

Responding Together: A Guide for Addressing Sexual Violence

SARTs in West Virginia



West Virginia Foundation for
Rape Information and Services (WVFRIS)

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Introduction

Purpose of this Guide

The guide is intended to support the implementation of a comprehensive statewide strategy to improve community response to sexual assault by providing technical assistance for existing and emerging sexual assault response teams (SARTs) in West Virginia. It represents an effort to build upon multidisciplinary protocols of the past, facilitate a coordinated response, and provide guidance around team building and sustainability.

The goal is to help local SARTs develop and grow so they can ensure an effective response from each involved sector—both within a discipline and in coordination across sectors—when a sexual assault occurs.

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Note: This document is a product of WVFRIS. Nothing in this document should be construed as providing legal advice. It is intended solely for educational and informational purposes. Anyone reading or utilizing information in this document is responsible for obtaining such advice from their legal counsel.

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A Systems Approach to Change

Need for SARTs

Sexual violence is a serious violent crime and a public health crisis. The impacts of sexual violence go far beyond the act of the crime itself. Victims of sexual assault face both physical and psychological trauma, including the risk of sexually transmitted diseases and physical injuries that can be life-threatening. A community's response or lack of response can deepen the trauma, causing victims to lose trust in political, social, and criminal justice systems. These impacts can lead to withdrawal from work, school, community activities, and social connections. The human toll of this crisis is extraordinary in itself, but its cost is also measurable in economic terms. According to a study using economic figures from 2014, the estimated lifetime cost of rape is \$122,461 per victim (Peterson et al., 2017).

Consider a few key points on the nature/extent of the problem (note that data comes from national and state surveys of victimization, studies of subpopulations, and emerging findings from testing backlogged sexual assault evidence kits and analysis of convicted offender recidivism):

- **Perpetrators of sexual assault are not easily categorized.** They can be of any age, sex, gender, race/ethnicity, socioeconomic group, or marital status.
- **Perpetrators may be opportunistic in their offending patterns.** While some commit sexual assault just once, others commit multiple sex offenses, potentially along with other types of crimes. Some are opportunistic in who they target (e.g., strangers and non-strangers, or people of varying ages).
- **Perpetrators harm a significant portion of the population.** Just **over half of females and almost a third of males in the U.S.** experience contact sexual violence during their lifetime (Basile et al., 2022). Contact sexual violence can include rape, being made to penetrate someone else, sexual coercion, and unwanted sexual contact. **In West Virginia, about 1 in 3 females and nearly 1 in 6 males** experience contact sexual violence (Smith et al., 2017).
- **Anyone can be sexually assaulted, but some populations are victimized at higher rates** – including women, young people, people with disabilities, and those with prior victimization histories (Basile et al., 2022). A person's living or working conditions can also increase risk, such as working in the sex trade, having limited power or resources, experiencing poverty or homelessness, living in high-violence areas, or residing in settings such as detention centers or long-term care facilities.
- **These populations face a higher risk because perpetrators often target people who are vulnerable, easily accessible, and perceived as less credible** (e.g., someone with a criminal record or mental health condition). When victims are viewed as lacking credibility, they are less likely to be believed or taken seriously, to report the crime, or stay involved in the criminal justice process.
- **The majority of perpetrators target victims they know.** Often, they are current or former intimate partners or acquaintances (Basile et al., 2022).
- **The harm that perpetrators inflict on victims is not restricted to the sexual assault.** Instead, the harm to victims very often extends to a spectrum of post-traumatic reactions,

which can have severe and persistent negative consequences (Coen & Thompson, 2024; Dworkin et al., 2017).

- **The vast majority of sex offenders slip under law enforcement's radar**, as most victims do not report. The tendency not to report works in the perpetrators' favor.
 - Some victims are simply far too traumatized or overwhelmed to think about seeking justice or are unaware of available services and support. They may anticipate that disclosing/reporting could result in further anguish with little or no personal benefit.
 - Many victims do not report for fear of losing privacy, not being believed, or being blamed for the assault. Their motives for reporting may be questioned, and their reputation "dragged through the mud," resulting in harm to their personal and even professional lives (Grinberg, 2018).
- **Even when victims report, few result in an arrest, much less prosecution and conviction.** Of an estimated 500 assaults, about 400 go unreported. Of the 100 reported, roughly 19 lead to arrest, 14 to prosecution, and only 8 to conviction (Lonsway & Archambault, 2012; Morabito et al., 2019; Spohn & Tellis, 2012).

What is a SART?

A SART is a vehicle for collaboration, relationship building, education, and accountability among organizations that are first responders to sexual assault. The main functions of SART are to: *(drawn from the National SART Toolkit)*

- Increase intra-agency and interagency collaboration and coordination when responding to sexual assault
- Identify inadequacies and limitations in and among systems
- Ensure appropriate, trauma-informed responses to support victims
- Improve offender accountability

Core SART Members

The four core disciplines of a SART include community-based rape crisis center advocates, law enforcement, healthcare (e.g., ER managers and SANEs), and prosecution. A community may extend membership to other sectors involved in the sexual assault response (crime lab, probation, military law enforcement, campus law enforcement, sex offender management, social services, mental health care, etc.). For complete roles and responsibilities of SART disciplines, refer to the WV Protocol for Responding to Victims of Sexual Assault.

What Does a SART Seek to Do?

When SART members work together, they can reduce further trauma for victims, better protect the rights of victims, and help create safer communities.

- In individual cases, improvement begins when the SART addresses survivors' needs in the immediate aftermath of a disclosure of victimization. Ideally, the team endeavors to minimize re-traumatization that survivors experience during all interactions with responding systems, while striving to maximize the benefits of a multidisciplinary response. To that

end, the SARTs initiate a collaborative response to provide victims with support, information, an explanation of their options/resources, and guidance on accessing them.

- In turn, such a collaborative response, built on an understanding of trauma and laid out in a multidisciplinary protocol, promotes SART member agencies' goals of holding offenders accountable and stopping their continued violence. When survivors are supported by responders (rather than disbelieved or blamed) and their self-identified needs are met, they will more likely be willing to continue working with responders in the criminal justice system to fully investigate and prosecute suspects.

Foundation for a SART

SARTS, if they wish to be functioning, productive, and sustainable collaborations, must establish a solid foundation from which to develop and grow. According to researcher Brene Brown, such a foundation requires that “we do more than profess our values, we practice them. We walk our talk—we are clear about what we believe and hold important, and we take care that our intentions, words, thoughts, and behaviors align with those beliefs.” What walking our talk means for a SART is addressed next.

Implementing Victim-Centered, Offender-Focused Response

Deciding whether to report a sexual assault to law enforcement and engage with the criminal justice system can be highly challenging for survivors of sexual assault. Navigating the criminal justice system can be confusing and intimidating for anyone. But sexual assault survivors historically have faced disbelief, blame, and backlash when disclosing/reporting their victimizations. It is not surprising that many are afraid to report or simply do not trust that being involved in the criminal justice system or other community response systems will benefit them. They may fear it will bring more harm.

SARTs call for responding professionals to treat every survivor with dignity and thoroughly carry out their discipline-specific and coordinating roles in every single case. That means that responders do their utmost to hear, empower, respect, and support survivors, regardless of survivors' decisions about being involved in the criminal justice system and the outcomes of an investigation or prosecution. Therefore, **every discipline must respond in a victim-centered way to every sexual assault survivor. With such an approach, responders:**

- **Have been trained to understand and recognize the impact of the sexual assault on survivors** (What is the neurological response during a sexual assault? How does this affect how they respond to this threat during and after?). While there is not one way to respond to sexual assault, many survivors experience a range of physical, emotional, cognitive, and behavioral responses that are typical of any traumatic event (Campbell).
- **Prioritize victims' safety, privacy, self-determination, and well-being.**
- **Acknowledge that justice is served when victims are listened to, believed, taken seriously, and their input into the criminal justice process is solicited, valued, and respected.** This requires distinguishing between obtaining a conviction and what victims define as having achieved justice.

- **Recognize that victims are never responsible for the crimes committed against them and that perpetrators are always responsible.** You can show your recognition of these facts with statements like the following: “I’m sorry that happened to you.” “What you are feeling is normal in the aftermath of such a crime.” “How can I help?” “You are not to blame.”
- **Have been trained to override unwarranted disbelief of victims and victim-blaming** that are common reactions to a disclosure of sexual assault. We generally start by believing victims of crime when they tell us what they experienced (e.g., that they were robbed). There is absolutely no reason this courtesy should not also be extended to victims of sexual assault. Victim blaming means focusing inappropriately on the behaviors and actions of the victim, implying that if they had not engaged in a certain action or behavior, they would not have been sexually assaulted.

SARTs must ensure that case investigations are offender-focused (as opposed to focused on victims). An offender-focused response to a sexual assault case concentrates on identifying and following every potential evidence lead related to the suspect’s actions surrounding the reported sexual assault (before, during, and after), as well as related to other criminal cases that may be connected to this suspect. **An offender-focused approach requires:**

- **Understanding that perpetrators often manipulate victims, situations, and even first responders to facilitate and get away with their crimes.** This includes frequently using victims’ vulnerabilities and traumatic responses to being assaulted to support those goals.
- **A thorough investigation in every case that focuses on identifying tactics that suspects used to facilitate and get away with their crimes.** Tactics are far more than the specific violent acts employed. Rather, they include what triggered the perpetrator’s decision to sexually assault, how victims were targeted and groomed, and what was done to minimize victim resistance and increase the likelihood of evading accountability. Such an approach ensures the victim’s actions and behaviors do not inadvertently divert from holding offenders accountable.

Serving All Victims

See pages 10-11, [A Compilation of Best Practice Recommendations for SARTs](#), for more on this topic.

A SART must strategize how to best develop and implement collaborative responses for all victims in its community. Every survivor deserves dignity, care, and support to access the resources they need to heal, seek justice, and thrive. While standardized protocols guide the team’s response, flexibility is essential to tailor support to each individual, empowering survivors to heal and pursue justice in ways that fit their experiences.

It is worth your SART’s time and effort to collaborate with and learn from community stakeholders (groups, professionals, and individuals, including victims), including but beyond the community rape crisis center, to strategize how to reach and most appropriately serve those victims who historically have been unserved, underserved, inadequately served or mis-served.

Protecting Survivor Privacy and Confidentiality

Watch a short video from the National Sexual Violence Resource Center's (NSVRC) SART Toolkit on [confidentiality](#).

Crime victims have a constitutional right to be treated with fairness. This includes the right to privacy, which is important in the context of initiating a collaborative SART response. Initiating the collaborative response can be accomplished without sharing a victim's personal and sensitive information, by giving a victim the ability to opt-in to services, and by having protocols in place to ensure a victim's confidentiality and privacy are respected and protected.

Confidentiality is crucial to sexual assault victims. West Virginia rape crisis center policies and advocate ethical standards protect the confidentiality of communications between victims and advocates. (Communications between victims and criminal justice/other system professionals usually are not confidential.) If victims receive a medical forensic exam and decide to report to law enforcement, the sexual assault evidence collection kit is sent to the West Virginia State Police Forensic Lab, and information is shared with the investigating agency. Victims' medical records remain confidential absent a court order. If the victim is undecided about reporting, the kit is stored at Marshall University Forensic Science Center for potential future testing. (For more on what happens when a kit is collected but a victim is undecided about reporting, go to the [WVFRIS website](#).)

Privacy, Confidentiality, & Privilege: What is the Difference? Adapted from the Minnesota Coalition Against Sexual Assault (MNCASA) & Wisconsin Office of Crime			
	Privacy	Confidentiality	Privilege
What is it?	A right	Legal/ethical duty	Protected communication
Who does it apply to?	Public officials, employees, or agencies	Community-based victim advocates and SANEs	Doctors, counselors, and attorneys
How does it impact the victim?	"I decide who knows my information"	"You have a legal or ethical duty to protect my information"	"No one can make you share my information"
Guaranteed by?	Constitutional amendment	State laws, professional boards/standards, and licensure, and federal funding	State law

A release of information from victims is required to disclose specific pieces of a victim's personally identifying or sensitive information. A release of information needs to be:

- **Victim-Centered:** When releasing information about a victim, only share information that is relevant and necessary, and that the victim has permitted to share.
- **Written:** Permission to release information is to be submitted **in writing using a release of information form**. Forms should only be sent via email or text message once the email address/phone number is confirmed by the victim.
- **Informed:** A release of information is to state the purpose, nature, and content of the information to be disclosed. Victims need to know that signing the release is completely voluntary.
- **Reasonably Time-Limited:** Permission to release only specified information for a limited timeframe (e.g., 10–30 days) to meet the victim's needs. A new release can be signed if more time is needed.
- **Specific:** The release should only contain the specific information the victim has agreed to share.

If the information is subpoenaed, occasionally an attorney/court will seek to compel a rape crisis center advocate to testify about the information that a victim shared with them. When this happens, the advocate may receive a legal document called a subpoena. Most rape crisis centers will challenge these subpoenas based on the center's confidentiality policies, and often these arguments are successful. Similarly, an attorney/court might compel a sexual assault nurse examiner to share medical information about a victim. Most SANE programs and their healthcare facilities will challenge these subpoenas.

Visit MNCASA's website for information on what constitutes [personally identifying information](#). A clear confidentiality policy helps ensure all team members uphold shared expectations around confidentiality. See this resource for a template to use to formalize these expectations: [Sample Confidentiality Agreement](#).

Guided by a Shared Mission and Vision

Sample vision and mission statements are included in [Additional Resources, Samples](#).

With multiple disciplines on a SART, it is important to establish a shared vision and mission to guide the work of the team. Mission and vision statements are important foundational resources for SARTs, serving both to ground the work of the team while also enhancing sustainability. While each discipline has a unique role and responsibility, there needs to be an overarching purpose that all team members commit to and share.

A **vision statement** is a short, concise statement that describes the long-term goals and aspirations of the SART. It provides a clear picture of what the team hopes to achieve in the future, guiding its efforts and inspiring its members. Vision statements are broad and forward-looking, serving as the spirit of the team's mission.

A **mission statement** defines the core purpose and function of the SART. It serves as a foundation for the team's strategies and actions, outlining their primary objectives and the methods to achieve them. The mission statement needs to be referenced regularly to ensure that the team's activities align with its stated purpose. It can also be used to communicate the team's goals and values to external partners and the community.

Guided by Goals and Objectives

Sample goals are included in [Additional Resources, Samples](#).

While each discipline, with its unique role and responsibility, supports its overarching mission and vision, there should also be common goals and objectives of the team. **Goals are more specific than mission statements and explain what the team wants to achieve.** One of the most important questions to address when creating goals is "Will the goals support the SART's vision and mission?"

Goals encompass a relatively long time period – sometimes three years or more – or have no stated period. Goals are also broad, intangible, abstract, and include general intentions.

Objectives identify steps needed to attain a goal. One long-term goal may consist of several shorter-term objectives. It is ideal for objectives to be (NSVRC):

- **Specific:** Objectives need to reflect specific, desired accomplishments. They are detailed and compatible with sexual assault response policies, protocols, and jurisdictional ordinances and statutes.
- **Measurable:** Objectives must be measurable so that SARTs can determine when they have been accomplished.
- **Achievable:** Objectives are standards for achievement. They may be challenging, but they should not demand the impossible.
- **Relevant:** Objectives need to specify a result; for example, "provide private waiting areas for victims at exam sites."
- **Timed:** Objectives need to specify a short time-frame—a few weeks to no more than a year.
- **Challenging:** Objectives stretch the SART to make significant improvements.

Offering Victim Accompaniment as a Goal

See the later sections in this document on the [role of community-based advocates](#). Also see the video, [Initiating a Collaborative Response within a SART](#) (Wisconsin Office on Crime Victims Services).

A foundational goal of every SART is to ensure that survivors are offered advocacy services. Sexual assault survivors have the right to be accompanied by a community-based victim advocate/personal representative at a medical forensic exam, law enforcement interview, and other criminal justice proceedings. **The many benefits of victim accompaniment, include:**

- **Providing emotional support** to survivors during a vulnerable time.
- **Assisting survivors in navigating** complex health care/criminal justice systems.
- **Helping facilitate better outcomes** for survivors in the criminal justice system.

- **Giving survivors access** to the only discipline whose primary function is to advocate for their interests and wants.
- **Allowing survivors to choose the support they want** and not be limited by whether or not they are involved with the health care or criminal justice systems.
- **Giving survivors the opportunity to work with an advocate to address their broad needs**, allowing the health care providers, law enforcement officers, and prosecutors to focus on their specific roles in these cases.

It is best practice to contact a community-based victim advocate (from the rape crisis center serving your community in West Virginia) as soon as a survivor presents for a sexual assault exam or to make a report to law enforcement. Once the advocate is present, they can offer services and accompany the victim if the victim permits. By contacting the rape crisis center to respond, this avoids placing the responsibility on the survivor to request an advocate.

Building a Strong SART

Relationship building is central to developing and maintaining a strong SART. With a strong SART, members understand each other's roles and responsibilities, and respect and value them (NSVRC).

- **Communication Agreements.** To enhance relationship building, SARTs can consider developing communication agreements that reflect members' commitment to engaging in direct, ethical, and collaborative communication with each other. Having such an agreement in place can help ensure the team is committed to having difficult conversations and holding each other accountable. (This agreement might be built into other SART documents. See [Additional Resources, Samples](#) for an example SART statement of collaboration and a SART MOU.)
- **Activities to Support Relationship Building.** Beyond having communication agreements, SARTs must devote time and energy to ensuring all team members understand and value the role each discipline plays in the SART response.
 - Relationship building is often a continuous process for SARTs, due to staff transitions and turnover.
 - Use SART meeting time to periodically have members educate the team about the nature and scope of their agencies' work, their missions, and the challenges they face.
 - In addition, don't forget to encourage activity that forms strong relationships among members and agencies outside of formal meetings, as that can also help to build trust and camaraderie. For example, plan a lunch meet-up in December instead of a meeting.
 - Simply taking the time to acknowledge one another's efforts helps to build trust and relationships, leading to better sustainability. Thank you notes or recognition for dedicated individual efforts help team members feel seen and supported for the work they do.

The work of SARTs can be tension-filled and task-oriented. Ensuring that each SART member feels valued during scheduled meetings and via contact outside of meetings can strengthen the work of the group.

Prioritizing Team Members' Self-Care

Check out the Office for Victims of Crime's (OVC) [Vicarious Trauma Toolkit](#).

The process for responding to these cases, in all their complexity, can be physically and emotionally taxing. All team members require adequate support systems for their own physical, mental, and emotional well-being.

To avoid burnout and cope with vicarious trauma they may experience, team members need to set and enforce appropriate boundaries in doing this work. They need to address their needs for nutrition, sleep, and physical and mental exercise. They need to keep an open line of communication with their supervisors and ask for help when needed. Their support of each another, across disciplines, can be an aid to staying healthy and sustain them in doing this work effectively.

The SART can support team members' well-being by building wellness practices into policies, communication, and regular meetings or trainings. Some rape crisis centers in WV also provide secondary support services for first responders who handle sexual assault cases.

SART Development

See [Additional Resources, Samples](#) for a SART statement of collaboration and a SART MOU.

Once a SART has addressed the core issues identified above, additional resources and activities need to be discussed and developed to enhance, reflect, and strengthen the foundation of the SART.

Commitment

A statement of collaboration or a memorandum of understanding (MOU) demonstrates a shared commitment to the SART's work. All SART members, as well as the leadership in the agencies or departments they represent, need to be aware of the content of these agreements. In addition, these commitments ideally are reviewed regularly and updated as necessary.

SART Organization and Leadership

A SART needs to develop the structure of the team and identify who is responsible for facilitating various team activities. Key meeting responsibilities include: facilitation of the meeting, note-taking and documentation during the meeting, arranging for meeting space or log-in information for virtual meetings, distributing the agenda, and following up on action items.

The SART also needs to discuss shared responsibility for team activities. For example, there might be a planned rotation for meeting responsibilities. By sharing SART organizational responsibilities, the team ensures that these tasks do not fall on one person/discipline indefinitely. This also helps develop a strong foundational structure for the SART.

Team Needs Assessment

For additional guidance, see [Sexual Assault Response Team Starter Kit: A Guide for New SART Teams](#).

An important part of SART development is determining what the SART needs to operate as a team. For example: Which partners need to be at the table? Do all members know their roles in sexual assault response and how those roles interface with others? Does each partner have buy-in and back-up from their agency? Does everyone have a common understanding of the reality of sexual assault in their community? Answering these questions will help the SART establish a solid foundation from which to develop goals and objectives and work together on a collaborative sexual assault response.

An initial survey of SART members/member agencies can help determine what the team needs to develop this common understanding. Teams can use the NSVRC's [SART Readiness Assessment Survey](#). SARTs can then discuss the results to determine how to address needs or gaps identified from the survey.

Teams should continue to assess their needs, since dynamics can shift as new partners are brought on and goals and objectives change. Even SARTs that have been working together for a long time can benefit from periodically checking on their team's needs.

Community Needs Assessment

For more on needs assessments, see the NSVRC's [Community Needs Assessment](#) (scroll down to that title) and [Tools for Measurement](#). For more on listening sessions, see the OVC's [Listening Forums with Professionals, Survivors & Community Members](#) and [Hosting Listening Forums to Talk About Sexual Violence](#).

In addition to a needs assessment, **an initial community needs assessment will help the SART determine goals and objectives. Community needs assessments can involve feedback from community members and sexual violence response professionals, as well as data that SART partners already collect for agency purposes.** It may be helpful for a SART to also examine the community's demographic data to better understand what specialized services may be needed.

It is useful if partners on the SART agree to share data their agencies collect on their response to sexual assault and be prepared to discuss it candidly to improve the SART's response and develop goals for the group. Everyone may have a different view of the problems, issues, and suggestions for any improvements based on their own personal experiences and knowledge.

While information about survivors who sought formal services from disciplines represented on the SART is important, understanding obstacles to receiving services is also vital. Ideally, needs assessments include feedback from the community, from every discipline that engages with victims of sexual assault, and from survivors. These groups can provide an unbiased reflection of how effectively the SART is collectively performing and reaching the broader community. SARTs may consider facilitating focus groups or listening sessions for community members and survivors to gain perspectives on sexual violence and the need for services in the community.

SARTs can hold listening sessions with community professionals outside the team to gather feedback on the community's sexual assault response. They can also use surveys to collect input from both professionals and community members. When seeking feedback on this sensitive topic, proceed carefully to avoid re-traumatization. Make sure all communities in the service area are represented, offer accommodations (such as accessible meeting spaces and interpreters), and protect participants' confidentiality. Keep in mind that some participants may be survivors, even if they do not openly identify as one.

Training and Education

See [Additional Resources, Training Resources](#) for training opportunities.

Training and education are critical to ensure that SART members have a unified understanding of all areas of this work. It is important that onboarding and ongoing training are facilitated for members within their specific disciplines, so they are equipped to do their job with confidence. During onboarding and before working independently with sexual assault victims, new employees of all disciplines are hopefully provided the opportunity to shadow and be mentored by a seasoned professional who can model best practice approaches. This practice allows employees, who may or may not have previously engaged with victims of sexual assault, the ability to observe techniques and communication styles to strengthen their skills and knowledge.

SART Sustainability and Response

Understanding and valuing the role of each member of the SART is critical to the success and sustainability of the team. Team members need to know what each member is responsible for, who they are responsible to, and the limitations of their role. Role confusion can create conflict between members, particularly if there is a lack of understanding about the boundaries each discipline has when engaging with victims. Team meetings are a good venue to explain and reinforce discipline-specific and coordinating roles of each member, both in a broad sense and in specific cases.

For an exercise to help teams better understand roles, see this video, [SART Role Clarification](#), from the Wisconsin Office of Crime Victim Services/Wisconsin Coalition Against Sexual Assault.

The Role of Rape Crisis Centers

In West Virginia, community-based advocates for sexual assault victims come from regional non-profit **rape crisis centers**. Their primary purpose is to provide services to and advocacy for victims of sexual assault, regardless of whether or not they report the assault to the criminal justice system.

- **Centers are available 24 hours a day, 365 days a year, via their crisis line services and in-person support.** Rape crisis centers in West Virginia also provide support to victims of stalking and sex trafficking. In addition, some centers also function as dual domestic violence programs.
- **Rape crisis center advocates are an integral and necessary part of providing a victim-centered response to sexual assault.** Their understanding of the impact of sexual assault on survivors, sexual assault dynamics, and challenges that survivors often face post-assault positions them to effectively provide services to and advocacy for victims to meet their wide variety of needs.
- **For rape crisis center advocates, it is the victim—not the needs of systems—who identifies the outcome sought through advocacy strategies.** Advocates do not encourage or discourage victims from reporting/participating in the criminal justice system or from having a medical forensic examination to collect evidence. Rather, they assist victims in making informed choices. In every case, victims choices and needs determine how advocates proceed. Advocates support victims no matter what they decide about participating in other systems.

Best practice calls for trained rape crisis center advocates to accompany victims through the health care and criminal justice systems (if victims request the support), in addition to their other roles. Rape crisis center advocates can help victims navigate these systems, provide education about the dynamics of sexual assault, and assist victims in understanding their options and accessing other services within the community to address their self-identified needs. Most importantly, **rape crisis center advocates bear witness to victims' experience—they listen, believe, empower, and respect each victim's choices.**

The role of community-based advocates in response to sexual assault is crucial. No other discipline's primary function is to solely advocate for the best interests and needs of victims.

Multidisciplinary Response and Support

- **Evidence Collection Options.** In West Virginia, victims of sexual assault have options regarding forensic evidence collection. They may decline evidence collection entirely, permit certain types of evidence collection but not others, or choose to have evidence collected without immediately reporting the assault to law enforcement (see the [WVFRIS website](#) for details). With this option, the evidence is submitted to Marshall University Forensic Science Center, where until the victim chooses to report for an initial period of 20 years. Of course, victims can choose to have evidence collected and report the assault to law enforcement. With this option, the kit is submitted for testing to the West Virginia State Police Forensic Laboratory within 30 days of collection or as soon thereafter as practical. Victim advocates and SANEs play a crucial role in supporting victims through this process by explaining these choices, ensuring that victims' autonomy is respected, and providing emotional support before, during, and after the exam.
- **False Reporting.** A false allegation is a reported crime to a law enforcement agency that a full investigation factually proves never occurred. A false allegation or false report is distinctly different than a mistake, faulty memory, or a trauma response. The intentional false allegation of a witness is and should be treated differently from a decision to recant or withdraw a complaint. **Research shows that false reports of sexual assault are relatively low, similar to rates found in other violent crimes—between 2-8% of reports (see the [WVFRIS website](#) for more information).**
- **Recantation.** When a victim recants, service providers should collaborate to understand whether a recantation results from a system failure, witness tampering, or other factors outside of the control of investigators or responders. The prosecutor needs to exercise compassion and, if appropriate, recommend resources or involve other members of the SART. Prosecutors faced with recantation should assess the viability of their case and develop a plan to educate the jury about recantation, if necessary. In these cases, advocates have a critical role in re-engaging with victims to offer continued support.
- **Law Enforcement/Prosecution Collaboration.** Victim disclosures unfold over time, often revealing new details as trust is built. Prosecutors and investigators must review reports carefully, work together to identify gaps in the evidence, and coordinate with SANEs to ensure that forensic findings are clearly documented and explained. Rape crisis center victim advocates can help clarify victim concerns, assist with safety planning, and support communication between victims and responders. Early collaboration among all parties increases the likelihood that evidence is preserved, victims are supported, and cases move forward effectively.
- **Supporting Victims Through the Legal Process.** Supporting victims is a shared responsibility. Rape crisis center victim advocates prepare victims for the emotional impact of engaging with the legal system, accompany them to interviews and hearings when desired, and provide crisis intervention. Prosecutors and law enforcement explain investigative and court procedures in clear, victim-centered language. Together, the team should:

- Respect victims' limits emotionally, cognitively, and psychologically.
- Connect victims with resources such as advocacy, housing, or other public assistance, crime victim compensation, and other social services.
- Encourage victims to access a rape crisis center advocate for emotional support during interviews and proceedings.
- Educate victims about each step of the investigation and prosecution, including constitutional and statutory rights, anticipated timelines, and possible outcomes.
- Prepare victims for hearings, testimony, and possible media involvement.
- Educate victims about the legal limits of confidentiality and the potential consequences of sharing case details outside of the criminal justice system.
- Clarify the roles of prosecution, defense, investigators, and medical/forensic professionals.

SART REVIEW

Regardless of the case outcome, multidisciplinary reviews of what went well and what could be improved in the future provide valuable insight into sexual assault prosecution and should be utilized when possible. Collectively, the team needs to reflect on successes and improvements in the SART process. All team members need to exercise professionalism and respect the roles of other members.

Systems Improvement

(In part from NSVRC)

Systems Consultation

A systems consultation is one effective monitoring tool to address and solve, as a team, issues that arise in response to a sexual assault. This process is similar to a case review. But to underscore the commitment to focus on the system's response to victims rather than on victims, this process is referred to as a "systems consultation." The focus, then, is on how systems implement protocols, how protocols address victims'/case needs, and how or whether the protocols are appropriately written.

This is an important area for SARTs to address, but it requires thoughtful facilitation. Conversations about what is not working within a team or addressing conflict can impact relationships if not handled carefully. Teams should consider who is best positioned to facilitate these discussions and may want to consult supervisors or engage a partner with positional authority or facilitation experience. Utilizing a team member not typically involved with the system being evaluated, such as a Title IX Coordinator or counselor, may help maintain a collaborative environment. Consider a grounding statement for the team to reflect on and agree to, such as the one below:

"Regardless of what we discover, we understand and truly believe that everyone did the best job they could, given what they knew at the time, their skills and abilities, the resources available, and the situation at hand."

--Norm Kerth, Project Retrospectives: A Handbook for Team Review

Consider additional guidance about this monitoring tool:

- **Ideally, systems consultation is a standing item for team meetings.** Some teams ask those present at the outset of a meeting if there are issues for systems consultation and then manage the meeting time to reserve sufficient time for these issues.
- **Before beginning systems consultation, have a team discussion about the process, expectations, and other relevant issues the team identifies.** Discuss/plan for how information will be presented to team members without raising their defenses. It is likely that, as problems arise, some members may feel put on the spot. Remember that no one agency or person is to be targeted. The question is "What is missing from the protocol?" or "Why was the protocol not followed in this instance?"
- **Establish rules that ensure victim privacy.** If possible, ask victims for permission to bring questions relevant to their case to the team. If that is not possible, present issues to the team without identifying the victim. Understandably, others at the table may identify a victim by the details of the systemic breakdown. It is a breach of confidentiality to use the victim's name in a discussion about issues without the victim's written consent
- **Establish a process for recording the discussion, proposed solutions, and how the team will be updated on the results of the systems consultation.** Maintain an accessible record for review if similar issues should arise in the future.

Examples of system consultation issues that teams have addressed might include:

- Advocacy services are not being offered to victims. If this is written into the protocol, why is it not being followed? Is it related to a lack of referrals? Distrust of the rape crisis center? Questions about the professionalism of advocates? A desire not to “complicate things” by calling the advocate? Concerns about violating victim privacy laws? Each of these can also be discussed within the agreed-upon protocols.
- SARTs with both community-based and system-based advocates may run the risk of role confusion. These teams should ensure disciplines are clearly defined and delineated via cross-training, MOUs and interagency agreements, and clear communication and referrals.
- Many initial reports from victims do not get referred by law enforcement to the prosecutor for charges. Are protocols being followed? Is there a process for a second opinion? Are there similar characteristics about these reports that may indicate a barrier in the system?
- A majority of cases referred to the prosecutor are denied charges, potentially due to factors such as the quality of investigations, unwillingness of the prosecutor’s office to bring charges, lack of second-opinion processes, victim recantation, or jury pool dynamics, all of which can be examined and addressed constructively by the team.

Preparing for Systems Consultation. The background for systems consultation is to have an active interagency agreement or MOU that makes it clear that all parties are committed to improving the systems response to sexual assault. The agreement uses the power of the collaborative team to elicit change. The discussion needs to be organized to ensure that no one is personally “attacked” and that the desired victim-centered response is the intended outcome. This can be accomplished by:

- Coming to the table with a degree of neutrality, setting aside personal or agency-specific perspectives, and listening with objectivity.
- Ensuring the issue to be discussed is a system’s response issue rather than a victim issue.
- Being prepared for the discussion: Organize thoughts about the system issue. Address the issue prior to the meeting with the agency or supervisor of the source of the issue. Gather as many facts as possible. Focus on the agency-level approach, not the individual. Maintain confidentiality of victims. Stay focused to present the issue concisely and carefully. Avoid jargon, accusatory statements, falling back on history, etc. Present the issue and look for resolutions or steps toward resolution in future cases. Take notes. What is the system issue? What will be the follow-up? How does this affect the written protocols?

If an issue has just happened before the meeting and no discussion with the parties involved has occurred, this is probably NOT the time to bring the issue to systems consultation. Take time to gather the facts and put emotions in perspective before bringing the discussion to the team.

When the issue is about an individual response to a victim rather than a process concern, the issue needs to be addressed with that person. If concerns persist, the issue should be brought to the attention of their supervisor. This could become a system issue if the supervisor or agency refuses to intervene and deal with the performance issue. If/when that becomes clear,

the overall issue needs to be brought to the team. This would indicate an unwillingness to abide by the interagency agreement.

Making and Documenting Decisions. Suggestions include:

- Teams can keep a notebook, log, or other documentation method to ensure that system consultation issues and their resolution are available for review. Take notes that identify the person/agency bringing the issue forward, details of the discussion, and next steps/solution, if any.
- The team may decide they need to talk with another agency that is not represented at the meeting. WVFRIS can provide confidential consultation and assist with facilitating a process that feels safe.
- The team could decide that the issues are not in their purview and choose not to address them.
- The team may decide that the issue raised should be addressed in written protocols. Decisions must be made about how to move forward, incorporating this into the protocols.
- Often, a system issue may be resolved during the fact-finding time before presentation to the group. If that is the case, there is no need to revisit the issue in a systems consultation. A summary of the problem and the solution, and the process taken to arrive at the solution, can be presented to the entire group. This also needs to be documented for future reference.

SART Facilitator's Role in Systems Consultation.

- Make sure your team has talked about doing a systems consultation. Do they understand the ground rules? The rules about privacy for victims? Have new team members been oriented to the process?
- Invite team members before or at the outset of a meeting to let you know if they have a systems consultation issue to bring to the group. Decide how much time to reserve to give proper attention to the issue. Ask the person who is bringing the issue to frame the discussion for team members.
- Hold the team accountable for not using victim-identifying information. It is always best if a victim gives you a release to talk about a system issue involving them, but without that release, a careful presentation is also appropriate. Also, monitor the tone of the discussion to ensure that specifics about the victim that are not relevant to the issue at hand are not shared.
- Assess the progress of the discussion and make sure it moves from framing the issue to problem-solving. Listen for repetition. Are the same issues being hashed over repeatedly? Is no new information coming out? If so, it might be useful to ask, "Have we heard all we need to hear to move on to problem solving?" Help the group be specific about what course of action to follow, who is doing what, and how follow-up will look/occur.
- Summarize the decisions at the end of the discussion to ensure nothing has been misunderstood.

Survivor Input. Survivor input is an essential component of the SART's goal setting, strategic planning, and evaluation. Victim impact must be a priority when developing and implementing

protocols. However, gathering survivor feedback can be challenging for many reasons, including the survivors' privacy and confidentiality concerns, safety considerations, reluctance to engage with systems, and limited opportunity to comfortably provide feedback. Nevertheless, it's important to have a framework in place for survivors to provide feedback on the SART response. This can be done in a variety of ways:

- Confidential surveys of victims through the rape crisis center provide a venue to inquire about victims' experiences. Ensure that surveys are accessible, both in language preference and literacy level, and can be submitted anonymously and confidentially.
- Consider hosting forums or focus groups that provide survivors and community members a venue to provide feedback to system partners. In planning for such an event, teams should ensure that survivor safety needs are considered and that onsite advocacy services are available should someone need to debrief or discuss resources.
- If there is access to a private consultant, allow them to conduct research and make recommendations for improvement based on survivor feedback. Researchers might explore: Are there concerns with safety planning and implementation? How effective is victim advocacy? What was their experience when engaging with law enforcement, prosecutors, victim advocates, and SANE nurses? What was their experience navigating through the judicial system process (if they did)? What was their experience in their case/resolution of their case? Evaluate whether there is a need for follow-up/aftercare with any involved survivors.

Decision Making and Conflict Resolution

"Despite the best intentions of SART members to cooperate, disagreement among disciplines is inevitable. Team members bring personal and professional experiences, agendas, beliefs, and perceptions into dialogues. If you cannot resolve conflicts or disagreements, you could diminish your SART's effectiveness." (NSVRC)

Several basic strategies can help teams resolve conflicts (NSVRC):

- **Be open:** Address problems openly rather than allowing them to go unresolved.
- **Stay focused:** Adhere to a decision-making philosophy grounded in what is best for the victim and what is in the best interest of the community.
- **Clarify interests:** Encourage team members to explore the interests of opposing viewpoints and attempt to find common ground, all while keeping the victim as a priority concern.
- **Generate options:** If common ground does not seem apparent, brainstorm ways to think in new and creative directions. Rather than getting stuck at an impasse of opposing viewpoints, find opportunities to work through issues proactively to ensure a victim-centered response.
- **Find the middle ground:** Encourage those with opposing opinions to identify the best alternative recommendation while factoring in costs, time, outcomes, and compliance issues.

- **Be patient:** Recognize that some problems do not lend themselves to immediate resolution.

See NSVRC's [*Navigating Disagreement in a SART*](#). Also see the chart below.

Reason for Disagreement	Potential Underlying Cause	Possible Solutions
Need more information Too many details	Repeated requests for additional details could signal resistance rather than a need for more detail. During discussions, SART members may offer too many details that block discussions.	Find out what level of detail is needed to make a decision. Ask individuals what the most important issue is to address, then focus on that issue.
Not enough time Not practical	Some team members may resist reaching a consensus because it takes too much time. Although time is often a problem, a preoccupation with it can signal resistance. Members may feel the process of reaching consensus never works because SART members have different roles and responsibilities that cannot be negotiated.	Ask which topic should be given priority. Ask if there are important issues that have been overlooked.
Confusion	An inability to understand an issue under discussion can be a way to block the process	Clarify whether the confusion is about the issues or the process.
Silence Moralizing	Silence among team members doesn't imply agreement; it can be a sign that the process isn't working and that members are refusing to participate. When discussing controversial topics, team members may start to lecture, which can offend and stifle others.	Encourage everyone to share their ideas and opinions. When members of the group are locked in an "either/or" conflict, calling for a "third way" that bridges and blends

		opposing viewpoints can be helpful.
Push for solutions	Some members may complain that the ideas being discussed are impossible or may demand solutions rather than ideas. This could be about what members are unwilling to do rather than what cannot be done.	Reframing, or providing another perspective, can often help individuals move forward.

Additional Resources

Samples

SART Vision Statement

For this sample, visit the Cascade [guide](#) for a process of developing a vision statement that includes examples.

- To ensure all sexual assault victims accessing services in [Name] County receive a continuum of quality care through unified efforts.
- To promote a systemic response that holds sexual offenders accountable and fosters a community sensitive to the needs of sexual assault survivors.

SART Mission Statements

- *Carver County, Minnesota:* To ensure the coordination of a consistent, respectful, victim-centered response to sexual violence in Carver County.
- *Mahoning County, Ohio:* To extend a healing and supportive attitude and approach to victims of sexual assault, their families, and the community by making this crime a priority issue, by providing comprehensive and compassionate care to the victims, and by holding offenders accountable.
- *San Diego, California:* To improve the provision of services to victims of sexual assault by providing sensitive, efficient, interdisciplinary services and to ensure accurate evidence collection to promote the apprehension and prosecution of perpetrators.
- *Tri-County SANE/SART Program, Ohio:* A collaborative effort between Erie, Huron, and Ottawa County victim assistance programs, prosecutors' offices, law enforcement, and hospitals. The primary mission of the SANE/SART Program is to meet the needs of sexual assault victims by providing compassionate, prompt, culturally sensitive, comprehensive forensic evaluation and treatment by trained professional nurse experts within the parameters of Ohio State Law and the SANE standards of the International Association of Forensic Nurses.
- *Wichita SANE/SART, Kansas:* The purpose of the Via Christi Regional Medical Center Wichita Vicinity SANE/SART Program is to facilitate a community-based collaborative response to all victims of sexual assault by providing immediate and follow-up medical, advocacy, and criminal justice services ethically and compassionately.
- *Cabell County SART, West Virginia:* The mission of the Cabell County Sexual Assault Response Team (SART) is to deliver a compassionate, coordinated, and victim-centered response to sexual violence. We strive to minimize trauma, enhance the collection and preservation of evidence, strengthen the investigative process, and ensure accountability for offenders. Through our multidisciplinary approach, we aim to support survivors by always starting from a place of believing, fostering a safe and nonjudgmental environment with every interaction, respecting survivor decisions, and each other.
- *Wetzel County SART, West Virginia:* The Wetzel County Sexual Assault Response Team (SART) is a survivor-centered interdisciplinary team that encourages collaboration between agencies to serve all victims of sexual violence. The mission of our SART is to promote a healing and supportive approach to assist the transition from victim to survivor, preserve

evidence that advances the apprehension and prosecution of perpetrators, and provide access to community resources that will stabilize and promote the survivor’s well-being.

SART Goals

- *Goal #1:* The SART will ensure victims feel believed, heard, and supported throughout their interaction with the criminal justice system.
- *Goal #2:* The SART will provide a consistent, collaborative response to all sexual assault cases to improve the justice system response to survivors by discussing processes and protocols.
- *Goal #3:* The SART will collect and review data on the SART response to identify any gaps in the protocol or any training needs.

Statement of Collaboration among SART Agencies

Brooke/Hancock Sexual Assault Response Team Statement of Collaboration

Mission Statement: The Brooke Hancock Sexual Assault Response Team (SART) is a multidisciplinary team committed to working together to ensure a consistent, holistic, victim-centered response to victims/survivors of sexual violence. Through nurturing and sustaining opportunities for collaboration, we will ensure the rights and safety of victims and accurate evidence collection to promote the apprehension and prosecution of perpetrators.

The Brooke/Hancock SART is committed to ongoing collaboration, and participating agencies pledge to:

1. Identify multidisciplinary representation from each agency that is a stakeholder in addressing sexual assault occurring within Brooke and Hancock.
2. Engaging in an ongoing dialogue through regularly established meetings with identified representatives to promote enhanced communication and increase understanding of the roles and responsibilities of all participants.
3. Make efforts to discuss and implement innovative, victim-centered practices established by the team and address service gaps as they are discovered.

Agency

Name

Signature

SART Memorandum of Understanding (MOU)

Sexual Assault Response Team Cooperative Working Agreement

Note that this sample from Georgia has been tweaked to make customization easier.

The Sexual Assault Response Team (SART) is made up of local agencies responsible for responding to victims of sexual assault. This working agreement is recognized as a cooperative, collaborative commitment among the agencies to directly support a

multidisciplinary, coordinated response to [adult/adolescent/child] victims of sexual assault. Commitment is acknowledged by the signature of each agency's representative.

For this collaboration, [explain the victim population that the SART works with (e.g., adult/adolescent/child and acute versus nonacute) as per your state's definitions and policies].

The Prosecution Office agrees to [customize bullet points for your jurisdiction]:

- Convene a meeting, at least annually, to discuss the implementation of SART protocols and policies.
- Establish guidelines in collaboration with team partners for the community's response, including the collection, preservation, and secure storage of evidence from the sexual assault evidence collection kit.
- Ensure an annual review of established guidelines.
- Designate a liaison to participate actively on the SART.
- Refer sexual assault victims, family members, and friends to the rape crisis center for crisis intervention, advocacy, and counseling services, as appropriate.
- Allow the rape crisis center advocate, unless refused by the victim, to be present during interviews.
- Promote policies and practices to increase arrest and prosecution rates for criminal sexual offenses, including non-stranger sexual assault.
- Use sexual assault nurse examiners (SANEs) as witnesses during sexual assault trials, as appropriate.
- Provide reasonable notification of upcoming trials to the health care provider and/or SANE who will be called to testify.
- Contact the health care provider and/or SANE before testimony to review the case.
- Participate, as appropriate, in cross-training with allied professionals regarding response to sexual assault.

The Rape Crisis Center agrees to [customize bullet points for your jurisdiction]:

- Designate a liaison to participate actively on the SART.
- Dispatch, upon request of the victim or someone calling on behalf of the victim, a trained sexual assault victim advocate to the hospital or law enforcement agency within a reasonable period of time (e.g., 30 minutes, not to exceed 1 hour).
- Provide trained advocates to meet with victims, family members, and friends at the hospital.
- Provide crisis intervention, advocacy, counseling, criminal justice information and support, and court preparation and orientation for sexual assault victims, as appropriate.
- Coordinate with any other involved victim assistance services for victims, family members, and friends, as appropriate.
- Refer sexual assault victims to the hospital, as appropriate.
- Follow established protocols for advocates in the examining room when requested by the victim.
- Support the development/annual review of the community's guidelines for sexual assault response.
- Participate, as appropriate, in cross-training with allied professionals on response to sexual assault.

The Law Enforcement Agency agrees to [customize bullet points for your jurisdiction]:

- Designate a liaison to participate actively on the SART.
- Refer all acute victims to the hospital and/or SANE program for medical treatment and/or a medical/forensic exam.
- Inform victims that they are not required to make a report or talk to a law enforcement officer to have a medical/forensic exam.
- Transport or arrange for transport of victims to the hospital and, once the medical/forensic exam is complete, transport or arrange transport of victims to a safe location.
- Follow established protocol to notify the hospital and/or SANE program that a victim is being transported.
- Follow established protocol for notifying the rape crisis center of the need for assistance with a victim.
- Perform a suspect evidence collection kit or provide a kit to the SANE program to perform, as appropriate.
- Follow the agency-established protocol regarding evidence collection and storage.
- Maintain and revise, as appropriate, written agreements with the hospital and/or SANE program to delineate services to be provided.
- Coordinate interview processes and/or conduct joint interviews with the hospital and/or SANE, as local protocol and victim dictate to be appropriate.
- Allow the rape crisis center advocate or support person, unless refused by the victim, to be present during interviews and/or other communications with officers/investigators.
- Promote policies and practices that increase arrest and prosecution rates for criminal sexual offenses, including non-stranger sexual assault.
- Support the development and annual review of the community's guidelines.
- Participate, as appropriate, in cross-training with allied professionals on response to sexual assault.

The SANE/Trained Health Care Provider agrees to [customize bullet points for your jurisdiction]:

- Designate a liaison to participate actively in the SART.
- Promote a reasonable time (e.g., 60 minutes or less) from the time the call is received to the time the trained health care provider and/or SANE arrives at the hospital.
- Conduct medical/forensic examinations for sexual assault patients in accordance with all agreed-upon protocols and procedures.
- Assure that the rape crisis center has been notified that a victim is being transported or has arrived.
- Introduce the victim to the rape crisis center advocate and then allow the advocate to explain services to the victim and offer hospital accompaniment.
- Encourage/support use of rape crisis center advocates for sexual assault patients as appropriate and regardless of the patient's decision regarding contact with law enforcement.
- Maintain chain of custody of forensic evidence and transfer to the crime lab or Marshall University Forensic Science Center.

- Ensure an adequate supply of sexual assault evidence collection kits is available.
- Be available to criminal justice professionals to review the case.
- Maintain contact and communication with criminal justice professionals.
- Support the development and annual review of the community's guidelines.
- Participate, as appropriate, in cross-training with allied professionals on response to sexual assault.

The Health Care Facility agrees to [customize bullet points for your jurisdiction]:

- Designate a health care provider trained in conducting medical/forensic exams, preferably a SANE, to participate actively on the SART.
- Provide trained health care providers and/or SANEs to conduct medical/forensic examinations for victims in accordance with all agreed-upon protocols and procedures.
- Encourage and support nursing staff to obtain the education and clinical experience necessary to receive a certificate of completion of an approved SANE training.
- Provide time and private space for rape crisis center advocates to establish relationships with the victim, their family/caregivers, and friends when appropriate.
- Provide private examination rooms and supplies, including sexual assault evidence collection kits, necessary for the completion of the medical/forensic examinations.
- Allow for a SANE to educate hospital staff on procedures for caring for sexual assault patients.
- Ensure that billing procedures for forensic exams are compliant with the policies and procedures developed by the WV Forensic Exam Fund.
- Support the development and annual review of the community's guidelines.
- Participate, as appropriate, in cross-training with allied professionals on response to sexual assault.

This agreement is effective on (insert month, day, and year) and shall remain in effect until any party terminates its commitment in writing. The agreement will be reviewed annually. Any modifications to the agreement must be mutually agreed upon by all parties, documented in writing, and acknowledged by a signature of each agency's representative.

Sexual Assault Forensic Exam (SAFE) Plans

The Sexual Assault Forensic Examination (SAFE) Commission was created under West Virginia Code §15-9B-1, 9B-2, and 9B-3. Its purpose is to establish, manage, and monitor a statewide system to facilitate the timely and efficient collection of forensic evidence in sexual assault cases. One duty of the SAFE Commission is to support county prosecutors in establishing a SAFE board, which creates and implements a SAFE plan, outlining the protocol for response to sexual assault. In many counties, the local SART establishes and maintains the SAFE plan, as SART members are the primary responders identified in the plan. This means local victims of sexual assault have access to medical forensic exams, advocacy services, law enforcement reporting options, and accessible transportation. The role of the SART is to collaborate in the development and implementation of a sustainable plan, ensuring that member agencies train internally and implement it as part of onboarding procedures. The SART also should review the plan at least annually to ensure that the outlined procedures are being followed, and update the plan as needed in collaboration with the prosecutor.

Training Resources

[AEquitas](#), with a staff primarily comprised of former prosecutors, seeks to improve access to and the quality of justice in sexual violence, intimate partner violence, stalking, and human trafficking cases through an informed, practical, and innovative approach. See their [Training and Resource](#) offerings.

[End Violence Against Women International](#) (EVAWI) offers many free training tools and resources for law enforcement and allied professionals: an extensive resource library, Online Training Institute, Start by Believing campaign, SAMFE Virtual Practice, and webinars.

[International Association for Chiefs of Police \(IACP\), Proactive Approaches to Domestic and Sexual Violence and Police Response to VAW](#): The IACP offers a wide range of training tools on these topics, including training on understanding trauma in sexual assault investigations, report review checklists, guidelines/tip cards for sexual assault incident reports, model policy and training content guidelines, and a sexual assault supplemental report form.

[National Sexual Violence Resource Center \(NSVRC\)](#): This organization is the leading national entity providing information and tools to prevent and respond to sexual violence. Among other resources, it offers a [SART Toolkit](#)

[The SAFE Commission maintains a website](#) that provides links to completed county plans. SARTs should be aware of their county's SAFE plan, cross-train the team on response annually, and use it as a tool for evaluation of first response services.

[Sexual Assault Kit Initiative's Toolkit](#): This website contains free training material on topics such as multidisciplinary response, engaging victims, victim care, investigation, forensics, evidence tracking, prosecution, and research and evaluation.

[WVFRIS Sexual Assault Services Training Academy \(SASTA\)](#): SASTA's extensive free online training courses may be of interest to all SART members and their agencies. In addition to several courses on specific topics, the over 100 modules include foundational training materials for sexual assault victim advocates, sexual assault nurse examiners, and law enforcement interviewers.

References

- Basile, K.C., Smith, S.G., Kresnow, M., Khatiwada S. & Leemis, R.W. (2022). *The national intimate partner and sexual violence survey: 2016/2017 Report on sexual violence*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Brown, B. *Operationalizing your organization's values*. <https://brenebrown.com/operationalizing-your-orgs-values/>.
- Campbell, R. (2006). Rape survivors' experiences with the legal and medical systems: Do rape victim advocates make a difference? *Violence Against Women*, 12(1): 30-45.
- Campbell, R. (n.d.). The neurobiology of trauma. *Sexual assault kit initiative toolkit*. Through <https://sakitta.org/>.
- Coen, E. & Thompson, A. (2024). *Socio-emotional consequences of violent crime, 2022*. U.S. Department of Justice, Bureau of Justice Statistics.
- Dworkin E.R., Menon S.V., Bystrynski J, & Allen NE. (2017). Sexual assault victimization and psychopathology: A review and meta-analysis. *Clin Psychol Rev.*, 56:65-81.
- Grinberg, E. (9/25/2018). This is why people hesitate to report sexual misconduct. *CNN Health*.
- International Association of Chiefs of Police. (2019). *Body-worn cameras*. Alexandria, VA: Author.
- International Association of Chiefs of Police. (2017). *Sexual assault issues and concept paper: Sexual assault response policy and training content guidelines*. Alexandria, VA: Author.
- Lonsway, K. (2024). Understanding how trauma impacts behavior and memory: implications for victim interviewing. *Comprehensive victim interviewing: Helping victims retrieve and disclose traumatic memories* [training course]. End Violence Against Women International.
- Lonsway, K.A. & Archambault, J. (2012). *The 'justice gap' for sexual assault cases: future directions for research and reform*. *Violence Against Women*, 18 (2), 145-168.
- Minnesota Coalition Against Sexual Assault. (2017). *SART foundations: Mission statements, new or revisited*. St. Paul, MN: Author.
- Morabito, M., Williams, L.M., & Pattavina, A. (2019). *Decision making in sexual assault cases: replication research on sexual violence case attrition in the united states, 2006-2012*. Inter-university Consortium for Political and Social Research.
- National Sexual Violence Resource Center. (2018). *Sexual assault response team toolkit*. Harrisburg, PA: Author.
- Sexual Violence Justice Institute. *Role understanding activity lesson plan*. Available upon request at <https://www.mncasa.org/sexual-violence-justice-institute/>.
- Smith, S.G., Chen, J., Basile, K.C., Gilbert, L.K., Merrick, M.T., Patel, N., Walling, M. & Jain, A. (2017). *The national intimate partner and sexual violence survey: 2010-2012 state report*. Atlanta, GA: Centers for Disease Control and Prevention.
- Spohn, C., & Tellis, K. (2012). The criminal justice system's response to sexual violence. *Violence Against Women*, 18(2), 169-192.
- Start by Believing Campaign. (n.d.). *Start by believing: Participation of criminal justice professionals*. End Violence Against Women International.
- Tremblay, T. (2019). How the brain and body react to trauma. *Trauma-informed sexual assault investigation training*. Kansas Bureau of Investigation.
- Wisconsin Office of Crime Victim Services. (2023). *A compilation of best practice recommendations for sexual assault response teams*. Wisconsin Department of Justice.