, forensic medical exams, victim advocacy and support services, and access to mental health treatment.<sup>1</sup>

Outcome measurement surveys implemented by CACs across the country consistently indicate high levels of caregiver satisfaction. In fact, 94% of caregivers felt that because of their interaction with a CAC, they better understood how to best keep children safe in the future.<sup>2</sup>

In addition to intervention and healing, Safe Shores is committed to increasing efforts to educate adults about prevention of child sexual and physical abuse. The power of prevention cannot be overstated. Imagine if all DC residents had access to information that led to a significant shift in adult reporting and community vigilance in preventing future cases of abuse. Such knowledge and collective action would change the way the entire city responds to violence against children.

As part of past strategic planning efforts, the staff and board of Safe Shores have articulated the organization's Theory of Change – the progression of investments



*94% of caregivers felt that because of their interaction with a CAC, they better understood how to best keep children safe in the future.*

(inputs), activities that are informed by thought leaders and stakeholder needs, and progress indicators (outputs) that will lead to increased prevention, intervention, and healing for vulnerable and victimized children and families over time (outcomes and impact). Influential factors and assumptions believed to impact our success are also included in the model. This “logic model” or strategic map, with a few minor updates, continues to serve as a guide to the organization’s work.

The visual on page 14 is the quick-reference map, on which each of the strategic plan’s goals and expected outcomes are based. In this current strategic plan, the goals simultaneously cover short, medium, and long-term outcomes.

## Our Aspirational Impact

Children in DC are healthier and safer from childhood trauma, particularly child sexual and physical abuse, and exposure to fatal violence as indicated by local data and compared with national rates.

DC prioritizes children and their protection; child abuse prevention is consistently integrated into DC policies and organizational cultures.

The CAC Model is institutionalized and embraced as best practice in DC, as reflected by ongoing political, financial, and community support.

Safe Shores – The DC Children’s Advocacy Center serves and is recognized as the premier local organization for addressing child sexual and physical abuse through intervention, treatment, education, partnership, and leadership.

# Safe Shores – The DC Children’s Advocacy Center Logic Model





## Outcomes

### Short-Term (1-3 years)

Safe Shores promotes ongoing healing for children and caregivers as shown by:

1. Children's decreased symptoms related to abuse/trauma (Trauma Symptoms Checklist/UCLA PTSD scale)
  2. Families understand the MDT process and are satisfied with their CAC experience (surveys)
  3. Caregivers report increased knowledge to promote future child safety and understand the impact of violence on children (surveys)
  4. Families are connected with needed resources (surveys)
- MDT approach consistently yields enhanced collaboration and efficacy in case investigations
  - Ongoing compliance with all accreditation standards
  - Reported increased awareness/understanding of child sexual/physical abuse and neglect (Stewards of Children® evaluations)

### Mid-Term (4-6 years)

Children are safer because community attitudes, skills, and behaviors regarding child sexual/physical abuse and neglect are more proactive as shown by increased number of:

1. Local institutions with abuse and trauma prevention policies and services
  2. Requests to conduct trainings and presentations
  3. Trainings for child-serving professionals to enhance/expand the community's intervention capacity
- Reported increased awareness/understanding of impact of violence on children
  - NCA Accreditation renewal with ease because evolving CAC Standards are maintained and best practices implemented
  - PCAA Accreditation renewal with ease by maintaining and adhering to PCAA chartering core areas
  - Organizational infrastructure reflects best practices in all areas (HR, DEIBA, administration, finance, resource development, communications, technology, governance)
  - Internal and external recognition of Safe Shores' subject matter expertise

### Long-Term (7-10+ years)

- Children in the District of Columbia (DC) are healthier and safer from childhood trauma, particularly child sexual/physical abuse and neglect and exposure to fatal violence as indicated by local data and compared with national data
- Parents/caregivers and responsible adults are more vigilant in advocating for children and families
- DC prioritizes children, their well-being and protection; prevention of child sexual/physical abuse and neglect is consistently integrated into DC policies and organizational cultures
- The CAC Model is institutionalized and embraced as best practice in DC, as reflected by ongoing political, financial, and community support
- Safe Shores serves and is recognized as DC's premier organization for leadership in addressing and preventing child sexual/physical abuse and neglect through intervention, treatment, education, collaboration, and partnerships

### Assumptions

- Child sexual/physical abuse and neglect will continue to be committed
- Children are individuals, birth to 17 years of age
- DC law will continue to require a multidisciplinary response to child abuse
- Safe Shores – the DC Children's Advocacy Center will continue to play a unique and necessary role in convening the MDT and serving child victims
- There will be ongoing transitions of local political officials and MDT members

### Influential Factors

- MDT leadership/support
- Community engagement
- Political will
- Sustaining a values- and mission-driven organizational culture





# Since Our Last Strategic Plan

Our last strategic plan covered work occurring between October 2018 and September 2020 (the fiscal year). Highlights of our accomplishments during that period include:

## Renewal of Our Accreditation

The National Children's Alliance recognizes us as an accredited CAC with the distinction of "Operating with Excellence." Safe Shores has consistently maintained fully accredited status since opening our doors in 1995.

## We Have a New Teen Advocacy Initiative

While we have always served teenage victims of abuse, the implementation of SAVRAA led to our new Teen Advocacy Initiative, which allows us to reach those who historically may not have made it to our doors due to structural barriers.

## Increased Numbers of Children and Families Served, with an enhanced focus on unique needs.

After observing a shortage of providers in DC who specialize in treating young victims three to five years of age, our clinicians underwent training in the CPP model to expand our mental health services to very young children who have experienced abuse, trauma, or who have witnessed extreme violence. This new training provides the Clinical Services team with an additional tool to help DC's youngest victims by supporting and strengthening the caregiver-child relationship.



Across the organization, from hiring more clinicians, intentionally recruiting bilingual staff members, and partnering with other community organizations, we strengthened our ability to serve significantly greater numbers of English and Spanish-speaking children impacted by abuse and violence in DC. We also expanded our caregiver support groups to reach both English-and Spanish-speaking non-offending caregivers.

*Diversity, representation, and client access to services continue to be top priorities for our hiring and program expansion. Safe Shores' Clinical Services, Client Advocacy Services, and Prevention and Outreach Programs each now have at least one bilingual staff member.*

### **We've Built an Environment for Growth**

We work to ensure we successfully recruit and retain our staff. We do this by providing ongoing support and a continued commitment to meaningful diversity and leadership development.

For example, we invested in training to deepen staff members' skills and knowledge, while also maintaining provision of our staff benefit of financial contribution for the continuing education of our team members.

We also initiated relevant leadership opportunities with the goal of maximizing skillsets, and where possible, promoting from within.

### **Efficiency is Key**

We worked to improve organizational efficacy through strengthened collaboration with and support of MDT partners.

Maintaining a healthy MDT partnership after more than two decades requires constant attention, particularly since personnel and leadership at public agencies change regularly. Training and teambuilding were primary targets, strengthening the collaboration and investigation procedures.

In 2020, we further invested in this partnership by hiring a full-time manager whose sole focus is the advancement and support of the MDT.

*We've also increased community awareness and engagement around protecting children. We expanded our outreach and training to reach new audiences to help them recognize and prevent child abuse.*

**Protecting children is everybody's business.** That's why the Prevention and Outreach team is devoted to training caring adults in the community on how to prevent, identify, and react responsibly to child sexual abuse. During the last strategic plan period, we conducted 261 Stewards of Children® training sessions, empowering more than 4,000 adults to educate their respective networks.

### **Receiving Recognition**

We've been recognized for our work allowing us to foster and deepen partnerships with new and returning audiences.

In May 2020, we were one of two organizations to receive the Nonprofit Village Impact Awards. The award is given to organizations that enact social change through collaboration and sustainable management practices. We were honored to be selected alongside the Arts for the Aging as an organization that lives the values of community, collaboration, sustainability, integrity, and impact.

### **We've Lept at New Opportunities**

We were chosen as the charitable beneficiary of the highly competitive Many Hands Grant in 2017 as well as the "beneficiary nonprofit partner" of DC Women in Solidarity for Empowerment (DCWISE) in 2018. We have been consistently selected by the Catalogue for Philanthropy as one of the "Best Small Non-Profits in the D.C. Region" since 2004. In 2018 and 2019, we were renewed by the Catalogue for inclusion on their website as one of the top area nonprofits and listed once again during the 2021-2022 cycle.



## Strengthening Safe Shores' Leadership and Impact around Child Protection and Public Policy

We are excited to have been named the provisional DC chapter of PCAA, and eagerly look forward to taking our prevention efforts to the next level in fostering a safer and more nurturing DC for every child. PCAA is the nation's oldest and largest organization committed to preventing child abuse and neglect before it happens.

*Once the agreement is finalized in 2022, Safe Shores will become part of a nationwide network of PCAA chapters that provide parents, caregivers, youth-serving professionals, and other community organizations a wide variety of expert services and resources from across the country.*

We're proud to have a staff and leadership who play an active role in public policy. They were consistently invited to:

- Provide legislative testimony and make presentations
- Participate in discussions about child welfare, child sexual abuse prevention, and our organizational commitment to racial equity and inclusion
- Speak about other topics relevant to the children and families that we serve



# Responding to the Unexpected

Originally, development of this strategic plan began during the spring of 2020. The COVID-19 pandemic required immediate organizational action, leading to the decision to put the full strategic planning process on hold until 2021. The pause allowed for a period of transition, needed strategic responses to rapidly evolving conditions, and reflection around changing contexts and the implications for our future work.

The pandemic presented unprecedented challenges to communities nationwide and was particularly traumatic for children experiencing abuse, as well as their non-offending caregivers. The National Institutes of Health reported that the upheaval and stress caused by school closures, stay-at-home orders, unanticipated job losses, and general economic instability resulted in increases in parental depression and stress, noting that the “risk for child abuse significantly increases as stress accumulates.”<sup>3</sup>

With distance learning and parents out of work or working remotely, children and their caregivers constantly remained in close quarters. How did children escape violence when they may have been trapped at home all day, every day with an abuser?

Although the conditions for child abuse increased dramatically, the pandemic created barriers to detection and reporting. Before the pandemic, teachers and school administrators were often the first to notice and report abuse. School closures made that nearly impossible.



*Early on, multiple sources indicated a decrease in the reports of child abuse, with child welfare agencies nationwide describing drops as high as 51%.<sup>4</sup>*

From the beginning of the public health emergency in DC through the end of the 2019-2020 school year, our MDT partner, the DC CFSA, saw a 62% decline in hotline reports of abuse and neglect from the prior school year.<sup>5</sup>

Meanwhile, the cases reported were often more serious, requiring medical attention.<sup>6</sup> This disparity – between increased violence and abuse and the decrease in reporting – continues to reflect a dangerous situation for many children. Medical and mental health professionals predict that the educational, social, emotional, and physical damage from the pandemic will affect this generation of youth for many years to come.

### **Enhanced Service Delivery**

CACs rely upon a safe and welcoming location for a child to begin the investigation process with the MDT. For Safe Shores, the former Bundy School at 429 O Street NW is that location. With the shutdowns at the start of the pandemic, we were unable to see children in person. To protect both the children and our staff members, we had to rapidly shift all of our services to be online and remote.

### **Intervention and Prevention Matter!**

**Adverse Childhood Experiences (ACEs)**, such as child abuse, are associated with significantly increased risk for seven out of 10 leading adult causes of death, including heart disease, stroke, cancer, chronic obstructive pulmonary disease, diabetes, Alzheimer's, and suicide, according to the CDC.<sup>7</sup> Timely intervention and prevention of child abuse remain critical to the long-term safety and health of our community. Addressing the impact appropriately can mitigate lasting physical and emotional damage prior to adulthood.

To continue serving children we adapted our services in the following ways:

- Our therapists were the first to shift since telehealth platforms were widely in use prior to the pandemic. Safe Shores was among a relatively small number of CACs to make this transition early in 2020.
- After consulting with our MDT partner agencies about their needs, as well as with national experts on best practices, we began conducting tele-forensic interviews and establishing procedures that allowed the interviews to remain victim-centered, while withstanding legal scrutiny.
- Fortunately, because our clients are young, many took well to being interviewed via tablet. One teen told us that the tele-forensic interview worked for her because it would have been even more difficult for her to talk about her abuse face-to-face in the same room with the interviewer.

- For other clients, proximity and privacy limitations, limited or no internet access, and the preference for face-to-face support made it difficult for electronic interactions the appropriate or preferred approach for needed service.

*The new strategic plan makes room for new service delivery options and the tailoring of our responses based on child, teen, caregiver, and partner needs in ways that were not available prior to the pandemic.*

### Expanded Child Abuse Prevention

Prior to the pandemic, we conducted all training onsite at our Bundy location and where invited.

In 2020, we were among the first CACs to adapt the Stewards of Children® training to an online format, thereby increasing the numbers of people reached in a single session.



*The adaptations that were made now allow for expanded reach and greater opportunities for creative dissemination of our service offerings, public education, and calls to action*

We were also able to make greater use of social media to educate the public during Child Abuse Prevention Month, April 2020, as well as throughout the summer. Topics included sexual abuse prevention, the effects of spanking children, and needed vigilance surrounding sexually explicit media children may encounter online.

We remain grateful to our funders, donors, and volunteers who supported our efforts to meet the needs of our clients and to keep the message of prevention at the forefront of our work during seasons of challenge and learning.



# New Strategies for Meeting Child and Family Needs



The changes required by COVID-19 enabled us to center these drives around families' specific needs and desires. And while we welcome the time when we can resume face-to-face community participation, these changes – particularly the change to gift cards for Holiday Giving – were met with great appreciation from caregivers. As we move forward we will continue to come up with ways to meet families where they are.

A hallmark of our community engagement is the involvement of volunteers in support of our Pack2School and Holiday Giving programs to meet child and family needs.

In 2020, prior to the start of school, Safe Shores staff sent 134 backpacks with school supplies directly to our clients' homes and provided laptops and tablets to children who needed them for online learning. Similarly, in 2021, we served more than 150 clients with filled backpacks to facilitate the return to classrooms at the

start of the 2021-2022 school year.

Despite the inability to select and wrap gifts with volunteers at our building, we conducted our 2020 and 2021 Holiday Giving programs safely by creating virtual wish lists through Amazon and purchasing gift cards. Gift cards were a new addition for Holiday Giving and allowed the clients and their families to select the toys, treats, and clothing they most needed and wanted. Over the two years' drives, we served over 400 children.





# Maintaining Staff Morale and Productivity During Difficult Times

## The Nature of Our Work

Our work requires staff and clients to be able to connect about personal and difficult experiences, and it often carries a heavy emotional burden – even under normal circumstances. But these experiences can be even more difficult to process when we cannot be together in person.

## Changing How We Work

In addition to providing the tools and technology staff needed to accomplish work offsite, we implemented thoughtful policies, such as increased flexibility with the use of personal leave and allowing more hours to be rolled over while encouraging use of annual leave.

## We Showed Up For Each Other

We increased check-ins with staff supervisors and virtual coffee klatches with the Executive Director for those who may not have had regular interactions; and further enhanced communications with staff, including addressing race and equity issues.

## We Continued to Adapt

As the pandemic allowed, movement to the combination of onsite and virtual work was responsive to client, MDT partner, and staff needs.

**We're dedicated to staff wellness and care.**

# Advancing Equity With Clients, Within, and in the World



Safe Shores' vision of a world free of violence, where every child is cherished and everyone has a safe and healthy childhood, will only happen when racial equity is embraced and prioritized.

During the summer of 2020, after dedicating a June all-staff meeting to process the murder of George Floyd, we established the staff-led Equity Work Group (EWG) to keep racial equity explicitly front and center going forward. The EWG has used ProInspire Leadership Institute's publication "Crises as Catalyst: A Call for Race Equity & Inclusive Leadership" as a framework.

In addition to increasing our individual awareness and knowledge about racial equity and inclusion, we are committed to centering staff and board focus on the interpersonal and institutional skills, practices, and

policies we need to instill as we work together, and in service to our clients, partners, and other influencers.

And while Safe Shores' work focused on advancing equity well before the events of 2020 and 2021, the new strategic plan deepens the intentionality of our planning and actions – both internal and external – to ensure that we walk our commitment throughout at all levels of the organization.

## Creating an Inclusive Table

The delay in the start of our official strategic planning activities offered a new set of questions to answer in service to our mission and vision. Safe Shores' equity commitment extended to our strategic planning by intentionally choosing an inclusive approach to assess unmet needs, focus on our strengths and challenges, and inform the development of the goals and outcomes of this strategic plan.

*The results of our last strategic plan and the lessons learned during the pandemic shaped the questions asked of key stakeholders and thought partners.<sup>8</sup>*

Throughout the summer and late fall of 2020, more than 70 stakeholders – including client caregivers, MDT partners, other community and government organizations, and Safe Shores board and staff members – responded to specific and global questions about our work. The questions targeted our strengths and challenges; our response to the pandemic, economic and social developments, as well as demonstration of equity and inclusion; and best practice and multisector trends. We gathered

information in English and Spanish, through Zoom interviews and focus groups, during phone interviews as well as electronic name-optional surveys. We invited people to participate and answer candidly, then identified trends in their responses and then planned based on their input.

## We Listened and We Learned

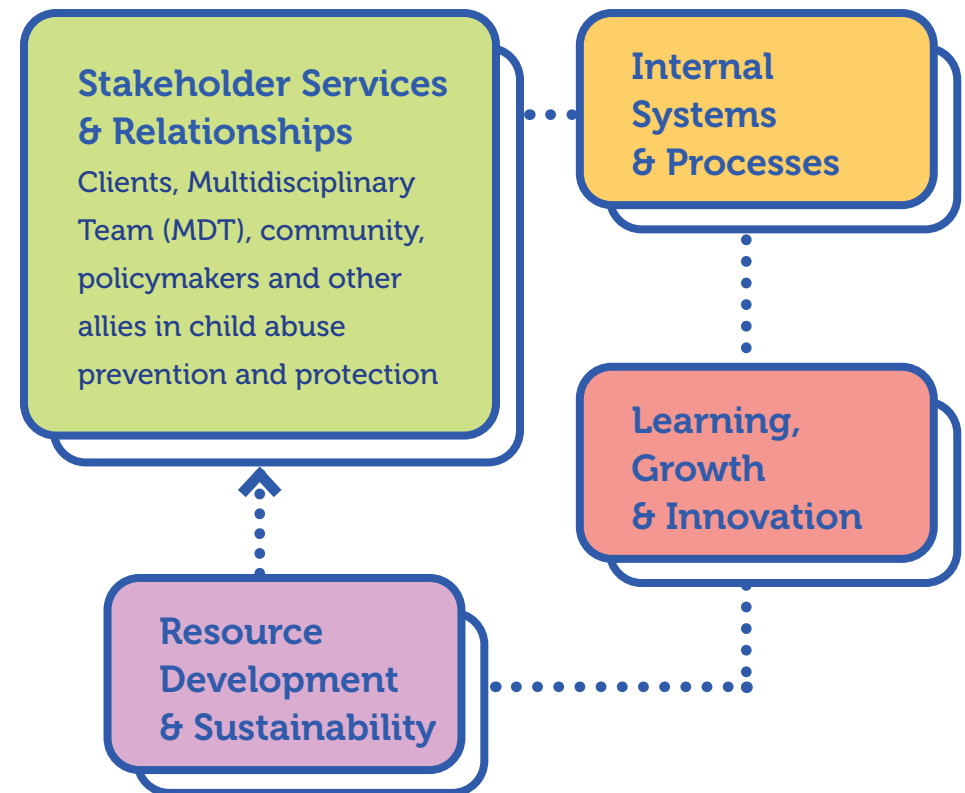
The answers resulted in a rich and vital diversity of ideas and insights, and in the case of staff and the board, greater accountability to our clients and to each other, making sure our services remain relevant, client-centered, partner-engaged, and sustainable. While the process took longer, the approach has been validated over time as we've seen stronger staff engagement, leadership, and morale; increased board attention to expansion and sustainability; and deeper relationships with those who informed our planning.

# Moving Forward

Our plans are organized using the Balanced ScoreCard approach,<sup>9</sup> targeting four thematic areas of organizational functioning: Stakeholder Services and Relationships; Internal Systems and Processes; Resource Development and Sustainability; and Learning, Growth, and Innovation.

The goals and expected outcomes of this strategic plan, have been intentionally selected to:

- Support the ways in which we meet client needs while expanding efforts to prevent future cases of child abuse through education and partnerships;
- Strengthen our infrastructure and capacity to meet those needs; and,
- Commit to ensuring sustainability and communication of our efforts beyond the goals of this plan.



The areas identified do not represent all organizational functions, but rather target specifically those areas in need of additional focus and/or investment to ensure mission fidelity, outcome success, and long-term sustainability. Safe Shores' Board of Directors and staff remain committed to maximizing the organization's strengths and addressing those areas in need of change.

### Our Goals

Specifically, this strategic plan will result in:

- More Therapy for More People
- Meeting People Where They Are
- A Stronger MDT Partnership
- Pulling Up the Roots of Child Abuse through More Prevention
- Strengthened Capacity, Sustaining Results
- Sharing Lessons Learned

*We recognize that every individual has a different path to healing. For that reason, Safe Shores has committed to providing a wide range of healing modalities and therapies to meet client and family member needs.*

The strategic plan strengthens and expands existing services and access to children, teens, and caregivers with increased focus on marginalized and underserved groups, responsive to their specific mental health and parenting needs.

### Our Commitment to Equity

We meet people where they are, literally and figuratively. Although Safe Shores serves all DC residents, individuals living in Wards 7 and 8 are overrepresented in our client base. We also know that for certain families for whom English is not their first language, access to culturally affirming resources is also a challenge. These families experience high barriers to accessing our prevention and mental health support services.

As we work to expand our Clinical Services and Prevention and Outreach Programs, our focus not only will be on increasing staffing, therapies, and services – because our work is all about people – but also on ensuring that we are culturally and geographically accessible to individuals who may be more likely to require our services and have the most significant barriers to access.

### **A Stronger MDT Partnership**

The power of the MDT partnership cannot be underestimated. Since the establishment of our CAC, thousands of children and teens have benefitted from this developmentally appropriate, coordinated response to their needs after experiencing the trauma of sexual abuse or other violence.

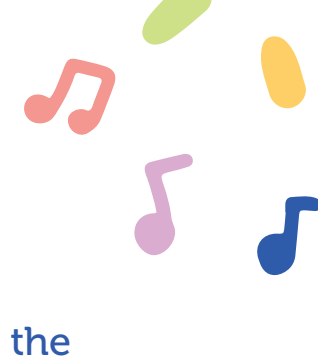
communication, current knowledge of best practices, and continued commitment to centering our work on survivors, not systems. This strategic plan targets annual goal setting and related activities to strengthen the relationship and our outcomes.

### **Strengthened Capacity, Sustaining Results**

The service goals of this strategic plan require a significant expansion of program and administrative staff, volunteers, internal systems, and physical space. During this plan's implementation, the footprint of Safe Shores will change from a small to mid-sized nonprofit, with implications for ensuring a strong infrastructure to support the proposed and future growth. The pacing of the next three years is deliberately incremental to accomplish these goals.

### **The Importance of Increasing Our Staff**

Our staffing will increase to bring our Prevention and Outreach Program to the next level, expanding our reach as a chapter of PCAA, and initiating a Centers for Disease Control-funded research collaborative with Northeastern University. We believe these intentional relationships will foster innovation and enable greater numbers of individuals, organizational partners, and community allies to be trained in the recognition and prevention of child abuse.



# We're A Learning Organization

This means we are committed to individual and collective study of information and the integration of systems that strengthen our ability to serve with excellence and lead both with humility and authority.

## Meeting Needs

We're continuously reviewing our services to clients, partner relationships, and connection to other stakeholders as well as to each other. It starts with engaging and listening to our stakeholders and thought partners with intentional frequency.

## Focusing on Internal Growth

Work groups, team meetings, and time and resources for individual and collective professional development also are among the ways we keep learning at the forefront of our activities. Staff are frequently invited to communicate our learning with other child welfare organizations, allies, as well as others interested in nonprofit management.

## Seeking to Improve

This strategic plan includes opportunities for evaluation of our work and wide communication of the learning in service to protecting children, fostering partner relationships, and demonstrating excellence. .



# Our Strategic Goals and Expected Outcomes for Fiscal Years 2022 – 2024

## 1.0 Stakeholder Services and Relationships – Clients

### Strategic Goal

**1.1 Increase the number of children, youth, and caregivers served** by expanding the reach of programs, with focus on marginalized and underserved groups, while maintaining the percentage of eligible clients served [e.g., teens up to age 18, individuals for whom English is a second language, individuals with disabilities, children with Problematic Sexual Behaviors (PSB)]

### Outcome Measures

- 10-15% increase in total number of underserved and marginalized populations served
- At least 75% of Memoranda of Agreement (MOA) cases are seen at Safe Shores for forensic interviews
- Increased referrals to Safe Shores' services by the Multi-Disciplinary Team (MDT) and community partners
- Continued provision of courtesy interviews for other jurisdictions and vulnerable populations (e.g., witnesses to homicide, domestic violence, other traumatic events)
- Established processes for supporting teens, 13 and up to 18 years of age, per Sexual Assault Victims' Rights Amendment Act of 2019 (SAVRAA)



## Strategic Goal

**1.2 Promote optimal utilization of the Child Advocacy Center (CAC) Model** by community organizations and the Multi-Disciplinary Team (MDT) in order to serve all eligible child and youth victims (e.g., witnesses to violence, the commercially sexually-exploited)

## Outcome Measures

- Annually increasing communication with and/or coordinated, intentional relationships with targeted community organizations that yield referrals to Safe Shores
- All eligible cases brought to Safe Shores receive a forensic interview, advocacy support, and/or clinical services as needed
- MOAs reviewed and revised at least biennially (e.g., to reflect CSEC, PSBs)
- Increased knowledge and application of trauma-informed practices



## Strategic Goal

**1.3. Continue to strengthen program quality and delivery**, with enhanced focus on equity, cultural competence, and humility

### Outcome Measures

- National Children's Alliance (NCA) standards consistently implemented throughout the organization
- Demonstrated program refinements and enhancements based on results of community assessment with emphasis on cultural competence and specific language needs
- Improved quality of clinical services based on fidelity checking, assessment scores, client self-reporting
- Increased array, scope, and/or frequency of prevention services available to clients, families, community, and other targeted constituencies
- Increased insight about client needs based on solicitation, review, and analysis of formal client feedback

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**1.4. Continue to expand programming aimed at strengthening parenting/caregiver skills** (to create safe environments and decrease children's exposure to violence) and increasing child and teen awareness of personal safety, consent, and boundaries

### Outcome Measures

- Increased parent/caregiver knowledge, behaviors, and understanding regarding intrafamilial violence prevention and parenting based on pre- and post-assessments
- Increased opportunities for children and teens to learn about healthy relationships and protective factors (e.g., training for individuals and schools)

## 1.0 Stakeholder Services and Relationships – Multidisciplinary Team (MDT)

### Strategic Goal

**1.5 Strengthen MDT partnership and efficacy to improve service delivery to children and families and promote best practices in child abuse investigations and treatment in the District of Columbia**

### Outcome Measures

- Annual increase in services to children and families from each DC ward
- At least 80% participation by fellow MDT agencies in at least 75% of MDT Advancement and Support Program activities (e.g., trainings, case reviews, scholarships, team building events)
- Identify and incorporate additional agencies to collaborate with the MDT, as needed
- Annually increasing number of referrals and subject matter expert requests to Safe Shores from MDT partners



## Strategic Goal

### 1.6 Strengthen MDT cohesiveness and continue to promote the value of the Children's Advocacy Center (CAC)

Model to the MDT through increased communication and collaboration

## Outcome Measures

- Annual partnership renewal, priority/goal setting and progress review by the partners of MDT goals
- Annually increasing opportunities for MDT connection through orientation, training, teambuilding, and recognition
- Strengthened knowledge and observance of policies and practices at all MDT agency levels regarding MOA compliance and the MDT partnership
- Consistent endorsement by MDT leadership of the value of the relationship between Safe Shores and other MDT members (e.g., annual letters of support, hearing testimony, intra-agency advocacy)
- Ensure sustainability of MDT Advancement and Support Program through adequate staffing and resources



# 1.0 Stakeholder Services and Relationships – Community, Policymakers, and Other Allies in Child Abuse Prevention and Protection

## Strategic Goal

1.7 Increase awareness and engagement around protecting children, teens' rights, SSafe Shores, and the CAC Model as best practice

## Outcome Measures

- At least two joint presentations annually by Safe Shores and MDT representatives to other service providers and community stakeholders
- 10% increase annually in the number of key community stakeholders and local officials who are made aware of Safe Shores and the MDT
- At least 10% increase in social media followers annually
- Annual increase in frequency and diversity of earned media placements
- Majority of locally elected officials knowledgeable about and supportive of the CAC Model (i.e., conceptually, financially)



## Strategic Goal

**1.8. Increase public awareness, knowledge, and action to address child abuse and neglect through expanded prevention research, resources, and best practices**

### Outcome Measures

- 10% increase annually in the number of adults and organizations trained in/knowledgeable about child sexual abuse prevention (i.e., Stewards of Children®, additional trainings, consultations)
- Training participants are demonstrably more knowledgeable about prevention based on pre- and post-test results
- Tracked community actions that reflect increased knowledge (e.g., surveys, reports of child abuse, revamped institutional policies/ practices)
- Established family strengthening programming through community outreach, engagement, and training
- Formally launched Prevent Child Abuse DC (PCA-DC) as a chapter of Prevent Child Abuse America (PCAA) and established partnerships with local organizations consistent with PCAA requirements

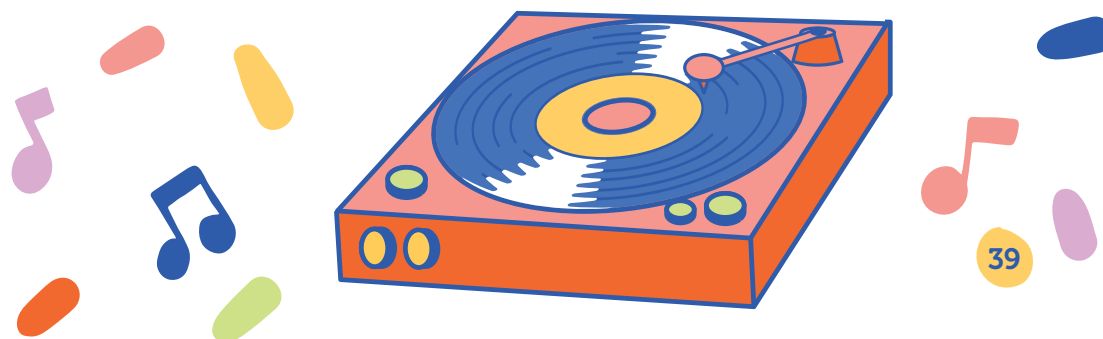


## Strategic Goal

**1.9 Strengthen Safe Shores' leadership, recognition, and impact around child protection and public policies that benefit children**

### Outcome Measures

- Bi-annual assessment of and reporting on the status of child sexual and physical abuse in the District of Columbia
- Annual increase in activities identifying and advancing policies and initiatives prioritizing child wellbeing and protection
- Annual increase in (tracked) number of referrals and subject matter expert requests to Safe Shores from external parties
- Increased involvement in targeted events and secured public endorsements that raise awareness about child abuse and prevention





## 2.0 Internal Systems and Processes

### Strategic Goal

**2.1. Consistently advance the values and mission-driven organizational culture of Safe Shores, both internally and externally, with emphasis on anti-racism, equity, cultural humility, mindfulness, and accountability**

### Outcome Measures

- Ongoing assessment and refinement of organizational protocols, policies, and rituals that promote performance success, employee engagement, and job satisfaction (i.e., each measured and tracked at least annually)
- Sustained commitment to individual and professional development, indicated by thoughtful planning and investment of resources (i.e., budget, time, targeted training)
- Demonstrated enhanced skills in applying organizational values as reflected by self-assessment (pre and post surveys) and formal feedback from colleagues and supervisors



## Strategic Goal

**2.2. Attract, retain, develop, and support excellent staff** with continued commitment to meaningful diversity, equity, inclusion, and belonging (DEIBA)

### Outcome Measures

- Staffing is sufficient to meet or exceed organizational goals
- Continued development and implementation of Human Resources (HR) protocols and practices aligned with organizational values (e.g., onboarding, ongoing performance feedback, and timely annual reviews)
- Annual minimum 80% overall job satisfaction rate by at least 90% of employees
- Improved staff performance (i.e., all employees average 80% in their overall evaluation)
- Completed and updated succession plans for senior-level positions
- Annual, or as needed, review and refinement, of standard operating policies (SOPs) and procedures consistent with organizational needs, goals, and values
- Continued formal support and development of diverse talent to take on leadership responsibilities at all levels of the organization



## Strategic Goal

**2.3 Strengthen and centralize Safe Shores' internal communications** to facilitate collaboration across the organization as well as consistency in messaging brand representation

### Outcome Measures

- Regularly updated and consistently implemented internal strategic communications plan
- Consistent and regularly scheduled opportunities for information sharing and inclusive planning throughout the organization
- Effective system for sharing programmatic and administrative updates with communications and development
- Consistent and cohesive application of brand identity throughout the organization
- Communications tools are current and used regularly and appropriately by staff and volunteers

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**2.4. Facilitate regular engagement and information sharing with the MDT partners** to strengthen effectiveness of the CAC Model

### Outcome Measures

- Systematized methods of timely information sharing among partners (relevant updates in practices, policies, personnel, opportunities and resources)
- Demonstrated mutual understanding of all partner roles and responsibilities
- Increased community awareness of the MDT and its benefits

## Strategic Goal

**2.5 Develop and strengthen external communications and marketing resources, strategies, and tools to enhance organizational effectiveness, growth, and sustainability**

### Outcome Measures

- Regularly updated and consistently implemented external communications plan
- Increased community awareness, knowledge, and partnerships; positioned as a thought leader and credible educational resource across sectors

---

**2.6. Strengthen Safe Shores' infrastructure and administrative processes to best meet user needs by continuous assessment and refining of administration, technology, and operations systems (including hybrid options)**

### Outcome Measures

- Systems and applications regularly updated to promote and facilitate effective intra-agency communication; HR management; data collection; and client information management
- Standard Operating Procedures (SOPs) that govern organizational practices developed and updated as needed (e.g., IT usage, brand management, gift acceptance, social media usage)
- Information Technology (IT) systems are responsive to organizational needs and reflect industry standards for effectiveness
- Maximized usage by staff of the organization's administrative resources (e.g., IT, employee benefits)



## Strategic Goal

**2.7. Develop and/or refine policies and practices that guide program and organizational operations reflective of best practice, stakeholder input and feedback, as well as industry standards consistent with risk management needs (including hybrid options)**

### Outcome Measures

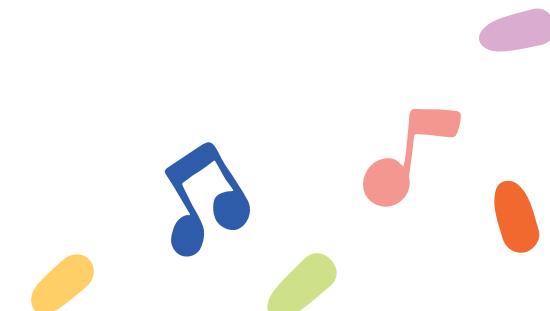
- Annual solicitation, review, and update as needed, of all documents, policies, and procedures governing the organization (i.e., programs and administration)
- Demonstrated understanding of all programs and administration by staff and board through/based on formal and informal assessment

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**2.8 Maximize the effectiveness of Safe Shores' Board of Directors to govern and sustain the mission, vision, and values of the organization**

### Outcome Measures

- Alignment and maximization of all board member skills and relationships in support of the work of Safe Shores
- Robust and strategic board recruitment pipeline that reflects the skills, expertise, and equity mindset needed to ensure the organization's continued mission fidelity, growth, and success
- All key aspects of governance are observed and effectively implemented
- Regularly scheduled self-assessment to determine strengths and needs
- One to two team-building activities held each year with at least 75% participation



## 3.0 Resource Development and Sustainability

### Strategic Goal

**3.1. In support of organizational growth, expand and maintain adequate resources, derived from diverse and sustainable revenue and other sources aligned with organizational mission and values**

### Outcome Measures

- Continued funding diversification with a goal of maintaining at least 50% from public revenue sources and at least 40% from private sources
- Increase private revenue by 10% through cultivation of new partners and stewardship of existing relationships
- At least 10% annual increase of in-kind donations including pro bono support, consistent with organizational needs
- At least 20% of annual and sustaining donors give annually at the same level or greater than in the previous year





## Strategic Goal

### 3.2. Develop and maintain effective volunteer and internship programs to support organizational mission

#### Outcome Measures

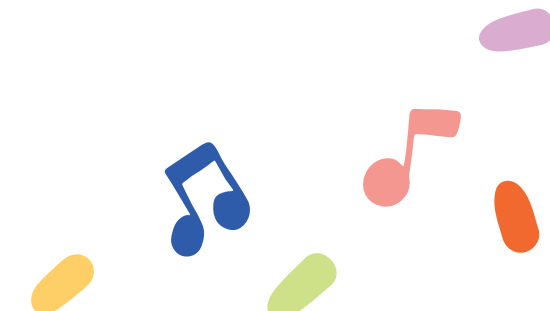
- Coordinated process developed and implemented to ensure best use and appropriate support of volunteers and interns
- Uniform written policies governing Safe Shores' recruitment, training, support, and acknowledgement of individuals who give time to Safe Shores
- Centralized management system established to track retention, time, and recognition of service

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### 3.3 Acquire additional space to increase access for people who live in underserved DC Wards and communities as well to expand services

#### Outcome Measures

- Projected timeline and plan for acquisition and future growth
- Expanded access in underserved communities to organizational services and programs
- Established new services (e.g., for caregivers, children with PSBs; teens; wellness)





## 4.0 Learning, Growth, and Innovation

### Strategic Goal

**4.1. Expand board and staff knowledge of Safe Shores' services and subject matter expertise across programs and departments to enhance collaboration**

### Outcome Measures

- Board and staff communicate knowledgeably about Safe Shores' mission, vision, and values
- Systems and policies developed and implemented to transfer knowledge and information

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**4.2. Continue to strengthen, acquire, and apply knowledge and best practices to operationalize diversity, equity, inclusion, and belonging (DEIBA) and enhance organizational culture**

### Outcome Measures

- Consistent and ongoing organizational investment of time and resources to advance DEIBA internally and with those Safe Shores serves
- Updated organizational policies, practices, and procedures in alignment with mission, vision, values which reflect high priority of DEIBA
- Staff, Board, volunteers/interns consistently practice caring and respectful interactions, as well as behaviors that reflect equity mindset with respect to self, people, organizations, and systems
- Ongoing, active commitment to the cultivation of diverse board, management team, and staff integral to and shaping the work of the organization



## Strategic Goal

**4.3. Strengthen organizational effectiveness through ongoing investment of resources, and enhanced policies, protocols, and procedures to prevent and/or mitigate staff vicarious trauma, and to promote resiliency and collective wellbeing**

### Outcome Measures

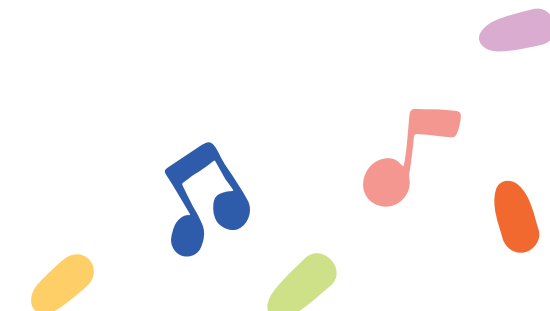
- Established and regularly updated framework for assessment and prevention of vicarious trauma
- Consistent personnel practices and staff interactions that reflect resiliency based on informal and formal feedback
- Organizational assessments, over time, indicate positive degrees of change in Safe Shores' effectiveness as well as individual and collective wellbeing
- Organizational staffing and scheduling are consistent with the goal of minimizing vicarious trauma for staff

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**4.4 Implement a system for regular evaluation of program and organizational effectiveness and/or impact**

### Outcome Measures

- Regularly collected and assessed data to inform planning and decision making
- Identification of program and organizational areas of strength and need
- Programs and organizational operations reflect learning from evaluation results







## Strategic Goal

**4.5. Share learning, growth, and innovation efforts with the MDT, nonprofit, government, and philanthropic sectors**

### Outcome Measures

- At least six presentations annually by Safe Shores
- Continued recognition for best practices and/or innovation (e.g., honors/awards, media attention/inquiries, presentation requests)



# An Invitation

Many of the forced changes we endured in the early stages of the pandemic have enabled us to look more deeply at our work and how we may tailor experiences to particular age groups and/or situations and continue to adapt to ever-changing needs. We remain in listening and learning mode.

The current environment has given us greater insights into the harsh realities of our clients' lives, requiring increased staff awareness about housing and privacy issues, facilitating client connections to culturally affirming services and systems, and aligning with partners who understand and demonstrate the same.

The great American author James Baldwin wrote:  
***Not everything that is faced can be changed... but nothing can be changed until it is faced.***


Refusal to face the reality of child abuse only allows this heinous crime to fester and spread. More than 25 years of doing intervention work AFTER the abuse has occurred has led us to the following conclusions about child abuse.



## It is pervasively prevalent.

- 1 in 10 children will be sexually abused before their 18th birthday. <sup>10</sup>
- Of children who are sexually abused, 20% are abused before the age of 8. <sup>11</sup>

Recent press continues to spotlight survivors who were child and teen victims at the hands of physicians, coaches, clergy, and others in positions of power. The numbers indicate a public health epidemic and criminal justice crisis.



*The trauma of child abuse is at the bitter root of so many of society's ills, pathologies, and much of the anger, violence, and pain we see around us.*

### **It is personal.**

Child abuse affects us all directly or indirectly.

Whether it happens to us directly, someone we know and care about, or to a stranger – we all feel the impact.

### **It is preventable.**

When adults learn the facts about child abuse, they feel empowered to talk about it openly and confront it when they suspect it. When adults are educated about what they can do to prevent child abuse, children are safer.

### **Our Wish**

We invite you to connect with us and shine light and hope into the darkness of many children's lives – to help local communities have the courage to not look away from child victimization but to actively prevent it; to support our work of intervention, healing, and hope where needed. To do that would stem the tide of this epidemic and literally change the future.

To learn how you can get involved visit [safeshores.org](https://safeshores.org) or call 202-671-SAFE (7233).

**Let's face child abuse together!  
We can create what better looks like.  
Children are counting on us.**

# ACKNOWLEDGMENTS

The strategic plan was developed with the expertise and thoughtful guidance of the following Safe Shores – The DC Children’s Advocacy Center leaders:

## Strategic Planning Task Force

**Michele Booth Cole, Executive Director**

Safe Shores – The DC Children’s Advocacy Center

**Lisa Dominguez, Clinical Services Director**

Safe Shores – The DC Children’s Advocacy Center

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**Walter Kim, Board Vice Chair**

Managing Principal and Strategist, GRAPHEK

**Jessica Lopez-Enriquez, Child & Adolescent Therapist**

Safe Shores – The DC Children’s Advocacy Center

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Program Director, Pediatric Lung Disease and  
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**Maegan Scott, Board Member At-Large**

Founder & CEO, Wayfinding Partners

**Twana Sherrod, Deputy Director**

Safe Shores – The DC Children’s Advocacy Center

**Kalphria Wilson, Manager of MDT Advancement & Support**

Safe Shores – The DC Children’s Advocacy Center

*Names and titles appear as they were at time of planning and interviews.*

## Board Of Directors (Fiscal Year 2021)

### Executive Committee

**Shana Glickfield**, Board Chair Partner,  
Beekeeper Group, LLC

**John Gilmore**, Board Treasurer  
Principal Business Analyst, The MITRE Corporation

**Walter Kim**, Board Vice Chair  
Managing Principal and Strategist, GRAPHEK

**Deborah Jospin**, Board Secretary  
Founder and Principal, Jospin Strategic

**Maegan Scott**, Board Member At-Large  
Founder & CEO, Wayfinding Partners

*Names and titles appear as they were at time of  
planning and interviews.*

## Board Members

**Michele Booth Cole**, Ex Officio

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Advocacy Center

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Partner, Gilbert LLP

**Aruna Natarajan**

Program Director, Pediatric Lung Disease and  
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**Poet Taylor**

Radio Host & Producer, WPGC Radio, FM | WPGC TV



## Staff (Fiscal Year 2021)

### Administrative & Executive

**Michele Booth Cole**, Executive Director

**Marcia E. Reynolds**, Director of Administration

**Twana S. Sherrod**, Deputy Director

**Lauren Snell**, Operations Manager

### Clinical Services Program

**Natalie Delcid**, Clinical Services Coordinator

**Lisa Dominguez**, Clinical Services Program Director

**Jessica Lopez-Enriquez**, Child & Adolescent Therapist

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**Christopher Gamble**, Client Advocate

**Ashley Harrell**, Client Advocacy Services Program Director

**Georgia Manu**, Teen Advocate

**Sharde McConnell**, Manager of Family Advocacy Services

**Sarafina Milgrom**, Client Advocate

**Katie Puria**, Family Advocate

### Forensic Services Program

**Rachel Booker**, Forensic Services Program Director

**Kristen Dunaway**, Forensic Services Associate

**Janice Marmol**, Child & Adolescent Forensic Interviewer

**Anissa Tanksley**, Child & Adolescent Forensic Interviewer

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### Prevention & Outreach Program

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**Alejandra Monroy**, Bilingual Prevention Specialist

**Kaylan Weems**, Prevention & Outreach Associate

*Names and titles appear as they were at time of planning and interviews.*



# Key Stakeholders

Invaluable input was provided by key stakeholders – client caregivers, agency partners, volunteers, and contributors – and thought partners – subject matter experts and influencers – committed to the work of Safe Shores. We extend our sincere thanks to the following individuals for their candid and constructive assessments of the organization’s strengths, opportunities for growth, and ideas for consideration.

## Members of Safe Shores’ English and Spanish Caregiver Support Groups

(names are not included, to respect their privacy)

## Agency Partners, Volunteers, and Contributors

### Maxine Akai, Program Coordinator

Hope Court/Department of Behavioral Health

### Megan Aniton, Assistant Attorney General

Domestic Violence & Special Victims Section, Office of the Attorney General

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**Chris Thomas**, Spoken Word Artist, Speaker  
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Masonic and Eastern Star Home Charities

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### **Thought Partners**

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**Maurice & Adrian McClanahan**, Founder/Volunteers  
#Santacause

**Anita Odom**, Chief Operating Officer for Chapters  
Prevent Child Abuse America

**Tatiana Torres**, Director of External Affairs  
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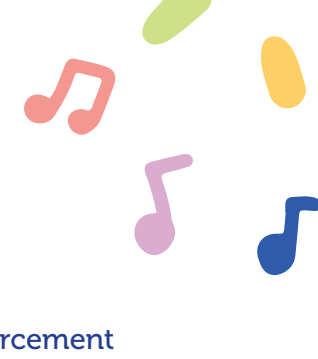
**Julie Wadler**, President  
Epiphany Productions

**Shawn Yancy**, Founder & CEO  
Girls' Night Out by Shawn Yancy

**Joan Yengo**, Chief Program Officer  
Mary's Center

*Names and titles appear as they were at time of planning  
and interviews.*





# Glossary

**Adolescent, Teen, Youth:** Terms used interchangeably within this publication, which describe the phase of life between childhood and adulthood, from 13 to 17 years of age.

**Adverse Childhood Experiences (ACEs):** The CDC defines ACEs as potentially traumatic events that occur in childhood, such as experiencing violence, abuse, or neglect, or witnessing violence in the home or community.

**Child Sexual Abuse:** Any sexual act between an adult and a minor, or between two minors, when one exerts power over the other. It also includes non-contact acts such as exhibitionism, exposure to pornography, and voyeurism. Child sex trafficking and the commercial sexual exploitation of children are forms of child sexual abuse.

**Children's Advocacy Centers (CACs):** One-stop organizations which minimize the trauma experienced by children and adolescents who have been identified as victims of sexual or physical abuse, making children's needs the center of the investigative process. They coordinate the investigation, treatment, and prosecution of child abuse cases by utilizing multidisciplinary teams of professionals involved in child

protective and victim advocacy services, law enforcement and prosecution, and physical and mental health [Sources: Safe Shores; Office of Juvenile Justice and Delinquency Prevention (OJJDP)]

**Commercial Sexual Exploitation of Children (CSEC):** Refers to a range of crimes and activities involving sexual abuse or exploitation of a child for the financial benefit of any person or in exchange for anything of value (including monetary and non-monetary benefits) given or received by any person. Examples of crimes and acts that constitute CSEC:

- Child sex trafficking/the prostitution of children;
- Child sex tourism involving commercial sexual activity;
- Commercial production of child pornography;
- Online transmission of live video of a child engaged in sexual activity in exchange for anything of value (Source: Office of Juvenile Justice and Delinquency Prevention).



**Darkness to Light®:** A nonprofit organization dedicated to child sexual abuse prevention through the combination of research, education, and community advocacy. The organization is the originator of Stewards of Children®, the prevention training curriculum used by Safe Shores to target individual and community response to the signs and prevention of child sexual abuse.

**Equity:** The quality of being just, fair and impartial. Unlike “equality,” which states that all people should receive the exact same treatment regardless of the (unequal) outcome, equity at its core focuses on the desired outcomes and ensures they are just and fair for all.

**Fiscal Year:** The time period on which our program services, operations, and related budget is based – October 1, to September 30, each year. The strategic plan covers Fiscal Years 2022 – 2024, October 1, 2021 to September 2024.

**Multidisciplinary Team (MDT):** The cross-discipline team that works on child abuse investigations. In the District of Columbia, the MDT includes Safe Shores as CAC and MDT organizer, DC Child and Family Services Agency (CFSa), Metropolitan Police Department of the District of Columbia (MPD), Office of the Attorney General for the District of Columbia (OAG), United States Attorney’s Office for the District of Columbia (USAO), and Children’s National Medical Center.

**National Children’s Alliance (NCA):** The national association and accrediting entity for children’s advocacy centers (CACs). NCA requires an in-depth review every five years to ensure adherence to the highest standards of practice. Safe Shores has maintained full accreditation status since 1995.

**Prevent Child Abuse America (PCAA):** The nation’s oldest and largest organization “committed to preventing child abuse and neglect before it happens.” (Source: PCAA) Safe Shores will serve as the DC Chapter of PCAA during implementation of this strategic plan and will become part of a nationwide network of chapters that provide parents, caregivers, youth-serving professionals, and other community organizations a wide variety of expert prevention services and resources from across the country.

**Sexual Assault Victims’ Rights Act Amendment 2019 (SAVRAA):** Amends the 2014 Act of the same name that led to creation of a task force to study best practices in supporting victims of sexual assault and develop recommendations for the District of Columbia. The amendment details, among other provisions, the needs, rights and criteria for serving DC teens, 13 to 17 years of age, who have been sexually assaulted.

**Stewards of Children® Training:** Child sexual abuse prevention curriculum developed by Darkness to Light® that serves as a foundation of our Prevention and Outreach Program. The training teaches adults how to prevent, recognize, and react responsibly to child sexual abuse.

## References

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<sup>2</sup> <http://www.nationalchildrensalliance.org/proven-results>. Retrieved September 23, 2014

<sup>3</sup> Lawson, M., Piel, M.H., and Simon, M. (2020). Child Maltreatment during the COVID-19 Pandemic: Consequences of Parental Job Loss on Psychological Abuse Towards Children. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7472978>

<sup>4</sup> Steward, N. (2020). Child Abuse Cases Drop Percent. The Authorities Are Very Worried. Retrieved from <https://www.nytimes.com/2020/06/09/nyregion/coronavirus-nyc-abuse.html>

<sup>5</sup> Hackett, A. (April 2021). Calls to D.C. Child and Family Services Agency Have Dropped, but That Doesn’t Mean Child Abuse Has Stopped. *Washington, City Paper*.

<sup>6</sup> Sparks, S.D. (2021). Child Abuse Cases Got More Severe During COVID-19. Could Teachers Have Prevented It? Retrieved from [www.edweek.org/leadership/child-abuse-cases-got-more-severe-during-covid-19-could-teachers-have-prevented-it/2021/06](http://www.edweek.org/leadership/child-abuse-cases-got-more-severe-during-covid-19-could-teachers-have-prevented-it/2021/06)

<sup>7</sup> About the CDC-Kaiser ACE Study | Violence Prevention|Injury Center|CDC. (2020, April 13). [www.cdc.gov/violenceprevention/aces/about.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Fabout.html](http://www.cdc.gov/violenceprevention/aces/about.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fviolenceprevention%2Facestudy%2Fabout.html)

<sup>8</sup> Our **key stakeholders** are those individuals and/or groups that benefit directly from or invest in the success of our work. **Thought partners** are subject matter experts and influencers from various sectors familiar with our efforts and able to offer unique perspectives and recommendations to enhance our impact.

<sup>9</sup> Kaplan, R. and Norton, D. (1992). The Balanced ScoreCard: Measures that Drive Performance. Harvard Business Review. Cambridge, MA: Harvard Business Press. The Approach serves as both a process to strategically plan and measure success, and a management method to monitor the plan over time.

<sup>10</sup> Townsend, C. & Rheingold, A.A. (2013). Estimating a child sexual abuse prevalence rate for practitioners: studies. Charleston, SC, Darkness to Light®. Retrieved from [www.d2L.org](http://www.d2L.org).

<sup>11</sup> Darkness to Light®. (2015). Child Sexual Abuse Statistics The Magnitude of the Problem.





