

## Rape Prevention & Education Program (RPE)

Funding authorized: \$50 million FY 16 Appropriation: \$44.4 million

FY 17 President's Budget: \$44.4 million (\$38.8 million for RPE & \$5.6 million for evaluation)

FY 17 Request: \$50 million (\$5.6 million increase in program dollars to meet demand)

RPE formula grants, administered by the CDC Injury Center, provide essential funding to states and territories to support rape prevention and education programs conducted by rape crisis centers, state sexual assault coalitions, and other public and private nonprofit entities.

Based on 2013 CDC data, RPE funded program staff:

- Reached 2 million students.
- Trained 160,000 professionals.
- Answered **340,000 hotline calls**.

Those who have been victimized by sexual violence are more likely to be re-victimized AND those who have perpetrated are more likely to reoffend, pointing to the increased need to stop the violence before it ever happens.

If our children are to face a future free from sexual violence, RPE must be fully funded.

The RPE program prepares everyday people to become heroes, getting involved in the fight against sexual violence and creating safer communities by:

• Engaging boys and men as partners;

- Supporting multidisciplinary research collaborations:
- Fostering cross-cultural approaches to prevention; and
- Promoting healthy, non-violent social norms, attitudes, beliefs, policies, and practices.

It is vitally important to continue building the evidence base for sexual violence prevention. At the same time, we know RPE is working. Building on the success of the innovative Green Dot bystander intervention campaign on campuses, Kentucky RPE programs expanded into high schools. A 5-year randomized intervention trial funded by the CDC found a greater than 50 percent reduction in the self-reported frequency of sexual violence perpetration by students at schools that received the Green Dot training.

"The idea that, due to the effectiveness of Green Dot, ... there will be many fewer young people suffering the pain and devastation of sexual violence: This is priceless." Eileen Recktenwald, Kentucky Association of Sexual Assault Programs

Across the country, states and communities are engaged in cutting-edge prevention projects:

Alaska's Talk Now Talk Often campaign is a statewide effort developed in collaboration with Alaskan parents, using conversation cards, to help increase conversations with teens about the importance of having healthy relationships.

## Connecticut's Women & Families Center developed a multi-session curriculum addressing issues of violence and injury targeting middle school youth.

**Kansas** is evaluating the Committee for Children's *Steps to Respect* Program. The evaluation **results will be used to improve** programming and school climate.

Maryland's Gate Keepers for Kids program provides training to youth-serving organizations to safeguard against child sexual abuse.

Missouri is implementing "Green Dot" bystander education statewide to reduce the rates of sexual violence victimization and perpetration.

**North Carolina** was able to ensure sustainability of its consent-based curriculum by partnering with the public school system to implement their sexual violence prevention curriculum in **every** 8<sup>th</sup> grade class.

**Oklahoma** is working with domestic violence and sexual violence service agencies, public and private schools, colleges and other community based organizations **to prevent sexual violence.** 

**Washington** is implementing innovative skill building projects that amplify the voices of historically marginalized communities, such as LGBTQ youth, teens with developmental disabilities, Asian American & Pacific Islander teens, & Latino parents & children.

## Why increase funding for RPE?

The societal costs of sexual violence are incredibly high including medical and mental health care, law enforcement response, and lost productivity. Annual victim costs for rape are estimated at \$127 billion making rape the most costly of all crimes.

According to the National Intimate Partner and Sexual Violence Survey (CDC, 2011):

- Nearly 1 in 5 women have been the victim of rape or attempted rape.
- Most female victims of completed rape (79.6%) experienced their first rape before the age of 25; 42.2% experienced their first completed rape before the age of 18 years.
- More than one-quarter of male victims of completed rape (27.8%) experienced their first rape when they were 10 years of age or younger.

The national focus on campus and military sexual assault as well as high profile cases of sexual violence in the media have increased the need for comprehensive community responses to sexual violence but has also increased the demand for prevention programs beyond providers' capacity. A 2015 survey by the NAESV revealed that almost half of rape crisis centers had to decrease the number of prevention education services due to insufficient funding while over 1/3 of programs had a waiting list for prevention programming.

A Missouri program reported: "The demand for our services has increased about 18% both in 2014 and in 2015. Increased awareness and increased need (crime) are most likely contributors to this trend. There are limited resources available for prevention education. In fact, our organization receives zero federal or state funding for prevention efforts. In addition, new government requirements/laws, such as with Title IX and PREA, have contributed to referrals to our organization. Our organization always works to increase support from local resources, but funding is extremely competitive and limited."

A Massachusetts program reported: "With Title IX in the news, requests for prevention education have increased...We are saying no to many requests for education because of capacity issues. We are unable to build and sustain relationships with other underserved communities because of a lack of capacity"

A Nebraska program reported: "I am hugely dismayed at the lack of funding for prevention...It's noble to provide direct services to victims of sexual violence, but if we don't provide prevention monies, then we are just a band-aid. It's terribly frustrating."

HAVE ADDITIONAL QUESTIONS? Contact Terri Poore, Policy Director at terri@endsexualviolence.org