



**PREVENTION EDUCATION ON GENDER-BASED VIOLENCE AND HUMAN TRAFFICKING
2024 SCOPE OF SERVICES – JANUARY 1, 2024 THROUGH DECEMBER 31, 2024**

INSTRUCTIONS: Agency receiving an award by the City of Chicago Department of Family and Support Services (DFSS) Division on Gender-Based Violence (DGBV) must complete and submit all required documents as requested in the DFSS Aware Notice letter.

Submit completed forms to:
Project Manager:

1. Scope of Services
2. Budget
3. Lease Agreement, if applicable.
4. Affidavit with Lease Agreement, if applicable

Submit completed forms to:
Contract Liaison:

1. Agreement Signature Page
2. Current Certificate of Insurance
3. Economic Disclosure Statement (EDS) Certificate of Filing

Section One – Agency Information

Agency Name:	
Project Name:	
Administrative Agency Address	
Phone	
Agency Website	

Budget Allocation

PO Number	Award Amount (\$)	Contract Type/Funding Source

Executive Director:

Name:	
Phone:	
Email:	

Program Director:

Name:	
Phone:	
Email:	



Fiscal Contact:

Name:	
Phone:	
Email:	

Data/Reporting Contact:

Name:	
Phone:	
Email:	

Other Project Funding Sources

Please list all funding sources for your total program budget

Match Funding Source	Amount
Total Program Budget	\$

Program Site Location(s), Hours, Languages and Survivors Served

Please provide the required information by corresponding site number

IMPORTANT DIRECTION: If Delegate Agency has more than one site, enter the information in the same order of site number throughout the document.

Site	Program/Site Name	Address	Zip	Ward	Community Area
1.					
2.					
3.					
4.					
5.					



Hours of Operation

If site is open 24-hours per day, 7-days per week, check the box 24-hrs / 7-days. If not, for each day, list the start time and

Site	24-hrs / 7-days	SUN (from-to)	MON (from-to)	TUES (from-to)	WED (from-to)	THU (from-to)	FRI (from-to)	SAT (from-to)
1.								
2.								
3.								
4.								
5.								

Community Areas and Wards of Survivors Served

Please provide the number of survivors served per site and Community Area(s) or Ward(s) survivors served are from, or their residency.

Site	Total No. of Survivors to be Served in 2022 per site	Survivor Community Area(s) Served	Survivor Ward(s) Served
1.			
2.			
3.			
4.			
5.			

Provide the language spoken by staff and available to survivors at the site

Site	Languages Provided at Site
1.	
2.	
3.	
4.	
5.	



SECTION TWO – PROGRAM DESCRIPTION

This Program supports prevention education efforts that align with the goals and objectives of the Citywide Strategic Plan - a dedicated response to the COVID-19 pandemic that includes gender-based violence reduction as a priority to improve City Health and Wellness. A report released by the National Commission on COVID-19 and Criminal Justice shows that GBV in the U.S increased significantly following the imposition of lockdown orders during the 2020 pandemic and the U.S. Treasury Department highlighted support for victims of domestic violence as an enumerated use under the Coronavirus State and Local Fiscal Recovery Funds’ Final Rule. This evidence was reflected in the City of Chicago as well. Calls to the Illinois Domestic Violence Hotline increased and have yet to return to pre- pandemic trends. In 2021, the DV Hotline calls increased 7% from the previous year and as of Aug 31st, 2022, the Hotline has answered 23,981 total distinct calls, texts, and chats, which is nearly the 85% benchmark of the previous year, and on track to break last year’s reported amounts. 35% of these calls to the DV Hotline originate in Chicago.

This Program is a direct response to the COVID-19 pandemic by preventing and reducing the increased levels of violence that the City of Chicago and the nation has experienced. It does so by reaching Chicagoans through prevention education and awareness, targeting youth, caregivers, and the public at large in their own community settings.

PROGRAM REQUIREMENTS

DFSS has selected Delegates that will provide GBV/HT education and awareness in formats and settings where young people, caregivers, and other community members are predominately served or are seeking services. The program should be centered on direct interactions with participants and not on Citywide public awareness or exclusive social media campaigns.

DFSS has prioritized organizations that operate in the communities that they serve and has programs to conduct outreach in communities in one or more of the Chicago Department of Public Health Chicago COVID-19 Vulnerability Index (CCVI) Community Areas. The Community Areas were selected for the percentage of poverty, income level, unemployment, uninsured, educational attainment, youth 17 and under, persons with disabilities, single-parent households, and crowded housing. See the list provided below:

Chicago COVID Vulnerability Index – List of Focus Communities		
Archer Heights	Gage Park	South Chicago
Auburn Gresham	Grand Boulevard	South Deering
Austin	Greater Grand Crossing	South Lawndale
Avalon Park	Hermosa	South Shore
Belmont Cragin	Humboldt Park	Washington Heights
Brighton Park	Lower West Side	Washington Park
Chatham	McKinley Park	West Elsdon
Chicago Lawn	New City	West Englewood
Douglas	North Lawndale	West Garfield Park
East Garfield Park	Oakland	West Lawn
East Side	Riverdale	West Pullman
Englewood	Roseland	Westridge
		Woodlawn



Delegates will be required to:

Must:
1. Target the focus communities and describe prior history in serving in the focus communities. See table above – <i>Chicago COVID Vulnerability Index – List of Focus Communities</i> - for list.
2. Acknowledge the intersectionality of racism and gender inequality by incorporating the historical context of GBV/HT into the curriculum or proposed project.
3. Be tailored to the intended participants, culturally appropriate and responsive to the needs of people with disabilities and non-native English speakers. When tailoring the content, demonstrate how – <ol style="list-style-type: none">it will use a multigenerational approachBe delivered in formats that meet the needs of all participants, regardless of their disabilitiesBe offered and available in multiple languages
4. Help identify and address all forms of GBV/HT in an interactive format designed to best reach and enable the intended audience to understand the future impact of ignoring it's consequences.
5. Describe how social media and other electronic means (messaging, online communication, etc.) play a role in perpetuating violence or coercion.
6. Be prepared with the knowledge and tools to discuss abuse and violence with the intended audience.
7. Respond appropriately and in a trauma-informed manner to disclosures of abuse or violence
8. Offer community resources and referral information to participants to address: <ol style="list-style-type: none">More information on GBV/HTConnecting with resources on their experience with GBV/HTWhat to do if someone discloses their experienceCollect participant feedback on the services provided. Should also be participant appropriate.

1 - Partnerships

Delegates may partner or subcontract with trusted community-based organizations that serve GBV/HT survivors. A delegate that chooses to subcontract must include as part of the Scope of Services:

- Letter(s) of support where the organization identifies as a partner or subcontractor
- Description of the nature, history, and extent of partnership, including past successes and accomplishments of the partnership
- Where the subcontractors are located and will provide services
- The type of services they will provide and
- How they will serve the focus population indicated up above
- Any funds being exchanged

Delegates may establish partnerships to ensure the proposed project has the necessary expertise, experience, and capacity to engage the focus population on GBV/HT. DFSS encourages partnering or subcontracting with culturally specific and community-based organizations that currently operate in the proposed targeted communities. A partner may serve the role as:

- A GBV/HT service provider, if not the Delegate
- An organization or program with demonstrated experience providing support, enrichment and/or development programming to youth, caregivers, and the community at large.



2- Program Areas

Funding under this program must be used to develop and/or implement strategies that educate youth, caregivers, and the community at large about GBV/HT’s impact. Education and Awareness is a required Program Activity that Delegate proposals must address in the design and execution of their prevention strategy.

	Proposed Program Component	Examples
Education and Awareness Content	<p>Required:</p> <ul style="list-style-type: none"> • Targets the focus communities in the CCVI list of Focus Communities – found in Section C, under Program Requirements • Acknowledges the intersectionality of race and gender inequality • Tailors programming for the intended participants, ensuring it is culturally appropriate and responsive to the needs of people with disabilities and non-native English Speakers. • Includes information on abuse and violence and identifies and addresses GBV/HT in an interactive format to best reach the intended audience • Describe how social media and other electronic means (messaging, online communication, etc.) play a role in perpetuating violence or coercion. • Provides takeaway materials and/or information on how to continue the conversation post-session(s) for all target populations • Offers community resources <p>Select One:</p> <ol style="list-style-type: none"> 1. Provides overview of laws and regulations that govern rights of survivors where appropriate (i.e., minors confidentiality and ability to consent to services) 2. Supports peer-to-peer models that allow survivors to provide information, dismantle stigma, and debunk myths 	<ul style="list-style-type: none"> • Virtual interactive presentation for teens that includes among other things, myth busting examples of GBV/HT, some video content from youth survivors* and how to deal with online abuse • In-person presentation to parents that describes, among other things, the laws, and regulations around GBV/HT, how to identify the signs their teen may be a victim, and local resources they can lean on later <p>*Survivor stories or survivor content used must have the consent of the survivor, unless content creator has made the material available for the public</p>



3 – Program Delivery

	Required	Select <u>One</u> , at Minimum	Examples
Modality	<ol style="list-style-type: none"> 1. Collect and respond/adapt to participant feedback 	<ol style="list-style-type: none"> 1. Visual and auditory learning 2. Interactive media 3. Group discussions 4. Social media 5. Other creative methods of learning 	<ul style="list-style-type: none"> • Oral presentations • Visual presentations • Art expression through dance, theater, music, etc. • Role plays • Produced videos
Cadence and Duration	<ol style="list-style-type: none"> 1. Present proposed best practice for number and length of sessions based on focus population 	<ol style="list-style-type: none"> 1. 1–2-hour weekly modules repeated over time and locations 2. Multiple sessions or segments over video conferencing or in-person 3. Mixed presentations that offer pre-recorded content 	<ul style="list-style-type: none"> • Community workshops focused on GBV, how to respond when incidents occur, available resources to increase awareness of community supports and how to access them, etc. • Educational seminars for parents, teachers, and other community members with a goal of increasing public awareness on the issues surrounding GBV
Location	<ol style="list-style-type: none"> 1. Services must be provided in-person, online, or a combination thereof. 	<ol style="list-style-type: none"> 1. In-person sessions with live interaction based on the focus population 2. Virtual or online, with level of interaction based on the focus population 3. External partner sites or events 	<ul style="list-style-type: none"> • Community spaces, in-person (school, youth organizations, church, etc.) • Virtual sessions • Produced visual content that is pushed or provided to the public at large • Planned events or meetings

In the context of the above table, Delegates must demonstrate that they have the subject matter, knowledge, and capacity to deliver programming.

4 – Capacity

- Assign staff of the Delegate, partner or subcontractor to the proposed program that are trained on trauma-informed practices and GBV/HT certifications when applicable
- Develop and create tailored content in alignment with their proposed program
- Conduct outreach and engagement activities to identify opportunities to deliver developed content to target population(s).
- Provide prevention education services without charging participants or venues



5 – Community Education and Outreach

- Engage and recruit participants from the Community areas identified in the Chicago COVID Vulnerability Index. Table in Section C, Program Requirements (page 8).
- Include community level resources in prevention education content where appropriate and available. Resources should be appropriate to the target populations in the proposal. For example, offering resources for adult-only services in a proposal focused on youth would not be appropriate.
- Partner with GBV/HT organizations to offer referrals where needed

6 - Data Collection

- Collect participant data and submit quarterly reports to DFSS template that includes demographic information and any other U.S. Treasury requirements.
- Disseminate and collect participant survey feedback to submit to DFSS, including pre- and/or post-surveys to determine increased awareness and prevention.
- Participate in (at minimum) monthly cohort meetings with DFSS to determine performance measurement outcomes on GBV/HT survivors to inform and guide service impact and improvement
- Participate in potential DFSS or City showcase events that demonstrate of the content developed for this program

7 – Community Education and Outreach

- Provide community education workshops and/or outreach events to educate the public and allied service providers about GBV/HT survivor rights, remedies, and services available.
- Collaborate with and receive referrals from GBV/HT community-based organizations.
- Engage and recruit survivors from the selected CCVI Community Areas identified above.

Service Coordination

DFSS recognizes that many of the clients we serve have needs beyond the scope of what we fund delegates to provide. DFSS is interested in supporting strategies to improve coordination across service delivery silos to improve outcomes for these clients. Through engagement with current delegates across our divisions and tests within our Community Service Centers, we have identified some coordination practices that we encourage delegates to incorporate as appropriate. These practices include:

- Systematically identifying clients who struggle to independently access other resources they need and providing a higher level of coordination support to those clients.
- Using warm handoff strategies when making referrals, such as making a specific action plan for the client's next steps to follow through on the referral, assisting clients in calling service providers to schedule an appointment, or accompanying clients to intake appointments; and
- Working proactively with service providers after referrals to help clients overcome barriers to engagement and retention.

DFSS recognizes that these strategies may often fall outside of the core responsibilities of program staff, and successful implementation may require sustained attention from supervisors and organizational leaders. DFSS reserves the right to convene delegate agencies to provide additional support in implementing service coordination efforts.



SECTION THREE – PERFORMANCE MEASURES

To track progress toward achieving the outcome goals of this program and assess success, DFSS will monitor a set of performance indicators by pre- and post-assessment that may include, but are not limited to:

- 80% of participants will indicate on an evaluation survey (ES) that they agree the program provided them with a better understanding of GBV/HT, how to identify GBV/HT and what resources are available to survivors
- 80% of participants will indicate feeling empowered to utilize the information learned today to reduce or prevent instances of GBV/HT
- 70% of participants will indicate can identify at least two resources available to GBV/HT survivors that they could not identify beforehand
- Other measures identified by awarded Delegates through monthly cohort meetings.

Output Metrics

In order to monitor and recognize intermediate progress toward the above performance indicators, DFSS also intends to track output metrics that may include, but are not limited to:

- Number of participants and their community area/zip code
- Basic demographic data on participants
- Number of sessions provided or number of downloads of recorded materials
- Percentage of participants that agree the program provided them with a better understanding of GBV/HT, how to identify GBV/HT and what resources are available to survivors.

DFSS also reserves the right to conduct analysis on data to ensure services are offered and provided to participants equitably by gender, race, and ethnicity.

In addition to the performance indicators and output metrics listed above, DFSS encourages Delegates to propose additional indicators and metrics, including those that demonstrate early success and are indicative of participants' progress.

CONTRACT MANAGEMENT AND DATA REPORTING

Active Contract Management (Meetings)

As part of DFSS' commitment to become more outcomes oriented, DFSS seeks to actively and regularly collaborate (such as periodic meetings) with delegate agencies to review program performance, learn what works, and develop strategies to improve program quality throughout the term of the contract. Reliable and relevant data are necessary to ensure compliance, inform trends to be monitored, evaluate program results and performance, and adjust program delivery and policy to drive improved results. As such, DFSS reserves the right to request/collect other key data and metrics from delegate agencies and set expectations for what this collaboration, including key performance objectives, will look like in any resulting contract.

Reporting

Upon contract award, delegate agencies will be expected to collect and report aggregate-level demographic, performance, and service data as stated in any resulting contract. These reports must be submitted in a format specified by DFSS, including but not limited to InfoNet, and by the deadlines established by DFSS.

DFSS reserves the right to adjust the program implementation plan if challenges arise or data identifies a need to amend the program. Delegate agencies will also be required to participate in regular cohort meetings with DFSS to determine



performance measurement outcomes to share best practices, lessons learned, help identify trends and ensure that services are occurring as planned, with a focus on ensuring equity at all stages of the program.

Delegate agencies must implement policies and procedures to ensure privacy and confidentiality of client records for both paper files and electronic databases as specified by local, state, or federal law. Delegate agencies must have the ability to submit reports electronically to DFSS through InfoNet or other submission process. The City's Information Security and Information Technology Policies are located at https://www.cityofchicago.org/city/en/depts/doi/supp_info/is-and-it-policies.html.

USES OF DATA

DFSS reserves the right to use data related to Delegate Agency performance, including but not limited to data submitted by the Delegate Agency, for the following:

- a) Monitor performance progress, highlight accomplishments, and identify concerns.
- b) Collaboratively design and implement operational changes to continuously improve processes and outcomes.
- c) Develop strategies on a broader system to improve delivery and coordination between services.
- d) Discuss any other items pertaining to program goals, performance measures, or requirements to be adhered to.

Meetings shall include, at least, the DFSS Division Director or designee, and the Delegate Agency's Chief Executive Officer or designee. Each party may be represented by additional representatives as such party deems appropriate. DFSS may request the attendance of additional parties as it deems appropriate. Representatives from the Agency will attend all meetings as requested by DFSS. Meetings may take place individually or jointly with other Delegate Agencies

ADDITIONAL REQUIREMENTS FOR ALL PROGRAMS

Program responsibilities

- Comply with the HEARTH Act, see <https://www.hudexchange.info/homelessness-assistance/hearth-act/>. Agencies are responsible for learning about any revisions or updates to the legislation throughout the contract and revising policies and procedures as necessary.
- Adhere to the program services as defined by the Chicago Continuum of Care (CoC) in the Program Models Chart as well as its Essential Elements for the appropriate program model, see https://allchicago.org/continuum-of-care/standards-and-monitoring/?utm_source=Program%20Model%20Chart&utm_campaign=Program%20Model%20Chart%20Feedb ack%20Requested&utm_medium=email. Agencies are responsible for awareness and adherence to the most recent version of the Program Models Chart.
- Participate in the Coordinated Entry System (CES) and follow CES Policies and Procedures as detailed for the appropriate program model, see <https://www.csh.org/chicagoces/>.

Must voucher monthly

The Delegate Agency must voucher monthly.

Vouchers must be submitted within 15 calendar days after the end of the month in which services were performed.

Vouchers are to include the required supporting documentation to receive approval and reimbursement.

Health and safety

- Must protect clients and reduce the spread of COVID-19 through the implementation of CDPH guidance. The latest guidance can be found at: <https://www.chicago.gov/city/en/sites/covid-19/home/latest-guidance.html>.
- Facility(ies) must comply with applicable local building, fire, environmental, health, and safety standards and regulations which apply to the safe operation of the site(s).
- Must maintain facility(ies)/site(s) in a clean and sanitary condition.



Provide appropriate service to clients

- Inform participants of their rights, responsibilities, and expectations.
- Not discriminate based on race, religion, national origin, sexual orientation, disability, gender identity, or family composition.
- Provide placement and accommodation in accordance with the individual's gender identity.
- Not require clients to participate in any religious services or other forms of religious expression.

Programmatic written requirements

- Have written policies and procedures for intake, grievance, and how conflicts and other crises will be addressed and resolved. These policies and procedures must comply with any DFSS standard, baseline policies issued.
- Notify the DFSS program manager in writing of any changes to staff, facility, facility location, or scope of services.

If applicable, comply and keep records on file

- All Delegate Agencies that work and interact with children must:
 - Comply with the Illinois Child Abuse and Reporting Act; employees shall complete the Mandated Status Form.
 - Require background checks for staff and volunteers prior to interaction.



SECTION FIVE – PLANNED ACTIVITIES

Please complete the following tables to indicate the program’s planned activities for the contract period.

COMMUNITY EDUCATION						
		Q1	Q2	Q3	Q4	Total
1.	Number of community education workshops and/or outreach events to educate community stakeholders about the impacts of GBV/HT					
3.	Number of individuals attending community education/awareness workshops on the impacts of GBV/HT					

COMMUNITY PARTNERS						
		Q1	Q2	Q3	Q4	Total
1.	Number of new agreements with community partnerships that can provide GBV/HT training outside of the Delegate’s expertise					
3.	Number of new agreements with community referral partners that can support participants who seek support for GBV/HT					



CHICAGO DEPARTMENT OF FAMILY AND SUPPORT SERVICES
DIVISION ON GENDER-BASED VIOLENCE

PREVENTION EDUCATION ON GENDER-BASED VIOLENCE AND HUMAN TRAFFICKING
2024 SCOPE OF SERVICES – JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

Please provide a summary of your plan to fulfill the requirements of the program outlined in the sections above. The summary should describe your program operating at full capacity to both address the needs of the focus population and maximize performance outcomes. Describe how coordination and interface with other partners and programs will look like. Include how your program will engage with focus populations also outlined above. Describe current partnerships with culturally specific and community-based organizations that serve youth and any goals to increase the number of partnerships each quarter.

Empty response area for providing a summary of the program plan.



SECTION SIX – SUBMITTAL AND APPROVAL

CERTIFICATIONS:

By checking this box, the delegate agency certifies that all information provided within the Scope of Services document is correct. It commits to the fulfillment of activities announced and to comply with program goals, performance measures and program requirements.

Authorized agency signature:	
Name typed:	
Title:	
Date of signature:	
PO Number	

DFSS approval – to be completed by DFSS	
Authorized DDV signature:	
Name typed:	
Title:	
Date approved	



SOURCE DOCUMENTS

Provided below are hyperlinks to source documents. It is the Delegate Agency's due diligence to read and understand the funding source rules and regulations.

City of Chicago Mayor's Office

- Citywide Strategic Plan to address Gender-Based Violence and Human Trafficking:
<https://www.chicago.gov/city/en/sites/public-safety-and-violence-reduction/home/GenderBasedViolence.html>
- https://www.chicago.gov/content/dam/city/depts/cdph/chron_dis/general/Office_Violence_Prevention/GBV-strategic-plan-final.pdf

Chicago Department of Public Health

- Chicago COVID-19 Community Vulnerability Index (Chicago CCVI):
https://www.chicago.gov/content/dam/city/sites/covid/reports/012521/Community_Vulnerability_Index_012521.pdf