Rape Prevention & Education Program (RPE)

Funding authorized: $50 million

FY 21 Appropriation: $51.75 million

FY 22 Appropriations Request: $75 million

Increase authorization to $150 million

Ensure involvement of and funding for state sexual assault coalitions

“After leading a community education program in a local middle school, we received a letter from a 13-year-old boy saying, ‘I did not understand that teasing my younger sister could be isolating and hurting her. I went home and apologized to her and told her that I would be her champion from today forward.’” — a California prevention educator

“During the COVID-19 pandemic, school administrators, teachers, students, and youth increased their requests for prevention services, i.e. virtual workshops and trainings.” — a New York prevention educator

The #MeToo movement; national focus on sexual assault on campuses, in the military, and faith communities; and high-profile cases of sexual violence in the media have led to increased interest in comprehensive community responses to sexual violence, but have also increased the demand for prevention programs beyond providers’ capacities.

A 2020 survey by NAESV revealed that 62% of programs saw an increased demand for services, while one-third of programs had a waiting list for prevention education of a month or longer.

Rape Prevention & Education (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.

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 increase significantly.

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, and policies.
NAESV is recommending language in the re-authorization of the Violence Against Women Act (VAWA) to increase the authorization of RPE to $150 million and ensure expert involvement of state sexual assault coalitions in RPE planning and implementation.

Preventing sexual violence requires the full participation of state sexual assault coalitions who conceived, developed, and advocate for the RPE program.

State sexual assault coalitions have specific expertise, experience, and resources related to the prevention of sexual assault and want to work in partnership with state public health officials.

We recommend language in VAWA that:

· Requires meaningful involvement in state RPE planning of the state sexual assault coalition and underserved communities.

· Creates a state coalition grant program with 15% of RPE funding for the state and territorial sexual assault coalitions, with 10% (of the 15%) set aside for tribal sexual assault coalitions.

Why increase funding for RPE?

According to the National Intimate Partner and Sexual Violence Survey one in five women were victims 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. 2017 research 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 2016 study conducted in 26 Kentucky high schools over five 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.

“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. A survey respondent told us:

“We met with staff at a local high school to set up a one-time presentation and walked out agreeing to run several groups!”

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.

Kansas is looking closely at the links between sexual violence and chronic disease to prevent both.

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 school system to implement their sexual violence prevention curriculum in every 8th grade class.

HAVE ADDITIONAL QUESTIONS?

Contact Terri Poore, Policy Director at terri@endsexualviolence.org