

# Addressing Sexual Violence in Kansas

## A STATE RESPONSE PLAN

*Developed by:*

Kansas Coalition Against Sexual and Domestic Violence

[www.kcsdv.org](http://www.kcsdv.org)



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# Sexual violence response plan advisory committee:

**Laurel Klein Searles, Chair**

Staff Attorney  
Kansas Coalition Against Sexual and  
Domestic Violence (KCSDV)

**Sandy Barnett**

Executive Director  
KCSDV

**Samantha Butler**

Direct Services Coordinator  
Northwest Kansas Domestic and  
Sexual Violence Services

**Judy Davis**

Executive Director  
The Crisis Center, Inc.

**Paul Dotson**

Chief of University Police  
Wichita State University

**Blaine Dryden**

Investigator  
Hays Police Department

**Brian Duncan**

Attorney  
Case, Moses, Zimmerman, & Martin, P.A.  
(Formerly with the Crawford County  
Attorney's Office)

**Joyce Grover**

General Counsel  
KCSDV

**Dorthy Stucky Halley**

Director of Victim Services Division  
Office of the Kansas Attorney General

**Tom Hongslo**

Captain  
Lenexa Police Department

**Alison Jones-Lockwood**

Director of Advocacy and Outreach Services  
Metropolitan Organization to Counter  
Sexual Assault

**Stacey Mann**

Director of Advocacy Services  
KCSDV

**Jennie Marsh**

Victim Services Director  
Kansas Department of Corrections

**Juliene Maska**

Administrator  
Kansas Governor's Grants Program

**April Rand**

Masters of Social Work Intern  
KCSDV

**Sarah Jane Russell**

Executive Director  
GaDuGi Safe Center

**Diana Schunn**

SANE/SART Specialist  
Via Christi Regional Medical Center

**Jennifer Schwartz**

Executive Director  
Kansas Association of Centers for  
Independent Living

**Kavya Velagapudi**

Masters of Social Work Intern  
KCSDV

**Barry Wilkerson**

Riley County Attorney  
Office of the Riley County Attorney

**Kathy Williams**

Executive Director  
Wichita Area Sexual Assault Center

## **E**xecutive summary:

Sexual violence is devastating to victims, families, communities, and society. It exists in intimate relationships, families, work places, communities, and the media. Sexual violence affects everyone regardless of age, race, class, gender, ability, or sexual orientation. Efforts to end sexual violence and to facilitate healing from sexual violence must continue to be strengthened. To do so, there must be a comprehensive coordinated response from all systems that interact with victims of sexual violence. In order to aid these systems, this document identifies the following six key goals as well as numerous strategies to address sexual violence.

- 1. Change the Public's Perception of Sexual Violence**  
Before an end to sexual violence can be expected, there must be a change in the public's perception of sexual violence. The public must be made aware of the realities of sexual violence.
- 2. Ensure Multidisciplinary Services to Facilitate Healing from Sexual Violence**  
Survivors may reach out to a number of different systems following sexual violence. The service providers in these systems must understand the dynamics of sexual violence. Furthermore, these service providers must be willing to collaborate with each other to ensure that survivors receive optimum care.
- 3. Overcome Barriers to Services for Marginalized Communities**  
Sexual violence affects people from all backgrounds, yet many marginalized communities are still underserved. They may face numerous barriers to accessing services. Service providers must reach out to marginalized communities to ensure that all victims of sexual violence can receive the best services possible.
- 4. Ensure Responsive, Effective Practices from the Legal System**  
Navigating the legal system can be a confusing and difficult process for anyone. Ideally, the legal system should operate with a systematic focus on the victim's needs in order to ensure victim safety and delivery of services in a nonjudgmental manner. Professionals working in the legal system must work to ensure that they are providing this type of response for all victims of sexual violence.
- 5. Involve Men and Boys in Anti-Sexual Violence Efforts**  
Sexual violence touches the lives of both women and men. Many men and boys experience sexual violence as victims themselves and as secondary victims. Males have an important role to play in anti-sexual violence work and this is an opportune time to involve them in the movement.
- 6. Promote Sexual Violence Primary Prevention Education**  
Community support of primary prevention work is imperative. One of the greatest tools that can be utilized to eliminate sexual violence is primary prevention education. The strategic plan prepared by the Kansas Sexual and Domestic Violence Primary Prevention Steering Committee will be essential to guiding future primary prevention work in Kansas.

Sexual violence in Kansas *can* and *must* end. Implementation of these recommendations and strategies will require collaboration among many organizations, agencies and individuals from a variety of disciplines. By working together on common strategies, we can make significant progress toward that goal.

## Introduction:

### ***Why is a sexual violence response plan necessary when rape crisis services have been available for more than thirty years in Kansas?***

Although advocacy services have been available in many communities across Kansas for more than thirty years, many of those services have historically been under-resourced.<sup>1</sup> Likewise, sexual assault nurse examiners (SANE) and sexual assault response teams (SART) have been working in some Kansas communities for more than ten years, but those services have been poorly funded and sporadic across the state.<sup>2</sup> **As professionals learn more about sexual violence, it becomes clear that a comprehensive response inclusive of all the systems and services victims may seek is necessary.** Unfortunately, very few victims of sexual violence actually receive essential services to facilitate healing. Recognizing these unmet needs of victims of sexual violence, the Kansas Legislature appropriated funds for victim service enhancements and Congress added the Sexual Assault Services Program to the Violence Against Women Act. In order to ensure that Kansas acts in a strategic manner to allow for coordinated development of services, a statewide plan to address sexual violence is necessary.

*As professionals learn more about sexual violence, it becomes clear that a comprehensive response inclusive of all the systems and services victims may seek is necessary.*

This document serves as a beginning framework to addressing sexual violence in Kansas. As interest and resources allow, further development of the State Response Plan will occur at the state and community level. This document may be a useful tool for community groups or organizations that are focusing on ways to address the numerous community-based systems that interact with victims, such as the mental health and health care systems, law enforcement and court systems, education systems and employers. The plan also may be of use to state and community-based funding organizations that focus their resources on identified needs and priorities.

### ***What is sexual violence?***

In order to address the issue of sexual violence effectively, there must be a clear definition of the term. Some people may mistakenly believe sexual violence means forced sexual intercourse that causes major physical injuries; however, the meaning of the term sexual violence is broader than that definition. A more accurate definition of **sexual violence is “sexual actions (completed or attempted) and words that coerce, manipulate or are forced upon someone with the intent to intimidate, humiliate, dominate, subjugate and control.”**<sup>3</sup> This definition includes rape, human trafficking, unwanted sexual touching, sexual harassment, unwanted sexual comments as well as other forms of sexual violence. The use of this definition is not an attempt to minimize the impact of sexual violence in any individual’s life. Instead, this broad definition seeks to capture an accurate description of the actions and behaviors that this plan seeks to eliminate.

Unfortunately, there is not a universal definition of sexual violence, which makes it difficult to track statistics. The majority of sexual violence statistics cited in this document use a more narrow definition of sexual violence. For example, all of the Kansas specific statistics

in this document come from the Kansas Bureau of Investigation. These statistics only include rape as defined by Kansas law, which represents only a small portion of all sexual violence. Additionally, the Kansas statistics only include rapes that were reported to law enforcement, and rape is a highly underreported crime. Law enforcement agencies were then responsible for reporting the number of rape cases they handled each year to the Kansas Bureau of Investigation; not all law enforcement agencies reported. Many of the national studies cited have similar flaws. **Accordingly, the statistics cited in this document only account for a fraction of all sexual violence occurring both in Kansas and nationwide.**

***Who are the victims and the perpetrators of sexual violence?***

Being a victim or perpetrator is not pre-determined by the categories of age, race, class, or gender. **Sexual violence can and does occur across the life span, without regard to race, class, or gender.** Similarly, perpetrators of sexual violence come from different ages, races, classes, and genders. In most cases of sexual violence, the perpetrator is someone the victim knows or trusts, such as a friend, an acquaintance, a relative, or a spouse. In over seventy-eight percent of all rapes reported to Kansas law enforcement, the victim knew the perpetrator.<sup>4</sup>

*Sexual violence can and does occur across the life span, without regard to race, class, or gender.*

**Reported Rape Victim to Offender Relationship<sup>5</sup>**

<b>Relationship</b>	<b>Percent of Total</b>
Spouse	2.3%
Common Law Spouse	0.2%
Child	2.0%
Sibling	1.8%
Grandchild	0.5%
In-Law	0.3%
Step-Parent	0.2%
Step-Child	2.9%
Step-Sibling	1.1%
Foster Sibling	0.2%
Other Family Member	2.7%
Acquaintance	35.6%
Friend	7.6%
Neighbor	1.2%
Boyfriend/Girlfriend	10.8%
Child of Boyfriend/Girlfriend	0.6%
Ex-Spouse	0.8%
Employer/Employee	0.1%
Co-Worker	0.5%
Roommates	0.2%
Otherwise Known	6.0%
Victim was Suspect	0.8%
Relationship Unknown	10.7%
Stranger	10.9%

Statistics provide additional information about sexual violence perpetrators and victims in Kansas. In rape cases reported to Kansas law enforcement, the vast majority of sexual violence victims are female, over ninety-eight percent, and the vast majority of perpetrators of sexual violence are male, over ninety-five percent.<sup>6</sup> Additionally, over eighty-two percent of victims of sexual violence who report to law enforcement in Kansas are under the age of thirty.<sup>7</sup> In cases reported to Kansas law enforcement, the majority of perpetrators are slightly older; seventy percent are between the ages of fifteen and thirty-nine.<sup>8</sup> While these statistics provide some information about victims and perpetrators of sexual violence in Kansas, it is important to remember that sexual violence can happen to anyone.

#### ***What is the impact of sexual violence?***

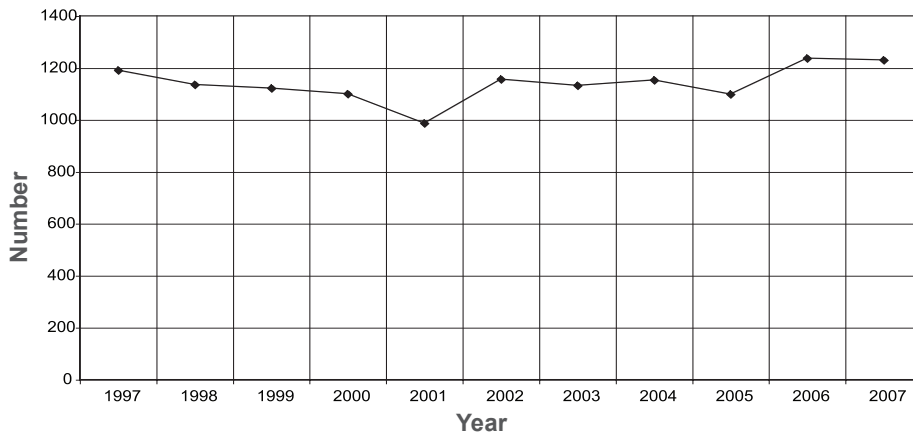
Sexual violence is devastating to victims, families, communities, and society, which all experience the long-lasting impact of sexual violence. **Victims experience physical, psychological, and emotional trauma that affects their relationships with their families and communities.** They may also develop post-traumatic stress disorder (PTSD), depression, chemical dependency, suicidal ideations, and chronic physical health problems.<sup>9</sup> Sexual violence has wide-ranging consequences for the health and safety of communities including economic costs. The economic costs of sexual violence include the criminal justice response, health care for victims, lost productivity and more. National research indicates that sexual assault of adults costs \$127 billion annually.<sup>10</sup> While the economic cost of sexual violence in Kansas is unknown, it is likely staggering.

#### ***How often does sexual violence occur?***

Sexual violence exists in intimate relationships, families, work places, communities, and the media, and it affects everyone regardless of age, race, class, gender, ability, or sexual orientation. It is difficult to determine how frequently sexual violence occurs. Many studies focus only on measuring the frequency of rape, which is a very specific crime with a narrow legal definition that is not as broad as the definition of sexual violence. Other studies consider the frequency of sexual assault, which has a more expansive definition than rape, but still does not encompass the entirety of sexual violence. The discrepancy in terminology can create confusion when trying to estimate the true incidence and prevalence of sexual violence.

Law enforcement agencies receive reports of only a small fraction of all sexual violence, which also makes it difficult to determine how frequently sexual violence occurs.<sup>11</sup> A 2006 study found that there were **272,350 rapes and sexual assaults of people over the age of twelve in the United States.**<sup>12</sup> In Kansas, the number of rapes<sup>13</sup> reported to law enforcement has fluctuated between 988 and 1238 over the last ten years.<sup>14</sup> In 2008, there were 1186 rapes reported to law enforcement,<sup>15</sup> again, this Kansas data represents only a fraction of the true numbers.

**Number of Rapes Reported to Kansas Law Enforcement  
as Reported to the Kansas Bureau of Investigation  
1997-2007**



Note: Not all law enforcement agencies in Kansas provided the KBI with data, so this chart does not represent all reported rape in Kansas. In 2001, the KBI received no information from the Lawrence, Topeka, or Kansas City Police Departments.

In FY 2008, KCSDV member programs provided face-to-face services to 3,545 victims of sexual violence, handled 5,179 crisis calls, provided medical assistance to 1,707 victims, and logged 9,094 hours of supportive counseling. Despite the best efforts of sexual violence advocacy programs, not all victims received those advocacy services, so these numbers do not provide an accurate portrayal of the incidence and prevalence of sexual violence in Kansas either. **KCSVD estimates that each year in Kansas 3,040 women and 962 men are raped and 244,790 adult women and 39,854 adult men will have been raped in their lifetimes.**<sup>16</sup> Regardless of the difficulty in determining the true incidence and prevalence of sexual violence, it is clear that sexual violence is a serious concern for Kansans and the communities in which they live.

***How are perpetrators of sexual violence held accountable for their actions?***

**Community sanctions against sexual violence are essential in order to hold perpetrators of sexual violence accountable.** Unfortunately, the criminal justice system is limited in its capacity to hold all perpetrators accountable for their actions. In 2007 in Kansas, law enforcement made arrests in less than twenty-one percent of all reported rapes.<sup>17</sup> Only a fraction of those arrested are ever prosecuted, convicted, and sentenced.<sup>18</sup> Because so many perpetrators of sexual violence receive little or no criminal punishment, there must be more comprehensive community sanctions for sexual violence. In 2006, the Governor and the Kansas Legislature established the Kansas Sex Offender Policy Board (the Board) to advise the Kansas Criminal Justice Coordinating Council on offender accountability

*KCSVD estimates that each year in Kansas 3,040 women and 962 men are raped and 244,790 adult women and 39,854 adult men will have been raped in their lifetimes.*

and public safety issues relating to sexual violence.<sup>19</sup> The Board included the Secretary of Corrections, the Commissioner of the Juvenile Justice Authority, the Secretary of the Department of Social and Rehabilitation Services, the Director of the Kansas Bureau of Investigation, a designee of the Chief Justice of the Supreme Court, and representatives from mental health and victim services, including the executive director of KCSDV.<sup>20</sup> In 2007 and 2008, the Board issued recommendations for a more comprehensive community response to sexual violence; however, many of these recommendations have not been implemented.<sup>21</sup> The need for and development of treatment for juvenile sex offenders, many of whom have been victimized themselves as children, needs research and attention. While that work is critical and very important, addressing it here was beyond the scope of this document.

#### ***How long has sexual violence been an issue?***

Sexual violence is not a new issue; it has persisted throughout history. Under early legal doctrines, women were viewed as property of their husbands or fathers, so raping a woman was not a crime against the woman;<sup>22</sup> it was a property crime against a man.<sup>23</sup> Additionally, because women were considered the property of their husbands, men could not be found guilty of raping their wives because one could do what one wanted with one's property.<sup>24</sup> Early feminists attempted to change these laws, but fell short.<sup>25</sup> It was not until the modern rape crisis movement, when women began to come together and mobilize to raise public awareness of sexual violence that these laws began to change.<sup>26</sup> Beginning in the late 1960s, the rape crisis movement gave visibility to the issue. In the early 1970s, the first workshops and conferences about sexual violence were held along with "speak outs" featuring public testimony by survivors.<sup>27</sup> The conferences lead the efforts to question traditional assumptions about sexual violence. Thus, the rape crisis movement was the precedent for targeting the issue of sexual violence.

In Kansas, the first rape crisis center, Douglas County Rape Victim Support Service, which is currently known as GaDuGi Safe Center, opened in 1972 in Lawrence. Unfortunately, public resources and support were scarce or non-existent. Few attempts were made to coordinate rape crisis center services with the criminal justice system until public opinion began to evolve in the 1970s and 1980s. During this time period in Kansas, the Kansas Organization of Sexual Assault Centers (KOSAC) was founded in 1978. In 1989, KOSAC joined with the Kansas Association of Domestic Violence Programs (KADVP) to become the Kansas Coalition Against Sexual and Domestic Violence (KCSDV). Since this time, there has been an increase in public awareness both in Kansas and nationally about the complexity and impact of sexual violence. **Communities throughout the nation continue to recognize the need for comprehensive, coordinated services.** This includes victim service providers, specialized law enforcement units, trained medical providers, faith communities, businesses, social service agencies, and other community-based programs.

***How was the State Response Plan formulated?***

KCSDV recognized the need to develop a sexual violence response plan for the state. After examining similar plans from other states including the California Coalition Against Sexual Assault Strategic Forum Report and the New Hampshire Coalition Against Domestic and Sexual Violence Sexual Assault Plan, KCSDV created an initial draft of the State Response Plan. This initial draft was strongly influenced by the plans from California and New Hampshire. After developing this initial document, the Sexual Violence Response Plan Advisory Committee met and worked to tailor the plan to meet the needs of Kansas. This committee included a range of professionals from across the state including advocates, prosecutors, law enforcement officers, health care providers, representatives from the Office of the Governor, Office of the Attorney General, Kansas Department of Corrections, the Kansas Association of Centers for Independent Living, and KCSDV. Although members of the committee came from different fields, all address sexual violence in their work. The committee reviewed and discussed the components of the draft State Response Plan with an eye toward creating a document that best served the needs of Kansas citizens. The resulting State Response Plan focuses on six identified goals and provides a framework for addressing sexual violence in Kansas.

***What are the goals of the State Response Plan?***

1. Change the Public's Perception of Sexual Violence
2. Ensure Multidisciplinary Services to Facilitate Healing from Sexual Violence
3. Overcome Barriers to Services for Marginalized Communities
4. Ensure Responsive, Effective Practices from the Legal System
5. Involve Men and Boys in Anti-Sexual Violence Efforts
6. Promote Sexual Violence Primary Prevention Education

*Note About Terminology:*

For the purposes of this document, the terms survivor and victim are used interchangeably to refer to those affected by sexual violence.

The initial movement against sexual violence was known as the rape crisis movement, but is more recently being described as the anti-sexual assault movement or the anti-sexual violence movement. For the purposes of this document, it is referred to the anti-sexual violence movement.

Rape crisis center is a term that is commonly used to describe an organization that provides sexual violence advocacy services. The terms rape crisis center and sexual violence advocacy program are used interchangeably in this document.

Community is a term that can have several meanings. In this document the term community is used to refer to a group of people united by some commonality such as the place they live, their national origin, the school they attend, or any other shared characteristics or interests.

## Change the public's perception of sexual violence

In order to bring change to the public perception of sexual violence, social norms and beliefs that condone sexual violence must shift. This is a difficult task since sexual violence is attributable to a number of factors.<sup>28</sup> One factor is the societal beliefs about gender roles. Society expects women to embody feminine characteristics and men to embody masculine characteristics, which are both associated with strong stereotypes. Femininity is viewed as nurturing, subordinate, powerless, and compromising; masculinity as strong, aggressive, intelligent, and unemotional. When social norms dictate strict conformance to these gender roles, sexual violence is prevalent.<sup>29</sup> **It is essential that social norms and beliefs that encourage or condone sexual violence change.**

Additionally, the public must be educated on the realities of sexual violence. There are many misperceptions about sexual violence. These are often referred to as “rape myths.”

One rape myth is that sexual violence only affects the lives of women. While the majority of sexual violence victims are female, there are a significant number of male victims. National research indicates that annually over ten percent of all victims of sexual violence are male.<sup>30</sup> Men also feel the effects of sexual violence as secondary victims when their wives, daughters, sisters, and friends are victimized. While it is true that the majority of perpetrators of sexual violence against both males and females are heterosexual men,<sup>31</sup> most men are not perpetrators. In fact, most men oppose sexual violence and can be key allies in anti-sexual violence work. **It is important to recognize that sexual violence has significant impact on both men and women.**

Another common rape myth is that perpetrators of sexual violence are strangers who violently attack women with a weapon leaving serious physical injuries. In reality, the perpetrator of sexual violence is usually someone the victim knows and trusts and weapons are rarely used. **In 2008, in Kansas, victims knew the perpetrator in over seventy-eight percent of all rape cases reported to law enforcement.**<sup>32</sup> Perpetrators used guns or knives in less than three percent of these reported rapes.<sup>33</sup> The majority of rapists, more than eighty-two percent, used their hands, fists, or feet as weapons, and more than eight percent used no weapon at all.<sup>34</sup> Additionally, sexual assaults typically do not result in major physical injuries. Again, in 2008, over seventy-four percent of rape victims in Kansas reported no major physical injuries.<sup>35</sup> This is not to say that the impact of sexual violence is not serious but it does not usually involve physical injury. It does include, however, extreme emotional and psychological injury as well as long-term health problems. Again, the reality of sexual violence differs from the public perception of sexual violence.

There is also a great deal of misinformation about intimate partner sexual violence. Estimates indicate that thirteen to twenty-four percent of all married women will be raped by their husbands at least once during their marriage.<sup>36</sup> Unfortunately, society has condoned intimate partner sexual violence for centuries. Under early legal doctrines, it was legally impossible for a man to rape his wife because of the definition of the crime. An early definition of the crime of rape was “the act of sexual intercourse committed by a

*It is essential that social norms and beliefs that encourage or condone sexual violence change.*

man with a woman not his wife and without her consent committed when the woman's resistance is overcome by force or fear, or under other prohibited conditions."<sup>37</sup> Early on, many states included this immunity for husbands in their rape statutes.<sup>38</sup> This did not begin to change in the United States until the introduction of rape reform laws in the 1970s.<sup>39</sup> Today all fifty states prohibit marital rape, but legal distinctions between rape inside and outside of marriage remain.<sup>40</sup> In Kansas, the exemption was removed in 1983 and today marital rape is a crime.<sup>41</sup> Even though Kansas was a national leader in eliminating spousal immunity for rape, there is still an archaic spousal exemption for sexual battery in Kansas.<sup>42</sup> This law unfortunately reinforces the myth that a husband should have unlimited sexual access to his wife.

There are many more rape myths that must be exposed as dangerous lies; harmful to victims of sexual violence as well as to all of society. These myths continue to impede perpetrator accountability. Acknowledging the reality of sexual violence is the first step in changing public perception about this issue. Society must recognize sexual violence as an issue that impacts everyone, not just those directly involved. Existing knowledge, beliefs, attitudes, behaviors, institutional, social, and cultural practices that support sexual violence must change. The following strategies will help to change the public's perception of sexual violence.

**1. Present sexual violence as a human rights issue.**

- a. Continue to work in partnership with national and international organizations to address sexual violence as a human rights issue.
- b. Promote public policy responses that recognize that sexual violence is a human rights issue.
- c. Encourage other organizations, political leaders, and community leaders to make policy statements opposing sexual violence.

**2. Enhance community engagement in order to increase public awareness of sexual violence.**

- a. Provide community education and outreach that raises public awareness, provides accurate knowledge of sexual violence and its impact on communities, and identifies local resources for victims of sexual violence.
- b. Provide appropriate community education and outreach on perpetrator accountability and the role communities can play in responsible and impactful perpetrator accountability.
- c. Mobilize communities to encourage active community participation to support anti-violence initiatives and movements and support the local organizations that serve victims of sexual violence.
- d. Organize communities to build their capacity to respond to sexual violence, raise public awareness, and create needed resources for victims.
- e. Increase community accountability and encourage active community participation to support victims of sexual violence.

- 3. Enhance techniques to increase public awareness about sexual violence.**
  - a. Evaluate which messages and delivery strategies are most effective and develop sexual violence awareness campaigns.
  - b. Encourage individuals to speak openly about sexual violence to raise public awareness.
  - c. Develop awareness campaigns to target sexual violence that are creative and are able to reach all members of society.
  - d. Design sexual violence awareness campaigns that are accessible to people with limited English proficiency.
  
- 4. Improve the media response to sexual violence.**
  - a. Call for media and corporate responsibility to produce messages, images and products that portray men and women in nonviolent, positive terms.
  - b. Develop and deliver media education programs on accurate reporting of sexual violence with a focus on victim confidentiality and perpetrator accountability.
  - c. Identify and address the sources of incorrect or inappropriate media reporting of sexual violence.
  - d. Improve the capacity of rape crisis centers and other agencies to respond to media inquiries and coverage of issues and incidents involving sexual violence.

## Ensure multidisciplinary services to facilitate healing from sexual violence

Survivors of sexual violence may turn to a number of different systems in order to begin the healing process.<sup>43</sup> Research indicates that when survivors receive essential services in a supportive manner, they can more effectively begin recovery.<sup>44</sup> The survivor's recovery is not only essential to regaining a sense of control over the survivor's life, but can also help restore and protect relationships with friends, family, and the community. **Survivors of sexual violence need to receive essential services from advocacy agencies, health care providers, mental health providers, and other community programs.** Furthermore, each of these systems must be willing to collaborate with others to ensure an optimum response to victims of sexual violence.

*Survivors of sexual violence need to receive essential services from advocacy agencies, health care providers, mental health providers, and other community programs.*

Collaboration between systems can take various forms. It is critical that each system be aware of the services others can provide for survivors of sexual violence. One collaborative model that many communities use is a Sexual Assault Response Team (SART). A SART is a multi-disciplinary team that works collaboratively to assure the optimum response for survivors of sexual assault. A SART is often focused on the criminal response but can be broader. At a minimum, a SART includes representatives from forensic health providers, law enforcement, victim advocacy organizations, and prosecutorial offices. However, a SART may include representatives from other systems that serve survivors as well. **Each community should independently determine what type of collaborative model best meets its needs.**

The services victims of sexual violence receive from health care providers, advocacy agencies, the legal system, mental health care providers, substance abuse counselors, and others are all crucial. The unique response provided by each of these service providers can help guide a victim's recovery from sexual violence.

Recognizing that each of these systems is unique, a more thorough discussion of each system appears under the individual strategy that applies to it.

**1. Ensure that all victims of sexual violence in Kansas have access to basic services including crisis intervention, health care, advocacy, legal, and mental health.**

The primary reason for creating the State Response Plan was to ensure that victims of sexual violence are able to access comprehensive services to facilitate healing. Sexual violence is devastating and traumatizing, and it contributes to other societal problems such as homelessness, alcoholism, substance abuse, and poverty.<sup>45</sup> **Society has an obligation to respond to the devastation caused by sexual violence and to work to decrease its impact.** In order to provide the necessary level of service, all systems that serve survivors must strengthen their organizational capacity in the following ways.

- a. Assess the availability and status of services currently available to victims of sexual violence across the state.
- b. Establish and maintain culturally competent service delivery standards for all service providers.
- c. Expand the capacity of service providers to coordinate and collaborate with other service providers.
- d. Promote the development of services for victims of sexual violence in areas where basic services are unavailable.
- e. Improve the outreach efforts of all service providers in order to ensure all victims of sexual violence will have the opportunity to access basic services.
- f. Provide support services to family and friends of victims

*Society has an obligation to respond to the devastation caused by sexual violence and to work to decrease its impact.*

## 2. Support sexual violence advocacy programs.

**Sexual violence advocacy programs provide an array of services to victims of sexual violence.** Optimally, these services should include crisis intervention and advocacy services such as twenty-four hour hotlines; assisting the victim in identifying all options available; accompanying the victim to seek and receive medical attention and forensic evidence collection; supporting and aiding in reporting to law enforcement; assisting in locating alternative housing; providing transportation; safety planning; assisting victims in locating resources (e.g., employment, cash assistance, benefits); providing information and emotional support; and supporting the victim through the criminal justice process. Sexual violence advocacy programs should provide counseling and support groups for survivors, their significant others, families, and friends. In Kansas, there are twenty-three sexual violence advocacy programs. Twenty of these programs serve both survivors of sexual violence and domestic violence, and three serve only survivors of sexual violence. In order to ensure that these programs can meet the needs of victims of sexual violence, the following is recommended.

- a. Assess the Core Services<sup>46</sup> of sexual violence advocacy programs throughout the state to determine whether there is an appropriate service level statewide.
- b. Build the capacity and outreach efforts of sexual violence advocacy programs to ensure that victims throughout the state have access to Core Services.
- c. Develop additional resources for sexual violence advocacy programs, so they can access ongoing, comprehensive organizational education and development.
- d. Recruit and retain qualified employees with competitive salary and benefits packages.
- e. Ensure that sexual violence advocacy programs have the capability, knowledge, and skills to respond effectively to victims of human trafficking and other marginalized populations.
- f. Encourage all sexual and domestic violence advocacy programs to conduct universal screening for sexual violence and prior victimization.
- g. Provide opportunities for ongoing, comprehensive education and development of sexual assault advocacy professionals.
- h. Provide support and opportunities for leadership for all sexual violence advocacy professionals.
- i. Encourage recognition to honor sexual violence advocacy professionals.
- j. Provide cross-training for other professionals that interface with the sexual violence advocacy programs.

3. **Expand the ability of health care providers to respond effectively to victims of sexual violence.**

**Health care providers play an important role in a survivor’s recovery following a sexual assault.** Many victims of sexual assault do not seek emergency medical care immediately after sexual violence.<sup>47</sup> Those that do seek emergency care often find that few hospitals have specially trained medical personnel or sexual assault nurse examiners (SANE) available. Many hospitals are reluctant to perform a sexual assault forensic exam. The hospitals that do provide these services may be underfunded and understaffed, so the SANE program may not be consistently available to survivors in these locations. Regardless of whether a survivor accesses emergency health care or a forensic examination, many do access health care services following sexual violence for concerns that may appear to be unrelated to sexual violence. One study found the number of visits to health care providers for survivors of sexual violence increased eighteen percent in the year of the violence, almost sixty percent one year following and over thirty percent two years following the violence.<sup>48</sup> Survivors identified physical and psychological concerns such as headaches, depression, digestive difficulties, sexually transmitted infections, and reproductive health issues. While all of these concerns may be related to sexual violence, health care providers rarely ask patients about sexual violence. In order to increase the capacity of health care providers, the following is recommended.

- a. Develop treatment protocols that outline the appropriate health care response to sexual violence for all sectors of the health care system.
- b. Encourage universal screening for sexual violence in all sectors of the health care system and assure that victims receive an appropriate response and follow-up service referrals.
- c. Provide support services and education for health care professionals who work with survivors.
- d. Provide support and training for all medical professionals who may conduct a sexual assault forensic exam.
- e. Evaluate, develop and enhance SANE programs throughout the state, including updating protocols and supporting ongoing education.
- f. Recruit and retain SANEs with competitive salary and benefits packages.
- g. Provide support and opportunities for leadership development for all health care professionals that care for victims of sexual violence.
- h. Encourage recognition to honor health care professionals who work with victims of sexual violence.
- i. Provide cross-training for other professionals who interface with the health care system.
- j. Encourage undergraduate and graduate programs related to the health care field to develop and implement curricula about sexual violence and trauma.

**4 Build the capacity of mental health professionals to respond appropriately to victims of sexual violence.**

Mental health concerns can arise or existing mental health issues can be exacerbated as the result of sexual violence. Survivors may experience flashbacks, Post Traumatic Stress Disorder, depression, eating disorders, and Dissociative Identity Disorder.<sup>49</sup> Survivors are often encouraged by friends and family to seek assistance from a mental health professional. Nonetheless, many mental health providers lack information about the traumatic effects of sexual violence, general dynamics of sexual violence, or the societal factors that support sexual violence. As a result, survivors may not find the assistance that they want and need. **Survivors of sexual violence will benefit from supportive mental health professionals that understand the dynamics of sexual violence.** Therefore, it is essential that mental health professionals be provided adequate education and support so they are of assistance to survivors who reach out to them for care. In order to build the capacity of mental health professionals, the following is recommended.

- a. Provide ongoing education and information to mental health professionals on the dynamics of sexual violence and trauma.
- b. Encourage undergraduate and graduate programs in social work, psychology, counseling, and other allied programs to develop and implement curricula about sexual violence and trauma.
- c. Develop treatment protocols that outline the appropriate mental health care response to sexual violence.
- d. Encourage universal screening for sexual violence.
- e. Provide support services for mental health professionals who work with survivors.
- f. Provide support and opportunities for leadership development for mental health professionals who care for victims of sexual violence.
- g. Encourage recognition to honor mental health professionals who work with victims of sexual violence.
- h. Provide cross-training for other service providers who interface with mental health professionals including trauma effects of sexual violence, suicide detection, crisis intervention, and basic information regarding mental illness.

5. **Support other community-based organizations that serve victims of sexual violence including faith-based organizations.**

All fundamental components in our society must collaborate to bring change. Community-based organizations can and must collaborate to address sexual violence. **Victims seek support in many ways from people with whom they have already established relationships.** This means that many community-based organizations that are not traditionally viewed as sexual violence service providers are already serving survivors. For example, survivors of sexual violence may seek assistance and support from food banks, homeless shelters, culturally specific community organizations, and faith-based organizations. These types of community-based organizations can help to mobilize communities towards positive change. In order to achieve this goal, the following is suggested.

- a. Assess the services provided to victims of sexual violence by community-based organizations throughout the state.
- b. Provide resources to community-based organizations, so they can continue to serve victims of sexual violence.
- c. Employ qualified personnel who are knowledgeable about sexual violence.
- d. Provide ongoing education on the dynamics of sexual violence to those working with victims.
- e. Provide support and opportunities for leadership development for all personnel with a special focus on marginalized or underserved communities.
- f. Encourage community-based organizations to recognize those within their organizations in order to honor their work with survivors of sexual violence.

6. **Develop collaborative relationships among the systems that serve victims of sexual violence in order to strengthen comprehensive coordinated care for victims.**

**In Kansas and nationwide, service providers recognize that they must be willing to work together when appropriate in order to provide a victim of sexual violence with optimum care.** In 1994, Congress reinforced this holistic approach to sexual violence response by passing the Violence Against Women Act (VAWA), which tied eligibility for federal funding to requirements that the criminal justice system collaborate with nonprofit, nongovernmental victim services agencies to develop a coordinated response to violence against women. Despite this legislation, there is still a lack of collaboration between systems and many of these systems are underfunded. Survivors still cannot obtain appropriate and comprehensive services. To accomplish this, the following is suggested.

- a. Strengthen comprehensive coordinated care for and response to victims.
- b. Educate and provide cross-training for professionals who provide services to victims.
- c. Develop operational protocols and education programs for Sexual Assault Response Teams (SART) and other coordinated community response initiatives.
- d. Initiate partnerships with both public and private entities to generate funding, in-kind services, expertise, and resources.
- e. Fund research and develop evaluation criteria to assess the effectiveness of collaborative models.
- f. Coordinate community based organizations with independent responses to sexual violence such as the military, universities and Indian nations.

**7. Promote awareness to all Kansans about the range and availability of sexual violence services.**

**Creating appropriately responsive services for victims of sexual violence is only part of the necessary work; victims also need to know how to access those services.**

Many Kansans still do not know how to locate and access services, even after 30 years of services being available. There has been no formalized research on victims of sexual violence and their awareness of community services, but the Docking Institute of Public Affairs at Fort Hays State University conducted a recent study to determine the awareness of services for victims of domestic violence. The study found that three out of five victims of domestic violence did not know where to find services.<sup>50</sup> While this study focused on victims of domestic violence, it is reasonable to believe that many victims of sexual violence also do not know how to access services. Many victims of domestic violence are also victims of sexual violence, and many organizations that serve victims of domestic violence serve victims of sexual violence as well. Both groups of survivors do have unique needs, but one commonality may be that they both lack information about available community resources. The development of public awareness materials can serve several purposes.

- a. Create and disseminate materials describing services available statewide and in local communities, so victims of sexual violence and their families can better identify and access available services.
- b. Increase public awareness about the different types of services available to victims of sexual violence.
- c. Encourage service providers to work with local community groups on ways to promote information about available services.

*Creating appropriately responsive services for victims of sexual violence is only part of the necessary work; victims also need to know how to access those services.*

## Overcome barriers to services for marginalized communities

Sexual violence affects people from all backgrounds, yet certain populations are noticeably underserved. **There are many in Kansas who face significant barriers to reaching sexual violence support services.**

A “marginalized” community can be any group of people that is not part of the dominant culture. Among the marginalized communities in Kansas are: communities of color; certain faith communities; immigrants and foreign-born residents; Native Americans; members of the lesbian, gay, bisexual, transgendered, queer, and intersex<sup>51</sup> (LGBTQI) communities; the elderly; people with disabilities; people with substance abuse issues; and people with mental illness. Other groups may be marginalized as relates to service delivery in the area of sexual violence. This may include men and boys; people living in rural areas; people who have been victimized while incarcerated; as well as other groups. When victims face socially created impediments, as is the case with marginalized communities, in addition to the stigma of sexual violence, accessing support services can be nearly impossible. Barriers may include social or cultural norms and beliefs, communication and language barriers, lack of culturally appropriate services, geographic or social isolation, inadequate transportation, fear of the “system,” lack of structural access, misinformation by the systems, and more.

**An additional concern for members of these communities is that perpetrators of sexual violence sometimes target people from marginalized communities.** Perpetrators, for example, are known to target people with disabilities. Women with disabilities are four to ten times more likely to experience sexual assault than women who do not have disabilities.<sup>52</sup> Additionally, Native American women are subject to sexual violence at significantly higher rates than non-Native American women.<sup>53</sup> By targeting these specific communities, perpetrators are able to take advantage of the fact that many of their victims will not reach out for help or will not have access to services.

**Lack of access to services is especially dangerous for victims of sexual violence because perpetrators not only use these barriers to target certain victims but also to reinforce their power over them.** For example, many immigrants, whether documented or not, fear that involvement with law enforcement or medical personnel could lead to their deportation. This fear alone could prevent a victim of sexual violence from accessing services or calling for help. Perpetrators then capitalize on this fear by threatening victims with deportation if they call law enforcement or use services. In a similarly vein, people with disabilities may face communication and attitudinal barriers that prevent them from obtaining help. Likewise, victims from the LGBTQI communities may be especially reluctant to seek assistance because disclosure of the sexual violence could lead to added stigma, job loss, or social isolation. Perpetrators can and do capitalize on these fears.

There are ways to create an effective response to the needs of marginalized communities. Service providers must tailor services to specific populations, ensure placement of appropriate services in underserved or marginalized communities, and increase awareness of services by marketing the availability of services to those who need them.

*Lack of access to services is especially dangerous for victims of sexual violence because perpetrators not only use these barriers to target certain victims but also to reinforce their power over them.*

Kansas is a diverse state and a one-size fits all approach will not work. The following strategies will help to achieve the goal of overcoming barriers to services for marginalized populations.

- 1. Increase access to comprehensive, appropriate, community-based services for marginalized communities in Kansas.**
  - a. Identify marginalized communities in Kansas in order to plan for effective outreach and intervention.
  - b. Conduct community outreach to inform and educate marginalized communities about sexual violence and available services.
  - c. Develop standards for cultural competence and infuse them into services, curricula and staff training.
  - d. Include members of underserved communities in planning and service delivery.
  - e. Develop culturally and linguistically specific services for marginalized or underserved communities.
  - f. Encourage recruitment of members of marginalized populations to serve on sexual violence advocacy program boards.
  - g. Establish partnerships between sexual violence advocacy programs and other local service organizations that provide services to marginalized communities.
  - h. Provide victims with interpreters trained on sexual violence issues and have multilingual staff available for non-English speaking victims.
  - i. Translate all awareness and education materials into alternative formats as well as multiple languages and ensure cultural accuracy.
  
- 2. Secure funds to support increased access to comprehensive, appropriate services for victims from all marginalized communities.**
  - a. Increase resources to serve marginalized communities.
  - b. Solicit support from the corporate community to forge public and private partnerships.
  
- 3. Foster positive attitudes and behaviors to eliminate prejudice that creates barriers to services for marginalized victims.**
  - a. Increase public awareness about the prevalence of sexual violence against members of marginalized communities.
  - b. Promote dialogue between government agencies and other organizations charged with providing services to victims and marginalized communities.
  - c. Engage in community outreach to challenge prejudice and stereotypes that create barriers to services for marginalized victims of sexual violence.

## Ensure responsive, effective practices from the legal system

Every victim has a unique reaction to sexual violence and may seek justice in different ways. Some may choose to report to law enforcement and use the criminal justice system. Others may file a report with campus officials and access university procedures. A victim of sexual violence may bring a civil suit against the perpetrator or other responsible third parties in order to seek justice. A victim may file a complaint with a professional licensing board. Yet, for a variety of reasons, many victims never access any formalized system to hold the perpetrator accountable.<sup>54</sup> Nonetheless, it is still essential that the legal system be effective in meeting the victim's needs and holding the perpetrator accountable.

Local collaboration by the legal system can take various forms. In some communities, a Sexual Assault Response Team (SART) provides a multi-disciplinary response often focusing on the criminal justice system. A SART should, at a minimum, include representatives from forensic health providers, law enforcement, victim advocacy organizations, and prosecutors' offices. Through these and other collaborative models, the criminal justice system should include a systematic focus on the victim's needs in order to ensure victim safety.

Victims are an integral part of the criminal justice system and responding in a nonjudgmental manner can ease many fears of the legal system that a victim of sexual violence may have. All criminal justice professionals, including law enforcement officers, judges, prosecutors, and those working in prisons, parole agencies, and probation departments, must be encouraged to improve their responses to victims. **Treating victims with dignity and respect will alleviate many misgivings they may have about the criminal justice system and may ultimately encourage reporting of sexual violence.**

Currently, many victims that report sexual violence to law enforcement never see their case go to trial. In Kansas, law enforcement made arrests in less than twenty-two percent of all rape cases reported to them in 2007.<sup>55</sup> National data indicates that after law enforcement makes an arrest, there is an eighty percent chance of prosecution.<sup>56</sup> When a case does make it to a jury, prosecutors often struggle to overcome the personal biases that members of the jury hold. The jury pool is composed of the general public, who often believe common rape myths. Prosecutors then have to work to overcome these biases in cases involving sexual violence. This makes convictions in sexual violence cases difficult. According to national data, in the cases that do go to trial, there is only a 58% chance of a conviction,<sup>57</sup> **which means that for the vast majority of perpetrators of sexual violence, there will be no repercussions from the criminal justice system.**

**The criminal justice system is not the only legal system a victim of sexual violence may access; many victims could benefit from pursuing civil legal remedies.** Oftentimes, a survivor of sexual violence has legal needs that the criminal justice system cannot meet. Other legal remedies are available for victims who may have lost employment, housing, physical safety, custody of children, and educational opportunities in the aftermath of the sexual violence. It is essential that victims also be able to access attorneys who can help them seek legal remedies that will address these concerns.

Navigating the legal system can be a confusing and difficult process for anyone. Victims should have access to services from a sexual violence advocacy program that will help them better understand the entire legal system. Advocates are able to provide support and explain the legal system, which may help to alleviate some of the victim's anxiety and enable them to participate more fully.

**Recognizing that victims are an integral part of the legal system and should be treated with dignity and respect will help safeguard lives and strengthen efforts to end sexual violence.** The following strategies are recommended to help achieve this goal.

- 1. Ensure support for victims when they do participate in the criminal justice system.**
  - a. Define the role of SART programs in Kansas.
  - b. Evaluate, develop and enhance SART programs throughout the state, including updating protocols and supporting ongoing education.
  - c. Evaluate, develop and enhance Sexual Assault Nurse Examiner (SANE) programs throughout the state, including updating protocols for medical forensic examinations and supporting ongoing education.
  - d. Assist in the development of protocols and educational materials and programs for coordinated responses to sexual violence on Indian reservations and territories in cooperation with tribal law enforcement, state law enforcement and prosecution professionals.
  - e. Encourage law schools to develop and implement curricula about sexual violence, including DNA and other forms of forensic evidence.
  - f. Encourage rape crisis centers and criminal justice professionals to establish protocols regarding victim advocate involvement and presence at each stage within the criminal justice system.
  - g. Establish a network of well-trained attorneys who offer free or reduced cost services to victims of sexual violence.
  
- 2. Support existing legislation on sexual violence and determine the need for additional legislation.**
  - a. Develop legislation to enhance victim safety, such as legislation that ensures victims' privacy in accessing services or that ensures sixteen and seventeen year-old victims can receive confidential services.
  - b. Work to ensure that all victims of sexual violence are informed of their rights as a crime victim as set forth in the Kansas Crime Victims Bill of Rights, K.S.A. 74-7333.
  - c. Review current statutes, rules, and regulations governing the Kansas Crime Victims Compensation Board as well as its current practices, and make recommendations such as expediting payment; paying for emergency contraception; paying for sexually transmitted infection testing and prophylaxis; and paying for emergency medical care.

*Recognizing that victims are an integral part of the legal system and should be treated with dignity and respect will help safeguard lives and strengthen efforts to end sexual violence.*

- d. Develop legislation to provide that victims have the right to victim advocacy during all stages of the criminal justice process, including during their contact with law enforcement, the prosecutor, and defense attorney or their representatives, as well as during all court proceedings.
- e. Support the law protecting sexual violence victims' right to take time away from work to participate in the criminal justice system and receive services, as set out in K.S.A. 44-1131 to -1133.
- f. Safeguard the confidentiality of communications between the victim and advocate, including confidential documentation, to ensure its protection under all circumstances and at all stages of the criminal justice process.
- g. Support the law, K.S.A. 22-4614, that prohibits requiring victims of sexual violence to undergo a polygraph exam.
- h. Work to ensure that all victims of sexual violence can access a sexual assault forensic exam as provided in K.S.A. 65-448 whether they report to law enforcement or not.
- i. Develop legislation to amend K.S.A. 21-3517 in order to eliminate the spousal exemption for sexual battery.
- j. Support the Prison Rape Elimination Act (PREA), 42 U.S.C. § 15601 et. seq., and the 2009 recommendations developed by the Kansas multidisciplinary PREA policy committee.

**3. Increase law enforcement's capacity to effectively respond to sexual violence and ensure victim safety.**

- a. Support and fund training on sexual violence for all law enforcement officers responding to and investigating sex crimes.
- b. Support and fund coordination of victim support services between law enforcement agencies and victim advocacy groups.
- c. Employ strategies to develop dedicated and highly trained individuals for sex crime investigations.
- d. Explore and incorporate emerging technologies and techniques that could assist in the investigation of sexual violence cases.
- e. Support an increase in crime lab and forensic collection resources so that scientific and forensic evidence analysis will be available more quickly to facilitate thorough investigations and prosecutions.
- f. Educate victim advocates who are participating in the criminal justice process, including emergency response, investigative techniques, and appropriate advocacy when working with law enforcement.

**4. Support the prosecution of sex crimes.**

- a. Support and fund education on sexual violence for all prosecutors that prosecute sex crimes.
- b. Support and fund vertical prosecution, in which one prosecutor handles a case from the beginning to the end of the prosecution, for sexual violence cases when feasible.

- c. Encourage prosecutor’s offices to establish protocols with sexual violence advocacy programs, child advocacy centers and similar victim services organizations.
- d. Explore and incorporate emerging technologies that could assist in the prosecution of sexual violence cases.
- e. Secure additional funding for crime lab and forensic resources, thereby increasing the capacity of crime labs to analyze evidence.
- f. Use culturally competent expert testimony to dispel myths and misperceptions about the crime of sexual violence and sexual violence victims.
- g. Develop a database of expert witnesses competent in areas that include medical issues, rape trauma, forensic evidence, and marginalized communities.
- h. Provide education for victim advocates who are assisting victims with the criminal justice process, including basic rules of evidence, discovery, confidentiality, and appropriate advocacy in the courtroom.

**5. Enhance the ability of probation departments and parole agencies to monitor and improve offender accountability and victim safety.**

- a. Continue, and enhance, educational programs on sexual violence for parole officers.
- b. Develop educational programs on sexual violence for probation officers.
- c. Provide resources to coordinate victim support services with probation and parole and victim advocacy groups.
- d. Develop or strengthen specialized protocols and risk-assessment procedures for both probation departments and parole agencies.
- e. Support and fund specialized probation and parole units that carry smaller caseloads in order to provide appropriate supervision levels to all convicted sex offenders.
- f. Adopt the recommendations of the Kansas Sex Offender Policy Board contained within its reports.

**6. Ensure all victims of sexual violence have access to civil legal remedies.**

- a. Assess current civil legal remedies and determine whether further legislation should be developed, such as specific sexual violence protection orders or specific housing laws.
- b. Ensure that all victims of sexual violence have access to an attorney who is knowledgeable about sexual violence and the civil legal remedies available for victims.
- c. Educate attorneys on the dynamics of sexual violence and the civil legal remedies available to victims of sexual violence.
- d. Establish a network of well-trained attorneys who offer free or reduced cost services to victims of sexual violence.

- e. Recognize those attorneys who are working to serve victims of sexual violence.
- f. Train advocates on existing civil legal remedies and the civil legal system.

**7. Enhance the judiciary’s capacity to respond appropriately to sexual violence and ensure victim safety in both civil and criminal courts.**

- a. Educate all judges on the dynamics of sexual violence and the civil legal remedies available to victims of sexual violence.
- b. Review the Kansas Supreme Court Rules to assess implications for victims of sexual violence, such as whether appropriate safeguards are in place to protect victim privacy.
- c. Develop judicial educational resources and reference materials specific to sexual violence.

## **I**nvolve men and boys in anti-sexual violence efforts

Men and boys have not always been actively involved in the anti-sexual violence movement, but that is changing. Historically, the movement started at a time when there was not an open dialogue about sexual violence. Women were first to come forward and talk openly about sexual violence. **Initially, men had a limited role in anti-sexual violence efforts; however, it is now clear that men need to be involved in this work.**

Sexual violence touches the lives of both women and men. **While most victims of sexual violence are women, a large number of men and boys also are victims of sexual violence.** Over nine percent of all victims of sexual violence in America are male.<sup>58</sup> A much larger percentage of men are secondary victims of sexual violence, coping with the aftermath of sexual violence in the lives of their wives, daughters, girlfriends, mothers, friends and other family members. The sexual assault of a loved one has an enormous impact on the lives of secondary victims. No one is immune from the effects of sexual violence.

As sexual violence is a universal issue, it demands a universal response. Men and women alike can find a sense of fulfillment in anti-sexual violence work. Men especially may find it reassuring to learn that others share their abhorrence of sexual violence. This knowledge may strengthen their ability to educate other men about the realities of sexual violence and can enhance the anti-sexual violence movement.

A multi-faceted approach is required in order to involve men as key allies in anti-sexual violence work. The support of men in both anti-sexual violence educational programming and in intervention efforts within our communities is essential. Some men and boys might better understand the full meaning of healthy relationships and respect for women if more men were actively involved in delivering these messages. **It is crucial for women and men to work together to strengthen the movement to eliminate sexual violence.**

Part of the role that men can play is to challenge traditional masculinity. Social norms can sometimes dictate an unhealthy and destructive construct of masculinity where young men feel the need to prove their manhood through sex, violence and alcohol consumption.<sup>59</sup> Men and boys can replace these negative aspects of masculinity with more positive and healthy qualities. For example, instead of defining masculine strength as power over others, a healthier construct would be to define masculine strength as the ability to empathize, speak out, and share power with others.<sup>60</sup> This redefinition of manhood is vital to ending sexual violence.

Now is an opportune time for men to increase their involvement in the anti-sexual violence movement. Traditional beliefs about gender roles are evolving. It is now more acceptable for men to show sensitivity and to recognize and display feelings. Men increasingly take on roles as caregivers and partners in family responsibilities, as single fathers, and by entering careers traditionally populated by women.

*It is crucial for women and men to work together to strengthen the movement to eliminate sexual violence.*

**As the role of men in society changes, the increased involvement of men in anti-sexual violence work will also change social attitudes toward sexual violence.** Therefore, a partnership between men and women to develop and implement sexual violence work is essential.

**1. Increase male involvement in anti-sexual violence work.**

- a. Enlist active participation of males in sexual violence prevention efforts.
- b. Conduct outreach to traditionally male civic and fraternal organizations to obtain support and encourage men to speak out against sexual violence.
- c. Recognize and encourage effective sexual violence awareness programs created by men and aimed at men.
- d. Partner men and women in the delivery of programming and intervention when appropriate.

**2. Develop and implement sexual violence prevention programs for men and boys.**

- a. Develop gender and age appropriate sexual violence prevention curricula for men and boys.
- b. Use effective peer education and peer discussion group models.
- c. Collaborate with the leadership of campus and youth organizations to deliver sexual violence prevention programs to men and boys.
- d. Include sexual violence prevention education for males in leadership roles in campus and youth organizations.
- e. Incorporate sexual violence prevention messages into sports programs, school clubs and community programs serving men and boys.
- f. Develop sexual violence prevention programs for men and boys who are in juvenile and adult detention, correctional, or transitional facilities, or on probation or parole.

## Promote sexual violence primary prevention education

The initial focus of the anti-sexual violence movement was victim-centered with a great deal of emphasis on crisis intervention. Eventually, the movement expanded into prevention efforts. Early “prevention” programming focused on risk reduction and self-defense, which placed the burden of preventing sexual violence on women. These programs were not truly prevention programs, but were awareness programs. Primary prevention programs seek to prevent sexual violence from ever happening, while awareness programming targets potential victims of sexual violence.<sup>61</sup> Awareness programs are important, but it is time to move beyond them. **The anti-sexual violence movement and the broader society are both poised and ready to invest in an expanded application of primary prevention strategies aimed at men and women — strategies targeted at children, youth, and adults in all educational settings and community programs.**

A number of organizations can effectively deliver primary prevention programming including schools, universities, or other community organizations. Both elementary and secondary schools, whether public or private, can be prime facilitators for sexual violence primary prevention education. One survey found that ninety-seven percent of parents nationwide want sexual violence prevention included as part of sex education curriculum. Only fifty-nine percent of students, however, reported receiving this information at school.<sup>62</sup> There is also a clear need for primary prevention education on campus. College women experience higher rates of sexual violence than other women in the same age group, which is often perpetrated by friends and classmates.<sup>63</sup> Targeting university communities with primary prevention programming will decrease the rates of sexual violence in this population.

Primary prevention programming should also reach a broad audience by extending into a variety of community organizations. Sexual violence advocacy programs should collaborate with other community-based organizations to incorporate primary prevention education for a broad spectrum of audiences, including families, seniors, people with disabilities, people who are incarcerated, immigrants, the homeless, and others.

It is imperative that communities embrace primary prevention work in addition to intervention work. Primary prevention programming can help increase community engagement and change social norms. Attitudes about sexual violence must change before a decrease in sexual violence can be expected. **The ultimate goal of the anti-sexual violence movement is to prevent sexual violence from ever occurring; the greatest tool in achieving this goal is primary prevention education.**

Kansas has already begun efforts to develop and promote sexual violence primary prevention education. In 2007, KCSDV and the Kansas Department of Health and Environment (KDHE) embarked on a joint venture to create a five to eight year strategic plan for primary prevention by forming the Kansas Sexual & Domestic Violence Primary Prevention Steering Committee (Steering Committee). The Steering Committee includes a variety of stakeholders working together on the prevention plan, which was completed in 2009. As the Steering Committee has already dedicated a great deal of time and energy

*The ultimate goal of the anti-sexual violence movement is to prevent sexual violence from ever occurring; the greatest tool in achieving this goal is primary prevention education.*

toward creating a comprehensive prevention plan, its work will not be duplicated here. Instead, the strategic plan created by the Steering Committee should be used as a guide to achieve the goal of promoting sexual violence primary prevention education.

# Stop sexual violence NOW

Sexual violence in Kansas can and must end. Teamwork is required. The successful implementation of these recommendations and strategies will require collaboration among many organizations, agencies and individuals from a variety of disciplines. Sexual violence in Kansas will not stop overnight. But, by working together on common strategies, we can make significant progress toward that goal. Let's move together to end sexual violence in Kansas. Join us! Get involved!

## Endnotes

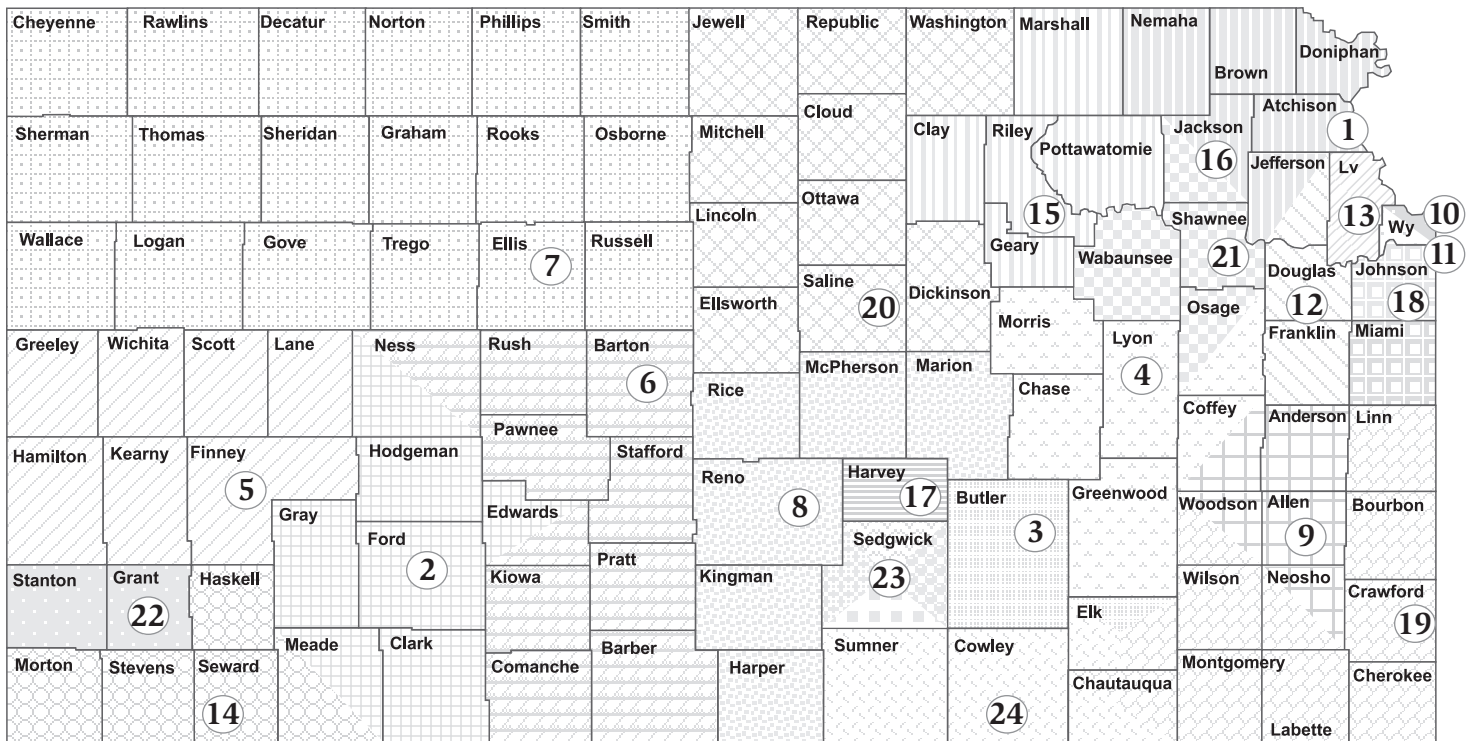
- 1 A map of the sexual violence advocacy programs currently operating in Kansas appears in Appendix 1.
- 2 A map of locations where SANE services are available in Kansas appears in Appendix 2.
- 3 KANSAS SEXUAL AND DOMESTIC VIOLENCE PRIMARY PREVENTION STEERING COMMITTEE, STRATEGIC PLAN (forthcoming 2009).
- 4 KANSAS BUREAU OF INVESTIGATION, A REPORT ON DOMESTIC VIOLENCE & RAPE STATISTICS IN KANSAS AS REPORTED BY LAW ENFORCEMENT AGENCIES 2008 67 (2009), *available at* <http://www.accesskansas.org/kbi/stats/docs/pdf/DV2008.pdf>.
- 5 *Id.*
- 6 *Id.* at 66.
- 7 *Id.*
- 8 *Id.*
- 9 Dean G. Kilpatrick & Ron Acierno, *Mental Health Needs of Crime Victims: Epidemiology & Outcomes*, 16 J. OF TRAUMATIC STRESS 119 (2003); Mary P. Koss et al., *Depression & PTSD in Survivors of Male Violence: Research & Training Initiatives to Facilitate Recovery*, 27 PSYCHOLOGY OF WOMEN QUARTERLY 130 (2003).
- 10 TED R. MILLER ET AL., N'TL INST. OF JUSTICE, U.S. DEP'T OF JUSTICE, VICTIMS' COSTS AND CONSEQUENCES: A NEW LOOK 17 (1996) (considering only the cost of sexual assault and rape of adults).
- 11 BUREAU OF JUSTICE STATISTICS, U.S. DEP'T OF JUSTICE, NCJ 219413, CRIMINAL VICTIMIZATION, 2006 5 (2007), *available at* <http://www.rainn.org/pdf-files-and-other-documents/News-Room/press-releases/2006-ncvs-results/NCVS%202006-1.pdf> (finding a reporting rate to law enforcement of 41.4%); N'TL VICTIM CENTER & CRIME VICTIMS RESEARCH & TREATMENT CENTER, RAPE IN AMERICA: A REPORT TO THE NATION 5 (1992), *available at* [http://www.legalmomentum.org/site/DocServer/rape\\_in\\_america.pdf?docID=518](http://www.legalmomentum.org/site/DocServer/rape_in_america.pdf?docID=518) (finding a reporting rate to law enforcement of 16%).
- 12 BUREAU OF JUSTICE STATISTICS, U.S. DEP'T OF JUSTICE, NCJ 219413, CRIMINAL VICTIMIZATION, 2006 3 (2007), *available at* <http://www.rainn.org/pdf-files-and-other-documents/News-Room/press-releases/2006-ncvs-results/NCVS%202006-1.pdf>.
- 13 KAN. STAT. ANN. § 21-3502 (2007).
- 14 While the Kansas Bureau of Investigation (KBI) reports that in 2001 there were 988 rapes reported to law enforcement in Kansas, the KBI did not receive information from the Lawrence Police Department, the Kansas City Police Department, or the Topeka Police Department that year. KANSAS BUREAU OF INVESTIGATION, A REPORT ON DOMESTIC VIOLENCE & RAPE STATISTICS IN KANSAS AS REPORTED BY LAW ENFORCEMENT AGENCIES 2008 48 (2009), *available at* <http://www.accesskansas.org/kbi/stats/docs/pdf/DV2008.pdf>.

- 15 *Id.* at 65.
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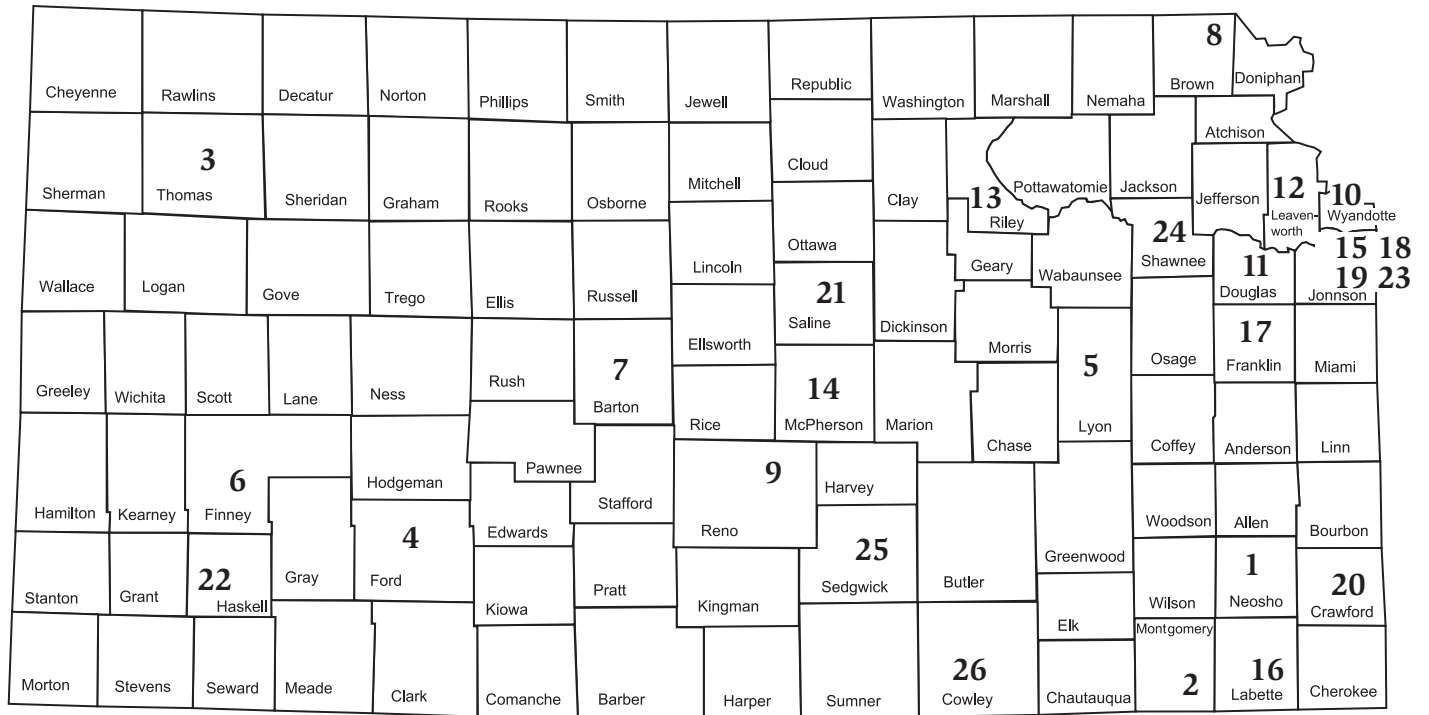
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# Appendix 1 - Sexual Violence Advocacy Programs



CITY	PROGRAM	CRISIS HOTLINE NUMBER
1. Atchison	DoVES	800-367-7075 or 913-367-0363
2. Dodge City	Crisis Center of Dodge City	620-225-6510
3. El Dorado	Family Life Center of Butler County	800-870-6967 or 316-321-7104
4. Emporia	SOS, Inc.	800-825-1295 or 620-342-1870
5. Garden City	Family Crisis Services	620-275-5911
6. Great Bend	Family Crisis Center	866-792-1885 or 620-792-1885
7. Hays	Northwest Kansas Domestic and Sexual Violence Services	800-794-4624 or 785-625-3055
8. Hutchinson	Sexual Assault/Domestic Violence Center	800-701-3630 or 620-663-2522
9. Iola	Hope Unlimited	620-365-7566
10. Kansas City, MO	KCAVP	816-561-0550
11. Kansas City, MO	MOCSA	816-531-0233
12. Lawrence	GaDuGi Safe Center	785-841-2345
13. Leavenworth	Alliance Against Family Violence	800-644-1441 or 913-682-9131
14. Liberal	Liberal Area Rape Crisis and DV Services	620-624-8818
15. Manhattan	The Crisis Center, Inc.	800-727-2785 or 785-539-2785
16. Mayetta	Prairie Band Potawatomi Family Violence Prevention Program	866-966-0173 or 785-966-2932
17. Newton	Harvey County DV/SA Task Force	800-487-0510 or 316-283-0350
18. Overland Park	Safehome	888-432-4300 or 913-262-2868
19. Pittsburg	Crisis Resource Center of Southeast Kansas, Inc.	800-794-9148 or 620-231-8251
20. Salina	Domestic Violence Assoc. of Central Kansas	800-874-1499 or 785-827-5862
21. Topeka	YWCA Battered Women Task Force	888-822-2983 or 785-354-7927
22. Ulysses	DoVES of Grant County	888-229-8812 or 620-356-2608
23. Wichita	Wichita Area Sexual Assault Center	316-263-3002 o español: 316-263-2044
24. Winfield	Safe Homes, Inc.	800-794-7672 or 620-221-4357

## Appendix 2 - SANE Trained Professionals



Services from a trained sexual assault nurse examiner are available at these locations in Kansas. Unfortunately, many of these locations do not have adequate resources to provide services 24 hours a day or 7 days a week. Additionally, not all SANEs are trained to examine children. Check with the local program for availability of services. Contact KCSDV for further information about SANE services in Kansas.

CITY	LOCATION	PHONE
1. Chanute	Neosho Memorial Regional Medical Center Emergency Dept.	620-432-5716
2. Coffeyville	Coffeyville Regional Medical Center Emergency Dept.	620-252-1552
3. Colby	Citizens Medical Center Emergency Dept.	785-462-7511
4. Dodge City	Western Plains Medical Complex Emergency Dept.	620-225-8475
5. Emporia	Newman Regional Health SANE/SART Program	620-343-6800 ext. 1000
6. Garden City	St. Catherine Hospital SANE/SART Program	620-272-2294
7. Great Bend	Central Kansas Medical Center Emergency Dept.	620-792-2511
8. Hiawatha	Hiawatha Community Hospital's SANE/SART Program	785-742-6264
9. Hutchinson	Promise Regional Medical Center- Hutchinson Emergency Dept.	620-513-3538
10. Kansas City, KS	KU Medical Center Emergency Dept.	913-588-6500
11. Lawrence	Lawrence Memorial Hospital Emergency Dept.	785-749-6162
12. Leavenworth	Alliance Against Family Violence	913-680-6100
13. Manhattan	Mercy Regional Health Center SANE/SART Program	785-776-6880
14. McPherson	Mercy Hospital, Inc. SANE/SART Program	620-241-2251 ext. 277
15. Olathe	Olathe Medical Center Emergency Care Center	913-791-4357
16. Oswego	Oswego Community Hospital	620-795-2921
17. Ottawa	Ransom Memorial Hospital SANE/SART Program	785-229-8300
18. Overland Park	Overland Park Regional Medical Center SANE/SART Program	913-541-5338
19. Overland Park	Saint Luke's South	913 317-7000
20. Pittsburg	Mt. Carmel Regional Medical Center SANE/SART Program	620-232-0289
21. Salina	Salina Regional Health Center SANE/SART Program	785-452-7095
22. Satanta	Satanta District Hospital	620-649-2761
23. Shawnee Mission	Shawnee Mission Medical Center	913-676-2000
24. Topeka	Stormont Vail Healthcare SANE/SART Program	785-354-6107
25. Wichita	Via Christi Regional Medical Center SANE/SART Program	316-689-5252
26. Winfield	William Newton Hospital Emergency Department	620-221-2300

