
Advances in Sexual Assault Response: Ten-Year Milestones



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ADVANCES IN SEXUAL ASSAULT RESPONSE: TEN-YEAR MILESTONES

I. INTRODUCTION

New Mexico is a land of great diversity in its geography, population composition, cultural influences, and socio-economic levels. Any successful attempts to address sexual assault and other interpersonal violence in our state must be grounded in this reality. The challenges to prevent sexual abuse and assault from occurring, by themselves, are daunting but made infinitely more difficult by the fact that we must concurrently work to optimize services for victims and their families and to prosecute and treat offenders.

New Mexico ranks 36th in population size in the United States and has the smallest population of all southwestern states.¹ As the formula for most federal funding for state programs is population-based, New Mexico is at a considerable disadvantage compared to its neighboring states that share similar geographical challenges to providing services to its rural and tribal inhabitants.

While most of New Mexico's population is concentrated in cities, the state of New Mexico is the 5th largest in size - over 121,356 square miles; and one-third of its population lives in rural areas.² One fifth (20.4%) of all New Mexicans live below the poverty level, however more children (25.8%) suffer this distinction.³ Additionally, 6 of New Mexico's 33 counties are border-area counties (those within 62 miles of the Mexico border).⁴ This is an important fact because while 22% of New Mexico families with children live below the poverty level, 39% of families in New Mexico's border communities share this reality. This is compared to 25% of families in border counties from other states and 21% of families in the United States.⁴

Highlighting New Mexico's poverty rates, rural geography, and border communities is important because these variables by themselves, negatively impact access to outreach, prevention and treatment services, as well as law enforcement protections. However, access and any effective strategies for addressing sexual assault in our state are further hindered by a barrier in communication. With Hispanics (46.3%) and Native Americans (9.4%) comprising over half of the New Mexico population, and another 9.5% comprised of foreign born persons, it is understandable that the proportion of families where language other than English is spoken in the home (36%) is significantly greater than the proportion of families in the United States (20%).²

Unfortunately, language is not the only other access barrier that must be addressed, as 15.2% of the New Mexico population is comprised of persons with one or more disabilities.³ Unfortunately, New Mexicans of all races/ethnicities experience barriers to access as disability rates differ only slightly among them: Hispanic (14.6%), Native Americans (15.2%), and White non-Hispanics (15.9%). Accessing services for 8.2% of New Mexicans with a mobility disability and daily activity limitation (6.3%) is difficult. New Mexican victims with cognitive impairment (6%), hearing impairment (4.9%)

and/or vision impairment (3.4%) are significantly less likely to be identified or to obtain appropriate services.³

These realities about the state of New Mexico and its inhabitants pose tremendous and unique challenges to providing effective interventions. However, the documentation of the prevalence, incidence and nature of sexual assault in our state has greatly improved in the last decade. Over this time frame, there has been a similar improvement in sex crime legislation and the establishment of targeted funding for sexual assault programs. Not coincidentally, great strides have been made in the expansion and delivery of services, training of children and parents, and training of professionals in the many disciplines that must respond to sexual abuse and assault to increase the likelihood of favorable outcomes: clergy, law enforcement officers, prosecutors, judges and teachers.

Because sexual assault prevention, treatment and criminal justice challenges at times may seem insurmountable, it is critical from time-to-time to acknowledge the extraordinary accomplishments we have made despite the barriers we must overcome and our funding disadvantage compared to other states.

The following outlines the incredible milestones accomplished in the New Mexico Coalition of Sexual Assault Programs' fight, together with their community partners to prevent and respond to sexual assault in New Mexico over the last 10 years.

II. EXPANSION AND DELIVERY OF SEXUAL ASSAULT SERVICES

Over the past ten years, the New Mexico Coalition of Sexual Assault and Abuse Services (Coalition) was instrumental as part of the state team led by UNM Prevention Research Center in developing the three-year strategic plan for enhancing primary prevention of sexual violence in New Mexico.

While not involved in direct services, the Coalition staff responded to over 47,000 technical assistance requests (to rape crisis centers, community mental health centers, law enforcement agencies); referred in excess of 2,000 clients to sexual assault services throughout the state; verified and paid 15,723 sexual assault medical exam bills for rape victims to medical agencies throughout the state; and funded 21 sub-contracts to agencies for rape crisis services, SANE units, and Sexual Violence Prevention projects (continually since FY 2004) which resulted in over 11,000 SANE exams provided, 3,500 hotline calls fielded, in-person advocacy for 1,600 victim, 420 court accompaniments, and 8,000 prevention presentations to over 100,000 participants. (It is important to realize that these numbers only reflect the services provided specifically with funds provided by the Coalition, with average contracts ranging between \$15,000 – \$35,000 annually).

Most importantly, the director of the Coalition created four statewide coordinator positions for the expansion of sexual assault services throughout New Mexico: Sexual Assault Nurse Examiner (SANE) Coordinator, Disability Advocate, Civil Legal Services Coordinator, and the Sexual Assault Services Director. The expansion of services under each coordinator is outlined below:

A. SANE Services

The New Mexico Coalition of Sexual Assault Programs (Coalition) developed for the first time, a statewide SANE Coordinator position at the Coalition to coordinate professional standards and services of current and emerging SANE units across NM. Under the direction of the SANE Coordinator, SANE has grown from four programs (Albuquerque, Las Cruces, Santa Fe, Roswell) to eleven SANE Programs (Albuquerque, Las Cruces, Santa Fe, Roswell, Farmington, Clovis/Portales, Alamogordo, Carlsbad, Grants, Taos, and Silver City). Additionally, a satellite-system has been developed to team nearby communities with existing SANE Programs so that 24 out of 33 New Mexico counties now have access to SANE services.

B. Rural, Border Area Communities, and Disability Initiatives

As with the SANE Coordinator, the Coalition developed for the first full-time, a statewide Disability Coordinator position. The statewide Disability Coordinator developed and created four multi-disciplinary regional collaborative teams comprised of law enforcement, victim service providers, and faith-based organizations from Catron, Grant, Hidalgo, Luna, McKinley, and Rio Arriba counties. These communities began the work of disability outreach and advocacy and provided treatment, counseling, advocacy, and other long and short term assistance to children, youth, and adult victims of sexual assault, dating violence, and stalking in rural communities, with an emphasis on underserved populations that include immigrants, undocumented individuals and families, and individuals with disabilities. In 2011, the Coordinator created a statewide Disability Advocate to respond directly to individuals in New Mexico with disabilities who have experienced sexual and domestic violence, stalking and dating violence.

C. Service Provider' Victim Services

In May 2009, the Coalition created a position for a statewide Director of Sexual Assault Services to coordinate sexual assault services statewide. With the director's leadership, there has been significant growth in sexual assault services, with two-new rape crisis centers opening in Portales, and Silver City. A new rape crisis center opened in Farmington in 2004 with the 'new' state funds made available that year. Additionally, the director has established a statewide Sexual Assault Providers' (SASP) Task Force, developed core standards for New Mexico's SASPs, and a state-wide training project to bring therapists from each SASP together to train on best practices for helping sexual assault survivors.

D. Legal Services

In 2010, the Coalition hired a project director and seven legal advocates to begin a program to provide free civil legal services for adult survivors at every rape crisis center in the state. Services include legal needs assessment, and either brief advice/representation or referral to litigation counsel. Additionally, the program provides an expansion of the available pool of civil attorneys with sexual assault knowledge

through in-house attorney staff and through continuing legal education trainings. The staff reside in Albuquerque, Farmington, Taos, Santa Fe, Portales, Silver City, Socorro and Las Cruces. The civil legal services have implemented a legal “warm-line” to provide brief advice and referrals to adult survivors in parts of the state not served by rape crisis centers. The program’s Legal Assistance to Victims project partners with New Mexico Legal Aid, Inc., to expand the access of sexual assault orders of protection throughout the state.

III. FIRST-TIME INITIATIVES

Over the past 10 years, in addition to the expansion of services under the statewide coordinator positions, the Coalition has accomplished first time initiatives involving law enforcement, women inmates, and sexual assault data collection through the establishment of the New Mexico Interpersonal Violence Data Central Repository. These initiatives are discussed below:

A. Law Enforcement Initiative

In 2006, as a result of stalking prevalence findings from the Survey of Violence Victimization in New Mexico, the Coalition received VAWA funding to develop the first Stalking Protocol for New Mexico – “A Guide to Encourage Best Practices for Law Enforcement in Stalking Investigations”, approved by the New Mexico Sheriffs’ and Police Association in 2007.

B. Women Inmate Services

In 2009 and 2010, the Coalition with VAWA funding conducted 10 domestic violence, sexual assault and stalking trainings to inmates and staff at the New Mexico Woman’s Correctional Facility in Grants, New Mexico. These trainings led to the development of a partnership between the New Mexico Women’s Correction Facility and Solace Crisis Treatment Center and the Rape Crisis Center of Central NM which, unlike PREA guidelines, offers confidential advocacy (without monitored calls) for the first time for women inmates.

C. Sexual Assault Data Collection

In 1996, VAWA funded an assessment of domestic violence and sexual assault data in New Mexico. As a result of this assessment, data regarding domestic violence and sexual assault among law enforcement and service provider agencies, including statewide Sexual Assault Nurse Examiner Programs (SANE) was standardized, and standardized court data was extracted from the Administrative Office of the Courts (AOC). A Central Repository was established to house standardized domestic violence and sexual assault data. Since 1999, statewide law enforcement, service provider and SANE agencies, and the AOC have been submitting quarterly domestic violence and sexual assault reports to the Central Repository. This information is analyzed annually to produce the *Sex Crimes*

in New Mexico report and the *Incidence and Nature of Domestic Violence in New Mexico* report. These reports are used by: a) the legislature to guide policy decisions; b) the State Department of Health to guide program development and the allocation of resources across the state; 3) statewide law enforcement agencies to secure funding for officers, equipment, special investigative units, and development of protocols; 4) statewide service providers to secure funding for counselors, satellite programs, and victim and children services; 5) district attorney's offices to secure funding for prosecutors, special prosecution units, and legal advocates; and 6) the courts to secure funding for court compliance monitors and judicial education and training.

In 2005, The Central Repository with the SRBI, Inc. survey research company, and funding from the Department of Health conducted a statewide victimization survey to obtain for the first time in New Mexico, reported and unreported victimizations and determine baseline lifetime prevalence rates and previous 12-month incidence rates of domestic violence, sexual assault, and stalking.

In 2009 and again in 2010, the Central Repository conducted the Survey of Victimization Experiences among women inmates at the Woman's Correctional Facility in Grants, New Mexico. Findings from this survey will be published in February 2012.

In 2009, the Central Repository working with the New Mexico Coalition Against Domestic Violence began the process for converting aggregate data collection by service providers to unique data collection to improve the quality of data captured and the quality and scope of domestic violence information gained from the data. This process will be finished by March 2012. Unique data will begin to be collected by statewide service providers by July 2012.

IV. TRAININGS AND PRODUCTS

Creating new services and improving access to services by expanding their reach are critical accomplishments of the Coalition and its community partners. However, equally critical is training professionals that respond to sexual assault incidents and victims, and training victims and their parents on preventing sexual abuse and assault. Over the past 10 years, the Coalition sponsored 328 New Mexico professionals from law enforcement, prosecution, sexual assault services (rape crisis, SANE, immigrant services), and legal advocates to national conferences on violence against women held throughout the country. Additionally it sponsored 391 statewide and community events (presentations, workshops, mini-conferences) to 15,984 professionals (law enforcement, prosecutors, medical staff, school staff, faith community, sexual assault service providers, probation and parole, and corrections staff). Training is paramount to appropriately respond to sexual assault and optimize outcomes for victims and their families. As there is considerable vicarious trauma over time working with victims of sexual assault, training must be repeated annually to ensure all professionals are adequately prepared in their response. To this end, the Coalition employs a full-time sexual assault prevention training specialist and works with many statewide community partners to develop and conduct trainings, and the curricula and other products relevant to those trainings.

The following is a discussion of the trainings and products developed by Coalition programs over the last 10 years:

A. SANE Trainings and Products

➤ Developed and currently sponsors at least twice a year, a 64-hour SANE Training for Sexual Assault Nurse Examiners that combines the adult/adolescent and pediatric content that meets the International Association of Forensic Nursing (IAFN) educational guidelines and the US Department of Justice National Protocol for Sexual Assault Medical Forensic Examinations. This training has standardized the SANE response for sexual assault patients in New Mexico: all eleven SANE programs use comparable SANE medical records and practice consistent medical and forensic techniques for the SANE exam.

➤ Developed and sponsors at least twice a year, an intense day-long Genital Skills Lab that provides a significant portion of the clinical precept requirements and equipment competencies for new SANE nurses. This event has proved beneficial for rural nurses who have challenges in meeting these requirements. For those new SANE nurses who participate in the Genital Skills Lab, 68% have a minimum retention of one-year.

➤ Coordinated with I.H.S and Navajo-Nurses United for Research, Services, and Education (N-NURSE) to build capacity for Navajo, Zuni and Hopi lands' response to sexual assault including training and skills labs for 20 SANE nurses, support of local sexual assault response teams, and referrals to New Mexico sexual assault resources.

➤ Provides Self-Study Training Modules through the development and implementation of internet-based processes for SANE nursing self-study modules.

➤ Developed a multi-disciplinary team to periodically update/renew the New Mexico Sexual Assault Evidence Kit (SAEK) to current best practices of evidence collection, including the deletion of the archaic requirement of pulling pubic hairs from victims, and up-to-date CDC recommended medication for emergency contraception and sexually transmitted infections. The Offender Suspect Kit was also updated this past year.

➤ Developed, created and presently distribute a standardized Drug Facilitated Sexual Assault Kit (DFSA) to all SANE Programs that reflects national standards of collecting blood and urine within 24 hours of suspected drug ingestion and collecting urine within 120 hours of suspected ingestion. The kit is packaged so that the DFSA specimens can be mailed through the United States Postal Service, thereby saving time and money for law enforcement.

➤Produced and Distributed 18,000 sexual assault evidence kits and 750 Drug Facilitated Sexual Assault kits throughout New Mexico

➤Produced and Distributed 12 portable SANE kits. These large rolling duffels contain much of the equipment that allows a SANE examiner to complete a medical forensic sexual assault exam in satellite and developing units.

B. Rural, Border Area Communities, and Disability Trainings and Products

➤Produced educational, awareness, and training materials in alternative formats including bi-lingual and multi-media formats that respond to the specific needs of individuals living in extreme poverty and other underserved populations including immigrants, undocumented individuals and families, and individuals with disabilities.

➤Utilizing the New Mexico Crime Victims Reparation Commission STOP VAW funding, developed a comprehensive Sexual Assault Nurse Examiner training DVD and accompanying curriculum to instruct nurses how to effectively and compassionately conduct a sexual assault medical and forensic evaluation of individuals with developmental disabilities.

➤Created a Children's with Disabilities DVD and Guide for doctors and parents of children with disabilities.

➤Developed and created the *Law Enforcement Guide for Working with Children with Autism, Intellectual and Communication Disabilities*.

➤Conducted a qualitative and quantitative assessment of the First Judicial District Court's physical and programmatic accessibility for individuals with mobility limitations and individuals who are blind and deaf who are victims of sexual assault, domestic violence, and stalking. ➤Provided onsite training to First Judicial Court staff, District Attorney's Office and law enforcement.

➤Developed the *First Responder Disability Awareness Briefing Project* video and accompanying guide booklet.

➤Developed *Children with Disabilities: Victimization, Sexuality and Communication* training curriculum and accompanying handouts and resources.

➤Developed a rural safety plan for children with disabilities.

➤Developed a *Protecting Children with Disabilities from Sexual Assault: A Parent's Guide*, a resource guide for parents and educators.

➤Developed a comprehensive Disability Resource List

➤ Participated in the development of the Office for Victims of Crime *Supporting Crime Victims with Disabilities* curriculum

➤ Produced sexual assault services PSA announcements for rural communities of Dulce and Deming, NM.

➤ Developed and created an intensive three day counselor training curricula for rural community counselors.

➤ Developed a bathroom sticker campaign for rural communities.

➤ Developed an award-winning Sexuality and Disability Educational Poster

C. Law Enforcement and Service Provider Trainings and Products

➤ Conducted a statewide training institute and six regional child, youth, and adult sexual assault, stalking, and dating violence trainings for law enforcement, victim service providers, and faith-based organizations.

➤ Developed education and prevention strategies directed toward preventing child, youth, and adult sexual assault.

➤ Conducted 110 Rural Law Enforcement Trainings on Investigating Domestic Violence, Sexual Assault, and Stalking resulting in more than 3500 law enforcement officers trained.

➤ Conducted three Prosecutors' Conferences on Investigating and Prosecuting Domestic Violence, Sexual Assault, and Stalking

➤ Conducted a Strangulation Conference

➤ Conducted Adolescent Sex Offender Treatment trainings as a collaborative community response project with Joann Schladale, MS, LMFT, an internationally recognized adolescent sex offender therapist - for therapists, law enforcement, social workers, and counselors. From 2008-2011, 215 participants were trained in 11 statewide trainings. Among these participants, 52 therapists were specifically trained to treat adolescent sex offenders.

➤ Produced and Distributed 40,000 Law Enforcement Guides

➤ Printed and Distributed over 160,000 brochures and posters throughout New Mexico.

V. CONCLUDING COMMENTS

To be sure, sexual assault is a crime of opportunity, preyed upon the vulnerable and as such, is most difficult to prevent. In New Mexico, data from statewide law enforcement and service provider agencies, and SANE programs reveal that an average 81% of victims of sexual assault know their offenders, and an average 28% of these are family members. Considering that most sexual assault victims are children at the onset of their assault and that most assaults take place within a residence, many times by a family member, identifying potential victims is extremely challenging.

Over half (56%) of victims that sought sexual assault services in 2010 had experienced a prior sexual assault. Two-thirds of the victims that experienced a prior sexual assault were victims of on-going abuse, 88% of which occurred by age 12; one-third (34%) were victims of a prior isolated sexual assault, and half (57%) of these occurred by age 12.

Fathers (23%), uncles (15%), cousins (15%) and step-fathers (11%) are committing these offenses, and 77% happen within the victim's, offender's, or other residence. Identifying those vulnerable to abuse in their homes or because of victim disability presents a seemingly impossible challenge (in 2010, 29% of victimized adults, 20% of victimized adolescents and 11% of child victims had a physical and/or mental disability).

While these challenges negatively impact our ability to prevent sexual assault from taking place, the aforementioned milestones demonstrate that in New Mexico, we have made great strides in outreach, sexual assault prevention education, training parents and professional responders, and providing greater access to more services of better quality. We should acknowledge our accomplishments and be inspired by the fact that tenaciousness toward achieving our goals does make a positive difference in our efforts to overcome seemingly insurmountable challenges.

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