

**Request Title: Statewide Sexual Assault Prevention Program**

**Utah Domestic Violence Coalition, requestor**

**Utah Department of Health Violence and Injury Prevention Program, proposed funding administrator**

**Request Amount & Source:**

<b>FY 2020 One-time</b>	<b>FY 2021 One-time</b>	<b>FY 2021 Ongoing</b>	<b>Total Request</b>
\$0	\$0	\$1,174,350	\$1,174,350

**1. What system or program is the focus of this request?**

The statewide non-profit victim service provider system and key stakeholder organizations who provide confidential services to survivors of domestic and sexual violence throughout Utah are represented by the Utah Domestic Violence Coalition (UDVC) for the purpose of this coordinated request. In total, we are a statewide team of 26 agencies (see page 2), seeking state funding support to prevent violence and abuse in families and communities statewide.

Per federal statute, UDVC is nationally recognized by the federal Office for Violence Against Women and the Office for Victims of Crime as an expert organization supporting best practices in victim advocacy throughout Utah. UDVC’s member programs provide direct services (including emergency shelter, community outreach and education, victim advocacy and case management, legal and housing support) to adult and child victims of domestic and sexual violence throughout Utah. Our member programs also work extensively in partnership with a range of organizations to bridge the gap in victim services throughout our state, especially in rural and diverse communities.

**2. Summarize the current budget for this system or program. If this is a new system or program, summarize the current budget for the line item and appropriation code(s) in which this new system or program will operate.**

The requested funding for the following agencies will allow us to provide early prevention education when adolescents are developing moral reasoning and social problem-solving skills, while attitudes and beliefs about violence are shaped, and when the development of respectful relationships can be cultivated. In addition to the estimated costs itemized by agency below, we also seek to add administrative costs for the funding agency (DOH VIPP) in the amount of \$19,000 for salary, \$14,000 Fringe for 1 FTE.

<b>Agencies Committing to Statewide Coordinated Prevention Programming</b>	<b>Request</b>
Canyon Creek Services, Cedar City	50,000
CAPSA, Logan	50,000
Carbon County	25,000
Center For Women and Children in Crisis, Provo/Orem	50,000

Centro de la Familia, Salt Lake City	50,000
Centro Hispano-Strengthening Families, Provo	50,000
Confederate Goshute Tribe, Ibapah	30,000
Dove Center, St. George	50,000
New Hope Crisis Center, Brigham City	50,000
New Horizons, Richfield	25,000
Peace House, Park City	50,000
PIK2AR, Salt Lake City and St. George	50,000
Rape Recovery Center, Salt Lake City	50,000
Safe Harbor, Kaysville	50,000
Seekhaven, Moab	50,000
South Valley Services, West Jordan	50,000
The Family Place, Cache County	50,000
TriCounty Health Dept.	30,000
Utah Domestic Violence Coalition	50,000
Utah Coalition Against Sexual Assault	25,000
Utah Navajo Health System Inc., Montezuma Creek	50,000
Valley Victim Services, Tooele	55,000
Weber State, Ogden	50,000
YCC, Ogden	50,000
YWCA, Salt Lake City	51,350
<b>Total</b>	<b>1,141,350</b>
Non profit 501c3 program	
Govt; Sovereign Nation, or University program	

**3. What problem would be solved with additional funding? Show historical data to support and quantify problem statement.**

Prevention Coordinators within these programs were eliminated or significantly reduced when the one-time TANF funding ended in June 2018. **Our ultimate goal is to rebuild the team of coordinated prevention providers and to stop interpersonal violence and abuse, especially sexual assault, before it begins.**

The Problem, quantified:

- Sexual assault costs Utah an estimated \$4.9 billion in one year<sup>1</sup>
  - Costs include: Medical care, mental health services, unplanned pregnancy, STIs, rape-induced substance abuse, suicidal behavior, self-harming behavior, property damage, pain and suffering, and loss of quality of life
- Victims of assault and violence are at higher risk for negative mental health conditions, including suicidality.
- Victims are at higher risk of addiction, often using substances as an escape or to self-medicate, attempting to cope with the symptoms of trauma and associated feelings of shame.
- Academic performance suffers and GPA influences academic retention for survivors of abuse and violence.
- Loss of productivity for victims in the workplace.
- Loss of tax revenue from lost income, impacting the economy.
- Higher rates of overall chronic health conditions. <sup>2</sup>

- a. Regaining the capacity to meet a growing need for prevention services, especially the statewide adoption of tested and proven prevention strategies developed during past periods of one-time state funding.
- b. Reduction of interpersonal violence and abuse including sexual assault, domestic violence homicide and suicide, and child abuse.
- c. Statewide adoption of standardized reporting and data collection and analysis about the impact of prevention strategies

#### **4. What has been done to solve this problem with existing resources? What were the results?**

This funding request is intended to replace one-time state funding (TANF) administered to this team of victim service organizations by the Department of Health and Department of Workforce Services which ceased on June, 30, 2018. The state's generous contribution of one-time state funding was contractually passed through DWS and DOH to over 20 statewide non-profit victim service providers and their partners to promote prevention education intended to address the prevalence of interpersonal violence and abuse which often includes sexual assault, domestic violence homicide and suicide, and child abuse.

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<sup>1</sup> Utah Department of Health, Violence and Injury Prevention Program "Cost of Sexual Violence Report", 2105.

<sup>2</sup> Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., . . . Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14(4), 245-258.

The US Center for Disease Control and Prevention uses a 4-step approach to address public health problems like sexual violence and abuse<sup>3</sup>:

1. Define the problem
2. Identify risk and protective factors
3. Develop and test prevention strategies
4. Assure widespread adoption

With the Utah Department of Health Violence and Injury Prevention Program and past one-time state funding, our team of programs and partners were able to achieve steps 1-3. **This ongoing funding request will help us achieve #4, assuring widespread adoption of proven prevention strategies throughout Utah.**

Please note, all UDVC member programs included in this request are currently managing agency budgets that include a mix of state, federal and private funding which will be used to leverage this requested ongoing state funding for prevention.

**5. How will new funding be utilized? What operational changes will be made to maximize new resources? Also, please summarize any legislation needed in conjunction with this incremental budget change request. Note: Agencies must coordinate all legislation through the Governor's general counsel.**

This new funding would be used by each program listed above to fund a qualified Prevention Coordinator and includes the cost of salary, benefits (if applicable) and administrative costs associated with the role. Prevention Coordinators work directly with a range of community programs including schools, faith-based organizations, private businesses and civic organizations to support awareness of positive relationships, healthy conflict resolution skills and awareness of resources through training, education and policy improvement.

Operational changes will include the support of statewide coalitions to support opportunities for Prevention Coordinators to meet regularly (at least quarterly) to share strategies, proven prevention programming, problem solve and improve data and analysis of prevention efforts.

We do not anticipate the need for legislation in conjunction with this incremental budget change request.

**6. What are the anticipated results or outcomes of how the new funding will be utilized? What measure(s), including quality, throughput, and costs, will be used to track the change over time? Is data currently available to support these measures?**

**We anticipate improved findings per the Utah Behavioral Risk Factor Surveillance System, a data system currently in place and managed by the Utah Department of Health, where we can assess**

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<sup>3</sup> Wilkins, N., Tsao, B., Hertz, M., Davis, R., Klevens, J. (2014). Connecting the Dots: An Overview of the Links Among Multiple Forms of Violence. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention Oakland, CA: Prevention Institute.

the following data points to track outcomes and results of this coordinated prevention programming:

- Percentage of Utah students reporting being verbally or emotionally harmed one or more times
- Percentage of Utah students reporting being physically hurt on purpose one or more times
- Percentage of Utah students reporting experiencing some form of dating violence
- Percentage of of Utah students reporting they were bullied on school property
- Percentage of of Utah students reporting they were electronically bullied

#### **7. What are potential negative effects if the funding is not received?**

According to the FBI, Utah ranks 9<sup>th</sup> in the nation for reported rape. Without dedicated prevention funding, we will continue to be limited to reactive work and the provision of supportive services for victims and survivors, and we will miss a critical opportunity to be proactive in our efforts to decrease the prevalence of interpersonal violence, especially sexual assault and abuse. Without dedicated, coordinated, proven prevention programming statewide, the prevalence of sexual assault in Utah communities will continue to have a number of serious consequences, especially for our youth:

- Academic performance suffers for sexual assault/harassment victims. Studies indicate victims skip class, drop a course, avoid certain buildings on campus, achieve lower test scores/grades, and experience doubts about academic capability.
- 14.3% of students who had experienced rape during their first semester had a GPA below 2.5 at the end of second semester compared with 5.9% of those who were not raped.<sup>4</sup>
- 27.9% Of Utah students reported experiencing some form of dating violence.<sup>5</sup>

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<sup>4</sup> Mengo, Cecilia & Black, Beverly. (2015). Violence Victimization on a College Campus: Impact on GPA and School Dropout. *Journal of College Student Retention: Research, Theory & Practice*. 18.

<sup>5</sup> Behavioral Risk Factor Surveillance System, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. Available on line at [www.cdc.gov/brfss](http://www.cdc.gov/brfss)