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National Institute of Justice

## **Sexual Violence Research Workshop**

June 23 – 24, 2008  
Marriott Crystal City  
Arlington, VA

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# Sexual Violence Research Workshop

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## **Day One – June 23, 2008**

### **Welcome and Introductions**

Mr. Bernard Auchter welcomed all participants and introduced Ms. Cindy Dyer.

#### Opening Remarks

#### **Cindy Dyer, Director, Office on Violence Against Women, U.S. Department of Justice (DOJ)**

Ms. Dyer noted her experience as a domestic violence and sexual assault prosecutor in Dallas, Texas, for 14 years. She added that her volunteer work at a shelter for abused women and children gave her added insight into the depth of the problem. Today, she explained, the Office on Violence Against Women (OVW) administers funding to communities for programs aimed at ending sexual violence and stalking and at raising awareness about these issues.

Ms. Dyer stated that research is a critical component in this enterprise and hailed the importance of the partnership between researchers and the National Institute of Justice (NIJ). Research is needed on sexual assault advocates and service providers because trauma victims need counseling and advocacy to thrive after an assault. Ms. Dyer cited a need to strengthen the OVW response to sexual assault through outreach to sexual assault providers and the community. She said that there was also a need to improve the criminal justice response to sexual assault victims and to improve services to sexual assault victims in both rural and suburban areas.

Other areas that must be explored include how advocacy for sexual assault differs from advocacy for domestic violence. In terms of meeting the practical needs of victims of sexual assault, research is critical to identify barriers to supplying services to victims in order to develop better programs and policies. Ms. Dyer said that she was looking forward to hearing about the participants' current research and to working together to develop innovative strategies.

## **Marge Zahn, Acting Deputy Director for Research and Evaluation, NIJ**

Dr. Zahn welcomed the participants and thanked Ms. Dyer for her comments. She noted that since 1993, \$15 million in research funding has been dedicated to sexual assault and related areas such as evaluating sexual assault response teams (SARTs) and how they work in various types of communities. She said that NIJ has been very active in this area, and she looks forward to a partnership with OVW and learning from the participants at this conference.

## **Self-Introductions by Attendees**

Participants introduced themselves and commented on their areas of research/interest.

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## **Purpose and Charge**

Mr. Auchter explained the focus of the workshop: to take stock of current research on the criminal justice system response to sexual violence and to discuss ideas for further development of research and dissemination efforts aimed at informing practice and policy. The meeting will address the state of research regarding the nature and effectiveness of the criminal justice system's response to sexual violence, the application of forensic science to sexual assault investigation and prosecution, and the multidisciplinary response to sexual violence with the goal of advancing the efforts of NIJ and other federal agencies and policymakers to improve knowledge and practice in this important criminal justice area.

Federal Partners Presentation: Overview of Sexual Violence Research — Sponsored by the Centers for Disease Control (CDC), National Institutes of Health (NIH), and the National Institute of Justice (NIJ).

## **Overview of Centers for Disease Control and Prevention (CDC) — Sponsored Sexual Violence Research**

### **Kathleen Basile, CDC**

Dr. Basile presented a timeline showing key points in the history of CDC's role in sexual violence prevention, beginning in 1994 with the first CDC-funded research grant on sexual violence, through a decade of continuously expanded efforts on sexual violence, to 2005, which saw an optional sexual violence model included for the first time in the CDC's Behavioral Risk Factor Surveillance System (BRFSS) (25 states and territories).

Dr. Basile reviewed the National Center for Injury Prevention and Control's sexual violence research priorities, which include:

- Surveillance methods for sexual violence victimization and perpetration.
- Etiology of sexual violence perpetration.
- Linkages among sexual violence types, other types of violence and other risk behaviors.
- Role of disparities.
- Efficacy and effectiveness trials for perpetration programs across all levels of social ecology.
- Efficacy and effectiveness trials of sexual violence programs and other violence programs.

Dr. Basile reviewed the sexual violence project highlights, which include:

- Rape Prevention and Education Program — represents a huge programmatic effort with a comprehensive focus on rape prevention and community-level change.
  - Evaluability assessment.
  - Strategic planning.
- EMPOWER — a pilot program to build capacity in states to institutionalize strategic planning.
- Surveillance.
  - National Intimate Partner and Sexual Violence Surveillance System (NISVSS; hope to award in 2009) — this would cover the full gamut, including drug- and alcohol-related sexual violence.
  - Sexual Violence Victimization of Minority Women (NORC) — certain racial/ethnic minority groups (African-American, Hispanic, American-Indian) have a higher percentage of sexual violence. The study will take an in-depth look at these populations ( $n=200/\text{group}$ ).
- Etiology — linkages.
  - Understanding Bullying and Sexual Violence Perpetration and the Factors Associated with Both (Dorothy Espelage/Nan Stein) — a study of bullying in middle school among sixth graders. Researchers will look at bullying, perpetration, victimization, and bystander experiences and their relationship with concurrent and subsequent sexual violence perpetration.
- Evaluation.
  - Evaluation Assistance for Projects to Prevent First-Time Male Perpetration of Sexual Violence (RTI/Robert Goodman) — an environmental scan was conducted that identified 37 programs that were invited to apply for funding. Four programs were funded. Findings from the evaluations of these four programs will be published in a special issue of *Health Promotion Practice*, forthcoming in January 2009.

## **Sexual Violence Research at the National Institutes of Health (NIH)**

### **Erika Elvander, NIH**

Ms. Elvander noted that NIH, composed of 27 institutes and centers, is the primary federal agency for conducting and supporting medical research, spending over \$28 billion annually. Of this amount, annual outlays include \$3.5 million for behavioral and social science research, \$38 million for child abuse and neglect, \$106 million for violence and \$24 million for violence against women. She explained that the research on sexual violence works across lifespan, cultures and economic status to:

- Better understand the root causes of sexual violence.
- Develop family- and community-based interventions to prevent sexual violence.
- Treat psychological, social, physical and community effects of sexual violence.

A goal is to link research and policy.

Ms. Elvander stated that 12 institutes and centers are involved in research that relates to sexual violence in areas including elder mistreatment, informational resources, effects of alcohol use and substance abuse in terms of sexual risk-taking and perpetrators' perception of what they are doing, interventions, detecting injuries, mental health and health care consequences of sexual violence, and issues affecting minority populations.

Future directions include:

- Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD) — child abuse and neglect partners network (although this is not sexual violence specific).
- Collaboration with DOJ and other federal partners on teen dating violence.
- Collaboration with the Department of Defense on sex/gender and post-traumatic stress disorder and other traumas.

Ms. Elvander added that, in light of current funding priorities, there is a need to leverage research money through collaborations with partners.

## **NIJ's Sexual Violence Research Program**

### **Catherine McNamee, NIJ**

Ms. McNamee stated that after NIJ's first sexual violence project in 1973, research expanded dramatically in the 1990s. The first NIJ solicitation that focused exclusively on sexual violence was issued in 2002 and attracted over 70 applications. Over the past 15 years, NIJ has supported awards totaling almost \$15 million.

Current NIJ research priorities emphasize the criminal justice system response to sexual violence, and solicitations highlight the importance of research on diverse and underserved communities.

Sexual violence topics covered in the NIJ portfolio include:

- Incidence/prevalence.
- Colleges/Campuses.
- Diverse communities.
- Multidisciplinary response (sexual assault nurse examiners [SANEs]/SARTs).
- Criminal justice system response.
- Drug-facilitated sexual assault.
- Sex offenders.
- Sexual assault within the context of intimate partner violence.
- Prevention.
- Intervention.
- Risk and protective factors.
- Data systems and measurements.

Examples of recently completed projects include studies that explored the nature of post-separation/divorce sexual assault, the prevalence and nature of drug-facilitated and other forms of sexual assault on college campuses, and a national-level prevalence study of college and community-based women.

Other related portfolios and projects at NIJ include:

- Commercial Sexual Exploitation of Children (CSEC) — a collaborative study in two major cities.
- National Intimate Partner and Sexual Violence Surveillance System (NISVS).
- Prison Rape Elimination Act (PREA).
- National Baseline Study on Violence Against Indian Women — mandated by Title IX of the Violence Against Women Act of 2005.

For the future, NIJ is searching for new funding sources with an emphasis on leveraging efforts and resources, updating priority areas and improving dissemination.

## Discussion

**Ms. Barbara Shaw** asked whether any of the research portfolios include work on sexual violence against children. **Ms. Elvander** stated that NICHD is interested in this topic and is also doing work on understanding sexual decision making among college students. She suggested that Ms. Shaw contact Valeria Maholmes of the Child Abuse and Neglect Network at NICHD. **Dr. Basile** stated that this area is part of the programmatic work of CDC, and childhood sexual abuse is included as part of CDC's survey work. **Ms. McNamee** noted that NIJ is currently sponsoring an ongoing study that is examining adolescents' experiences with sexual assault and sexual assault nurse examiner programs.

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## "A Crime Like No Other": The Criminal Justice System Response to Sexual Violence

### Claudia Bayliff, Attorney at Law

Ms. Bayliff, who has worked in the area of sexual assault for 20 years, discussed why sexual assault cases are so challenging to the criminal justice system. She noted that rape is a low-risk/high-reward crime that rapists expect to get away with. Reforms in the laws and the judicial system have not produced the intended beneficial effect. Reporting rates are still low, attrition rates are high — only about 19 percent of cases lead to arrest and about 56 percent of cases are rejected and dismissed.

Ms. Bayliff noted two troubling trends: symbolic law (law that appears to be responding to a particular demand but does not actually change the behavior it was meant to regulate) and a justice gap (even with an increase in reporting rapes, the conviction rate remains low and static).

Ms. Bayliff asked why, after spending millions on research, training and reform, there is still a justice gap. Some reasons may be:

- False stereotypes about rapists: The "nice guy" or undetected rapist is as dangerous as the ski mask-wearing stranger jumping from the bushes and is much more prevalent. Judges need to be educated that nice guys can be dangerous criminals. Ms. Bayliff cited Dr. David Lisak's study that randomly sampled nearly 2,000 men and found 120 rapists among them who had committed a total of 1,221 offenses. There were at least 360 unreported crimes. Of the 120 rapists, 76 were serial rapists who had committed 1,045 of the 1,221 offenses. The vast majority of the men were white. No one has been prosecuted. Ms. Bayliff discussed the concept of "targeted predation" in which alcohol is used as a tool that is used to excuse perpetrators and hold victims accountable.
- Victim's character: The character of the victims affects decisionmaking in the criminal justice system, but often it is not relevant. Ms. Bayliff emphasized the need for education about the neurobiology of trauma that makes victims more likely to recall events in a snapshot, not narrative, form. Thus, victims who say two different things may be acting from a traumatic standpoint and are not necessarily lying.

- Sentencing and race: Statistics show a significant sentencing difference depending on the race of the victim and the offender. The median sentence for a black offender/white victim is 19 years; for a black offender/black victim it is one year. A related issue is charging decisions. Although a charge is more likely if the perpetrator is a man of color, there is pressure on women of color who are victims not to turn in men of color who are perpetrators to a system that is viewed as racist.

Ms. Bayliff discussed sexual assault in the military. Because studies are usually done on a targeted group (new recruits, veterans), the results can be skewed. However, the research has shown that women in the military are at substantial risk for sexual victimization during their military careers and have high rates of lifetime sexual victimization. Some key aspects of military sexual trauma include: victims usually knowing the perpetrator, unit cohesion not being available as a protective factor, and reporting sexual assault possibly being seen as a betrayal of esprit de corps.

Ms. Bayliff discussed the criminal justice response to sexual violence, noting that the significant difference between how law enforcement investigates a robbery versus a rape can be very discouraging to rape victims. She suggested that law enforcement shift the focus from discrediting the victim to concentrating on the evidence, conducting better investigations and putting less reliance on "he said, she said." She also touched on the false reporting issue, stating that it is difficult to get reliable data on the numbers of reports of sexual assaults that are actually false. A related problem is the improper use of the term "unfounded" to mean anything from being unable to locate the victim to whether the victim and offender knew each other. Other factors that influence the criminal justice system response include prosecutors who use the victim's character or risk-taking behaviors as factors in charging, and jurors who rely on stereotypes and are harsh on victims and forgiving of rapists. All of these factors cause victims to lose confidence in the criminal justice system and allow rapists to go free.

Finally, Ms. Bayliff discussed the importance of lawyers working to affect how the media frame the case. She noted a study in which reading articles dramatically affected how students rated cases, depending on how emotionally charged the words were in the story. She suggested the following areas for more research and study:

- Explain the justice gap.
- Follow actual cases through the criminal justice system from beginning to end.
- Thoroughly analyze nonstranger sexual assault cases where there is a good outcome (conviction at trial).
- Answer the false reporting question.
- Develop questions that will expose potential juror biases.

## **Discussion**

**Dr. Walter DeKeseredy** decried what he called a rape-supportive culture and suggested that the larger goal is to eliminate sexism in general in our society. He offered the analogy of gang busting, in which gangs can be taken off the street but they come back because the environment of the neighborhood supports that culture. He added that the issue of sexual violence is compartmentalized as a criminal justice issue but, in fact, it is part of a much larger problem.

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## The Criminal Justice System's Response to Sexual Violence

### **Cassia Spohn, Arizona State University**

Dr. Spohn explained that, despite significant reforms in rape laws (e.g., an expanded definition of rape, and shield laws) and case processing (e.g., SANEs, SARTs, and specialized units) that were intended to improve the treatment of victims of sexual assault and lead to more reporting, sexual assault is still seriously underreported and case attrition remains high.

Dr. Spohn's review of research conducted to date indicates that definitive answers to this problem remain elusive. However, it does appear that the victim's relation to the perpetrator (a victim is more likely to report if assaulted by a stranger) and stereotypes about "real rapes" and "genuine victims" influence outcomes. It has been postulated that the essential features of aggravated rape cases meet the requirements of "real rape" and therefore the characteristics of the victim, including factors that might lead decisionmakers to blame her for being victimized (e.g., drinking, working as a topless dancer). are ordinarily irrelevant to the processing of aggravated rape cases.

Dr. Spohn noted a dearth of research focusing specifically on case-processing decisions in sexual assaults involving intimate partners, which she suggested reflects the "invisibility" of sexual assault in the context of domestic violence as well as the tendency of researchers to conceptualize intimate partner sexual assault and domestic violence as separate issues.

Dr. Spohn noted a need for future research in three key areas:

1. **Police decision making** — with an emphasis on understanding the decision to unfound charges and, if the suspect is identified, the decision to clear the case. Dr. Spohn stated that little is known about the factors that go into unfounding. A related issue is the factors that motivate victims to press charges and those that motivate law enforcement to pressure victims to drop charges.
2. **Response of the criminal justice system to intimate partner sexual assault** — and the intersection between sexual violence and domestic violence. Are cases involving intimate partners treated differently from those involving strangers? Dr. Spohn cited a need to understand the situational context of the crime, reasons why victims don't report, and the decision-making process of law enforcement and the courts to see what is generating the barrier to reporting.
3. **Effectiveness of specialized units for the investigation and prosecution of sexual assault cases** — the impact of these units is not yet known, including the perception of victims about the fairness of the process.

### **Discussant: Joanne Archambault, End Violence Against Women International**

Ms. Archambault discussed the following issues:

- **Statistics:** She cautioned against relying too heavily on FBI statistics, citing the narrow view of sexual assault that is used in assembling those numbers. She added that arrest rates could be equally misleading because cases that are inactive, rejected, unfounded or false are missing from arrest and prosecution rates.
- **Unfounding:** What is the meaning of "unfounding"? Is it being incorrectly used to mean "unsubstantiated"?

- **Community and support structures:** These are the front lines and often where victims go first.
- **Terminology:** "Simple" versus "aggressive" sexual assault. The use of the word "simple" makes a serious crime seem less dramatic.
- **Believability:** The same credibility issues are seen in both stranger and nonstranger cases.
- **Specialized units:** There is a concern that this might not be seen as a prestigious assignment. The management of the department is very important in this regard. Another issue is the possibility that the investigators might become callous, so study is needed about the bias of these departments.
- **Decisionmaking:** Statistics from eight of the best communities show a very low rate of follow-up on cases. Research is needed to see what is happening with the investigations.

## Discussion

**Judge Ron Reinstein**, noting the perception that specialized units are a good thing, said that a downside of these units is the burnout that comes with such intense work. He pointed out that the architecture of the courthouse is not conducive to separating defendants and victims' families, adding to the tension. **Judge Reinstein** suggested that judges should be more willing to allow evidence of prior acts in sexual violence trials. In answer to a question, **Judge Reinstein** opined that one way to educate judges is to have them hear firsthand accounts from victims and those who work in the field. The attendees briefly discussed the use of hearsay at trials. **Ms. Lydia Watts** noted that previously it was possible to prosecute cases in which the victim was not present by using hearsay testimony from doctors, law enforcement, etc., but that after *Crawford v. Washington* (USSC, March 8, 2004), such testimonial evidence is barred as violating the Confrontation Clause. **Dr. Patricia Speck** stated her view that nurses working with sexual violence victims are nurses first and whatever is said to them is for the purpose of diagnosis and treatment and therefore admissible as nontestimonial evidence.

**Dr. Dean Kilpatrick** suggested that the focus should be on the area of most attrition in sexual violence cases, which is lack of reporting. Since 80 percent of cases are not reported, more information is needed to understand why victims do not report and how best to encourage reporting. As part of this analysis, a better definition of sexual violence is needed.

**Dr. Mary Koss** stated that South Africa is using specialized prosecutors and rape courts that allow for an evaluation of victim experience. Even with these innovations, women in South Africa are reporting not feeling positive about their court experience.

**Dr. Spohn** said that more research on specialized units is needed because, although many assumptions are made about them, little is actually known about how they operate.

**Dr. DeKeseredy** stated that, historically, research ignores societal disorganization. He suggested looking at relative sexual violence rates among communities and analyzing those with higher rates to see what it is about the community structure that impacts reporting and would lend itself to a criminal justice response. He stressed the benefit of examining this issue in specific contexts.

**Ms. Archambault** suggested that more research be done on best practices.

**Ms. Shaw** asked about jurors, wondering whether there could be a better way of questioning jurors and whether there are other measures, such as special jury instructions or things a prosecutor should or should not say, that would be helpful. **Ms. Bayliff** stated that sexism is a strong societal element. She noted that judges give jurors very specific instructions on the law but, despite this, jurors decide cases largely on their assumptions about victim characteristics. **Ms. Bayliff** said that

judges should give lawyers more latitude in picking jurors and that more needs to be done to find ways to get at these biases of jurors without being obvious. She noted that this is a complex problem that varies jurisdictionally. **Judge Reinstein** said that questionnaires are a good method because people will write things privately on paper that they would not say publicly. **Dr. Antonia Abbey** suggested that more research should be done on jurors to ensure that their motives remain consistent. **Ms. Archambault** wondered about assembling mock juries to analyze their decisions based on evidence presented to them. She noted that it takes considerable time for a prosecutor to develop expertise in the area of sexual violence.

**Dr. Andre Rosay** brought up the issue of rural areas, where it is more difficult to get victims to report, and suggested that having one prosecutor follow the case all the way through is helpful in this setting to encourage greater cooperation. **Dr. T.K. Logan** referred to the isolated and impoverished people in Appalachia and asked who holds law enforcement and the courts responsible in rural areas such as those. **Dr. Koss** noted that the tribal situation is similar to rural communities, describing a sense in that community that the victim and perpetrator share equal responsibility. **Dr. Kilpatrick** noted the disproportionate funding resources allocated to rural versus urban communities that may also help explain the lower reporting rates in rural areas.

**Dr. Rebecca Campbell** noted the role of advocates in the community in helping survivors and working with police in a way that ultimately impacts the criminal justice system. She suggested more research on the role of advocates.

**Dr. Speck** raised a concern that systems (law enforcement, agencies, and courts) that respond to reporting are already overtaxed. She suggested research to quantify the capacity of the existing system to handle cases and determine the impact of increased reporting.

**Ms. Elaine Nugent-Borakove** stressed the importance of understanding more precisely the definition of a specialized unit, noting that in some cases this may not begin at the point of screening, which is a critical distinction.

**Mr. Paul Brennan** commented on the challenges of getting consistency in the supervised release area, noting that often the problem stems from one component, such as the court or turnover of personnel. He agreed that it takes years for someone to gain expertise in this area.

**Dr. Koss** suggested that law enforcement has an agenda about what types of crimes are more important than others, and opined that sexual assault is not considered of high importance in terms of investigation or prosecution. We saw this in Tucson where, of the almost 600 reports to the police in 2003, there were only 13 trials in Pima County for sexual assault involving adults. Although these local data mirror national and international trends, changing criminal justice practice requires more than advocacy for new laws. A large number of rape statutes have been changed over the last 30 years, but the statistics on convictions have not. **Mr. Brennan** stated that leadership is critical in this area, noting that, in one area, police disbanded the specialized unit.

**Dr. Kilpatrick** brought up the restrictive reporting option used by the military and suggested that this might be a useful model for the private sector. **Ms. Bayliff**, noting her experience with the Air Force during the time this program was being implemented, stated that it was a painful process to get started but that it did lead to an increase in reporting. Once victims were provided with counseling and support, a significant percentage decided to go forward with their claims. **Ms. Bayliff** stated that she did not know whether the program led to an increase in prosecutions. **Dr. Linda Ledray** stated that about 30 percent of jurisdictions have the equivalent of restrictive reporting.

**Ms. Shaw** suggested that in considering the issue of underreporting or nonreporting, researchers should look at victims' prior experience with sexual assault, perhaps during childhood, because an early experience could work to silence them and make them uncomfortable about reporting. **Dr. Pam Teaster** added that it could be helpful to look at sexual abuse from childhood through adolescence and analyze the impact of that experience.

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## Luncheon Presentation: From Survivor to SANE

### **Karen Carroll, R.N., Associate Director, Bronx Sexual Assault Response Team**

Ms. Carroll recounted being tied to her bed, gagged, and raped by her husband at knifepoint in 1994 following her discovery that he was having an affair. She described her experiences following the assault, dealing with a sympathetic police detective and an inexperienced doctor at the hospital, where a rape kit test was administered. In the aftermath of the rape, she lost 40 pounds and stayed indoors, fearful of running into her husband, who was at large for 6 weeks following the assault. Ms. Carroll described her husband's grand jury testimony, during which he claimed that they had smoked cocaine and had rough, but consensual, sex. He was indicted and went to trial, where a jury had trouble believing that a husband could rape his wife. Her husband ultimately pled guilty to first-degree rape and was sentenced to three to nine years.

Ms. Carroll discussed her own journey back from this experience that began with a job with the Westchester County SANE program and has continued with numerous speaking engagements, public appearances and projects including a television documentary, "Fear No More: Stop Violence Against Women"; writing a chapter in the book *Voices of Courage*; and participating in a virtual practicum to train health care providers titled "Sexual Assault: Forensic and Clinical Management." Ms. Carroll concluded by saying that she used to ask "Why me?" Now, she says, "I know that what happened to me happened not because of what I did, but because of everything that I will do."

**Comment: Ms. Shaw** expressed her appreciation for Ms. Carroll's brave presentation and noted her admiration for the work Ms. Carroll is doing.

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## Forensic Science Evidence and Sexual Violence

### **Donald Johnson, California State University**

Mr. Johnson stated that prior to his academic appointment he was a senior criminalist in the sheriff and coroner's office and was trained in polymorphic protein sampling. He noted that the most common types of physical evidence collected and examined in sexual assault cases are fingerprints, bodily fluids and hairs.

Mr. Johnson explained that DNA technology has revolutionized the practice of sexual assault analysis and research continues along a broad front. Biotechnology companies now look to see if there is a forensic application, a practice that led, for example, to the development of a kit to type fecal matter. However, because many questions are unique to forensic science, it is left to forensic scientists to develop techniques.

There are still limitations, such as the difficulty in identifying a mixture of body fluids, a type of sample routinely encountered in sexual assault casework. However, DNA technology has facilitated the analysis of mixed stains. Even with DNA advances, forensic methods work better on stranger-to-stranger rape, and they cannot give much information about the circumstances of the occurrence.

Mr. Johnson discussed the rape of a victim who becomes pregnant and elects to have an abortion. The embryonic tissue can now be typed and used as a screening tool for paternity and identifying the rapist.

Mr. Johnson noted that criminologists at crime scenes are sometimes limited by their own moral blinders. Although they are trained to identify evidence, they are not always aware where to look for it because they do not think like the criminal mind. Thus, the thought of looking for evidence on the handle of a broomstick may not occur to them because they do not contemplate using that object in such an inhumane way. This is an area ripe for education for crime scene technicians.

Mr. Johnson noted that research on the impact of forensic evidence is ongoing. He stated that in the DNA era he would expect different findings from those of the 1980s that found that forensic evidence had the greatest impact at sentencing. Today, forensic evidence is likely to have a greater role than in the past in nonstranger rapes such as incest and family sexual violence.

Mr. Johnson outlined four areas where future research is needed:

1. Examine the costs and benefits of applying limited forensic laboratory resources to a much greater percentage of collected forensic evidence in sexual violence cases to address the lengthy rape kit backlogs in labs and police agencies around the country.
2. Determine the relative value of forensic evidence in various types of sexual violence cases (stranger and nonstranger) and develop empirically based decision criteria for use by investigators and forensic administrators in deciding which evidence is to be examined.
3. Establish the relevance and proper interpretation of physical injury and trauma to victims of alleged acts of sexual violence.
4. Determine the scientific and evidentiary value of specific items requested in sexual assault kits and the best protocols and techniques to collect them from suspected victims and perpetrators of sexual violence. Examine whether the kits and accompanying protocols need to be modified when gathering evidence from adults and/or juveniles, males and/or females, and victims and/or suspects in the investigation of sexual offenses involving strangers, acquaintances, intimates and family members.

**Discussant: Patricia Speck, R.N., Ph.D., University of Tennessee Health Science Center College of Nursing**

Dr. Speck referred to abortifacets, noting that there needs to be a way to tie together the preservation methods — formaldehyde versus saline — so that the ability for important analysis is not lost. She added that respecting different beliefs or cultures is an issue in preservation of fetal tissue. Dr. Speck also stressed the need to deal with victims in an encompassing sense that takes into account their relationships and acknowledges where they are on the very wide spectrum of sexual violence that can include male rape and elder sexual abuse, so that their individual needs can be addressed. The perception is that stranger rape is more common, but that is a misconception. The forensic nurse must address the capacity to produce evidence while still interfacing with the professional responsibility to perform as a medical provider. It is important to know the right

questions to ask and how to access this particular patient at this point in time. Often, medical personnel do not ask because they do not want to know. Another important area is that of consent, and better evaluative tools are needed to look at consent.

Dr. Speck suggested that another area that needs to be addressed is how words have different meanings depending on the context. "Discovery" means one thing to a lawyer and another to a nurse. She noted, too, that often patients do not follow up because they do not want to remember. It is important to make them part of the process of law enforcement and the courts, sharing both its strengths and weaknesses. Failure to do this disempowers them. This will take better clinician education to understand the vulnerabilities of patient populations and see the implications of intervention.

Dr. Speck declared that one overriding issue relates to culture and diversity, particularly with the never-served population of addicts, prostitutes, the homeless and child abuse survivors. In looking at lab relationships, victims are not one size fits all — interview skills are needed to pick up on the innuendos. Dr. Speck referred to her research on post-coital interval across the life span, which she suggested puts to rest inconsistencies about whether to collect evidence.

## **Discussion**

**Dr. Campbell** stated that law enforcement triages sexual violence cases, then further triages the use of rape kits within those cases, so tests might be done at considerable discomfort to the victim but never sent to the lab. She suggested that more research is needed to assess the kinds of evidence that law enforcement and courts find most useful.

**Dr. Koss** asked Mr. Johnson to confirm that the vast majority of rape cases involve acquaintances where DNA evidence is not needed. There is a review by Parnis and Mont that documented how infrequently forensic evidence from the rape exam is introduced at trial. She suggested that those who fund criminal justice response to rape should not overcommit scarce resources to these costly facilities and processes if they are of limited application in these instances.

**Ms. Archambault** agreed that a certain number of cases are sorted out by law enforcement as not going anywhere. She asserted that one of the biggest problems is that often law enforcement just looks at the kit without assessing the case history of the victim, which is a very limiting approach that does not serve victims. She stressed the importance of having the forensic evidence for its possible future value in identifying serial offenders and catching them before they attack even more victims.

**Ms. Bayliff** asked whether there is an overemphasis on the medical part of the forensic exam. Are we putting victims through the rape kit exam without any real utility when perhaps the focus should be on care? She suggested that the issue of lack of medical care might become more acute in light of some pharmacies' decisions not to provide contraceptives because of religious beliefs, particularly in rural areas. **Ms. Debra Figarelli** asked whether the forensic evidence is necessary to prosecute a case. **Dr. Kilpatrick** noted that there are usually three possible defenses: misidentification, consent and "nothing happened." The value of DNA evidence goes to the misidentification defense. He asserted that collecting forensic evidence and giving care are not mutually exclusive and that failing to analyze forensic evidence does not make sense because that evidence might clear up other cases down the line.

**Dr. Ledray**, noting the backlog of evidence at laboratories, especially because so many different kinds of samples are provided, suggested that research is needed to better define what types of evidence are most useful and develop guidelines for collecting valuable evidence. **Ms. Carroll**

agreed, stating that many different types of samples are taken but it is not clear which are the best and most likely to be used in court. **Dr. Speck** suggested doing research on the beneficial outcomes of certain types of evidence.

**Dr. Lois Tully** reported that some of that kind of research is now being done, citing work with epithelial cells that has led to the ability to differentiate male from female skin cells. She added that considerable money is being spent on forensic research and mentioned a study that looked at lab backlogs, noting that many samples never make it to the lab. She stated that the general feeling seems to be to test all samples but that the ideal is for law enforcement and prosecutors to work closely to determine which are the most useful types of samples.

**Dr. DeKeseredy** asked about the role of forensic evidence in the large number of sexual assault cases where there is no penetration and where the perpetrator is not a stranger but may, for example, be blackmailing for sex. **Dr. Koss** stated that 80 percent of penetrative assaults are between nonstrangers, which raises a policy question about the possible overemphasis on technology without significant benefit.

**Ms. Figarelli** pointed out that one study had shown that DNA could be found 7–10 days after an assault, noting that even if 72 hours have elapsed since the assault, it still might be worthwhile to take a sample.

**Dr. Speck** opined that DNA has been pivotal in putting away serial rapists. She also pointed out differences in race and culture, citing a study with elder clients that showed that Caucasians were injured five times more frequently than African-Americans during an assault.

**Ms. Sally Laskey** cautioned against pigeonholing this issue as if all resources go to one place. She framed the challenge for the group as continuing to do good work in select areas while still focusing on the big picture. She added that this group has an important role as information brokers because, right now, information on sexual violence is not getting out even to practitioners, let alone survivors. Getting this information would empower survivors.

**Dr. Teaster** raised the issue of victims who are elderly, demented or of limited capacity.

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## **BREAK**

### Multidisciplinary Response Models to Sexual Violence Crimes: A Review of the Impact of SANE Programs and SARTs on Criminal Prosecution

#### **Rebecca Campbell, Michigan State University**

Dr. Campbell discussed the impact of SANEs and SARTs on the legal system, stating that a review of the empirical literature on the effectiveness of these two multidisciplinary response models suggests that prosecution rates rise with SANEs but that the results are more mixed with SARTs. However, she cautioned against drawing conclusions at this point because only 5–10 of the more than 400 SANE and SART programs have been studied in any depth.

SANE programs "strive to minimize the physical and psychological trauma to the victim and maximize the probability of collection and preservation of physical evidence in the legal system." SARTs promote a victim-centered model, which means that the rights, wishes and decisions of

victims/survivors should be respected. The overarching goal is complete coordination so that no matter where victims first present, they receive comprehensive care. SARTs may or may not collaborate with SANEs.

Clinical case studies suggest that SANEs are highly competent in forensic evidence collection due to their extensive training and experience. In terms of legal case outcomes, a study of a New Mexico SANE program indicated higher prosecution rates with SANEs. Dr. Campbell's recent study of a representative SANE program in the Midwest also indicated that more cases progressed further through the criminal justice system post-SANE than pre-SANE. Studies of SARTs-only approaches have produced inconsistent findings.

Current data suggest that in some communities SANE and SART interventions can positively impact legal case outcomes. A critical next step is to identify the mediating mechanisms of how and why multidisciplinary interventions can increase prosecution rates in order to identify "critical ingredients" necessary for change. The question is not only whether they make an impact, but why. Emerging data suggest three probable and likely interrelated mechanisms: supporting victims/survivors to increase their participation in the criminal justice system, changing how law enforcement conducts investigations and creating systemic change in the community response to sexual assault of holding perpetrators responsible.

Dr. Campbell outlined four unanswered questions:

1. Replication studies are needed to substantiate the competence of SANEs for medical forensic evidence collection, information that is needed when SANEs are questioned during expert testimony. Because virtually no data are available on when and how law enforcement and prosecutors use the medical forensic findings obtained by SANEs, research is needed to examine the relative weight that legal system personnel place on forensic evidence relative to other factors, such as victim credibility, in their decision making.
2. Formative research is needed to explicate the heterogeneity of intervention models in existence (specific goals, aims, philosophies and operations of the programs) and examine their relationship with the advocacy community. Multi-state trials are necessary to examine the impact of different types of SANE, SART or SANE-SART interventions on case progression through the system and final case outcome, looking at whether these multidisciplinary programs are more or less effective for particular kinds of victims/survivors or types of sexual assault crimes.
3. More research is needed on the underlying mechanisms that lead to increased prosecution and what happened in interventions that did not create positive change. In addition, the effect of the psychological trauma of sexual assault and difficulties encountered in help-seeking on the victims' level of engagement with the legal system merit study. Other areas to consider are the effect of rape victim advocates and how law enforcement and prosecutors define "lack of victim participation" and whether it squares with the victims' perceptions.
4. Other kinds of multidisciplinary response interventions, such as restorative justice programs, exist. Research is needed on both the process of developing restorative justice programs and their case outcomes, victim/survivor satisfaction and offender accountability.

Finally, all research on multidisciplinary response interventions must examine the extent to which these programs adequately address the needs of diverse victims/survivors such as ethnic minorities; gay, lesbian, bisexual or transgender survivors; victim/survivors with disabilities; and immigrants. In

addition, different intervention contexts, such as the military, tribal lands and colleges/universities, have not been studied.

### **Discussant: Sally Laskey, National Sexual Violence Resource Center (NSVRC)**

Ms. Laskey emphasized the importance of realizing that the criminal justice system is just one option and practitioners are doing the best to make that option work. She cautioned against compartmentalizing the image of prevention. Survivors do not want to be compartmentalized and there is a need to look at the entire picture.

Ms. Laskey stated that having strong support services and responses causes impacts at the community level. She mentioned some points to consider:

- There is no one model. SARTs look different in different settings, such as nursing homes, so we must be careful about making comparisons.
- A key piece is victim engagement — providing confidential services in the best way possible can lead to higher prosecution rates.
- It is worth looking at how and why we do our work.
- Mental capacity should also be looked at, including the issue of bystanders in nursing homes.
- More research is warranted on alternative reporting options.
- A significant challenge is understanding the impact of trauma and how it is best addressed.
- Lessons can be learned from the multidisciplinary responses to Hurricane Katrina and the Iowa flooding.
- A final piece going forward is to consider identifying core competencies for sexual assault team members.

### **Discussion**

**Dr. Rosay** suggested that law enforcement often relies on SANEs to prove the case and establish cause, especially for the more difficult cases such as capacity or psychiatric cases. **Dr. Campbell** stated that there is a need for more research about the strong relationship between SANEs and law enforcement, looking at whether the relationship is too close. Some believe that SANEs free law enforcement to do other areas of investigation rather than injury documentation, such as interviewing suspects.

**Ms. Nugent-Borakove** agreed that more research is needed in the areas of the value of SANEs and SARTs in cases of delayed reporting and the exposure of SANEs and SARTs to the range of victim behavior.

**Dr. Koss** noted that survivors want one person, not one service, to be their central point of contact. The question is how increase these personal points of contacts. Realistically, law enforcement and doctors cannot function in this role.

**Ms. Bayliff** raised the notion that it is the SANE who testifies for the victim. It is a tricky issue for survivors. They like having a victim advocate and like having the nurse testify but want someone else to talk to. She added that judges need to be persuaded to admit expert testimony about the general dynamics of the event.

**Ms. Archambault** noted that SARTs can investigate cases that are going nowhere. She called for research on the type of advocate that is most appreciated and well received by the victim.

**Dr. Koss** discussed restorative justice, noting that it is not a substitute for the criminal justice system. It is an alternative that is parallel to or separate from the criminal justice system. The basic philosophy is that crime has circles of impact. **Dr. Koss** noted that restorative justice is more advanced in other countries, particularly in the British system, although not in the area of sexual violence. **Judge Reinstein** observed that conceptually, the two programs taken together might have merit and asked how this works in light of the *Crawford* decision. **Dr. Speck** suggested that SANEs are first and foremost nurses and that this must be understood by the legal system in terms of testimony.

**Dr. DeKeseredy** noted that alternative dispute resolution has been successful in Canada, although it is not a total alternative to the criminal justice system. A barrier to alternative justice in the United States is that the criminal justice system is adversarial with a punitive aspect. This raises the question of whether a heterogeneous society is willing to think out of the "law and order" box and embrace an alternative system.

**Dr. Kilpatrick** stated that less than 10 percent of cases go to trial, so resolution of cases is one issue. Often, at trial, there will be a plea. Victims are customers, so no matter how far the case gets in the system, it is important to differentiate between the outcome of the case and the customer/victim satisfaction with how he or she was treated.

**Dr. Spohn** suggested that plea bargain decisions would be a worthwhile area of research. Another research area would be a study of a representative group of SARTs/SANEs to identify what produces effectiveness.

**Dr. Koss** stated that the standard for taking a rape case to court, even to plea bargain, is that it is provable in court. That is how it is triaged so as not to waste resources. She suggested that prosecutors would make more plea agreements if they had more options. If a plaintiff agrees to diversion, there must be prosecutorial resources to manage the offender if the diversion is not successful. **Judge Reinstein** noted that the standard for prosecution of a case is reasonable likelihood of conviction at trial.

**Dr. Speck** suggested identifying the key components of SARTs and seeing if those components influence outcomes without prosecution as another way to empower victims. **Ms. Kellie Greene** agreed with the importance of looking at what are successful outcomes for SARTs in terms of the impact on victims and keeping victims involved depending on where they came into the system.

**Ms. Archambault** opined that outcomes based on victim access will be dramatically different. She suggested a study on how much reporting occurs when SARTs are involved as opposed to regular police.

**Dr. DeKeseredy** suggested that an informal process of social control such as mediation often works better than the adversarial legal system for female victims who may find this a less expensive option.

**Ms. Chimi Boyd** noted that campus SARTs are often separate from community SARTs and suggested research on a single "hybrid" SART that would work in both areas. **Ms. Laskey** stated that she has worked with campus SARTs and said the challenge is cross-jurisdictional issues that require consideration about how to work with multiple law enforcement agencies. **Dr. Bonnie Fisher** suggested that universities do not want to publicize these crimes so they prefer a less visible process.

**Dr. Christopher Krebs** observed that a campus victim is less likely to report the assault if they knew the perpetrator or were drinking. Sometimes such victims have said that they did not realize until months later that what happened was a sexual assault. He endorsed alternative strategies for facilitating reporting, such as sitting and talking about what happened and why it was not okay. He suggested that the university might be a good place to try these potentially better methods of communication.

**Ms. Sarah Deer** noted that tribal governments are limited and can only impose a sentence of up to one year, which makes it not surprising that there is such a high rate of sexual violence among Americans-Indians. She added that half of American-Indian women do not live on reservations, which impacts the Title IX mandates, and suggested that these issues must be addressed in a larger context.

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## Discussion of NIJ's Research Priority Areas

**Mr. Auchter** asked all attendees to fill out the questionnaire in their folders titled "Vision for the Future of Sexual Violence Research" in anticipation of the following day's discussion. He invited the attendees to offer suggestions about priority areas of research that were not previously offered during the day's discussion, and they responded as follows:

**Dr. Rosay:** Prevention of sexual violence.

**Dr. Speck:** The business community has the capacity to affect the social environment by setting standards for acceptable behavior. The business community needs to be more aware of its power to set a zero-tolerance [policy] for sexual violence and become more proactive.

**Dr. DeKeseredy:** More data are needed about the motivation of perpetrators.

**Ms. Carroll:** Educating jurors.

**Dr. Krebs:** Gaining a better understanding about whether perpetrators understand that what they are doing is, in fact, a crime.

**Dr. Abbey** agreed that more research is needed about the etiology of perpetration.

**Dr. Grotzinger:** The "CSI effect."

**Dr. Basile:** First, I need to say that most perpetrators know that what they are doing is a crime. On another subject, CDC is all about prevention, but there is a need to work across federal agencies on prevention issues. The CDC surveillance study will focus on victimization, not perpetration, but CDC plans to assemble an expert panel on perpetration to discuss possible directions for CDC to take in this area.

**Dr. Campbell:** There are already intervention models that show progress. Future research should focus on the mechanisms of these successful interventions.

**Ms. Elvander:** NIH does research through the HIV model, which may be a helpful model for sexual violence. Also, there are many international experiences to learn from.

**Dr. Kilpatrick:** Consider the interface of victim harm, particularly from the standpoint of mental health and the interaction of the criminal justice system in terms of "customer" satisfaction. Another area of interest is substance abuse and its relation to the issue of sexual violence.

**Mr. Johnson:** There are areas of limitation of technology that NIJ has identified, one being the "CSI effect" through which criminals gain an education about what law enforcement is doing (e.g., increase in use of condoms — is this for personal protection or to destroy evidence?). An area of research would be looking at what criminals gain from the media and whether there are countermeasures to be taken by law enforcement. **Ms. Bayliff** agreed that the media should be a priority, suggesting that the media reinforces stereotypes (one in eight movies has a rape scene) and raises expectation of jurors (e.g., jurors expect DNA evidence even when both parties admit to the contact).

**Judge Reinstein:** The effect of various new programs that have been instituted, such as GPS monitoring.

**Ms. Laskey:** NSVRC has polled groups about research needs and identified three research areas affecting survivors:

- Cultural specificity of intervention models.
- Intended and unintended consequences of public policy efforts.
- Value and cost-effectiveness of sexual assault services.

**Dr. Ledray:** Adaptation of alcohol intervention models to sexual violence victims. **Dr. Logan** agreed but noted that prosecutors in her state had discouraged this approach because anything the victim said would be "discoverable" and thus admissible in a court proceeding. **Dr. Speck** suggested that, from a nursing standpoint, nurses do not let prosecutors determine how they practice by limiting their interaction with patients on the basis of what is admissible in court.

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## **Day Two — June 24, 2008**

### Thoughts on Day One

#### **Barbara Shaw, Illinois Violence Prevention Authority and Dr. Walter DeKeseredy, University of Ontario Institute of Technology**

Ms. Shaw pointed out the difference between research priorities that were mentioned at the beginning of yesterday's session, which included:

1. Sexual violence: Challenges, effective criminal justice response.
2. Police decisionmaking: Unfounding.
3. Factors that influence victim reporting and followthrough.
4. Effectiveness of specialized investigative/prosecutor units.
5. Evidence kits: Value, backlogs.
6. SANES/SARTs: How/why they affect prosecution rates, law enforcement response to them.
7. Campus venue: Alternative reporting options, restorative justice.
8. Defining the "success" of the criminal justice system response.
9. Multidisciplinary responses: Core competencies, case managers.
10. Role of victim services.

## 11. Plea bargaining.

versus those mentioned at the end of the session, which included:

1. Prevention.
2. Data from men/offenders as harmful effect of informing stereotypes.
3. Media: CSI effect, public opinion/rape myths.
4. Intervention models: Continue study of current and emerging SANE/SART models.\*
5. Learn from other countries' responses.
6. Victim harm interacting with victim satisfaction with the criminal justice system.
7. Substance abuse.
8. Technology (CSI effect).
9. Efficacy of GPS monitoring, legislative agendas.
10. Culturally specific intervention models.
11. Value/cost-effectiveness of sexual assault services.\*

Ms. Shaw noted that only two topics (noted with asterisks) were similar at the beginning and the end of the day.

Dr. DeKeseredy noted that the continuum of sexual violence encompasses a broad range of sexual experiences, not just those involving penetration. He cautioned about avoiding the trap of setting a hierarchy of abuse. The problem of sexual violence is an international one affecting millions of women on a daily basis, which makes it vital that researchers get their message out to the press and public because people do not think about sexual violence unless it happens to them directly. It is necessary to use research to generate political will. Dr. DeKeseredy observed that historically there has been a separation between domestic violence and sexual violence. But because it is rare to find a case where a woman who has been abused has not suffered multiple forms of abuse, sexual violence researchers must find ways to sensitize their domestic violence colleagues about sexual violence and team with them to address the problem as a whole. Finally, in light of the hard economic times that will certainly bring less funding for research, Dr. DeKeseredy urged his colleagues to enter the public arena and keep sexual violence in the public eye so that the importance of funding such research is not lost.

## Discussion

**Ms. Bayliff** agreed that dissemination of information is an important goal. She suggested developing strategies to combat the entrenched stereotypes associated with sexual violence and get the realities of the crime out to the public.

**Ms. Greene** agreed that the message must get out to the media but cautioned that not only does the public not want to identify with disturbing images of victims, but also such images do a disservice to the victims themselves, who need to get the message that they are not damaged for life by their experience. She suggested that stories should emphasize that sexual assault happens to normal people, not bad people, because this is not only true but also what the public will identify with. She noted the success of her speaker's bureau through which victims have shown that they are eager to tell their stories.

**Ms. Archambault** agreed with the need for more interaction between the domestic violence and sexual violence communities. She wondered whether some of the negative response to sexual violence might go to the deeper issues of how women are judged in general.

**Ms. Shaw** suggested that the general unwillingness to talk about sexual violence might be rooted in a desire to avoid facing the amount of sexual violence against children and the effect that this has on later victimization and aggression. Sexual violence against children is the most underattended to and hardest part of sexual violence.

**Ms. Watts**, noting her background as a family lawyer dealing in domestic violence, suggested that one of the reasons for the disconnect between domestic and sexual violence is that the vast majority of sexual violence offenders are known by the victim, but are not intimate partners; therefore, the range of civil legal needs of sexual assault survivors are very different from domestic violence survivors. Domestic violence survivors primarily need family law services, whereas sexual assault survivors need a whole array of civil legal services such as: privacy protection, employment, education, housing, economic resources and immigration assistance. Additionally, she suggested that in publicizing sexual violence to policymakers, emphasis should be placed on the fact that it is the root cause of many other crimes (drug abuse, gangs, etc.) and therefore addressing sexual violence would be very cost-effective in terms of impacting and lessening the crimes that flow from it.

**Dr. Kilpatrick** agreed that the sexual violence research community needs a marketing plan and, particularly, more accurate data to combat the erroneous view that sexual violence rates are declining. He also questioned whether reporting should be an "all or nothing" requirement for women, which he likened to jumping into the deep end of a pool, or whether they should have the option of sticking their toes in through alternative methods such as restrictive reporting. He suggested that these more measured approaches should be looked at in a more systematic way.

**Ms. Elvander** suggested that the sexual violence community consider more creative approaches, such as learning from other groups (HIV, cancer) that use well-known national spokespersons or the NIH pain researchers who are joining forces to be more effective as a group.

**Dr. Claire Renzetti** stated that the general public is not reading journals and tends to skip the tables and charts, so scientists need to communicate in a more user-friendly and accessible way — just the opposite of their training.

**Dr. Kilpatrick** and **Dr. Koss** discussed the dichotomy between statistics that show sexual violence rates decreasing and the reality that the rates are actually increasing. **Dr. Kilpatrick** cited his research showing that sexual violence was 25 percent more prevalent in 2005 than in 1991. He noted the different measuring methods employed by the FBI Uniform Crime Report (UCR) and the National Crime Victimization Survey (NCVS). **Dr. Koss** agreed but pointed out that since the DOJ statistics show these crimes decreasing, it is difficult to discuss the issue with policymakers and the public, who may well question why researchers refuse to accept this statistical evidence from the government. **Dr. Fisher** cited her studies in which the methodology was identical; the only difference was the wording of questions. There was a ten-fold increase in identification of rape cases when behaviorally specific language was used compared to more vague language.

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## **Breakout Session**

### Response to Sexual Violence

#### **Group 1: Criminal Justice System Response to Sexual Violence — Facilitator, Joanne Archambault**

## **Group 2: Forensic Response to Sexual Violence — Facilitator, Dr. Patricia Speck**

## **Group 3: Multidisciplinary Response to Sexual Violence — Facilitator, Sally Laskey**

The three breakout groups were asked to consider two main questions in relation to their specific topics:

1. What are the most important short-term sexual violence research priorities that NIJ should consider?
2. What are the most important long-term sexual violence research priorities that NIJ should consider?

Other questions that could be addressed included:

1. What are the most significant challenges to sexual violence research?
2. What are the most significant research accomplishments in the field?
3. What do you see as the most significant helpful next steps that federal agencies (or others) could take to move the field forward?
4. What are other crucial priorities (not necessarily research related) for the field if not already mentioned above?

## **Breakout Group Reports**

### **Group 1: Criminal Justice System Response to Sexual Violence — Reported by Joanne Archambault**

- Clarify public statistics to be accurate and meaningful in the areas of reporting, conviction rates and the trouble with UCR and NCVS. Look at what is not included.
- Stimulate more collaboration, not competition, among the international community, academics and DV/SV professionals.
- Address how the civil legal response can address victims' needs — is it effective? Does it fill gaps?
- Evaluate the effectiveness of SARTs — national multisite.
- Address the impact of the *Crawford* decision — how variable across jurisdictions? How does it impact how victims are processed?
- Establish funding mechanisms that encourage collaboration of academia and community (various system community-based services, justice services, etc).
- Provide planning grants to support development of innovative program model.;
- Provide better peer reviews of grant applications so that areas where experimental designs are of questionable ethics can be funded.
- Support and value of alternate models of justice.
- Develop outcome measures — stop using arrests and convictions; conviction rates will be higher because those are the cases that were selected for prosecution. Look at all cases.
- Measure the effectiveness of secondary prevention.
- Study consumption patterns (e.g., relationship of pornography to abuse).
- Be innovative in funding strategies and mechanisms.
- Clarify the definition of "unfounding" vs. "false" for standardized use. Victims are discouraged if there is not a compassionate professional response.
- Require accurate data on the rate of false reporting.
- Consider the effect of anonymous reporting policies on reporting rates — would reporting via computer help?

- Use ethnographic methodology in small-scale settings to explore various criminal justice system response issues.
- How do we define "success" in the criminal justice system response to sexual violence?
- How do extralegal factors and broad societal attitudes influence the criminal justice system (e.g., citizens who sit on juries)?
- Consider the role of specific investigative steps on case outcomes (e.g., offering polygraphs as a way to discourage victims).
- What are the system-generated barriers that victims face — such as in the time from assault to reporting?
- Evaluate the entire system/process to see which cases are successful and which are not. Consider issues such as multisite (diverse), what the biggest attrition problems are, and cultural (rural versus urban) implications.
- What is the effect of the civil/legal system on prosecution rates?
- Evaluate the effect of special units and their impact on victims.
- Intimate partner sexual assault — how does this intersect with sexual violence? What are the barriers to investigation/prosecution?
- In the context of post-separation/post-divorce, what should follow after the criminal justice system response — what are the outcomes for survivors?
- Compare jurisdictions with high/stable retention (law enforcement and prosecution) with those that are less stable, looking at urban vs. rural, victim satisfaction, case processing and outcomes.
- Evaluate the benefit of advocacy in terms of outcomes, victim satisfaction, participation and community-based vs. systems-based. Note that in some places advocates are barred from certain stages of the proceedings. Determine whether having advocates as early as possible leads to more positive outcomes.
- Consider whether the family justice model system is an effective model for sexual assault, looking at how sexual assault is treated in these centers.
- Study the effect of prior bad act evidence on case outcomes.
- Evaluate the cost-effectiveness of GPS monitoring.

## **Group 2: Forensic Response to Sexual Violence — Reported by Dr. Patricia Speck**

### **Short-Term Goals**

- Male rape: Establish baseline data for all categories (prison, underserved, children).
- Evaluation of systems delivery in all age groups (evidence collection).
- Research on injury: Documentation of injuries.
- Allocation of seed money for forensic projects such as clinical markers for healing time, brain function differences and cortisol levels.
- Bruising patterns: Emphasis on cross-cultural bruising patterns.
- Rape kit development: Why do we collect from specific areas, who has control of the kit and how does it get to the lab?
- Evaluation of the effectiveness of forensic evidence: At what point does it become more of a burden than a benefit? Do we need everything in the kit?
- Quantitative and qualitative studies on who decides and how on all processes/steps of rape kits — include manufacturers, cost analysis of contents and storage issues (boxes versus envelopes).
- Information from victims about their decision-making process — what do they think and how do they interface with the system? How good are we at encouraging them to participate in the system? Should we encourage?
- Standardizing rape kits: Evaluate the various ways kits work and improve techniques and training.

- Coordinate with the business community: Businesses can create a safer environment by making clear that sexual violence is not tolerated and posting signs showing what to do if sexual violence is encountered.
- Increase research on male-on-male rape as related to the Y chromosome: Techniques now allow us to distinguish between victim and assailant.
- Aging of evidence: How long does evidence remain viable for testing? What are the best ways to preserve evidence? Can degraded evidence be useful?
- Cost analysis: Evaluate the system from the trenches to the courthouse. What are the costs to victims in lost productivity and diseases (e.g., obesity)? What are the physical outcomes of sexual violence that might enhance the argument about savings in the health care system if sexual violence were stopped?
- Research on "on-site" tests that could give immediate information: What can be done at the point of contact to get information to the victim more quickly? What tests work/do not work?
- Collaborations: When do they work best and what are the outcomes?
- CSI effect on jurors' expectations and impact — what are the unintended negative effects? How does the CSI effect hinder investigations? How often does DNA change the defense strategy? What is the impact of the CSI effect on case outcomes? What is the effect on jury selection, and is there a screening tool available for picking jurors?
- Vaginal environment: More needs to be known about the areas where we expect to find evidence across the lifespan.
- Efficacy of collection of cervical mucus: Good reserve for seminal products.
- Anal environment as it relates to the collection of evidence.

### **Long-Term Goals**

- Effectiveness of community interventions and prevention activities: What resources should be tapped?
- Collection of kits for nonreporters and testing of them: Is there a promising practice?
- Impact of forensic collection on the legal system: CSI effect in the criminal justice system?
- How many kits go forward with and without victim reports?
- Best practices in talking about the kit: Do victims understand the process? How are victims empowered by the process of getting information about this process or do they even want to know?
- DNA storage: Who is responsible? Where is it stored? Is it standardized? Who owns the kit?
- DNA repair: Repair, replicate and identify the offender.
- Drug-facilitated sexual assault: Better identification; how much can be done on site?
- Picking up chemicals in the screen that imply drug use in offenders.

### **Challenges**

- Attitudes and beliefs.
- Collaborative efforts.
- Strategies to encourage women in underserved groups to participate in research — do they have shame, have secrets, feel too busy, use drugs, or not want to be bothered?
- Dissemination to collaborative groups and the public.
- Identify victims and nonreporters — legal issues of confidentiality.
- Integrate appropriate questions into health care practice — identify individuals who need psychiatric treatment or acute care.
- Balance the collection of evidence with potential impact on victims and the criminal justice system.

### **Group 3: Multidisciplinary Response to Sexual Violence — Reported by Karen Bachar**

- Drug-facilitated sexual assault — includes drugs and alcohol. Explore evidence collection, prosecution, investigation collaboration and how to reduce risk.
- What does multisystem mean? Define metrics for evaluating multisystem response, costs and other outcomes.
- Basic formative work on different types of multisystem response with emphasis on what outcomes to look at — case outcomes, victim satisfaction, impact, physical/financial outcomes and benefit to victim and community.
- Procedural justice — do victims perceive that the process is fair?
- Campus SARTs and the interface with the judicial process.
- Alternatives to full reporting to the criminal justice system — VAWA3 and reporting compliance issues, goal of not barring victims from exams, effect on rural areas, effect on cost/capacity to provide exams, and effect on SANEs.
- Revictimization — how does age/type of first victimization relate to subsequent victimization? What is the role of alcohol? Would longitudinal research be useful? How best to intervene? How to reduce the risk — case continuation?
- Basic formative research on the etiology of mechanisms.
- Studies specific to underserved populations and race-specific institutions in all of the above areas.
- Effect of multisystem approach on role/responsibilities of law enforcement — increase in investigations?
- Sustainability of the multisystem response in the face of uncertain funding — impact on rural areas? What factors help SANEs continue when good training and quality staff often lead to increased turnover?
- How is injury operationalized and used by courts — what factors impact ability to detect injury (e.g., skin color)? What factors impact prosecution — what information do prosecutors need? Are they comfortable using exam data?
- What are the relative contributions of:
  - General public attitudes about types of evidence expected? Does this vary by type of victimization?
  - Victim credibility: When is the victim believed?
  - Injury pattern: Is it possible to determine force/coercion/consent?
  - Jury research (rare because often cases don't get prosecuted) and law enforcement research?
- Effective sex offender management: Does probation management improve outcomes? Does early intervention with juvenile sex offenders help?
- Holding the criminal justice system responsible: What is the process for this? How are victims' rights handled by the criminal justice system in institutions, correctional facilities, retirement homes and campuses? What is the effect of new laws?
- Can different methods of distance learning be applied to better understand various sexual violence issues and areas?

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## Luncheon Presentation

### **Jolene Herson, Chief, Communications Division, NIJ**

Ms. Herson stated that different audiences want different things and it is necessary to shape the message to the audience. Practitioners and policymakers want the bottom line. Researchers want the nuances, subtleties and details. She explained that to be effective you must know your audience and realize that you will be talking to smart people who may know nothing about your topic, may

not be trained in the social sciences, have many sources of information besides your report, and will most likely skim and scan, not read the whole thing.

With this in mind, Ms. Herson asked how best to get your message out. Using NIJ as an example, she explained that while the core competence at NIJ is print, people are not going to the library. They go to the Internet, so NIJ is working on Web products that are user-friendly, score high in customer satisfaction and come up early in Google searches. Examples of NIJ Web and print publishing include:

- The *NIJ Journal* — six to eight articles per issue.
- Training.
- Chapter books — the "How To" guides are popular.
- Policy briefs — kept to one page.
- Association magazines and newsletters — this is what practitioners read.

Ms. Herson showed a slide of the NIJ home page, noting that the features box changes every few weeks. Blurbs on the home page link to a Web page containing the full report. Number of hits is measured. A "Did You Know?" section is also featured, this one highlighting a series of sexual violence expert chats done in conjunction with Harvard University and archived. A link takes visitors to the featured chat Web page.

Ms. Herson showed a slide of an NIJ topic page (Rape and Sexual Violence) that provides the kind of summary that policymakers look at. She also pointed out the Virtual Training DVD box on this page.

As an example of NIJ online and in-person training, Ms. Herson showed a training page where registration was available for, in this example, a course in DNA evidence for first-responding officers. She noted that these pages get high satisfaction scores.

The *NIJ Journal*, which in March did a cover story on the CSI effect, recently won a prestigious Gold Quill Award.

Ms. Herson discussed NIJ webcasts, such as the one with Harvard (also to be found at <http://www.innovations.harvard.edu> Exit Notice), and noted that NIJ does podcasts over Internet radio, does conferencing and networking, and has blog outreach. Although there is some concern about the fact that there is no third-party editorial review of blogs, NIJ takes care to use responsible bloggers, such as law professors.

NIJ requests that grantees provide press releases that are sent to the press and policymakers.

Ms. Herson concluded by asking everyone to consider what their message is and who cares about it, then shape it for the intended audience.

## Discussion

**Ms. Laskey** asked about NIJ blog outreach. **Ms. Herson** replied that NIJ sends email blasts to targeted audiences, including bloggers. In response to a follow-up question by **Dr. DeKeseredy**, **Ms. Herson** stated that her office monitors criminal justice system blogs so NIJ knows where their material is appearing. An NIJ editorial board keeps up on "hot topics" and directs the areas of interest. **Ms. Laskey** inquired about Google rankings. **Ms. Herson** stated that certain words in the headline matter but noted that a balance must be kept between search engine goals and accuracy.

**Ms. Shaw** observed that information does not flow directly from researchers to policymakers and wondered about a mechanism for putting data in front of policy makers in a way that encourages good policy-oriented pieces. She acknowledged the importance of knowing the audience and presenting specifically to that audience and asked whether there are samples that would be helpful. She also asked about creating a new expectation in professional journals that a practical application section be included to further illuminate the implications of the research in a way that would engage policymakers. **Ms. Herson** stated that keeping her research colleagues focused on the message of their research as it applies to practitioners and policymakers requires constant effort. **Dr. Kilpatrick** noted that another way to encourage an emphasis on the practical is to use the "translation" model and translate the scientific article into a different form for policymakers. **Dr. Ledray** stated that her group includes application sections. **Dr. Renzetti** suggested that it is helpful when peer reviewers identify policy implications in a manuscript. She recommended <http://www.vawnet.org> Exit Notice as a good Web site for translation through collaboration between researchers and practitioners.

**Ms. Shaw** suggested bringing together national associations, law enforcement, prosecutors, judges, advocates and researchers to discuss dissemination issues. **Mr. Auchter** noted that Ms. Herson's office is working on some documents that discuss research, draw implications for practice and link to source documents. **Dr. DeKeseredy** emphasized the importance of a sincere collaboration between researchers and practitioners in working on dissemination projects. **Dr. Kilpatrick** stated that he had developed some guidelines for such collaborations. He cited as a good example of dissemination the work by Dr. Koss, who took a research project then worked with media to craft a message that was helpful to anyone who was interested. It was noted that NIJ staff works with grantees to find ways to publish in practitioner journals and also brings together researchers and practitioners at conferences.

**Ms. Bayliff** stated that Dr. Logan's article was another example of successful dissemination. She suggested a project of social marketing of ideas to reach a particular audience. **Ms. Bayliff** noted the need to think about reaching younger people who present a completely different strategy about how they get information. However, she cautioned against too-graphic representations on sites like YouTube for fear of teaching would-be rapists more successful techniques. **Mr. Johnson** applauded discretion in not releasing material that gives away trade secrets to a dangerous population. **Ms. Shaw** suggested using well-known spokespersons, such as Michelle Obama or Oprah Winfrey, to publicly champion the issue of sexual violence.

**Mr. Auchter** asked for ideas about an NIJ solicitation on dissemination and implementation of research.

**Dr. Kilpatrick** suggested that before implementation it is necessary to know what works, noting that there is a long curve between research and how it filters down to treatment. We need to sort out what is true and effective in sexual violence, and that is what must be disseminated.

**Dr. Campbell** asked at what stage we say we have enough evidence. She suggested developing a consensus model to determine what evidence is good enough. **Dr. Koss** agreed with the idea of a consensus model, which would encourage thinking creatively. She envisioned a gathering of academics and practitioners to have a dialogue that would take this topic to the next level. She noted that this conference was a very good model for summarizing empirical findings before proceeding to set a future agenda. **Ms. Laskey** agreed, stating that people on the ground are confused and could be aided if research results could help them see the questions that they need to ask and the critical analytical skills that need to be developed.

**Dr. DeKeseredy** cautioned against the pitfalls of standardization when there are local variations. He questioned the effort to find so-called best practices and wondered if it is better to use a grassroots

approach, allowing policies to grow from inside communities and have local implementation of a policy that works, rather than trying to develop a national approach.

**Ms. Archambault** noted that research is usually a four-year process. Researchers must get back to the community with what these data mean and see whether the community can provide a way to help make things happen.

**Mr. Auchter** suggested looking at all the literature and synthesizing it for practice implications, as an example of a good, low-budget project. **Ms. Shaw** suggested taking that synthesis document and using it as a basis for discussion at a conference of practitioners and researchers to help point out what direction to take next. She added that the value in such collective thinking is also determining what to do with the research that we already have. **Dr. DeKeseredy** agreed, noting that the tight budget requires a major effort to keep the scientific enterprise alive and part of that is striving to get policymakers to recognize the value of ongoing research. The work is far from finished, and it is important that people realize this. **Dr. Abbey** opined that such a conference would have a prospective focus in helping to find gaps and identify areas for new research. **Dr. Kilpatrick** agreed, stating that when practitioners tell researchers what they need to know, that makes research all the more relevant. When researchers say that more research is needed, it sounds self-serving. This collaboration would be a way to have allies point out the relevance of research. **Mr. Auchter** suggested that the biggest barrier to implementation is money. Communities know what to do but don't have the resources to put the program in place. **Ms. Archambault** suggested that knowing whether something affects one in four versus one in six becomes irrelevant data. Sometimes the need is not for more data but for more common sense. **Dr. Kilpatrick** noted that research can help keep advocates honest and help make the case for what information is needed. Practitioners and researchers need each other for the policy piece of this problem.

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## Closing Remarks

**Mr. Auchter** thanked all the participants, noted the excellent ideas and suggestions that came from the workshop, and hoped that all the participants had expanded their networks.

**Dr. Zahn** stated that the ideas would be considered in the preparation of a strategic plan that will prioritize funding, not just for sexual violence but for all areas. She noted that practitioners and researchers can be very effective educators of policymakers, and encouraged the attendees to share relevant information from NIJ's research with such officials. She thanked all the participants and invited their continued input.

The workshop was adjourned at 2:00 p.m.

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Date Created: January 28, 2009