

Now We Know: Assessing Sexual Assault Criminal Justice Case Processing in an Urban Community Using the Sexual Assault Nurse Practitioner Evaluation Toolkit

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ABSTRACT

Campbell and colleagues developed an evaluation Toolkit for use by sexual assault nurse examiners (SANEs) to assess criminal case outcomes in adult sexual assault cases seen by SANE programs (Campbell, Townsend, Shaw, Karim, & Markowitz, 2014; Campbell, Bybee, et al., 2014). The Toolkit provides step-by-step directions and an easy-to-use statistical program. This study describes implementation of the Toolkit in Salt Lake County, the first site outside the pilot sites to utilize the program. The Toolkit revealed that, in Salt Lake County from 2003 to 2011, only 6% of adult sexual assault cases were successfully prosecuted. These findings prompted multiple community discussions, media attention, and a call to action to improve the investigation and prosecution of adult sexual assault cases. The primary purpose of this case report is to encourage other SANE teams and communities to use the Toolkit by sharing the successful experience of Salt Lake County in implementing the Toolkit.

Video Abstract available for additional insights from Dr. Valentine (see Supplemental Digital Content 1, <http://links.lww.com/JFN/A19>).

KEY WORDS:

evaluation; investigation; prosecution; rape; sexual assault; sexual assault nurse examiners (SANEs); toolkit

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Sexual assault nurse examiners (SANEs) are frequently part of their communities' multidisciplinary, collaborative team addressing issues related to sexual violence. As members of this team, research indicates that SANEs positively impact prosecution outcomes through high-quality evidence collection and preservation, expert court testimony, encouraging collaboration between agencies, and empowering patients (Campbell et al., 2007; Campbell, Patterson, & Fehler-Cabral, 2010). Although prior studies have found that communities with established SANE programs have improved their sexual assault (SA) prosecution rates, few SANE programs have been evaluated largely because of resource constraints (Campbell, Bybee, Ford, Patterson, & Ferrell, 2009; Campbell, Patterson, & Bybee, 2012; Campbell, Patterson, & Lichty, 2005; Crandall & Helitzer, 2003). To address this evaluation gap and to encourage research by practicing forensic nurses, Campbell, Townsend, Bybee, Shaw, and Markowitz (2013) developed the SANE Practitioner Toolkit providing a step-by-step guide and statistical program to evaluate criminal

case outcomes in adult SA cases in which the victim received care and evidence collection within a SANE program. The Toolkit was implemented in six pilot sites before its publication for use by forensic nursing programs (Campbell, Bybee, et al., 2014; Campbell, Townsend, Shaw, Karim, & Markowitz, 2014). An article describing the Toolkit and its development was published in the *Journal of Forensic Nursing* (Campbell, Townsend, et al., 2014).

The aim of this case report is to provide information on the first site outside the pilot sites to implement the SANE Toolkit, Salt Lake County, Utah, and (b) the multidisciplinary impact of these findings in the hope that other SANE programs will utilize the Toolkit to benefit their communities. The primary study question answered by implementation of the Toolkit is the following: What are the final criminal case outcomes in adult SA cases seen by SANE programs? A simple question, but the answer to this question is unknown by most communities in the United States. Discovering the answer to this question impacted our community through increased multidisciplinary discussions, media attention on issues related to SA, legislative actions and funding, and increased criminal justice system responses in adult SA cases.

Description of the Toolkit and Evaluation Process

The Toolkit is divided into three sections based on the chosen design method: pre-SANE/post-SANE, post-SANE only, and ongoing evaluation (Campbell, Greeson, Karim, Shaw, & Townsend, 2013). Guidelines for choosing which design method is best for a SANE program are clearly described within the Toolkit in the first step of the Toolkit implementation. Each design method contains five additional steps to comprise six steps of evaluation. This case report describes the experiences of one SANE program in an urban community in implementing these six steps. For a full description of the Toolkit steps, please access the complete Toolkit through the National Criminal Justice Reference Service: <https://www.ncjrs.gov/pdffiles1/nij/grants/240917.pdf>.

The Six Steps of Evaluation

Step 1: Understand the Evaluation Design

The first step was to understand the evaluation design that best fit the study for our SANE program and community: pre-SANE/post-SANE, post-SANE only, or ongoing evaluation (Campbell, Greeson, et al., 2013). The post-SANE-only design was the best option for Salt Lake County as obtaining data on SA cases before the establishment of the primary SANE program was not feasible. Specifically, victims of SA were seen by emergency department providers at a multitude of different hospitals before 2002 when the SANE program began. We were unable to obtain the pre-2002

records. Ongoing evaluation was not chosen as we desired retrospective data on criminal case outcomes to evaluate what has occurred in the past in our community. We wanted baseline data to serve as a comparison in future years. The ongoing evaluation design also did not fit with the workload of the researchers as they could commit to a block of time to do the initial evaluation but not commit to obtaining and entering data for an ongoing study.

Step 2: Identify the Evaluation Questions

The second step was to identify the evaluation questions related to prosecution outcomes applicable to our SANE program and community. The evaluation questions were primarily predetermined within the chosen Toolkit format and statistical program, although some additional questions were incorporated into the evaluation process. The questions answered within the Toolkit format for post-SANE-only design included the following: (a) "How many SA cases had criminal charges filed?", (b) "How many SA cases had criminal charges filed that were later dropped?", and (c) "How many SA cases ended with a plea bargain, trial with acquittal, or trial with conviction?". In Toolkit implementation in Salt Lake County, the method used to obtain the final criminal case outcomes (see Steps 3 and 4) allowed for two additional questions: (a) how many SA cases were referred by law enforcement (LE) to the prosecutor's office, and (b) how many of these referred cases were charged/not charged?

Step 3: Establish Cooperative Agreements

The third step in the evaluation process was to establish cooperative agreements between agencies that controlled access to the required data. Data for the study were derived from two sources: charts of patients seen for SA forensic examinations to develop a random sample of SA cases that fit the study protocol (i.e., over 18 years, completed a full forensic examination, and agreed to LE involvement) and the court docketing system for the final criminal case outcomes of the sample cases. These data are frequently maintained by several different agencies within a community (i.e., hospital or SANE program, prosecutor's office). Before gaining access to information from agencies, the goals, methods, and evaluation steps in the Toolkit were explained to community partners to generate support. In Salt Lake County, this information was shared in a variety of ways: prosecutors' meetings, county-wide LE meetings, SA Response Team meetings, in-person appointments with individual agencies, and a one-page document on the purpose and methodology of the Toolkit. The first agreement established was with the mobile, community-based SANE program in Salt Lake County to allow access to the charts of patients who were seen for an examination after SA. We did not need an agreement with a hospital as patients' records were under the domain of the community-based

SANE program, rather than within a hospital system. The next step was to obtain data on prosecution outcomes of SA cases, which have typically been obtained from records within prosecutors' offices. In Salt Lake County, the prosecutor's office declined to participate in the study by tracking the final criminal case outcomes in their database because of concerns about confidentiality. We overcame this roadblock by gathering the information on criminal case outcomes from the public court docketing system. The challenge in accessing the information on criminal cases through court docketing systems was that cases were tracked by suspects' names, generally not information contained in patients' charts, rather than LE case numbers. We established Memorandums of Understanding (MOUs)¹ with the 11 LE agencies within Salt Lake County to obtain suspects' names in study cases referred by LE to the prosecutor's office. The process of collecting MOUs from 11 LE agencies was time consuming but helped build relationships between the SANE organization and LE agencies. Information on the Toolkit was presented at a meeting with all police chiefs and sheriffs before meeting individually with LE agencies. The additional study question of "how many cases were referred by LE agencies to the District Attorney's Office?" was answered from information gathered from the 11 agencies. Although the prosecutor's office did not provide data on final criminal case outcomes, they were helpful in instructing the study researchers on accurately interpreting data from the court docketing system.

Step 4: Collection of Data

The fourth step of the evaluation process focused on data collection beginning with determining sample cases to include in the study. In the post-SANE design, the Toolkit advised that eligible cases were to be included after the first year of the SANE program's origination through the full year before the evaluation.² For Salt Lake County, this included the years 2003–2011, as the SANE program started in 2002 and the Toolkit was implemented in 2013. The Toolkit designated the requirements for a case to be included in the sample pool of cases: patient aged 18 years or older, patient completed a forensic medical examination with evidence collection, and patient requested LE involvement in investigating the case. An additional requirement was that the case had to be under the jurisdiction of 1 of the 11 LE agencies in Salt Lake County to track the case outcomes. In Salt Lake County, 2,241 charts were reviewed to develop a potential study pool of 1,657 cases that met the study criteria. A statistical power analysis was completed in the Toolkit development to determine

how many cases per year were necessary to yield results that could be generalized to the overall population and found that 30 randomly selected cases were required per year. The Toolkit provided a simple randomization program to choose the random study sample. As 9 years were included in the Salt Lake County study, 2003–2011, 270 cases were randomly selected to create the study sample.

As we utilized the court docketing system to track final criminal case outcomes, we developed a protocol not included within Toolkit instructions for obtaining suspects' names from LE agencies. We divided the 270 cases into their respective LE agencies. Eleven packets were created, one for each agency, with the study cases identified by LE agency name, case number, and date of assault. The LE agencies were asked to check "yes" or "no" if the case was referred to the prosecutor's office. Referral to the prosecutor's office was defined as any screening with prosecution about the SA case via telephone, email, or written referral or in person. If LE agencies referred the case by any method to prosecution, then the LE representative wrote the suspect's name and date of birth so that the final criminal case outcome could be determined through the court docketing system. To maintain strict confidentiality of this information, the charts were hand-delivered to the designated contact person at each LE agency. Once the agency completed their data entry, they contacted the researchers to collect the packets in person. When the required information from the LE agencies was completed, the researchers met with the prosecutor's office to learn protocols for discerning final criminal case outcome data through the court docketing system. To ensure accuracy in tracking cases through the court docketing system, three researchers collaborated on researching each of the 270 cases. There were nine cases in which there were ambiguities in regard to the final criminal case outcomes. The prosecutor's office reviewed these cases to verify accuracy of the researchers' findings. Through the process of researching cases through the court docketing system, the percentage of cases in which the prosecutor's office declined to file charges was calculated.

Step 5: Analysis of Data

The fifth step of analyzing data was simple as the Toolkit provided a preprogrammed Microsoft Excel file to perform the analysis. Often, research by SANE programs has not been attempted because of concerns about statistical knowledge or abilities. As the Toolkit contains a built-in statistical program in a Microsoft Excel file, researchers need not fear lack of statistical sophistication or abilities. After determining final criminal case outcomes for the 270 study cases, the data were entered into the statistical program spreadsheet. The researchers confirmed that the data on criminal case outcomes for each case were entered correctly. Once the final criminal case outcomes were entered for

¹Sample MOUs are included within the Toolkit accessed through National Criminal Justice Reference Service: <https://www.ncjrs.gov/pdffiles1/nij/grants/240917.pdf>.

²See Toolkit guidelines in *Evaluating the Work of Sexual Assault Nurse Examiner (SANE) Programs in the Criminal Justice System: A Toolkit for Practitioners* (Campbell, Greeson, Karim, Shaw, & Townsend, 2013), p. 105.

each study case, the statistical program generated the analysis findings displayed in tables, charts, and graphs.

Step 6: Interpretation of Results

The final step in the evaluation process was to interpret the results. As Salt Lake County is an urban region, the results were comparable with the two urban sites in the pilot study. Tables and graphs comparing these data were created for use in the written materials and PowerPoint presentations given to vested community partners when sharing Toolkit findings. The interpretation of the results began with the researchers and SANE program but expanded throughout the community as the findings were shared. The process of interpreting the results for Salt Lake County is explored in the Discussion section.

Summary of Key Findings

Toolkit findings revealed that, from 2003 to 2011 in Salt Lake County, 94% of SA cases were not successfully prosecuted and only 6% were successfully prosecuted. Cases were viewed as successfully prosecuted if they resulted in a plea bargain or trial with conviction. It was found that 91% of the SA cases did not result in the filing of criminal SA charges. Although 9% of the cases had criminal charges filed, the charges were later dropped in 3% of the cases. This resulted in 6% of cases with criminal charges filed and successfully prosecuted (see Table 1). Involvement of the LE agencies in the research process to obtain suspects' names led to discovering how many SA cases LE referred to the prosecutor's office (see Table 2). Of the 34% of cases referred to the prosecutor's office, 25% resulted in SA charges filed, and 75% were declined. The Toolkit statistical program generated criminal case outcomes by percentages per year of the randomly selected study cases, 270 cases, which was helpful in identifying trends in increased or decreased rates of prosecution (see Table 3). Additional data obtained from LE agencies led to expanding the study to include written comments from the LE contacts. When the researchers collected the packets from LE, it was found that the LE contacts frequently wrote the reason why a case was not referred to the prosecutor's office (see Table 4). This information was not part of the original study design but was incorporated into the study findings.

TABLE 1. Criminal Case Outcomes in Salt Lake County, Utah, 2003–2011

Outcomes	Salt Lake County
Not charged	91%
Charged but later dropped	3%
Successfully prosecuted (plea bargain or trial with conviction)	6%
Total	100%

TABLE 2. Law Enforcement Case Referral to Prosecutor's Office

Outcomes	Percentage of cases
Not referred	66
Referred	34
Total	100

Discussion

The final two sections in the Toolkit, "So What?" and "Now What?", were written to provide guidance on interpretation, dissemination, and discussion of the findings (Campbell, Greeson, et al., 2013). The "So What?" section focuses on how the findings were interpreted and delivered to the community. The "Now What?" section emphasizes utilizing the Toolkit findings to generate system-wide improvements.

So What?

After completing the data analysis, the next step was to interpret the meaning of the findings for our community by the researchers and the multitude of community partners in SA cases. Most of the community partners were shocked at the low prosecution rate of 6%. Initially, responses to the findings were varied based on professions. The prosecutors expressed concern that only one third of adult SA cases were referred to their office. LE agencies were distressed that only 75% of the referred cases resulted in the filing of criminal charges. Victim advocacy groups were outraged at the findings but were least surprised, as they discussed anecdotal evidence from multiple victims about low rates of prosecution in SA cases. The SANEs were quite disheartened by the findings and expressed concern over the impact of the low prosecution rates on their patients. As the conversations continued, the various disciplines developed a better understanding of each other's roles in addressing SA cases. As the Toolkit is a standardized method of evaluation, it allows for comparison between rural, mid-sized, or urban communities. The Toolkit findings from Salt Lake County were lower than those from the two urban sites (Sites E and F)³ in the pilot study causing additional consternation over our findings (see Table 5).

The Toolkit findings by year generated further discussions about possible reasons for fluctuations in prosecution rates. For example, in Table 3, Years 8 (2009) and 9 (2010) had higher rates of successful prosecution, 17% and 13%, respectively, compared with other years in the study. The Toolkit study did not explore possible reasons for the increase in prosecution in 2009 and 2010, as the focus of the Toolkit was to establish baseline data on SA criminal case outcomes. Some community partners suggested that

³See *Implementation of a Sexual Assault Nurse Examiner (SANE) Practitioner Evaluation Toolkit* (Campbell, Townsend, Bybee, Shaw, & Markowitz, 2013), p. 41.

TABLE 3. Successfully Prosecuted Cases by Percentages Per Year (2003–2011)

	2003	2004	2005	2006	2007	2008	2009	2010	2011
Not successfully prosecuted	100%	93%	97%	93%	100%	100%	83%	87%	97%
Successfully prosecuted ^a	0%	7%	3%	7%	0%	0%	17%	13%	3%
Total	100%	100%	100%	100%	100%	100%	100%	100%	100%

^aSuccessfully prosecuted cases resulted in either trial with conviction or plea bargain.

structural changes in the prosecutor's office and in some LE agencies, specifically special victim units to investigate and prosecute SA cases, were in place during 2009 and 2010 and may have influenced the higher rates of prosecution.

The additional data displayed in Table 4 sparked many community discussions about the meanings of the terms written by LE explaining why some cases were not referred to the prosecutor's office. As stated earlier, these data were handwritten by LE and not in the original study design. These written comments reflected common challenges perceived by LE in investigating cases and the belief in rape myths. It is out of the scope of this manuscript to discuss each of these comments, although the researchers

are interested in exploring their meanings in future studies. The italicized reasons for not referring to the prosecutor's office listed in Table 4 indicated that the SA was deemed as a false report by LE. Multiple evidence-based studies have found that between 2% and 8% of SA cases are false reports (Lonsway, Archambault, & Lisak, 2009; Lisak, Gardinier, Nicksa, & Cote, 2010). Of the 130 cases in which the reasons for not screening with prosecution were written, 10 cases (designated with the italicized text in Table 4) were characterized by police as possible false reports. This was 8% of the cases, which fell at the upper range of the percentages reported in the literature. If these 10 cases were false reports, 8% of the sample, then it can be assumed that the remaining cases not referred to prosecution were not false reports. Yet, these cases were terminated at the LE agency and were not referred to prosecution.

TABLE 4. Written Reasons by Law Enforcement for not Referring Cases to Prosecutor's Office

Reason	Total
Victim did not want to pursue	25
Unable to contact victim	24
Unknown suspect	21
Uncooperative victim	15
Insufficient evidence	13
Case cancelled by victim	5
<i>Possible false report^a</i>	4
Inconsistent statements by victim	4
Crime laboratory did not find seminal fluid	3
Victim has no memory of the incident	2
Victim had mental illness	2
<i>Victim admitted to making a false report^a</i>	2
Reason unknown	2
Investigative leads exhausted	1
DNA results ruled out suspect	1
Victim did not know if sexual assault happened	1
Low-functioning victim, did not articulate force	1
<i>Victim claimed consensual sex, no crime committed^a</i>	1
<i>No sexual assault occurred^a</i>	1
<i>Victim arrested for making a false report^a</i>	1
<i>Victim stated she was not sexually assaulted^a</i>	1
Total	130

^aItalicized statements indicate those that could be grouped together into a single category of cases that police may consider to be false reports or unfounded.

Dissemination of the Findings

The Toolkit stresses the importance of creating a safe space when sharing the findings to encourage open discussion

TABLE 5. Criminal Case Outcomes: Comparison of Salt Lake County With Other Urban Sites

	Salt Lake County	Other urban sites
By outcome		
Not charged	91%	82%–84%
Charged but later dropped	3%	4%–7%
Pled or plea bargain reached	5%	7%–13%
Trial with acquittal	0%	1%
Trial with conviction	1%	1%
Total	100%	
By category		
Not charged	91%	82%–84%
Charged	9%	16%–18%
Not prosecuted	94%	85%–91%
Prosecuted	6%	9%–15%
Not Successfully prosecuted	94%	87%–92%
Successfully prosecuted	6%	8%–13%
Total	100%	

Note. Successfully prosecuted cases resulted in either trial with conviction or plea bargain.

between community partners. Holding multiple sessions on the Toolkit findings was suggested to bring about collaboration between agencies (Campbell, Greeson, et al., 2013). Since the completion of the Toolkit for Salt Lake County in October 2013, the Toolkit findings have been shared with vested community partners in over 30 presentations. The first presentations on the Toolkit findings were to the study partners: SANE program, Salt Lake County District Attorney's office, and at a monthly meeting with all 11 police chiefs and personnel. After these initial presentations, the findings were presented to multiple community partners and agencies. An overriding theme in all of these presentations was to view the Toolkit findings as providing baseline data on the prosecution of SA cases to promote collaborative responses for improvement, rather than establishing blame for low prosecution percentages. In addition to a slide presentation with open discussion, the findings were shared through a brief written report with tables and graphs.

Publicity of the Findings

Because of the large number of presentations, media within Salt Lake County learned of the study results. Soon, the low prosecution rates of SA crimes found in the Toolkit study became front-page news (Alberty & Stecklein, 2014; Dark, 2013). We were initially concerned that publicity about the low prosecution rates would result in SA victims not reporting, as they might believe nothing would happen with the prosecution of their case. Yet, because the results became public knowledge since January 2014, our examination rates have increased nearly 30%. Publicity of the Toolkit findings has resulted in open discussion of low prosecution in SA cases and additional news stories on steps being made in the community to increase investigation and prosecution.

The NBC station in Utah, KSL-TV, launched their own detailed investigation in 2014 on the prosecution rates of SA cases from January 1, 2009, to December 31, 2013, in Salt Lake County (Headrick & Mashburn, 2014). Although their methods of data collection and analysis were different than the steps outlined in the Toolkit, they found almost identical results. They examined 2,318 SA cases reported to LE from 2009 to 2013. Their study found that two thirds of SA cases reported to LE were never referred to the district attorney's office—identical results to the Toolkit findings. They also found that, in 5 years of SA cases, 2009–2013, only 5.5% of SA cases were successfully prosecuted—roughly identical to the Toolkit findings. In their news story, they explored if the district attorney's office only filed charges and sought prosecution in SA cases that they were confident of winning. We were not involved in this additional study but believe that their data validated the Toolkit findings in Salt Lake County.

Now What?

The “Now What?” section in the Toolkit focuses on using the Toolkit findings to create positive changes within the community (Campbell, Greeson, et al., 2013). A vital concept in this section was to use the Toolkit findings to strengthen relationships with community partners. This has been a process in Salt Lake County. Some community partners immediately were receptive to the Toolkit findings and developing improvements in the system to increase prosecution, whereas some community partners were initially suspicious of the findings. Through open dialogue and transparency in sharing the research steps outlined in the Toolkit, most community partners have embraced the Toolkit findings as a call to action. Seven months after release of the Toolkit findings, the researchers emailed members of the Salt Lake County Sexual Assault Response Team regarding their opinion of Toolkit implementation and results. Their written responses reflect the changes that have occurred from release of the Toolkit findings:

From a prosecutor (personal communication, July 20, 2014):

The results of the SANE Toolkit research in Utah have sparked a revolution for the criminal justice system response to sexual assault in our state. Agencies have begun to look at each step of the system and revise how these cases are handled. Credit is due to the many agencies that have stepped up and made improvements, but the changes would likely not have been made without that first step of the SANE Toolkit research shining a light on how cases were being handled.

From an LE officer (personal communication, July 21, 2014):

The findings of the SANE Toolkit research for Salt Lake County were at best dismal from many perspectives, but have helped serve as a wakeup call. As a Special Victims' Unit Detective I quickly saw the opportunities for improvement, along with the Salt Lake County Sexual Assault Response Team (SART) as the findings were widely discussed in multi-disciplinary meetings.

From a director of victim advocate services (personal communication, July 23, 2014):

The assumption for decades among stakeholders in the work related to sexual assault has been that with strong advocacy and professional medical attention through rape exams conducted by sexual assault nurse examiners, higher prosecution rates will result. In Salt Lake County, this assumption

proved false. In the course of approximately nine months, the Utah Legislature has enacted a victim bill of rights, which addresses specific notifications and time frames for a sexual assault survivor to be made aware of progress (or not) in her/his case. Out of that legislation came a task force devoted to examining reasons for backlogs in rape kit processing and in more suitably addressing victim trauma in rape investigations and prosecutions.

From the SANE program director (personal communication, July 15, 2014):

The release of the data obtained from a study in our community using the SANE Toolkit provided an incredible stimulus for conversations and beginning movement toward change. Rather than finger pointing and blaming, our community partners used the report as a springboard to increase dialogue and develop plans for action.

These responses reflect the many positive changes derived from Toolkit implementation in our community. Although the findings were discouraging, the community partners recognized the value of knowing quantitative findings on our criminal case outcomes in adult SA cases. We now have baseline data from which to measure improvements as the community works together to boost SA prosecution rates.

The “Now What?” question was a dynamic, ongoing process within Salt Lake County that continues to evolve. For example, the findings have led to an additional research study with one large LE agency and the SA resource prosecutor with the State Attorney General’s office on developing a training program for police officers on the neurobiology of SA trauma and evaluating for improvements in SA criminal case outcomes within this specific agency. Each SA case within this agency is being tracked until the final criminal case outcome is determined. As the SANE Toolkit provided baseline data on criminal case outcomes in SA cases, we can use these baseline findings to evaluate for improvements.

Since the release of the Toolkit findings and the resulting publicity, multiple legislative actions occurred in 2014 and 2015. The Toolkit findings were not solely responsible for the vast number of improvements related to SA cases in Utah but triggered community discussions and a call for action. A victim’s bill of rights was created and passed mandating that victims be notified before destruction of their evidence (Utah State Legislature, 2014a). The Utah State Legislature authorized formation of a statewide working group to evaluate the number of unsubmitted sexual assault kits (SAKs) and designated \$750,000 to pay for testing of some unsubmitted SAKs (Utah State Legislature,

2014b). Utah became an official “Start by Believing” state in 2015 when the Utah legislature passed a proclamation supporting the “Start by Believing” campaign by End Violence Against Women International (2015; Utah State Legislature, 2015a). Clarification of the consent law in SA cases was passed in 2015 (Utah State Legislature, 2015b). Although not requiring legislative bills, additional funding was approved for Utah Office of Victims of Crime, Utah Bureau of Forensic Services (state crime laboratory), and reimbursement for SA examinations.

Community partners have been galvanized to work together in making system-wide improvements. Agencies within Utah have applied for and received federal grant funds to pay for the testing of unsubmitted SAKs and to create and implement system-wide improvements to increase prosecution of current and future SA cases (Bureau of Justice Assistance, 2015; New York County District Attorney’s Office, 2015). Community partners united to sponsor regional conferences held in Salt Lake City, Utah, in 2015 featuring Dr. Rebecca Campbell and Dr. David Lisak to provide training and direction on making improvements in the investigation and prosecution of SA cases (Campbell, 2015; Lisak, 2015).

The principal researcher plans on implementing the Toolkit again in 2018 to assess for improvements in SA criminal case outcomes. The ability to evaluate if improvements are occurring in our community would not be possible if the Toolkit had not been originally implemented in 2013. We gained the capability to evaluate our progress in improving criminal case outcomes in SA cases. Few communities know this key information, thereby few communities can evaluate for improvements. If additional SANE programs utilized the Toolkit, then they would also be able to evaluate for improvements. By using the Toolkit to evaluate criminal case outcomes, SANE programs have a standardized methodology allowing for comparison between communities.

Conclusion

Implementation of the Toolkit and resulting findings plunged SANEs into the role of change agents. SANEs in Utah embraced the Toolkit findings as providing quantitative data on the low rates of prosecution in adult SA cases. Through the process of Toolkit implementation, the SANE program reflected on their role and relationships with other community partners in addressing sexual violence. The Toolkit solidified the commitment of the SANE program to actively participate in Sexual Assault Response Team meetings and build stronger relationships with LE, victim advocacy groups, prosecution, state crime laboratory, and community organizations.

The SANE Toolkit findings sparked a bonfire of discussion and action in our community. The findings were

similar to a match—the spark; the reactions of the community partners using these findings to trigger improvements were the kindling—the branches that caught the spark and ignited the bonfire. If the community partners had not openly discussed the findings and developed action plans, the Toolkit findings likely would have been disregarded without creating improvements. Key factors to the success of the Toolkit were the reaction of the community partners and community at large. The Toolkit findings were powerful by providing quantitative findings, percentages of criminal case outcomes, which can be used to evaluate for improvements in the system for years to come.

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