



United States Department of Justice

Office on Violence Against Women

Working Together to End the Violence

SASP Formula Grant Program

**Sexual Assault Services Formula Grant
Program**

2016 Report

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Considerations for the Reader

The Sexual Assault Services Formula Grant Program (SASP Formula) 2016 Report is submitted in fulfillment of the statutory requirement that the United States Attorney General provide a biennial report to Congress on all Office on Violence Against Women (OVW)-funded programs, including how funds were expended and an assessment of the effectiveness of funded programs. This report is based on data submitted by SASP Formula state administrators and SASP Formula subgrantees reflecting SASP Formula awards made and SASP Formula-funded activities engaged in during calendar years 2013 and 2014. This report also presents current research on best practices to respond to sexual assault, which OVW uses to invest in proven strategies and solutions to further the common goal of ending sexual violence.

The following are key notes for the reader to consider when reviewing the 2016 Report.

Report Overview

- The section entitled “Background” (page 1) sets out the statutory origins and outlines of SASP Formula—the program’s purpose areas, the distribution of SASP Formula funds, states’ eligibility, reporting requirements, and reporting methods.
- “SASP Formula 2013 and 2014: State-Reported Data and Distribution of Funds” (page 4) describes the sources of the data and how funds were used during calendar years 2013 and 2014—the types of agencies and organizations that received funding and the types of activities in which they engaged.
- “The Effectiveness of SASP Formula: An Overview” (page 7) describes key activities conducted with SASP Formula funds, discusses why they are important, and provides examples of specific SASP Formula-funded programs and initiatives engaging in those activities.
- “SASP Formula Aggregate Accomplishments” (page 21) presents the data reported by subgrantees in more detail with regard to activities accomplished with SASP Formula funds.
- Finally, Appendix A and Appendix B present data on the number and characteristics of victims served on a state-by-state basis.

The Scope and Burden of Violence

- VAWA and the SASP Formula Program address sexual assault, which predominantly victimizes women. However, VAWA programs and policies are designed to serve all victims of sexual assault, including men.
- The term “victim” is used in this report instead of “survivor” to emphasize that violence and abuse are criminal in nature, and to account for victims who survive violence and those who do not.

Data Presentation and Interpretation

- Throughout this report, references to “fiscal year” refer to the federal fiscal year (October 1–September 30).
- SASP Formula funds are awarded to states on a fiscal year schedule. SASP administrators sub-award these funds on various time schedules, and report on the use of funds by calendar year.
- Throughout this report, references to “states” or “states and territories” refer to all recipients of SASP awards—i.e., the 50 states, the 5 U.S. territories, and the District of Columbia.
- Prevalence data are presented to the tenth decimal place where possible, and presented as whole integers if unavailable.
 - For example: *In an online study about women’s disclosure of sexual assault, almost one-quarter (23.9%) of respondents indicated that they had not previously disclosed an unwanted sexual experience to anyone.*
- The most frequently reported data are generally included (for example, purpose areas or victim services). For more information about the types of data that grantees provide, refer to the sample forms located on the VAWA MEI website: <http://muskie.usm.maine.edu/vawamei/forms.htm>.
- The overall number of victims served represents an unduplicated count; this means that each victim is counted only once by each subgrantee, regardless of the number of times that victim received services during each calendar year.
 - Victims are reported only once for each type of service received during the calendar year. For example, the same victim might seek legal advocacy twice and seek victim advocacy three times. Subgrantees would report two counts of services provided (one legal advocacy service and one victim advocacy service) and one victim served.
- Subgrantee data are often presented as totals across the two-year reporting period. Throughout this report, unless otherwise indicated, “total” represents 2013 and 2014 data added together.
 - For example: *Subgrantees received a total of 85,441 hotline calls.*
 - In some cases, a total is not available.
 - For example, some victims may seek multiple services across the two annual reporting periods; hence, providing a total would include

duplicated numbers of victims. In those cases, a calculated average across the two annual reporting periods is presented.

- For example: *During the two-year reporting period subgrantees provided services to an annual average of **41,560** victims.*
- Subgrantee data is presented as whole integers.
 - For example: *During the two-year reporting period, SASP Formula subgrantees served an annual average of **11,932** victims who lived in rural areas.*
- Percentages throughout the report may not add to 100 percent due to rounding.

Executive Summary

This summary accompanies the full 2016 report to Congress, which the Office on Violence Against Women (OVW) can provide upon request.

Background

Congress first enacted the Violence Against Women Act (VAWA) in 1994 to improve the national criminal justice response to violence against women, ensure services for victims, and create informed policy on the issue. Reauthorized in 2000, 2005, and 2013, VAWA articulates Congress's commitment to effective strategies for preventing and responding to domestic and sexual violence, holding offenders accountable, and ensuring safety, autonomy, and justice for victims.

OVW administers grants under VAWA and provides technical assistance and training to grant recipients so that funds are used to support evidence-based interventions, when and where possible, and so that grantees can effectively combat these crimes in their communities. OVW currently administers 15 current statutorily authorized discretionary and four formula programs that provide grants to criminal justice agencies, victim services organizations, and other entities that address domestic and sexual violence.

The Sexual Assault Services Formula Grant Program (SASP Formula) was first authorized through VAWA 2005 to provide intervention, advocacy, accompaniment, support services, and related assistance for adult, youth, and child victims of sexual assault, as well as their families and others affected by the sexual assault. It is the first federal funding stream solely dedicated to the provision of direct intervention and related assistance for victims of sexual assault.ⁱ

ⁱ SASP funding is distributed by OVW through five grant programs: SASP Formula, SASP Culturally Specific Services Program, Tribal Sexual Assault Services Program, State Coalitions, and Tribal Coalitions. This report covers data from the formula grant program only. More information on the other grant programs can be found in the [2016 Biennial Report to Congress on the Effectiveness of Grant Programs Under the Violence Against Women Act](#).

Subgrantee Perspective

Thanks to SASP funding, we are able to provide services to any victims seeking services in the five counties we serve. An advocate is always present with the victims during [the medical forensic exam] process. Advocates also accompany victims to all legal proceedings, and schedule victims for counseling or therapy. Through outreach activities, we are able to increase community awareness about our services. Therefore, the number of victims served by our agency continues to increase.

Shoals Crisis Center, Alabama

This Executive Summary highlights the activities and accomplishments of SASP Formula subgrantees in their efforts to help victims and their families recover from the destructive and pervasive effects of sexual assault. The full SASP Formula 2016 Report to Congress (2016 SASP Formula Report) includes detailed descriptions of subgrantees' aggregate accomplishments and data on their work spanning the two-year report period. This summary and the full report include examples, in the words of state administrators and subgrantees, of the ways in which they are using SASP Formula funds to assist victims of sexual assault.

- During Federal Fiscal Years 2013 and 2014, OVW awarded a total of **\$32,967,675** to states and territories under SASP Formula.
- States and territories in turn subawarded a total of **\$31,105,324** to an annual average of **614** subgrantees.
 - **343** dual programs (sexual assault and domestic violence), **200** sexual assault programs, **43** community-based organizations, **22** sexual assault/dual coalitions, **6** child advocacy centers, and **1** tribal sexual assault organization received SASP Formula funding each year, on average.

Scope and Impact of Sexual Assault

OVW relies on current national data and empirical research to inform its understanding of the scope and nature of sexual violence in the United States. National surveys administered by the Bureau of Justice Statistics (BJS) and the Centers for Disease Control and Prevention (CDC) measure the incidence and prevalence of sexual assault and some of the adverse outcomes associated with it. National data and research findings, taken with numerical and narrative information that VAWA-funded grantees report about the victims they serve and the services they provide, paint a picture of a persistent public health crisis for which solutions—however innovative and effective—are in limited supply.

Subgrantee Perspective

SASP funding has been critical to WINGS's ability to grow the number and type of support groups for adult survivors of childhood sexual abuse. These funds help ensure essential staff members have the resources they need to manage our specialized sexual assault program via our clinical training program, our education and outreach program, and our support group program. We know of no other organization in our state or nationally that has the institutional knowledge and experience with this underserved population of adult survivors of childhood sexual abuse.

WINGS Foundation, Colorado

OVW uses primarily two national measures of incidence and prevalence to estimate the extent of sexual violence. As one is health-based and the other is criminal justice-based, these surveys generate different data on rates of violence. The National Intimate Partner and Sexual Violence Survey (NISVS), conducted by the CDC, is an ongoing telephone survey that collects information from people ages 18 and older about their experiences of sexual violence, domestic and dating violence, and stalking. The NISVS makes national- and state-level data available simultaneously and contributes to an understanding of the impact of violence and abuse on distinct populations. Whereas the NISVS takes a public health approach to measuring incidence and prevalence, the National Crime Victimization Survey (NCVS), conducted by BJS, represents a criminal justice perspective. Through household telephone surveys, the NCVS collects information on nonfatal crimes, including those reported and not reported to law enforcement, against people 12 and older.

Other national data sets, such as the Uniform Crime Report (UCR), which the Federal Bureau of Investigation (FBI) uses to publish statistics on crimes known to law enforcement, and the Youth Risk Behavior Surveillance System (YRBSS), which monitors behaviors that contribute to violence among youth, are also used to further understand the extent to which sexual assault affects people in the U.S. and its considerable impact on communities.

Finally, OVW uses the findings of studies funded by the National Institute of Justice (NIJ) and other federal agencies to further inform its grant-making. These studies describe the dynamics and impact of sexual assault, including perpetrator behavior and characteristics, physical and mental health outcomes among victims, criminal justice processes and outcomes, and the effectiveness of system- and community-based interventions to prevent and respond to sexual assault and hold offenders accountable.

Effectiveness of SASP Formula Funding

SASP Formula funding is critical to addressing sexual assault in communities across the country. On average, the SASP Formula program funded annually **308 full-time equivalent (FTE) staff**, including victim advocates, counselors, outreach workers, legal advocates, and program

coordinators and administrative staff. SASP Formula funds are used primarily to provide victim services but can also be used to develop and distribute informational materials, and to conduct outreach to victims. States may use funding to enhance existing programs and services, to fill gaps in services, or to establish programs where none previously existed.

Grants are awarded to all states and territories according to a statutorily determined, population-based formula. Funds granted to the states are then subgranted to rape crisis centers and other nongovernmental and tribal agencies that provide direct intervention and related services to victims of sexual assault without regard to the age of the individual.

Services for Victims and Families

SASP Formula funds are used to provide services to adult, youth, and child victims of sexual assault and their families as they cope with the immediate and long-term impact of sexual violence. These services assist victims in a time of crisis to help them stay safe, connect with resources to support their recovery and, if they choose, support them through the criminal justice process. Direct services funded under SASP Formula include:

- **Crisis intervention and victim advocacy** to help victims deal with their immediate needs after being victimized, find resources, and plan for safety;
- **Counseling services and support groups** to help address the trauma that victims experience by providing a space, either individually or in a group setting, to work through the physical, emotional, and financial implications of the sexual violence;
- **Legal advocacy and court accompaniment** in civil and criminal matters, which help victims navigate the legal system and provide emotional support; and
- **Hospital, clinic, or other medical response**, which allows for advocates to be present within the medical setting, supporting and advocating for victims during sexual assault medical forensic exams and other non-forensic medical treatments.

Subgrantee Perspective

Our SASP-funded advocate was contacted to provide advocacy and accompaniment during a sexual assault forensic exam for a teenage rape victim. Our advocate was able to assist the victim in securing a temporary order of protection against the assailant, as well as assisting a secondary victim [i.e., a friend or family member] in obtaining victim's compensation for lost work hours incurred while attending to matters related to the assault. Moreover, in the aftermath of legal proceedings, the helping relationship that was forged from having a single point of contact was pivotal in connecting the victim's mother to counseling services.

Lakeview Center, Inc., Florida

During the two-year reporting period, SASP Formula subgrantees provided **192,933** services to victims. They served an annual average of **55,636** individuals, including **41,560** primary victims of sexual assault. The services that SASP Formula subgrantees most frequently provided to victims were:

- Hotline calls: **85,441**
- Crisis intervention: **49,197**
- Victim advocacy: **44,094**
- Counseling services/support groups: **38,422**
- Hospital/clinic/other medical response: **14,631**
- Criminal justice advocacy/court accompaniment: **14,233**

Services for and Response to Underserved and Other Vulnerable Populations

Victims' experiences and a growing body of research confirm that different populations are victimized by violence and abuse—and report it—at different rates. The ways that victims experience, resist, and survive violence can be shaped by a host of cultural, social, and economic factors.

Thus, funds authorized by Congress through VAWA are used to address unique challenges that people from underserved and marginalized populations face when they are victimized. SASP Formula subgrantees are encouraged to deliver community-based, culturally specific services and support mechanisms, including conducting outreach activities, to these populations.ⁱⁱ

Subgrantee Perspective

SASP funding has allowed SACASA to serve a very rural and isolated underserved community. Over 70 percent of the county is Hispanic so our ability to provide bilingual and bicultural services is critical. As a result of this funding, there is now a dedicated full-time sexual assault advocate who has been able to link victims with services, provide crisis intervention, advocacy, and education to the victims and families she serves.

Southern Arizona Center Against Sexual Assault

ⁱⁱ In addition to SASP Formula funding, there are two discretionary programs—SASP Culturally Specific Services Program and Tribal Sexual Assault Services Program—that are specifically intended to support services for sexual assault survivors from underserved populations.

During the two-year reporting period, SASP Formula subgrantees served an annual average of:

- **1,031** victims who identified as American Indian or Alaska Native;
- **610** victims who identified as Asian;
- **5,897** victims who identified as Black or African American;
- **7,127** victims who identified as Hispanic or Latino;
- **4,466** victims who identified as male;
- **273** victims who identified as Native Hawaiian or Pacific Islander;
- **1,986** victims who are Immigrants, refugees, or asylum seekers;
- **11,932** victims who lived in rural areas;
- **4,593** victims with disabilities;
- **117** victims who identified as D/deaf or hard of hearing;
- **3,644** victims with limited English proficiency;
- **4,848** victims who were children (ages 0 to 12);
- **14,048** victims who were youth and young adults (ages 13 to 24); and
- **1,079** victims who were elderly adults 60 or older.

Remaining Areas of Need

SASP administrators and subgrantees are asked in their reports to identify what needs remain unmet. Their responses help OVW understand the emerging and under-resourced issues faced by victims, the systems designed to serve them, and barriers to holding offenders accountable. Administrators identified the following critical areas of unmet need in their states in their 2013 and 2014 reports:

- Improving training for law enforcement, prosecutors, and judges on the dynamics of sexual violence in order to promote best practices;
- Enhancing offender accountability and improving the criminal justice response to sexual assault;
- Expanding awareness of, and access to, victim services, especially in rural areas;
- Bolstering community education and prevention efforts to combat myths about sexual assault and improve community response;
- Improving services and outreach to underserved groups, especially immigrants and refugees, victims with limited English proficiency, LGBTQ victims, victims with disabilities, male victims, and those who are homeless or suffer from mental illness;
- Helping victims meet their basic needs, including housing, transportation, childcare, counseling and mental healthcare, and legal assistance; and
- Maintaining existing levels of service provision given financial constraints and high staff turnover.

Administrator Perspectives

Training continues to be needed across law enforcement and judicial branches. There is training through the law enforcement academy for new recruits but there is no mandated training requirement for personnel after initial training. We believe that annual, mandated training for all law enforcement would improve personnel relations with victims and an understanding of trauma-informed care. Victim blaming continues even from judges. Providing training to judges and prosecutors would improve the likelihood of a victim reporting their victimization and participating in the criminal justice process.

SASP administrator (Montana)

Arkansas contains a vast amount of rural and impoverished communities. One of the greatest needs is reaching those isolated communities and providing victims of sexual violence with the same access to high quality professional services as in the more developed parts of the state.

SASP administrator (Arkansas)

Subgrantees cite a need for increased outreach and advocacy to survivors who don't speak English, especially those who speak languages other than Spanish. As mentioned previously, Nebraska has several resources for Spanish-speaking survivors. However, there are several other immigrant and refugee groups in Nebraska, such as Somalian, Sudanese and Vietnamese groups, for which there are few resources. Many subgrantees struggle to find well trained and confidential translators, interpreters, and multilingual advocates to assist them in working with these survivors.

SASP administrator (Nebraska)

Between 2011 and 2013, the number of new clients served by rape crisis programs in New York State increased 44% (from 8,734 to 12,586), and the total number of clients served by rape crisis programs in New York State increased 65% (from 19,069 to 31,547). The increased demand for services, in combination with dwindling resources for rape crisis programs, is a recipe for ever-increasing levels of advocate burnout, staff turnover, and compromised services for victims.

SASP administrator (New York)

The 2016 SASP Formula Grant Program Report to Congress reflects two years of collective efforts to respond to sexual assault across the country. The Report includes detailed demographic information on victims served by state, as well as aggregated information on victims served and services provided. Administrators and subgrantees speak in their own voices about significant accomplishments that would not have been possible in the absence of SASP Formula funding, and about the work that remains to be done.

Background

Statutory Purpose Areas of SASP Formula

The Sexual Assault Services Program (SASP), was created by the Violence Against Women and Department of Justice Reauthorization Act of 2005 (VAWA 2005), and reauthorized by VAWA 2013.^{1,2} It is the first federal funding stream solely dedicated to the provision of direct intervention and related assistance for victims of sexual assault.ⁱⁱⁱ

The purpose of SASP Formula is to provide intervention, advocacy, accompaniment, support services, and related assistance for adult, youth, and child victims of sexual assault, their families and household members, and others collaterally affected by the sexual assault. SASP Formula helps victims heal from sexual assault trauma through support to victim service organizations, such as rape crisis centers, with 24-hour sexual assault hotlines, crisis intervention, and medical and criminal justice accompaniment. SASP Formula supports such services through the establishment, maintenance, and expansion of rape crisis centers and other nongovernmental and tribal programs and projects that assist sexual assault victims without regard to the age of the individual.

By statute, SASP Formula funds may be used for:

- 24-hour hotline services providing crisis intervention services and referral;
- Accompaniment and advocacy through medical, criminal justice, and social support systems, including medical facilities, police, and court proceedings;
- Crisis intervention, short-term individual and group support services, and comprehensive service coordination and supervision to assist sexual assault victims and non-offending family or household members;
- Information and referral to assist the sexual assault victim and non-offending family or household members;
- Community-based, culturally specific services and support mechanisms, including outreach activities for underserved communities; and
- The development and distribution of materials related to the services described in the

ⁱⁱⁱ SASP funding is distributed by OVW through five grant programs: SASP Formula, SASP Culturally Specific Services Program, Tribal Sexual Assault Services Program, State Coalitions, and Tribal Coalitions. This report covers data from the formula grant program only. More information on the other grant programs can be found in the *2016 Biennial Report to Congress on the Effectiveness of Grant Programs Under the Violence Against Women Act*, located at <http://muskie.usm.maine.edu/vawamei/ovwrptcongress.htm>

previous bullets.

For Fiscal Years 2013 and 2014, states were encouraged to develop and support projects to:

- Support rape crisis centers in providing direct intervention and related assistance;
- Support dual programs that provide sexual assault and domestic violence services to enhance their provision of direct intervention and related assistance tailored for victims of sexual assault;
- Retain core services for victims of sexual assault; and
- Increase support for underserved populations, particularly communities of color, in a culturally appropriate manner, with a special emphasis on addressing the African American, tribal, and Lesbian, Gay, Bisexual, and Transgender (LGBT) communities, as well as individuals with disabilities and Deaf individuals.

Eligibility Requirements and Distribution of SASP Formula Funds

The U.S. Department of Justice, Office on Violence Against Women (OVW), administers SASP Formula according to a statutory formula. Under the program statute, state and territory allocations are as follows: each of the 50 states, the District of Columbia, and Puerto Rico will be awarded no less than 1.5% of the total amount appropriated in a fiscal year for SASP Formula grants. For all other territories, no less than 0.25% of the total appropriations will be awarded. In addition to this base amount, remaining funds shall be allotted to each state and each territory in an amount that bears the same ratio to such remaining funds as the population of such state and such territory bears to the population of all the States and the territories (see: 34 U.S.C. sections 12511[b][4]).

Funds granted to the states are then subgranted to rape crisis centers and other nongovernmental and tribal agencies that provide direct intervention and related services to victims of sexual assault. Each state designates an official to serve as SASP administrator who oversees the process by which the state awards subgrants. A state may choose to pass SASP Formula grant funds through its sexual assault coalition to direct-service agencies or to directly distribute the funds.

Reporting Requirements

All SASP administrators and subgrantees are required to submit annual progress reports on how they used funds in the previous calendar year. They must include the number of victims served and partially served, as well as those who sought services but were not served. This reporting requirement is similar to those for other OVW programs that are statutorily required by VAWA 2000 to report on the effectiveness of OVW-funded activities.^{iv}

In response to these reporting requirements, and as part of a broader effort to improve measurements of program performance, OVW has worked with the VAWA Measuring Effectiveness Initiative at the Muskie School of Public Service, University of Southern Maine (Muskie School), to develop meaningful measures of program effectiveness and progress report forms, and to analyze data for all OVW-administered grant programs, including SASP Formula. The Muskie School provides ongoing, extensive training and technical assistance to state SASP Formula administrators in completing forms. States are required to submit both their SASP Formula Administrator report and their subgrantees' reports annually.

^{iv} Neither VAWA 2005 nor VAWA 2013 included specific reporting requirements for newly funded programs such as SASP. However, these programs follow the same requirements as programs under VAWA 2000. VAWA 2000 includes provisions requiring that grantees report activities funded by OVW and that the Attorney General submit a biennial report to Congress on the effectiveness of activities of OVW-funded programs [Public Law No. 106–386, Section 1003 (codified at 34 U.S.C. § 12511[c][6]).

SASP Formula 2013 and 2014: State-Reported Data and Distribution of Funds

During Fiscal Years 2013 and 2014, OVW awarded a total of **\$32,967,675** to states and territories under SASP Formula. During calendar years 2013 and 2014, states and territories in turn sub-awarded a total of **\$31,105,324**.^v

This report provides data on the distribution and use of SASP Formula funds during calendar years 2013 and 2014. In 2013, **56** SASP administrators and **626**^{vi} subgrantees submitted data. In 2014, **54**^{vii} administrators and **602**^{viii} subgrantees submitted data.

During the two-year reporting period, on average, these subgrantees included:

- **343** dual programs (sexual assault and domestic violence);
- **200** sexual assault programs;
- **43** community-based organizations;
- **22** sexual assault/dual coalitions;
- **6** child advocacy centers; and
- **1** tribal sexual assault organization.

How SASP Formula Funds Were Used: Subgrantees

Staff

Subgrantees used SASP Formula funds to pay for staff, informational materials, and services to victims of sexual assault. During the two-year reporting period:

- **97%** of subgrantees used their SASP Formula awards to fund staff positions, most often professional positions providing direct services to victims.

^v Throughout this report, aggregate data on SASP Formula funds subgranted are consolidated from SASP administrators' reports to OVW.

^{vi} American Samoa and the Virgin Islands did not submit SASP subgrantee reports in 2013.

^{vii} Alaska and Michigan did not submit SASP administrator reports in 2014.

^{viii} American Samoa, Arkansas, and Indiana did not submit SASP subgrantee reports in 2014.

- Staff providing direct services to victims represent **77%** of the total SASP Formula-funded full-time equivalents (FTEs).^{ix}

Victim Services

During the two-year reporting period:

- An annual average of **41,560** (99%) of victims who sought services received them.
- **The majority of those victims were white (60%), female (89%), and between the ages of 25 and 59 (46%).**^x
- Subgrantees most frequently provided the following services:
 - Crisis intervention to **49,197** victims;
 - Victim advocacy to **44,094** victims; and
 - Counseling services/support groups to **38,422** victims.
- Subgrantees received **85,441** hotline calls from primary victims.^{xi}

Informational Materials

SASP Formula subgrantees develop, revise, and/or distribute a variety of informational materials that describe the services of SASP Formula-funded organizations. Examples include outreach and promotional materials and websites. In 2013 and 2014, **23%** of all subgrantees used SASP Formula funds for informational materials.

Statutory Purpose Areas Addressed

Subgrantees reported using SASP Formula funds for six statutory purposes. Subgrantees most frequently addressed crisis intervention and providing information and referrals.

^{ix} One FTE is equal to 2,080 hours—40 hours per week over 52 weeks.

^xFor more information on the races/ethnicities and other demographic characteristics of victims served, see Table 7. To see this information displayed by state, see Appendix B, tables B2a and B2b. These percentages are based on the number of victims for whom race/ethnicity, gender, or age was known. Victims may identify with more than one race/ethnicity, or may not report their race/ethnicity at all. Accordingly, these data may represent an undercounting of the actual number of underserved victims. Hotline services, for example, generally do not collect this race/ethnicity information, as collecting that information from callers can adversely affect service providers' ability to assist victim callers. Whenever collecting victim demographic information presents a barrier to service, or could violate confidentiality or jeopardize a victim's safety, service providers are advised not to collect it.

^{xi} Primary victims are those against whom the sexual violence was perpetrated.

Table 1. Statutory purpose areas addressed with SASP Formula funds in 2013 and 2014

Purpose area	Annual Average Subgrantees (N= 614)	
	Annual Average	%
24-hour hotline services	443	72%
Accompaniment and advocacy through medical, criminal justice, and social support systems	498	81%
Crisis intervention	564	92%
Information and referral to assist the sexual assault victim and family	526	86%
Community-based, linguistically and culturally specific services	282	46%
The development and distribution of materials on issues related to sexual assault	194	32%

NOTE: Each subgrantee was able to select all purpose areas addressed by its SASP Formula-funded activities during calendar years 2013 and 2014. Thus, the number of purpose areas identified is greater than the total number (N) of subgrantees.

Types of Agencies Receiving SASP Formula Funds

During the two-year reporting period, dual programs, meaning those that serve both sexual assault and domestic violence victims, were the most common type of organization to receive SASP Formula funds. Sexual assault programs were the next most frequent recipients, followed by community-based organizations, and sexual assault/dual coalitions.

Table 2. Types of organizations receiving SASP Formula funds in 2013 and 2014

Type of organization	2013		2014	
	Subgrantees (N = 626)		Subgrantees (N = 602)	
	Number	%	Number	%
Dual (domestic violence/sexual assault) program	353	56%	333	55%
Sexual assault program	202	32%	197	33%
Community-based organization	38	6%	48	8%
Sexual assault or dual coalition	27	4%	16	3%
Child Advocacy Center	5	1%	7	1%
Tribal sexual assault program	1	<1%	1	<1%

NOTE: Percentages may not add to 100 because of rounding.

The Effectiveness of SASP Formula: An Overview

Sexual violence is a pressing public health concern that has extensive consequences for victims, offenders, families, communities, and our nation. Responsive programming that adapts to meet the needs of victims and their families is an essential component of cultivating safe and secure communities. Victim services and the criminal and civil justice systems continue to evolve as new innovations and best practices emerge.

This section describes SASP Formula-funded services provided to victims of sexual assault. It discusses the burden of sexual violence, why the services funded by SASP Formula are necessary, and how they improve victim safety. Program-wide accomplishments are highlighted, as well as specific SASP Formula-funded projects engaging in effective practices.

Sexual Assault: Definition and Prevalence

SASP Formula subgrantees serve victims of sexual assault. VAWA, as amended by VAWA 2013, defines the term “sexual assault” as “any nonconsensual sexual act proscribed by federal, tribal, or state law, including when the victim lacks capacity to consent.”² Broadly, sexual assault may include rape, attempted sexual assault, and threats of sexual violence. The National Crime Victimization Survey (NCVS) found that in the past decade, 30% of sexual victimizations were completed rapes, 23% were attempted rapes, 24% were sexual assaults, 18% were threats of rape or sexual assault, and 6% were unwanted sexual contact without force.³

The majority of sexual assaults are perpetrated by assailants known to the victim. Recent findings from the CDC’s National Intimate Partner and Sexual Violence Survey (NISVS) show that over the course of a lifetime, of female rape victims, nearly one-half (47.1%) were raped by a current or former intimate partner and 44.9% by an acquaintance.⁴ For male victims, nearly half (47.0%) were raped by an acquaintance and 20.9% by an intimate partner.

While both women and men are victims of sexual violence, women experience lifetime prevalence of sexual violence by an intimate partner at substantially higher rates.⁵ The most recent NISVS findings estimated that 19.1% of women and 1.5% of men in the U.S. have been victims of attempted or completed rape during their lifetimes.⁴

A substantial number of victims of sexual assault are first assaulted at an early age. Children, youth, and college-aged young adults are particularly vulnerable populations. The NISVS found that the vast majority (77.8%) of female victims of completed rape were first raped before their

25th birthday.⁴ Likewise, the NISVIS found that the vast majority (67.2%) of male victims who were forced to penetrate their perpetrators were victimized before the age of 25. In addition, early sexual victimization is associated with an increased risk of repeat victimization. Previous NISVS research showed that women who were raped before the age of 18 were twice as likely to be raped as adults, compared to women without an early history of being raped.⁶

Sexual assault is a uniquely personal and traumatic crime. According to BJS, only 33.6% of rapes and sexual assaults were reported to law enforcement in 2014, making these the most underreported violent crimes by a significant margin.³ Other research shows that only 5% to 20% of rapes are ever reported to law enforcement.⁷ Victims cite many reasons for not reporting their victimizations, from feelings of shame and self-blame, to fear of not being believed or of being accused of complicity in the crime.^{8,9}

The relatively few sexual assaults that are reported are characterized by attrition, as the majority of those cases are dropped at various points in the investigation or prosecution stages. Most sexual assaults reported to law enforcement will not result in an arrest.¹⁰ A 2014 study found that 80 to 89 percent of sexual assaults reported to law enforcement were not referred by police to prosecutors or were not charged by a prosecutor.¹¹

Impact on Victims

Sexual assault and sexual violence are associated with varied and serious physical, psychological, and emotional health consequences for victims, such as depression, post-traumatic stress disorder (PTSD) and related symptoms, shame, and substance abuse.^{12,13} Sexual assault may also result in physical injuries ranging from minor injuries and bruising, to blunt force trauma, defensive injuries, and attempted strangulation; victims may also suffer internal and anogenital injuries.¹⁴

Victims of child sexual abuse can often experience long-term consequences well into adulthood.¹⁵ Children who are sexually abused can internalize (e.g., withdraw, become anxious or depressed, complain of bodily health problems) or externalize (e.g., have attention deficit problems, engage in aggressive behaviors, break rules) the trauma. Victims who exhibit externalized behaviors are noted to be at increased risk of engaging in sexual intercourse before the age of 15, having multiple partners, and not using protection, thereby increasing the likelihood of unplanned pregnancies and contraction of sexually transmitted diseases.¹⁶ Research has shown that victims of child sexual abuse may engage in increased alcohol consumption and illicit drug use, and may experience higher incidences of mental health problems throughout their lifetimes, including PTSD, bipolar disorder, and major depressive disorder.¹⁷ Researchers have identified that survivors of sexual abuse during childhood are eight times more likely to attempt suicide than members of the general population.¹⁸

As discussed earlier, sexual assault reporting rates remain low, despite the high prevalence rate, and adverse health consequences of being sexually assaulted. Victims might be more likely

to disclose sexual assault to their friends or peers, rather than to law enforcement.¹⁹ In an online study about women's disclosures of sexual assault, almost one-quarter (23.9%) of respondents indicated that they had not previously disclosed an unwanted sexual experience to anyone.²⁰ Those disclosing their unwanted sexual experiences for the first time were more likely to blame themselves for the assault (63.8%), compared to those who had previously told someone about their experience (39.1%).

Victim Services

Nearly 1,300 rape crisis centers operate nationwide. These programs provide core services such as crisis intervention and advocacy, and a broader network of organizations provide further specialized education, preventive, or culturally specific services. However, victims of sexual violence can face multiple barriers, such as shame, fear, and guilt when seeking services.

Advocates and their community partners have worked diligently to create responsive programs and services that address victims' complex needs. During the two-year reporting period, SASP Formula-funded agencies provided an array of direct services to victims, such as:

- Core services, such as crisis intervention, hotline services, transportation, and referrals to community resources and agencies;
- Safety planning;
- Emergency assistance (e.g., clothing, food, medical care);
- Victim advocacy, counseling, and support;
- Criminal justice advocacy;
- Civil legal advocacy;
- Medical response;
- Language services; and
- Financial and employment counseling.

Many services are delivered to victims through crisis intervention, in which trained professionals, such as victim advocates or social workers, identify, assess, and intervene on behalf of an individual in crisis. Crisis intervention seeks to reduce the psychological stress a victim experiences during an immediate crisis, as well as in the aftermath of violence. It may involve delivering or brokering emergency housing, legal assistance, healthcare, and economic services, coupled with emotional support, and risk assessment. Professionals may also work with victims to develop safety plans or personalized plans that can help victims reclaim a sense of security by identifying potential threats to their safety and strategies to minimize risk and remain safe.

Crisis intervention assistance can include 24-hour hotlines, victim advocacy, medical accompaniment, emergency shelter, and referrals to other community-based services. Telephone hotlines, which emerged alongside rape crisis centers in the mid-1970s, offer support to victims of domestic/sexual violence, and are available at national, state, and local

levels.²¹ There have been recent efforts to increase the accessibility of these services by expanding online chat and text hotlines.²²

Crisis intervention is also vital for sexual assault victims, who may experience the legal and medical systems, as well as responses from their families and peer groups, as unhelpful or even retraumatizing. When advocates are present in proceedings following a rape, victims fare better in both the short- and long-term, suffering less psychological distress, fewer physical health struggles and sexual risk-taking behaviors, and less self-blame, guilt, and depression.^{23,24} Rape survivors with advocates were more likely to have police reports taken (59% of the time) than those without advocates, whose reports were taken only 41% of the time.²⁵

During the two-year reporting period, SASP Formula-funded subgrantees responded to **279,397** hotline calls. SASP Formula-funded subgrantees provided crisis intervention services to an annual average of **24,599** primary victims.

SASP Formula-Funded Services

During the two-year reporting period, SASP Formula subgrantees provided services to **41,560** victims on average, each year. These victims received a wide range of services, the most common being crisis intervention, victim advocacy (assistance with obtaining needed services or resources, including material goods and services, health care, education, finances, transportation, child-care, employment, and housing), and counseling and support groups. Other services included criminal justice/civil legal advocacy (assistance in navigating the criminal and/or civil legal systems); hospital, clinic, or other medical response; and material assistance. Subgrantees providing these services also routinely provided safety planning, referrals, and information to victims as needed.

Table 3. Victims receiving SASP Formula-funded services in 2013 and 2014

Type of service	Victims served 2013	Victims served 2014
Crisis intervention	23,069	26,128
Victim advocacy	20,616	23,478
Counseling services/support group	17,200	21,222
Hospital/clinic/other medical response	7,215	7,416
Criminal justice advocacy/court accompaniment	6,980	7,253

NOTE: Each victim is reported only once in each category of service, regardless of the number of times that service was provided to the victim during the reporting period. Only the most frequently reported categories are presented. For a complete listing of categories of services provided to victims, see Table 9.

SASP Formula subgrantees describe the impact that SASP Formula funding has had on their ability to provide comprehensive services including crisis intervention, counseling, medical advocacy, and support groups for victims of sexual assault.

Subgrantee Perspectives

Thanks to SASP funding, we are able to provide medical and legal services to any victims seeking services in the five counties we serve. Our sexual assault nurse examiner is able to provide the sexual assault exams, and an advocate is always present with the victims during this process. Advocates also accompany victims to all legal proceedings, and schedule victims for counseling or therapy. Through outreach activities, we are able to increase community awareness about our services. Therefore, the number of victims served by our agency continues to increase.

Shoals Crisis Center, Alabama

SASP funding has been critical to WINGS's ability to grow the number and type of support groups for adult survivors of childhood sexual abuse. These funds help ensure essential staff members have the resources they need to manage our specialized sexual assault program via our clinical training program, our education and outreach program, and our support group program. We know of no other organization in our state or nationally that has the institutional knowledge and experience with this underserved population of adult survivors of childhood sexual abuse.

WINGS Foundation, Colorado

Subgrantee Perspectives

The New England Learning Center for Women in Transition utilizes a unique model that increases rapid access to services. The program provides multiple methods, locations and languages for accessing services. Survivors can call our crisis line 24 hours a day, 365 days a year. They can come to our office without an appointment and immediately speak with the full-time counselor/advocate during business hours, or meet with the community response advocates within 24 hours at local motel shelters and other locations. The combination of on-site and off-site services is especially critical for clients in this very rural area who need assistance and often cannot get to our office due to transportation barriers or safety concerns. SASP funding supports a portion of the personnel costs under this accessible service model.

New England Learning Center for Women in Transition, Massachusetts

Subgrantees report on the importance of sexual assault services for children and teens.

Subgrantee Perspectives

Our agency served 300 clients last year; approximately half of those clients were children and adolescents. Therefore, we have looked at alternatives to serve children in our community whom cannot come on-site for counseling services. Our SASP Program funding has allowed our counseling program to expand our services to children and adolescents in our local school districts. Currently our Child Therapist is providing sexual assault counseling services to children and adolescents at four schools.

Kankakee County Center Against Sexual Assault, Illinois

Subgrantee Perspectives

Our SASP-funded advocate was contacted to provide advocacy and accompaniment during a sexual assault forensic exam for a teenage victim of acquaintance rape. Our advocate was able to assist the primary victim in securing a temporary order of protection, as well as, assisting the secondary victim in obtaining victim's compensation for lost work hours incurred while attending to concerns related to the assault. Moreover, in the aftermath of legal proceedings, the helping relationship that was forged from having a single point of contact proved pivotal in connecting the primary victim's mother to on-going trauma recovery counseling services.

Lakeview Center, Inc., Florida

Many of the sexual assault victims who are served initiate contact through a crisis line. A large number of subgrantees used funds to support their hotlines by providing stipends, cell phones, and designated staff.

Subgrantee Perspectives

As a result of SASP funding, our agency is able to sustain our 24-hour crisis hotline, the cornerstone of our programming that provides victims with immediate access to our services. These services include crisis intervention, peer counseling, hospital accompaniment, information and referrals, civil legal advocacy, and safety planning. SASP funding is a crucial piece of the funding puzzle in covering the many costs associate with the 24-hour crisis hotline. These expenses include cell phones, land lines, and an independent call center.

Violence Free Crisis Line, Montana

SASP funding has allowed us to better address the needs of sexual assault callers on our crisis lines because it has allowed us to have a dedicated crisis line staff, where many other service providers rely on volunteers or staff operating on an on-call basis. Our telephone crisis advocates are able to give callers their full attention and connect them to the resources that will best suit their needs. These crisis lines are the point of entry for the comprehensive victim services that the agency has to offer. Our area’s Sexual Assault Response Team (SART) also utilizes the SASP-funded telephone crisis line to dispatch advocates to the hospital to provide information and emotional support to victims undergoing forensic exams. This relationship also often yields a higher number of victims/survivors seeking additional support services.

The Wellspring Alliance for Families, Inc., Louisiana

Services for and Response to Underserved and Other Vulnerable Populations

One of the statutory purpose areas of SASP Formula is the delivery of community-based, culturally specific services and support mechanisms, including outreach activities for underserved communities.^{xii}

^{xii}VAWA 2005 at Section 40002 (a)(32) defines “underserved populations” as including “populations underserved because of geographic location, underserved racial and ethnic populations, populations underserved because of special needs (such as language barriers, disabilities, alienage status, or age), and any other population determined to be underserved by the Attorney General or by the Secretary of Health and Human Services, as appropriate.” VAWA 2013 at Section 13925 (a)(39) expands the definition of “underserved populations” to include populations underserved because of sexual orientation, gender identity, or religion.

During the two-year reporting period, SASP Formula subgrantees served an annual average of:^{xiii}

- **1,031** victims who identified as American Indian or Alaska Native;
- **610** victims who identified as Asian;
- **5,897** victims who identified as Black or African American;
- **7,127** victims who identified as Hispanic or Latino;
- **4,466** victims who identified as male;
- **273** victims who identified as Native Hawaiian or Pacific Islander;
- **1,986** victims who are Immigrants, refugees, or asylum seekers;
- **11,932** victims who lived in rural areas;
- **4,593** victims with disabilities;
- **177** victims who identified as D/deaf or hard of hearing;
- **3,644** victims with limited English proficiency;
- **4,848** victims who were children (ages 0 to 12);
- **14,048** victims who were youth and young adults (ages 13 to 24); and
- **1,079** victims who were elderly adults 60 or older.

^{xiii} Victims were reported once in each race/ethnicity category that applied.

Subgrantee Perspectives

Funding received from the SASP Program has allowed SACASA to serve a very rural and isolated underserved community. Over 70% of the county is Hispanic so our ability to provide bilingual and bicultural services is critical. As a result of this funding, there is now a dedicated full time sexual assault advocate who has been able to link victims with services, provide crisis intervention and ongoing, complex personal advocacy as well as education about sexual assault to the victims and families she serves

Southern Arizona Center Against Sexual Assault

SASP funding was crucial to our work among California farm worker women. Because of this funding, we were able to have a presence in Northern Santa Barbara County, thus uniting and empowering groups of women across the State who educate their communities about sexual assault. SASP funds made it possible for us to reach out to an estimated 5,000 farmworker women over a 4-month period in Santa Maria, Guadalupe, Lompoc, Cuyama, Nipomo, and Orcutt by means of monthly media interviews with local Spanish television and through various networking opportunities.

Organización en California de Líderes Campesinas, Inc.

This subgrant was intended to provide outreach and advocacy to underserved populations within low income, rural, elderly, African American and faith based populations. We held presentations in several churches about the nature of sexual assault and how we can help survivors. As a result of this program, we reached several dozen survivors who represent these population demographics. While the regional population is about 17% over age 60, the populations served by this grant were 38% over age 60. This region is about 90% Caucasian, but the victims served by this grant were 68% African American. This statistical disproportionality illustrates the successful targeting of the program to these underserved communities.

The Crisis Center, Virginia

Many subgrantees use SASP Formula funds to ensure that victims in rural communities have access to services.

Subgrantee Perspectives

Previous to this grant we were attempting to serve victims of sexual assault when they were brought in for a forensic exam to the Fairbanks, Alaska hub. We would see these individuals once and they would fly back to the village. We did not have the rural knowledge to safety plan and to assist them in reintegrating into their community while the offender still resides in the village. With the assistance of an advocate who lives and works in the rural village of Manley, we are able to connect victims with our rural advocate who can assist with the safety planning and provide on-going support to the victim as the case winds its way through the investigation.

Interior Alaska Center for Non-Violent Living

In 2014, SASP helped fund RCSAS's outreach crisis specialist, volunteer coordinators, and rural outreach coordinators. RCSAS has been able to train volunteers that reside in these rural counties to serve sexual assault victims that present at their local county hospital emergency rooms (ERs). The RCSAS staff members are able to travel to the rural counties (Jefferson and McDuffie) to keep close monitoring of volunteers, ER, law enforcement, and District Attorney offices to offer encouragement, support, and instruction to keep sexual assault services growing in these counties.

Rape Crisis and Sexual Assault Services, Georgia

Remaining Areas of Need

SASP administrators and subgrantees are asked in their reports to identify what needs remain unmet. Their responses help OVW understand the emerging and under-resourced issues faced by victims, the systems designed to serve them, and barriers to holding offenders accountable. Administrators identified the following critical areas of unmet need in their states in their 2013 and 2014 reports:

- Improving training for law enforcement, prosecutors, and judges on the dynamics of sexual violence in order to promote best practices;
- Enhancing offender accountability and improving the criminal justice response to incidences of sexual assault;
- Expanding awareness of and access to victim services, especially in rural areas;
- Bolstering community education and prevention efforts to combat myths about sexual assault and improve community response;
- Improving services and outreach to underserved groups, especially immigrants and

refugees, victims with limited English proficiency, LGBTQ victims, victims with disabilities, male victims, and those who are homeless or suffer from mental illness;

- Helping victims meet their basic needs, including housing, transportation, childcare, counseling and mental healthcare, and legal assistance; and
- Maintaining existing levels of service provision given financial constraints and high staff turnover.

SASP administrators consistently reported the need to improve the criminal justice response to sexual violence. They emphasized the need to provide enhanced training to law enforcement, prosecutors, and judges in order to improve outcomes for victims and to encourage reporting of sexual violence. They also suggested a number of interventions to improve offender accountability, including increased prosecution, enhanced oversight of offenders, and an increase in the number of protective orders issued. Some administrators also cited the need for enhanced offender treatment programs.

Administrator Perspectives

Training on effective techniques in the prosecution of acquaintance rape should be provided to prosecuting attorneys. Acquaintance rape cases are difficult to prosecute, but training provided to prosecutors by peers who have successfully prosecuted such cases can improve both the confidence of prosecutors in their ability to make the case, and their willingness to move forward with such cases.

SASP administrator (Florida)

Training continues to be needed across law enforcement and judicial branches. There is training through the law enforcement academy for new recruits but there is no mandated training requirement for personnel after initial training. We believe that annual, mandated training for all law enforcement would improve personnel relations with victims and an understanding of trauma-informed care. Victim blaming continues even from judges. Providing training to judges and prosecutors would improve the likelihood of a victim reporting their victimization and participating in the criminal justice process.

SASP administrator (Montana)

Administrators reported the need to enhance community awareness of sexual assault services and sexual assault prevention through outreach and education efforts. These needs were especially pronounced in rural areas, where ongoing stigma of sexual assault victims and a lack of anonymity, often discourages victims from reporting. Administrators also noted the need to improve access to victim services in rural, isolated areas, especially SANE services.

Administrator Perspectives

The most significant area of remaining need continues to be the need to encourage victims and survivors of sexual assault and childhood sexual abuse to come forward. They need to be made aware that counseling and other supportive services are available to them regardless of whether the sexual abuse or assault occurred recently or in the distant past. The trauma of victimization, particularly that of childhood sexual abuse, is often exacerbated over time and may impact a victim's whole life. We need to empower children to speak out about victimization when it is experienced. We need to let adults know that there is help for them even if the abuse occurred years or decades in the past. Good services are being provided by many agencies and individual therapists throughout Maryland. However, there are so many more children and adults suffering in silence. Widespread community education efforts should be undertaken to reach out to those who have experienced sexual violence.

SASP administrator (Maryland)

In many areas of Louisiana, sexual assault survivors who go to hospitals for forensic examinations do not receive the same level of services as those survivors who go to a hospital with a SANE program. In the greater New Orleans area, there is only one hospital with a SANE program. Survivors from surrounding parishes go to hospitals where hospital staff perform the examination. These staff members are usually not well trained in the preservation of rape kits for further testing and prosecution of perpetrators.

SASP administrator (Louisiana)

Arkansas contains a vast amount of rural and impoverished communities. One of the greatest needs is reaching those isolated communities and providing victims of sexual violence with the same access to high quality professional services as in the more developed parts of the state.

SASP administrator (Arkansas)

SASP administrators emphasized the need to help victims secure access to basic services, including housing, transportation, childcare, mental health services and substance abuse counseling, and legal assistance. These needs were particularly challenging to meet among underserved groups, including immigrants and those with limited English proficiency, LGBTQ victims, victims with disabilities, male victims, and victims who were homeless or mentally ill. Of particular need were culturally competent and linguistically appropriate services for non-English speakers.

Administrator Perspectives

Subgrantees cite a need for increased outreach and advocacy to survivors who don't speak English, especially those who speak languages other than Spanish. As mentioned previously, Nebraska has several resources for Spanish-speaking survivors. However, there are several other immigrant and refugee groups in Nebraska, such as Somalian, Sudanese and Vietnamese groups, for which there are few resources. Many subgrantees struggle to find well-trained and confidential translators, interpreters, and multilingual advocates to assist them in working with these survivors.

SASP administrator (Nebraska)

Administrator Perspective

While we have made inroads in serving males impacted by sexual violence there is work to be done to provide victim-centered services to males. Males are less inclined to seek services due to the social stigma that surrounds sexual victimization of men. In addition, males under report for the fear of being questioned or ridiculed about their sexuality. Male survivors often face differential treatment by police officers and hospital personnel.

SASP administrator (North Carolina)

Finally, administrators emphasized the difficulties faced by subgrantees in maintaining current levels of services and adequate staff given the financial constraints faced by sexual assault services providers. Many were concerned that high staff turnover would compromise victim safety.

Administrator Perspective

Between 2011 and 2013, the number of new clients served by rape crisis programs in New York State increased 44% (from 8,734 to 12,586), and the total number of clients served by rape crisis programs in New York State increased 65% (from 19,069 to 31,547). The increased demand for services, in combination with dwindling resources for rape crisis programs, is a recipe for ever-increasing levels of advocate burnout, staff turnover, and compromised services for victims.

SASP administrator (New York)

Limited staff results in limited services. This reduces the response and that unfortunately can translate into victims not reporting or receiving the support they need in their time of crisis. It also limits the availability of advocacy services, which is evidenced by our low arrest rate (less than 25% of forcible sexual assaults reported to law enforcement result in an arrest).

SASP administrator (West Virginia)

Conclusion

The data from subgrantees included in the SASP Formula 2016 Report show that SASP Formula funding makes a difference in the way that communities across the United States help victims of sexual violence and hold offenders accountable.

During the two-year reporting period, states awarded SASP Formula funding to an annual average of **614** subgrantees. Nearly 193,000 (**192,933**) services, such as crisis intervention and victim advocacy; counseling services and support groups; legal advocacy and court accompaniment; and hospital, clinic or other medical response were provided to victims. Supportive services were provided to more than 40,000 individuals each year. In addition, hotline calls were received from over 40,000 victims each year.

This 2016 SASP Formula Grant Program Report reflects two years of collective efforts to respond to sexual assault across the nation. It describes significant accomplishments that would not have been possible in the absence of SASP Formula funding, and it highlights where much work remains to be done.

SASP Formula Aggregate Accomplishments

This section presents aggregate data reflecting the activities and accomplishments funded by SASP Formula in 50 states, four U.S. territories,^{xiv} and the District of Columbia during the two-year reporting period.^{xv}

SASP Formula-funded staff provide intervention, advocacy, accompaniment, and support services to adult, youth, and child victims of sexual assault, their family and household members, and others collaterally affected by the victimization.

- Annual average number of subgrantees using funds for staff: **597 (97% of all subgrantees)**

Table 4. Full-time equivalent staff funded by SASP Formula in 2013 and 2014

Staff	2013		2014	
	Number FTE	Percent	Number FTE	%
All staff	303	100%	312	100%
Victim advocate	152	50%	152	49%
Counselor	72	24%	70	22%
Program coordinator	34	11%	42	13%
Outreach worker	11	4%	15	5%
Administrator	11	4%	13	4%
Children's advocate	8	3%	5	2%
Legal advocate	7	2%	6	2%
Support staff	6	2%	7	2%
Translator/interpreter	1	<1%	2	1%
Other	1	<1%	1	<1%

NOTE: Percentages do not add to 100 due to rounding.

^{xiv} American Samoa and the Virgin Islands did not submit SASP subgrantee reports in 2013. American Samoa, Arkansas, and Indiana did not submit SASP subgrantee reports in 2014.

^{xv} For a complete list of states that awarded money in each year, see Appendix A.

Informational Materials

SASP Formula subgrantees develop, revise, and/or distribute a variety of informational materials that describe the services of SASP Formula-funded organizations. Examples include outreach and promotional products and websites.

- Annual average number of subgrantees using funds for informational materials: **141** (23% of all subgrantees)

Table 5. Use of SASP Formula funds to develop, substantially revise, or distribute informational materials in 2013 and 2014

Informational materials	2013		2014	
	Number developed or revised	Number used or distributed	Number developed or revised	Number used or distributed
All materials	344	347,551	367	430,634
Outreach material	254	206,092	261	246,498
Promotional products	63	31,504	68	60,793
Websites	25	109,863	32	122,906
Other	2	92	6	437

SASP Formula subgrantees developed, revised, or translated informational materials into Spanish, Hindi, Urdu, Portuguese, Chinese, Japanese, Thai, Korean, Tagalog, Dena'ina, Bengali, Vietnamese, and American Sign Language in 2013 and into Spanish, French, Portuguese, Bengali, Chinese, Japanese, Thai, Korean, Arabic, Hindi, Athabaskan, Yup'ik, Inuyupiaq, Tagalog, Vietnamese, and Urdu in 2014.

Victim Services

During the two-year reporting period, SASP Formula subgrantees provided services to an average of **41,560** victims (**99%** of those seeking services) each year. Approximately **1%** of victims seeking services from funded programs did not receive services from those programs.

Table 6. Number and percentage of victims served, partially served, and not served in 2013 and 2014

Level of service	Victims 2013		Victims 2014	
	Number	%	Number	%
All seeking services	39,749	100%	43,897	100%
Served	38,843	98%	43,397	99%
Partially served	527	1%	352	1%
Not served	379	1%	148	<1%

NOTE: Partially served victims received some, but not all, of the services they sought through SASP Formula-funded programs. "Not served" represents victims who sought services and did not receive the service(s) they were seeking, provided those services were funded under SASP Formula.

During the two-year reporting period, subgrantees noted the following barriers most frequently as reasons why victims were not served or were only partially served:

- Transportation
- Program unable to provide service due to limited resources/priority-settings
- Services inappropriate or inadequate for victims with mental health problems
- Program reached capacity
- Services not appropriate for victim/survivor
- Services inappropriate or inadequate for victims/survivors with substance abuse issues
- Hours of operation
- Conflict of interest
- Did not meet statutory requirements
- Program rules not acceptable to victim
- Lack of child care
- Insufficient/lack of language capacity

Demographics of Victims Served

During the two-year reporting period, subgrantees served or partially served an annual average of **41,560** victims. The majority of those victims were **white (60%)**, **female (89%)**, and **ages 25–59 (46%)**.

Table 7. Demographic characteristics of victims served by SASP Formula subgrantees in 2013 and 2014

Characteristics	Victims receiving services			
	2013		2014	
	Number	%	Number	%
Race/ethnicity				
American Indian/Alaska Native	1,084	3%	977	3%
Asian	503	1%	716	2%
Black or African American	5,488	16%	6,306	17%
Hispanic or Latino	6,310	18%	7,944	21%
Native Hawaiian or Pacific Islander	240	1%	305	1%
White	20,953	61%	21,632	58%
Unknown	5,144	NA	6,451	NA
Gender				
Female	33,825	89%	37,205	88%
Male	4,089	11%	4,842	12%
Unknown	1,456	NA	1,702	NA
Age				
0–6	1,820	5%	2,020	5%
7–12	2,735	8%	3,120	8%
13–17	5,351	15%	5,758	15%
18–24	8,329	23%	8,658	23%
25–59	16,434	46%	17,584	46%
60+	996	3%	1,161	3%
Unknown	3,705	NA	5,448	NA
Other demographics				
People with disabilities	4,318	11%	4,868	11%
People who are D/deaf or hard of hearing	124	<1%	109	<1%
People with limited English proficiency	3,299	8%	3,988	9%
People who are immigrants/refugees/asylum seekers	1,777	5%	2,194	5%
People who live in rural areas	11,712	30%	12,151	28%

NA = not applicable

NOTE: Percentages for race/ethnicity, gender, and age are based on the number of victims for whom the information was known. Because victims may have identified with more than one race/ethnicity, the total number reported in race/ethnicity may be higher than the total number of victims served and the sum of percentages for race/ethnicity may be greater than 100.

Table 8. Relationship to offender for victims served by SASP Formula subgrantees in 2013 and 2014

Relationship to offender	2013		2014	
	Number	%	Number	%
Current/former spouse or intimate partner	6,977	22%	8,969	25%
Other family or household member	8,446	27%	9,837	28%
Dating relationship	3,507	11%	3,492	10%
Acquaintance	9,663	31%	10,340	29%
Stranger	2,673	9%	3,119	9%
Unknown	9,026	NA	9,308	NA
Total (excluding unknown)	31,266	100%	35,757	100%

NA = not applicable

NOTE: The above percentages are based on the total number of known relationships to offender reported. Because victims may have been abused by more than one offender, the total number of reported relationships may be higher than the total number of victims reported as served.

Secondary Victims

During the two-year reporting period, SASP Formula subgrantees provided services to an annual average of **14,077** secondary victims. Secondary victims are individuals who are indirectly affected by the sexual assault—children, siblings, spouses or intimate partners, grandparents, other relatives, friends, or neighbors—except for the perpetrators of such victimization.

Types of Services Provided to Victims

SASP Formula subgrantees provide an array of services to victims of sexual assault. These services include victim advocacy, crisis intervention, counseling services/support groups, and legal advocacy/court accompaniment. Subgrantees most frequently provided **crisis intervention**. In addition to the services listed in Table 9, SASP Formula subgrantees routinely provide safety planning, referrals, and information to victims, as needed.

Table 9. Victim services provided by SASP Formula subgrantees in 2013 and 2014

Type of service	Victims served			
	2013 (N = 39,370)		2014 (N = 43,749)	
	Number	%	Number	%
Crisis intervention	23,069	59%	26,128	60%
Victim advocacy	20,616	52%	23,478	54%
Counseling services/support group	17,200	44%	21,222	49%
Hospital/clinic/other medical response	7,215	18%	7,416	17%
Criminal justice advocacy/court accompaniment	6,980	18%	7,253	17%
Material assistance	4,819	12%	5,690	13%
Civil legal advocacy/court accompaniment	3,541	9%	3,952	9%
Transportation	3,102	8%	4,028	9%
Language services	1,292	3%	1,514	3%
Financial counseling	1,035	3%	1,662	4%
Employment counseling	702	2%	690	2%
Job training	98	<1%	135	<1%

NOTE: An individual victim may have received more than one type of service. Victims are reported only once for each type of service received during each reporting period.

Hotline Calls/Information and Referrals

SASP Formula subgrantees count the number of hotline calls received from primary victims on phone lines paid for with SASP Formula funds or answered by SASP Formula-funded staff. Of the total **279,397** hotline calls that were received during the two-year reporting period, over 30% (**85,441**) were received from victims.^{xvi}

Table 10. Hotline calls and information and referrals provided by SASP Formula subgrantees in 2013 and 2014

Type of service	Number of calls/requests from primary victims 2013	Number of calls/requests from primary victims 2014
Hotline calls	43,700	41,741
Walk-in information and referrals	7,486	10,526
Web-based information and referrals	1,080	1,033

^{xvi} The number of calls is not unduplicated. In addition to victims, hotlines receive calls from intimate partners, family members, friends, and coworkers of victims, and from members of the general public requesting information, some of whom may be victims, but do not identify themselves as such.

Outreach to Victims

During the two-year reporting period, subgrantees reported a total of **23,233** unsolicited letters, phone calls, and visits to victims. This outreach to victims is intended to provide information about available services.

Protection Orders

SASP Formula funds activities, including advocacy in the courtroom that support victims seeking protection orders. During the two-year reporting period, SASP Formula-funded victim services staff assisted sexual assault victims in obtaining **4,910** temporary and final protection orders.

Table 11. Protection orders granted with assistance of SASP Formula-funded staff in 2013 and 2014

	Total	Temporary	Final
2013	2,442	1,543	899
2014	2,468	1,440	1,028

Appendix A 2013 and 2014

Table A. Amounts of SASP Formula awards to subgrantees and administrative costs, by state: 2013 and 2014¹⁷

State	2013		2014 ¹⁸	
	Amount awarded to subgrantees (\$)	Administrative costs (\$)	Amount awarded to subgrantees (\$)	Administrative costs (\$)
Alabama	265,049	5,785	536,515	18,501
Alaska	177,992	9,214	NA	NA
American Samoa	32,296	1,615	57,540	2,877
Arizona	476,870	2,045	298,409	4,743
Arkansas	122,344	6,428	263,285	13,164
California	698,911	0	738,231	0
Colorado	212,376	8,776	212,376	9,330
Connecticut	251,409	6,616	264,203	7,979
Delaware	221,566	11,661	104,389	640
District of Columbia	26,721	0	18,322	0
Florida	1,147,108	58,153	914,460	27,122
Georgia	243,253	28,082	314,471	17,346
Guam	32,824	686	0	1,042
Hawaii	246,256	10	244,609	0
Idaho	294,659	11,486	0	124
Illinois	363,246	12,268	396,098	37,807
Indiana	190,000	0	352,375	22,006
Iowa	251,956	12,899	22,167	13,364
Kansas	0	10,877	0	40
Kentucky	454,243	11,502	834,819	8,433
Louisiana	339,858	22,907	283,113	12,608
Maine	231,659	0	0	0
Maryland	206,793	18,601	307,602	24,001
Massachusetts	284,972	0	0	14,998
Michigan	215,709	0	NA	NA
Minnesota	277,815	412	295,935	13,852
Mississippi	208,475	12,694	250,530	5,492
Missouri	0	7,903	459,933	8,758
Montana	376,732	11,852	462,546	19,436
Nebraska	489,424	10,901	247,654	13,096
Nevada	285,201	10,742	276,091	11,988
New Hampshire	0	5,506	231,381	6,919

¹⁷ Table A reflects data as reported by SASP administrators, and reflect awards SASP administrators reported making to subgrantees during calendar years 2013 and 2014.

^{xi} Alaska and Michigan did not submit a SASP administrators report in 2014.

Table A. Amounts of SASP Formula awards to subgrantees and administrative costs, by state: 2013 and 2014¹⁷

State	2013		2014 ¹⁸	
	Amount awarded to subgrantees (\$)	Administrative costs (\$)	Amount awarded to subgrantees (\$)	Administrative costs (\$)
New Jersey	540,798	0	660,465	0
New Mexico	388,922	18,718	240,286	16,934
New York	428,716	20,285	1,353,509	19,126
North Carolina	336,024	0	894,539	17,245
North Dakota	219,074	5,747	277,101	10,193
N. Mariana Islands	30,312	1,595	18,268	961
Ohio	163,551	0	144,446	11,820
Oklahoma	338,312	9,424	270,734	16,632
Oregon	227,051	10,754	328,964	23,158
Pennsylvania	381,024	0	415,639	0
Puerto Rico	73,759	0	138,427	0
Rhode Island	234,921	116	240,506	0
South Carolina	367,127	13,519	147,407	4,707
South Dakota	177,542	4,860	158,833	8,957
Tennessee	205,625	11,096	301,060	16,228
Texas	551,463	0	485,553	0
Utah	240,630	2,613	275,716	22,616
Vermont	229,929	8,184	0	8,183
Virgin Islands	0	0	46,306	0
Virginia	269,908	0	326,104	0
Washington	275,513	10,788	312,901	10,882
West Virginia	206,595	11,319	224,897	10,242
Wisconsin	543,921	12,685	0	0
Wyoming	191,509	18,956	208,668	1,166
TOTAL	15,247,942	460,281	15,857,382	514,715

Appendix B 2013

Table B1a. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2013^{xix}

State	Victims seeking services				Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
	Total	Served	Partially served	Not served				
Alabama	1,100	1,098	0	2	1,068	158	2	1,863
Alaska	359	359	0	0	78	56	0	132
American Samoa	0	0	0	0	0	0	0	0
Arizona	251	169	18	64	92	16	0	0
Arkansas	510	510	0	0	302	105	18	573
California	2,013	2,012	1	0	1,279	702	13	171
Colorado	714	703	5	6	215	2	31	1,115
Connecticut	339	339	0	0	146	15	0	98
Delaware	525	525	0	0	450	0	0	86
District of Columbia	100	100	0	0	92	8	0	0
Florida	646	646	0	0	425	2	0	13
Georgia	690	673	17	0	733	579	3	1,348
Guam	0	0	0	0	0	0	0	0
Hawaii	383	383	0	0	167	1	0	146
Idaho	541	519	10	12	1,203	915	323	127
Illinois	2,131	2,131	0	0	1,468	181	0	34
Indiana	214	179	35	0	0	214	0	0
Iowa	990	983	6	1	654	14	23	103
Kansas	376	369	2	5	234	24	4	423
Kentucky	270	270	0	0	104	0	0	33
Louisiana	1,148	1,148	0	0	1,384	105	11	345

^{xix} American Samoa and the Virgin Islands did not submit SASP subgrantee reports in 2013. The single Guam subgrantee did not report using funds for victim services in 2013.

Table B1a. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2013^{xix}

State	Victims seeking services					Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
	Total	Served	Partially served	Not served					
Maine	561	561	0	0	582	47	0	184	
Maryland	1,698	1,488	135	75	4,072	56	0	91	
Massachusetts	705	692	0	13	1,439	20	4	11	
Michigan	329	329	0	0	189	22	0	1	
Minnesota	738	738	0	0	554	338	0	0	
Mississippi	749	743	6	0	870	48	215	433	
Missouri	1,112	1,087	7	18	605	50	57	283	
Montana	441	439	2	0	2,471	132	33	445	
Nebraska	789	779	10	0	1,198	412	10	121	
Nevada	1,616	1,475	48	93	206	156	64	275	
New Hampshire	265	265	0	0	90	19	5	0	
New Jersey	999	982	17	0	1,490	17	0	139	
New Mexico	843	843	0	0	501	29	0	587	
New York	1,190	1,165	25	0	1,032	202	0	0	
North Carolina	861	838	23	0	824	168	10	265	
North Dakota	295	295	0	0	180	23	0	31	
N. Mariana Islands	12	12	0	0	121	14	0	3	
Ohio	287	286	0	1	239	2	0	0	
Oklahoma	575	574	1	0	201	41	15	649	
Oregon	731	731	0	0	1,574	784	3	461	
Pennsylvania	2,616	2,527	37	52	1,760	143	128	455	
Puerto Rico	20	20	0	0	0	0	0	0	

Table B1a. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2013^{xix}

State	Victims seeking services							
	Total	Served	Partially served	Not served	Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
Rhode Island	168	168	0	0	27	1	0	19
South Carolina	952	891	61	0	652	273	19	798
South Dakota	275	275	0	0	424	64	3	44
Tennessee	570	570	0	0	399	57	3	210
Texas	2,096	2,096	0	0	2,522	87	8	109
Utah	1,243	1,242	0	1	584	118	19	408
Vermont	387	387	0	0	2,668	10	8	0
Virgin Islands	0	0	0	0	0	0	0	0
Virginia	1,144	1,126	12	6	1,122	148	35	172
Washington	614	609	1	4	624	16	1	0
West Virginia	600	564	25	11	580	477	5	66
Wisconsin	377	346	16	15	44	0	0	20
Wyoming	591	584	7	0	3,762	415	7	190
TOTAL	39,749	38,843	527	379	43,700	7,486	1,080	13,080

Table B2a. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2013^{xx}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African - American	Hispanic/Latino	Native Hawaiian/ Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Alabama	3	7	339	31	1	546	171	915	65	118	1	3	76	286	567	14	151
Alaska	339	0	0	0	0	19	3	347	12	0	1	2	21	62	264	9	0
American Samoa	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Arizona	0	1	6	63	0	98	19	167	20	0	7	20	40	15	99	1	5
Arkansas	13	0	63	33	1	390	13	469	39	2	8	11	75	149	257	8	2
California	12	26	118	818	8	369	662	1,702	308	3	229	233	292	385	547	31	296
Colorado	7	1	16	171	0	395	118	553	151	4	146	194	81	23	248	16	0
Connecticut	2	2	24	218	0	102	7	312	24	3	7	5	23	58	216	30	0
Delaware	2	1	65	17	0	91	349	450	75	0	0	0	98	66	68	6	287
District of Columbia	0	2	65	3	0	30	0	65	35	0	0	0	0	25	65	10	0
Florida	2	7	121	71	2	353	90	535	72	39	5	8	87	154	287	30	75
Georgia	0	9	172	79	0	411	19	576	112	2	121	147	134	83	161	4	40
Guam	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hawaii	3	78	8	20	125	92	57	339	44	0	23	42	74	58	146	9	31
Idaho	24	9	9	61	26	385	16	490	39	0	23	50	57	117	263	16	3
Illinois	30	24	328	252	9	1,408	223	1,838	135	158	56	123	407	420	937	28	160
Indiana	0	0	36	0	0	178	0	209	5	0	0	0	0	142	63	0	9
Iowa	6	23	79	85	6	741	49	939	42	8	14	69	98	213	454	37	104

^{xx}No SASP subgrantee reports were received for American Samoa or Virgin Islands in 2013. Guam subgrantee did not use SASP funds for victim services during the 2013 reporting period.

Table B2a. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2013^{xx}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African - American	Hispanic/Latino	Native Hawaiian/ Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Kansas	6	0	27	43	0	284	12	346	24	1	3	17	29	87	223	12	0
Kentucky	2	0	21	9	0	215	23	231	37	2	30	42	34	35	105	3	21
Louisiana	9	23	384	69	0	671	18	990	158	0	119	136	245	183	428	17	20
Maine	0	1	83	0	1	167	309	471	62	28	1	2	43	90	168	5	252
Maryland	6	9	395	215	1	692	305	1,211	152	260	49	75	169	365	613	68	284
Massachusetts	6	7	30	84	1	251	332	409	26	257	0	2	17	97	278	11	287
Michigan	2	0	100	3	0	218	6	284	31	14	22	29	50	48	168	12	0
Minnesota	33	15	83	112	0	296	199	603	90	45	22	80	123	201	212	5	95
Mississippi	3	6	300	9	1	375	55	675	74	0	28	86	143	199	249	21	23
Missouri	9	5	135	62	0	716	167	1,050	44	0	30	16	78	319	484	31	136
Montana	67	4	5	18	0	249	98	409	32	0	10	19	43	117	211	34	7
Nebraska	14	5	55	45	0	638	34	761	18	10	7	14	75	226	435	14	18
Nevada	14	14	362	213	19	855	58	1,430	83	10	53	88	170	301	857	45	9
New Hampshire	4	2	11	3	1	194	50	216	47	2	22	28	51	54	86	3	21
New Jersey	1	36	202	124	2	327	319	858	89	52	1	1	150	252	355	14	226
New Mexico	108	2	12	328	0	251	142	409	111	323	92	91	62	44	86	2	466
New York	18	31	168	228	1	673	71	1,032	154	4	60	57	145	260	596	52	20
North Carolina	6	2	185	109	2	439	118	757	57	47	25	35	82	145	395	34	145
North Dakota	52	2	9	4	0	223	5	258	33	4	20	43	61	56	105	4	6
N. Mariana Islands	0	12	0	0	1	0	0	10	2	0	0	0	0	1	10	0	1
Ohio	1	1	23	9	1	174	77	229	39	18	13	36	42	56	52	38	49
Oklahoma	65	5	46	61	1	374	23	552	23	0	7	11	57	145	321	10	24

Table B2a. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2013^{xx}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African - American	Hispanic/Latino	Native Hawaiian/ Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Oregon	35	4	13	256	5	371	47	718	13	0	3	1	106	108	452	19	42
Pennsylvania	4	12	267	547	0	1,561	173	2,074	489	1	131	239	398	628	1,119	33	16
Puerto Rico	0	0	0	20	0	0	0	17	3	0	3	9	8	0	0	0	0
Rhode Island	4	4	23	22	1	105	9	148	20	0	14	24	23	47	57	3	0
South Carolina	0	1	374	50	0	446	81	767	184	1	122	187	155	189	234	44	21
South Dakota	83	0	12	9	0	159	12	255	20	0	24	26	33	60	119	3	10
Tennessee	1	0	74	34	0	453	8	528	42	0	7	6	182	103	257	14	1
Texas	5	16	239	944	3	817	146	1,850	243	3	87	156	253	475	985	37	103
Utah	36	4	27	218	11	829	153	1,097	145	0	3	9	199	320	570	21	120
Vermont	14	12	20	5	1	234	104	351	33	3	0	3	64	124	183	13	0
Virgin Islands	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Virginia	3	12	283	157	5	642	36	1,019	111	8	48	55	131	297	522	38	47
Washington	8	36	32	124	3	353	54	538	64	8	61	100	201	91	148	9	0
West Virginia	2	4	25	11	0	487	60	515	69	5	23	50	74	111	272	29	30
Wisconsin	3	26	2	181	0	122	28	322	27	13	2	10	32	95	156	25	42
Wyoming	17	0	12	62	1	484	16	529	62	0	37	45	60	144	281	24	0
TOTAL	1,084	503	5,488	6,310	240	20,953	5,144	33,825	4,089	1,456	1,820	2,735	5,351	8,329	16,434	996	3,705

Table B3a. Number of individuals with disabilities/who are D/deaf or hard of hearing/limited English proficiency/who are immigrants/living in rural areas receiving SASP Formula-funded services, by state: 2013^{xxi}

State	Disabled	D/deaf	Limited English proficiency	Immigrants/refugees/asylum seekers	Live in rural areas
Alabama	107	1	18	13	225
Alaska	6	0	1	0	359
American Samoa	0	0	0	0	0
Arizona	10	0	46	15	81
Arkansas	33	3	15	6	204
California	58	2	376	159	99
Colorado	34	2	35	3	140
Connecticut	63	3	131	62	0
Delaware	18	0	17	14	66
District of Columbia	0	0	0	0	0
Florida	49	0	10	7	44
Georgia	71	1	59	45	179
Guam	0	0	0	0	0
Hawaii	60	2	0	2	74
Idaho	66	5	32	50	214
Illinois	178	8	69	0	275
Indiana	0	0	3	0	190
Iowa	116	27	79	65	609
Kansas	157	2	25	3	96
Kentucky	63	0	4	3	136
Louisiana	316	0	52	9	410
Maine	23	0	0	79	203
Maryland	91	3	276	32	519
Massachusetts	126	1	57	22	58
Michigan	44	1	4	0	201
Minnesota	94	0	82	70	171
Mississippi	115	0	3	5	221
Missouri	147	6	54	51	519
Montana	26	3	7	3	204
Nebraska	28	2	25	28	271
Nevada	397	0	21	2	201
New Hampshire	80	0	3	10	35
New Jersey	109	2	107	10	38

^{xxi} No SASP subgrantee reports were received for American Samoa or Virgin Islands in 2013. Guam subgrantee did not use SASP funds for victim services during the 2013 reporting period.

Table B3a. Number of individuals with disabilities/who are D/deaf or hard of hearing/limited English proficiency/who are immigrants/living in rural areas receiving SASP Formula-funded services, by state: 2013^{xxi}

State	Disabled	D/deaf	Limited English proficiency	Immigrants/refugees/asylum seekers	Live in rural areas
New Mexico	39	1	71	2	339
New York	159	14	142	61	376
North Carolina	54	1	85	27	411
North Dakota	49	0	1	1	35
N. Mariana Islands	0	0	11	12	12
Ohio	10	0	5	1	215
Oklahoma	123	2	32	29	330
Oregon	147	0	217	115	508
Pennsylvania	279	9	428	418	823
Puerto Rico	12	0	20	0	6
Rhode Island	3	0	1	0	16
South Carolina	54	0	34	6	381
South Dakota	23	3	0	2	135
Tennessee	114	1	16	6	255
Texas	25	1	154	57	266
Utah	120	0	112	95	249
Vermont	75	3	10	8	92
Virgin Islands	0	0	0	0	0
Virginia	118	6	87	70	384
Washington	54	2	58	14	103
West Virginia	93	1	38	1	316
Wisconsin	15	4	149	81	49
Wyoming	67	2	17	3	369
TOTAL	4,318	124	3,299	1,777	11,712

Table B4a. Relationship to offender of victims served with SASP Formula funds, by state: 2013^{xxii}

State	Current/former spouse or intimate partner	Other family or household member	Dating	Acquaintance	Stranger	Relationship unknown
Alabama	210	114	189	350	117	121
Alaska	68	127	12	134	4	14
American Samoa	0	0	0	0	0	0
Arizona	66	56	20	25	8	12
Arkansas	73	71	47	171	43	126
California	175	401	120	527	161	629
Colorado	0	235	0	176	10	287
Connecticut	39	68	16	96	15	109
Delaware	22	49	16	87	25	326
District of Columbia	5	65	4	25	1	0
Florida	68	82	47	156	99	194
Georgia	85	143	36	222	31	173
Guam	0	0	0	0	0	0
Hawaii	12	151	7	156	53	51
Idaho	174	135	72	102	15	32
Illinois	182	522	179	574	136	666
Indiana	38	11	45	86	10	24
Iowa	321	151	96	166	24	231
Kansas	62	60	17	58	18	178
Kentucky	48	130	33	14	10	35
Louisiana	149	408	27	425	126	130
Maine	39	46	70	128	21	260
Maryland	332	317	214	212	62	488
Massachusetts	129	60	80	90	31	306
Michigan	18	94	15	89	74	39
Minnesota	47	82	19	205	23	362
Mississippi	89	226	125	236	46	27
Missouri	275	177	129	231	106	208
Montana	85	62	54	110	36	98
Nebraska	152	53	57	79	31	418
Nevada	576	286	157	279	118	127
New Hampshire	52	74	22	62	10	46
New Jersey	137	165	91	246	92	280
New Mexico	25	100	7	84	21	612
New York	299	275	117	212	58	245
North Carolina	168	187	74	147	60	240

^{xxii} No SASP subgrantee reports were received for American Samoa or Virgin Islands in 2013. Guam subgrantee did not use SASP funds for victim services during the 2013 reporting period.

Table B4a. Relationship to offender of victims served with SASP Formula funds, by state: 2013^{xxii}

State	Current/former spouse or intimate partner	Other family or household member	Dating	Acquaintance	Stranger	Relationship unknown
North Dakota	30	78	10	137	17	28
N. Mariana Islands	10	1	3	0	0	0
Ohio	26	38	18	187	10	18
Oklahoma	217	138	46	150	66	60
Oregon	272	168	145	128	24	53
Pennsylvania	309	647	283	718	160	500
Puerto Rico	0	20	0	0	0	0
Rhode Island	43	39	10	54	19	3
South Carolina	130	348	118	207	39	110
South Dakota	34	92	15	85	17	32
Tennessee	185	131	26	168	27	33
Texas	427	484	137	520	344	234
Utah	282	168	111	297	45	365
Vermont	54	59	78	183	29	6
Virgin Islands	0	0	0	0	0	0
Virginia	288	294	141	311	58	78
Washington	37	243	9	203	62	93
West Virginia	145	150	50	158	47	41
Wisconsin	22	64	23	62	4	187
Wyoming	246	101	70	135	10	91
TOTAL	6,977	8,446	3,507	9,663	2,673	9,026

Appendix B 2014

Table B1b. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2014^{xxiii}

State	Victims seeking services							
	Total	Served	Partially served	Not served	Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
Alabama	1,466	1,465	1	0	1,284	38	1	235
Alaska	82	81	1	0	100	180	0	37
American Samoa	0	0	0	0	0	0	0	0
Arizona	386	384	1	1	250	40	0	82
Arkansas	0	0	0	0	0	0	0	0
California	1,359	1,357	2	0	835	596	17	207
Colorado	1,413	1,413	0	0	227	1	45	1,354
Connecticut	614	614	0	0	345	350	0	92
Delaware	998	998	0	0	275	0	0	0
District of Columbia	1,206	1,137	0	69	1,153	14	0	0
Florida	511	511	0	0	479	1	0	70
Georgia	678	644	34	0	641	485	183	1,225
Guam	4	4	0	0	0	0	0	0
Hawaii	392	392	0	0	67	0	0	141
Idaho	669	659	7	3	2,981	2,754	167	136
Illinois	2,356	2,353	0	3	1,271	122	0	50
Indiana	0	0	0	0	0	0	0	0
Iowa	824	809	7	8	802	85	28	173
Kansas	375	375	0	0	133	1	7	123

^{xxiii}No SASP subgrantee reports were received for American Samoa, Arkansas, and Indiana in 2014.

Table B1b. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2014^{xxiii}

State	Victims seeking services					Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
	Total	Served	Partially served	Not served					
Kentucky	256	256	0	0	109	0	0	34	
Louisiana	1,114	1,112	2	0	650	100	3	286	
Maine	457	457	0	0	142	10	0	163	
Maryland	1,499	1,472	25	2	679	36	0	22	
Massachusetts	614	614	0	0	2,385	42	4	45	
Michigan	447	444	3	0	157	19	15	16	
Minnesota	1,011	1,006	1	4	737	96	27	51	
Mississippi	680	680	0	0	624	39	17	615	
Missouri	1,288	1,237	21	30	955	49	10	88	
Montana	605	605	0	0	1,516	278	0	279	
Nebraska	947	944	3	0	1,781	947	15	172	
Nevada	1,375	1,375	0	0	444	65	7	145	
New Hampshire	461	438	18	5	965	118	4	47	
New Jersey	1,157	1,106	49	2	1,626	11	2	37	
New Mexico	1,284	1,276	8	0	448	273	1	289	
New York	1,313	1,268	40	5	885	145	120	26	
North Carolina	1,259	1,209	49	1	1,021	221	66	235	
North Dakota	306	306	0	0	255	31	0	5	
N. Mariana Islands	13	13	0	0	94	11	0	10	
Ohio	375	375	0	0	254	6	44	308	
Oklahoma	625	617	8	0	184	170	2	75	
Oregon	763	760	3	0	1,228	518	4	325	

Table B1b. SASP Formula subgrantees using funds for victim services and victims seeking/receiving services, by state: 2014^{xxiii}

State	Victims seeking services							
	Total	Served	Partially served	Not served	Hotline calls from victims	Walk-in information and referrals to victims	Web-based information and referrals to victims	Outreach to victims
Pennsylvania	2,750	2,730	20	0	2,028	127	64	476
Puerto Rico	76	76	0	0	0	6	0	0
Rhode Island	201	201	0	0	60	6	1	46
South Carolina	1,215	1,206	9	0	1,172	93	66	313
South Dakota	309	309	0	0	194	56	6	184
Tennessee	548	548	0	0	476	59	2	556
Texas	1,919	1,919	0	0	2,019	188	11	424
Utah	1,414	1,408	6	0	654	165	31	112
Vermont	465	459	0	6	2,689	13	4	0
Virgin Islands	77	77	0	0	38	9	3	51
Virginia	1,305	1,287	12	6	1,118	93	33	379
Washington	490	487	3	0	334	15	1	0
West Virginia	552	547	3	2	609	87	0	48
Wisconsin	958	944	14	0	693	153	5	35
Wyoming	436	433	2	1	1,675	1,604	17	331
TOTAL	43,897	43,397	352	148	41,741	10,526	1,033	10,153

Table B2b. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2014^{xxiv}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African – American	Hispanic/Latino	Native Hawaiian/Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Alabama	15	1	312	16	2	683	437	1,031	58	377	13	4	121	292	596	14	426
Alaska	81	0	0	0	0	1	0	81	1	0	0	2	5	20	52	2	1
American Samoa	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Arizona	19	10	15	139	0	200	2	361	24	0	9	14	38	74	228	16	6
Arkansas	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
California	10	25	120	651	7	310	236	1,213	146	0	150	162	194	258	442	22	131
Colorado	10	9	11	390	4	974	37	921	491	1	290	482	330	45	244	15	7
Connecticut	3	2	38	375	0	172	24	549	64	1	34	55	80	82	336	27	0
Delaware	0	2	54	40	0	132	770	636	189	173	15	19	96	102	446	125	195
District of Columbia	0	0	728	89	0	17	303	705	39	393	0	0	9	17	34	1	1,076
Florida	1	15	118	92	0	251	34	480	31	0	0	1	85	146	259	11	9
Georgia	0	1	169	108	0	354	52	531	147	0	123	181	173	66	112	5	18
Guam	0	0	0	0	4	0	0	4	0	0	0	1	3	0	0	0	0
Hawaii	3	80	5	20	112	109	63	328	64	0	35	50	79	60	115	3	50
Idaho	42	7	8	81	1	516	23	609	57	0	44	55	85	136	290	28	28
Illinois	33	18	446	460	10	1,623	56	2,152	198	3	108	212	534	517	938	33	11
Indiana	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Iowa	5	7	21	126	2	695	27	738	75	3	31	68	145	191	355	26	0
Kansas	7	2	24	30	1	289	23	353	22	0	13	21	39	67	232	3	0

^{xxiv}No SASP subgrantee reports were received for American Samoa, Arkansas, and Indiana in 2014.

Table B2b. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2014^{xxiv}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African – American	Hispanic/Latino	Native Hawaiian/Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Kentucky	1	0	24	8	1	201	21	225	31	0	29	25	23	45	121	2	11
Louisiana	12	2	347	56	1	693	19	953	161	0	97	155	211	133	471	20	27
Maine	0	0	20	1	1	187	249	383	70	4	6	10	24	66	128	7	216
Maryland	14	15	362	176	0	634	305	1,380	116	1	53	104	179	222	436	19	484
Massachusetts	8	5	51	74	0	336	159	569	31	14	0	0	35	103	320	20	136
Michigan	1	3	171	97	0	170	5	422	24	1	7	18	37	42	295	18	30
Minnesota	68	19	93	84	1	470	284	852	111	44	18	23	144	280	364	22	156
Mississippi	3	0	281	20	3	328	45	618	62	0	43	71	109	131	271	12	43
Missouri	11	16	140	103	58	726	208	1,212	44	2	8	22	68	317	671	25	147
Montana	75	7	10	25	2	397	91	564	41	0	10	22	62	161	281	52	17
Nebraska	14	7	67	110	2	573	174	860	82	5	4	13	47	204	420	14	245
Nevada	16	26	452	353	14	499	24	1,343	31	1	27	55	135	498	584	54	22
New Hampshire	9	3	10	8	1	250	175	407	49	0	21	38	54	96	156	32	59
New Jersey	1	28	150	152	3	318	506	812	68	275	1	9	90	211	448	17	379
New Mexico	72	8	10	398	0	185	613	713	275	296	187	116	122	82	192	37	548
New York	16	45	250	298	2	658	39	1,124	179	5	31	58	250	258	627	66	18
North Carolina	22	7	240	176	3	713	99	1,146	97	15	35	59	106	264	654	43	97
North Dakota	64	5	15	8	1	208	5	271	35	0	27	32	67	70	106	4	0
N. Mariana Islands	0	10	0	0	2	0	1	11	2	0	0	0	1	3	9	0	0
Ohio	0	2	28	38	0	270	37	337	38	0	15	44	60	71	121	3	61
Oklahoma	97	3	64	85	2	400	4	598	27	0	4	6	135	134	327	11	8

Table B2b. Race/ethnicity, gender, and age of victims receiving SASP Formula-funded services, by state: 2014^{xxiv}

State	Race/ethnicity							Gender			Age						
	American Indian/Alaska	Asian	Black/African – American	Hispanic/Latino	Native Hawaiian/Pacific Islander	White	Unknown	Female	Male	Unknown	0-6	7-12	13-17	18-24	25-29	60+	Unknown
Oregon	38	6	18	165	12	485	40	729	34	0	1	7	98	192	419	13	33
Pennsylvania	11	17	292	823	1	1,425	181	2,248	502	0	128	230	376	815	1,146	45	10
Puerto Rico	0	0	0	74	0	2	0	67	9	0	2	29	16	2	24	2	1
Rhode Island	0	3	22	45	0	131	0	181	20	0	41	51	34	26	27	22	0
South Carolina	1	1	350	75	2	539	247	993	217	5	113	204	125	221	343	24	185
South Dakota	89	0	6	6	0	196	12	296	13	0	5	9	41	75	159	8	12
Tennessee	2	3	67	23	1	433	25	518	29	1	3	7	119	133	244	18	24
Texas	7	20	193	857	4	677	161	1,679	236	4	107	136	261	383	856	47	129
Utah	19	13	44	201	7	872	264	1,261	153	0	0	7	220	326	641	16	204
Vermont	17	7	19	5	1	350	61	406	49	4	0	0	33	205	205	16	0
Virgin Islands	0	0	40	28	1	8	0	69	8	0	0	0	5	31	39	2	0
Virginia	6	10	298	189	28	656	132	1,098	133	68	44	50	156	336	585	56	72
Washington	11	14	13	182	3	190	77	427	59	4	37	76	130	85	155	7	0
West Virginia	1	1	25	10	0	430	83	469	79	2	23	43	47	91	229	20	97
Wisconsin	30	231	58	320	0	338	11	890	68	0	13	31	87	162	628	29	8
Wyoming	12	0	7	54	5	358	7	382	53	0	15	33	35	111	203	27	11
TOTAL	977	716	6,306	7,944	305	21,632	6,451	37,205	4,842	1,702	2,020	3,120	5,758	8,658	17,584	1,161	5,448

Table B3b. Number of individuals with disabilities/who are D/deaf or hard of hearing/limited English proficiency/who are immigrants/living in rural areas receiving SASP Formula-funded services, by state: 2014^{xxv}

State	Disabled	D/deaf	Limited English proficiency	Immigrants/refugees/asylum seekers	Live in rural areas
Alabama	132	3	9	1	315
Alaska	15	1	0	0	82
American Samoa	0	0	0	0	0
Arizona	8	0	43	3	12
Arkansas	0	0	0	0	0
California	54	4	225	30	94
Colorado	151	3	20	1	228
Connecticut	84	2	102	63	0
Delaware	29	0	7	4	99
District of Columbia	19	1	12	11	21
Florida	42	0	72	12	36
Georgia	79	1	53	60	373
Guam	0	0	0	0	4
Hawaii	73	0	1	0	5
Idaho	110	3	29	31	303
Illinois	169	9	153	50	115
Indiana	0	0	0	0	0
Iowa	100	1	70	61	683
Kansas	118	3	4	0	157
Kentucky	55	0	4	2	119
Louisiana	312	7	38	35	476
Maine	67	1	0	12	150
Maryland	143	1	143	52	515
Massachusetts	183	4	32	23	56
Michigan	92	0	71	0	122
Minnesota	209	1	52	62	0
Mississippi	89	2	5	0	199
Missouri	201	3	70	54	468
Montana	68	2	12	8	313
Nebraska	31	0	54	35	536
Nevada	176	3	310	5	80
New Hampshire	79	3	15	14	79
New Jersey	86	0	67	84	90

^{xxv} No SASP subgrantee reports were received for American Samoa, Arkansas, and Indiana in 2014.

Table B3b. Number of individuals with disabilities/who are D/deaf or hard of hearing/limited English proficiency/who are immigrants/living in rural areas receiving SASP Formula-funded services, by state: 2014^{xxv}

State	Disabled	D/deaf	Limited English proficiency	Immigrants/refugees/asylum seekers	Live in rural areas
New Mexico	100	2	123	66	742
New York	180	11	202	104	351
North Carolina	83	6	140	35	634
North Dakota	62	0	4	3	33
N. Mariana Islands	0	0	10	8	13
Ohio	78	0	17	25	275
Oklahoma	116	4	49	48	273
Oregon	186	0	101	45	593
Pennsylvania	308	8	549	547	667
Puerto Rico	8	0	0	3	1
Rhode Island	8	0	2	0	14
South Carolina	99	1	33	20	273
South Dakota	14	2	2	2	162
Tennessee	101	2	19	12	188
Texas	24	2	379	112	387
Utah	148	1	83	91	231
Vermont	82	2	5	5	107
Virgin Islands	2	1	18	6	7
Virginia	88	1	123	85	563
Washington	47	0	82	37	42
West Virginia	73	4	14	0	339
Wisconsin	30	2	351	224	168
Wyoming	57	2	9	3	358
TOTAL	4,868	109	3,988	2,194	12,151

Table B4b. Relationship to offender of victims served with SASP Formula funds, by state: 2014^{xxvi}

State	Current/former spouse or intimate partner	Other family or household member	Dating	Acquaintance	Stranger	Relationship unknown
Alabama	189	151	112	406	218	402
Alaska	11	21	6	30	4	15
American Samoa	0	0	0	0	0	0
Arizona	47	29	12	266	26	5
Arkansas	0	0	0	0	0	0
California	187	311	105	425	142	189
Colorado	0	869	42	478	31	88
Connecticut	78	177	32	117	57	153
Delaware	26	69	25	97	26	757
District of Columbia	841	58	29	56	20	133
Florida	63	55	35	195	78	85
Georgia	52	319	25	147	25	110
Guam	0	3	0	1	0	0
Hawaii	18	108	7	125	40	94
Idaho	196	143	73	150	21	83
Illinois	161	610	141	687	207	642
Indiana	0	0	0	0	0	0
Iowa	265	138	153	137	24	99
Kansas	86	71	13	68	127	75
Kentucky	66	94	18	32	10	36
Louisiana	154	440	55	283	102	143
Maine	26	53	14	110	15	259
Maryland	455	369	71	201	63	343
Massachusetts	175	60	67	108	37	170
Michigan	57	132	23	88	135	12
Minnesota	30	145	11	190	37	608
Mississippi	81	223	40	279	54	4
Missouri	360	152	88	352	92	236
Montana	123	96	55	218	19	94
Nebraska	459	69	188	119	21	91
Nevada	553	203	244	212	144	37
New Hampshire	78	77	57	137	13	94
New Jersey	157	185	63	159	53	544
New Mexico	108	457	14	189	43	474
New York	424	308	241	290	78	102
North Carolina	235	250	131	247	84	327
North Dakota	41	80	22	115	26	24

^{xxvi}No SASP subgrantee reports were received for American Samoa, Arkansas, and Indiana in 2014.

Table B4b. Relationship to offender of victims served with SASP Formula funds, by state: 2014^{xxvi}

State	Current/former spouse or intimate partner	Other family or household member	Dating	Acquaintance	Stranger	Relationship unknown
N. Mariana Islands	9	1	0	3	0	0
Ohio	53	51	11	81	23	156
Oklahoma	263	130	38	207	114	21
Oregon	314	96	160	114	31	48
Pennsylvania	482	712	272	593	192	569
Puerto Rico	52	10	0	8	4	2
Rhode Island	42	39	28	50	26	16
South Carolina	106	320	51	289	75	374
South Dakota	66	88	8	95	16	36
Tennessee	184	111	36	136	46	54
Texas	379	606	148	512	219	302
Utah	257	139	91	424	84	555
Vermont	58	84	84	255	36	9
Virgin Islands	17	8	24	26	2	0
Virginia	300	318	177	313	74	149
Washington	57	152	4	120	25	138
West Virginia	122	144	50	164	34	46
Wisconsin	330	168	42	129	31	259
Wyoming	76	135	56	107	15	46
TOTAL	8,969	9,837	3,492	10,340	3,119	9,308

Endnotes

¹The Violence Against Women and Department of Justice Reauthorization Act of 2005, Pub. L. No. 109–162.

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