An Analysis of Resources That Address Sexual Violence in Arizona

by

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A Thesis Presented in Partial Fulfillment of the Requirements for the Degree Master of Science

Approved April 2017 by the Graduate Supervisory Committee:

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ARIZONA STATE UNIVERSITY

May 2017

ABSTRACT

Sexual violence, as defined by the Rape, Abuse, Incest National Network (RAINN), is used as an all-encompassing term to include crimes of sexual assault, rape, and sexual abuse (RAINN, 2016). There are numerous negative impacts of sexual violence on a victim. Victims of sexual violence experience negative health impacts, such as physical injuries from the result of sexual violence and unwanted reproductive consequences, such as the risk of sexually transmitted infections or unwanted pregnancy (Shahali et. al, 2016). They also suffer from long-term psychological impacts, such as long-term emotional trauma and post-traumatic stress disorder (PTSD) (Reddington & Kriesel, 2005). The long-term consequences of sexual violence on a victim can result in loss of steady employment and engaging in high-risk behaviors, like drug and alcohol abuse, as well as suicidal thoughts and feelings of hopelessness (Mulla, 2014, NAESV, 2011). The negative impacts of sexual violence indicate the various needs of a victim of sexual violence. One method to address the needs of a victim of sexual violence is to put them in contact with resources that address the physical and psychological impacts of sexual violence by providing services and care to victims. The purpose of this thesis is to determine what kinds of resources are available in Arizona and how these resources are being used to help the needs of victims of sexual violence. Through expert interviews and information collected through public online resources, I created a visual aid, a map, that organizes and categorizes the resources that are available in Arizona. I then provide separate descriptions of a list of resources. This was to determine how this set of resources are being used to provide services and care to victims of sexual violence as a means to better understand a local approach to the issues of sexual violence.

DEDICATION

This thesis is dedicated to my family: the strongest, most loving people I know.

ACKNOWLEDGMENTS

This thesis would not have been accomplished without the help of the following people, all of whom have helped me grow and have shaped who I am academically, professionally, and personally. They have been the greatest of supporters:

- Jane Maienschein: for mentoring me throughout my undergraduate and graduate career, for giving me the opportunity and place to cultivate my research interests, for holding me accountable, and for always supporting my endeavors.
- Karin Ellison: for being my soundboard of research ideas and interests, for always taking the time to check in on my well-being, and for being so supportive throughout my undergraduate and graduate career.
- Dominique Roe-Sepowitz: for letting me be a part of her research team and further advancing my skills, for giving me a chance to explore my interests, and for being a phenomenal inspiration.
- The STIR Office: for giving me the emotional support and encouragement through some of the hardest, roughest moments throughout my time in the office.
- The RHAZ team: for inspiring me with this thesis idea in the first place and for their support and encouragement.

I would also like to thank the people who have participated in my interviews as their time and efforts are greatly appreciated. They have been integral to my thesis.

Savannah Sanders, Candice Hewitt, Lieutenant Jeff Benza, Steve Twist, Mary
 Wallace, and Brett Petersen

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CHAPTER 1

INTRODUCTION

Brief Overview of Sexual Violence

Sexual violence, as defined by the Rape, Abuse, Incest National Network (RAINN), is used as an all-encompassing term to include crimes of sexual assault, rape, and sexual abuse (RAINN, 2016). There is no universal definition to define the term or acts of sexual violence. Definitions of sexual violence include the following:

- "A sexual act committed against someone without that person's freely given consent" (Centers for Disease Control & Prevention, 2017).
- "Someone forces or manipulates someone else into unwanted sexual activity without their consent" (National Sexual Violence Resource Center, 2016).
- "Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or
 advances, or acts to traffic, or otherwise directed, against a person's sexuality
 using coercion, by any person regardless of their relationship to the victim, in any
 setting, including but not limited to home and work" (World Health Organization,
 2017).

Statistics on sexual violence are from a variety of resources such as police reports, hospital records, research studies, and nongovernmental organizations. Due to reasons such as feeling stigmatized, like the attitude of blaming the victim for the act of sexual violence, along with lack of reporting acts of sexual violence, incomplete police reports, and in-conclusive hospital reports, the statistics on sexual violence can be inconsistent, either over-estimated or under-estimated (World Health Organization, 2017). The statistics used in this thesis are pooled from national sexual violence, domestic violence,

and sexual assault research centers, public health organizations, and law enforcement organizations. They are listed in the Reference section.

From the literature, national statistics show that in the United States, one in five women and one in 71 men will be sexually assaulted at some point in their lifetimes (NSVRC, 2016). On average, there are 321,500 victims (age 12 or older) of rape and sexual assault each year in the United States (RAINN, 2016). According to the Arizona Department of Safety yearly crime reports, in 2015, a rape occurs every three hours and twelve minutes in Arizona (Arizona Department of Public Safety, 2015). In 2015, in Arizona, there were a total of 2,509 rapes and 222 attempted rates (Arizona Department of Public Safety, 2015). There were 513 rape offenses that were cleared and 70 attempted rape offenses were cleared (Arizona Department of Public Safety, 2015).

The effects of sexual violence on an individual can have numerous negative impacts. Victims and survivors of sexual violence can experience both immediate and long-term health consequences (Shahali et. al, 2016). Examples are listed but are not limited to the following: physical injuries, sexually transmitted infections, unwanted pregnancies, unsafe abortions, anxiety, shame, posttraumatic stress, fear, helplessness, alienation, depression (Shahali et. al, 2016, Reddington & Kriesel, 2005). Victims and survivors of sexual violence may also engage in high-risk behavior as ways to cope with the trauma of sexual violence, such as alcohol and/or drug abuse, and have multiple sexual partners, increasing the risk of engaging in unsafe sex (Reddington & Kriesel, 2005, NAESV, 2011).

Individuals may suffer from physical injuries and trauma from sexual violence.

This can include but is not limited to genital injuries from the act of sexual violence itself

along with other injuries on the body that result if the individual tried to resist or as a way to scare the victim into complying or to keep the victim from reporting the sexual assault (Reddington & Kriesel, 2005). Victims of sexual assault also may suffer from immediate and long-term psychological trauma. Psychological trauma most often manifests as post-traumatic stress disorder (PTSD) for victims and survivors. Symptoms include but are not limited to anxiety, fear, depression, withdrawal, and alienation (Reddington & Kriesel, 2005). These symptoms can affect the victims long-term as they may be unable to finish their education or hold steady employment (Mulla, 2014) (Reddington & Kriesel, 2005, Shahali et. al, 2016, NAESV, 2011).

The impact of sexual violence is not limited to the victim and extends to the community. Friends, family, relatives—those who know the victim—are also impacted by the act of sexual violence, as well as those who are in contact and provide services to and for the victim. Those who know the victim and those who provide care to the victim may experience secondary traumatic stress, also known as a term called "compassion fatigue." Secondary traumatic stress, or "compassion fatigue," is defined as emotional responses to working or being involved with those suffering from the consequences of traumatic events (Margo M.C. van Mol et al., 2015). Many sexual assault nurse examiners, rape crisis advocates, police officers, counselors report feelings of exhaustion and feelings of burnout, which can lead to a lessened quality of care (Mulla, 2014, Reddington & Kriesel, 2005).

Individuals and the community can also bear the financial and temporal burden of the impacts of sexual violence. The National Alliance to End Sexual Violence estimates that the total cost of rape results at \$127 billion a year with each rape amounting to

approximately \$151,423 (NAESV, DeLisi, 2010). A part of the cost includes estimates for victim costs, such as receiving healthcare services, criminal justice system costs, offender productivity costs, and willingness-to-pay (WTP) costs. WTP costs are "the amount of money that citizens would be willing to pay to prevent crimes" (DeLisi et. al, 2010). Examples of WTP costs included "prevention expenditures for personal security, avoidant behaviors to safeguard against victimization, third-party costs of insurance, and government welfare programs" (DeLisi et. al, 2010). Another part of the cost includes estimated total loss of income of victims approximately amounting to \$241,600 due to severe trauma-related reactions, causing them to leave the workforce (NAESV).

Due to the sensitive nature of sexual violence crimes, specific, specialized training is necessary to provide help and services directly to victims and survivors in order to prevent or attempt to lessen the risk of secondary trauma or re-victimization particularly by medical and legal systems. Examples are as follows: police departments are now implementing training so that they are better equipped to help victims come forward to report crimes of sexual violence (Mulla, 2014). Some hospitals are now equipped with sexual assault nurse examiners (SANE), also known as Forensic Nurse Examiners (FNE) who are specifically trained to provide health services for victims and survivors of sexual violence, and they are training physicians and healthcare professionals to provide victim-centered care and trauma-informed care for victims (Mulla, 2014).

The negative impacts to the victim, to those who know the victim personally, the community that provides help to the victim, and to the larger society show the complexity of sexual violence and how it affects our society.

The negative impacts of sexual violence also demonstrate the needs of the victim, and this can be helpful to reflect the kind of care and services that are necessary for victims. The literature shows that "both an absence of helpful services and secondary victimization have been linked to increased psychological distress, physical health struggles, sexual risk-taking behaviors, self-blame, guilt, depression, and a reluctance to seek further help among rape survivors" (NAESV, 2011), and the consequences not only affect victims of sexual violence but the community as well in terms of emotional, physical, and financial well-being (NAESV, 2011).

From this, we can assume that there is a need for services and that these services should help address the needs of victims. This is further evidenced by showing that "supportive, nonvictim-blaming interventions provided immediately following rape may help to prevent complex, long-term health and mental health struggles among victims and survivors" (NAESV, 2011).

This thesis brings attention to what kinds of resources are available that address sexual violence in Arizona. It also illustrates how these resources are being used and whether or not Arizona follows the same framework of care and services necessary to victims of sexual violence that may be used in other cities, such as Baltimore. To analyze how these resources are being used, I will use a list provided by researcher Sameena Mulla in 2014.

Sameena Mulla's Research Project

Sameena Mulla is an associate professor of anthropology at Marquette University in Milwaukee, Wisconsin. She published a research study called *The Violence of* Care in 2014 that examined her role as an advocate at a rape crisis shelter in Baltimore,

Maryland. As an advocate, she most often met with victims in the emergency department of certain hospitals in Baltimore that were equipped with sexual assault nurse examiners. From this experience, Mulla investigated the relationship between sexual assault nurse examiners and victims of sexual violence. She interviewed sexual assault nurse examiners and victims of sexual violence to understand the services that are provided to help victims of sexual violence.

From her research, she provides a general list of how services are provided to victims of sexual violence. This is listed in no particular order, because the sequence of events can happen simultaneously or in a different order:

- Personal reference: Perhaps it is the victim herself who addresses her sexual assault. She may not tell anyone or she may choose to tell someone close to her. This is not limited to family members or close friends. It is someone who she trusts.
- Law Enforcement: This is the place to report the crime of sexual violence.

 This is most often the centralized source of how the sexual assault gets processed, how evidence gets collected, and how the case is built if the crime gets prosecuted. Many departments are not yet equipped with training to assist sexual assault victims and they do not have a Sex Crimes Unit that are dedicated to the sensitive nature of sexual violence crimes.
- Hospital Sexual Assault Nurse Examiner (SANE): This is the place and group of nurses, most often female, who help collect evidence for the sexual assault. Rape kit examinations are done, and the victim is cared for if she also suffers from physical injuries from the assault. In addition, the

- SANE nurse provides reproductive healthcare medicine to the victim to prevent cases of sexually transmitted infections and pregnancy.
- Advocates: This is someone professionally trained to support victims of sexual violence. Advocates offer "information, emotional support, and help finding resources and filling out paperwork," and they work in many different locations, such as in non-profit organizations or in the criminal justice system (National Center for Victims of Crime, 2012). This is someone who the victim can go to talk to about her sexual assault, and the advocate provides assistance to the victim. This may be the person who she goes to first or someone she can use to walk her through the sexual assault examination or to support her in the courtroom. The advocate assists the victim by ensuring that the victim's voice is heard throughout the entire process and helps address the needs of the victim by informing the victim of all of her choices and empowering the victim to make the best choices for herself.
- Legal Services: These are the services that provide lawyers and legal advocates who take the crime of sexual violence and help bring it to the courtroom, one of the final stages of this cycle of after-effects of sexual violence. They help the victim gather what is needed for the legal process of sexual violence and try to help the victim gain a sense of justice for the crime that was committed against them.
- Counseling: Therapeutic services that help the healing process for those
 who have experienced some form of sexual violence. This can include

group therapy or one-on-one counseling, and most often, these therapeutic services will use victim-centered, trauma-informed care as part of their counseling method. Other times, those who have experienced sexual violence may use high-risk and almost dangerous methods of coping, such as drug and alcohol abuse, so other kinds of counseling, such as those who address methods on how to heal from these dependencies, may be needed.

As a general overview, these are resources that provide services to victims of sexual violence and are not limited to the following: providing advocacy to ensure that victims' needs are being addressed and provided for; providing health services to those who suffer from the negative consequences of sexually violent acts, providing legal services for those who want to and/or choose to report the crime; providing therapeutic services, such as counseling, for the victims to heal and move forward from their experiences.

Resources in Arizona: Methodology

The purpose of this thesis is two-fold: First, to understand the types of resources that are available in Arizona to provide a comprehensive list for victims of sexual violence. Second, to understand whether the current resources are used similarly when compared to Mulla's list of resources. For the purpose of this thesis, resources are defined as organizations and agencies that provide services and help for victims and survivors of sexual assault.

In order to find the resources, I used the Arizona Department of Public Safety's Crime Victim Services website (http://www.azdps.gov/Services/Crime_Victims/) and the Arizona Coalition to End Sexual & Domestic Violence website (http://www.acesdv.org/).

The Arizona Coalition to End Sexual & Domestic Violence website provides a list of local domestic violence and sexual violence organizations in Arizona that provide services to victims of sexual violence. The Arizona Coalition to End Sexual & Domestic Violence website was also referred to me to use from Catherine DuBois, the Program Manager of the National Sexual Assault Hotline at RAINN.

I created a comprehensive visual map of resources that address sexual violence in Arizona. The map is organized by including resources that are categorized using Mulla's list: law enforcement, hospitals – sexual assault nurse examiners, advocacy, counseling, and legal services. The map will be made available on the Embryo Project Reproductive Health Arizona website (http://embryo.asu.edu/info/reproductive-health-arizona), which allows the public to easily access the resource information and can see what is available.

In order to create the map, I used ArcGIS software, an advanced mapping software. ArcGIS is an advanced mapping software that "provides contextual tools for mapping and spatial reasoning" and "allows for the ability to connect where things are happening and how the information is connected" (ESRI). I chose to use ArcGIS software because the program allows mapping of complex data. While the purpose of my thesis only allows for the locations of the resources to be mapped, in the future I would also be able to put in data that compares the location of where sexual violence crimes get reported in relation to the resources available in the area, which could form the basis of deeper analysis. This project has the potential to continue after the completion of my thesis, and the software programming allows for the opportunity to do so.

The data is saved on Excel spreadsheets. I organized the data of each resource by including the name of the organization, the GPS latitude, the GPS longitude, the address,

the city, the county, the zip code, the phone number, the website name, and a code. The code is defined as the label of how the resource is categorized, and the code follows Mulla's list of whether it fits as law enforcement, a hospital (SANE), legal services, advocacy, or counseling organizations. The data on the Excel spreadsheets were then transferred into location points on ArcGIS where the image of the map was created. The data is easily transferrable, which allows for accessibility and efficiency, and this allows for the map to be transferred into another website domain if it needs to be.

While Mulla's list is comprehensive and addresses the different categories of resources that address sexual violence, her list does not include related resources. For my map, I have also included resources that are categorized as Emergency Crisis Shelters and Domestic Violence Shelters, and they are included because they provide services for victims of sexual violence.

I included domestic violence shelters because sexual violence can be linked to domestic violence. The issues are related, with similar problems of negative health consequences, long-term trauma, safety concerns, victim-blaming attitudes and perceptions, and acts of sexual violence are also seen in victims of domestic violence. On a similar note, the organizations that address sexual violence are often the same organizations that address domestic violence in Arizona.

Emergency crisis shelters were included for the following reasons: Victims of domestic and sexual violence are at risk and may need safety and protective services to escape their perpetrators. Many domestic violence organizations include emergency crisis shelters, and because I included domestic violence organizations as resources, emergency crisis shelters became a component to address in my map as well.

For the purpose of this thesis and for the map, I have excluded personal relationships as a resource. The focus of this thesis is to create a visual image of resources that assist victims and survivors of sexual violence not through the perspectives of victims of sexual violence but rather through the perspectives of those who work in these resources themselves.

The thesis also explores a group of resources on the created map in order to provide more in-depth descriptions of how these resources are being used in Arizona. This was done by first picking certain organizations. I selected organizations in Phoenix, because it is the largest city in Arizona with a population of approximately 1.5 million people (United States Census Bureau, 2016). Once I selected the resources, I submitted an IRB protocol because I would be not only contacting people, but I would also be interviewing them for my project. I also began contacting employees of the organizations. I started by using the Crime Victims Services website provided by the Arizona Department of Public Safety. The website provides a list of organizations that provide services for sexual assault victims, and I reached out to a couple of organizations to request additional contacts for my interviews. From there, I was referred to someone in each organization who had information and knowledge as to how the organization provided services to victims of sexual violence to conduct my interview.

I started with Savannah Sanders at the Sojourner Center, and she referred me to the Phoenix Family Advocacy Center. From there, Candice Hewitt at the Phoenix Family Advocacy Center referred me to Jill Rables and Jeff Benza. I was fortunate to be located in the same building with the members of the Arizona Voice for Crime Victims with my work for the Lincoln Center for Applied Ethics. Arizona Voice for Crime Victims was

also selected because it was one of the four organizations categorized as legal services for victims of sexual violence. Because there are many resources involved in providing services to the victims, referrals were necessary and helpful to determine whether or not the resources in Arizona are used in the same way as the resources in Mulla's list.

The interviews were semi-structured and ranged approximately anywhere from thirty minutes to two hours. The interview questions asked what resources were necessary for victims of sexual violence and understanding how these organizations in Arizona are or are not providing these resources for victims of sexual violence.

For my interviews, I have selected the following resources:

- Law Enforcement: Jeff Benza, Detective Phoenix Police Department
- Advocacy: Candice Hewitt, Supervisor of Victim Services Phoenix Family
 Advocacy Center
- Legal Services: Brett Petersen, Mary Sawyer, Social workers Arizona Voice for Crime Victims
- Counseling: Savannah Sanders, Director of Community Outreach & Human
 Trafficking Services Sojourner Center

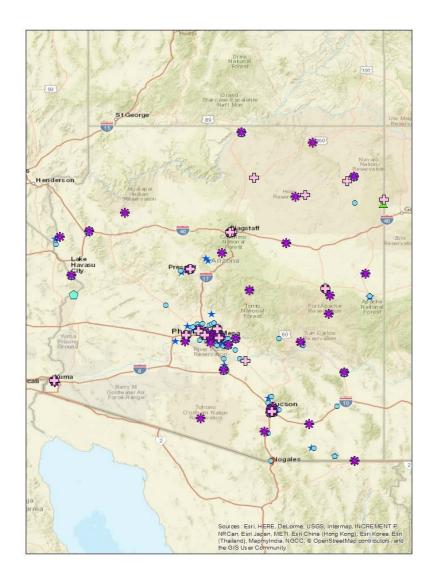
The purpose of the thesis is overall meant to provide a descriptive analysis to help better understand a local approach to addressing sexual violence.

CHAPTER 2

MAP OF RESOURCES ADDRESSING SEXUAL VIOLENCE IN ARIZONA

For this chapter, I have provided an image of the comprehensive, visual map of resources created using ArcGIS software. The purpose of the map was to develop a visual aid of where all the locations were located. Many websites provided a list of organizations in Arizona, but before my work there was no visual component showing the locations of organizations. Such a map can be more accessible and convenient for someone who is looking for such an organization as soon as possible. The purpose of the map was to visually organize the list of resources and to better help someone find the resources she needs.

Map of Resources



Legend

Law_Enforcement

SANE
 Legal_Services
 ⇒ Emergency_Shelters
 Sexual_Violence_Services
 World Street Map
 Hospitals

Figure 1

The image provided above is the comprehensive, visual map of resources created using ArcGIS software. The map includes 287 resources in Arizona, a compilation of law enforcement agencies, hospitals with emergency departments, sexual assault nurse examiners organizations, legal services, advocacy, counseling, emergency crisis shelters, and domestic violence shelters.

Law Enforcement



Figure 2

There are 42 law enforcement departments in the state of Arizona, and the list of law enforcement departments was provided on the Arizona Department of Public Safety website. The website provided a list of local law enforcement departments in Arizona, and I listed each one on the map. Because sexual violence is considered a crime, law enforcement members are trained to document and report the crime as well as help build a case for the victim, so I have included all departments in the map.

C. Hospitals – Sexual Assault Nurse Examiners

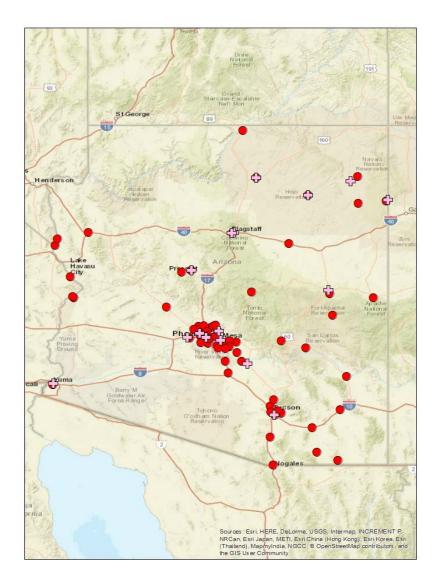


Figure 3

This list of resources is organized in two ways. First, I included all the hospitals with emergency departments. Then, I included specifically only sexual assault nurse examiner organizations in Arizona. Due to the violent nature of sexual violence, many victims are directed to a hospital to receive treatment for their injuries. However, for victims of sexual violence, they are specifically cared for by a sexual assault nurse examiner. Some hospitals in Arizona do not have sexual assault nurse examiners on hand. However, I included the emergency departments because these are resources readily available at all times of the day and victims who arrive onsite can get referred to or transferred to another location where a sexual assault nurse examiner is available and is able to provide services for the victim.

The list of hospitals with emergency department was found on the following website: ER Wait Watcher, provided by ProPublica, an organization that provides investigative journalism in the public interest (ProPublica). The ER Wait Watcher is a project of ProPublica documenting the wait times in emergency rooms. I used the ER Wait Watcher website for Arizona. The list of sexual assault nurse examiners was found on the Arizona Coalition to End Sexual and Domestic Violence.



Figure 4

There are 38 advocacy and counseling organizations in Arizona. I used the list of sexual violence and domestic violence organizations resource list provided by the Arizona Coalition to End Sexual and Domestic Violence to determine what organizations provided advocates and counseling services. The list of resources provided by the Arizona Coalition to End Sexual and Domestic Violence compiled a list of sexual

violence and domestic violence organizations that provide services to victims of sexual and/or domestic violence. On the list, each organization is organized by a symbol that denotes whether the service is organized as either service providers for domestic violence victims or service providers for victims of sexual violence, and whether or not the resource has an emergency crisis shelter. They were symbolized as either one label, a combination of two labels, or all three.

E. Legal Services



Figure 5

There are four resources that provide legal services to victims of sexual violence in Arizona. I first conducted a quick Google search to determine how to find resources that provided legal services to victims of sexual violence. From my Google search, I found that there are many law firms in Arizona that prosecute sexual violence crimes are categorized as victims' rights cases, victims of crimes cases, and/or personal injury cases.

However, in order to provide more accuracy for my map, I instead used resources provided by the Arizona Coalition to End Domestic and Sexual Violence and the Arizona Department of Public Safety. The reason I used these resources is to demonstrate that victims of sexual violence have specific needs that cannot be generalized to all legal services. They suffer from personal injury, from a crime, and need their rights reinforced and fought for. It is more accurate, effective, and consistent to pull together resources provided from services that already provide aid to victims of sexual violence as these resources are trained specifically to help victims of sexual violence.

This is not to show that there are no law firms, district attorneys, or legal services available in Arizona, especially in other populated cities like Tucson. In order to ensure consistent accuracy in my map, I only selected resources that were from the Arizona Department of Public Safety and/or from the Arizona Coalition to End Sexual and Domestic Violence due to their verification of the resources.

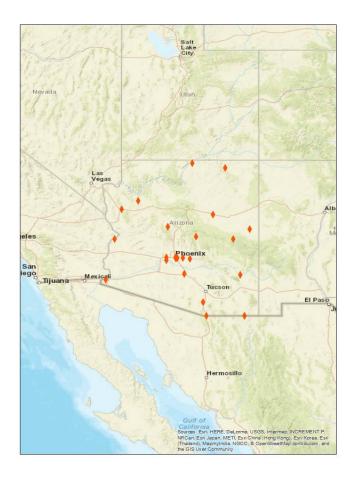


Figure 6

There were 36 emergency crisis shelters available in the state of Arizona. The emergency crisis shelters are part of organizations that provide services to victims of sexual violence and/or domestic violence. The shelters were found on the same list of resources provided by the Arizona Coalition to End Sexual and Domestic Violence that was used to determine advocacy and counseling resources (Figure 4).

Domestic Violence Organizations



Figure 7

There are 92 domestic violence organizations available in the state of Arizona.

The list of organizations was compiled from the same list of resources provided by the Arizona Coalition to End Sexual and Domestic Violence that was used to determine advocacy and counseling resources (Figure 4) as well as emergency crisis shelters (Figure 6).

CHAPTER 3

INTERVIEWS

In this chapter, I provide a description of specific resources representing the categories in Mulla's list of services: advocacy, counseling, law enforcement, hospitals - sexual assault nurse examiners, and legal services. Using the map I created in Chapter 2, I selected four organizations that represented the advocacy, counseling, law enforcement, and legal services, respectively, and interviewed one to two individual employees of each organizations. From these interviews, I compiled a brief description of the remaining organization that represented the hospital (sexual assault nurse examiner) services because each organization referenced this category in each interview.

I selected the following resources:

- Law Enforcement: Jeff Benza, Detective Phoenix Police Department
- Advocacy: Candice Hewitt, Supervisor of Victim Services Phoenix Family
 Advocacy Center
- Legal Services: Brett Petersen, Mary Wallace, Social workers Arizona Voice for Crime Victims
- Counseling: Savannah Sanders, Director of Community Outreach & Human
 Trafficking Services Sojourner Center

In the following section, each of the four interviews will be introduced and described. First, I provide basic information, the name of the organization and interviewees, its address, and website link. I then describe the organization and the background of the interviewee in order to provide contextual support that the person is

well-informed about the organization. I use information provided by the interviewee and by the organization website in order to describe the organization.

Then, I explain how this organization interacts and provides services to victims of sexual violence, and I conclude my description by determining if the organization partners with other organizations. If so, then I provide a description of the organization's working relationships.

The entirety of the interviews is not included in this chapter, but the descriptions of each organization are taken directly from my interviews.

The order of the interviews is as follows: City of Phoenix Family Advocacy

Center (Advocacy), Sojourner Center (Counseling), Phoenix Police Department – Family

Investigations Bureau (Law Enforcement), Arizona Voice for Crime Victims (Legal

Services), HonorHealth (Hospital – Sexual Assault Nurse Examiner).

<u>Advocacy: City of Phoenix – Family Advocacy Center</u>

Organization: City of Phoenix - Family Advocacy Center

Interview: Candice Hewitt, Supervisor of Victim Services

Address: 2120 North Central Avenue, Suite #250, Phoenix, AZ 85004

Website link: http://acfan.net/centers/phoenix-family.htm

The Phoenix Family Advocacy Center is part of the Arizona Child and Family Advocacy Network, otherwise shortened to ACFAN. ACFAN is a network of family advocacy centers in the state. Each family advocacy center provides services of victims of sexual and family violence (ACFAN website). Each center is different in terms of the kinds of services provided; however, they will come together for meetings for support and act as a bigger support system to address the issue of sexual violence. For this section

of the chapter, the Phoenix Family Advocacy Center will be referred to as the Center as well for convenience.

The Center is in a City of Phoenix government building that houses other private enterprises. The first floor of the City of Phoenix building is occupied by Childhelp, a children's advocacy center dedicated to aiding victims of child abuse. The Center is on the second floor, sharing the office floor with the Phoenix Police Department – Family Investigation Bureau.

I interviewed Candice Hewitt who works as the Victim Services Supervisor in the Phoenix Family Advocacy Center. She oversees and supervises nine advocate positions and works with the director of the program. She also acts as a liaison with the police department and the forensic nurse examiners in addition to reaching out to and linking with other organizations and advocacy centers. Hewitt has been with the Phoenix Family Advocacy Center for four years. Prior to her position in the Phoenix Family Advocacy Center, she was in the Department of Child Safety for 26 years working with minors who were sexual abuse victims along with minors who suffered from neglect and/or physical abuse.

The Phoenix Family Advocacy Center provides advocacy for specifically adult victims of sexual violence, domestic violence, and homicide. Hewitt describes the Center as a "one-stop service for lack of a better word. The Center tries to make it safe-feeling, calm-feeling, [so that victims] aren't being shuffled around, [and they provide a] smoother transition to each area of service."

The Center is equipped with examination rooms and works together with other resources, such as the Phoenix Police Department, forensic nurse examiners, and crisis

response teams. One examination room is for victims of sexual violence, where sexual assault examinations are conducted. The other examination room is for victims of domestic violence, where strangulation examinations are conducted. Both types of examinations are performed in either room, and the examination rooms are available and accessible 24/7. The Center works with SANE nurses at Honor Health, and the SANE nurses respond to any of the advocacy centers when called or requested by coming to the examination rooms. Not all advocacy centers in Arizona are equipped with exam rooms.

Despite its name, the Center provides advocacy to adult victims of every city in Arizona, not just the city of Phoenix. The Center will work with victims outside of Phoenix if approached but they do not advertise or do outreach outside of Phoenix. However, the Center is limited in that if victims outside of Phoenix come to the Center for help, the case cannot be sent to the detective where the crime took place. Hewitt mentions that some advocacy centers need appointments and others need an involvement with the police department, such as a police report. However, the City of Phoenix Family Advocacy Center has no restrictions and will see any victim, regardless of appointment or involvement with police. Hewitt estimates that the Center receives approximately forty to sixty cases a week. The advocates carry an average caseload of 40 to 60 cases. As for referrals and walk-ins, the Center receives approximately 40 cases a week.

There are a total of eight to nine victim advocates, depending on whether positions are vacant. Five to six victim advocates work directly in the Center's office, and three of the victim advocates work for the Center but are placed in other locations. There are five to six victim advocates who work in the Center to provide assistance to the victims who are referred to the organization. This can include providing emotional

support to the victim, helping the victim through the examination process, and/or being with the victim as she reports her case to the police. For example, Hewitt gives the example of a victim who may be waiting for the sexual assault nurse examiner during the day. An advocate will be sent over and ask questions in the meantime to determine if the sexual assault was related to domestic violence, or if the assault was from someone the victim was not familiar with. The advocate will also ask questions to determine the victim's safety and address any safety concerns, ensuring that wherever the victim returns to, she will be safe. After the examination, the advocate will help with paperwork, such as reporting the crime to the police, and determining what to do next with the victim.

Sometimes, the victim will want to go home instead and will stay in contact with the advocate. The advocate stays in contact with the victim and touches base every couple of weeks to follow up. The Center does not hold a specific time limit, or deadline, for when the advocate will have to transfer to a new case, meaning that a victim has access to her advocate and her case is open with her advocate for as long as she needs.

There is one victim advocate at the City of Phoenix Municipal court. The victim advocate at the court is placed outside of the Center, and the advocate provides support for victims who request protection. The advocate primarily works with victims of domestic violence for court-related issues. Hewitt provides an example of a victim of domestic violence who also is a victim of sexual assault. This example shows that the victim can obtain an order of protection against her perpetrator. Protective orders are completed at the Center, which is convenient for the victim as she does not have to then go to multiple locations to obtain her protective order. The only time victims and advocates will have to go to court is if the victim has an open case in family court. If the

person has an open case in family court, that is where they would have to get their protective order. If the victim has an open case, the protective order must be completed there. For victims of sexual violence, the Center can help obtain an injunction against harassment, which is also done at the Center. An injunction of harassment can protect the victim from the perpetrator harassing, annoying, or alarming the victim.

There is one victim advocate located at a family service center currently in one of the Community Action Programs (CAP) office in Maryvale, again located outside of the Center. The CAP office in Maryvale is an area with the highest number of police calls for domestic violence. The advocate works to provide services to victims and also works with patrol officers during the week. There is also an advocate in the Vice Unit of the Phoenix Police Department working on human trafficking cases.

The Center works in partnership with other organizations, and Hewitt also works to build and maintain these relationships. Hewitt explains that, "the Center has a good relationship with other providers so that when we have people [who come in here] who need [certain] services, the Center has [partners] who can help with that."

Hewitt provides examples of the relationships with the detectives and crisis response teams, such as the Phoenix Fire Department, which acts as an on-scene response team with the police department. The Center works with the Family Investigation Bureau of the Phoenix Police Department, which happens to be located right next to the Center. These agencies refer to the Family Advocacy Center whenever they have contact with a victim. This can be done by having a patrol officer or a detective directly come to the Center with a victim or by having police officers, SANE nurses, and other services provide booklets of information referring to the Family Advocacy Centers to the victims.

The Center has a 24/7 referral system, allowing people to call the Center at any time of the day. However, the Center operates Monday to Friday, 8 am to 5 pm, regular business house, and calls are only taken during regular business hours. However, patrol officers can access the building and the examination rooms 24/7. Law enforcement is the only entity that can request the forensic nurse examiners. The Crisis Response team can also access the building during after-hours. The Center also has mailboxes out-stationed to different police precincts in Phoenix, where paperwork referrals can be deposited. It is an electronic mailbox.

Another partnership is with the Jewish Family & Children's Services. This is a resource for when the victim needs long-term assistance. Hewitt gives examples of victims who have immigration concerns or custody issues. Once a victim has been given services and provisions to move forward from the immediate health, safety, and legal concerns of her case, such as receiving treatment from her injuries or reporting her case, she can eventually be transferred to the Jewish Family & Children's Services, where a social worker will manage the victim's case. Long-term assistance is determined on a case by case basis. Hewitt estimates approximately only 20% of cases would require long term case management.

Hewitt provides an example of how different organizations in partnership with the Family Advocacy Center all work together to help a victim of sexual violence. She describes a scenario where a sexual assault takes place at the victim's apartment complex. The perpetrator was not arrested and the victim felt like the police could not make the arrest. The perpetrator lives in the apartment right across the courtyard, which makes the victim feel uncomfortable and unsafe. The advocate from the Center can help the victim

obtain an injunction of harassment and also help the victim if she chooses to move out of

the complex. They can also work together with Family Services centers to find a sister

complex for the victim to move to or direct the victim to a women's shelter, depending

on safety concerns.

The City of Phoenix Family Advocacy Center is a known resource primarily

when "the tragedy happens" or "through the grapevine" as Hewitt explains. The Center

has an ongoing effort to promote awareness and outreach to the community. The

advocates at the Center give talks, trainings, and presentations not limited to but

including at medical facilities, churches, and college classes. In these talks and trainings,

they explain the different dynamics involved in sexual assault, discussing the concepts of

stranger rape to sexual assault by an intimate partner or family member. During certain

months of the year, like April (Sexual Assault Awareness Month) or October (Domestic

Violence Awareness Month), the Center is contacted to participate in events to promote

awareness of sexual violence. They will make an appearance to promote their

organization and provide information on what they do to the community members of the

public.

Counseling (Advocacy)

Organization: Sojourner Center

Interview: Savannah Sanders

Address: PO Box 20156, Phoenix, AZ 85036

Website link: https://www.sojournercenter.org/

Sojourner Center is a domestic violence organization that provides services to

women and children who are affected by domestic violence. As described on the website,

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Sojourner Center "provides emergency shelter, transitional housing, domestic violence education, safety planning, lay-legal advocacy, case management, a child development center, 24-hour crisis hotline, referral services, community education and healthcare through an on-site clinic" (Sojourner Center, 2016).

I interviewed Savannah Sanders, director of Community Outreach & Human Trafficking Services. She has been with Sojourner Center since 2016. She works to build relationships with other organizations to grow the network of domestic violence services, and she also oversees the case managers of Sojourner Center. The case managers work directly with the victims, managing their cases and providing advocacy and counseling throughout their interactions with the victims.

While the Sojourner Center works with victims of domestic violence, victims of domestic violence can also be victims of sexual violence, and because of this, Sojourner Center also extends their resources to victims of sexual violence. Sojourner Center has always welcomed victims of sexual violence. However, in the last three years, Sojourner Center has been more intentional about determining if victims of domestic violence are also victims of sexual violence, according to Sanders. In the past, Sojourner Center discovered victims of sexual violence through interactions, such as victims coming forward with their stories of past sexual violence experiences. However, now, victims who apply to be a part of Sojourner Center are now asked direct, specific questions about their experiences with sexual violence. This change was to ensure that the victim's needs are being met, such as determining whether or not the victim has been tested for sexually transmitted infections (STIs), and if not tested, does the victim have a plan to get treatment?

Sojourner Center provides various resources for the victim. For the purpose of my thesis, I will focus on the role of case managers for victims of sexual (and domestic) violence at Sojourner Center. All victims are assigned personal case managers who meet with the victims in either campus, the emergency center or the transitional housing program. The case manager provides advocacy and counseling as well as providing support and other resources to help address the needs of the victim. This can vary. For example, if the victim wants to have a rape kit done, she can utilize the health services provided by Sojourner Center. The case manager can also stay with the victim during the examination process. If the victim chooses to process the crime legally, the case manager can help the victim make the choices and walk the victim through the process. Sanders emphasizes that if the case manager does not know what happens next in a certain process, the case manager will be honest and let the victim know that she does not know the answer herself but that she will be supportive and get the victim the help she needs. The honesty component is important as it establishes rapport and trust between the case manager and the victim. This can also be shown as a kind of counseling for the victim as she may not be emotionally okay with certain processes and may rely on the case manager for support.

Sanders describes the partnerships involved with Sojourner Center and explains the importance of good working relationships. When victims are transitioning to Sojourner Center, Sanders describes how partnerships help address the needs of the victim, that other organizations help meet the needs of the victim. She provides the example of the health clinic stationed at Sojourner Center. The partnership with

HonorHealth allows Sojourner Center to have a SANE nurse on call to conduct sexual assault examinations at Sojourner Center.

Law Enforcement

Organization: Phoenix Police Department – Family Investigation Bureau

Interview: Lieutenant Jeff Benza

Address: 2120 North Central Avenue, Suite #250, Phoenix, AZ, 85004

Website link: https://www.phoenix.gov/police/investigations/faminvest

The Family Investigations Bureau is a part of the City of Phoenix Police

Department. They are located next to the City of Phoenix Family Advocacy Center

housed together in the City of Phoenix building. The Family Investigations Bureau of the

Phoenix Police Department is divided into three units: Sex Crimes Unit, Sex Offender

Notification Squad, and Internet Crimes Against Children. The Family Investigations

Bureau of the Phoenix Police Department is equipped with examination rooms where the

sexual assault nurse examiners are able to conduct their examinations.

The Sex Crimes Unit focuses on adult sex crimes and is separated by cold case files and current cases. Cold cases are cases with no leads and are at least a year old. For cold cases, there are five detectives and one analyst in the unit. For current cases, there are eight detectives in the response team.

The Sex Offender Notification Squad consists of four detectives and two staff members. The staff members prepare and send out flyers of sex offender notifications to residential areas for the city of Phoenix. On average, they send out 10,000 flyers per year. The four detectives manage and keep track of registered sex offenders. They fill out risk assessment forms to determine how likely the sex offender will recommit sex crimes. In

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addition, they keep track by making sure that those who get out of prison register as sex offenders and ensure that they are completing their parole sentences. According to Lieutenant Jeff Benza of the Family Investigations Bureau, the Sex Offender Notification Squad and the Sex Crimes Unit often work together as their cases overlap.

The Internet Crimes Against Children unit works with the Federal Bureau of Investigation because of the criminal nature of child pornography. There are 42 detectives in the unit.

For the purpose of this section of the chapter, I am only going to focus on the Sex Crimes Unit and their work as this unit is most involved with cases of sexual violence.

I interviewed Jeff Benza, lieutenant of the Family Investigations Bureau of the City of Phoenix Police Department. He started with the Family Investigations Bureau in 2004 and then worked in the Domestic Violence unit. As of August 2016, Benza returned to the Family Investigations Bureau and oversees the three units. He also provides administrative and technical support to the different units, such as providing them with enough squad cars or computers to help them with their cases, in addition to building and maintaining partnerships with other organizations and services.

The Sex Crimes Unit processes all cases of sexual violence in the city of Phoenix.

This is done through a variety of means, such as victims walking into the office or through calls dispatched to the office, and through standby that occur when they conduct patrols around the city.

Benza explains an example of a case where a call is dispatched through the office from the victim's home. A police officer will drive to the location of the victim's house, and he will secure the victim in addition to securing the location as it is now considered a

crime scene. The police officer will bring the victim back to the office for two purposes:

1) To ensure that the victim has not accidentally removed evidence, such as taking a shower or throwing out her clothes and 2) If the case gets prosecuted, the defense attorney and the perpetrator cannot accuse the victim of tampering with the evidence, which could affect the case.

Once the victim arrives in the office, a detective will allow the victim to decide whether or not she would like an examination and if she wants to continue the investigation of her case. The office is equipped with examination rooms where the sexual assault nurse examiners are able to conduct their examinations, and the detective will be able to use the examination as evidence to build the case if the victim chooses to continue forward.

If the victim has to wait for the examination, the detective will ask questions to start building rapport with the victim, allowing the victim to tell her story, and through this interaction, it can lead to determining if and how the case will move forward.

The process requires the detective to ask the victim questions related to the perpetrator's actions, such as where the perpetrator licked or kissed her. In this specific scenario, the detective asks because saliva contains DNA evidence to link the crime to the perpetrator. These kinds of questions are used to better collect evidence as the detective can update the SANE nurse with this information. The SANE nurse can then find the specific area to locate the DNA samples during the examination process. The detective can then use the samples and run it through the Combined DNA Index System, shortened to CODIS, a criminal justice DNA database, and the detective can then determine if the sample matches a perpetrator in the database.

Should the victim choose to move forward with the case and decide to prosecute, the detective will complete the police report of the crime with the victim and then send the victim home somewhere safe. Then, the detective will send out a search warrant to procure a suspect in the investigation. If a suspect is found, the detective will conduct interrogations in order to collect evidence. Benza describes this process as methods to prove that the suspect is lying. Throughout the investigation process, the detective will build a case against the suspect using the examination, the police report, and evidence, and this will eventually be transferred to the prosecutors for them to use in court. This is called the discovery packet, which consists of the evidence and the police report. Benza estimates the time process of building the discovery packet to eight to ten hours to do it well. He explains that there is no time limit to building a case, varying anywhere from two weeks or a month. After a year, however, with all leads exhausted and if the case cannot get prosecuted due to various reasons like the case does not have enough evidence, the case will transfer to the Cold Case department of the Sex Crimes Unit.

Benza discusses the importance of working relationships with other organizations, and he distinguishes the partnerships as city partners and outside partnerships. City partnerships are defined as partnerships with other police departments and the FBI as a means to share crime data and statistics. These partnerships are not made public because the shared data and statistics are only made available exclusive to certain organizations.

Other partnerships are important, and he discusses the importance of advocacy.

Benza discusses their partnership with the Family Advocacy Center and how the advocates provide support in ways that help police officers build better rapport with the victims of these crimes.

Legal Services

Organization: Arizona Voice for Crime Victims

Interview: Brett Peterson, MSW and Mary Wallace, MSW

Address: PO Box 12722, Scottsdale, AZ 85267

Website: http://www.voiceforvictims.org/

The Arizona Voice for Crime Victims is a non-profit organization that provides legal support and services to victims of crime in criminal matters. Criminal matters are defined as cases that will be prosecuted in criminal court. The organization is completely funded by grants, so they do not charge for the legal services provided. Arizona Voice for Crime Victims was founded by Steven Twist, an adjunct professor of law at the Sandra Day O'Connor School of Law at Arizona State University. He is the author of the Arizona Victim's Bill of Rights and the Arizona Victim's Rights Implementation Act.

I interviewed both Brett Petersen and Mary Wallace. They work as social workers who work together with the attorneys to provide legal services, support, and advocacy for victims. Mary Wallace has worked with the organization since its creation, and Brett Petersen has worked with the organization for the last five years.

Arizona Voice for Crime Victims works to protect, assert, and to improve the laws of victims' rights. As defined on the website, the mission of Arizona Voice for Crime Victims is "to ensure that crime victims receive their rights to justice, due process and dignified treatment throughout the criminal justice process" (VCV). The organization utilizes social services in addition to legal services for victims. The organization consists of three attorneys and two social workers. The attorneys work to build and prosecute the

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victim's case, and the social workers provide advocacy and support for the victim throughout the legal process.

Peterson provides an example of a woman who was sexually assaulted by a perpetrator who used a hatchet. As a result, she suffered from a traumatic brain injury. His work as a social worker involved managing her case, acting as a liaison to encourage positive interactions between the victim and the attorney, such as explaining legal concepts in an accessible manner or providing the perspective of the attorney to the victim if she did not understand why the attorney needed certain paperwork from her. He helped the victim attend her medical and legal appointments, and he helped her get to the courtroom on time for the hearings.

Wallace and Peterson describe the work they do as managing the victim's case, facilitating interactions between the victim and the attorneys, organize intakes of new calls, providing resources for the victim not just for legal support, and providing support such as attending every court hearing with the victim, and they advocate for the victim throughout the legal process, ensuring that the victim's voice is heard.

The attorneys provide legal services by understanding a victim's case and asserting the rights of the victim during the prosecution of the case in court. They work to protect the rights of their clients. Sawyer gives examples of cases where the perpetrator's lawyer requests counseling or school records of the victim, and the victim's attorney will protect the privacy records. Other examples are cases that do not get charged, especially those that involve sexual violence, and the attorneys work to get the case prosecuted. Sawyer describes the social and legal services combined help "identify [and serve] the needs of the victims [through this process]."

Arizona Voice for Crime Victims works in partnership with other organizations.

Sawyer describes the working relationship between Arizona Voice for Crime Victims and

the county attorney. The county attorney's office now provides 90% of their case

referrals to Arizona Voice for Crime Victim. The significance of this statement

demonstrates that, "prosecutors understand recognize their limitations [when it comes to

victims' rights cases]," and allows Arizona Voice for Crime Victim to fill in these

limitations for these cases.

However, due to the sensitive nature of their work, their partnerships are

selective. They work in tandem with organizations and agencies that directly need legal

services. Because they only work on criminal cases, they cannot take on other cases such

as those that take place in civil court, like custody cases in family court. The victim must

be a victim of crime, and the crime must be charged in a criminal court setting. The

organization provides outreach with agencies that come in contact with victims, and they

are only discovered when a victim is affected by the crime.

<u>Hospital – Sexual Assault Nurse Examiner</u>

Organization: HonorHealth

Address: Mobile

Website link: https://www.honorhealth.com/

The interviews of the four categories listed above helped me put together a brief

description of the resource categorized as hospital - sexual assault nurse examiner. Many

advocacy centers have examination rooms where sexual assault nurse examiners are able

to conduct the examination. All agencies describe the necessary role of the SANE nurse,

and this shows that this organization is an important category in Mulla's list.

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From the interviews, it is inferred that the SANE nurse is critical in gathering evidence to build a case for the victim and in providing care to the health of the victim. The SANE nurse works in partnership with many organizations, and this is demonstrated through the mobile nature of the SANE nurse. Since many organizations have examination rooms on hand, the SANE nurse moves from location to location. This concept demonstrates fitting the needs of the victim, providing more convenience and ease to the victim because the nurse comes to her rather than having the victim come to the nurse.

CHAPTER 4

RESULTS

From creating my map and providing descriptions of specific resources from each of my interviews, I found that the resources in Arizona follow similarly to the list provided by Mulla. The organizations I interviewed discussed their partnerships with other organizations that are involved with providing services and care to victims of sexual violence, and each discussed the importance of multiple organizations working together to help meet the needs of the victims. However, the list of resources in Arizona that I mapped are not categorized exactly the same as Mulla's list.

In this chapter, I discuss three significant findings as my results and explain how this compares with Mulla's list:

- Many resources were organized in multiple categories.
- Mulla defined counseling as therapeutic services, and I found that there
 were two concepts of counseling that can be categorized as resources.
- Mulla's list shows a list of resources that provide short-term immediate care for victims of sexual violence.

Many resources were organized in multiple categories

In my map, resources that provide advocacy, counseling, and legal services were more often than not consolidated in one organization rather than separated into multiple organizations, and those resources could be categorized into each of Mulla's list of resources. An example is shown with the Arizona Children and Family Advocacy Network (ACFAN), a resource unique to Arizona. These centers are located in multiple counties in Arizona, and they are well-equipped to provide support, advocacy, and help to

victims of sexual assault. The Family Investigations Bureau in Phoenix works closely with the Family Advocacy Center in Phoenix, and most often, the detectives will work together with the Phoenix Family Advocacy Center to help victims of sexual assault process their case.

In the case of Arizona Voice for Crime Victims, they provide legal services as well as advocacy, and Sojourner Center is equipped with health services, legal advocacy, counseling, emergency shelters, and even long-term services, such as providing victims with a case manager to help them find and sustain long-term employment.

For convenience and organizational purposes, I listed any organization that provided services to sexual violence victims as advocacy and counseling resources unless the organization specifically stated otherwise, such as police departments identifying as law enforcement agencies. The organizations that provide services to sexual violence victims all include advocacy and counseling as part of their services and care, and this was found to be confirmed through their websites and my interviews.

Advocacy counseling vs. Counseling

According to Mulla, counseling is defined as therapeutic services available for victims, allowing them the freedom to discuss the personal impacts of their sexual assault. I did not include this definition of therapeutic services as resources on my map and instead chose to look at the form of counseling from advocates and advocacy organizations. This is because from my interviews, I found that many advocacy centers and services provide short-term counseling, which is necessary for the nature of their work. Advocates do provide victim-centered services, trauma-informed to their victims. Because of the nature of sexual violence, specific kinds of services are necessary for

victims, especially those that focus on trauma-informed care. In order to include counseling the way Mulla had defined it for her research study, it would require more than searching through websites to determine if certain therapists, counselors, and psychiatrists provide trauma-informed, victim-centered services. It would require interviewing each practice and determining whether or not they are within the network of resources that provide services to victims of sexual violence as well.

Short-term immediate care vs. Long-term care

Mulla's list of services and my list of services show a list of resources that provide short-term immediate care for victims of sexual violence who choose to go through the legal process of reporting the crime of sexual violence at the time that the crime had happened. Counseling is offered as a service in Mulla's list, but when I was interviewing specific organizations, they did not refer to counseling as part of their method of practice when providing care to victims of sexual violence. They each described the importance of counseling as part of the healing process for the victim, but it was referred to a service that should come after the victim has an advocate that helps her goes through a police report, a rape kit examination, and then the prosecution. It was not a resource that came immediately as a service necessary for the victims immediately.

As mentioned before, when a victim is provided an advocate, the victim does receive short-term, immediate counseling to help her through the process. There is no uniform method of counseling, but examples can include comforting the victim through the process, allowing the victim to share her feelings, her experiences, and her opinions on how to move forward. The people I interviewed did mention that counseling was necessary to help the victim heal from the experience, but it served as a form of help that

came after the victim went through the legal process first and was not as conducive to the list of resources that I had categorized for them. This indicates that victims of sexual violence continue to need resources that is not just limited to the legal aspect of sexually violent crimes, and that there is a need for other resources that should be categorized to meet the long-term needs of victims. The long-term needs of a victim may vary as each case of sexual violence is unique. It could look like long-term counseling, a place of safety to start over, or perhaps seeking long-term health services.

This distinction demonstrates that the list Mulla provides and the list I provide in Arizona fits as a short-term service for victims who seek immediate needs for those who choose to go through the legal process of reporting sexual violence.

CHAPTER 5

CONCLUSION

The effects of sexual violence are not limited to the victims themselves but also the community. Over the last couple of decades, there have been changes to how we, as a society, respond to the issues of sexual violence. This is exemplified with the increase of services and care provided to victims of sexual violence as is the changes of how professionals who provide these services and care are being trained to respond. However, with issues such as sexual violence services being grouped together with domestic violence services, it is difficult to determine what can be considered as resources for victims of sexual violence, where the resources are located, and how these resources are being used. This thesis tried to outline what this looked like in Arizona.

I had used Mulla's research study as an outline to organize my own thesis question. By determining how to organize resources into certain categories, what I found was that not only did Arizona have resources that provide the same services as the ones Mulla described in her project but that her list only reflected a certain kind of care for victims of sexual violence.

The list of resources in my thesis seem to provide services and care to the immediate short-term needs of a victim of sexual violence in situations where the victim chooses to get involved in the legal process of reporting the sexual violence as a crime. However, this is not always the case. There are situations where the victim may not choose to report the crime of sexual violence, and this can be seen in examples of where perhaps the perpetrator is a family member or an intimate partner of the victim. There are other instances where perhaps the victim did not know she was a victim of sexual

violence or that too much time had passed in order for her to report her case or perhaps there just is not enough evidence to consider prosecution. In these cases, it is difficult to determine what kinds of resources are appropriate for that scenario as law enforcement and sexual assault nurse examiners can only respond to the immediate effects of the crime, as soon as the crime happens.

Mulla's list of resources provides a thorough method of care and services that victims of sexual violence need if they choose to report the crime. However, this is not the only group of resources that can be utilized when it comes to providing services and cares to victims of sexual violence. I have discovered that the dynamics of sexual violence is complex. There are instances where organizations lack enough funding to provide adequate services to victims. There are cases where the perpetrator is a family member, and the victim asks to go through a reunification process, a method of integrating the perpetrator back into the family, and this requires other resources, such as therapists and counselors, who are equipped with training to deliver these services. Every case of sexual violence is unique, and this demonstrates that the concept of help does not necessarily look the same to every victim.

This thesis helped visually show what resources that address sexual violence look like in Arizona and also showed that there exists a community of resources that work together to address sexual violence in Arizona. It is not the only list of care and services that are available to victims of sexual violence.

Limitations and Future Directions

In this section, I discuss the limitations I encountered while creating my map and conducting my interviews, and I offer suggestions and methods to improve upon these limitations in addition to determining future directions of this project.

For my map, the resources I listed actually can be categorized in multiple categories. However, this was only discovered through my interviews. For example, the Phoenix Police Department can actually be considered a Hospital – SANE resource because they are equipped with examination rooms. Sojourner Center can be categorized as legal services, advocacy, hospital – SANE, counseling, domestic violence organization, and emergency crisis shelter, because they have equipment and services to provide for victims in each category. However, if I had not conducted my interviews with these organizations, they would have only been categorized as Law Enforcement or Advocacy, respectively.

Thus, in order to make my map more accurate, it would require in-depth interviews to determine what services each resource provides, which could broaden their categorizations. In addition, while I was able to accurately fix basic issues such as a broken website link or if the website of the resource changed, I did not check phone numbers of the resources. The phone numbers I have listed may not be completely accurate. I would not have known this had it not been for my interviews where both Sanders (Sojourner Center) and Hewitt (Phoenix Family Advocacy Center). They mentioned that due to lack of funding, many services become consolidated or are no longer available because there is not enough financial support to keep them running.

For future directions, I could improve upon the accuracy of my map. In addition, I would be able to include more categories of resources. Such examples include involving academia, professors and school organizations in Arizona that research sexual violence. Mary Koss would be an example of someone who could be considered a resource. She is a professor in the school of public health at the University of Arizona, and she conducts research on sexual violence on college campuses. Another example would be including specific public health departments as they include research on the health consequences of violence against women. With the features of ArcGIS, I can create a "layer" or another data set that shows police departments that are equipped to take reports of sexual violence, whether that includes a special victims unit or if the department is equipped with examination rooms or a laboratory that helps them identify the perpetrator.

Aside from improving the accuracy of my map and including more resources on the map, I could also add more data sets that can compare resources in rural areas of Arizona in comparison to the urban areas of Arizona. I would also like to add census data of crime data to my map. By plotting the location of where the crimes are reported, the map can provide a better, in-depth analysis comparing where crimes are being reported and where resources that address sexual violence crimes are located.

Through a broader perspective, we can see that there are limitations in making my research a public resource. This is shown in multiple ways. My map of legal services only shows four resource locations. Three resources are located in Phoenix, and one is located in Flagstaff. In contrast, especially when you compare my map of legal services to my map of law enforcement, it is evident that there are more legal resources available.

It brings up the question of what resources should count and what determines the accuracy and the veracity of the resource.

There are also not as many resources in the Native American reservations. This population is not only most often vulnerable to risks sexual violence, domestic violence, and even human trafficking (Wahab & Olson, 2004), but the United States government recognizes the indigenous tribes allowing them sovereignty (Hart & Lowther, 2008). The sovereignty allows the Native American population to rule separately, which can act as barriers when there may be a need for federal interventions to address sexual violence Wahab & Olson, 2004, Hart & Lowther, 2008). In addition, due to the safety concerns of victims of sexual violence, all the available resources cannot always be made publicly available, and organizations may not be able to share that information freely due to confidentiality agreements.

From these examples, it is evident how complex the dynamics of sexual violence and thus, these limitations offer opportunities for future work in this field. As demonstrated through my research, there are suggestions to better improve upon my own research as well as opportunities for more partnerships and bigger networks. Most importantly, we can expand upon our ideas of what a resource can look like. It does not just look like reporting the crime to a police officer and getting a rape examination done. It can look like a victim having a safe place to come to, to talk to someone freely, without judgment, and with support, and to find resources that can help how she chooses to move forward. Having a broader scope of understanding what resources are available can fully and better inform the victim. It gives her the freedom to choose what she needs to in order to help her move forward.

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II

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- 2. Hewitt, Candice. Phone interview. March 3, 2017. Follow up: April 1, 2017.
- 3. Petersen, Brett and Mary Wallace. Arizona Voice for Crime Victims. March 16, 2017. Follow up: March 27, 2017.
- 4. Sanders, Savannah. Sojourner Center. March 10, 2017. Follow up: March 11, 2017.

APPENDIX A GLOSSARY/LEXICON

This section will define frequently used terminology and vocabulary in this thesis.

The definitions are used exactly as shown in legal text or from the Rape, Abuse, & Incest

National Network (RAINN) website. RAINN is the largest anti-sexual violence

organization in the United States.

Sexual violence: All-encompassing, general definition that includes crimes of sexual assault, rape, and sexual abuse (RAINN, 2016)

Sexual assault: Sexual contact or behavior that occurs without explicit consent of the victim (RAINN, 2016)

Rape (Arizona): As defined in the Arizona Revised Statutes (AR13-1406) (Arizona Revised Statutes, 2017), rape is defined using the term sexual assault

- A. A person commits sexual assault by intentionally or knowingly engaging in sexual intercourse or oral sexual contact with any person without consent of such person.
- B. Sexual assault is a class 2 felony, and the person convicted shall be sentenced pursuant to this section and the person is not eligible for suspension of sentence, probation, pardon or release from confinement on any basis except as specifically authorized by section 31-233, subsection A or B until the sentence imposed by the court has been served or commuted. If the victim is under fifteen years of age, sexual assault is punishable pursuant to section 13-705. The presumptive term may be aggravated or mitigated within the range under this section pursuant to section 13-701, subsections C, D and E. If the sexual assault involved the intentional or knowing administration of flunitrazepam, gamma hydroxy butyrate or ketamine hydrochloride without the victim's knowledge, the presumptive, minimum and maximum sentence for the offense shall be increased by three years. The additional sentence imposed pursuant to this subsection is in addition to any enhanced sentence that may be applicable. The term for a first offense is as follows:

MinimumPresumptiveMaximum5.25 years7 years14 years

The term for a defendant who has one historical prior felony conviction is as follows:

MinimumPresumptiveMaximum7 years10.5 years21 years

The term for a defendant who has two or more historical prior felony convictions is as follows:

Minimum Presumptive Maximum

- C. The sentence imposed on a person for a sexual assault shall be consecutive to any other sexual assault sentence imposed on the person at any time.
- D. Notwithstanding section 13-703, section 13-704, section 13-705, section 13-706, subsection A and section 13-708, subsection D, if the sexual assault involved the intentional or knowing infliction of serious physical injury, the person may be sentenced to life imprisonment and is not eligible for suspension of sentence, probation, pardon or release from confinement on any basis except as specifically authorized by section 31-233, subsection A or B until at least twenty-five years have been served or the sentence is commuted. If the person was at least eighteen years of age and the victim was twelve years of age or younger, the person shall be sentenced pursuant to section 13-705.

Sexual abuse: As defined in the Arizona Revised Statutes (AR13-1404) (Arizona Revised Statutes, 2017), sexual abuse is defined as the following:

- A. A person commits sexual abuse by intentionally or knowingly engaging in sexual contact with any person who is fifteen or more years of age without consent of that person or with any person who is under fifteen years of age if that sexual contact involves only the female breast.
- B. It is not a defense to a prosecution for a violation of this section that the other person consented if the other person was fifteen, sixteen or seventeen of age and the defendant was in a position of trust.
- C. Sexual abuse is a class 5 felony unless the victim is under fifteen years of age in which case sexual abuse is a class 3 felony punishable pursuant to section 13-705.

Sex Crimes (Arizona): A person commits sexual assault by intentionally or knowingly engaging in sexual intercourse or oral sexual contact with any person without consent of such person (RAINN, 2016)

Consent (Legal): There is no universal definition of consent. Instead, each state sets its own definition, either in law or through court cases. In general, there are three main ways that states analyze consent in relation to sexual acts (RAINN, 2016):

- **Affirmative consent**: Did the person express overt actions or words indicating agreement for sexual acts?
- **Freely given consent**: Was the consent offered of the person's own free will, without being induced by fraud, coercion, violence, or threat of violence?
- Capacity to consent: Did the individual have the capacity, or legal ability, to consent?

Consent Laws in Arizona: "Without consent" means any of the following:

1. The victim is coerced by the immediate use or threatened use of force against a person or property;

- 2. the victim is incapable of consent by reason of mental disorder, mental defect, drugs, alcohol, sleep or any other similar impairment of cognition, and such condition is known or should have reasonably been known to the defendant;
- 3. the victim is intentionally deceived as to the nature of the act; or
- 4. the victim is intentionally deceived to erroneously believe that the person is the victim's spouse (Arizona Revised Statute 13-1401) (RAINN, 2016)

Victim of sexual violence: An individual who experienced a specific set of crimes that includes sexual harassment, sexual assault and rape (Office of Victims of Crime, 2017)

Survivor: When an individual refers to herself and her experience of sexual violence as a period of her past; this term can also be used as a term as a victim learns to move forward with her experience of sexual violence (RAINN, 2016)

Notes

This thesis will primarily use the term "victim" to describe those who have experienced some sort of sexual violence. The reasons to use this terminology are the following:

- 1. In a legal framework, those who have experienced some sort of sexual violence, they are referred to as a victim.
- 2. Sexual violence is considered a crime, placing it in a legal context. Thus, using the terminology most often used in a legal framework is most appropriate.

For the purpose of this thesis, the sex of the victim will be addressed using the traditional gender terminology as a female. Much of the literature demonstrates that many cases of sexual violence that are reported as crimes, the victim is identified as female. However, victims of sexual violence are not limited to the female gender. They are all-inclusive and of all sexuality. As stated in the National Sexual Violence Resource Center "What Is Sexual Violence?" fact sheet, "sexual violence affects people of all genders, ages, races, religions, incomes, abilities, professions, ethnicities, and sexual orientation"

(NSVRC, 2016). The use of the female traditional gender terminology is to provide convenience and consistency throughout the thesis.

APPENDIX B

IRB PROTOCOL

Instructions and Notes:

- Depending on the nature of what you are doing, some sections may not be applicable to your research. If so, mark as "NA".
- When you write a protocol, keep an electronic copy. You will need a copy if it is necessary to make changes.

1 Protocol Title

Include the full protocol title: An Analysis of Organizations Addressing Sexual Violence in Arizona

2 Background and Objectives

Provide the scientific or scholarly background for, rationale for, and significance of the research based on the existing literature and how will it add to existing knowledge.

- Describe the purpose of the study.
- Describe any relevant preliminary data or case studies.
- Describe any past studies that are in conjunction to this study.

The scope of the thesis is in two parts: First, to create a public resource, a comprehensive visual map of all resources addressing sexual violence in Arizona so that the public knows what is available and can easily access the resource information. Second, the graduate student, Grace Kim, will develop a narrative that describes the activities of organizations that assist in the legal processing of sexual assaults. Interviews with professionals employed at organizations clustered in a single area of the map will provide the basis for this narrative. For the purpose of the thesis, the organizations are described as the resources for victims and survivors of sexual assault.

The term "sexual violence" is used as an all-encompassing, general definition that includes crimes of sexual assault, rape, and sexual abuse. For the map, the student is going to locate all services that offer resources and help for victims of sexual violence. However, due to the broad scope of this term, for the analysis and interpretation of the map, the student will only investigate a group of organizations that focus on providing support for victims of sexual assault. Sexual assault is defined as "sexual contact or behavior that occurs without explicit consent of the victim" (RAINN).

By analyzing a group of organizations in Arizona, this thesis can investigate what resources are available for sexual assault victims and also to understand how to better improve our approaches to sexual assault crimes as a whole in a local setting.

3 Data Use

Describe how the data will be used. Examples include:

- Dissertation, Thesis, Undergraduate honors project
- Publication/journal article, conferences/presentations
- Results released to agency or organization
- Results released to participants/parents
- Results released to employer or school
- Other (describe)

The primary purpose of data collection is for a Master's thesis, with the possibility of publications.

4 Inclusion and Exclusion Criteria

Describe the criteria that define who will be included or excluded in your final study sample. If you are conducting data analysis only describe what is included in the dataset you propose to use. Indicate specifically whether you will target or exclude each of the following special populations:

- Minors (individuals who are under the age of 18)
- Adults who are unable to consent
- Pregnant women
- Prisoners
- Native Americans
- Undocumented individuals

The researcher will interview providers of sexual assault survivor care services, such as sexual assault nurse examiners, police officers and detectives who investigate these crimes, and social workers, advocates, and other professional staff members in victim advocacy groups, about the organizations they work in. The purpose of the interviews is to determine the perceived effectiveness of services provided to assist those who are victims of sexual assault and violence rather than the personal experiences of sexual assault.

All of the participants will be over 18 years old, and the research project will not be targeting adults who are unable to consent, pregnant women, prisoners, Native Americans, and undocumented individuals. Should people in these later groups meet inclusion criteria (i.e. work as care service employees) they will be invited to participate in the study.

5 Number of Participants

Indicate the total number of participants to be recruited and enrolled: 50

6 Recruitment Methods

- Describe who will be doing the recruitment of participants.
- Describe when, where, and how potential participants will be identified and recruited.
- Describe and attach materials that will be used to recruit participants (attach documents or recruitment script with the application).

The graduate student will recruit participants. The student will start out by using the Crime Victims Services website provided by the Arizona Police Department. The website provides a list of organizations that provide services for sexual assault victims. The student will reach out to the listed organizations and will request additional contacts through her interviews. The listed organizations provide contact information on their websites, so the student's first point of contact will be the person listed on their websites. However, for the interview process, she will request to speak to either the outreach or program coordinator or the director of the organization, as they would have more knowledge in providing information on how their organizations deliver assistance for victims of sexual assault and how they work to improve their services for the future.

7 Procedures Involved

Describe all research procedures being performed, who will facilitate the procedures, and when they will be performed. Describe procedures including:

- The duration of time participants will spend in each research activity.
- The period or span of time for the collection of data, and any long term follow up.
- Surveys or questionnaires that will be administered (Attach all surveys, interview
 questions, scripts, data collection forms, and instructions for participants to the online
 application).
- Interventions and sessions (Attach supplemental materials to the online application).
- Lab procedures and tests and related instructions to participants.
- Video or audio recordings of participants.
- Previously collected data sets that that will be analyzed and identify the data source (Attach data use agreement(s) to the online application).

The interviews will be semi-structured, are expected to last between 30 minutes and 2 hours, and will be recorded (audio). The interview questions will elicit what resources are necessary for victims of sexual assault overall and determine how organizations in Arizona are or are not providing these resources for victims of sexual assault. The interview questions are attached.

8 Compensation or Credit

- Describe the amount and timing of any compensation or credit to participants.
- Identify the source of the funds to compensate participants
- Justify that the amount given to participants is reasonable.
- If participants are receiving course credit for participating in research, alternative assignments need to be put in place to avoid coercion.

There is no compensation or credit provided with this study.

9 Risk to Participants

List the reasonably foreseeable risks, discomforts, or inconveniences related to participation in the research. Consider physical, psychological, social, legal, and economic risks.

The topic and nature of this research is sensitive. However, because the graduate student is interviewing professionals about how the system works, about their work supporting assault victims or survivors generally rather than about their interactions with specific clients or their personal experiences with assault, the research should not cause distress above that already experienced by working in this field. In addition, the participants are allowed to decline at any time.

10 Potential Benefits to Participants

Realistically describe the potential benefits that individual participants may experience from taking part in the research. Indicate if there is no direct benefit. Do **not** include benefits to society or others.

There is no direct benefit from taking part in the research.

11 Privacy and Confidentiality

Describe the steps that will be taken to protect subjects' privacy interests. "Privacy interest" refers to a person's desire to place limits on with whom they interact or to whom they provide personal information. Click here for additional guidance on <u>ASU Data Storage Guidelines</u>.

Describe the following measures to ensure the confidentiality of data:

- Who will have access to the data?
- Where and how data will be stored (e.g. ASU secure server, ASU cloud storage, filing cabinets, etc.)?
- How long the data will be stored?
- Describe the steps that will be taken to secure the data during storage, use, and transmission. (e.g., training, authorization of access, password protection, encryption, physical controls, certificates of confidentiality, and separation of identifiers and data, etc.).
- If applicable, how will audio or video recordings will be managed and secured. Add the duration of time these recordings will be kept.
- If applicable, how will the consent, assent, and/or parental permission forms be secured. These forms should separate from the rest of the study data. Add the duration of time these forms will be kept.
- If applicable, describe how data will be linked or tracked (e.g. master list, contact list, reproducible participant ID, randomized ID, etc.).

If your study has previously collected data sets, describe who will be responsible for data security and monitoring.

The map component of the thesis will be made available to the public. The map does not contain sensitive data and instead provides open, public information that is and can be found on the Web. The participants' contributions in the interview will not be made public. The data of the map will be made available and can be used by organizations or organizations if they choose to house the online map on their own website or websites.

The graduate student will have sole access to all the map data, and the data will be stored on a personal laptop that is password protected. The personal laptop will be backed up by a personal hard drive, and the hard drive will be secured in a locked compartment at the graduate student's home.

The interview information will be made available in the thesis, and the graduate student will be identifying each organization in the thesis. The graduate student will obtain consent from each person interviewed in each organization, and she will make sure that the consent form includes information that each organization will be identified in the thesis. The graduate student will limit identification to include just the name of the organization.

The interviews will be recorded digitally on a personal cell phone in addition to handwritten notes. The recordings will be moved to the personal laptop that is password protected and saved on a personal hard drive that is secured in a locked compartment. The handwritten notes will be kept in the same locked compartment as the hard drive. The recordings and any transcripts of them will destroyed no later than 3 years after Ms. Kim graduates.

Because this is a student-initalitated project which is not closely tied to an ongoing faculty member's the normal approach in the Biology and Society group is for the student to be the custodian of all project data. The School of Life Sciences does not provide master's students with offices or server space, so their work is done independently using personal computers. Also, as the interviews, resulting data, and information to build the map should not greater than minimal risk, we hope the IRB will consider this protection of the data afforded by password protecting the laptop and keepking the backup drive locked adequate.

12 Consent Process

Describe the process and procedures process you will use to obtain consent. Include a description of:

- Who will be responsible for consenting participants?
- Where will the consent process take place?
- How will consent be obtained?
- If participants who do not speak English will be enrolled, describe the process to ensure that the oral and/or written information provided to those participants will be in that language. Indicate the language that will be used by those obtaining consent. Translated consent forms should be submitted after the English is approved.

The graduate student will be responsible for obtaining consent for each participant prior to the interview, and the consent process will take place before each interview. The student will provide the participants with an information letter, verbally review the main points of the letter, answer any questions, and, if the participants agree verbally, the student will proceed with the interview. The information letter is attached.

13 Training

Provide the date(s) the members of the research team have completed the CITI training for human participants. This training must be taken within the last 4 years. Additional information can be found at: <u>Training</u>.

CITI training for Grace Kim completed on August 19, 2014. Karin Ellison completed training 3/11/16.

APPENDIX C CONSENT FORM

I am a graduate student under the direction of Karin Ellison, Ph.D., in the School of Life Sciences at Arizona State University. I am conducting a research study to analyze the perceived effectiveness of organizations that address sexual violence by assisting victims and survivors of sexual assault.

I am inviting your participation, which will involve a semi-structured interview, lasting between 30 minutes and two hours. You must be 18 or older to participate. You have the right not to answer any question and to stop participation at any time.

Your participation in this study is voluntary. If you choose not to participate or to withdraw from the study at any time, there will be no penalty.

Although there is no benefit to you directly, possible benefits of your participation are contributions to useful knowledge about organizations that assist victims and survivors of sexual violence. The interviews will be used in an in-depth analysis of how organizations addressing sexual violence respond to the needs of victims and survivors of sexual violence. The analysis may suggest possible solutions to issues concerning how sexual violence is dealt with as a crime in Arizona and may postulate a more integrated approach for dealing with sexual violence in Arizona. There are no foreseeable risks or discomforts to your participation.

Your responses will be confidential and will be used to develop the analysis. The notes will be kept on a personal laptop that is password protected. The files will be backed up using a personal hard drive that will be secured in a locked compartment. Your responses will be kept until the analysis is completed and not longer than 2020. The results of this study may be used in reports, presentations, or publications. Your name will not be used, however, the organizations we discuss will be identified in the thesis.

I would like to audio record your interview. The interview will not be recorded without your permission. Please let me know if you do <u>not</u> want the interview to be recorded; you also can change your mind after the interview starts, just let me know.

I will also be taking handwritten notes during this interview. However, I will not take notes without your permission. Please let me know if you do <u>not</u> want me to take notes during this interview; you also can change your mind after the interview starts, just let me know.

If you have any questions concerning the research study, please contact the research team at: Karin.Ellison@asu.edu or gdkim@asu.edu. If you have any questions about your rights as a subject/participant in this research, or if you feel you have been placed at risk, you can contact the Chair of the Human Subjects Institutional Review Board, through the ASU Office of Research Integrity and Assurance, at (480) 965-6788. Please sign below if you wish to be a part of the study.

By participating in the interview you are agreeing to be part of the study.

APPENDIX D INTERVIEW QUESTIONS

Interview Instrument: An Analysis of Arizona's Sexual Violence Resources

The interview questions are part of the semi-structured interviews. I will select questions as appropriate for the individual with whom I am speaking, and I will ask follow up questions as appropriate. Before the interview begins, I will ask the participants to not provide names of individuals, to keep it anonymized, when responding questions in regards to victims.

Interview Questions

- 1) What does your job entail?
- 2) How does the [Organization Name] play a role (e.g. what services do they offer?) in helping sexual assault victims?
- 3) How long have you have been working with sexual assault victims?
- 4) Have you had different roles working with sexual assault victims?
- 5) How does the general public perceive your organization?
 - a. For example, do they understand what you do?
 - b. How do they learn about your organization?
- 6) What are the objectives of your program?
- 7) How does your organization measure the effectiveness of your goals?
- 8) Does your organization work in partnership with other organizations of the same sort? If yes, do you share information, such as statistics? Are there organizations you would like to partner with that you think would make responding/serving sexual assault victims a better system?
- 9) Could you provide a step-by-step overview of how the [Organization Name] processes and helps sexual assault victims?
 - a. How have things changed over the years?
 - b. What were some significant changes? Why were they significant?
 - c. Are there any barriers to your work with sexual assault victims?
 - d. How do sexual assault victims find your organization?
- 10) What are some limitations you perceive when it comes to resources and help for sexual assault victims? (This would not be limited just to this organization but also on a broader scale, such as the justice system, etc.)
- 11) Attached is a flow chart I created. This is a way to show the process a victim would go through to report the crime. What are your thoughts on this flow chart? Is it mapped correctly? Are there other organizations or systems that are not included in this flow chart?
- 12) I realize that because I am analyzing a bunch of systems that it might be helpful to discuss the scope of my project with a lot of people involved in the process to better understand what to analyze. Would you be able to help point me in the direction of whom else to contact?

Flow Chart

