



# REPORT TO THE COMMUNITY

For the year ended  
March 31, 2019



## 2018/19 BOARD OF DIRECTORS

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### Graphic Design

All Caps Design  
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Halcraft Printers  
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The Avalon Sexual Assault Centre is a feminist organization working to eliminate sexual assault/abuse, and to change the current socio-political culture that fosters sexism, social injustice and other forms of oppression. We aspire to a world in which individuals are empowered and mobilized to share responsibility in creating communities free from sexualized violence and abuse. We provide a leadership role in raising awareness, supporting those who have experienced sexualized violence, holding sexual perpetrators accountable, and influencing social and systemic change.

avaloncentre.ca  
1526 Dresden Row, Suite 401, Halifax, B3J 3K3

**Avalon Centre sits on unceded Mi'kmaq territory.**

# MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD CHAIR

During 2018/19 Avalon Centre accomplished a great deal while continuing to face challenges. We started the year with a fundraising event that featured local performers and community members standing against sexualized violence and in support of survivors. Avalon was recognized by Ending Violence Against Women International for bringing their Start By Believing Campaign to Halifax. Our *Doesn't Mean I Owe You* Campaign continued to have international success and we significantly increased our on-line presence through many successful and viral social media campaigns. We were part of local and national initiatives to improve sexual assault laws and increase access to justice for sexual assault/abuse survivors.

Avalon was successful in establishing multi-year funding agreements that fund some aspects



On April 21, Neon Dreams, T. Thomason, Emily Stuart, Jodi Guthro and Makayla Lynn came together to support Avalon by performing at a benefit concert hosted at St. Matthew's United Church. The evening was an incredible success, raising over \$9000! This money will be used for a variety of services including our SANE program, counselling and training. *Photo credit: Jennifer Lee Kerr*

of our programs and direct services. There was an increase in individual donors and third-party fundraising. We were able to make 3 term staff positions permanent and hire two additional positions, expand office space and make improvements to technology and equipment. We successfully bid to receive \$1 million over 5 years from Status of Women Canada. Beginning in 2019/20, the project seeks to redesign how Avalon responds to survivors both internally and in the wider community.



The Honourable Maryam Monsef, Minister of Women and Gender Equality Canada, announced more than \$50 million in funding for nearly 60 projects to support survivors of gender-based violence and their families in communities across Canada, including to Avalon for a project improving accessibility of service for vulnerable populations.

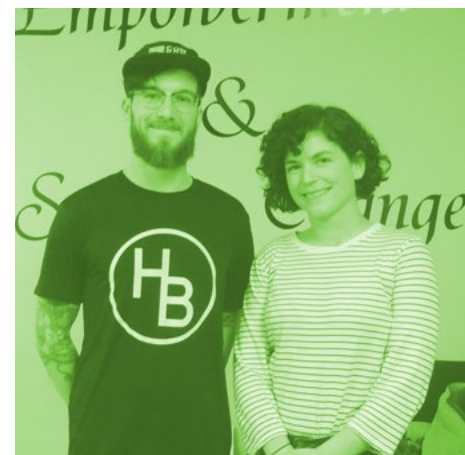
However, we remain under-resourced in some aspects of program funding, and in funding that would support infrastructure and crucial organizational restructuring to strengthen capacity.



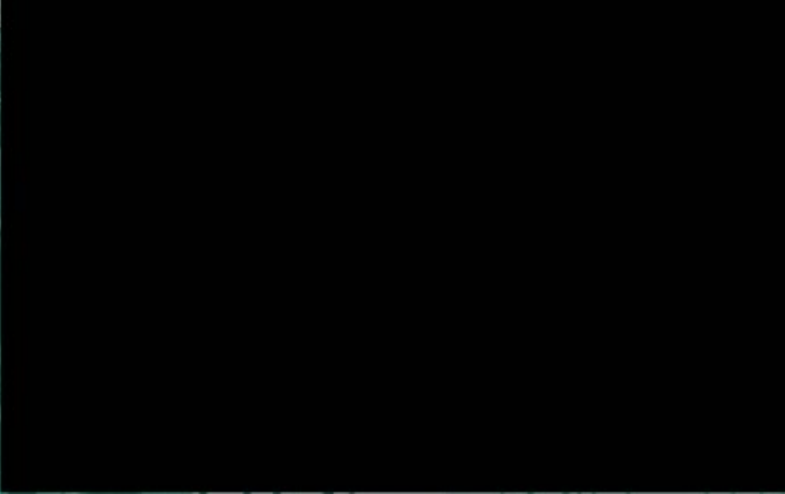
Avalon was honoured to be recognized as the charity of choice at the Halifax Chamber of Commerce annual State of the Municipality address with Mayor Mike Savage.



Phil Wilson from The Professional Institute of the Public Service of Canada with ED Jackie Stevens. The Atlantic Regional Steward Council of the PSC raised \$1100 for Avalon.



Home Bass raised \$1500 for Avalon at a dance party.



Avalon continued to support the fight to amend Bill C-51 regarding capacity to consent, contributing to a campaign of letters written to the Prime Minister, among other activities.



Thanks to You Gotta Sing! Chorus for hosting the Singing Party for Avalon.



Avalon was excited to attend the End Violence Against Women International conference on Sexual Assault, Domestic Violence, and Gender Bias.

We strive to address the complex and intersectional needs of clients and our community while remaining under-resourced, and with strained capacity to address competing priorities. This has had a huge toll on staff members and the organization.

Notably, this year Avalon made the difficult decision to temporarily stop taking new clients in the therapeutic counselling program in order to complete therapy sessions with existing clients and provide counsel-

ling services to people on our increasingly lengthy waiting list. We are working towards program and organizational restructuring to prevent a recurrence of the conditions which led to this situation.

We have worked together to examine our feminist values and organizational priorities and to address the impact that being a trauma-exposed workplace has on us all. Staff members voted to unionize so they have a collective voice to review working

conditions, staff supports, and service delivery. This past year, the Board of Directors have been improving board governance policies and practices. The Board supports the work of Avalon Centre and will continue to implement initiatives to improve and enhance staff retention, healthy workplace, and address the impacts of workplace trauma exposure. While change is challenging and sometimes messy, it is necessary to support sustainability and growth.

Thank you to staff members, board members, on call SANEs, students and volunteers; donors/funders; community partners; people who access Avalon's programs and services; survivors; community members; and our Friends of Avalon. Your work, advocacy, support, courage, knowledge, financial contributions, and shared experience influences and inspires us.

*Sincerely,*

**LEE-ANN CONROD**  
BOARD CHAIR

**JACKIE STEVENS**  
EXECUTIVE DIRECTOR



For the year-end fundraising campaign, Avalon created a series of videos featuring our sexual assault trauma therapists to help the community understand their work. The videos were later invited to a screening and Q&A called Reel Justice, a curated program of short films exploring economic and social justice. Staff enjoyed a meaningful discussion with the audience around the challenges our counselling program faced this year. Photo credit: Foundry Photography



During his Centre for Art Tapes residency, Israel Ekanem raffled one of his works on canvas in support of Avalon.



Avalon led a workshop at the MSVU Girls Conference, including activities like making these patches in response to social issues participants care about.



The Nova Scotia Advisory Council on the Status of Women and Diverse Voices for Change hosted the Campaign School for Women. 170 women from diverse backgrounds from across NS participated. The focus was on building diverse and intersectional approaches to including women in leadership and politics and ensuring public policy includes women, people of colour, and other marginalized groups. Avalon was appreciative of the opportunity to participate. We will incorporate some of the resources and teachings from this weekend to improve our intersectional approach and practices and were able to strengthen relationships with diverse groups in the community. The event was graphically recorded by Corry Melanson and Ansale Pictou.



Dalhousie Feminist Legal Association dropped off a donation raised from a bakesale they held in support of Avalon.



Avalon Centre was pleased to host Yami Msosa, who offered a free trauma informed yoga class at the Halifax Central Library. SEEDS is a movement based class designed for survivors and those affected by gender-based violence. The class is grounded in trauma-informed yoga practices that seek to empower participants and focuses on three main themes: power, choice, and connection. Yami is a grassroots feminist activist and support worker who has been working in gender-based violence prevention and advocacy for over ten years. *Photo credit: Yamikani Msosa, 2017*



Avalon and the MacPhee Centre for Creative Learning teamed up to bring C-C-CRASH! to students at Cole Harbour District High School. C-C-CRASH (Creating Comics for Consent, Relationships, and Sexual Health) explores topics such as gender identity, healthy relationships, and sexualized violence, and focuses on the use of art as a tool for generating positive social change.

*“We average ten to twelve trials a year,*

with many more subpoenas. One of our nurses was subpoenaed 14 times last year. She didn't testify that many times; not everything ends up going to court. How it works is the subpoenas come to Avalon, we notify the nurses and send them all of the documentation. They come in and review the files, and we go from A to Z with the file. When they arrived, what they did or didn't do and why, review the photos if there are any. Then they meet with the Crown Attorney.

We may be called to be fact witnesses or expert witnesses. Fact witnessing is only speaking to the facts of the case: what we saw, what we did and why, and what were the results. A big part of fact-finding with our SANE exam is querying and documenting what we're told, what we see. An expert witness

has a thorough knowledge of a topic and can give opinion on, for instance, injury, what could this injury be caused by. Testifying as an expert witness, we are being asked what is this evidence consistent with. For expert witnessing, the notice comes from the Crown. Nurses will provide their CVs with their most recent cases. They'll meet with the Crown to learn better what's meant to be qualified. The nurses want to know if they are testifying to something that they can be certain about it, and that it's backed by science.

There has been some contention that SANE nurses are biased because of our participation in the Start By Believing campaign. But as nurses, we start by believing any of our clients when they tell us something has happened, for instance if they believe they are having a heart



attack, we're going to start by believing them and we're going to investigate this from a nursing perspective and record our findings. In the case of sexual assault, we then hand those findings over to police, if that's what the client wants, and the police will investigate further.

It can be a nerve-racking part of the job, but it also feels like a very important part. We know from the study that was done in 2016 that when SANEs testify, if a guilty verdict is obtained the sentencing tends to be longer, and that it makes survivors feel supported in a situation that can feel antagonistic.”

## CHANTELLE MURPHY

### BScN RN, SANE-A

Chantelle has been nursing for 20 years, working in women's health units in underserved areas throughout the United States before returning home to Nova Scotia to work in the IWK Birth Unit. Throughout her career, Chantelle gained an understanding of the lifelong impacts of sexualized violence on her patients, and felt a greater need to help, first becoming a SANE, and then leaving the IWK in 2017 to devote herself full-time to coordinating the SANE program at Avalon.



# “In 2013 the level of service requests

for those who'd experienced a recent sexual assault really skyrocketed. Two young individuals, one here and one on the west coast, who had experienced sexualized violence and then were failed by many systems, committed suicide. There were also other high profile cases of sexualized violence in the media, people like Bill Cosby. Basically, the door finally opened to a true public discourse around the reality of sexualized violence, around rape culture, and there was a huge influx of service requests. The level of requests was well beyond our capacity, so we approached our funder for emergency assistance, and we did receive some. But the sharp rise in service requests continued, and the assistance we'd received at first was not enough to meet the actual community

need, and that has been a major issue over these past five or six years, it has not matched up.

So we've done many things, stretching ourselves as much as we can, reallocating resources within the Centre as much as possible, seeking new revenue sources through our fund developer. And we developed service parameters to prioritize and triage individuals at the highest risk, experiencing the highest level of vulnerability for re-victimization, for suicide risk etc. Individuals who should not be placed on a waitlist at all, not even a priority waitlist, because the risk factors are just too great.

But the requests for service continued to rise, until we maxed out. We could not get to the individuals on the waitlist

while prioritizing high risk service requests. The list stalled, and also we had to keep adding to it. It got to be longer than it's been in the 23 years of the program. Some people waiting as long as two years. In recent years, we had to begin a waitlist for individuals who had experienced assault in the past four to twelve months. This is not safe practice. The counsellors were holding the concern about that. Each individual who's practicing counselling, social work, psychotherapy, we're required to belong to a college or professional association, and we're responsible to that college

or association to ensure we're practicing ethically. Also each organization that provides professional counselling service is required to have practices and policies set up that speak to the ethical principles of the organization, that protect the clients and the community



seeking the service. I consulted with sexual assault centres in Canada who provide therapeutic counselling programs, and accessed further research that indicates that when a list gets to the point where the service provider cannot keep in touch with individuals to see how they are doing, it is not safe practice.

We had two waitlists at this point, and our counsellors were beyond full, plus doing a lot of crisis work and advocacy and navigation, and trying to fit in more appointments for high risk folks all the time. This became impossible to maintain. There was no way to keep in regular touch with everyone on the waitlists. And we have to find a way to fulfill the service promise made to those who are on those lists. So we faced the incredibly difficult decision, for the first time in the history of the program, to stop taking new service requests until we could fulfill our service promise to those who had been waiting. And we began looking at re-

structuring how we provide service and what will be needed to support that, so that when we are able to re-open the waitlist, this won't happen again.”

**GLENDAY HAYDON**  
M.S.W., R.S.W.

Glenda is the Coordinator of Counselling at Avalon, and a feminist sexual assault trauma therapist with specialized expertise in neuro-biologically-informed trauma therapy, mindfulness approaches, EMDR and Internal Family Systems therapy. Glenda has worked in counselling at Avalon for 22 years and was instrumental in the development of the Centre's therapeutic model which is recognized by many women's centres and sexual assault centres around the province and beyond. She has worked in the fields of sexual assault/abuse and intimate partner violence since 1990.

# “Since I started, about 3 years ago,

I've trained about 5000 people, mostly in our core training, Sexualized Violence: Trauma-informed Practice and Healing-Centred Engagement, but also in other trainings like bystander intervention and gender-based violence facilitation. We experienced an increase in requests for training and workshops after #metoo. Organizations and providers wanted to know how to support the people who were coming forward, and who might not have been coming forward before.

So we've had to look at how we can meet the needs of the community within our capacity. In the past we've gone to specific organizations who've requested training for their staff, and we still respond to individual requests as best we can, but now we're offering larger trainings

on a quarterly basis, or more if we can find the money to do it. These are open to between 60 and 80 people depending on the venue. Their registrations reach capacity within four to six hours. Our last one had a waitlist of over 200 people. It shows there's an interest in having that multi-sector, multi-organization, multi-position perspective. People are learning from the trainings and learning from each other.

The work has changed a lot since I started. We're trying to move towards a trauma-responsive and healing centred approach, taking the principles of trauma-informed practice and adding new elements. Healing-centred engagement is a theory by Dr. Shawn Ginwright, he's a black scholar and activist from the US who works

with at-risk youth. Healing is a political movement for individuals and communities and society. It's seen as wanting to not pathologize and just treat symptoms, but really involve people in their own healing,

as a political movement and a restoration of the self, rather than trying to suppress parts of the self. It's expanding on trauma-informed practice.

We're finding people are interested in learning more about this. It makes sense to people, specifically around sexualized violence, because it is a political issue. Individuals experience sexualized violence, but it's also a system of violence and oppression that everyone experiences. So we're responding to individuals who need support and healing, and, we're also looking at sexualized violence as a broad cultural and social issue that impacts the structures and systems that we live within.



We're also incorporating intersectional theory, Kimberlé Crenshaw's theory. She's a black feminist legal scholar who created this theory in order to address how mainstream feminism failed black women, and it's evolved to include an analysis of the different identities that people hold, and how that impacts their experiences.

We're looking at the triangle of how violence and oppression operate. So the tip of the triangle is the direct interpersonal level, the middle is the structural and system level, the bottom is the broad social and cultural level. If you think about something like sexualized violence, it does operate on all three levels, so there needs to be intervention at each point in order to address it. So people may think they will be learning "what do I say to a survivor when they disclose", which they are going to learn, but they're also going to learn about the social dynamics that are at play, and how we have to intervene at all three

levels. Yes we need to support individuals, and here's how we can do that, but we also have a responsibility to advocate to change systems and structures that fail survivors, and to disrupt the myths and stereotypes and broad social and cultural ways that sexualized violence is accepted and tolerated and denied.

*“I believe the future of the work is in prevention.”*

When I think about where the work is heading, my hope is that society will begin to put as much investment into prevention as we do into treatment. It's well researched and documented that prevention works. We've put a lot of money and

effort into response, which obviously is so important, but maybe we could prevent some of these terrible experiences that people are having by investing more in prevention, to stop these behaviours from happening. My background is in crime prevention, and the research with young people is especially interesting, the effectiveness of prevention efforts in reducing the likelihood of offending or re-offending. If we can start working with young people as soon as they can understand language, teaching them that they have agency over their body, you don't have to give hugs when you don't want to, all of this has been researched as best practice but we don't do it, or don't do it consistently. So I believe the future of the work is in prevention.

## DEE DOOLEY MA

Dee is a feminist socio-legal researcher and community development specialist with expertise in gender-based violence and legal education. She is currently the Coordinator of Community/Legal Education and Training at Avalon, working with youth, community organizations, service providers, and governments on various sexual violence prevention, intervention, and awareness initiatives. Dee has over ten years of experience with violence prevention and community development programming with women, youth, and LGBTQ communities. She holds degrees in sociology, gender studies, and criminology where her research focused on the criminalization of women survivors of intimate partner violence. Dee is passionate about social justice and supporting young feminists to become changemakers in their communities.



# “If you're an activist, values-driven organization,

you want your financial picture to be well aligned. Who you're asking for money, how you're asking for it. There's a sort of responsibility for educating funders, to help them value your services and your people, particularly in social services, that scarcity model, feeling like you have to do everything with whatever you have. So, instead, setting parameters according to what you have, you know, “this is what can be ethically, safely provided at this level of funding” while planning to grow the support, increase the funding.

If you look at how demand has grown, and you look at our catchment area and its population and needs, is it reasonable

now, the way it might have been back in 1984, to continue to say that we can serve a catchment area this size as a single organization? Can we think about funding not just for ourselves, but funding for other services, capacity building in other organizations. If you want to do it all in one organization, how much space does that require, how many administrative positions will it require.

It's about building your boundaries around what you can and can't do, communicating them, being really transparent, and taking care of what you have, and the people you can serve. For instance, if the funding we are offered for counselling can't be used for infrastructure, but

infrastructure is required to provide counselling, we need to be really transparent about that, in discussing that offer. Educating around what is actually needed, but then also being careful to offer service at the level that is actually supported. For instance, we've doubled our operating budget in just a few years, but demand has grown faster, and our costs in areas that are harder to fund, like rent, are

growing as we try to expand to meet demand out of funding that doesn't cover rent. Of course you want to grow your fundraising program towards meeting more of the demand, but while that is happening, being strategic about what you do and don't do. And not just meeting more of the existing demand, but asking how we can better meet our mandate. For instance, we aren't getting service requests from the most vulnerable communities, at numbers that more closely match the incidence of harm. So looking at different navigation and advocacy models. These are the ways we need to move forward.”

### **SARAH KASUPSKI**

has been building partnerships across public, private and community sectors since 2005, with expertise in fund development, strategic planning and program development. She has developed annual and long-term fund development and strategic plans for diverse organizations, from a neighbourhood outreach initiative to a national health charity. In 2016 she became Avalon's first Fund Developer.



# FINANCE REPORT

The Avalon and SANE revenue for the fiscal year are quite comparable to last fiscal year. Income recognized in the current year for Avalon was approximately \$1.1 million (2018: \$1.1 million) which included several sources of both new and ongoing funding. Most notable changes were from the WAGE (Women and Gender Equity Canada), a multi-year funding agreement, and corporate funding. We continued to receive funding from the Nova Scotia Health Authority, Department of Community Services, Department of Health and fundraising efforts from private and corporate donors. All these sources contribute funding towards Avalon's programs and services. However, aspects of the organization remain under resourced. Over this past year, we have experienced a significant increase in requests for our services. Given that most of our funding is program specific, it does not fully cover operational, resource, and infrastructure costs required to meet this need. As a result, our Unrestricted Cash, presented on the Statement of Financial Position, is purposed

to cover insufficient funding into this coming year. This is not sustainable and we continue to work to increase sustainable funding.

Avalon's expenses in the fiscal year totaled \$1,184,722 (2018: \$995,046) with increases for wages and benefits, additional staff positions, larger working space, and telephone and equipment upgrades to handle the demands of a growing organization. This resulted in a net loss after expenses in the current year of (\$99K) (2018: 116K).

The SANE program has maintained steady funding (\$380,828) and continues to operate consistently (Net Income 2019 - \$15,997 vs 2018 \$7,158). Over the past few years, total number of requests to the SANE Program have also increased. We continue to monitor our ability with the current funding to support this increase of response to the hospital and other program priorities.

*Respectfully submitted,*  
**FINANCE COMMITTEE**

# FINANCIAL STATEMENTS

## AVALON SEXUAL ASSAULT CENTRE Statement of Revenues and Expenditures Year Ended March 31, 2019

	2019	2018
<b>Revenues</b>		
Law Foundation of Nova Scotia	\$ 45,660	\$ 38,811
Special projects: Province of Nova Scotia- Community Support Network Grant	99,930	139,536
Status of Women Canada	30,000	-
Province of NS (NSHA, DCS)	773,561	773,561
Canadian Women's Foundation	23,000	-
Donations, fundraising and other	67,535	98,624
Summer student	5,890	5,082
Administrative fees (Note 8)	40,000	40,000
Special projects: Province of Nova Scotia - Prevention Innovation Grant (Dartmouth North Project)	-	15,022
	<u>1,085,576</u>	<u>1,110,636</u>
<b>Expenses</b>		
Advertising and website	5,916	2,445
Board and staff development	28,467	10,978
Capital equipment and maintenance	21,024	19,358
Equipment rental and repairs	3,000	3,105
Fundraising	763	1,364
Insurance	9,594	9,062
Membership fees	1,055	3,028
Miscellaneous	3,388	4,275
Office	12,566	12,102
Professional fees	19,604	17,303
Rental	89,499	79,663
Salaries and wages	912,436	776,813
Special projects	57,770	47,198
Telephone	11,104	3,527
Travel	3,524	-
Therapy groups	5,012	4,825
	<u>1,184,722</u>	<u>995,046</u>
Excess (deficiency) of revenues over expenses from operations	<u>(99,146)</u>	115,590
Other income		
SANE income	380,828	381,387
SANE expenses	<u>(364,831)</u>	<u>(374,229)</u>
	<u>15,997</u>	<u>7,158</u>
<b>Excess (deficiency) of revenues over expenses</b>	<b>\$ (83,149)</b>	<b>\$ 122,748</b>

**AVALON SEXUAL ASSAULT CENTRE SANE**  
**Statement of Revenues and Expenditures**  
**Year Ended March 31, 2019**

	2019	2018
<b>Revenues</b>		
Department of Health and Wellness	\$ 372,800	\$ 372,800
Donations, fundraising and other	8,028	8,587
	<b>380,828</b>	<b>381,387</b>
<b>Expenses</b>		
Administration expense (Note 7)	40,000	40,000
Bad debts	-	1,311
Insurance	9,594	8,302
Interest and bank charges	-	2
Memberships	617	598
Office	4,120	13,749
On call nurses	147,418	160,585
Salaries and wages	135,618	116,004
Telephone	9,165	10,021
Education and training	14,360	16,366
Miscellaneous	2,532	4,777
Purchased services	1,000	1,000
Transportation	407	1,516
	<b>364,831</b>	<b>374,231</b>
<b>Excess of revenues over expenses</b>	<b>\$ 15,997</b>	<b>\$ 7,156</b>

# OUR DONORS

## GOVERNMENT

Nova Scotia Department of  
Community Services

Nova Scotia Community Support  
Network Grant

Nova Scotia Department of  
Health and Wellness / IWK  
Health Centre

Nova Scotia Health Authority

Women and Gender Equality  
Canada (WAGE)

## GRANTS

Canadian Women's Foundation

Law Foundation of Nova Scotia

Medavie

NSPIRG

Sisters of Charity

## BUSINESSES, SERVICE CLUBS & COMMUNITY GROUPS

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Babalon Leather

Black Market

Dalhousie Feminist Legal  
Association

Dalhousie Health and Human  
Performance Graduate Student  
Society

Dooly's – Lower Sackville and  
Bedford

East Coast Specialty Hardwoods

Employees of Halifax Water

Employees of Nova Scotia Office  
of Workplace Mental Health

Employees of Workers  
Compensation Board of Nova  
Scotia (Casual Fridays Fund)

Good Robot

Halifax International Airport  
Authority (HIAA)

Hatched

Home Bass

Jampy

Ladies Beer League

Music Nova Scotia

OTC Insurance

Pigeon Row Public Relations

Professional Institute of the  
Public Service of Canada (PIPSC)  
Atlantic Regional Steward  
Council

Rowe School of Business –  
Women in Business Association

Therault Financial

Tidehouse Brewing Company

United Way of Halifax Region

You Gotta Sing! Chorus

## IN-KIND DONORS

Baton Rouge

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Cruises

Dilly Dally Eats

East Coast Balloon

Epicure

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Jane Software Inc.

Lot Six

Mic Mac Mall

Moksha Halifax

Montana's BBQ and Bar

Moxie's Grill and Bar

Murphy's on the Water

Nearby Planet VR

Neptune Theatre

OBB

Obladee

Oceanstone Seaside Resort

Petite Riviere Vineyards

Pramana

Remedy Facial Bar and Spa

Rockhead Wine & Beer Market

Serpentine Studios

Shanti Hot Yoga

Spinco

Spirit Spa

Squeaky Cleaners

Sutherlands Jewellery

Swiss Chalet

The Compass Rose Inc.

The Haliburton

The Westin

Truro Flying Club

Two If By Sea

Venus Envy

Vitality MediSpa


Woozles

Younique

*This list acknowledges gifts made between April 1, 2018 and March 31, 2019. Please note that this list only includes some of our many incredible donors. To protect privacy, we do not list donations made by individuals.*

During 2018/19, Avalon's sexual assault trauma therapy program served

*467 individuals,*  
an increase over the previous year. The number of new requests for counselling was the highest ever, at **338**. While these increases are not large, they are part of an accumulative trend over the past six years. This had a **significant impact** on a program that is under resourced and in *high demand.*



Our **Sexual Assault Nurse Examiners** provided direct medical/forensic response after an immediate sexual assault to 152 clients this year. Additionally, assistance was provided by phone to 142 clients and healthcare professionals regarding acute sexual assault for a total of **294 immediate response calls** from the Sexual Assault Nurse Examiner (SANE) Program.

Through the Community/Legal Education and Training Program,

*Avalon provided training and workshops to over 1250 individuals*

of all ages in our community, on topics including consent, bystander intervention, first responder best practices, trauma informed practice, and sexualized and gender-based violence. In response to **increased requests** resulting from #MeToo, the education/training program prioritized partnerships that supported youth prevention/awareness programs and building service provider capacity to improve individual and systemic response to victims/survivors.

Avalon staff served on many different **collaborative initiatives** and **advisory committees**, involving government, community, and agency participants working at local, provincial and national levels. The Centre responded to **hundreds of requests for commentary and analysis** on legal proceedings and news topics relating to sexualized violence.



**AVALON**  
SEXUAL ASSAULT CENTRE