Sexual Assault Response Team (SART) Functioning and Effectiveness

Findings from the National SART Project

Author:
Megan R. Greeson, Ph.D., DePaul University

Project Team:
Rebecca Campbell, Ph.D., Michigan State University
Deborah Bybee, Ph.D., Michigan State University
A national research study collected data in 2010-2012 to better understand Sexual Assault Response Teams (SARTs).

Sexual Assault Response Teams (SARTs) are multidisciplinary collaborative bodies that bring together different groups that address sexual assault (e.g., advocates, medical/forensic examiners, police, prosecutors, and others) in order to work together to improve their community’s response to sexual assault victims and cases.

The primary goal of the research study was to obtain high-quality information on SARTs’ operations and effectiveness in the real world, to inform efforts to support SARTs and promote their effectiveness.

This report is designed specifically for non-research audiences. Research jargon is avoided as much as possible, and it’s easy to use the table on the next page to navigate to the parts of the report that are most interesting to you.

Be sure to examine the implications for SARTs section. It reiterates key findings and poses questions to help you use the study to reflect on your SART and improving the response to sexual assault in your community.

Other Related Information from this Project:

In the future, we will also release a second practitioner report on SARTs’ perceptions of factors that served as barriers and facilitators to effectiveness.

The full version of the technical research report to the National Institute of Justice is available online.

Scientific publications of the data in peer-reviewed journals with full methodological details are also available and forthcoming.

Contact:
Dr. Megan Greeson, DePaul University
mgreeson@depaul.edu
773-325-4092
with questions and comments about this report
<table>
<thead>
<tr>
<th>Section One</th>
<th><strong>Background Material on SARTs</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>provides a background on SARTs—how we define the term SART and what prior research has shown about their effectiveness.</td>
</tr>
<tr>
<td>Section Two</td>
<td><strong>Study Methods</strong></td>
</tr>
<tr>
<td></td>
<td>contains a brief synopsis of how the current research project was conducted</td>
</tr>
<tr>
<td>Section Three</td>
<td><strong>Findings: SARTs’ Operations</strong></td>
</tr>
<tr>
<td></td>
<td>gives findings from the project regarding how SARTs operate. The section is divided up into questions so that you can skip to the information is most pertinent to you.</td>
</tr>
<tr>
<td>Section Four</td>
<td><strong>Findings: SARTs’ Effectiveness</strong></td>
</tr>
<tr>
<td></td>
<td>provides findings from the project regarding SARTs’ perceived effectiveness and coordination of the response to sexual assault. The section is divided up into questions so that you can skip to the information is most pertinent to you.</td>
</tr>
<tr>
<td>Section Five</td>
<td><strong>Implications for SART Practice</strong></td>
</tr>
<tr>
<td></td>
<td>provides suggestions for understanding the implications of the findings in your own community</td>
</tr>
<tr>
<td>Appendix</td>
<td>An <strong>Appendix</strong> of resources on SARTs is available. References and attributions can also be found in the Appendix.</td>
</tr>
</tbody>
</table>
Special thanks to the many **SART members** who participated in this study. We are very grateful that you shared your valuable time and experiences with our study.

Thank you to our community partners, the **International Association of Forensic Nurses** and the **National Sexual Violence Resource Center** for helping us to design the project, access SARTs, and disseminate our findings to communities.

We appreciate the funding from the National Institute of Justice, which made this project possible.

Thank you to the research assistants at Michigan State University. We are grateful for your contributions.

This research was supported by a grant from the National Institute of Justice (2010-WG-BX-0010). The opinions or points of view expressed in this document are those of the authors and do not reflect the official position of the U.S. Department of Justice.
**Purpose and Method:** A national research study was conducted to understand the functioning and effectiveness of SARTs in the real world and use this information to promote SARTs’ effectiveness. The study identified multidisciplinary teams that engaged in coordination in the response to sexual assault, met regularly, and served adult victims. Phone interviews were conducted with a random sample of 172 SARTs. The SART leader or a long-time member reported on how their SART operates and their perceptions of their SARTs’ effectiveness.

**Highlighted Results:** SARTs vary in how they are structured and in the communities and populations they serve. Typically, but not always, SARTs rated goals related to improving the quality and accessibility of services for victims and improving the treatment of victims by sexual assault responders as most important, followed by goals related to improving criminal justice system outcomes and goals related to prevention/education.

The majority of SARTs engage in multidisciplinary case review, multidisciplinary cross-training, policy/protocol adoption and review. Only 15% of SARTs engaged in program evaluation (involving systematic data collection and analysis) as a multidisciplinary team.

**Effectiveness:** Participants rated their perceptions of the extent to which their team contributed to a variety of improvements in the response to sexual assault on a scale from 1= not at all to 5 = to a great extent. The study examined improvements in four domains: improvements related to victims’ help-seeking experiences (accessibility and quality of services, how victims are treated by responders), police processing of sexual assault cases (e.g., investigation, referrals), prosecution of sexual assault cases (e.g., conviction rates, quality of medical forensic evidence), and victims’ participation in the criminal justice system (willingness to report, being more able to fully disclose during interviews, etc.).

The data revealed three unique ways of organizing SARTs, based on SARTs’ engagement in multidisciplinary case review (not at all, as needed or regularly), multidisciplinary cross-training (not at all, as needed or regularly), policy and protocol adoption and review (not at all, as needed or regularly), program evaluation, and their use of formal structures and resources (e.g., meeting minutes, mission statements, etc.) to organize their team. On average, SARTs that fell in the two groups that were most likely to engage in multidisciplinary cross-trainings and policy/protocol adoption and review on a regular basis and also used more formal structures to organize their team perceived themselves as more effective than the third group of SARTs. The role of evaluation with respect to SARTs’ effectiveness remains less clear.

In addition, SARTs with broader active membership from more sexual assault stakeholder groups tended to perceive themselves to be more effective at improvements related to the criminal justice system than SARTs with active membership from fewer groups. SARTs’ length of continuous operation, whether they served more than one county, and whether they served a rural county were also related to perceived effectiveness. The study cannot conclusively say that these factors will cause SARTs to be more effective, but it does provide some insights into which ways of operating SARTs may be more promising than others.

**Implications:** This section of the report reiterates key findings and poses questions to help you reflect on your SART and improving the response to sexual assault in your community.
What Does This Report Mean by the Term “SART”?

Sexual Assault Response Teams (SARTs) are multidisciplinary collaborative teams made up of different groups that respond to sexual assault who work together to improve the response to sexual assault in their community.

This usually includes primary sexual assault responders like rape crisis center advocates, medical/forensic examiners, police, and prosecutors, but may also include other groups that work with victims or are a part of the criminal justice process.

Typically SARTs seek to improve victims’ help-seeking experiences and increase offender accountability. Some also work together on sexual assault prevention and community education.

There are two common ways of using the term “SART.” Some people use this to refer to the individual sexual assault responders who respond to an individual sexual assault victim/case. In this use of the term, each case has a SART team.

In this report, we will use the term SART to refer to collaborative groups whose purpose is to step back, reflect on how the response to individual victims or cases is going, and take action to improve the response to sexual assault in their community.¹ These groups are analogous to domestic violence coordinating councils. They seek to ensure that all sexual assault stakeholder groups are responding to victims and cases effectively. While individuals and organizations that are a part of the SART do respond to victims and cases, the purpose of the SART itself is to collaborate, coordinate, and facilitate improvements. In this use of the term, a SART team serves a whole community.

¹ This is consistent with Ledray’s (1999) description of “Sexual Assault Resource Teams.”
What Has Research Already Revealed about SARTs and their Effectiveness?

Compared to other areas of research on sexual assault, there has been very little evaluation and research on SARTs and their effectiveness. Recently, the authors of this report published a comprehensive, detailed review of the existing published research and evaluation on SARTs.²

Here’s a summary of the key take home points:

- In many communities with SARTs, SART members believe the SART has helped them increase coordination and improve relationships among multidisciplinary sexual assault stakeholders. This includes increasing communication and information exchange, improving stakeholders’ awareness of one another’s roles, and improved collective decision making.

- Studies’ findings regarding SARTs’ legal effectiveness are mixed. Thus far, one study suggested that the presence of a SART in one community contributed to improvements in some legal outcomes, but ultimately did not make a difference on conviction rates. The improvements that the SART was associated with included higher victim participation in the criminal justice system, shorter reporting delays, more types of forensic evidence collected, higher arrest rates, and higher charging rates.

- In many communities with SARTs, SART members believe their SART has helped improve victims’ help-seeking experiences. These improvements included more referrals to services and better communication between victims and responders. However, studies have yet to ask the victims themselves about their experiences to see whether from their perspective, the SART has had a positive impact.

SARTs face many challenges to being effective, including organizational barriers (e.g., insufficient specialization and staff for responding to sexual assault); difficulty obtaining broad participation from all key sexual assault responders; conflicting goals (sometimes increasing offender accountability is at odds with respecting victims’ choices); role confusion and conflict among team members; and navigating information sharing and coordination across team members while protecting victim confidentiality.

SARTs vary from community to community on a variety of factors. What a SART looks like in one community may be very different from what a SART looks like in another. They can vary on which sexual assault stakeholder groups are a part of the team, how their team is organized, and how they work together to improve the response to sexual assault.

Because the research in this area is based on such a small number of SARTs, it’s important to be tentative about drawing conclusions from these studies. SARTs vary and if one SART achieves a certain improvement, it does not mean that all SARTs will be able to do so. Likewise, if one SART did not achieve a certain improvement, it does not mean that others will not be able to do so.

There are **two big take home points from prior research** that we wish to highlight: (1) findings on SARTs effectiveness are mixed, such that SARTs are promising but not yet shown to be universally effective; and (2) SARTs vary from community to community.

Could these be related? The fact that SARTs vary from community to community suggest that there are many different ways of operating a SART. Perhaps some of these ways of operating SARTs are more effective than others—maybe some are quite effective, while others are less so.

Therefore, the current project was designed to understand on a national scale how SARTs operate from community to community, and whether some ways of operating SARTs seem to be more effective than others.
The goal of the project was to obtain information on U.S. SARTs’ operations and effectiveness. We started by identifying all of the SARTs that exist in the U.S. through a comprehensive, multi-step process. We were interested in how a group behaved, rather than how they labeled themselves. Therefore, a team did not have to call themselves a SART to be included—but they did have to: (a) engage in multidisciplinary coordination to improve the response to sexual assault and (b) meet as a multidisciplinary team—to be included in the national list of SARTs.

From this larger pool, we randomly selected teams and asked them to participate in the study. To be a part of the study, at the time of recruitment they had to: (a) engage in multidisciplinary coordination to improve the response to sexual assault (b) meet as a multidisciplinary team and (c) address the response to adult sexual assault victims.

Because we randomly selected teams, we can be more confident that the SARTs that were a part of our study are able to give us a representative picture to the broader group of all SARTs.

92% of the SARTs that were randomly selected and eligible to participate completed the interview, which also gives us a high level of confidence in our results.

Ultimately, the research team conducted phone interviews with 172 SARTs.
The interview questions were designed by researchers and community practitioners with extensive experience collaborating with sexual assault responders and SARTs. The interview was also tested out with 12 SARTs and revised before the full-scale study of the 172 teams began.

Most of the time, the SART leader provided information about their SART’s operations and their perceptions of the team’s effectiveness on behalf of their team, but occasionally a long-time member of the SART participated instead.

It’s important to note here that the interviewers asked the SART leaders about their **perceptions of their teams’ effectiveness**. So the study cannot give “hard evidence” of the impact of SARTs on legal outcomes or victims’ experiences. Unfortunately this type of hard evidence is very resource intensive and couldn’t be gathered for 172 SARTs. However, the study does provide a systematic snapshot of how SART are operating and can give us some initial, preliminary insights into which SART models may be more or less effective than others.
This section provides information on how SARTs operate. This includes information about the communities and populations they serve; their history of working together as a team; their leadership; their membership; their goals; and the formal resources, structures, and collaborative processes they used to organize their team.

- **Where are SARTs Located in the U.S.?**
- **How Many Counties Do SARTs Primarily Serve?**
- **How Many SARTs serve Rural vs. Suburban and Urban Communities?**
- **What Age Groups of Sexual Assault Victims do SARTs Serve?**
- **How Common are SARTs that Exclusively Serve Military or Campus Populations?**
- **How Many SARTs have Disbanded and then Re-Formed?**
- **How Long have SARTs been Working Together?**
- **Do SARTs Typically have a Formal Leader or Coordinator?**
- **Which Types of Sexual Assault Responders are More Likely to Act as the SART Leader?**
- **How Many Organizations are Typically Actively Involved in SARTs?**
- **How Many Sexual Assault Stakeholder Groups are Typically Actively Involved in SARTs?**
- **How Often do SARTs have Active Membership from Various Sexual Assault Stakeholder Groups?**
- **How Highly do SARTs Rate the Importance of Various Goals to their Team?**
- **How Many SARTs use Various Formal Resources and Structures to Organize their Teamwork? (e.g., bylaws, mission statements, paid staff, etc.)**
- **Which Collaborative Processes (e.g., case review, policy/protocol adoption) do SARTs Engage in and How Often do They Do So?**
- **What Types of Program Evaluation do SARTs Conduct?**
SARTs from 42 different states participated in the study.
75% of SARTs serve a single county
19% serve more than one county

How Many Counties do SARTs Primarily Serve?
Do SARTs Typically Serve Rural, Suburban, or Urban Communities?

66.3% of SARTs serve a rural community

33.7% of SARTs serve a suburban or urban community
What Age Groups of Sexual Assault Victims do SARTs Serve?

**All SARTs** had to serve adults to be eligible to participate in the study.

- **58.7%** served *Adults, Adolescents, & Young Children*
- **26.7%** served *Adults & Adolescents*
- **14.5%** served *Adults only*

Age Groups of Victims Served by SARTs
How Common are SARTs that *Exclusively* Serve Military or Campus Populations?

SARTs that **only** served a military or campus population were quite rare.

Out of 172 SARTs, **3 served a military base** (1.7%) and **8 served a campus population** (4.7%) exclusively.
How Many SARTs have Disbanded and Then Reformed?

This study does not capture SARTs that disbanded and never reformed.

14.1% of SARTs that participated disbanded and then re-formed at some point in their history.
How Long have SARTs been Working Together?

8.1 years
Average length of time a SART has been operating continuously (without disbanding)

26 years
Age of the oldest SART in the study

Length of Time SARTs have been in Continuous Operation

<table>
<thead>
<tr>
<th>Length of Time</th>
<th>% of SARTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 year</td>
<td>6.0%</td>
</tr>
<tr>
<td>1 to 5 years</td>
<td>30.9%</td>
</tr>
<tr>
<td>6 to 10 years</td>
<td>30.9%</td>
</tr>
<tr>
<td>11 to 15 years</td>
<td>25.4%</td>
</tr>
<tr>
<td>16 to 20 years</td>
<td>5.4%</td>
</tr>
<tr>
<td>More than 20 years</td>
<td>2.4%</td>
</tr>
</tbody>
</table>
Do SARTs Typically have a Formal SART Leader or Coordinator?

Nine out of Ten SARTs (90.1%) had a formal SART leader that coordinated their team.

- **90.1%**: Formal leader or coordinator
- **9.9%**: Informal leader or no leader at all
Which Types of Sexual Assault Responders are Most Likely to Act as the SART Leader?

Of the 150 SARTs that had a formal leader who participated in the study:

**55.3%** of SART leaders were from the **rape crisis center**

**24.0%** of SART leaders were **medical/forensic examiners**

**Organizational Affiliation of SART Leaders**

- **Rape Crisis Center Staff**: 55.3%
- **Medical Forensic Examiner**: 24.0%
- **Prosecutor**: 4.7%
- **Victim Witness Unit Advocate**: 4.0%
- **Police**: 4.0%
- **Neutral Coordinator**: 2.0%
- **Children's Advocacy Center**: 1.3%
- **Crime Lab**: 0.7%
How Many Organizations are Typically Actively Involved in SARTs?

12 organizations
**Average** number of organizations actively involved in the SART

3 organizations
**Fewest** number or organizations actively involved in a SART

34 organizations
**Highest** number of organizations actively involved in a SART

Number of Organizations Actively Involved in SARTs

<table>
<thead>
<tr>
<th>Number of Organizations</th>
<th>% of SARTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 to 6 orgs</td>
<td>19.2%</td>
</tr>
<tr>
<td>7 to 10 orgs</td>
<td>29.7%</td>
</tr>
<tr>
<td>11 to 15 orgs</td>
<td>29.1%</td>
</tr>
<tr>
<td>16 to 20 orgs</td>
<td>13.4%</td>
</tr>
<tr>
<td>21 to 25 orgs</td>
<td>3.5%</td>
</tr>
<tr>
<td>&gt;25 orgs</td>
<td>5.2%</td>
</tr>
</tbody>
</table>
How Many Sexual Assault Stakeholder Groups are Typically Actively Involved in SARTs?

Participants were asked whether 18 different sexual assault stakeholder groups were represented as active members of their team.

8.5 groups

Average number of different sexual assault stakeholder groups actively involved in a SART.

Number of Stakeholder Groups Actively Involved in the SART

<table>
<thead>
<tr>
<th>% of SARTs</th>
<th>2 to 5 groups</th>
<th>6 to 9 groups</th>
<th>10 to 12 groups</th>
<th>13 to 15 groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.2%</td>
<td>53.5%</td>
<td>26.2%</td>
<td>8.1%</td>
<td></td>
</tr>
</tbody>
</table>
How Often Do SARTs have Active Membership from Various Sexual Assault Stakeholder Groups?

% of SARTs with Active Membership from Various Stakeholder Groups (Part 1)

- College or University: 40.1%
- Probation/Parole: 28.7%
- Crime Lab: 19.8%
- Judicial System: 14.0%
- Sex Offender Treatment: 17.0%
- Military: 11.6%
- Faith Community: 10.5%
- Schools (K-12): 8.1%
- Victims/ Survivors: 4.7%
- Other--Related Coalition: 3.5%
- Other--Attorney General: 2.9%
- Other--911 Dispatch: 1.7%
- Other--FBI: 1.7%
### % of SARTs with Active Membership from Various Stakeholder Groups (Part 2)

<table>
<thead>
<tr>
<th>Group</th>
<th>Membership</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s Advocacy Center</td>
<td>50.0%</td>
</tr>
<tr>
<td>Other Social Services</td>
<td>60.8%</td>
</tr>
<tr>
<td>Other Medical Personnel</td>
<td>61.0%</td>
</tr>
<tr>
<td>Victims' Witness Unit Advocate</td>
<td>64.0%</td>
</tr>
<tr>
<td>Domestic Violence Agency</td>
<td>73.3%</td>
</tr>
<tr>
<td>Prosecutor</td>
<td>84.9%</td>
</tr>
<tr>
<td>Sexual Assault Nurse Examiner</td>
<td>90.1%</td>
</tr>
<tr>
<td>Rape Crisis Center</td>
<td>94.8%</td>
</tr>
<tr>
<td>Police</td>
<td>97.7%</td>
</tr>
</tbody>
</table>

**The most common active members** of SARTs were police, rape crisis center staff, Sexual Assault Nurse Examiners (SANEs), and prosecutors.

75% of SARTs had active involvement from **all four** of these key groups (police, rape crisis center, SANEs, prosecutors).
How Highly do SARTs Rate the Importance of Various Goals to their Team?

SARTs rated the importance of various goals to their multidisciplinary team on the following scale:

1 – Not a primary goal
2 – Somewhat important
3 – Very important
4 – A primary goal

SARTs rated the importance of goals related to:

- Improving victims’ help-seeking experiences
- Improving legal outcomes
- Community education
- Changing the response to sexual assault

Overall, average ratings across all SARTs fell between very important or a primary goal on the majority of goals.
Importance of Goals Related to Victims’ Experiences

- Improving the quality and comprehensiveness of mental health services: 2.67
- Reducing barriers to seeking help from mental health providers: 2.82
- Improving the quality/comprehensiveness of medical/forensic services: 3.22
- Improving the quality/comprehensiveness of advocacy services: 3.24
- Reducing barriers to seeking advocacy services: 3.27
- Reducing barriers to seeking help from the medical system: 3.33
- Reducing negative treatment of victims by primary responders: 3.64
- Providing a victim-centered response to sexual assault: 3.68
**Importance of Goals Related to Legal Outcomes**

- **Increasing prosecution rates**: Average Rating Across All SARTs = 2.89
- **Increasing reporting of sexual assaults to the police**: Average Rating = 3.01

**Importance of Goals Related to Community Education**

- **Educating the general public about services for survivors**: Average Rating Across All SARTs = 3.05
### Importance of Goals Related to Changing the Systemic Response to Sexual Assault

<table>
<thead>
<tr>
<th>Goal</th>
<th>Average Ratings Across All SARTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changing local organizations' policies and procedures for responding to sexual assault</td>
<td>3.23</td>
</tr>
<tr>
<td>Increasing stakeholders' understanding of each others' roles and limitations</td>
<td>3.24</td>
</tr>
<tr>
<td>Improving the quality of relationships among stakeholders</td>
<td>3.28</td>
</tr>
<tr>
<td>Holding responders accountable to responding to sexual assault appropriately</td>
<td>3.28</td>
</tr>
<tr>
<td>Increasing communication among stakeholders</td>
<td>3.43</td>
</tr>
<tr>
<td>Improving primary responders' attitudes toward sexual assault victims</td>
<td>3.46</td>
</tr>
<tr>
<td>Improving primary responders' skills in responding to sexual assault</td>
<td>3.51</td>
</tr>
<tr>
<td>Educating primary responders about responding to sexual assault</td>
<td>3.51</td>
</tr>
<tr>
<td>Increasing coordination among stakeholders</td>
<td>3.53</td>
</tr>
</tbody>
</table>
How Many SARTs use Various Formal Resources and Structures to Organize their Teamwork?

We were also interested in understanding which resources and formal structures SARTs use to organize their teamwork.

Some prior research on multidisciplinary groups working to address other substantive issues suggests that a more formalized and organized team may be more effective.

Therefore, SARTs were asked whether they used 14 different resources and formal structures such as formal funding, meeting minutes, and bylaws.

Formal Resources?

35.1% of SARTs had formal sources of funding other than fundraising.

Four in ten SARTs (40.6%) had a paid staff person who was paid to do SART work part or full time.

Most-Used Structures?

The majority of SARTs used meeting attendance or sign-in sheets (95.9%), distributed meeting agendas (91.9%), mission statements (79.4%), and distributed meeting minutes (71.3%).
SARTs' Use of Formal Resources and Structures

<table>
<thead>
<tr>
<th>Resource</th>
<th>% of SARTs that Use This</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newsletters for SART Members</td>
<td>4.7%</td>
</tr>
<tr>
<td>501c3 Non-Profit Status</td>
<td>12.8%</td>
</tr>
<tr>
<td>SART Organizational Chart</td>
<td>16.9%</td>
</tr>
<tr>
<td>Formal Procedures for Conflict Resolution</td>
<td>18.3%</td>
</tr>
<tr>
<td>Formal Procedures for Decision-Making</td>
<td>25.9%</td>
</tr>
<tr>
<td>Mechanism for Ensuring Accountability to the SART</td>
<td>28.2%</td>
</tr>
<tr>
<td>Subcommittees</td>
<td>31.6%</td>
</tr>
<tr>
<td>Formal Sources of Funding</td>
<td>35.1%</td>
</tr>
<tr>
<td>Formal Bylaws</td>
<td>35.1%</td>
</tr>
<tr>
<td>Paid Staff Person (part or full-time)</td>
<td>40.6%</td>
</tr>
<tr>
<td>Recorded and Distributed Meeting Minutes</td>
<td>71.3%</td>
</tr>
<tr>
<td>Written Mission Statements</td>
<td>79.4%</td>
</tr>
<tr>
<td>Written Meeting Agendas</td>
<td>91.9%</td>
</tr>
<tr>
<td>Meeting Attendance and/or Sign-In Sheets</td>
<td>95.9%</td>
</tr>
</tbody>
</table>
Which Collaborative Processes do SARTs Engage in and How Often do They Do So?

SART guidelines tend to recommend that SARTs engage in several collaborative processes:

**Policy/protocol development and adoption**
policies/protocols are developed by the team that specify exactly how each sexual assault responder should be responding to sexual assault cases and victims

**Multidisciplinary case review**
the multidisciplinary team reviews individual sexual assault cases to assess the response to those cases and identify areas for improvement

**Multidisciplinary cross-trainings**
different sexual assault stakeholder groups that belong to the SART train one another about their roles and limitations in responding to sexual assault and to share their expertise with other team members

**Other trainings for sexual assault responders**
SARTs attend trainings or bring in external speakers to improve responders knowledge and skills in effectively responding to sexual assault

**Memoranda of understanding**
MOUs between different sexual assault response organizations may be signed to formalize their agreement to work together on paper

**Formal program evaluation**
Systematic analysis of data as a multidisciplinary team can be used to help the SART understand how their team is working, the impact it has on their community, and potential areas of improvement
How Many SARTs Use Each Process?

The **majority** of SARTs engaged in each collaborative process except formal program evaluation as a multidisciplinary team.
How Frequently do SARTs Engage in Each Collaborative Process?

Most SARTs do not engage in each of the collaborative processes very frequently.

Of the 172 SARTs studied:

40.6% engaged in multidisciplinary case review at least quarterly (or more often)

18.8% engaged in multidisciplinary cross-training at least quarterly (or more often)

27.6% reviewed or adopted policies/protocols at least yearly (or more often)

22.2% Attend trainings conducted by non-SART members or bring in external speakers at least yearly (or more often)

16.6% reviewed or adopted memoranda of understanding at least yearly (or more often)
What Types of Program Evaluation do SARTs Conduct?

The 15% of SARTs that did formal program evaluation as a multidisciplinary team provided examples of their evaluation work.

Needs Assessment:
What services exist for sexual assault victims in our community?

Evaluations of Trainings:
What did responders learn?
Was the training helpful?
What could be improved?

Victim Surveys:
What was it like to seek help from various responders?
What services were received?
How did victims feel about their experiences?
SECTION THREE: SARTs' Operations

Tracking Case Load and Demographics:
How many victims sought help from various sexual assault responders? Police? Medical/forensic examiners? Advocacy? Counseling?
Are some services under-utilized?
What are characteristics of victims who are seeking help? Are some groups of victims or types of assaults under-represented?

Tracking Case Outcomes:
How many cases are reported?
What proportion of cases is prosecuted?
What proportion of cases result in a guilty plea or conviction?

Responder Surveys:
How did you respond to the victim?
How did others respond to the victim?
What went well?
What needs improvement?

Forensic Quality Review
Based on information from the crime laboratory, do rape kits meet various quality standards?
Here you can find answers to the following questions about SARTs’ effectiveness:

- On average, how highly do SARTs rate their own effectiveness?
- Are there different types of SARTs or are SARTs fairly uniform across the U.S.?
- Are some types of SARTs believed to be more effective than others?
- Is SART membership related to perceived effectiveness?
- Are older SARTs or younger SARTs perceived as more effective?
- How does community context relate to perceptions of SARTs’ effectiveness?
- How frequently do advocates, medical/forensic examiners, police, and prosecutors coordinate with each other on individual sexual assault cases in SART communities?

One of the primary goals of this study was to understand factors that promote SARTs’ effectiveness and coordination in responding to sexual assault.

SART leaders reported on their perceptions of their team’s effectiveness related to victims’ help-seeking experiences and the processing of sexual assault cases in the criminal justice system, as well as the frequency of coordination on individual cases.
How Highly do SARTs Rate their Own Team’s Effectiveness?

To assess participants’ perceptions of their team’s effectiveness, we asked SARTs to rate the extent to which their team contributed to various improvements in the response to sexual assault.

We assessed a variety of improvements in the response to sexual assault, including improvements related to advocacy, medical, and mental health services and improvements related to the criminal justice system.

This included improvements in improving the quality and accessibility of services for victims, improvements in how victims were treated by sexual assault responders, and improvements in the investigation and prosecution of sexual assault cases.

We also assessed for more general improvements across all team members, such as sexual assault responders having better knowledge of effectively responding to sexual assault, and improved multidisciplinary relationships.

SART leaders or long-time members rated their team’s contribution to each type of improvement on the following scale:

1 – Not at all
2 – A little bit
3 – Somewhat
4 – Quite a bit
5 – To a great extent
Perceived Effectiveness at Improvements to Victims’ Help-Seeking Experiences

On average, SARTs rated their own effectiveness as **moderately high** at improvements to victims’ help-seeking experiences

<table>
<thead>
<tr>
<th></th>
<th>Average Rating Across SARTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victims having more positive</td>
<td></td>
</tr>
<tr>
<td>experiences with the mental health</td>
<td>3.22</td>
</tr>
<tr>
<td>system</td>
<td></td>
</tr>
<tr>
<td>Victims more likely to seek out</td>
<td>3.38</td>
</tr>
<tr>
<td>needed services post-assault</td>
<td></td>
</tr>
<tr>
<td>Victims having more positive</td>
<td>3.57</td>
</tr>
<tr>
<td>experiences with the legal system</td>
<td></td>
</tr>
<tr>
<td>Victims more likely to receive</td>
<td>3.58</td>
</tr>
<tr>
<td>referrals to mental health services</td>
<td></td>
</tr>
<tr>
<td>Responders being more sensitive</td>
<td>3.65</td>
</tr>
<tr>
<td>toward victims</td>
<td></td>
</tr>
<tr>
<td>Providing more comprehensive,</td>
<td>3.87</td>
</tr>
<tr>
<td>higher quality services to victims</td>
<td></td>
</tr>
<tr>
<td>Victims having more positive</td>
<td>3.89</td>
</tr>
<tr>
<td>experiences with advocacy</td>
<td></td>
</tr>
<tr>
<td>Victims having more positive</td>
<td>3.92</td>
</tr>
<tr>
<td>experiences with the medical system</td>
<td></td>
</tr>
<tr>
<td>Victims more likely to receive</td>
<td>3.99</td>
</tr>
<tr>
<td>referrals to medical services</td>
<td></td>
</tr>
<tr>
<td>Victims more likely to receive</td>
<td>4.20</td>
</tr>
<tr>
<td>referrals to advocacy services</td>
<td></td>
</tr>
</tbody>
</table>
Perceived Effectiveness at Improvements to Victims’ Participation in the Criminal Justice System

On average, SARTs rated their own effectiveness as **moderately high** at improvements to victims’ participation in the criminal justice system.

- Increase in the number of assaults reported to police: 3.14
- Victims more willing to prosecute: 3.30
- Victims more forthcoming with other evidence to help their case: 3.32
- Victims being more engaged with prosecutors during court prep: 3.41
- Victims giving more complete accounts to law enforcement: 3.45
- Victims more likely to participate throughout the entire case: 3.54
- Victims more engaged with the investigation: 3.55
- Victims more at ease with legal personnel: 3.57
- Improvements in support for victims in the CJ system: 3.97
Perceived Effectiveness at Improvements to Police Processing of Sexual Assault Cases

On average, SARTs rated their own effectiveness as **somewhat high** at improvements to police processing of cases.

<table>
<thead>
<tr>
<th>Improvement</th>
<th>Average Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police more likely to refer cases to the prosecutor's office</td>
<td>3.33</td>
</tr>
<tr>
<td>Improvements in police building rapport with victims</td>
<td>3.52</td>
</tr>
<tr>
<td>Rape kits more likely to be submitted to the crime lab</td>
<td>3.57</td>
</tr>
<tr>
<td>Improvements in law enforcements' investigations of cases</td>
<td>3.62</td>
</tr>
<tr>
<td>Improvements in police utilization of medical evidence</td>
<td>3.63</td>
</tr>
<tr>
<td>Improvements in police knowledge of medical/forensic evidence</td>
<td>3.67</td>
</tr>
</tbody>
</table>
Perceived Effectiveness at Improvements Related to Prosecution of Sexual Assault Cases

On average, SARTs rated themselves as moderately effective at improvements related to prosecution of cases.

<table>
<thead>
<tr>
<th>Improvement</th>
<th>Average Rating Across SARTs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase in the number of prosecuted cases that result in conviction</td>
<td>2.99</td>
</tr>
<tr>
<td>Referred cases more likely to be charged</td>
<td>3.13</td>
</tr>
<tr>
<td>Improvements in prosecutors arguing cases</td>
<td>3.16</td>
</tr>
<tr>
<td>Improvements in medical personnel expert witness testimony</td>
<td>3.29</td>
</tr>
<tr>
<td>Improvements in prosecutors preparing victims for testimony</td>
<td>3.40</td>
</tr>
<tr>
<td>Improvements in prosecutors building rapport with victims</td>
<td>3.42</td>
</tr>
<tr>
<td>Prosecutors' knowledge of medical/forensic evidence</td>
<td>3.54</td>
</tr>
<tr>
<td>Prosecutors' utilization of medical/forensic evidence</td>
<td>3.58</td>
</tr>
<tr>
<td>Improvements in the quality of forensic evidence</td>
<td>3.81</td>
</tr>
</tbody>
</table>
We examined SARTs use of formal structures and processes to identify different ways of organizing SARTs. Each participant reported on:

- How many different formal structures and resources their SART used to organize their teamwork (e.g., meeting minutes, mission statements, formal funding; see full list)
- How often the SART engaged in case review (not at all, as needed, or regularly)
- How often the SART engaged in multidisciplinary cross-training (not at all, as needed, or regularly)
- How often the SART engaged in policy/protocol development, adoption, and review (not at all, as needed, or regularly)
- Whether the SART engaged in program evaluation as a team (involving systematic data collection and analysis)

We used statistical analyses of this data to identify different types of SARTs. The data revealed three different types of SARTs, based on how they organized their team

- SARTs were classified into groups, based on which type they resembled the most
- SARTs within each group were not all exactly the same, but tended to be fairly similar to one another in their organization
- SARTs that belonged to different group tended to be more different from one another on how they organized their team

Descriptions of how the SARTs within each of the three groups organized their team follow on the next pages.
Group ONE: Low Adopters

65 SARTs made up this group (38% of the SARTs studied). They shared the following defining characteristics:

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
<th>Percentage/Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Lower Formalization</strong></td>
<td>compared to other groups, this group of SARTs had low use of formal resources and structures to organize their team</td>
<td>On average, this group used <strong>4.98 out of 13</strong> possible formal structures and resources</td>
</tr>
<tr>
<td><strong>Average Use of Case Review</strong></td>
<td>this group was similar to other groups on their use of case review.</td>
<td>30.8% of the group did No case review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>38.5% of the group did case review <strong>As Needed</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>30.8% of the group did case review <strong>Regularly</strong> as part of their teamwork</td>
</tr>
<tr>
<td><strong>Lower Use of Multidisciplinary Cross-Training</strong></td>
<td>compared to the other groups, this group had the lowest use of multidisciplinary cross-trainings</td>
<td>58.5% of the group did No multidisciplinary cross-training</td>
</tr>
<tr>
<td></td>
<td></td>
<td>35.4% of the group did cross-training <strong>As Needed</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>6.2% of the group did cross-training <strong>Regularly</strong> as part of their teamwork</td>
</tr>
<tr>
<td><strong>Lower Use of Protocol Development and Review</strong></td>
<td>compared to the other groups, this group had the lowest use of protocol development and review</td>
<td>39% of the group did No protocol development and review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>57.8% of the group did protocol review <strong>As Needed</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td>3.1% of the group did protocol review <strong>Regularly</strong> as part of their teamwork</td>
</tr>
<tr>
<td><strong>No Program Evaluation</strong></td>
<td>None of the SARTs in this group did formal evaluation as a team.</td>
<td>0 engaged in formal Program Evaluation as a team</td>
</tr>
</tbody>
</table>

Back to Report Table of Contents
Back to Section Four List of Questions
GROUP TWO: High Adopters, No Evaluation

80 SARTs made up this group (47% of the SARTs studied). They shared the following defining characteristics:

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Higher Formalization</strong></td>
<td>Compared to other groups, this group of SARTs had high use of formal resources and structures to organize their team. On average, this group used <strong>6.90 out of 13</strong> possible formal structures and resources.</td>
</tr>
<tr>
<td><strong>22.5% of the group did</strong></td>
<td><strong>No</strong> case review</td>
</tr>
<tr>
<td><strong>27.5% of the group did</strong></td>
<td><strong>Case Review</strong> As Needed</td>
</tr>
<tr>
<td><strong>50.0% of the group did</strong></td>
<td><strong>Case Review</strong> Regularly as part of their teamwork</td>
</tr>
<tr>
<td><strong>Average Use of Case Review</strong></td>
<td>This group was similar to other groups on their use of case review.</td>
</tr>
<tr>
<td><strong>Higher Use of Multidisciplinary Cross-Training</strong></td>
<td>Compared to the other groups, this group had high use of multidisciplinary cross-trainings. 1.3% of the group did <strong>No</strong> multidisciplinary cross-training. 43.8% of the group did cross-training As Needed. 55.0% of the group did cross-training Regularly as part of their teamwork.</td>
</tr>
<tr>
<td><strong>Higher Use of Protocol Development and Review</strong></td>
<td>Compared to the other groups, this group had the highest use of protocol development and review. 1.3% of the group did <strong>No</strong> protocol development and review. 45.0% of the group did protocol review As Needed. 53.8% of the group did protocol review Regularly as part of their teamwork.</td>
</tr>
<tr>
<td><strong>No Program Evaluation</strong></td>
<td>None of the SARTs in this group did formal evaluation as a team.</td>
</tr>
<tr>
<td><strong>0 engaged in formal Program Evaluation</strong></td>
<td>As a team.</td>
</tr>
</tbody>
</table>

**High - Eval**
GROUP THREE: High Adopters Plus Evaluation

27 SARTs made up this group (16% of the SARTs studied). They shared the following defining characteristics:

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Description</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher Formalization</td>
<td>Compared to other groups, this group of SARTs had high use of formal resources and structures to organize their team</td>
<td>On average, this group used 6.90 out of 13 possible formal structures and resources</td>
</tr>
<tr>
<td>Average Use of Case Review</td>
<td>This group was similar to other groups on their use of case review.</td>
<td>25.9% of the group did No case review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>29.6% of the group did case review As Needed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>44.4% of the group did case review Regularly as part of their teamwork</td>
</tr>
<tr>
<td>Higher Use of Multidisciplinary Cross-Training</td>
<td>Compared to the other groups, this group had high use of multidisciplinary cross-trainings</td>
<td>7.7% of the group did No multidisciplinary cross-training</td>
</tr>
<tr>
<td></td>
<td></td>
<td>26.9% of the group did cross-training As Needed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>65.4% of the group did cross-training Regularly as part of their teamwork</td>
</tr>
<tr>
<td>Higher Use of Protocol Development and Review</td>
<td>Compared to the other groups, this group had the highest use of protocol development and review</td>
<td>15.4% of the group did No protocol development and review</td>
</tr>
<tr>
<td></td>
<td></td>
<td>53.8% of the group did protocol review As Needed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>30.8% of the group did protocol review Regularly as part of their teamwork</td>
</tr>
<tr>
<td>ALL Program Evaluation</td>
<td>All of the SARTs in this group did formal evaluation as a team.</td>
<td>100% of the group engaged in formal Program Evaluation as a team</td>
</tr>
</tbody>
</table>
Which Types of SARTs Perceived Themselves as Most Effective?

To assess participants’ perceptions of their team’s effectiveness, we asked SARTs to rate the extent to which their team contributed to various improvements in the response to sexual assault.

SART leaders or long-time members rated their team’s contribution to each type of improvement on the following scale:

1 – Not at all
2 – A little bit
3 – Somewhat
4 – Quite a bit
5 – To a great extent

We assessed a variety of different improvements in the response to sexual assault. We classified these into four different types of effectiveness:

- **Improvements in victims’ help-seeking experiences:** This included 10 improvements related to increasing the accessibility and quality of medical, advocacy, and mental health services for victims, as well as improvements in how sexual assault responders treated victims.

- **Improvements in police processing of sexual assault cases:** This included 6 improvements related to police investigation and referrals of sexual assault causes.

- **Improvements related to prosecution of sexual assault cases:** This included 9 improvements related to prosecution of sexual assault cases, including prosecutors’ actions (e.g., jury education), case charging and conviction rates, and the quality of medical/forensic evidence.

- **Improvements in victims’ participation in the criminal justice process:** This included 9 improvements related to victims’ willingness to participate in all stages of the criminal justice process, as well as how fully they participated in different stages of the criminal justice process.
When comparing the two High Adopters groups against the Low Adopters group, there were consistent differences in perceived effectiveness.

On average, **High Adopters + Evaluation and High Adopters - Evaluation** both tended to be perceived as **more effective than Low Adopters** across all four types of effectiveness:

- Improving victims’ help-seeking experiences
- Improving police processing of sexual assault cases
- Improvements related to prosecution of sexual assault cases
- Improving victims’ participation in the criminal justice system

The data can’t conclusively prove that formal structures and collaborative processes will make a SART more effective. It just shows that SARTs that used these more structured ways of organizing their team *tended* to perceive themselves as more effective than SARTs that used fewer structures and were less likely to engage in collaborative processes regularly.
Only one reliable difference in perceived effectiveness was found between High Adopters Plus Evaluation and High Adopters Except Evaluation:

On average, **High Adopters + Evaluation** tended to be perceived as more effective than **High Adopters - Evaluation** at improvements in victims’ participation in the criminal justice system.

There were not meaningful differences between the two groups on perceived effectiveness at improving victims’ help-seeking experiences, police processing of cases, and prosecution of cases.

The main difference between the two groups was whether or not the teams engaged in evaluation. So why did evaluation not create improvements in all domains of perceived effectiveness?

It may be that SARTs were unable to conduct strong evaluations, or that their evaluations weren't high useful in informing practice--how to make more improvements to the team and to responding to sexual assault.

Resources such as the free SANE evaluation toolkit can help SARTs to improve the strength and usefulness of their evaluation efforts.

The full toolkit is available at:

So….Are some Types of SARTs more Effective?

Restatement of the Take Home Points on SARTs’ Organization and Perceived Effectiveness:

1. The study classified SARTs into three different groups of SARTs that varied in how they organized their team work. The classification was based on:
   - How many different formal structures and resources the SART used to organize their teamwork (e.g., meeting minutes, mission statements, formal funding)
   - Whether the SART engaged in case review (not at all, as needed, or regularly)
   - Whether the SART engaged in multidisciplinary cross-training (not at all, as needed, or regularly)
   - How often the SART engaged in policy/protocol development, adoption, and review (not at all, as needed, or regularly)
   - Whether the SART engaged in formal program evaluation as a multidisciplinary (which required systematic data collection and analysis)

2. 2 groups of SARTs—both called High Adopters—were the most formal in how they organized their team. The Low Adopter group of SARTs was the least formal.
   - The High Adopters group of SARTs was more likely to engage in multidisciplinary cross-training and policy/protocol development and review on a regular basis and also used more formal structures and resources to organize their team.
   - On average, participants from SARTs’ in these two High Adopters groups rated themselves as more effective across all four domains of effectiveness than participants from SARTs in the Low Adopters group.
   - Note that this can’t conclusively prove that a more formal way of organizing the team will make a SART more effective.
The primary difference between the two High Adopter groups was that all of the SARTs in one group (the High Adopter Plus Evaluation group) engaged in systematic evaluation as a multidisciplinary team, whereas none of the SARTs in the other group did

- Evaluation had to include formal, systematic data collection and analysis
- There were not consistent, clear differences between the two groups of SARTs on their ratings of their team’s effectiveness. However, data on the quality and utility of the evaluations was not collected.
- It may be that in the future, support for SARTs on conducting better, more useful evaluation could help teams use evaluation to improve their effectiveness.

In the next pages, view other characteristics of SARTs and how they were related to perceived effectiveness.
## Is SART Membership Related to Perceived Effectiveness?

<table>
<thead>
<tr>
<th>Victims’ Participation in the Criminal Justice System</th>
<th>SARTs reported on whether 18 different sexual assault stakeholder groups (e.g., police, rape victim advocates, judges, etc.) were represented by active members of the team.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police Processing of Cases</td>
<td>The total number of different stakeholder groups a SART team had actively involved in their team represents the diversity of perspectives in the group.</td>
</tr>
<tr>
<td>Prosecution of Cases</td>
<td><strong>SARTs with a broader number of stakeholder groups</strong> tended to be perceived as more effective than SARTs with fewer stakeholder groups at improvements related to: victims’ participation in the criminal justice system; police processing of sexual assault cases; and prosecution of sexual assault cases.</td>
</tr>
</tbody>
</table>

However, the number of different stakeholder groups involved in the team was not related to perceived effectiveness at improving victims’ help-seeking experiences. Having more stakeholder groups actively involved in the team was not hurtful, but they didn’t appear to have more success than other SARTs with fewer stakeholder groups either.
Are Older or Younger SARTs more Effective?

A SART’s age was captured as the number of years the SART had been in continuous operation.

**Older SARTs** that had been in operation continuously for a longer amount of time tended to be perceived as more effective than younger SARTs on all four domains of effectiveness: improving victims’ help-seeking experiences; improving victims’ participation in the criminal justice system; improving police processing of sexual assault cases; and improving prosecution of sexual assault cases.

There are a couple of possible explanations for this finding. One possibility is that there are different “generations” of SARTs, with SARTs that first formed decades ago operating differently from SARTs that formed more recently, and the operations of the older generation of SARTs are perceived to be more effective.

Another possibility is that as any one SART continues to work together, the team tends to be seen as more effective over time. There may be some ups and downs, but generally, there is a tendency toward improvement.
How does Community Context Relate to SARTs’ Effectiveness?

SARTs in rural communities with a total population density of less than 500 persons per square mile tended to perceive themselves as more effective on one area: improvements related to police processing of cases.

SARTs that served more than one community tended to perceive themselves as more effective than SARTs that served one county or a partial county at improvements related to police processing of cases and victims’ participation in the criminal justice system. It may be that serving more than one community gives the SART more opportunities to create change and this boosts their perceived effectiveness.
How Frequently do Responders Coordinate on Individual Sexual Assault Cases in SART Communities?

Participants were asked about the frequency of multidisciplinary coordinated actions between advocates, medical/forensic examiners, police, and prosecutors on individual sexual assault cases.

You can jump to findings on the frequency of:

- conducting joint victim interviews
- giving victims who report the assault to police information about the local rape crisis center and information about getting a medical/forensic exam
- giving victims the opportunity to have an advocate accompany them during the: medical/forensic exam, initial report to police, detective interview, and court hearings
- law enforcement and prosecutors consulting with medical/forensic examiners on forensic exam findings
- having medical/forensic examiners provide expert witness testimony at trial
- having medical/forensic examiners conduct suspect exams
Do Medical/Forensic Examiners and Police **Typically** Conduct Joint Interviews of Victims in SART Communities?

**Most SART communities do NOT**
typically conduct joint victim interviews

- **29.0%** Typically Conduct Joint Interviews
- **71.0%** Does NOT Typically Conduct Joint Interviews
How Often are Victims who Report the Assault to Police Given Information about Receiving a Medical/Forensic Exam?

96.4% of SARTs reported that this happened most of the time or every time in their community.
How Often are Victims Given the Opportunity to have a Victim Advocate Accompany them During Court Hearings?

91.2% of SARTs reported that this happened most of the time or every time in their community

<table>
<thead>
<tr>
<th>Frequency</th>
<th>% of SART communities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely or Never</td>
<td>4.1%</td>
</tr>
<tr>
<td>Occasionally</td>
<td>4.7%</td>
</tr>
<tr>
<td>Most of the Time</td>
<td>32.7%</td>
</tr>
<tr>
<td>Every Time</td>
<td>58.5%</td>
</tr>
</tbody>
</table>
How Often are Victims Given the Opportunity to Have a Victim Advocate Accompany them during the Medical/Forensic Exam?

88.9% of SARTs reported that this happened most of the time or every time in their community.
How Often are Victims who Report the Assault to Police Given Information about Services from the Local Rape Crisis Center?

88.4% of SARTs reported that this happened most of the time or every time in their community.
How Often Does Law Enforcement Consult with Medical/Forensic Examiners Regarding Forensic Exam Findings?

80.9% of SARTs reported that this happened most of the time or every time in their community.
How Often Do Prosecutors Consult with Medical/Forensic Examiners Regarding Forensic Exam Findings?

74.2% of SARTs reported that this happened most of the time or every time in their community.

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely or Never</td>
<td>7.7%</td>
</tr>
<tr>
<td>Occasionally</td>
<td>18.1%</td>
</tr>
<tr>
<td>Most of the Time</td>
<td>38.1%</td>
</tr>
<tr>
<td>Every Time</td>
<td>36.1%</td>
</tr>
</tbody>
</table>
When Sexual Assault Cases Go to Trial, How Often Do Medical/Forensic Examiners Testify?

63.2% of SARTs reported that this happened **most of the time or every time** in their community.

![Bar chart showing percentages of SART communities for different frequency of medical/forensic examiner testimony.]

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rarely or Never</td>
<td>15.0%</td>
</tr>
<tr>
<td>Occasionally</td>
<td>21.9%</td>
</tr>
<tr>
<td>Most of the Time</td>
<td>36.3%</td>
</tr>
<tr>
<td>Every Time</td>
<td>26.9%</td>
</tr>
</tbody>
</table>
How Often are Victims Given the Opportunity to have a Victim Advocate Accompany them during the Initial Report to the Responding Police Officer?

61.5% of SARTs reported that this happened **most of the time or every time** in their community.
How Often are Victims Given the Opportunity to have a Victim Advocate Accompany them During Victim Interviews with the Detective?

59.5% of SARTs reported that this happened most of the time or every time in their community.
How Often Do Medical/Forensic Examiners Conduct an Examination of Suspects in Sexual Assault Cases When a Suspect has been Apprehended?

73.9% of SARTs reported that this happened rarely or never in their community.
In this section, you will find a brief synopsis of the results related to how SARTs operate and their implications for effectiveness. Each of these will be followed by a series of reflection questions to help you use the information to consider your own team’s practices.

Reflection questions could be considered by individual SART members or leaders or could be discussed as a team.

As you go through the reflection questions, you may find it helpful to focus on what’s going well as well as what could be improved.

The findings from the current study suggest that active membership from a broader number of stakeholder groups may contribute to SARTs’ effectiveness at improvements to legal system issues. However, keep in mind that this doesn’t mean that bigger is always better. An extremely large team may become too unwieldy to manage.

**Reflection Questions:**

Which key stakeholder groups, organizations, and individuals are actively and consistently involved in your SART meetings and events? Which perspectives have been particularly important for you to have?

What needs to happen to sustain the active membership that has been beneficial to your team?

Look at the list of SART members that were asked about in the current study. Are there other important stakeholder groups or organizations in your community that you could reach out to?

Anecdotally, SART responders noted that developing relationships takes time and persistence. Are there stakeholder groups or organizations that you could try reaching out to again?
SART Infrastructure

On average, teams that were classified into SART types that were more structured and more likely to use collaborative processes regularly tended to perceive themselves as more effective.

Reflection Questions:

Structure & Resources

How is your SART team run and organized? Does your team have a set of procedures or a typical set of practices for working together? What practices and policies help your team to stay organized, focused, and work together?

What resources does your team utilize? Is there a formal leader or coordinator? Is someone paid to help organize the SART? Which resources have been integral to your success?

What needs to happen to sustain what’s going well?

Look at the list of formal structures and resources that were captured in the current study. Which of these might help your SART team to work together efficiently and collaboratively?

Collaborative Processes

How does your team work together? How do responders formally collaborate to improve the response to sexual assault? Do you primarily rely on general group discussion and information sharing or are their other processes you use? Are there other ways that all of the diverse groups that are part of your team could be engaged more actively?

How do team members collaborate “behind the scenes” or outside of group meetings?

What strategies seem to be working well so far? What would help to sustain what’s going well?

If you haven’t yet tried to engage in case review, multidisciplinary trainings, external trainings/guest speakers, or policy and protocols adoption and review, why not?

- What tangible resources would you need to make this happen?
- What groups would you need to approach to get buy-in?
- What would the group need from its leaders to engage in these processes?
• Think about the multidisciplinary relationships between the groups that are involved in your team and the strengths and weaknesses in your community’s response to sexual assault. Which of these processes would be particularly useful for your team right now?

• Are there SART resources such as manuals, sample protocols, trainings or technical assistance that could help you to engage in these processes?

Engaging in collaborative processes regularly may help provide stability, ensure key issues are regularly addressed, and help team members know what to expect. Do you engage in case review, multidisciplinary trainings, external trainings/guest speakers, and policy/protocol adoption and review regularly? If not, why not? If your team were to engage in them more regularly, how would that change your group dynamic?

• What tangible resources would you need to make this happen?

• What groups would you need to approach to get buy-in?

• What would the group need from its leaders to engage in these processes?

• Think about the multidisciplinary relationships between the groups that are involved in your team and the strengths and weaknesses in your community’s response to sexual assault. Which of these processes would be particularly beneficial if it were a routinized part of your team?

• Are there SART resources such as manuals, sample protocols, trainings or technical assistance that could help you to engage in these processes regularly?

Examine the list of types of program evaluation that other SARTs are already using.

If you are already collecting and reviewing data as a team, how do you use that to make changes to your SART’s work? Does the data help you to pinpoint gaps that need to be addressed and strengths that you could try to sustain or expand upon? How would your data collection, analysis, and reflection on the results need to change for it to be useful to informing your team?

Check the list of examples of evaluation again. What data do you already collect as a SART team or as individual organizations but not reflect upon as a group? Would that data be helpful to discuss and reflect upon as a multidisciplinary team?

What additional data would be particularly helpful to improving your SART and the community response to sexual assault? Are there areas that might benefit from monitoring to ensure positive practices and outcomes are sustained? Are there areas where you aren’t sure how well things are going?

• What existing resources could you utilize to help you undertake this type of research/evaluation?

• Are there local university researchers or evaluators that might be willing to help you collect data?
Coordination in SART Communities

Review the data on the frequency of different coordinated actions in responding to sexual assault.

Reflection Questions:

Which of these are happening every time, most of the time, occasionally, and never in your community?

Which of these are you satisfied with? What needs to happen to sustain them?

Which of these need to happen more often if you are going to improve the response to sexual assault in your community?

For the coordinated actions that you think are valuable to your community and need to increase:

- What tangible resources would you need to make this type of coordination happen more regularly?
- What groups would you need to approach to get buy-in?
- What would the group need from its leaders to make this type of coordination happen more regularly?
- What information and skills would responders need to engage in these types of coordination more regularly?
- What incentives would responders need to engage in these types of coordination more regularly?
- What organizational procedures and policies would need to change to engage in these types of coordinate more regularly?
- How would relationships between individual responders, between organizations, and between organizational leaders need to change in order engage in these types of coordination more regularly?
- Could these coordinated actions be discussed in cross-trainings, monitored through case review and/or data collection, or laid out as best practices in policies/protocols?
Appendix

Appendix A: Select SART Resources

Appendix B: References and Attributions
Appendix A: Select SART Resources

Office of Victims of Crime SART Toolkit
The OVC created a toolkit to help SARTs develop their team and create a coordinated, victim-centered response to sexual assault.

National Sexual Violence Resource Center
The National Sexual Violence Resource Center provides training, technical assistance, and resources on preventing and responding to sexual assault. Their website contains a library of resources specific to the work of SART teams. SARTs may be particularly interested in the SART Development Guide (step-by-step guide on how to create a SART) and sample SART Manuals and Guidelines.

Share your experiences and learn from other SARTs by subscribing to their email SART list-serv.

SAFETA.ORG
Their website has generic memoranda of understanding that you can download and adapt for your community.

End Violence Against Women International
End Violence Against Women International (EVAWI) provides training, technical assistance, and a wealth of online resources designed to help improve the criminal justice and community response to gender-based violence. Many of these resources specifically focus on supporting community efforts to establish a Sexual Assault Response and Resource Team (SARRT). For example, EVAWI offers two courses specifically focused on SARRTs in the OnLine Training Institute: Sustaining a Coordinated Community Response: Sexual Assault Response and Resource Teams (SARRT) and Sexual Assault Response and Resource Teams (SARRT): A Guide for Rural and Remote Communities. A number of resources and sample protocols are also available in the Resource section of the website dedicated to Best Practices, as well as the easily-searchable Resource Library. For more information, please see: www.evawintl.org.

The Sexual Violence Justice Institute (SVJI) at the Minnesota Coalition Against Sexual Assault (MNCASA)
SVJI at MNCASA is a nationwide resource for all SART, SMART, CCR, SAIC, and other team approaches to improving the community response to sexual assault through training, technical assistance and the development and dissemination of expert information about sexual violence. We emphasize a “victim-centered response” encouraging individuals, teams, and systems to keep each individual victim/survivor, and their unique needs and abilities, at the center of all of our actions.
Our **multidisciplinary team approach** is centered around the “**8 Step Protocol Development Cycle**” that encompasses 3 phases: assessment of the ‘status quo’, substantial steps to making changes, and measuring and evaluating the success of those changes in order to continue an ongoing cycle of improving the team. We offer **technical assistance to teams** regarding all stages of this Cycle and provide the concepts and methods leaders need to start, engage, and sustain collaborative approaches.

SVJI can provide support with connections to a network of team coordinators, resources for best practices in response to sexual violence, and access to **experts in the field**. A number of our projects allow us to provide **additional assistance** to grantees of the Office on Violence Against Women.

For more information on teams, please visit [SVJI@MNCASA](mailto:SVJI@MNCASA).

**The Sexual Assault Nurse Examiner Evaluation Toolkit for Practitioners**

This free [toolkit](#) provides step-by-step instructions for SANE programs on how to evaluate the impact of their work on criminal justice system outcomes (such as prosecution rates). No advanced statistical software or training is required.
Appendix B: References and Attributions

References


Attributions

Add Contact by Bahi from the Noun Project

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