NAESV
THE NATIONAL ALLIANCE TO END SEXUAL VIOLENCE

The National Alliance to End Sexual Violence provides a critical voice for sexual assault advocates in Washington, D.C.

The Costs and Consequences of Sexual Violence and Cost-Effective Solutions
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The best available research tells us that crime victimization costs the United States $450 billion annually (National Institute of Justice, 1996). Rape is the most costly of all crimes to its victims, with total estimated costs at $127 billion a year (excluding the cost of child sexual abuse). In 2008, researchers estimated that each rape cost approximately $151,423 (DeLisi, 2010). Sexual abuse has a negative impact on children's educational attainment (MacMillan, 2000), later job performance (Anda et al., 2004), and earnings (MacMillan, 2000). Sexual violence survivors experience reduced income in adulthood as a result of victimization in adolescence, with a lifetime income loss estimated at $241,600 (MacMillan, 2000). Sexual abuse interferes with women's ability to work (Lyon, 2002). Fifty percent of sexual violence victims had to quit or were forced to leave their jobs in the year following their assaults due to the severity of their reactions (Ellis, Atkeson, & Calhoun, 1981). In 2008, violence and abuse constituted up to 37.5% of total health care costs, or up to $750 billion (Dolezal, McCollum, & Callahan, 2009).

Appropriate and Early Intervention Can Mitigate Costs and Consequences

A 2006 study found that when victims receive advocate-assisted services following assaults, they receive more helpful information, referrals, and services and experience less secondary trauma or re-victimization by medical and legal systems (Campbell, 2006). Furthermore, the same study found that when advocates are present in the legal and medical proceedings following rape, victims fare better in both the short- and long-term, experiencing less psychological distress, physical health struggles, sexual risk-taking behaviors, self-blame, guilt, and depression. Rape survivors with advocates were 59% more likely to have police reports taken than survivors without advocates, whose reports were only taken 41% of the time.

Funding Sexual Assault Services is Paramount

The Violence Against Women Act (VAWA) has helped to reduce the societal cost associated with the criminal victimization of women throughout the U.S. Based on researchers' cost-benefit analysis, the net benefit of VAWA is estimated at $16.4 billion (Clark, Biddle, & Martin, 2002). Approximately $14.8 billion in victimization costs are averted due to VAWA, which only costs $1.6 billion to implement. At the individual level, VAWA is estimated to cost $15.50 per U.S. woman, yet saves $159 per U.S. woman in averted victimization costs, suggesting VAWA to be a fiscally efficient program.

Without rape crisis advocates, victims are less likely to receive critical services (such as referrals to community-based services, filing of police reports, information about sexually transmitted diseases and pregnancy) in the immediate aftermath of their attacks. Additionally, without an advocate present, secondary victimization, or being blamed or re-victimized by first responders, is more likely in these systems. Both an absence of helpful services and secondary victimization have been linked to increased psychological distress, physical health struggles, sexual risk-taking behaviors, self-blame, guilt, depression, and a reluctance to seek further help among rape survivors. Over time, these consequences can take an emotional and financial toll on victims and the larger society. Supportive, non-victim-blaming interventions provided immediately following rape may help to prevent complex, long-term health and mental health struggles among victims and survivors. Therefore, rape crisis center advocacy funded by such programs as the Sexual Assault Services Program (SASP), Victims of Crime Act (VOCA) and the Preventive Health and Health Services Block Grant can be considered a cost-saving and fiscally responsible approach.

Rape Crisis Services are Scarce

According to a 2010 Internet survey by the National Alliance to End Sexual Violence of 644 rape crisis centers from all 50 states, Washington D.C. and two territories:

- 56% of rape crisis centers had been forced to reduce staff in the past year.
- 25% of rape crisis centers had a waiting list for crisis services.
- 66% of rape crisis centers had to reduce prevention education/public awareness efforts because of funding losses.
- 61% of rape crisis centers had three (3) or less staff.
- 60% of rape crisis centers indicated they need at least four (4) full-time staff to meet the current demand for sexual assault services in their community.
- 93% of rape crisis center employees were paid less than $40,000 a year.

Full funding for cost-effective programs such as the Sexual Assault Services Program in the Violence Against Women Act and the Victims of Crime Act in the US Department of Justice as well as the Preventive Health and Health Services Block Grant in CDC would equip rape crisis centers to address victims' needs and reduce the long-term costs and consequences of rape for both victims and communities.

For more information, contact Terri Poore, Vice President, National Alliance to End Sexual Violence, tpoore@fcasv.org, (850) 363-2918.

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