



The University of Texas at Austin
**Institute on Domestic Violence
& Sexual Assault**
Steve Hicks School of Social Work

“Voices of Texas Sexual Assault Survivors: Services, Gaps, and Recovery Journeys” (HB1590)

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Presentation to the Sexual Assault Survivors’ Task Force
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Presentation Overview

- Review of *Resources for Texas Sexual Assault Survivors* (2020):
 - Background & Methods
 - Key Findings
- *Voices of Texas Sexual Assault Survivors* (2022):
 - Research Questions
 - Methods & Recruitment
 - Demographics & Geographical Location
 - Key Findings
 - Journey Maps
 - Recommendations

Resources for Texas Sexual Assault Survivors (2020)

Web-based survey of service providers, including:

- ✓ Non-profits
- ✓ Healthcare facilities
- ✓ IHE's
- ✓ SARTs
- ✓ Other governmental entities

Research Questions:

- What services are available to adult and child survivors...
 - ...through sexual assault programs & CACs
 - ...through non-profits, healthcare facilities, IHEs, SARTs, & other governmental entities
 - ...in each region of the state?
- What are the gaps in services for adult and child survivors of sexual assault in each region of the state?

Fielding dates: July 9 – Sept. 11 2020

Survey: Contacts and Responses

Invitation & Response Summary*

- 3969 survey invites
- 426 survey starts
- 357 survey completes
- 500 service providers represented in all counties among respondents

Name	Invited	Completed	Response Rate
Rape Crisis Centers	82	57	70%
Children's Advocacy Centers	70	49	70%
SANE Programs	63	18	29%
Institutions of Higher Education	75	16	21%
District and County Attorneys	330	40	12%
State Agencies	3	3	100%
Other Nonprofit Organizations	244	57	23%
Total	867	240	28%

*Law enforcement and hospitals are important stakeholders but, in this survey, had a low participation rate. Future efforts to further engage law enforcement and hospitals for input is necessary.

Resources for Texas Sexual Assault Survivors (2020): Key Findings

1. Need Eclipses Capacity

Service providers across the system said that they could not meet the needs of survivors given the finite amount of available resources. The highest levels of unmet needs were for therapy, outreach/prevention, and legal services.

2. COVID-19 Has Caused Widespread Disruption and Forced Innovation by Service Providers

The COVID-19 pandemic has revealed a substantial systemic risk for service disruption, particularly in the rural regions of Texas.

3. The Greatest Unmet Need: Therapy

Texas lacks access and resources for therapists, especially therapists with specialized trauma training or experience working with children, with the biggest gaps in availability occurring in rural areas. Waiting lists are often long and therapists have high caseloads.

4. Challenges Identified by Providers

Providers answered open-ended questions and discussed persistent challenges for their organizations and clients they serve: lack of transportation, transitional housing, financial support for basic needs, legal aid, and insufficient staffing.

Voices of Texas Sexual Assault Survivors (2022): Research Questions

1. What services did survivors of sexual assault or abuse need?
2. What services did survivors of sexual assault or abuse receive?
3. What needs went unmet because services were insufficient or not received?
4. What were the barriers to receiving services?

Methods at a Glance

Researchers interviewed 70 participants between May and September of 2021.

Interviews:

- Used semi-structured interview guides, with specific versions for each participant type
- Used trauma-informed questions and procedures
- Took place through the Zoom video platform
- Typically lasted 1-2 hours

Recruitment

Method	Notes
<p>Partner sites: 1 RCC, 1 CAC, and 2 combination sites</p> 	<ul style="list-style-type: none"> • TAASA and CACTX identified 12 potential partner sites: 5 rape crisis centers, 4 children’s advocacy centers, and 3 organizations that were both CACs and RCCs. • Four sites—one CAC, one RCC, and two combination sites—agreed to participate as partner sites. • Around half of participants were put into contact with researchers by partner sites.
<p>Social media and traditional media outreach</p> <ul style="list-style-type: none"> • Posts on Twitter and Facebook • PSAs on public radio • Emails to other service providers 	<ul style="list-style-type: none"> • Social media posts were another significant source of referrals. • PSAs on public radio stations yielded some participants. • Contacting service providers led to additional social media posts and at times to participant referrals.
<p>Snowball Sampling</p>	<ul style="list-style-type: none"> • At the conclusion of the interview, participants were asked to share study information with anyone they knew who might want to participate.

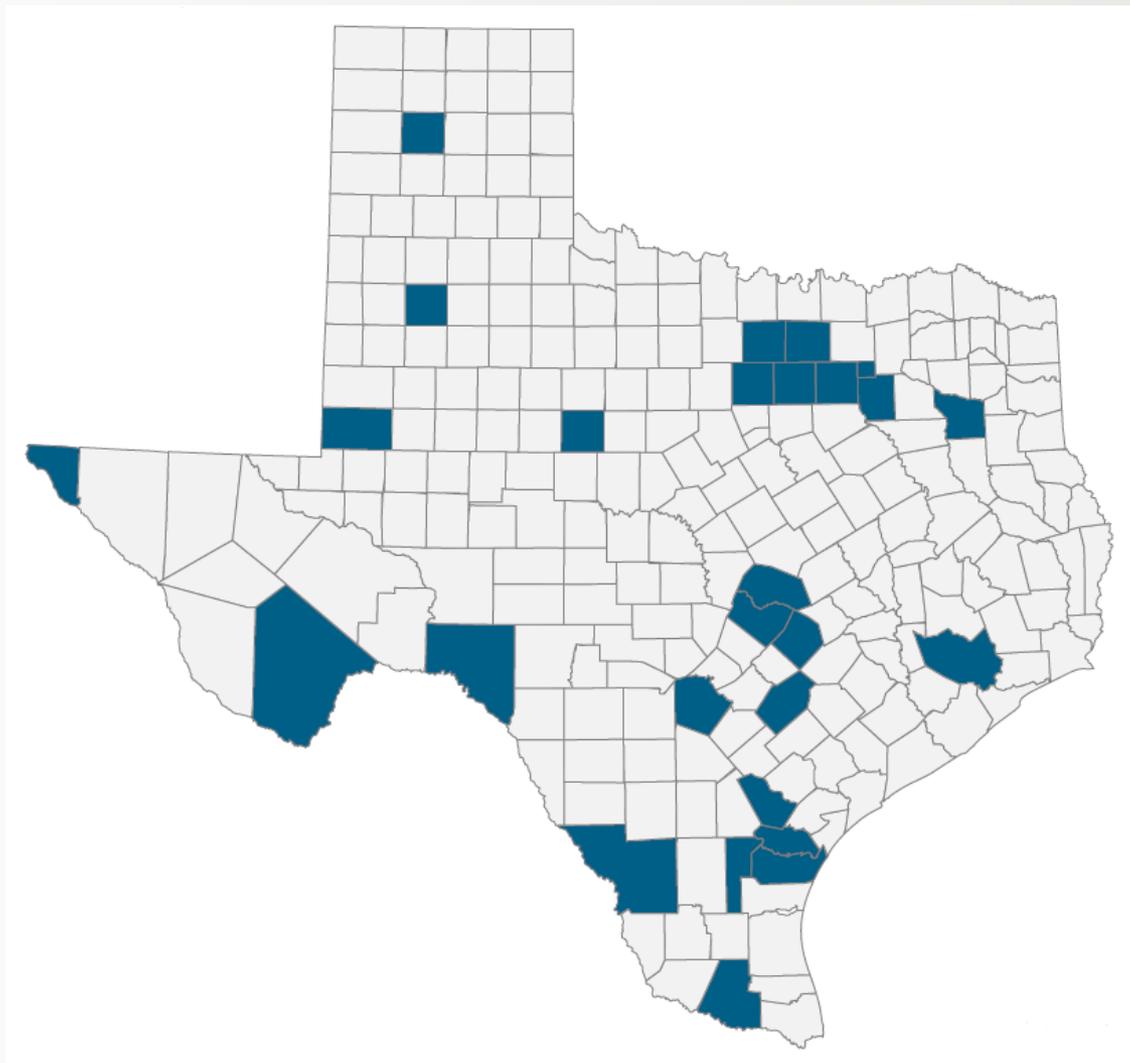
Participant Demographics

Interview Type	Total	Female	Male	Nonbinary
Adult Survivors	34	30	2	2
Adults Abused as a Child	24	19	5	0
Parents/Guardians of Child Survivors	12	9	3	0
Total	70	58	10	2

Race/Ethnicity	Number
Asian	3
Black	14
Hispanic/Latinx	16
White	35
Multiracial	1
Not provided	1

Age of Victimization	Number
0-9	17
10-19	18
20-29	19
30-39	7
40-49	5
50-59	1
unknown	3

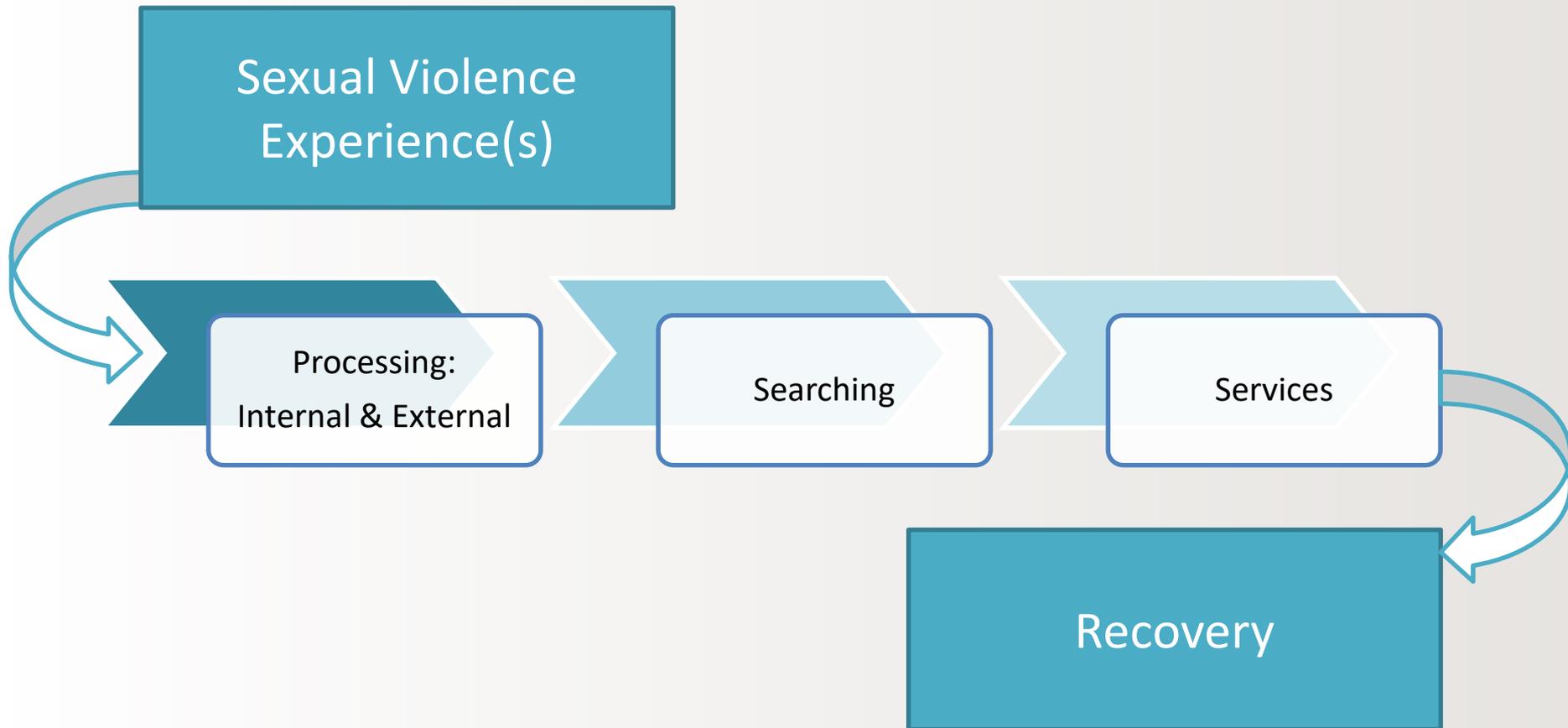
Map: Survivors' Home Counties



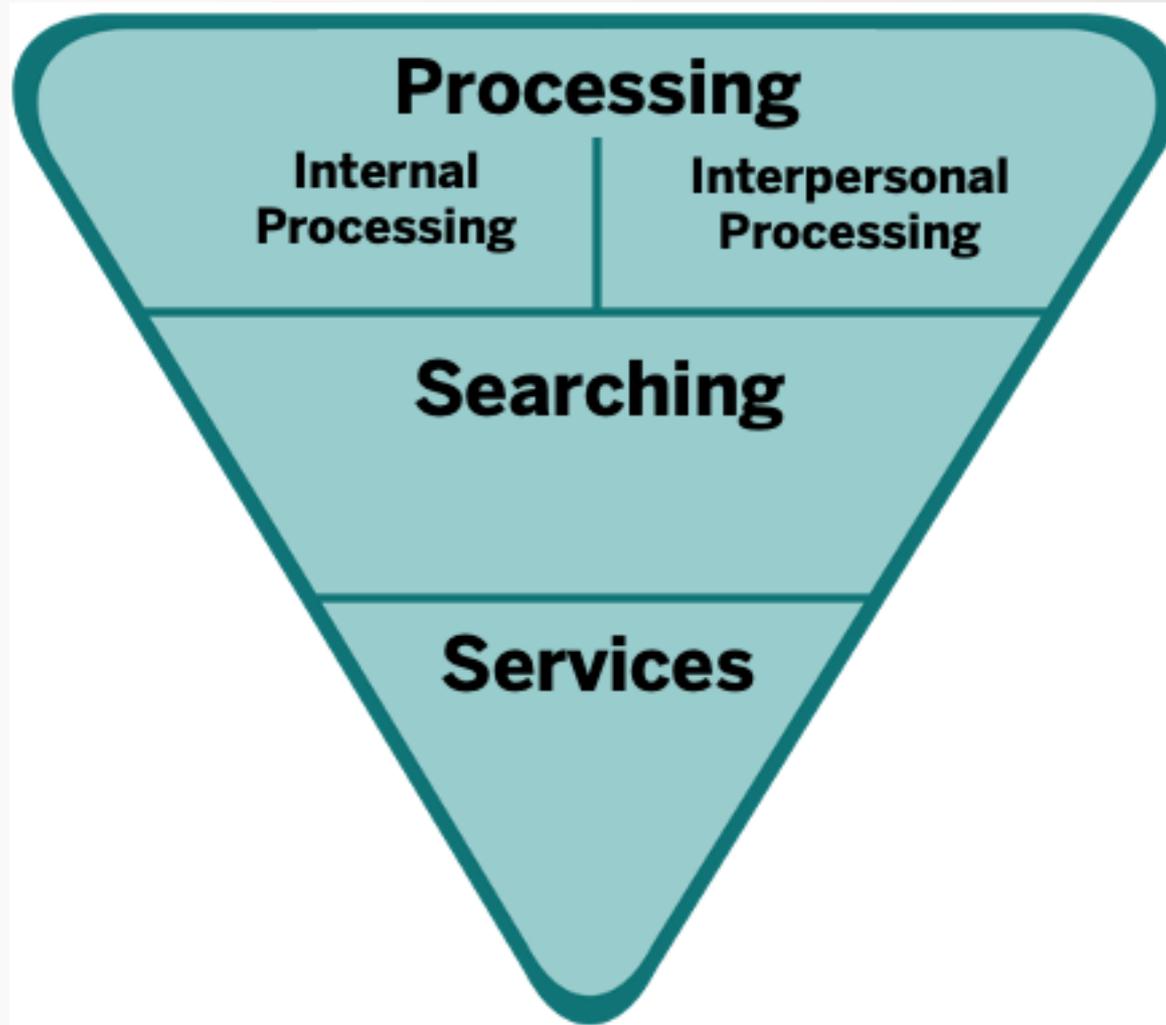
Voices of Texas Sexual Assault Survivors (2022) – Key Findings

- Survivors' recovery journeys follow three identifiable stages.
- Needs eclipse capacity.
- Barriers on the path to recovery.
- The recovery journey is more difficult for some survivors.
- Trauma-informed services can move a survivor toward recovery.
- Interactions with governmental institutions profoundly impact survivors.

Stages of the Recovery Journey



An Inverted Triangle



SA Services Needed & Received Per Participant Report

Service type	Participants who <i>needed</i> the service [%, (n/N)]	Participants who <i>received</i> the service [%, (n/N)]
Therapy	98% (59/60)	88% (51/58)
Crisis Intervention or Hotline	86% (42/49)	53% (26/49)
Legal	71% (36/51)	25% (12/48)
Advocacy	66% (29/44)	30% (13/44)
Forensic or Medical	64% (37/58)	51% (28/55)
Accompaniment	64% (32/50)	26% (13/50)
Basic Needs	40% (21/53)	10% (5/52)
Housing	31% (17/54)	11% (6/54)
Transportation	24% (13/54)	2% (1/52)

The Recovery Journey is Harder for Some

Two groups were identified who faced added barriers on their help-seeking path:

- Survivors who were a part of an historically underserved or marginalized group.
- Survivors with mental health conditions or persistent mental health symptoms.

Survivors in these groups had specific concerns and needed specialized resources and skilled service providers to adequately support their recovery.

Barriers On the Path to Recovery

- Capacity-Related Barriers – Barriers that stem from service providers' capacity limitations
- Service Quality Barriers – Barriers that impact the quality of services being delivered
- Internal Barriers – Barriers that originate within a survivor or a parent/guardian of a child survivor

Capacity-Related Barriers

- Lack of sufficient staff to meet demand.
- Not enough providers with the necessary training and/or experience to provide a specific service (e.g., a lack of therapists with specific types of training).

Service Quality Barriers

- Lack or inconsistent use of trauma-informed practices.
- Lack of engagement/communication among service providers needed to provide coordinated care to survivors/families
- Lack of information provided to survivors and parents/guardians about systems (e.g., criminal justice system, CPS, CVC)
- Staff turnover or reassignment

Internal Barriers

- Survivors and/or parents/guardians of child survivors may be unaware of existing services that might benefit them.
- Survivors minimizing or blaming themselves for the assault or abuse.
- Concerns about being disbelieved, dismissed, or treated poorly by professionals.

Trauma-Informed Services

Survivors and parents/guardians have specific needs for connection and agency following sexual violence.

Participants reported needing:

- Compassion and understanding.
- Physical and emotional safety.
- To be heard and validated.
- A consistent, familiar, trustworthy advocate to help navigate service systems.
- Peer counseling and support group opportunities.
- Respect for survivor and parent/guardian input related to decisions about services and legal matters.

Experiences with Government-Affiliated Institutions

- Survivor experiences with law enforcement, DAs, CPS, and CVC often had a profound influence on the help-seeking path of survivors and parents/guardians.
- There were stark differences among the experiences participants reported, suggesting much inconsistency in approaches and effectiveness.

Journey Maps

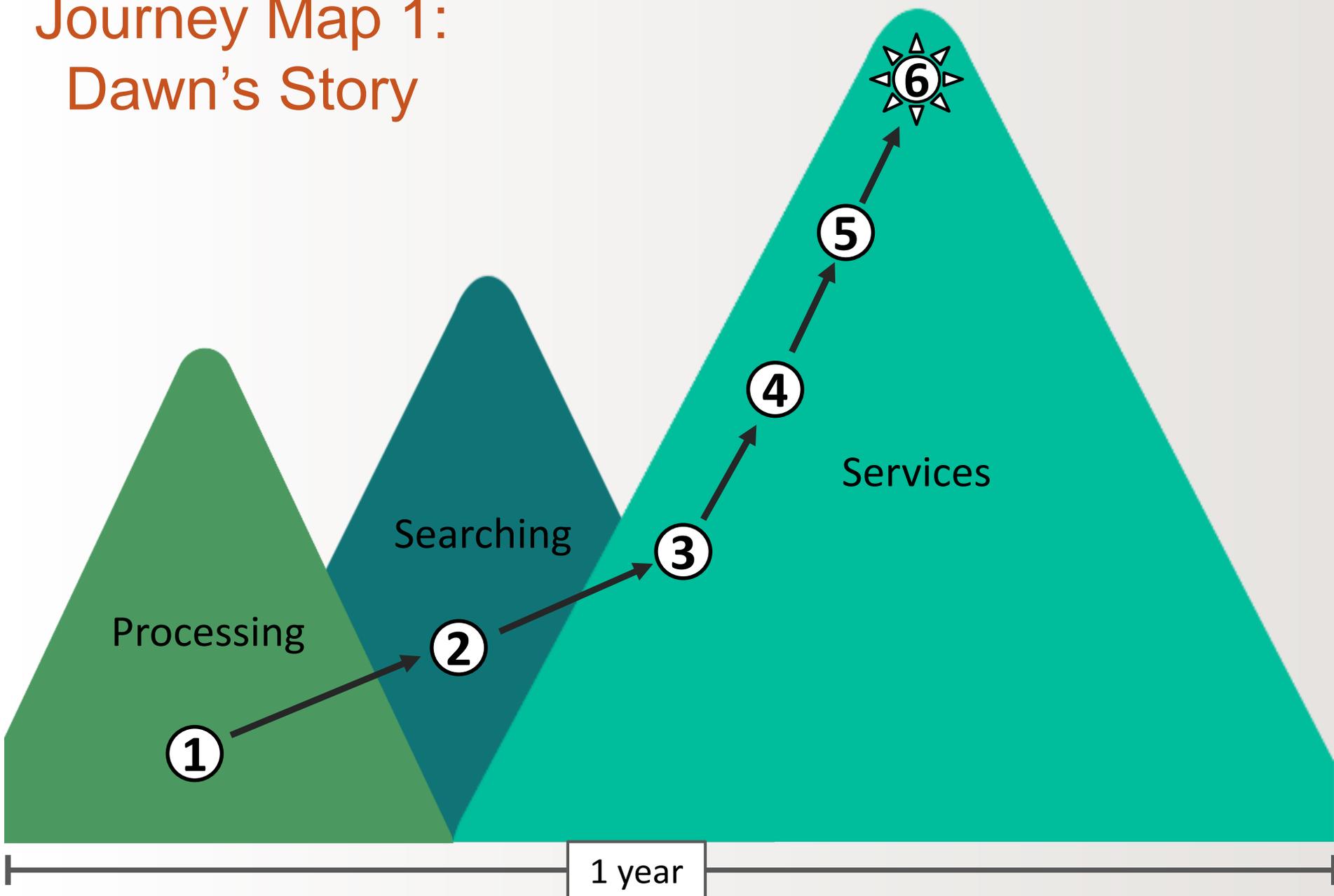
What is a Journey Map?

A Journey Map is a de-identified story about a specific participant in the study. It uses a metaphorical “map” to show how each survivor or parent/guardian progressed on their journey toward recovery, facing barriers along the way.

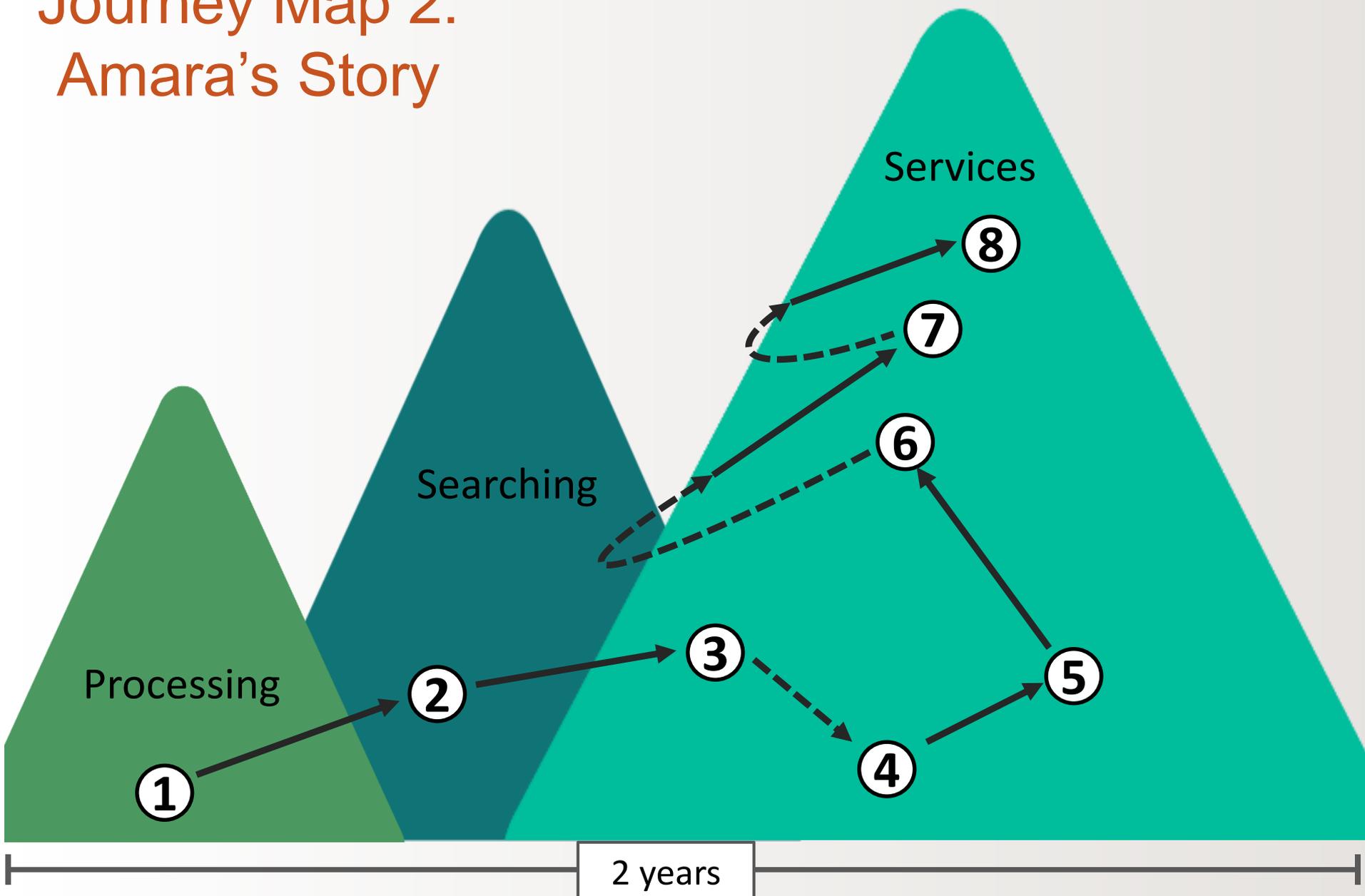
Journey Maps can help us to better understand...

- The full context that informs survivor experiences
- How recovery stages fit together
- How cumulative effects create trajectories for survivors
- That the journey toward recovery is not always linear
- How positive and negative experiences can color a survivor’s entire help-seeking experience

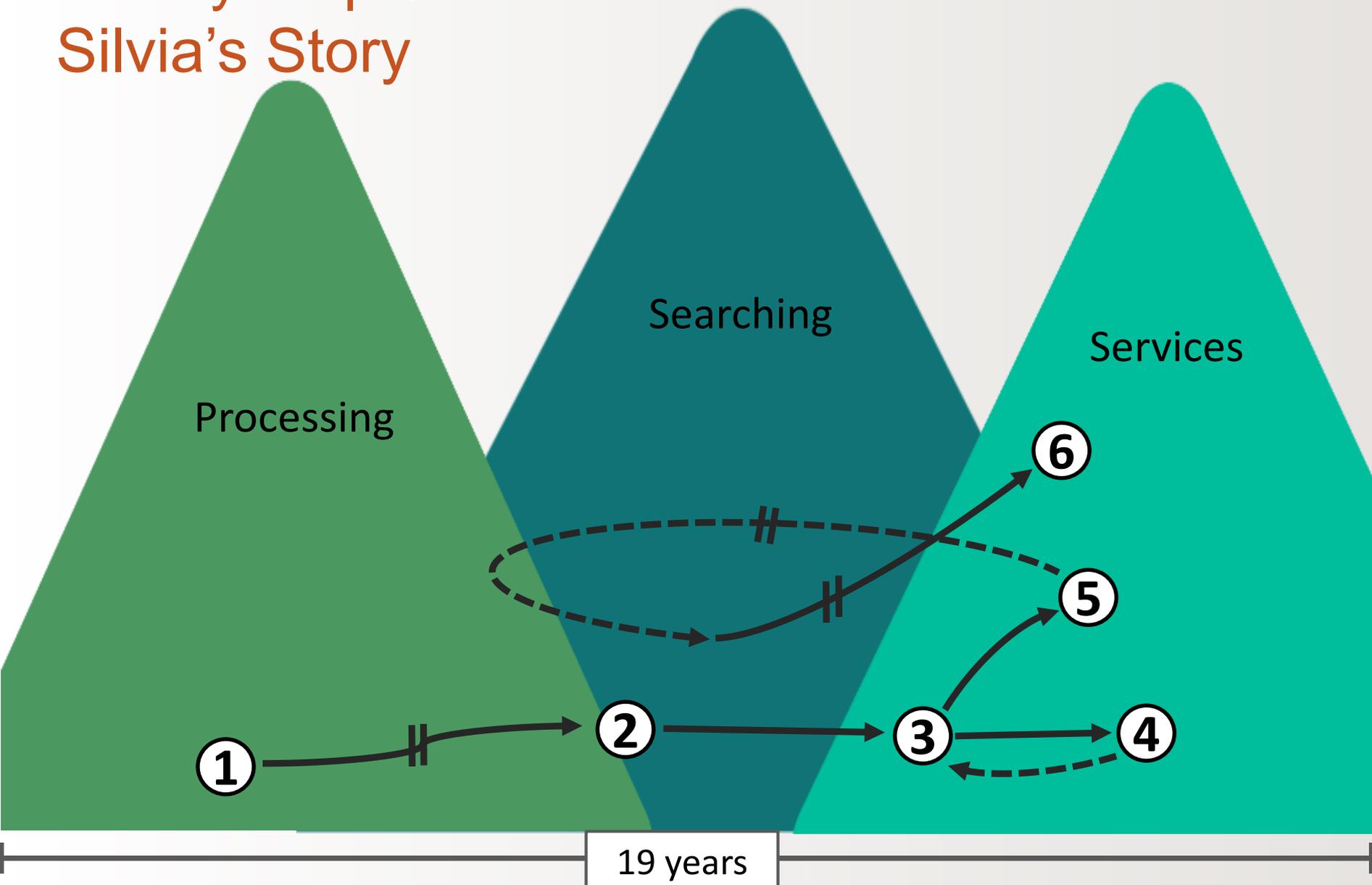
Journey Map 1: Dawn's Story



Journey Map 2: Amara's Story

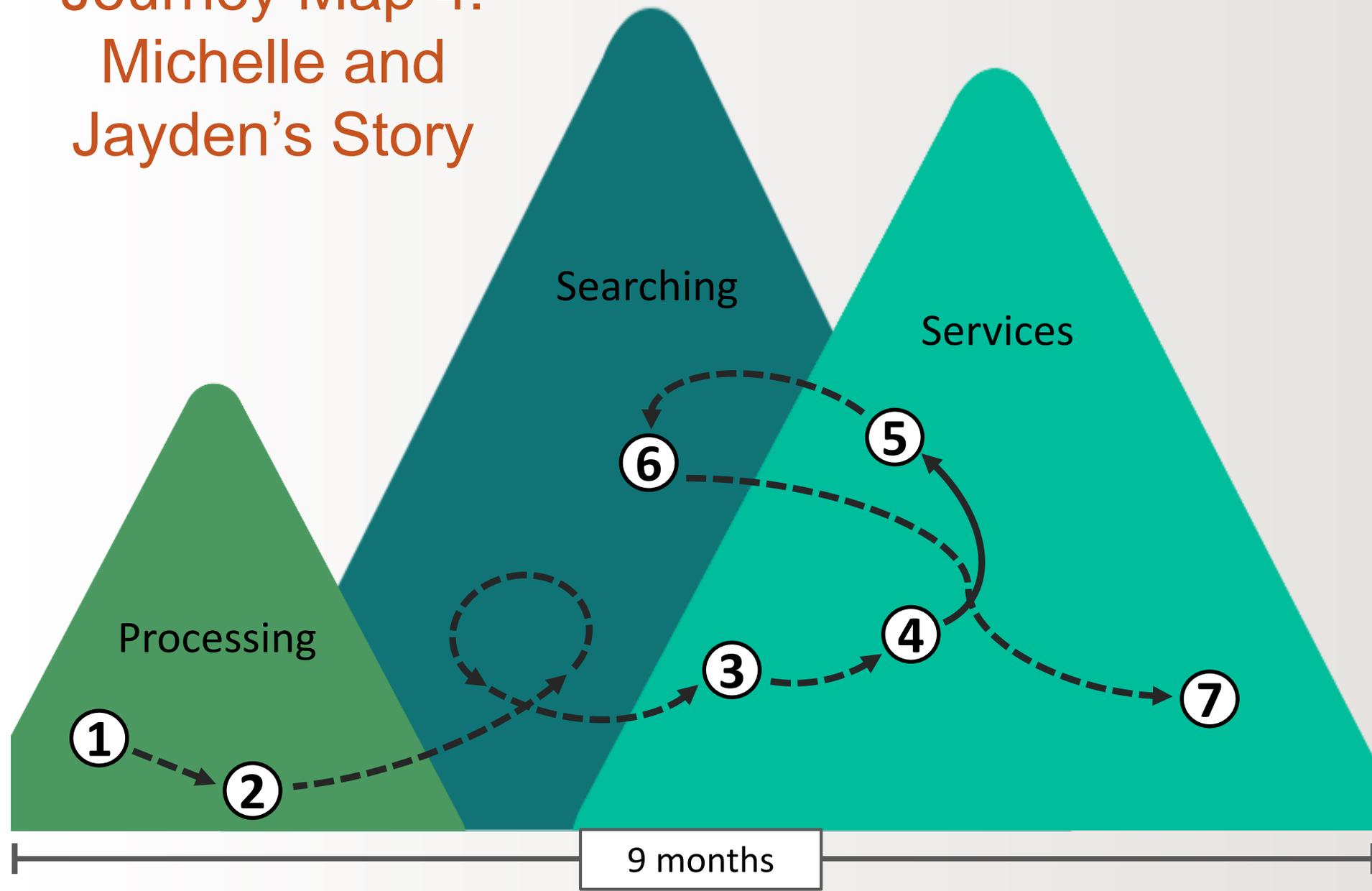


Journey Map 3: Silvia's Story



19 years

Journey Map 4: Michelle and Jayden's Story



Recommendations

- Increase funding for service providers and programs that serve survivors and their families to increase capacity and the quality of the services provided. Therapy services are in most need of additional resources.
- Create additional training opportunities on trauma-informed practices for helping survivors of sexual violence for law enforcement, DA and CA personnel, medical professionals, and RCC and CAC staff members.
- Expand current services, when possible, to include accompaniment to parent/guardians of child survivors during medical exams, texting or chat capabilities of hotlines, and group or peer support groups for adult survivors and parents/guardians of child survivors.
- Take measures to minimize the financial impact of the sexual assault or abuse by streamlining the Crime Victims' Compensation program to be less burdensome for survivors and parents/guardians of child survivors.
- Offer specialized services, such as hotlines and therapy resources, for specific survivor populations, such as male survivors of sexual violence and LGBTQ+ survivors.
- Increase coordination among service providers, law enforcement, and criminal justice personnel, and prioritize keeping adult survivors and parents/guardians of child survivors apprised of case developments.