



**National Alliance to  
End Sexual Violence**

**FOR IMMEDIATE RELEASE**

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**NAESV Raises Alarm: Reductions in Force at HHS  
Devastating for Sexual Assault Services and Prevention**

Last week, the Department of Health and Human Services (HHS) issued a substantial number of job cuts, or Reductions in Force (RIF), resulting in devastating and perilous impacts on programs that respond to sexual assault and domestic violence.

The Program Branch of the CDC Division of Violence Prevention (DVP) was decimated. This branch, part of the Injury Center, is responsible for administering the Rape Prevention and Education (RPE) program and the Domestic Violence Prevention Enhancements and Leadership Through Alliances (DELTA) program.

Additionally, the Director of the Office of Family Violence Prevention and Services (OFVPS) in the Administration for Children and Families (ACF), was placed on administrative leave. This office administers the FVPSA grants as well as funds to respond to sexual assault and domestic violence.

Over 1000 programs in our network depend on OFVPS and the CDC Division of Violence Prevention to support our lifesaving work to provide services to victims and prevent violence in our communities. These programs save lives, but they also save money. These reductions in force and job eliminations are interrupting essential functions of our work and threaten decades of a successful public health response to sexual assault and domestic violence. Eliminating hundreds of staff from these programs will lead to greater inefficiency and will impact the safety of communities around the country.

We call on the administration to reinstate the Division of Violence Prevention Program Branch at the CDC to ensure critical sexual assault and domestic violence prevention programs can continue which includes ensuring that Congressionally approved funds be administered to state health departments and state sexual assault and domestic violence coalitions around the country. HHS must also reinstate the Director of the Office on Family Violence Prevention and Services to ensure continued essential leadership functions of this program.

### [Background on RPE](#)

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.

A 2024 [survey](#) by the NAESV revealed that 60% of programs saw an increased demand for sexual assault prevention while over 1/3 of programs reported reduced funding for prevention work.

The RPE program prepares everyday people to become actively engaged and involved in preventing sexual assault and creating safer communities.

According to the National Intimate Partner and Sexual Violence Survey (NISVS), 1 in 5 women were victim of a completed or attempted rape at some point in their lifetime. The societal costs of sexual violence are incredibly high including medical and mental health care, law enforcement response, and lost productivity. Research conducted in 2017 sets the lifetime economic burden of rape at \$122,000 per victim and reveals a strong link between sexual violence and chronic disease.

We know RPE is working. A study conducted in 26 Kentucky high schools over 5 years and published in American Journal of Preventive Medicine found that an RPE-funded bystander intervention program decreased not only sexual violence perpetration but also other forms of interpersonal violence and victimization.

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*The National Alliance to End Sexual Violence is the voice in Washington for the 56 state and territorial sexual assault coalitions and over 100 rape crisis centers working to end sexual violence and support survivors.*