ABSTRACT

Title of Thesis:	ADDRESSING UNSUBMITTED SEXUAL ASSAULT KITS AND REFORMING PROCESSES GOING FORWARD: BURNOUT AND VICARIOUS TRAUMA AMONG STAFF WORKING THE CASES
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Burnout and vicarious trauma continue to be high priority topics in healthcare and law enforcement research, but there is a sizeable deficit within the literature among professions working directly with sexual assault cases. Generally, burnout and vicarious trauma among specific professions within the justice system including attorneys, victim advocates, and sexual assault nurse examiners (SANE) have been significantly understudied. Additionally, reforms are currently underway to address the problem of unsubmitted sexual assault kits stored in warehouses across the United States. However, implications for the employees have not been studied by researchers

to understand potential consequences in working with these cases nor the added stress of reforms.

Secondary qualitative analysis was conducted using data from a sample of interviews with key informants (n=135) who are victim-facing and involved in processes to address both unsubmitted sexual assault kits and current cases of sexual assault. Informants were more likely to focus on facilitators and challenges in their daily work than to discuss the outcomes of burnout and vicarious trauma. Insufficient access to resources and increased workloads were the most significant challenges discussed among key informants, although, emotional labor and other difficult aspects of the job were also a common theme throughout this population. Social support including support across agencies, as well as supervisory support, were the most discussed potential protective factors of burnout. This study contributes information regarding key challenges faced by individuals working on sexual assault cases and has direct implications for employees in the field as well as those undergoing reform on sexual assault kit processing. These findings should be used to understand potential contributors to burnout and vicarious trauma in order to better mitigate negative outcomes associated with this work.

ADDRESSING UNSUBMITTED SEXUAL ASSAULT KITS AND REFORMING PROCESSES GOING FORWARD: BURNOUT AND VICARIOUS TRAUMA AMONG STAFF WORKING THE CASES

by

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Chapter 1: Introduction

Statement of the Problem

Sexual Assault Kit Initiative

Sexual assaults, defined by the U.S. Department of Justice (2012) as any type of sexual activity or contact that happens without consent, are extremely common especially among women. In the United States, 1 in 3 women and 1 in 4 men report experiences of sexual violence including sexual harassment, sexual assault, or rape, during their lifetimes (Smith et al., 2018). More specifically, 1 in 5 women and 1 in 38 men report experiencing completed or attempted rape during their lifetimes (Smith et al., 2018). Rape is defined as penetration of the vagina or anus with any body part, object, or oral penetration by a sex organ of another person without consent from the victim (U.S. Department of Justice, 2012). Sufficient resources and coordination across agencies are needed throughout the justice system to ensure proper collection and testing of sexual assault kits, investigation of crimes, and prosecution of cases. Sexual assault forensic exams are full body exams typically completed within 72 hours after a sexual assault and can be conducted by emergency room personnel, but are ideally conducted by sexual assault nurse examiners (SANEs) to provide healthcare to victims after an assault (Valentine et al., 2014). These exams also serve the legal need of collecting deoxyribonucleic acid (DNA) evidence from the victim and documenting the victims' injuries. The photos, DNA evidence, and any other important evidence collected during the exam are placed into a sexual assault kit (SAK) for police to investigate and confirm the identity of a suspect in hopes of

prosecuting the case in the future. DNA is helpful in many cases because it can be examined through the use of the Combined DNA Index System (CODIS). This database contains DNA profiles from prior criminal offenders as well as evidence from crime scenes that may or may not be linked to a specific individual. When new DNA is uploaded into CODIS, partial or full matches to DNA can be found, making it easier to potentially link offenders to crimes and also exonerate innocent suspects.

It recently became clear that police departments across the U.S. were storing sexual assault kits (SAKs) rather than submitting them for testing. These unsubmitted sexual assault kits were either partially tested or not tested at all, subsequently creating a significant backlog within the criminal justice system (Strom et al., 2010). While it is unclear how often sexual assault kits were used prior to addressing the backlog issues, Peterson et al. (2006) found that higher rates of arrests and convictions, as well as longer sentences occurred when DNA was present. However, backlogged cases may not have been tested due to the victim refusing to move forward with a case or because an arrest already occurred (Peterson et al., 2006). Therefore, it is unclear whether testing backlogged sexual assault kits is as useful as previously expected.

In particular, Strom et al., (2010) found that "18% of unsolved rapes contained forensic evidence that had not been submitted to a forensic crime laboratory for analysis." The extent of unsubmitted sexual assaults kits (USAKs) in the U.S. is unclear, mainly due to the lack of a national system to collect these data and insufficient tracking systems within police jurisdictions (Sacco and James, 2015). While the number of USAKs is unknown for many states, The Joyful Heart

Foundation has tracked and requested public records regarding USAKs from various states and found numbers ranging from less than 100 in Vermont (2017) to over 13,000 in both California (2017) and Florida (2015).

Researchers have concluded that reasons behind the lack of testing for these USAKs include victims not wanting the SAK tested, law enforcement's perceptions of the low value of DNA and victim credibility, and insufficient resources including funding, staffing, and equipment (Campbell et al., 2017; Lovrich et al., 2004; Strom & Hickman, 2010).

Local, state, and federal government agencies have responded to the number of USAKs by passing legislation that addresses the USAKs, providing funding to test USAKs and for research to understand the factors contributing to this problem (Sacco & James, 2015). The "Sexual Assault Kit Initiative" (SAKI), funded by the Bureau of Justice Assistance within the U.S. Department of Justice, provides funding to various sites to "address the growing number of USAKs in law enforcement custody, and to help provide resolution for victims when possible" (Bureau of Justice Assistance, 2019). However, the SAKI has also encouraged the understanding of problems that initially contributed to the USAKs in hopes to sustain efforts after the grants are completed. Sites eligible to apply for this grant included law enforcement agencies of states, units of local government, and federally recognized Indian tribal governments, prosecutor's offices, or a governmental non-law enforcement agency acting as a fiscal agent for one of these eligible applicants (Bureau of Justice Assistance, 2019). Each site can use their grant funding to target specific problem areas within their site including the following: inventory and testing of USAKs, personnel for investigations

or prosecutions, victim support, tracking systems, trainings, research, and increasing collection of DNA for CODIS (Bureau of Justice Assistance, 2019). Therefore, funding may be used differently, and processes may vary across sites. SAKI's only mandatory criteria are that sites inventory SAKs and track their progress, form a multidisciplinary working group or team (MDT) to identify and address issues that contributed to USAKs, and assign a coordinator as the main point of contact for the site.

Burnout and Vicarious Trauma

Burnout, vicarious trauma (VT), and secondary traumatic stress (STS) have been consistently understudied among professionals who work with unsubmitted sexual assault kits (USAKs) including attorneys, victim advocates, SANE nurses, and forensic lab personnel and very little research has been conducted to understand the impacts of working with victims of sexual assault. Burnout is defined as "a psychological syndrome emerging as a prolonged response to chronic interpersonal stressors on the job" (Maslach and Leiter, 2016) and vicarious trauma (VT) refers to "a negative reaction to trauma exposure and includes a range of psychosocial symptoms that providers and responders may experience through their intervention with those who are experiencing or have experienced trauma" including "disruptions in thinking and changes in beliefs about one's sense of self, one's safety in the world, and the goodness and trustworthiness of others" (Office of Justice Programs, Office for Victims of Crime, 2019). Secondary traumatic stress refers to "the natural consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other" (Figley, 1995).

In order to effectively address the high rates of sexual assault, ensure prosecution of offenders, and provide necessary services to victims, healthcare and justice agencies must work diligently and as effectively as possible. The few studies that have been conducted show high levels of burnout, secondary traumatic stress (STS), and vicarious trauma (VT) in almost all of these professions and generally among those working with victims of sexual assault or other types of trauma (Baird et al., 2003; Brady et al., 1999; Brady, 2017; Steed et al., 1998). There are no studies, to my knowledge, that specifically look at burnout and VT among these professionals within the context of a larger reform. Due to the lack of research in this area, the prevalence of burnout and vicarious trauma and their subsequent impacts are unclear.

Burnout research has suggested that there are deleterious health outcomes associated with the condition including diabetes, heart disease, depressive symptoms and insomnia (Salvagioni et al., 2017). Other consequences may include organizational impacts such as lower productivity and increased turnover among employees (Dyrbye et al.,2014; Schaufeli & Enzmann, 1998). VT may also negatively affect concentration, relationships, and decision making, thus harming the ability to serve clients and patients effectively (Pryce et al., 2007). Specifically, high levels of burnout in nurses can affect patient safety and the ability to prevent infections within the healthcare system (Welp et al., 2015). Therefore, it is imperative that burnout and vicarious trauma are measured and understood to implement better practices and to combat potential contributors to burnout and VT.

Research Questions

1. To what extent are burnout and vicarious trauma discussed among employees working with and for victims of sexual assault?
    - What factors are mentioned as contributing to burnout and vicarious trauma in employees working with and for victims of sexual assault?
    - To what extent are other stress-related outcomes discussed among employees working with and for victims of sexual assault?

Table 1. Definition of Terms

Background Terms	
Combined DNA Index System (CODIS)	A database that contains DNA profiles used to prosecute criminal offenders, including serial offenders, and to exonerate innocent suspects.
Rape	"The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim" (U.S. Department of Justice, 2012).
Sexual assault	"Sexual assault is any type of sexual activity or contact, including rape, that happens without your consent" (Office on Women's Health, 2019).
Sexual violence	A broad term used to describe "sexual harassment, sexual assault, and rape" (NIJ, 2010).
Sexual assault forensic exams	An exam ideally conducted in a hospital by a sexual assault nurse examiner or emergency room nurse within 72 hours after an alleged sexual assault has occurred. The purpose is to provide necessary healthcare to the victim, and to complete a full body exam to collect DNA from the victim and document injuries (U.S. Department of Justice, Office on Violence Against Women, 2013).
Sexual assault kits (SAKs)	Kits collected from a victim during a sexual assault forensic exam after a completed or

	attempted rape or sexual assault to gather DNA evidence and document victims' injuries. These kits can be tested to confirm the identity of a suspect and can potentially assist in prosecution.
Unsubmitted sexual assault kits (USAKs)	SAKs that were not submitted to labs for testing and stored or destroyed due to various reasons including victim's choice, law enforcement bias, and insufficient resources (Campbell et al., 2017).
Terms Specific to the Reform	
Multidisciplinary team (MDT)	"A working group that meets regularly and has members from several professions; an MDT addresses and identifies several types of factors (e.g., systematic factors, as well as those at the individual and organizational levels) that lead to high numbers of unsubmitted SAKs in a jurisdiction" (RTI International, 2019). These groups are required to be formed if given SAKI funding and are typically led by the site coordinator for the SAKI site.
Sexual Assault Kit Initiative (SAKI)	A grant program funded by the Bureau of Justice Assistance that provides funding to various sites to "address the growing number of USAKs in law enforcement custody, and to help provide resolution for victims when possible" (Bureau of Justice Assistance, 2019).
Key Agencies or Roles in the Reform	
Bureau of Justice Assistance (BJA)	A department within the Office of Justice Programs, U.S. Department of Justice, focused on "grant administration and criminal justice policy development to support local, state, and tribal justice strategies to achieve safer communities" (BJA, 2019).
International Association of Forensic Nurses (IAFN)	International organization focused on providing support and resources to forensic nurses and also provides certification courses and exams for sexual assault nurse examiners (SANE) (IAFN, 2019).
Sexual Assault Nurse Examiner (SANE)	"Registered nurses who have completed specialized education and clinical preparation in the medical forensic care of a patient who has experienced sexual assault or abuse" (IAFN, 2019).

Special Victims Unit (SVU)	A division within the police department responsible for investigating sex crimes and/or non-sex crimes against vulnerable populations (i.e. older adults, children, etc.) (U.S. Department of Justice, Office on Violence Against Women, 2018).
Stress-Related Conditions	
Burnout	"A psychological syndrome emerging as a prolonged response to chronic interpersonal stressors on the job" (Maslach and Leiter, 2016). Burnout has been measured through the use of the Maslach Burnout Inventory that focuses on three scales of burnout: emotional exhaustion, depersonalization, and personal accomplishment.
Compassion fatigue (CF)	"A combination of physical, emotional, and spiritual depletion associated with caring for others who are in significant emotional pain and physical distress." (Office of Justice programs, Office for Victims of Crime, 2019).
Posttraumatic stress disorder (PTSD)	"Psychiatric disorder that can occur in people who have experienced or witnessed a traumatic event such as a natural disaster, a serious accident, a terrorist act, war/combat, rape or other violent personal assault" characterized by "intense, disturbing thoughts and feelings related to their experience that last long after the traumatic event has ended" (The American Psychiatric Association, 2017).
Secondary traumatic stress (STS)	"The natural consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other - the stress resulting from helping or wanting to help a traumatized or suffering person." (Figley, 1995)
Work-related stress (WRS)	"The response people may have when presented with work demands and pressures that are not matched to their knowledge and abilities and which challenge their ability to cope" (WHO, 2019).
Vicarious trauma (VT)	Also known as "secondary trauma" within literature. This is "a negative reaction to trauma exposure and includes a range of psychosocial symptoms that providers and responders may experience through their intervention with those who are experiencing

	or have experienced trauma. It can include disruptions in thinking and changes in beliefs about one's sense of self, one's safety in the world, and the goodness and trustworthiness of others; as well as shifts in spiritual beliefs. Individuals may also exhibit symptoms that can have detrimental effects, both professionally and personally" (Office of Justice programs, Office for Victims of Crime, 2019).

** Definitions of measures are included in the Methods section.*

Significance of the Study

Although evaluations are underway to further understand best practices for SAKI reforms, research is still needed to determine implications for employees who are working with sexual assault cases and are involved in the reforms. This study contributes to multiple gaps in the literature: 1) exploring factors that may influence burnout and vicarious trauma among law enforcement, attorneys, victim advocates and SANE nurses 2) exploring whether reform efforts such as change in processes and increased workload may cause unintended consequences that amplify experiences of burnout and vicarious trauma.

Chapter 2: Background

Review of Relevant literature

Burnout

Individuals who work with victims of sexual trauma are more likely to experience burnout, vicarious trauma (VT), secondary traumatic stress (STS), and compassion fatigue (CF) (Baird et al., 2003; Brady et al., 1999; Steed et al., 1998). Both burnout and a similar concept, work-related stress, are studied widely in law enforcement and healthcare. Work-related stress within the literature focuses on whether an individual can manage stressors within the environment including daily demands and pressures within an organization (WHO, 2019). Factors contributing to work-related stress can include the organizational structure, work processes, management, conditions of the workplace, and insufficient support from coworkers or supervisors (WHO, 2019).

Burnout is defined as "a psychological syndrome emerging as a prolonged response to chronic interpersonal stressors on the job" (Maslach & Leiter, 2016). Burnout has been studied thoroughly particularly within helping professions, although it is not isolated to the human services field and may impact all professions (Maslach, 2003). However, the literature is riddled with various terms including occupational, job or work-related stress (WRS), burnout, compassion fatigue (CF), secondary traumatic stress (STS), vicarious trauma (VT), and posttraumatic stress disorder (PTSD) (Bercier, 2013). Many of these terms are related or used interchangeably among professionals, making determinations between them difficult (Bercier, 2013). While job stress and burnout are typically related or associated with one another in

the literature, burnout is generally considered separate from the other terms because it focuses more on systemic and organizational causal factors rather than the indirect trauma experienced by those who work with survivors of trauma (Bercier, 2013). Burnout is also associated with a plethora of negative health outcomes and organizational dysfunction. A systematic review showed that burnout is associated with type 2 diabetes, coronary heart disease, fatigue, insomnia, depressive symptoms, and other mental health problems (Salvagioni et al., 2017). While some researchers believe that burnout, anxiety, and depression are the same condition, many researchers argue that the three conditions are separate constructs (Ahola & Hakanen, 2008). In particular, Koutsimani et al. (2019) found that work-related stress (WRS) and burnout could become depression over time. In conjunction with worsening health outcomes, organizational outcomes can also be impacted by burnout including job dissatisfaction and lower productivity, increased absenteeism, and increased turnover among employees (Schaufeli & Enzmann, 1998).

The most commonly used and validated tool for measuring burnout currently is the Maslach Burnout Inventory (MBI), which focuses on three dimensions of burnout including emotional exhaustion, depersonalization and personal accomplishment (Maslach & Jackson, 1981). There are several versions of the MBI assessment tailored for various professions including students, teachers, health personnel, and other working professionals (Maslach et al., n.d.). Use of this tool has varied within studies as some have measured all three dimensions, assessed two of the constructs, or solely assessed emotional exhaustion within various populations (Poghosyan et al., 2009). Emotional exhaustion refers to an individual becoming

emotionally drained, which may eventually lead to experiences of depersonalization including cynicism or a detached response to other people (Maslach, 2003). Emotional exhaustion and depersonalization can lead to the final dimension of reduced personal accomplishment in which an individual may feel ineffective or lose self-esteem, potentially leading to depression (Maslach, 2003). These terms have recently been changed to exhaustion, cynicism, and inefficacy dimensions; however, previous terms will be used for the purpose of this study to remain consistent with the majority of literature (Maslach & Leiter, 2016).

While burnout typically refers to a negative experience, researchers have begun to focus on factors that may influence the opposite experience including engagement and resilience among individuals. However, new terms could also pose challenges as definitions are not widely agreed upon (Maslach & Leiter, 2016). For example, some researchers consider engagement to be the opposite of burnout while others understand it as a separate topic entirely, focused on "vigor, dedication, and absorption" (Maslach & Leiter, 2016).

Vicarious Trauma

Vicarious trauma (VT) is used interchangeably with the terms secondary traumatic stress (STS) and compassion fatigue (CF), and at times with burnout in the literature (Chouliara et al., 2009). The term vicarious trauma (VT) has been coined "the cumulative transformation in the inner experience of the therapist that comes about as a result of empathic engagement with the client's traumatic material" (Pearlman & Saakvitne, 1995). In general, VT is "a negative reaction to trauma exposure and includes a range of psychosocial symptoms that providers and

responders may experience through their intervention with those who are experiencing or have experienced trauma. It can include disruptions in thinking and changes in beliefs about one's sense of self, one's safety in the world, and the goodness and trustworthiness of others; as well as shifts in spiritual beliefs" (Office of Justice Programs, Office for Victims of Crime, 2019).

These disruptions in thinking, otherwise known as changes in cognitive schemas or linked mental representations within an individual, include changes in trust, safety, power, independence, esteem, and intimacy (McCann & Pearlman, 1990). However, the exposure to trauma may affect individuals differently based on their cognitive schemas prior to the exposure (McCann & Pearlman, 1990).

Figley (1995) coined the term secondary traumatic stress (STS) as "the natural consequent behaviors and emotions resulting from knowledge about a traumatizing event experienced by a significant other" or "the stress resulting from helping or wanting to help a traumatized or suffering person." Even more nuanced is the concept of compassion fatigue (CF), or "a combination of physical, emotional, and spiritual depletion associated with caring for others who are in significant emotional pain and physical distress" (Office of Justice programs, Office for Victims of Crime, 2019). Many researchers believe that STS refers to posttraumatic symptoms from working with victims suffering from posttraumatic stress disorder (PTSD), while vicarious trauma is an ongoing process that occurs over time from working with victims of trauma (Bercier, 2013). However, researchers also use the terms interchangeably to describe the indirect trauma from working with people who are suffering or who are victims of trauma (Bercier, 2013).

Research shows that STS and burnout are highly correlated (Cieslak et al., 2014). While it is still unclear which construct may mediate the other or if they are indirectly related, one study found that burnout may increase the risk of developing STS (Shoji et al., 2015).

While profession alone can be a clear indicator of the level of burnout, STS, and CF within an individual, it is also important to note that other factors such as younger age, more experience in their profession, and personal history of trauma can affect the likelihood of burnout, STS, and VT (Baird et al., 2003; Dworkin et al., 2014; Ullman & Townsend, 2007). Symptoms of STS and VT can include cognitive, emotional, behavioral, and physical challenges such as lowered concentration, apathy, sleep disturbances, difficulties in maintaining relationships, decision making and feeling connected (Pearlman & McKay, n.d.; Pryce et al., 2007). Similar to burnout research, studies have also begun to focus on more protective factors and outcomes for individuals within this field including vicarious resilience, compassion satisfaction, and post-traumatic growth (Hernandez et al., 2007).

Several tools are used to measure VT, STS, and CF in various populations. However, constructs and scales vary based on the tool and whether VT, STS, or CF is being measured. The Trauma and Attachment Belief Scale measures changes in schema including safety, trust, control, esteem, and intimacy, however, it does not directly ask about work-related conditions (Pearlman et al., 2003). The Secondary Traumatic Stress Scale (STSS) was developed to understand levels of STS within an individual, including concepts of arousal, avoidance, and intrusion (Bride et al., 2009). The Professional Quality of Life Measure (ProQOL) scale is the most

commonly used tool to assess negative and positive effects (compassion fatigue, compassion satisfaction, and burnout) of helping others experiencing trauma (Stamm, 2010). Yet another tool is the Vicarious Trauma Scale (VTS) that is also used as a screening tool for vicarious trauma (Vrklevski & Franklin, 2008) and has been used specifically in social workers and victim advocates (Aparicio et al., 2013; Benuto et al., 2018). In particular instances where an individual has experienced prior trauma themselves, the Traumatic Institute Life Events Checklist can be used to determine vulnerability of a professional experiencing vicarious trauma due to their own personal trauma (Bride et al., 2007). Due to the wide range of scales and understanding regarding these terms, it is difficult to narrow a model that works best qualitatively in several populations. For the purposes of this study, the Trauma and Attachment Belief Scale was used only to build constructs that may hint at possible VT when not directly mentioned by key informants.

Law Enforcement

Police report higher rates of burnout, depression, and other mental health conditions, and face higher suicide rates than other human service populations (i.e. firefighters) (NAMI, n.d.). Similarly, other professions within the justice system including correctional officers experience higher rates of job stress and burnout associated with organizational stressors (Finney et al., 2013). However, research is extremely limited regarding burnout and vicarious trauma (VT) in justice system professions, especially law enforcement officers working primarily with sexual assault cases. Craun et al. (2014) found that frequent exposure to disturbing materials is also related to STS; therefore, professionals working on cases of sexual assault are

of particular concern. Stenross & Kleinman (1989) discovered detectives were able to transform their encounters with criminals into positive experiences, but were not able to do the same with victims. Police officers within special victims' units (SVU) "often take their work personally, work around the clock, and may experience burnout at a higher rate because the cases are so traumatic" (U.S. Department of Justice, Office on Violence Against Women, 2018). Specifically, SVU officers working for more than a year on these cases had greater compassion fatigue (CF), secondary traumatic stress (STS), and burnout symptoms than those who had served for less than a year (Turgoose et al., 2018). VT was also measured in one study among law enforcement working on juvenile sexual abuse cases, with police showing symptoms of relationship problems, isolation and change in world views and values (Tovar, 2011).

Individual characteristics such as gender may also influence levels of STS and CF. Violanti & Gehrke (2004) found that female law enforcement officers experienced higher risk of CF from working with children who were victims of abuse and male officers had higher risk when experiencing shooting incidents involving other officers (Violanti & Gehrke, 2004). While not related to sexual assault, individual characteristics may influence indirect trauma for law enforcement officers. Craun et al. (2014) also found that sedentary lifestyles and large increases in self-medicating with alcohol or tobacco within the last year can be associated with higher levels of STS.

Schaible & Six (2016) explained that the need for officers to play different roles and suppress emotions as a coping strategy, also widely known as emotional

labor, can lead to higher rates of burnout. Therefore, interactions with victims or offenders of more sensitive crimes such as sexual assault cases may be more difficult or burdensome for police officers to investigate long-term.

McCarty et al. (2019) found that about 19% of their sample of law enforcement officers had experienced emotional exhaustion weekly and 13% had extreme values of depersonalization; high workload and conflicts with values were two of the strongest predictors of emotional exhaustion and depersonalization among law enforcement. Work-related stress studies have shown that stressors among law enforcement can include more organizational factors or job-content stressors including "stress from the work environment, bureaucratic characteristics of police organizations, availability of peer support and trust, and accessibility of coping mechanisms" (McCarty et al., 2007). While Craun et al. (2014) found that social support positively impacts STS in the short term, supervisory support and avoiding denial as a coping mechanism are helpful for the long-term.

Various negative health outcomes can occur in law enforcement experiencing these conditions, including higher rates of cardiovascular disease and sudden cardiac death due to stressful situations (Varvarigou et al., 2014). This increased risk of cardiovascular disease could be caused by increases in cortisol levels associated with posttraumatic stress symptoms within law enforcement (Violanti et al., 2007). Therefore, it is imperative that law enforcement burnout and vicarious trauma (VT) be studied further to improve prevention and avoid deleterious health conditions in the future.

Attorneys

Little research has been conducted to understand burnout among attorneys in the U.S. (Na et al., 2018). The few studies conducted have focused on international populations or remain outdated (Jackson et al., 1987). Even so, these studies tend to focus on older models of occupational stress including factors such as role overload and role strain, but are not specific to burnout as we define it today (Gomme et al., 1995; Kobasa, 1982; Meltzer, 1981; Bergin & Jimmieson, 2015). Of particular concern, attorneys experience some of the highest rates of alcohol-dependent drinking and can experience significant rates of depression, anxiety, and stress (Krill et al., 2016). Therefore, burnout and vicarious trauma are also of concern in this population.

Some specialties of attorneys have been minimally studied including public defenders, however, these studies have also focused on occupational stress, suggesting that role conflict and role overload may influence stress among this population (Lynch, 1997). Of particular interest in this population are prosecutors who face lengthy and sensitive decision-making processes and experience stressful working conditions while making decisions that affect victims, offenders, and families (Na et al., 2018).

Vicarious and secondary trauma have also been understudied in this population and studies have similarly focused on other types of lawyers including public defenders and family lawyers whom may also work with sensitive cases (Levin et al., 2011; Levin et al., 2003). Levin et al. (2011; 2003) found that attorneys experience STS, burnout, and other related conditions including PTSD and depression more than other professions and these conditions were associated with long work

hours and increased exposure to clients with trauma history. Attorneys were also more likely to experience "intrusive recollection of trauma material, avoidance of reminders of the material, diminished pleasure and interest in activities, and difficulties with sleep, irritability, and concentration" (Levin et al., 2003). Therefore, prosecutors and other attorneys working with particularly sensitive material such as cases of sexual assault may experience higher levels of burnout, STS, and VT, but have yet to be rigorously studied.

Victim Advocates

Victim advocates are typically involved in several aspects of assisting a victim after a crime has been committed including advocacy during forensic exams, accompaniment to law enforcement statements and courtroom appearances (OVC TTAC, 2019). Advocates are also typically involved in immediate support and crisis intervention including counseling for the individual and their families (OVC TTAC, 2019). There are two types of advocates, community-based and systems-based advocates. Community-based advocates are employed by nonprofits or organizations that help victims of sexual assault and assist individuals even if they do not report to the police, allowing advocates to maintain confidentiality of a case (OVC TTAC, 2019). Systems-based advocates typically work for the justice system and only assist victims who report to the police; therefore, they cannot maintain confidentiality from the police (OVC TTAC, 2019).

Research focusing on burnout and vicarious trauma in advocates is limited among those working specifically with victims of sexual assault. Most studies that have been conducted focused on advocates for victims of domestic violence rather

than sexual assault cases, however, domestic violence advocates also work with sexual assault victims as these two crimes can happen concurrently. These studies also focused on individual characteristics that may influence burnout such as age, years of counseling experience, and history of trauma (Baird et al., 2003; Ghahramanlou & Brodbeck, 2000).

Additionally, advocates may face other obstacles such as insufficient resources including funding, time, and staffing to properly engage victims and provide necessary services (Ullman & Townsend, 2007). However, working conditions are shown to be associated with STS and burnout across multiple studies including the number of hours worked per week, the number of hours worked with victims, poor coordination across agencies, and insufficient training (Ullman & Townsend, 2007; Benuto et al., 2018; Kulkarni et al., 2013). Organizational support, quality supervision, and shared autonomy are inversely correlated with STS in advocates (Slattery & Goodman, 2009) and poor supervision was associated with vicarious trauma (Ullman & Townsend, 2007). In addition to the daily organizational stressors associated with working with victims of trauma, these advocates must come to terms with difficult realities including societal bias and stereotyping of victims of sexual and gender-based violence (Ullman & Townsend, 2007). These biases and stereotypes may lead to insufficient funding and lack of support for organizational needs (Kulkarniet al., 2013).

One study showed that about 50% of victim advocates may be experiencing STS (Benuto et al., 2018). Even more concerning, Cummings et al. (2018) suggested

that advocates experiencing one construct such as burnout, VT, or STS are more likely to experience one of the other conditions.

Sexual Assault Nurse Examiners

Sexual Assault Nurse Examiners (SANE) are "registered nurses who have completed specialized education and clinical preparation in the medical forensic care of a patient who has experienced sexual assault or abuse" (IAFN, 2019). These nurses take a board-certified exam through the International Association of Forensic Nurses (IAFN) to obtain their certification (IAFN, 2019). These nurses perform forensic exams that enhance evidence collection and ensure proper care for the victim, including providing medication for sexual transmitted infections and unwanted pregnancy (Wies & Coy, 2013).

Burnout among healthcare professionals especially nurses is common within research. McHugh et al. (2011) found that 33% of nurses within their sample were experiencing burnout and it contributed to turnover and the ongoing nursing shortage. Research also shows that high levels of burnout in nurses can impact patient safety, including hospital-transmitted infections and patient mortality (Welp et al., 2015). However, research on burnout and vicarious trauma (VT) among nurses specifically certified to be a SANE and working with victims of sexual assault is limited.

SANE nurses had significantly higher scores than other nurses on the Trauma and Attachment Belief Scale, therefore, suggesting that nurses working with this population are at much higher risk for VT (Raunick et al., 2015). Townsend and Campbell (2009) found that levels of STS were most prominent after conducting forensic exams and were related to "more organizational support, more diffuse goals,

greater prosecution orientation, and higher caseloads." Flarity et al. (2016) found that forensic nurses experience "high caseloads, role ambiguity, prosecution goals, vicarious trauma, attending to survivors' emotional needs, and empowering victims" and may place SANE nurses at higher risk of experiencing compassion fatigue (CF). 73% of these nurses had moderate to high levels of both burnout and STS (Flarity et al., 2016). Townsend & Campbell (2009) also found that peer support, compensation, and individual characteristics such as older age and higher education may prevent STS.

Constructs Suggested by the Literature

Burnout

Multiple conceptual models have been developed in order to understand the factors contributing to burnout symptoms within individuals. Several models such as the Job Demands-Resources model (Demerouti et al., 2001) and the Conservation of Resources theory (Hobfoll, 1989) focus on caseloads and demands on employees compared to the available resources (Maslach & Leiter, 2016). However, research has consistently shown that the social environment significantly contributes to burnout symptoms within an individual (Maslach & Leiter, 2016).

Maslach & Leiter (1999) developed the Areas of Worklife model to encompass all six topic areas found in research that affect levels of burnout within an organization. Maslach & Leiter (1999) developed the Areas of Worklife Survey as an addition to the Maslach Burnout Inventory (MBI) assessment in order to measure mismatches between an individual and an organization within these six areas.

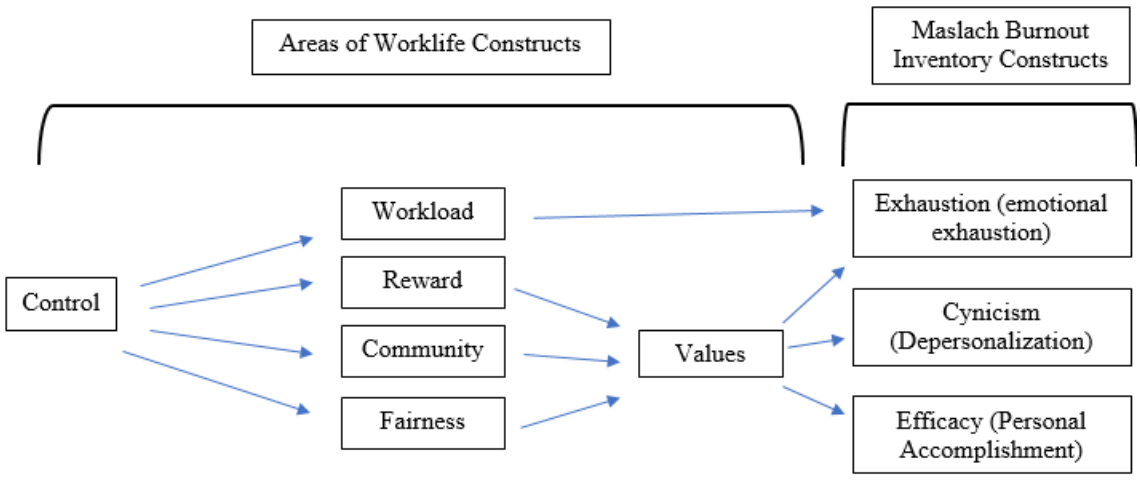
Therefore, most of the studies using this model have been quantitative. However, the model was used in this study to develop a coding structure to look for themes related to these six areas of burnout: workload, control, reward, community, fairness and values. This model should be relevant for this population as it was used to measure these mismatches within a large sample of police officers recently (McCarty, 2019). Definitions of these constructs are provided in Table 2 below.

Table 2: Burnout Measures

Burnout Measures	
Maslach Burnout Inventory (MBI)	A widely used and validated tool that uses three subscales including emotional exhaustion, depersonalization, and personal accomplishment to measure burnout in various populations (Maslach and Jackson, 1981).
• *Emotional exhaustion*	*As defined in the Maslach Burnout Inventory, this is feeling "emotionally overextended and exhausted by one's work" (Maslach & Jackson, 1981).*
• *Depersonalization*	*As defined in the Maslach Burnout Inventory, "an unfeeling and impersonal response toward recipients of one's service, care, treatment, or instruction" (Maslach & Jackson, 1981).*
• *Personal accomplishment*	*As defined in the Maslach Burnout Inventory, "feelings of competence and successful achievement in one's work with people" (Maslach & Jackson, 1981).*
Areas of Worklife Model	A comprehensive model that measures mismatches between an individual and an organization in six major areas including workload, control, reward, community, fairness, and values (Maslach and Leiter, 2016).
• *Workload*	*As defined by the Areas of Worklife Model, the ability to meet demands of the job and sustain it over time. (Maslach and Leiter, 2016).*

• *Control*	*As defined by the Areas of Worklife Model, autonomy, access to resources, and the ability to influence decisions at work (Maslach and Leiter, 2016).*
• *Reward*	*As defined by the Areas of Worklife Model, rewards, reinforcement, and recognition given at work that assists in building efficacy of employees (Maslach and Leiter, 2016).*
• *Community*	*As defined by the Areas of Worklife Model, engagement at work including job-related relationships and social support (Maslach and Leiter, 2016).*
• *Fairness*	*As defined by the Areas of Worklife Model, decisions at work being fair and equitable. (Maslach and Leiter, 2016).*
• *Values*	*As defined by the Areas of Worklife Model, ideals, goals and expectations at work that motivate the employees (Maslach and Leiter, 2016).*

Figure 1. Areas of Worklife Model



(Leiter & Maslach, 2004).

In particular, the Area of Worklife model was developed with the understanding that burnout is caused by a mismatch between what the organization does and what an individual finds acceptable (Maslach & Leiter, 1999). Therefore,

each of these constructs represents a potential factor within the organization that an individual could disagree with in terms of expectations. According to this model, mismatches in job control can influence the four constructs of workload, reward, community, and fairness and any mismatches within these categories can also lead to a mismatch in the values that an individual has compared to the organization. While a change in values may influence all aspects of burnout (emotional exhaustion, depersonalization and personal accomplishment), workload can directly affect emotional exhaustion. The Area Worklife Survey and MBI measures have been validated from several studies (Maslach & Leiter, 2008; Gregory & Menser, 2015). Studies confirming causal relationships between these constructs are ongoing, but goodness of fit has been shown in healthcare professionals (Gregory & Menser, 2015). This study will not focus on causal relationships between constructs and will focus primarily on the constructs themselves to determine the extent to which these factors are discussed in terms of burnout.

Vicarious Trauma

Due to the qualitative nature of this study, differences between the terms secondary traumatic stress (STS) and vicarious trauma (VT) were difficult to determine. Therefore, all mentions of indirect trauma from contact with a victim of sexual assault within this study were initially considered to be VT. Literature discussing VT and related terms is limited among these professions and quantitative measures differ based on the term used (Pearlman et al., 2003; Bride et al., 2009; Stamm, 2010). Therefore, VT was explored more broadly during analysis. While no model has been deemed the "best" model for any of these populations to be studied,

the Trauma and Attachment Belief Scale (Pearlman, 2003) constructs may be discussed by key informants in referencing disruptions in cognitive schema including changes in safety, trust, control, esteem, and intimacy. This measure was used in a quantitative study to measure vicarious trauma in SANE nurses and should be relevant for these populations as well (Raunick et al., 2015). Definitions of cognitive schemas within the Trauma and Attachment Belief Scale are in Table 3 below.

Table 3. Vicarious Trauma Measures

Vicarious Trauma Measures	
Professional Quality of Life (ProQOL) Scale	The most commonly used tool to assess negative and positive effects of helping others experiencing trauma using measures of compassion fatigue, compassion satisfaction, and burnout (Stamm, 2010).
Secondary Traumatic Stress Scale (STSS)	A tool developed to measure levels of secondary traumatic stress within an individual, including concepts of arousal, avoidance, and intrusion (Bride et al., 2009).
Trauma and Attachment Belief Scale	A scale that measures changes in schema including safety, trust, control, esteem, and intimacy. This survey has been used to measure trauma and vicarious trauma in several populations (Pearlman et al., 2003).
• *Safety*	*As defined by the Traumatic and Attachment Belief Scale, "oneself and loved ones are generally safe and secure" (Pearlman et al., 2014).*
• *Trust*	*As defined by the Traumatic and Attachment Belief Scale, an individual "can trust own perceptions and judgment and other people can be trusted" (Pearlman et al., 2014).*
• *Esteem*	*As defined by the Traumatic and Attachment Belief Scale, "oneself and others are worthy of respect" (Pearlman et al., 2014).*
• *Intimacy*	*As defined by the Traumatic and Attachment Belief Scale, "one can be aware of one's thoughts and feelings and experience deep connection with others" (Pearlman et al., 2014).*

• *Control*	*As defined by the Traumatic and Attachment Belief Scale, "one can manage one's behavior and can be effective in the world" (Pearlman et al., 2014).*
Vicarious Trauma Scale (VTS)	A relatively newer tool used to measure vicarious trauma in both social worker and advocate populations; it is also used as a screening tool for vicarious trauma (Vrklevski & Franklin, 2008).

Chapter 3: Methods

Overview

The data used in this study were collected by Westat, a research organization in Rockville, MD. The National Institute of Justice awarded the Evaluation of the Bureau of Justice Assistance Sexual Assault Kit Initiative (SAKI) to Westat in 2016. This study was approved by Westat's IRB and an IRB Authorization Agreement (IAA) was executed between Westat and the University of Maryland College Park (Appendix 4). The project includes a multi-phased initial evaluation and mixed methods design to develop a long-term outcome evaluation design. This study evaluated responses from key informant interviews working within 17 sites involved in a reform focused on addressing the issue of unsubmitted sexual assault kits (USAKs) by conducting secondary thematic analysis to understand burnout and vicarious trauma within this population and factors that may lead to these outcomes.

Research Team and Training

Data collection was completed prior to starting this thesis and without my involvement, but interviews were conducted by senior researchers and research assistants from Westat with backgrounds in justice research and qualitative data collection and analysis. Many of these researchers were also involved in the development of the interview protocol and became experts on the SAKI grant. Each interviewer participated in a directed study that required staff to read about five peer-reviewed journal articles discussing best practices for research interviewing prior to data collection. All interviewers also participated in several trainings during the

development of the interview protocol and after the protocol was finalized to ensure the protocol was used appropriately.

Recruitment and Study Sample for Data Collection

The research team contacted all 20 sites granted funding in FY2015 from the Bureau of Justice Assistance. It should be noted that some sites have received funding for subsequent years. The research team received informed consent from 17 of the 20 sites and the other three sites were non-responses. Therefore, these three sites were not included in the evaluation or this secondary data analysis. Westat contacted the 17 sites involved prior to data collection to explain the purpose of the evaluation and Westat's role in interviewing specific key informants. In many cases, the site coordinator was the main point of contact for these calls, but some sites also included other key personnel. During the call, the interviewer asked relevant questions regarding the site's background, including reasons for applying for funding, goals and accomplishments of the site, and sustainability of the program long-term. At the conclusion of each call, the interviewer discussed logistics around scheduling in-person site visits to conduct the interviews that are reflected in the data for this analysis. Key informants were determined based on recommendations given by the site coordinator during this call. The research team prioritized these individuals based on their expertise and involvement within the reform.

Data Collection

Key Informant Selection

Overall, 222 key informants were interviewed for this evaluation. More information regarding the number of stakeholders interviewed is provided in Table 4. Interviews were conducted during the two-day site visits to better understand the site's reform efforts, relevant contextual factors, and current and planned activities related to SAKI. These interviews were mostly conducted in-person, however, due to scheduling conflicts, 17 interviews were completed over the phone. Individual and group interviews were conducted, ranging from one to five key informants per interview. A few key informants were included in more than one interview to narrow the focus of each interview to a particular section within the master protocol (i.e. legislation, media-related questions, victim engagement, etc.). Dropout rates were not calculated for this study because it was initially unclear how many participants were going to attend the interviews. Most interviews were coordinated through supervisors and, therefore, several of the informants were not initially recruited by the research team.

Table 4. Key Informants from Data Collection

Key Informant	**Total # of Informants Initially Recruited**	**Total # of Informants Interviewed**	**Total # of Interviews**
Law enforcement	62	57	34
Victim advocates	48	46	25
Lab personnel	47	46	28
Prosecutors	30	25	19
Site and grant coordinators	18	17	16
Research partners	11	11	9
Sexual assault nurse examiners (SANE)	5	5	4
Property clerks	5	5	4
Other*	17	13	6
Total**	241	222	145

Both individual and group interviews were included in total number of interviews.
**Stakeholders with an n=1 or 2 are aggregated for confidentiality. This includes media-related personnel, legal and administrative support, social workers, and other relevant stakeholders.*
*** The total number of individuals recruited and interviewed. Categories will not add up to the totals as some individuals had dual roles.*

Data Collection Methods

Interviews were semi-structured using a master interview protocol and interviewers asked different questions tailored toward each key informant's specific role in the process of dealing with victims of sexual assault or USAKs (Appendix 2). The master interview protocol was developed using open-ended questions to cover all important topics for key informants (Appendix 2). Prior to each site visit, the research

team narrowed the protocol for each interview to focus on relevant areas for each key informant based on their expertise (i.e. personnel whose primarily role is communications may be asked targeted questions related to media engagement, but would not be asked questions about the testing process of USAKs). When group interviews were conducted, participants were generally from the same profession and were asked the same questions based on their areas of expertise. The master protocol included questions regarding the interviewee's background, goals, objectives, and activities of SAKI, the multidisciplinary team (MDT), and understanding relevant processes the key informant was involved in. However, it did not include any questions asking informants about burnout or vicarious trauma because the intent of this data collection was to conduct a process evaluation. The master interview protocol can be found in Appendix 2.

Participants did not receive a cash incentive so buy-in for the evaluation was key in gaining stakeholder participation. Interviews were conducted in law enforcement offices, district attorney offices and other convenient spaces for key informants. Each interview lasted approximately 1 to 1.5 hours and interviews were recorded and transcribed by the researcher whom conducted the interview. The interviewer began transcriptions with their own notes and supplemented the transcriptions verbatim by using the recordings afterward. Research assistants, including myself, provided accuracy checks on the notes by comparing notes to recordings.

Analysis Plan

During interviews, researchers noticed that burnout and vicarious trauma were occasionally discussed among stakeholders and determined that a secondary data analysis on these topics may be of interest to the client. Therefore, all key informants that have direct contact with victims were included in this subsample as they may be more likely to specifically experience vicarious trauma. Key informants included in this analysis are law enforcement personnel, victim advocates, prosecutors, and sexual assault nurse examiners (SANE).

Table 3. Sample of Key Informants for Secondary Analysis

Key Informant	**Total # of Informants Initially Recruited**	**Total # of Informants Interviewed**	**Total # of Interviews**
Law enforcement	62	57	34
Victim advocates	49	47	25
Prosecutors	31	26	19
Sexual assault nurse examiners (SANE)	5	5	4
Total	147	135	82

This study used a qualitative approach to explore the extent to which burnout and vicarious trauma was discussed within this population. The aim of this analysis was to determine the following:

1. To what extent are burnout and vicarious trauma discussed among employees working with and for victims of sexual assault?

- What factors may be contributing to burnout and vicarious trauma in employees working with and for victims of sexual assault?
- To what extent are other stress-related outcomes discussed among employees working with and for victims of sexual assault?

Theoretical thematic analysis allows a researcher to develop a detailed analysis on a specific aspect of the data to answer very specific research questions (Braun & Clarke, 2006). This analysis used theoretical thematic analysis to take a dataset with robust and varied information across job roles to answer specific questions regarding burnout and vicarious trauma.

NVivo, a qualitative data management software, was used to organize blocks of text from the interviews into related concepts and ideas and to facilitate analysis through the use of queries that strategically pull the coded text and stratify the information by site and individual-level characteristics such as stakeholder type. A code book for *a priori* codes was developed for this analysis and used to develop initial nodes within NVivo to ensure all relevant information was captured from interviews (Appendix 3). These codes were created to mirror the research questions and sort appropriately into themes related to burnout and vicarious trauma. Constructs from the Areas of Worklife Model (Maslach and Leiter, 1999) were included as *a priori* codes as many of the interviews revolved around discussion of processes including impacts on workload and social support. The Traumatic Attachment and Belief Scale was included within the definition of the Vicarious Trauma code to ensure any discussion around changes in schema would be captured in this code.

Each transcription was read by myself prior to coding to ensure understanding of the interview. Sections of text relevant to the codes within the code book were highlighted and dragged into their corresponding nodes, or categories of information, within NVivo. Any information specific to efforts that occurred pre-SAKI or information deemed irrelevant to these research questions were removed to focus on the employees' current well-being and implications for the future. A total of 20 interviews were initially coded by myself using the code book. The analyst and I convened a meeting to discuss the *a priori* code book in detail to ensure understanding of all codes. Then, coding for the first 20 interviews was reviewed by the other analyst and level of agreement with the coding was determined by this research team member to ensure interrater reliability. The analyst and I convened another meeting and discussed blocks of text that she believed to fit into the codes based on the *a priori* code book. There were less than five blocks of text found that needed additional coding and we came to an agreement almost immediately after re-reading the codes. The coding for these blocks of text was corrected and I continued coding the rest of the interviews.

The initial plan was to include open coding for identification of new codes to capture any unanticipated ideas related to employees' stress and well-being from the data, however, only one new code (resources) was created after interrater reliability discussions. This code still fit under control, but was given its own code due to the amount of information being coded within resources.

After all relevant data was placed into the *a priori* codes, larger "parent" codes were broken out into smaller "child" codes to produce more nuanced findings and to better understand the themes within each code.

Vicarious trauma had been used as an umbrella term to assess the extent to which indirect trauma or posttraumatic symptoms occur from working with victims of trauma; therefore, this term was also used to encapsulate secondary traumatic stress (STS) and compassion fatigue (CF) themes as well. However, vicarious trauma and burnout outcomes were combined into one code called vicarious trauma and burnout outcomes due to the difficulty in deciphering between the two qualitatively. Additionally, vicarious trauma support became its own code because the idea of "vicarious trauma" was primarily discussed in terms of prevention through trainings. Once coding was completed, I began to connect ideas across codes and develop themes and patterns generally among the informants using inductive and deductive reasoning. Targeted queries within NVivo were conducted and assisted in categorizing each theme by stakeholder and site to understand patterns across these demographics. A reflexive journal facilitated documentation of all of my decisions, thoughts, and insights during the coding and analysis process. I reviewed these notes after I had completed analysis to ensure no further queries were needed and determined that all relevant queries had been conducted. All findings were reported and then reviewed by a senior researcher on the SAKI evaluation to ensure accuracy.

This analysis was exploratory in nature and used to determine the extent to which these terms and potential factors related to burnout and VT were discussed among informants. This study is similar in nature to a series of analyses that are being

conducted for the official SAKI Evaluation study, which include a process and impact evaluation using content analysis to identify patterns in interview responses about the scope of activities being conducted across sites and the facilitators, challenges, and unintended consequences of reforms to SAK processes. Therefore, this study focuses specifically on facilitators and challenges with potential impacts on employee mental health rather than those that may impact outcomes related to the SAK processing such as number of CODIS hits, prosecution rates, etc. While these findings may overlap with the process evaluation in some instances, this study specifically contributes to understanding hardships employees may face including emotional labor and potential symptoms of burnout and vicarious trauma.

Chapter 4: Results

Overview

In total, there were 32 themes identified for this study (Table 5). Two of the themes were related to descriptions of burnout and vicarious trauma outcomes and support specifically for vicarious trauma. There were also themes identified from six categories within the Areas of Worklife model that describe potential protective factors and risk factors for burnout and vicarious trauma. The categories from the Areas of Worklife model included in this study are community (also called social support), and control, which heavily focuses on access to resources, rewards, values, and workload. Fairness was determined to be directly related to resources and workload and is, therefore, not included as its own category. In order to report this data as consistently as possible, findings are described using number of interviews rather than number of individuals for consistency. Table 5 reflects these findings stratified by the types of stakeholders who discussed each theme.

Table 5. Themes Discussed Among Key Informants

Themes	LE	Adv	Pros	SANE	Total # of interviews	Total # of Sites
Burnout and Vicarious Trauma Outcomes	5	2	1	2	10	8
Vicarious Trauma Support	5	0	1	0	6	5
Community (Social Support)						
Improvements in relationships within and across agencies	24	17	17	4	62	17
Advocate involvement	7	14	2	2	25	13
Multidisciplinary team support	23	16	13	3	55	17
Supervisory support	11	6	5	2	24	12
Cross-site and cross-jurisdiction support	18	12	10	2	42	15
Workload						
Large caseloads	8	7	4	2	21	11
Challenging nature of cold cases	22	12	12	2	48	16
Emotional labor	12	19	7	1	39	14
Additional responsibilities from the SAKI grant	8	3	5	2	18	10
Fairness in caseloads	7	1	1	0	10	7
Control/Resources and Workload						
Insufficient resources for large caseloads	29	17	12	2	60	16
Some felt resources were sufficient	9	11	7	2	29	15
Additional resources were provided	22	15	15	1	53	15
Overtime and on-call work	11	1	2	1	15	10

Fairness in resources	5	3	1	0	9	6
Decision-making and autonomy	18	12	10	3	43	15
Attrition impacts on caseload	10	8	4	1	23	13
Attrition of experienced staff	12	7	7	2	28	10
Delays in testing	15	4	4	0	23	13
New backlogs are forming	9	3	3	1	16	11
Training	22	22	15	3	62	16
Technology and tracking systems	17	12	13	2	44	16
Insufficient resources for victims	7	7	2	0	16	11
Equipment and storage	10	5	4	2	21	11
Sustainability	9	7	5	1	22	11
Values						
Buy-in among leadership and agencies	21	9	19	3	52	16
Cultural change	9	12	5	2	28	12
Accountability	7	7	5	1	20	12
Rewards						
Rewarding and exciting work	4	3	0	1	8	6
Reinforcement	6	3	4	2	15	9

LE=Law Enforcement; Adv=Advocates; Pros=Prosecutors; SANE=Sexual Assault Nurse Examiners
This table represents the number of interviews where each respective theme was discussed to keep findings consistent given there were both group and individual interviews. Total number of sites represents the number of sites that had at least one interview discussing the respective theme.

Burnout and Vicarious Trauma Outcomes

In general, themes related to burnout and vicarious trauma outcomes were not consistently discussed among informants most likely because questions asked during interviews focused on challenges and facilitators of processes and informants were

never asked about burnout and vicarious trauma. In most cases, vicarious trauma and burnout were not easily discernable from one another in these interviews and, therefore, were combined into one theme specifically discussing negative outcomes due to the nature of work regardless of whether it was directly related to the work demands or the emotional work required within these processes.

Only two interviews with law enforcement provided discussions about detectives experiencing burnout, however, four other interviews with prosecutors and law enforcement described more general outcomes of the work making officers "numb, "taking a mental toll" on them and becoming "distraught" or struggling with sleep and anxiety specifically due to the nature of the work.

> *"…you always are thinking about these cases even in your time off. People have struggled with sleeping and anxiety. This is not something I experienced when working robberies. The mantle is a lot heavier to carry than other cases." – Law enforcement*

Law enforcement officers also noted that while overtime is offered to deal with the workload of cases, officers will not take the overtime work because they are experiencing burnout.

> *"Most officers' are burned out on sexual assault that they do not take the overtime work. In the beginning there were 5 or 6 [investigators] and that has dropped off. Now there is like one or two who work intermittently on these cases." – Law enforcement*

Informants within a few interviews described conflict in leadership and coordination as the reason for negative outcomes, with informants from two

interviews explaining they were taking sabbatical or preparing to quit. A SANE nurse described these conflicts as creating "anxiety and doubt" among nurses and urged other sites to ensure that leadership understood the complexities of being a SANE nurse and the importance of providing them the necessary resources.

> *"The nurses we had left were ready to quit. They weren't being paid on time, weren't getting the tools they needed to actually do the exams when they got to the hospital. [They] had no confidence in the administrative support of the program [and it] created anxiety and doubt." – SANE*

Vicarious Trauma Support

While burnout and vicarious trauma outcomes were not discussed frequently among informants, individuals from a few interviews did specifically use the term "vicarious trauma" when referring to trainings that were being conducted at their respective sites. This theme primarily focused on vicarious trauma training for detectives working the sexual assault cases, with the exception of one interview of prosecutors stating they also received a vicarious trauma training. This suggests that some sites are aware of potential negative outcomes in working sexual assault cases.

Law enforcement officers from one interview described their supervisors as offering "one on one support" and advocates as another source of support for law enforcement. Advocates from another interview echoed this thought, stating that they attempt to mitigate detectives' traumatic stress and that detectives look to them for advice on how best to approach victims.

> *"In a way, our detectives are our clients too. We're trying to mitigate their traumatic stress. They have high caseloads. We will stop and talk with them about*

cases and how they're feeling. The detectives are receptive and work with us. It doesn't seem like you're bothering them when you consult with them. They'll call me on the weekend to talk about something they've been thinking about doing with a survivor – not even just about investigative work, but about helping work. That's a lot different than it used to be." – Advocate

It should be noted that a SANE nurse discussed trainings that "reduced secondary victimizations," but it is unclear whether she was referring to secondary trauma among employees or re-victimizations of the patient.

Community and Social Support

Improvements in relationships within and across agencies

About half of the interviews within this sample had informants who described "good" or improved relationships within and across the main agencies involved in SAKI. Several others described lessons learned specific to the importance of networking and communicating with different stakeholders to ensure success. Additionally, some specified ways in which their relationships had improved to better outcomes for victims and employees citing the ability to coordinate, share information, give feedback, and seek out advice from other agencies as particularly useful. In some cases, individuals were able to shuffle their workloads to assist others with their own work, suggesting that social support may also be useful in limiting workload.

"When we were sending 50 [kits] at a time, that's a lot of paperwork. Typically, as an advocate, it's not my job to send submittal paperwork, but

[the detective] couldn't do it all, so [the advocates] helped out. That was tough but not unmanageable." - Advocate

Advocate involvement

About one quarter of the interviews had informants who described improvements in relationships between law enforcement and advocates allowing for more information sharing, feedback across agencies, and improved victim engagement, which could influence the likelihood of a victim moving forward with prosecution. Some also shared lessons learned about the importance of continued communication and coordination with advocates.

"That has helped so much to have an embedded advocate there now. The advocate helps connect with victims. She brings a sense of calm to help the victims…it would be nice if other agencies could have that as well." – Law enforcement

"At first, current investigators were reluctant to the change [in advocates working with law enforcement]. They viewed advocates as someone who believes anything and everything and were reluctant to share their investigation with them. It was an adjustment for everybody, and it was probably one of the best positive things we have ever done." – Law enforcement

However, advocates within a few interviews shared concerns about not being involved enough with law enforcement during various processes including victim notification. Reasons for not engaging advocates included concern for the safety of

advocates walking into potentially dangerous situations and lack of buy-in among law enforcement to engage advocates in the processes.

> *"Whether law enforcement actually engages advocates depends on cultural buy-in even with the new law in place. It depends on education, training, individual relationships, seeing the value that advocates can bring to an investigation when the victim starts opening up, understanding role differentiation. Some parts of the state had buy-in early, some are still fighting it." – Advocate*

Multidisciplinary team support

The SAKI grant required a multidisciplinary team (MDT) be created at each site to encourage key stakeholders to work together on various aspects of the reforms. Most interviews had informants who mentioned these meetings were initially used for development of victim notification protocols to ensure victims were notified appropriately and re-traumatization was avoided, however, these meetings were also used to complete case review to prioritize cases for testing and prosecution and to share information including updates on cases. Some sites have also chosen to break out their multidisciplinary teams into smaller working groups that focus on more specific topics.

Informants within more than half of the interviews spoke of the multidisciplinary teams as useful for collaboration on processes, which may have contributed to the overall social support employees were experiencing. While the general consensus was that the MDT allowed for overall coordination and collaboration, informants from all professions explained that MDTs improved

accountability, understanding of roles, and allowed them to share information or "bounce ideas off one another" for problems such as prosecution for difficult cases. Therefore, having different perspectives on the team was useful in ensuring that problems could be solved and effective decisions could be made.

> *"Between them all, there's different understandings of how to retrieve information. Having so many individuals working together is good as long as people are open-minded." – Law enforcement*

> *"We have a number of different disciplines at the table, which is good. [The site coordinator] has put in a lot of work to build relationships with folks in the community with disciplines that are adjacent to us and that has resulted in good attendance. Law enforcement and prosecutors come. The fact that we meet quarterly is good. We don't need to meet more than that." – Advocate*

Informants from almost half of the interviews noted challenges with their multidisciplinary teams. Conversations around these challenges varied and were mostly specific to contextual factors that were happening within each site, however, more common themes included missing individuals from meetings and differences in perspectives and opinions that made collaboration challenging at times.

> *"It just depends - in some areas its law enforcement [missing from the MDT], in others [it's] advocacy or prosecution. I think everyone shares part of the burden where they could be more active…I could literally list a representative that is missing from each agency. We don't quite have everyone to the table." – Advocate*

Supervisory support

Informants from over a quarter of the interviews within this sample described positive experiences and supportive supervision. Supervisory support was discussed in terms of level of buy-in among their supervisors, the emotional support they provided, and overall assistance including sufficient resources. In particular, supervisors were described as helpful in streamlining processes and providing stability for staff. Additionally, the importance of feedback and feeling comfortable in receiving feedback was described as integral to the process among informants from several interviews.

> *"As a department, we work well across rank. People aren't obsessed with ranks. Our police departments can tell me things and correct me." – Law enforcement*
>
> *"[The supervisor] is very positive and I can call him and ask for help with something and he would never turn me down. He's always upbeat, pleasant. Very good choice in person. Very enthusiastic. That truly helps bring people to the table. His job isn't easy so having the right people doing the right jobs was a big factor in the successes that we've had. He went to bat for us to get the results from [the private lab]. That was not something that was ever going to happen without the SAKI grant." – SANE*

Informants from very few interviews explained they didn't have sufficient supervisory support primarily regarding resources including staffing, pay, and appropriate tools to do their work. Law enforcement personnel from one interview

specifically stated that when they bring concerns about staffing to leadership, their response is "everyone is strapped, shut up and do more with less."

Cross- jurisdiction and cross-site support

More than half of the interviews had informants who discussed cross-jurisdiction and cross-site support and described asking other sites for feedback about victim notification protocols, investigative protocols, and support regarding investigations particularly when a suspect has committed crimes in different jurisdictions. Informants from two sites that had not previously contacted other sites reported having plans to reach out regarding resources and suggestions on victim notification. Cross-jurisdiction support was described as useful in understanding what other sites are doing to troubleshoot issues and in sharing information to ensure the same mistakes are not made across sites.

> *"Not yet but that's the next thing I want to do is to reach out to other sites. We want to reach out to [site name] because they've done a lot of good work. They have come out with info on reaching out to victims. We'll share that with everyone. Outreach is an every-case-issue - not just SAKI. There are some victims that don't want to move forward and that's an issue. We need to figure out how to address their concerns or how to move forward without them if it is a serious crime. We have an obligation to prosecute and a desire to have them on board." – Advocate*
>
> *"I like attending conferences and seminars to hear what other sites are doing. There's a lot to be learned there. It's good to hear when sites are doing things differently than us and maybe there's a reason for that." – Prosecutor*

"We have been interacting with other agencies from other states and collaborating with them about how to do things so we are not reinventing the wheel. We steal things from [site name] all the time and they take things from us." – Law enforcement

Workload

Large caseloads

Informants from about a quarter of the interviews within the sample described large caseloads in their own work as well as within the labs who were not included in this sample. This increase in caseload could be due to an uptick in reporting of sexual assault cases and is also expected during the SAKI grant because cold and current cases must be investigated concurrently. In particular, informants from about one third of the interviews discussing large caseloads described being "overwhelmed" or "inundated" with cases, potentially insinuating that individuals may be struggling to cope with the high caseloads especially over long periods of time.

"It can take a couple months or a year to get kits back. The lab tests SAKs and homicide DNA and other things so they are inundated." – Law enforcement

Challenging nature of cold sexual assault cases

Of particular concern for informants from more than half of the interviews were the challenges in re-investigating older cases and attempting to prosecute these cases. Most law enforcement and advocates specifically discussed challenges with locating the victim and/or a suspect and the amount of work that this could entail for

older cases given the many situations that a victim could be experiencing. While the victim may have moved on and become uninterested in going forward with the investigation, detectives stated that "victims often lack stability" and may not be the easiest to find. Given that these cases could be from several decades ago victims could also be deceased. Additionally, law enforcement spoke about the difficulties in reinvestigating these cases and having to dig for information that could be biased or potentially lost due to changes in tracking systems or insufficient technology or documentation from several years prior.

> *"We may have to do follow up to understand some circumstances of the case. For example, I have to drive to a prison to interview one victim where the report wasn't clear because she was high on heroin." – Law enforcement*

Challenges with prosecuting cold cases was discussed in almost all prosecutor interviews. They explained that prosecuting these sexual assault cases was difficult for several reasons including the amount of time that had passed and the unlikelihood of a victim remembering events. Prosecutors in several interviews also noted difficulties in gathering individuals for trial including those that may be more difficult to find including the initial investigators and several people from labs that were involved in testing the kits. Difficulties also included the significant amount of time spent learning about each case including meeting with the victim and preparing for trial. An interview with a SANE nurse echoed similar thoughts for their own staff:

> *"I expect to see challenges at trial tracking down the person who did the exam because we've had nurses who have left. Don't know what will happen if [we] can't find the nurse. Years ago it was a challenge to get all the forensic nurses*

together, but we've overcome that. We have multiple jurisdictions that we deal with. Every coordinator should have an updated list of who is in charge of the sex crimes unit for that particular department. This is still a challenge." – SANE

Prosecutors within one interview specifically talked about challenges with the labs using the wrong "threshold" for testing that caused many of the kits to be returned with an inaccurate result of "inconclusive." This mistake could cause problems with prosecution because the initial finding will remain "inconclusive" even if the kit is retested, allowing the defense to use this evidence against them.

"With the private labs, people are transitory and prosecutors have to track them down for a case if it comes up for a trial. On older cases, tracking down original witness statements on microfilm or recordings is challenging." – Prosecutor

Prosecutors were also aware of other arguments the defense could use against their cases including the difficulty in swaying juries whom may feel that the sexual assault kits were not tested because law enforcement did not initially believe that the sexual assault occurred or that "these accusations are coming out of nowhere" years later. Prosecutors also mentioned similar difficulties as law enforcement with technology and in tracking down victims, but also noted that destroyed evidence can hinder a prosecution as well.

Staff are experiencing emotional labor in working with these victims

The emotional labor required of these employees in working with victims of sexual assault whom may feel betrayed by law enforcement was discussed among

informants from nearly half of the interviews. Informants particularly described difficulties and sensitivities surrounding notification of victims after their SAK had been tested, especially of those that had been part of the initial backlog of unsubmitted kits. Informants from a few interviews explained uncertainty in how the victims would react as a particularly difficult task. Additionally, descriptions of victim reactions varied across interviews with some individuals describing victims as being visibly upset, angry, or distraught by the news of their SAK to others that "weren't terrible." Informants also described added stressors including family members calling and questioning why the SAKs had not been tested, victims becoming upset when prosecution wouldn't move forward, and victims panicking about various aspects of the process, suggesting that victim reactions may be stressful for employees.

> *"Expect any and everything. I've been kicked and spat on and also hugged…you have to treat every case as its own. Cases aren't predictable." – Advocate*

According to informants, victim notifications typically begin with an apology from law enforcement to diffuse the initial reactions of victims and to ensure the victim understands that law enforcement is taking responsibility for not testing SAKs when the crime occurred. One interview with detectives noted that it was not easy to take the blame from the community, with one stating "It's very frustrating to have to explain [the backlog] and deal with community frustration. It's also challenging to be blamed for past work on the case." However, informants from several interviews

stated that this apology was key in building community trust with law enforcement again.

A few interviews had discussion around the sense of responsibility informants felt around these cases and noted that staff provided their personal cell phone numbers to victims if they needed assistance, potentially adding to their workload and the emotional labor required of them. Relatedly, informants described struggling to walk away from cases when the victim did not want to prosecute.

> *"You have to be realistic about cases. Prosecution is going to be difficult already for sexual assault cases and even harder for older cases. With victims choosing not to go forward, you have to respect their decision and walk away." – Law enforcement*

Additional responsibilities for the SAKI process and grant

In addition to high caseloads, the reform placed additional responsibilities on staff involved in SAK processing. Informants within a few interviews discussed the USAK process as a "massive undertaking" with one describing it as a "long arduous project." Inventory was particularly time consuming due to ensuring the accuracy of kit counts. A detective from one interview noted that inventory was their "biggest hurdle." Individuals within other interviews echoed the importance of cross-jurisdiction support in relation to inventory to ensure best practices were shared and conducted at other sites.

> *"I feel like SAKI made us reinvent the wheel. If you know what a notification process should look like, give us one. Don't make us go searching. It would have saved so much time to deliver this as a toolkit from the*

beginning…We're so busy with our cases that I don't have time to sit on the internet and join a chat group and go searching. If you have something that is working, share with us and we can tweak to make it state-specific." – Advocate

Grant and research requirements may have also added to employees' workloads and become particularly cumbersome. A detective noted that "changing [grant] requirements caused the police department to constantly re-review cases to get new information."

"We have enough on our plate and on top of it we have to comply with the researchers' requests." – Law enforcement

Fairness in caseloads

Informants from only a few interviews discussed fairness in terms of how caseloads were assigned. The majority of informants who described the idea of fairness within caseloads were investigators and almost all explained they were assigned cases round-robin or on a first come-first serve basis. Law enforcement from only one interview noted that cases were assigned somewhat based on their skill set. While this could be important for victim interaction, assigning caseloads based on skill set or experience could potentially lead to consequences if staff have unequal caseloads.

"We try to disperse serial cases equitably but they all maintain between 15 and 30 cases in their queue and as soon as 5 go out 5 come in. Cases are very procedural and all the same so there's no need to distinguish between detectives." – Law enforcement

Control/Resources and Workload

Insufficient resources for large and difficult caseloads

Within the Areas of Worklife Model, access to resources typically falls under control as it is believed to impact an individual's ability to frame their environment in the way they want. However, access to resources can have direct implications for workload demands and, therefore, will be reported along with workload in this section to understand the relationship between resources and workload within this sample.

Informants from the majority of interviews shared challenges involving insufficient funding and staffing in conjunction with large caseloads. Insufficient staffing was discussed consistently among staff in reference to all agencies including labs, however, law enforcement staffing was discussed the most among informants.

> *"[Resources] are not even close to being sufficient. We suffer from volume. It's very frustrating. One person has 17 current cases and they keep coming. That's agency-wide. There are cases where you think we really need to contact them right away, but it takes a couple weeks. One staff had 123 rapes in 2017. Then you're in a constant state in suspended animation waiting for the testing results and months later you have to drop what you're doing to pick that case back up." – Law enforcement*
>
> *"If you get new prosecutors, you'll need new investigators, because the DA needs that support to properly prosecute the cases. Then, when you get new additional cases, you'll need additional victim advocates to work with the victims. Then we're working with two secretaries so we'll need additional*

admin and file clerks. And training - ongoing training is a big problem." – Prosecutor

This is particularly concerning given that several interviews of informants described increasing caseloads due to improvements in community trust, increased media attention, and legislation changes. However, this increase in reporting has not been met with sufficient resources for staffing or training. Advocates within one interview explained that they are unsure of "how to project future needs" because "rape and sexual assault have been underreported for so long."

"The attention on un-submitted SAKs has resulted in changes in state law and caused changes in our criminal justice processes, and in tandem with exposure of sexual assault in the media, there has been almost a 75 to 100 percent increase in people reporting sexual assault." – Advocate

Some felt that resources for staffing were sufficient for now

In direct contrast, informants from several interviews and across all professions stated that resources were sufficient given their caseloads. However, it should also be noted that these individuals only had a handful of SAKI cases at the time of data collection and were preparing for a higher caseload in the future. While prosecutors felt they currently had enough resources due to the limited number of cases, most acknowledged they would not have enough resources when larger quantities of cases reached prosecution.

"So far I'm managing the workload. They're still in the early stages of prosecution, but new results are coming in daily and we're expecting a tidal wave to hit soon." – Prosecutor

Additional resources were provided to assist with caseloads

While insufficient resources were a challenge, informants from most interviews discussed plans to hire, or the usefulness of having already hired additional staff for investigation, advocacy, prosecution, and testing of un-submitted SAKs.

> *"If it wasn't for the SAKI grants our jobs wouldn't exist or would be really difficult. The support helps me do my job. SAKI helps with staffing the unit so we can get through cases in a timely manner." – Law enforcement*
>
> *"The first year I had to do SAKI work above and beyond my regular work. Now my SAKI work time is paid for and allows me to be more involved… SANE should absolutely be part of the funding just like prosecution. And people need to understand SANE nurse time is expensive, so you need to allocate sufficient resources to pay them what they're worth. You need to make it financially feasible to include SANE nurses at the table from the beginning." – SANE*

Sites varied in the types of funding used including federal grants such as SAKI or local funding, but also differed in how they used that funding. Some sites were more likely to hire additional staff including retired detectives and administrative support such as designated trainers and sex crime scene investigators. However, some informants described shifting staff around from other jurisdictions or providing overtime to the staff already employed. One detective explained challenges with grant-funded positions in particular:

> *"Our department has a phobia for hiring full-time grant funded positions. We don't want to hire them after the funds end and I don't have time to train a*

part-time investigator. So we rely on overtime and many detectives don't want to work overtime." – Law enforcement

Overtime and on-call work

Overtime was primarily discussed as being an option among detectives involved in SAKI case investigation, but was also discussed in two interviews with prosecutors with one describing overtime among lab personnel. While a prosecutor at one site had the impression that "there usually isn't a shortage of law enforcement who want to do overtime", law enforcement at a different site explained that detectives "work a lot of overtime" and that it was a "big issue." As mentioned earlier, law enforcement officers also explained that detectives will not take the overtime due to the traumatizing nature of the cases.

In addition to overtime, on-call work and employees having second jobs was also described. A SANE nurse in one interview explained that being "on call creates a retention issue because they also work another job full time and are supposed to be on call for SANE." An advocate explained further challenges with second jobs that prosecutors may be facing:

"There is a feeling that there is a bit of a crisis in the state with people with experience leaving because of low pay and high caseloads. It's really challenging - the ability for them to stay and do the work they love with law school debt. Many of these attorneys who do sexual assault cases have second jobs like teaching and working at [retail stores]." – Advocate

Fairness in resources

Similar to the discussion around fairness in caseload, only a few discussed fairness of resources. Informants from two interviews described equal support across the site in dividing up funding, with law enforcement stating that leadership "divvied up funding as best they could between agencies" and that it "was very fair in that respect." However, individuals from the majority of interviews who discussed fairness described inequality among jurisdictions and departments with one stating that "some agencies have investigators, but those investigators have to work every type of case. In my unit, we work with just sexual assaults." However, these investigators also noted that, "if a hit involves a new case then I reach out to the agency overseeing that case and offer to include the investigation of the new case in my investigation of the SAKI case," suggesting that even though resources may seem unfair, some jurisdictions with additional funding may occasionally reach out to offer help. Law enforcement from two interviews described inequality across departments, noting that the homicide department receives more funding than the special victims' units even though the number of cases is rising in most special victims' units.

> *"I did work with the stat person in the office and found that sexual assaults were the crime type that was rising. I took this information to the chiefs, but [leadership] still decided to add more people to violent crimes instead of sex crimes." – Law enforcement*

Decision-making and autonomy

The ability to provide input on various processes including victim notification protocols and the ability to be autonomous and have flexibility within the workplace

was commonly discussed among informants. While informants from most interviews discussed this more broadly, they emphasized that these ideas were essential to them completing their work.

> *"I really feel like having someone that's focused is critical. [The site coordinator] does keep it in the boundaries and she'll let us off the leash to get it done. I really feel like having a project manager that's focused, understands the scope, and keeps it in line gives you freedom to do the job." – Law enforcement*

Informants from several interviews discussed challenges including insufficient input and inability to access information that is needed to complete their work, whether that be due to insufficient access to databases or having to go through another person to retrieve appropriate information. However, it's unclear what impact this may have had on employees other than making their workflow more difficult.

> *"We had no input in the design of the project. With un-submitted kits, we struggled for a long time. I am not sure why the attorney general made the decision to do all the testing." – Law enforcement*

Attrition may have impacted caseloads

Informants from over a quarter of the interviews discussed turnover and retention of employees as a challenge in maintaining staffing throughout the SAK process. Among the reasons for turnover were administration change and instability that negatively impacted attrition, resources, and delays in processes. Promotions among staff was the other main culprit described by informants; both law

enforcement and prosecutors typically transfer to work on cases other than sexual assaults when promoted.

> *"There's a high turnover rate in [the district attorney] office. They get good attorneys but they are only there for a short period of time or don't want to do SVU cases. They don't want to be there. It's seen as a punishment." – Law enforcement*

> *For the [police department], they take tests to move up in their career and we want them to move and be successful, but that is hard for us. That's just the way the system works – same thing for our district attorney's office. Advocates and DAs come, they learn, they move on. That's government." – Advocate*

Individuals described the influence of attrition on other aspects of the work including the impacts on social support and on workload. An advocate explained that changes in staffing can negatively affect "developing group norms" and trust, which "is necessary to feel safe so that you can confront someone on the team and realize it's not personal." Another law enforcement interviewee stated that "attrition is detrimental to police departments" because "they are down officers in every unit."

Attrition of experienced staff may impact the ability to work effectively

Having "the right" people working these cases was crucial to managing workloads. Informants from several interviews explained that having training and experience in sexual assault is necessary for both detectives and prosecutors to locate victims, effectively prosecute cases, and provide better experiences for victims. A

prosecutor from one interview stated that experienced investigators "understand what the prosecutors need and they know what we will ask." Others explained that having staff who wanted to work these cases was also important. However, an advocate noted that she has "the most anxiety when I hear we're bringing in someone new" and urged for more training for new recruits entering law enforcement. There may be additional implications when certain staff resign or leave their job, as training can be extensive and time-consuming; SANE training can take 3-6 months and forensic personnel training can take over one year.

> *"Internally, we have unit staff with substantial experience with prosecuting violent and sex related cases. So in terms of experience we have that. The point we're making is if we don't have the senior level staff, we'll end up with attorneys with lesser experience taking these cases. Overall, that would result in lost opportunities at trial and mistakes made. The attorney on track - he will have heavy caseloads and will end up looking at a case that is not being worth the effort. You need that experience level in terms of being a prosecutor." – Prosecutor*

Delays in testing from high caseloads made investigation harder

Law enforcement personnel most commonly discussed this theme because timeframes on the testing of kits were a challenge to continuing investigation. Most described turnaround times ranging from two to three months to over two years for receiving SAK results back. In particular, informants from a few interviews discussed delays in receiving current case SAKs and other testing results back due to the increased caseloads from SAKI cases.

"I submit the kit within 30 days, but I often have to wait for the rape kit to be processed. It is now within 120 days and I'm really happy about that, but it actually pushes other blood kits to a year sadly. But it is ok because rape kits are important." – Law enforcement

A law enforcement officer explained that there are consequences to an investigation and a detective's workload when having to wait this long, stating:

"It took over 12 months to get DNA back on a potential serial case. When DNA came back, I could not find the victim because she was homeless and transient. When I found her, by luck, we were able to get an indictment." – Law enforcement

Additionally, labs limited the number of kits and the amount of evidence allowed for submission per SAK to ensure that caseloads could be managed. However, this forced detectives and prosecutors to prioritize the ways in which they submitted and investigated cases to ensure the most viable cases were sent for testing first.

New backlogs will continue to impact caseloads

According to informants, new backlogs are forming due to the "high volume" of cases and delays in testing including the restriction of the number of kits allowed for submission.

"The restriction of six current kits per week is creating a new backlog. The numbers are the numbers and we are exceeding more than six per week. It's going to create a backlog for sure. We have 103 [kits] that are currently backlogged and presumed to need testing. An ideal number of kits per week would

be 12 – that would greatly reduce the backlog or do away with it." – Law enforcement

Informants from five interviews explained that legislation had been passed to ensure there were timeframes for either submission or testing of SAKs. However, one advocate explained these legislated timeframes may still not be met stating that "kits are not being tested within 60 days." While a few informants believed that legislation would prevent future backlogs, law enforcement stated that "with the volume of sexual assault cases in [that location], and the manpower issues, there will always be a need [for more resources to address the backlog]."

To alleviate some of this burden, informants from nine sites described outsourcing SAKs to private labs in an attempt to handle caseloads and take burden off of state crime labs.

"It can take months to get tests back for current cases. Testing un-submitted kits can delay the current testing – this was a concern. So sending the kits to the outsourced lab is very helpful. It's not as simple as hiring more analyses for the state lab. I don't think the constraints are understood by the public." – Prosecutor

Training

Trainings were consistently discussed among informants with the majority speaking more generally about the various trainings offered through SAKI and other outlets including webinars and training and technical assistance trainings related to the justice system, vicarious trauma, victim and witness interaction, sexual assault

prosecution, and building relationships between advocates and law enforcement agencies.

> *"We have increased funds to help nurses go to trainings and conferences. Nurses are now also presenting at conferences…that's amazing" – SANE*

The most commonly discussed trainings were those about victim-centered approaches including best practices for interviewing victims and the neurobiology of trauma. Most found trainings valuable and felt it had a positive impact on building relationships between agencies and on culture especially within the police departments.

> *"We have had a lot of opportunities to have trauma-informed training. When detectives heard the trauma-informed training, it really stuck with them and they said they really wish that they had gotten that sooner." – Advocate*

> *"We had a DA who attended the neurobiology of trauma training and got it, and she talked the chief of police into coming on board. It was very helpful to engage someone from another part for the system to help." – Advocate*

However, individuals from a few interviews noted there is a need for more training on sexual assault and more victim-centered approaches, especially for investigators. Funding for trainings and conferences have become more limited at certain sites, suggesting that SAKI funding may be targeted toward other tasks at these sites. An advocate noted shrinking resources also impacts workloads, especially for advocates responsible for several trainings in addition to their regular workload:

In an environment of shrinking resources, there aren't enough funds for all the advocacy needed. We have had to scale back in services and staff. Also the training and information about this that needs to be pushed out overwhelms the already overwhelmed advocate. SAKI has put more of a strain on the advocacy process." – Advocate

Technology and tracking systems

Informants from over one third of the interviews described their tracking systems, explaining the interface and what they were used for. Tracking systems varied from site to site, ranging from several excel spreadsheets to electronic databases used for victim engagement and SAKI kit tracking. Informants from almost half of the interviews that described their tracking systems also explained challenges including the lack of consistency between systems and how they were used across jurisdictions. Law enforcement personnel described systems that were "incompatible" with one another and, therefore, difficult to streamline. User-friendliness was also a challenge among several agencies and many found the systems to be "cumbersome" to use. In addition, law enforcement explained that certain agencies may not know how to use databases at all, with one explaining they didn't have a case management system and were still required to take handwritten notes. Prosecutors from several interviews agreed with this, stating that they lacked a "trackable, usable system." One prosecutor shared advice about tracking systems in that they are only really helpful if you have time to implement them early as they "don't have time now to implement."

"There is no case management system. We have a custom form made in our records department, but I take handwritten notes. I would love to have a case management system." – Law enforcement

Insufficient resources for victims

A few interviews, of which most were with advocates, had discussion about insufficient resources for victims who "need wraparound services" including funding for services such as counseling and housing, especially when trying to assist victims who may now live in different jurisdictions or states. Only informants from two interviews explained that they had appropriate funding for victim services.

"We're at a point where we tell survivors we're here to help them find some justice, we let them speak their peace… and we say we'll help you, but the reality is we don't always have the resources they need. We tell them we can help them [and] remove the barriers to address what steps to take next, but many of these survivors have so many layers of trauma. Their current situation - homelessness, joblessness, or mental health issues, may be a result of the initial trauma. The person may need support we can't provide. Their concern is living day-to-day right now. They may not be concerned about what happened 20 years ago." – Advocate

An insufficient number of vehicles within the police department and insufficient funding for transportation were also described within several interviews as causing delays in finding, interviewing, and providing services to victims. One law enforcement informant suggested avoiding transportation altogether for this reason and turning to other methods for investigation:

"Don't travel – use phone and email. It would be too costly and not efficient because you don't know if the person will be there. We use financial records, welfare records, credit reports, people-finding or criminal correctional databases, social networking, Facebook, Instagram." – Law enforcement

Equipment and storage

Resources such as additional space and renovations in the labs and SAK storage room were discussed. Informants from half of the interviews that described equipment and storage noted that SAKI funding was used to address these areas. However, others were more specific about equipment still needed including computers, printers, copy machines, scanners, and cell phones to ensure proper victim engagement occurred. A SANE nurse described how they had to fundraise money themselves in order to provide proper equipment for victims:

> *"I love to have forensic supplies. The rape kit is too basic and we want more evidence envelopes. We have raised money for replacement clothing, toiletries, and a little duffle bag for wherever they are going with personal hygiene stuff." – SANE*

Additionally, law enforcement informants explained that storage of SAKs was an ongoing issue. While informants from two interviews explained they were still unsure of decisions about how long to store SAKs, one explained that legislation required them to store the SAKs indefinitely. This could become a larger problem given "they are going to run out of room" and the storage of SAKs is incredibly expensive at "over 1 million dollars" for one site.

Discussion around sustainability

Of those that discussed sustainability, nearly half described concerns about funding for staffing going forward. Within a few law enforcement interviews, informants shared concerns that insufficient funding for staffing may lead to the "same issue" of un-submitted kits in the future, but could also impact the later stages of SAK processing such as prosecution. In particular, one prosecutor stated they "will need another 2-3 years to finish" while another mentioned they realized their funding would "run out" because it was "directed to testing and lab reports" rather than focusing on the end stages of investigation and prosecution. This was reflected in interviews from nine sites where many described funding that was targeted for testing of kits. Informants noted that legislation and additional funding was the key for ensuring sustainability going forward and several were looking to reapply for the SAKI grant or find other sources of funding.

Values

Buy-in among leadership and agencies

Informants consistently discussed the importance of buy-in among peers and leadership to ensure success of the SAKI goals**.** While this topic was typically discussed more generally, informants from a few interviews specifically linked the impact of buy-in from leadership to obtaining necessary resources, which could potentially improve the control an individual feels over the work environment. Some focused on the importance of collaborating and having the same goals which can positively influence buy-in. However, individuals spoke about the necessary

"motivation," "commitment," and "dedication" required of staff to ensure that these SAKs are properly investigated and prosecuted. In particular, informants from three interviews noted motivation is key in ensuring people perform to the best of their ability.

> *"If you are motivated and invested, you will do a better job. Try to attract people to investigate these cases. people who actually want to do those cases." – Prosecutor*

Additionally, individuals from all professions noted they and their peers cared about the work or had a "passion" for it, with some adding that the work was "personal" for them because they lived in the location where these crimes had taken place or had family they thought about when they dealt with these cases.

However, there were challenges with buy-in from some leadership personnel and jurisdictions across sites. Mostly law enforcement discussed lack of buy-in negatively impacting access to resources, while other informants typically talked more generally about leadership and jurisdictions that lacked buy-in. Of note, one law enforcement officer acknowledged that having buy-in doesn't necessarily mean this translates into actual resources stating:

> *"There is a lot of buy in from leaders above, but then there was still no support in real life." – Law enforcement*

More specifically, several interviews had discussions about their emotions regarding some of the tasks required of them, suggesting their values were in direct conflict with tasks their organizations were requiring them to do. Conflicting values

regarding whether to notify all victims of their tested kits and whether to force victims to testify was a common topic among informants. Primarily advocates and investigators described their own negative experiences in contacting victims while providing no additional information to the victim on their case. Most everyone who discussed this felt they were making the wrong decision in contacting these victims because they were potentially retraumatizing a victim for "no reason."

It is possible that certain stakeholders hold different values regarding victim interaction. In particular, one investigator explained that researchers feel law enforcement should push victims to move forward even though that would take away from victim-centeredness. Due to the small number of interviewees who stated this and the removal of researchers from this analysis, it is unclear whether this was a misunderstanding or whether researcher motivations differs from those in law enforcement.

However, informants mostly discussed prosecutors as the stakeholder in direct conflict with these values. It is possible that some prosecutors may hold different values regarding victim interaction or have different ideas about what success looks like for these cases. Specifically, a prosecutor stated that it was "good to have the victim advocate there with them" during notifications to "help walk that line to not try and convince [the victim to proceed] if not best for them." Three prosecutor interviews had discussion around having to respect the wishes of the victim, with a prosecutor noting that while they want to prosecute, they "understand that they need to follow the victim's wishes."

"As a litigator, I am competitive and want to win all of these, but I also need to keep in mind that this needs to be a positive experience for the victim all along the way given the circumstance. If we win and they had a terrible experience with prosecution, then it is not a win. If we lose, but the victim had a good experience, that's a win. I'm realizing justice is going to come in different ways, not just the trial outcome. Justice in some cases is just attempting the trial." – Prosecutor

It should be noted that several of these sites now have victim notification protocols that created standards for when and how to contact victims in an effort to reduce potential re-victimizations. However, sites conduct these notifications differently, including which victims they contact, when they contact, how they contact, and whether law enforcement, advocates or prosecutors are involved in this notification.

"In the beginning, victims were not given a choice to participate, forced to participate…we were showing up at home and work when they said they didn't want us…Investigators didn't want to do this and felt bad about this, but the administration was telling us to do this." – Advocate

Cultural change

Overall, informants noted a positive culture change had occurred since the SAKI grants started. Over a quarter of the interviews within this sample had informants who discussed culture change in regards to education and awareness, specifically about the neurobiology of trauma in victims, the need for all SAKs to be tested, reduction of bias, and in gaining political and community support. However, some of the

informants who thought culture had changed for the better warned that bias had not been eradicated and that reform efforts needed to continue.

"The viewpoint is shifting, but we still have some police officers that think if you're in the sex industry, that's part of the job. Overall it is changing though. We all know no matter what the victim is doing, even if I met you to have sex with you, once you put that gun to my face, its assault. People are getting that now - police and prosecutors." – Advocate

Informants from a few interviews echoed these ongoing concerns about the need for continuing cultural change across law enforcement agencies including those that are not SAKI grantees and discussed ongoing issues with bias amongst law enforcement, urging for sustainability and continuing efforts in training staff.

"My fear is that that culture shift won't continue on, but I hope this becomes a county-wide task force for current cases." – Prosecutor

Accountability

Improvements in accountability of individuals involved in SAK processing were discussed among informants. Most informants discussed the importance of accountability from leadership and ensuring attendance at multidisciplinary teams to appropriately prioritize and investigate cases. Some discussed concerns about this accountability in regards to the MDT, investigation, and prosecution to ensure kits are accurately tested and appropriately investigated and prosecuted if possible.

"I have some questions about the DA's office and how open-minded they are being about some of these cases. Just the seemingly lack of transparency. It's so

difficult to see whether those outcomes are being achieved based on the data." – Advocate

Rewards

Rewarding and exciting work

Informants described their work as "rewarding," and as being "grateful" and "proud" that the work was being conducted. The majority of respondents in this category described various aspects of the work as "exciting" including the times when sexual assault kits are tested and outcomes are returned. This suggests informants may find their work to be meaningful and could potentially buffer effects of burnout.

"It is the best and most rewarding thing I have done in the past decade." – Advocate

Reinforcement

Informants from several interviews across all professions discussed feeling reinforced by outcomes of prosecution while others were reinforced by the positive reactions from victims. In particular, one SANE nurse noted she feels "validated to hear from prosecutors that SANE reports are very helpful for the strength of cases" and finds this information motivating when she's called in at 2 AM in the morning. Law enforcement officers, prosecutors, and advocates typically involved in victim notifications described some victims as "grateful" and "happy" to have heard about their SAKs and that it made the work "worthwhile." An advocate noted the multidisciplinary team required by the SAKI grant was used to boost morale and reinforce work, suggesting that social support can be a form of reinforcement.

[The large MDT Task Force Meeting] is good for boosting morale and providing positive feedback such as 'hey, you're doing a good job'…" – Advocate

Chapter 5: Discussion

Overview

This secondary data analysis was aimed at understanding the extent to which informants working within the various stages of sexual assault kit processing discussed burnout and vicarious trauma. Informants only briefly discussed these topics because the interview protocol focused on processes rather than burnout and vicarious trauma. However, informants did discuss both facilitators and challenges related to working with these sexual assault cases in great detail because the original intent of data collection was to conduct evaluability assessments and a process evaluation of the sites. In using the Areas of Worklife model to understand potential contributors of burnout, these findings provide an overview of situations employees from law enforcement, prosecution, advocacy, and SANE are facing regularly at work. While we cannot directly relate these findings to burnout or vicarious trauma or determine the scope of the problem within this population without further research, the Areas of Worklife model suggests that factors such as workload, job control, community and social support, fairness in the workplace, alignment of values between organization and individual, and rewards may influence burnout outcomes. Informants from all professions and sites represented in this sample discussed these factors to some extent. Based on volume alone, protective and risk factors were fairly evident and will be summarized below.

Summary

Protective Factors	Risk Factors
•Community/Social Support •Cross-agency including the multidisciplinary team •Supervisory •Cross-site and cross-jurisdiction **•Values** •Buy-in among leadership •Positive cultural change •Improvements in accountability **•Rewards** •Rewarding work and reinforcement	**•Control** •Lack of decision-making and autonomy •Insufficient funding and staffing •Unfair allocation of resources •Attrition, especially of more experienced staff •Need for tracking systems and equipment **•Workload** •Large and emotionally difficult caseloads •Additional grant responsibilities •Delays and backlogs in the process, making workload more difficult. •Working overtime

Protective Factors

Overall, informants discussed improvements in relationships within and across agencies and jurisdictions, sufficient supervisory support and the usefulness of the multidisciplinary team as an outlet for advice, feedback, and information sharing as protective factors. Many also described this multiagency effort as a way to make their work easier because they were able to gain insight from other perspectives.

While informants described challenges with attendance and differences in opinions during multidisciplinary team meetings, most informants across different roles perceived the multidisciplinary team and cross-jurisdiction support as a facilitator to their work, suggesting this collaboration may be useful in providing social support to stakeholders undergoing reforms in sexual assault kit processing. Additionally, advocates and law enforcement from a few interviews described supervisory support. While some explained insufficient support from leadership, most

described supportive leadership within their agencies and within the community including policymakers. This idea of supervisory support was discussed in terms of improved buy-in, and the emotional and practical assistance they provided to employees.

Overall, informants explained that many agencies had buy-in, were experiencing positive cultural change, and improved accountability. A few noted some challenges around buy-in and cultural change specifically among law enforcement, however, most explained this was a work in progress and that trainings were being provided to address these challenges.

Individuals also expressed this idea of buy-in by stating the work was rewarding and exciting, and they received reinforcement from victims who were grateful to hear about their cases moving forward and being tested. This was not a major theme among individuals, but of those who did discuss rewards, all informants explained it made them feel their work was worthwhile. Rewards and reinforcement may be useful in positively impacting levels of personal accomplishment, potentially mitigating the effects of burnout in individuals. However, it's unclear to what extent rewards and reinforcement are being used in this population due to the small sample of individuals who discussed this.

Risk Factors

Job control was discussed minimally among informants and primarily focused around resources. However, a smaller group of informants described challenges in the ability to provide input in various aspects of the reform and the ability to access information crucial for their job, suggesting problems with autonomy and decision-

making. While this was a smaller group of informants, many also noted freedom and autonomy was an important aspect of the job. According to the Areas of Worklife Model, challenges in the ability to share in decision-making and practice autonomy at work negatively impacts burnout outcomes (Maslach and Leiter, 1999).

The challenges in facing a large number of difficult caseloads along with insufficient resources was the most commonly discussed topic. According to these informants, grants are providing additional funding but there is variation in how the funding is being used and which agencies it directly impacts. Of those who felt resources were sufficient, most explained they would need more resources when cases were finally in the investigation and prosecution stages. We can also assume, based on these conversations, that the effects of this reform will continue to impact these professions for the foreseeable future due to delays in testing and the length of time investigations and prosecutions take for each case. As stated in the Areas of Worklife model, challenges with workload can negatively impact emotional exhaustion, and subsequently impact depersonalization, and personal accomplishment, placing individuals at risk of burnout.

This is particularly concerning given the length of time individuals in this population may be experiencing high caseloads and insufficient resources. Additionally, ongoing funding and staffing is another challenge sites may continue to experience after grants are complete given the reality of new backlogs for current cases, suggesting more permanent funding for these cases is needed to maintain reasonable caseloads.

In addition to extremely large caseloads, there is added pressure for many of the informants as cold cases prove to be more challenging in terms of the time and energy that needs to be invested into these cases to find victims, re-investigate, and prosecute cases. Emotional labor is an added responsibility required of many of the informants, especially when completing victim notifications after what could be several years after a sexual assault has occurred. While several sites have protocols on how to address this going forward, informants still spoke of the difficulties in potentially re-traumatizing victims. This emotional labor may impact levels of burnout when paired with other organizational inefficiencies (Zapf, 2002) and is important to minimize as much as possible.

Attrition among staff was also discussed as a contributor to high caseloads. Promotions can lead to transfers of experienced staff from the special victim's unit to homicide, potentially impacting caseloads and the ability to "develop group norms" in terms of social support. This also suggests that homicide is seen by informants as a more prestigious career and may make it less likely that people will stay in the special victim's unit for long periods of time. This could become troublesome in terms of burnout for those working in SVU with high caseloads, insufficient resources, and the understanding that more experienced staff will leave their department and transfer to other areas. On the other hand, literature shows that working sexual assault cases for an extended period of time may contribute to burnout and moving into other departments may be necessary to mitigate burnout (Turgoose et al., 2018). Therefore, it's unclear whether moving staff to other departments could be considered a protective factor against burnout. Relatedly, working overtime was discussed as a

technique for handling caseloads although several informants explained that law enforcement would not take the overtime due to the nature of the cases. Given the studies showing burnout in those working on these cases over an extended period of time, overtime may also be problematic in terms of addressing burnout.

Lessons Learned

Strategic planning early in the process

Ensuring that proper resources are available to handle additional grant requirements is crucial to ensuring that reasonable workloads are maintained among all staff. Many informants discussed the tracking systems as a challenge and noted that grant tasks such as tracking of kits became an added responsibility. Therefore, having the time initially to plan, fully understand grant requirements, and implement resources up front may be useful in mitigating work stress later in the processes.

Develop sustainability plans

Based on informants' discussion regarding insufficient resources and the need for additional funding for later stages such as investigation and prosecution, building a sustainability plan while funding is provided should be a requirement for grantees going forward. In addition, individuals explained the importance in identifying and diversifying additional funding opportunities early on in the process. These plans will be useful in ensuring proper resources for staff to mitigate workloads that may lead to burnout.

Site coordinators should consider using the multidisciplinary team as a resource to understand challenges among all agencies, build sustainability plans, and share those lessons learned and best practices with other agencies to make the work as

easy as possible on staff. These sustainability plans will also be useful for current and new SAKI sites first beginning these processes.

Use funding strategically to mitigate potential burnout

Agencies may want to consider hiring additional staff or reallocating work to staff in other jurisdictions with fewer cases rather than relying on current staff working overtime. While overtime for law enforcement was used across sites, informants from several interviews explained the difficult nature of working on sexual assault cases. Working overtime has been shown to impact levels of law enforcement stress and research suggests minimizing overtime work (NIJ, 2012).

Continue efforts to streamline communication across agencies and jurisdictions

Sites should continue coordination and collaboration using the multidisciplinary team and other strategies such as trainings and conferences, but also increase collaboration across SAKI sites as well. This is particularly important for sites not already in contact with other SAKI sites and for those now beginning these efforts. With the help of the training and technical assistance provider, sites should encourage cross-site collaboration by streamlining communication about lessons learned and best practices across sites, especially those that may assist in understanding how to allocate resources early on compared to later in the SAK processing. Efforts to streamline communication may improve social support among employees' and assist in determining how to best handle workloads.

Supervisory support is crucial to mitigating stress among employees

Many informants discussed sufficient supervisory support as a facilitator for positive cultural change within the work environment. Leadership must have buy-in

in order to continue these reform efforts successfully. Although resources are limited, supervisory support may be key in providing social support and reinforcement for employees.

Directions for Future Research

Future research should continue to build on this work by conducting quantitative studies to understand levels of burnout and vicarious trauma among this population. Due to the subjective nature of qualitative analysis and the difficulties in overlap of the constructs of vicarious trauma and burnout, as well as constructs within the Areas of Worklife Model, future research could focus on using validated quantitative measures to understand certain factors in depth (i.e. demands/resources).

In addition, research should also focus on emotional labor that employees experience, especially those in law enforcement and advocacy. Prevention and intervention programs may be needed to mitigate the amount of emotional labor employees are experiencing on a regular basis. However, further research is needed to determine impacts of emotional labor and whether emotional labor is related to burnout and vicarious trauma in this population.

While it is important to understand the scope of burnout and vicarious trauma in a broader context within these populations, it is just as important to understand potential implications of these reforms as funding continues to become available for other police jurisdictions around the country.

For the sites within this sample, further research needs to be conducted to determine unintended consequences this reform may have on current case processing, including new backlogs and increased reporting, and its subsequent impacts on

caseloads for other employees as well. While an increase in reporting is potentially indicative of improvements around community trust, it may also negatively impact staff with already high caseloads and even more limited resources once additional funding is no longer available, potentially leading to similar problems in the future. However, forensic scientists should also be included in future studies given the conversation around high caseloads for labs.

Strengths and Limitations

This study has several strengths and limitations that should be considered in terms of implications for findings and future research. These data focused on the first of the grantees to receive SAKI funding from the Bureau of Justice Assistance and several sites have now reached the later stages of investigation and prosecution in processing these SAKs. Therefore, these respondents have the most experience in reforming these processes and may be more aware of the challenges associated with the various stages of SAK processing.

This study is also one of the first to focus on vicarious trauma and burnout specifically in SAKI reforms and is one of the largest samples with stakeholders from 17 sites that participated in the evaluation. In particular, these 17 sites represent state, city, and county jurisdictions, suggesting that while there may be unique challenges among these specific types of jurisdictions, there are also common problems among all SAKI sites. It should also be noted that these sites may experience more supportive management or other protective factors that could impact levels of burnout and vicarious trauma in comparison to those in similar professions without SAKI funding.

While the research team made every effort to ensure that knowledgeable staff were interviewed during data collection, it is possible there were key informants who may have discussed topics related to burnout and vicarious trauma, but were unable to be interviewed due to scheduling conflicts. Recall bias may have also been a factor because the reforms had been ongoing for several years at the time of data collection.

Respondents varied widely in profession and roles, including both leadership and frontline roles as well as administrative and victim-facing roles. Certain stakeholders were more accessible at various sites than others and the number of law enforcement informants may have been skewed due to the different types of law enforcement officers involved in the SAKI processes including both current and cold case detectives. Additionally, there were only a small number of sexual assault nurse examiners (SANE) and further research on burnout and vicarious trauma in this population could be crucial given the high rates of burnout among nurses found in other studies (McHugh et al., 2011; Raunick et al., 2015; Flarity et al., 2016).

Sampling criteria was narrowed for the purpose of this analysis to focus on informants who had direct victim interaction. This may have inadvertently removed staff members who may have discussed burnout, vicarious trauma, and potential factors influencing these outcomes. In particular, forensic lab personnel were removed from the sample for this analysis because they do not typically have victim interaction, however, they may also be experiencing high rates of burnout. Several informants mentioned lab personnel have high caseloads and they suggested attempting to limit those caseloads by reducing the number of kits and/or the amount of evidence that could be submitted at one time. Further research should be conducted

to determine challenges and levels of burnout and vicarious trauma specific to individuals working in labs as well.

Sampling individuals who had victim interaction may have also biased the findings because there were more administrative employees interviewed than victim-facing professionals at some sites. This mainly happened when there were scheduling conflicts for victim-facing professionals. Therefore, the number of key informants from certain sites may have been significantly reduced and findings from other sites may be slightly overrepresented. It is also important to note that individuals who are experiencing high caseloads or burnout in general may be less likely to take time out of their day to complete this interview. Therefore, we may be inadvertently missing individuals experiencing the most challenges or more symptoms of burnout.

This was a secondary qualitative data analysis and, therefore, the data were not initially collected for these particular research questions. Questions related to burnout and vicarious trauma were not asked to interviewees and different questions were asked of each stakeholder; therefore, findings do not necessarily reflect the levels of burnout and vicarious trauma among this population nor can causal relationships between potential contributors and these outcomes be determined.

Qualitative data collection and analysis can be subjective, however, several techniques were used to combat the likelihood of bias in this study. Several trained and experienced interviewers were involved in data collection and interrater reliability was used prior to analysis. Documentation of thoughts and questions during analysis has been shown to limit bias during qualitative studies, therefore, a reflective journal was used to document potential questions and themes during coding and

analysis. Themes were also reviewed by a senior researcher familiar with the data to ensure interpretations of data were accurate. NVivo, which has been used extensively in qualitative research, was useful in categorizing and organizing information effectively into themes for reporting.

The Areas of Worklife model was used to identify potential factors contributing to burnout and the Trauma and Attachment Belief Scale was used to determine references to vicarious trauma, but these models were challenging to use qualitatively. Due to the relationships between several constructs in the Areas of Worklife model, the data were harder to separate into core constructs and certain constructs (caseload and fairness) had to be combined to more accurately report findings. Therefore, burnout may be more difficult to determine qualitatively and mixed methods research may be more useful in understanding the extent of the problem and the relationships among contributors and levels of burnout. The Traumatic and Attachment Belief Scale was not very useful because most respondents did not discuss vicarious trauma and were more likely to reference challenges with "emotional labor" that could theoretically impact burnout and vicarious trauma outcomes.

In hindsight, other job stress models seemed to be more appropriate for this data such as the Job Demands-Resources model (Demerouti et al., 2001) and the Conservation of Resources theory (Hobfoll, 1989) due to the focus on available resources in comparison to the large caseloads of employees. Future research on burnout especially within the context of reform may want to use one of these two

models rather than the Areas of Worklife Model to narrow in on these aspects of the work.

Conclusion

The purpose of this study was to conduct secondary qualitative data analysis to understand the extent to which informants working with sexual assault cases and undergoing reform discussed burnout and vicarious trauma and which factors may have contributed to these outcomes. While there were limitations due to the nature of secondary qualitative data analysis and outcomes cannot be determined, results showed that a majority of informants were experiencing high caseloads, limited resources, and potential challenges in values across agencies. Informants also described an array of trainings, improved coordination and community support, and rewards that may have been useful in completing daily tasks. While relationships between factors and burnout and vicarious trauma outcomes cannot be fully understood in this study, the Areas of Worklife model suggests these factors contribute to levels of burnout and should be considered for future research. This study is the first step in understanding protective and risk factors that this particular population may be experiencing during reform. Future research will be needed to determine relationships between these factors and outcomes of burnout and vicarious trauma to develop prevention and intervention programs going forward.

Appendix 1. Initial SAKI Telephone Call Protocol

Introduction

- Introduce yourself and ask if now is still a good time to talk → if not, reschedule
- Explain purpose of call is for you to share information about the study and learn more about the site's SAKI activities. State that you will do introductions (*of Westat staff and their staff*) in a moment.

- Request permission to record the call
    - With your permission, we would like to record our conversation. We will use the recording as a backup to our notes and will destroy the recording at the end of the study. It will not be shared beyond our internal team at Westat. Is it ok to record our call?

- Thank them for their permission to record the call; let them know you're starting to record and will ask one more time for the record (is it okay to record the call). Do introductions.

***Note who is on call from site**:

***Note who is on call from Westat**:

- Review Westat's role as described below
    - Westat has been contracted to conduct assessments of SAKI components to prepare for a later evaluation of the BJA program.
        - Initial Assessments (*these are what we know as evaluability assessments*)
            - Next year we will be conducting a 1-2 day site visit where we would like to interview different people involved in the SAKI effort.
            - We will be creating a report with findings that will assist each site with on-going SAKI activities.
            - Site-specific findings will not be made public, but we will share general lessons learned among all the SAKI sites to promote cross-site sharing.
        - Follow-up Assessments (*these are what we know internally as process evaluations/impact assessments*)
            - We will be conducting follow-up assessments with a subset of sites that will be selected after these initial reports.

- We will use all information collected across sites to design a long-term outcome evaluation for the SAKI program as a whole. These findings would also be used to share lessons learned and promote continuous improvement in sexual assault case processing among all the SAKI sites and other jurisdictions addressing the same issues (*meaning non-SAKI sites; BJI's goal is to generate knowledge for everyone's benefit)*.

Site Background

1. What prompted the site to apply for SAKI funding?
2. When did the site actually receive its funds?
3. Who are considered the "champions" or leaders of this effort to reduce the number of unsubmitted kits?
4. What is the site hoping to achieve?
5. What has the site done so far?
6. What is the site planning to do during the remaining SAKI grant period?
7. What is the site planning to do long-term after SAKI funding has ended?

Site Visit Scheduling

- For all sites - We would like to arrange for some in-depth interviews with people involved with SAKI at all stages of SAK processing (i.e., from inventory, through prosecution).

<u>For single county/city sites</u>:

1. Currently our target timing for the site visit is [ ]
2. Are there any SAKI-related meetings/events scheduled to occur around that timeframe that they would suggest we consider planning our visit around?
    - [*If yes:*] What are these meetings, when are they scheduled for, and how often do they occur?
3. Do you have any preferences about our visit timing and/or are there any other scheduling issues that we should be aware of [e.g., travel/court dates/other conflicts that might prevent us from meeting with key members]?

Research Partners

- Based on the PMT, it looks like you[do/do not] have a research partner currently. Is that correct?
- [*If they don't have a partner, ask]:* Do you plan to partner with a researcher in the future?
- [*If they do have a partner, ask*]:
    1. Research partner's name(s)
    2. What organization are they with (i.e., police, prosecutor, university)?
    3. Is the research partner a member of the SAKI project team?
    4. When did you start working with [name]?
    5. What types of activities is [name] working on?

- [*If they do have a partner*] let them know there is another part of the project that involves collaborating with the different research partners across sites. This piece of the project involves cross-site analysis of sexual assault cases (*this analysis is focused on the kits and case characteristics associated with the kits. The goal is to gain an understanding of the cases)*.
    1. Ask if it is ok to contact their research partner to arrange a call with them (and the site coordinator) to discuss this case analysis piece.

Site Data Tracking

- We would like to understand the types of data systems you have; this information may inform some of our activities.

1. How does the site currently track the unsubmitted kits that are part of the backlog inventory (for internal purposes, not for PMT)?
2. What type of information is being tracked?
3. What information is being tracked with an electronic database vs. paper?
4. Who enters the case information? Lab staff, law enforcement, court staff, etc.?
5. Are they using the same system(s) with their current sexual assault cases? If not, ask what information is being tracked and how.
6. Do they have codebooks, manuals, or other documentation of these systems they could share with us?

Site Documentation

- We are gathering background information about their site activities to help with study planning--in fact, we've already gathered some information from RTI, BJA, and websites. Do they have the following types of documents they could share with us?

    1. List of your MDT members? [if there are multiple relevant working groups, e.g., a Task Force and a working group, etc. request lists for all]
    2. An FAQ page about SAKs in your jurisdiction?
    3. Schedule of, agendas for and/or minutes from your MDT meetings?
    4. Reports or updates that describe the results of the SAKI efforts, for example, numbers of kits tested, numbers of CODIS hits, etc.?
    5. Descriptions of trainings?
    6. Any other documents?

Thank them for their time and let them know you will continue to be in touch as we prepare for the site visit.

Appendix 2. Master SAKI Site Visit Interview Protocol

Introduction and Recording Consent

- Thank them for meeting with you & introduce yourself.
    - *[If needed (after reading FAQ) provide the following background on Westat's role otherwise skip to request for recording]*
        - The National Institute of Justice (NIJ) has awarded a contract to Westat to perform the initial evaluation activities for the Sexual Assault Kit Initiative (SAKI). This study is not intended to evaluate individual sites, but rather the SAKI program as a whole. It is a learning exercise, and will not directly influence site funding or policy.
        - We are visiting all the FY2015 sites and talking to people involved in SAKI or doing related work, to get a sense of your experience with SAKI and to obtain an accurate description of SAKI activities and outcomes. We also want to hear about similar sexual assault response work that is funded by sources.
        - Following our visits, Westat will create site-specific reports to help each site with ongoing SAKI activities.
            - Site-specific findings from the interviews will not be made public, but we will share general lessons learned among all the SAKI sites to promote cross-site sharing.
        - We'll also be conducting follow-up assessments with a subset of sites to be selected after the initial reports.
        - We'll use information gathered from all sites to design a long-term outcome evaluation for the SAKI program as a whole.

- Request permission to record the conversation
    - With your permission, we would like to record our conversation. We will use the recording as a backup to our notes and will destroy the recording at the end of the study. It will not be shared beyond our

internal team at Westat. We will not use your name in any reports. *[If they are concerned about exact quotes state, "We appreciate your concern, we will not use exact quotes." Then make a note of this for analysis/reporting.]*

- Is it ok to record our conversation?
- Thank them for their permission to record the conversation; let them know you're starting to record and will ask one more time for the record *[is it okay to record our conversation]*.
    - Start the recording and ask again, "Is it ok to record our conversation?"

Respondent's Background

We would like to begin by learning about your background. *[All respondents]*

1. Tell us about your organization/agency and your role within your organization/agency.
   [If not covered above]
    - Tell us about your role in the SAKI effort.
    - How long have you been involved in the SAKI effort?

Saki Background And Goals/Objectives/Outcomes

Let's talk now about the work taking place here in [location] related to addressing sexual assault kits (kits). *[Respondents that weren't on initial call]*

1. *[1]What brought attention to the unsubmitted kits (how were the unsubmitted kits discovered)?
2. *What factors contributed to the unsubmitted kits?
3. *Why did [lead agency] apply for SAKI funding? *[If not covered on the initial call; only ask Site Coordinator/grant lead]*
4. *In your view, what are the main goals or objectives for your site's SAKI effort?
5. *What do you think will be the main outcomes of this effort?

MultiDisciplinary Team

Let's discuss your Multidisciplinary Team (MDT) [use local name of MDT if available]. Please also feel free to provide information on any other working groups focusing on responses to sexual assault cases.
[Coordinator + MDT members]

[1] Asterisks denote questions that will be compared across all respondents

1. Tell me about how the [name of MDT] functions?

   [If not covered already, ask the prompts below]

   [Probes for all MDT respondents]
   - What is the team's purpose?
   - What is the team responsible for doing?
     - Are there working groups or sub-teams with specific responsibilities (if yes, ask them to describe)
   - What is your role?
   - How has the team evolved since it started?

   [Probes for Team Leader Only]
   - When was the MDT formed? *[Only ask Team Leader]*
   - Has the frequency of meetings changed since the team was formed? *[Only ask Team Leader]*
   - How long are members expected to remain a part of the MDT? *[Only ask Team Leader]*
   - Are case level data shared; if so, how? [*Only ask Team Leader]*
   - How does the team make decisions (e.g., voting, members take responsibility for certain topics/activities)? *[Only ask Team Leader]*
   - How are team decisions and actions documented? *[Only ask Team Leader]*

   [Probes for all MDT respondents – if interviewed alone/without non-MDT members]
   - What helps/hinders the team in decision-making?
   - What are the team's strengths and challenges?
   - Which members are leading or are very involved in the work of the team?
   - Is there an agency/perspective you would like to have on the team that isn't there?
     - In what way would it help for them to be involved/to have this perspective?
   - Are there members of the team that could be more involved?
     [If yes]
     - How would their involvement help the team?

SAKI Activities

Identifying and inventorying unsubmitted kits

Are you familiar with how the site inventoried the unsubmitted sexual assault kits (kits)?

[If yes, proceed with Section A questions. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the inventory process for the unsubmitted kits?
   [If not covered already, ask the prompts below]

   - Prior to this process, was there any effort (formal or informal) to inventory the backlog (or was the groundwork for the inventory already laid in some way)*? [If yes]* When, what did the effort entail, what was the result?
   - Have all the untested kits have been identified?

2. How was SAKI funding used to support the inventory?

3. What agencies were involved in the inventory?
   - What did each agency do?
   - How has it been working with the other agencies?
   - How did you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Were agencies missing from the process that might have benefited it; *[If yes],* What agencies? How could those agencies be more involved?

4. Were the resources and personnel sufficient to inventory all the unsubmitted kits in a timely manner?
   [*If not]:*
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What helped the inventory process go smoothly?

6. What made the process challenging?
   - How were challenges addressed?

7. What lessons learned would you share with new SAKI sites just starting the inventory process?

8. *[If not available on the inventory form]* What information did you collect and record about the kits during the inventory?

9. Did you or any staff at your agency receive any training or technical assistance in how to complete your inventory of unsubmitted kits?
   [If yes, get details]
   - From who or where?
   - What type of assistance did you receive?
   - How did it impact your activities?
   - Do you have any documentation related to any of the assistance you mentioned? [*If yes]* can you share the documentation with us?

10. Did you or any staff at your agency communicate with other SAKI sites about the inventory process? For example, when planning your inventory did you consult other sites that had already completed this process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Submitting Kits for testing

I am interested in hearing both about the process for addressing unsubmitted kits as well as how current sexual assault cases are processed *(new cases coming in today).*

Are you familiar with the site's process for submitting **unsubmitted and current kits** to the lab for testing *[examples of process include deciding what kits and pieces of evidence to submit, what lab to use]?*

[If yes, proceed with Section B questions. Asking first about unsubmitted kits and then about current kits. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process *[that was used/being used]* to submit **[unsubmitted/current]** kits.

2. How was the SAKI funding used to support submission of **[unsubmitted/current]** kits?

3. What agencies were/are involved in the submission of the **[unsubmitted/current]** kits?
   - What did/does each agency do?
   - How has it been working [with the other agencies]?
   - How did/do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?

- Were agencies missing from the process that might have benefited it; [If yes], what agencies?
- How could those agencies be more involved?

4. Were the resources and personnel sufficient to submit all the **[unsubmitted/current]** kits in a timely manner?
   [If not:]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What [has] helped the process **[of submitting unsubmitted/current kits]** go smoothly?

6. What [has] made the process **[of submitting unsubmitted/current kits]** challenging?
   - How have challenges been addressed?

7. Are all of the **[unsubmitted/current]** kits submitted for testing?
   - *[If not all],* how are kits prioritized (i.e., what are the criteria: kit date or contents, victim/offender characteristics, crime classification, statute of limitations)?
   - Are all agencies using the same priorities?

8. What samples (i.e., pieces of evidence) from the [**unsubmitted/current**] kits are submitted?
   - How did the agency decided on those samples (e.g., standard procedures, based on victim's report of what happened?)
   - Are all agencies submitting the same type of samples?

9. How and why was the testing lab selected for the [**unsubmitted/current]** kits?

10. What is the turnaround time for submission for the [**unsubmitted/current**] kits?
    - Has that changed over time? *[If yes]* What things have impacted the turnaround time?

11. What lessons learned would you share with new SAKI sites about submitting kits to the lab for testing?
    - **Have there been different lessons learned about submitting current kits?**

12. How is [responsible agency] tracking the submission process for [**unsubmitted/current**] kits? (e.g., which kits have been submitted, by whom, on what date)
    - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system)

- Are all participating agencies using the same tracking system (or tracking procedures) across the site for [**unsubmitted/current]** kits? [*If no],* how does tracking differ?

13. Do you have any written protocols regarding the submission of [**unsubmitted/current**] kits for testing? *[If yes]* can you share the protocols with us?
    - Are/Were lab staff involved in developing these? *[If yes]* who was/is involved and what did they do?

14. Did you or any staff at your agency receive any training or technical assistance in how to submit **[unsubmitted/current]** kits to the lab for testing?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? [If yes] can you share the documentation with us?

15. Has your site communicated with other SAKI sites about the submission process for [**unsubmitted/current]** kits? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Submitting current kits

As I mentioned, we're also interested in learning how current sexual assault cases are processed (new cases coming in today).

How has the SAKI effort affected the submission of current cases?
Are you familiar with the site's process for submitting **current kits** to the lab for testing [examples of process include deciding what kits and pieces of evidence to submit, what lab to use]?

[If yes, proceed with current kit questions. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process [that was used/being used] to submit **current** kits.

2. How is SAKI funding used to support submission of **current** kits?

3. What agencies are involved in the submission of the kits?

- What did/does each agency do?
- How has it been working [with the other agencies]?
- How did/do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
- Were agencies missing from the process that might have benefited it; [If yes], what agencies?
- How could those agencies be more involved?

4. Are the resources and personnel sufficient to submit all the **current** kits in a timely manner?
   [If not:]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What has helped the process **[of submitting current kits]** go smoothly?

6. What has made the process **[of submitting current kits]** challenging?
   - How have challenges been addressed?

7. Are all of the **current** kits submitted for testing?
   - *[If not all],* how are kits prioritized (i.e., what are the criteria: kit date or contents, victim/offender characteristics, crime classification, statute of limitations)?
   - Are all agencies using the same priorities?

8. What samples (i.e., pieces of evidence) from the kits are submitted?
   - How did the agency decided on those samples (e.g., standard procedures, based on victim's report of what happened?)
   - Are all agencies submitting the same type of samples?

9. How and why was the testing lab selected for the **current** kits?

10. What is the turnaround time for submission?
    - Has that changed over time? [*If yes]* What things have impacted the turnaround time?

11. What lessons learned would you share with new SAKI sites about submitting **current** kits to the lab for testing?

12. How is [responsible agency] tracking the submission process for **current** kits? (e.g., which kits have been submitted, by whom, on what date)
    - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system)

- Are all participating agencies using the same tracking system (or tracking procedures) across the site for **current** cases? *[If no],* how does tracking differ?

13. Do you have any written protocols regarding the submission of **current** kits for testing? *[If yes]* can you share the protocols with us?
    - Are/Were lab staff involved in developing these*? [If yes]* who was/is involved and what did they do?

14. Did you or any staff at your agency receive any training or technical assistance in how to submit **current** kits to the lab for testing?

[If yes, get details]
- From who or where?
- What type of assistance did you receive?
- How did it impact your activities?
- Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

15. Has your site communicated with other SAKI sites about the submission process for **current** kits? For example, did you consult with other sites about their process? Have newer sites consulted with you?

[If yes, ask for details]
- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

Receiving and Testing Kits

<u>External Labs Receiving and Testing SAKI Kits</u>
Are you familiar with the process of receiving and testing SAKI kits for [site]?

[If lab receives kits from multiple FY2015 SAKI sites ask questions 1-6 for each site, then proceed to question #7; if the lab only works with one FY 2015 SAKI site ask the questions in order]
[I'm going to ask you about your experiences with each of the sites in turn, and then about the SAKI effort overall].
[First, let's talk about Site Location] [Repeat series of questions for each site]

1. Tell me about the process for receiving and testing SAKI kits from [site].

2. How are you tracking the submission and testing process for [site]? (e.g., which kits have been submitted, by whom, on what date, testing dates, results)
    - What type of system is being used for tracking? (e.g., Excel file, online case management system)

3. What is the turnaround time for submission?
    - Has that changed over time? *[If yes]* what things have impacted turnaround time?

4. How do you coordinate with [site]'s lab staff during this process?

5. How has [lab name] been working with [submitting agency] to establish submission and testing procedures?

    - Do you have any written protocols regarding the submission and testing process for [site]? *[If yes]* can you share the protocols with us?

6. Is there anything unique about working this site?

Now I'm going to ask you to think about all the SAKI sites you are working with.

7. Are/Were your resources and personnel sufficient for timely receipt and testing of kits from all the SAKI sites you are working with?
   [If not]:
    - What additional resources would you/did you need?
    - How would you use/have used those additional resources?

8. What [has] helped this process go smoothly?
9. What [has] made this process challenging?
    - How have challenges been addressed?

10. What lessons learned would you share with other private labs working with new SAKI sites?

11. What lessons learned would you share with the new SAKI sites?

    - What changes occurred over time?
    - In your view, were these changes positive or negative (and why)?

12. Did you or any staff at this lab receive any training or technical assistance on the receipt and testing process for SAKI kits?
    [If yes, get details]
    • From who or where?
    • What type of assistance did you receive?
    • How did it impact your activities?
    • Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?
13. Has your lab communicated with other labs about the testing process? For example, did you consult with other labs about their process? Have newer site labs consulted with you?
    [If yes, ask for details]

- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

Site Labs Outsourcing Kit Testing

[A site lab is part of the city/county/state government for the site. The site lab does not have to be in the same city/town/county as the agency submitting kits. For example, Cuyahoga County used the Bureau of Criminal Investigation lab – which serves the whole state - for testing].

Outsourcing Unsubmitted Kit Testing

Are you familiar with the [site's] process for sending **unsubmitted kits** to [lab name] for testing [examples of process include preparing and tracking kits]?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Is it correct that your unsubmitted kits are being tested at [lab name]?

2. Tell me about the process for sending those kits to [lab name].
    - *[If not covered already]* How does your lab coordinate with [lab name] during this process?

3. How has SAKI funding been used to support kit submission?

4. What agencies are/were involved in the process?
    - What did each agency do?
    - How has it been working with other agencies?
    - How did you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
    - Were agencies missing from the process that might have benefitted it; *[If yes],* What agencies? How could those agencies be more involved?

5. Are/Were your resources and personnel sufficient for working with [external lab name] in a timely manner?
   [If not]:
    - What additional resources would/did you need?
    - How would you have used those additional resources?

6. What [has] helped the process [of sending and testing unsubmitted kits] go smoothly?

7. What [has] made the process challenging?
    - How have challenges been addressed?

8. What is the turnaround time for submission?
    - Has that changed over time? *[If yes]* What things have impacted the turnaround time?

9. What lessons learned would you share with new SAKI sites just starting to submit their kits to external labs?

10. How are you tracking the submission and testing process for the unsubmitted kits? (e.g., which kits have been submitted, by whom, on what date, testing dates, results)
    - What type of tracking system are you using? (e.g., Excel file, online case management system)
    - Are all participating agencies using the same tracking system (or tracking procedures)? *[If no]* how does tracking differ?

11. How has your lab staff been working with [lab name] and agency staff from [submitting agency] to establish submission and testing procedures?
    - Do you have any written protocols regarding these procedures? *[If yes]* can you share the protocols with us?

12. Did you or any staff at your lab receive any training or technical assistance in how to submit kits to the lab for testing?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? [*If yes]* can you share the documentation with us?

13. Has your site communicated with other site labs about the submission process for kits? For example, did you consult with other labs about their process? Have newer labs consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Outsourcing Current Kit Testing

Are you familiar with the [site's] process for sending **current kits** to [lab name] for testing [examples of process include preparing and tracking kits]?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Is it correct that your **current** kits are being tested at [lab name]?

2. Tell me about the process for sending **current** kits to [lab name].
    - *[If not covered already]* How does your lab coordinate with [lab name] during this process?

3. How has SAKI funding been used to support the submission of **current** kits?

4. What agencies are involved in the process?
    - What did each agency do?
    - How has it been working with other agencies?
    - How did you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
    - Were agencies missing from the process that might have benefitted it; *[If yes],* What agencies? How could those agencies be more involved?

5. Are your resources and personnel sufficient for working with [external lab name] in a timely manner?
   [If not]:
    - What additional resources would you need?
    - How would you use those additional resources?

6. What has helped the process [of sending and testing **current** kits] go smoothly?

7. What has made the process challenging?
    - How have challenges been addressed?

8. What is the turnaround time for submission?
    - Has that changed over time? *[If yes]* What things have impacted the turnaround time?

9. What lessons learned would you share with new SAKI sites just starting to submit **current** kits to external labs?

10. How are you tracking the submission and testing process for the **current** kits? (e.g., which kits have been submitted, by whom, on what date, testing dates, results)

- What type of tracking system are you using (e.g., Excel file, online case management system)?
- Are all participating agencies using the same tracking system (or tracking procedures)? *[If no],* how does tracking differ?

11. How has your lab staff been working with [lab name] and agency staff from [submitting agency] to establish submission and testing procedures for **current** kits?
    - Do you have any written protocols regarding these procedures? *[If yes,]* can you share the protocols with us?

12. Did you or any staff at your lab receive any training or technical assistance in how to submit kits to the lab for testing?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your site communicated with other site labs about the submission process for **current** kits? For example, did you consult with other labs about their process? Have newer labs consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Site Labs Receiving and Testing SAKI Kits

Are you familiar with your lab's process for receiving **unsubmitted kits** from [submission agency] for testing [examples of process include preparing and tracking kits]?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process for receiving and testing unsubmitted kits from [submitting agency].

2. How has SAKI funding been used to support the receipt and testing of unsubmitted kits?
3. What agencies are involved in the process?
    - What did each agency do?
    - How has it been working with other agencies?

- How did you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
- Were agencies missing from the process that might have benefitted it; *[If yes],* What agencies? How could those agencies be more involved?

4. Are your/Were your resources and personnel sufficient for timely receipt and testing of unsubmitted kits?
   [If not]:
   - What additional resources would you/did you need?
   - How would you use/have used those additional resources?

5. What [has] helped this process go smoothly?

6. What [has] made this process challenging?
   - How have challenges been addressed?

7. What is the turnaround time for submission?
   - Has that changed over time? *[If yes]* what things have impacted turnaround time?

8. What lessons learned would you share with other site labs working with new SAKI sites?

9. What lessons learned would you share with the new SAKI sites?

10. How are you tracking the receipt and testing process? (e.g., which kits have been submitted, by whom, on what date, testing dates, results)
    - What type of system is being used for tracking? (e.g., Excel file, online case management system)
    - Are all participating agencies using the same tracking system (or tracking procedures)? *[If no],* how does tracking differ?

11. How have you been working with [submitting agency] to establish receipt and testing procedures?
    - Do you have any written protocols regarding the receipt and testing process for [site]? *[If yes]* can you share the protocols with us?

12. Did you or any staff at this lab receive any training or technical assistance on the receipt and testing process for unsubmitted kits?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your lab communicated with other labs about the receipt and testing process? For example, did you consult with other labs about their process? Have newer site labs consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Site Labs Receiving and Testing Current Kits

Are you familiar with your lab's process for receiving **current kits** from [submission agency] for testing [examples of process include preparing and tracking kits]?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process for receiving and testing **current** kits from [submitting agency].

2. How has SAKI funding been used to support the receipt and testing of **current** kits?

3. What agencies are involved in the process?
    - What did each agency do?
    - How has it been working with other agencies?
    - How did you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
    - Were agencies missing from the process that might have benefitted it; *[If yes],* What agencies? How could those agencies be more involved?

4. Are your resources and personnel sufficient for timely receipt and testing of **current** kits?
    [If not]:
    - What additional resources would you need?
    - How would you use those additional resources?

5. What [has] helped this process go smoothly?

6. What [has] made this process challenging?
    - How have challenges been addressed?

7. What is the turnaround time for submission?
    - Has that changed over time? *[If yes]* what things have impacted turnaround time?

8. What lessons learned would you share with other site labs working with new SAKI sites to test their **current** kits?

9. What lessons learned would you share with the new SAKI sites?

10. How are you tracking the receipt and testing process? (e.g., which kits have been submitted, by whom, on what date, testing dates, results)
    - What type of system is being used for tracking? (e.g., Excel file, online case management system)?

11. How have you been working with [submitting agency] to establish receipt and testing procedures?
    - Do you have any written protocols regarding the receipt and testing process for [site]? *[If yes]* can you share the protocols with us?

12. Did you or any staff at this lab receive any training or technical assistance on the receipt and testing process for **current** kits?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your lab communicated with other labs about the testing process? For example, did you consult with other labs about their process for **current** kits? Have newer site labs consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Use of CODIS

I am interested in hearing both about the process for uploading results from testing unsubmitted kits into CODIS as well as how current sexual assault case information (from new cases coming in today) is uploaded.

Are you familiar with the site's process for determining CODIS eligibility and/or uploading profiles from **[unsubmitted/current]** kits to CODIS?
[**If yes**, proceed with Section D questions. Asking first about unsubmitted kits and then current kits. **If no**, go to next lettered section in the respondent's protocol].

1. Tell me about the process [that was used/being used] to determine eligibility and upload profiles from **[unsubmitted/current]** kits to CODIS.
   [If not covered already ask the prompts below]
   - Do you upload all the eligible profiles? *[If no]* What decision-making process/criteria is used to determine which of the eligible profiles will be uploaded?
   - *[If not clear from above]* To what extent is each person who uploads profiles using the same criteria to determine eligibility?
   - Do you search the national database first or the state database? Why?

2. How was the SAKI funding used to support this process?

3. What agencies were/are involved in the process?
   - What did/does each agency do?
   - How has it been working [with the other agencies]?
   - How did/do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Were agencies missing from the process that might have benefited it; *[If yes],* what agencies?
   - How could those agencies be more involved?

4. Were/Are the resources and personnel sufficient to determine eligibility and upload all the profiles from the **[unsubmitted/current]** kits in a timely manner?
   [If not:]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. How are CODIS results from **[unsubmitted/current]** kits reported back to inform case investigation efforts?
   - Who are they reported to?
   - When are they reported?
   - What method is used to communicate this information?
   - *[If not clear from above],* to what extent are reporting procedures consistent across participating agencies?
   - Are there any differences for CODIS results from current cases?

6. What [has] helped the process go smoothly?

7. What [has] made the process challenging?
   - How have challenges been addressed?

8. What is the turnaround time between submitting [**unsubmitted/current]** kits and receiving profile information?
   - Has that changed over time? *[If yes]* What things have impacted the turnaround time?

9. What lessons learned would you share with new SAKI sites about determining eligibility and uploading profiles from **[unsubmitted/current]** kits?
    - Have there been different lessons learned about submitting current kits?

10. How are CODIS entries and results being tracked for [**unsubmitted/current**] kits? (e.g., which entries have been uploaded, when were results shared with investigators)
    - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system)
    - Are all participating agencies using the same tracking system (or tracking procedures) across the site for [**unsubmitted/current]** kits? *[If no]* how does tracking differ?

11. Do you have any written protocols regarding CODIS procedures (such as protocols describing eligibility)? *[If yes]* can you share the protocols with us?

12. Did you or any staff at your agency receive any training or technical assistance on uploading test results from **[unsubmitted/current]** kits?

    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your site communicated with other SAKI sites about the CODIS process? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

CODIS and Current Cases (new cases coming in today).

Are you familiar with the site's process for determining CODIS eligibility and/or uploading profiles from **current** kits to CODIS?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process being used to determine eligibility and upload profiles from **current** kits to CODIS. *[If not covered already ask the prompts below]*
   - Do you upload all the eligible profiles? *[If no]* What decision-making process/criteria is used to determine which of the eligible profiles will be uploaded?
   - *[If not clear from above]* To what extent is each person who uploads profiles using the same criteria to determine eligibility?

2. How is SAKI funding used to support this process?

3. What agencies are involved in the process?
   - What does each agency do?
   - How has it been working [with the other agencies]?
   - How do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Are agencies missing from the process that might have benefited it; *[If yes]* what agencies?
   - How could those agencies be more involved?

4. Are the resources and personnel sufficient to determine eligibility and upload all the profiles from the **current** kits in a timely manner?
   [If not:]
   - What additional resources do you need?
   - How would you use those additional resources?

5. How are CODIS results from **current kits** reported back to inform case investigation efforts?
   - Who are they reported to?
   - When are they reported?
   - What method is used to communicate this information?
   - *[If not clear from above]* to what extent are reporting procedures consistent across participating agencies?

6. What has helped the process go smoothly?

7. What has made the process challenging?
   - How have challenges been addressed?

8. What is the turnaround time between submitting **current** kits and receiving profile information?
   - Has that changed over time? *[If yes]* What things have impacted the turnaround time?

9. What lessons learned would you share with new SAKI sites about determining eligibility and uploading profiles from **current** kits?

10. How are CODIS entries and results being tracked for **current** kits? (e.g., which entries have been uploaded, when were results shared with investigators)
    - What type of tracking system(s) is being used? (e.g., Excel file, online case management system)
    - Are all participating agencies using the same tracking system (or tracking procedures) across the site for **current** kits? *[If no],* how does tracking differ?

11. Do you have any written protocols regarding CODIS procedures (such as protocols describing eligibility) for those kits? *[If yes]* can you share the protocols with us?

12. Did you or any staff at your agency receive any training or technical assistance on uploading test results from **current** kits?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your site communicated with other SAKI sites about the CODIS process? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

Investigate cases

I am interested in hearing both about the process for investigating cases associated with unsubmitted kits as well as current sexual assault cases (new cases coming in today).

Are you familiar with the site's process for investigating both types of cases?

[If yes, proceed with Section E questions. Asking first about cases associated with unsubmitted kits and then current cases. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process [that was used/being used] to investigate cases associated with **[unsubmitted/current]** kits.
   [If not covered already ask the prompts below]

- Are all cases reviewed for investigative potential? [Review of cases associated with unsubmitted kits consists of re-reading case file documentation and making a new determination whether to proceed or close the case (rather than relying on the original investigator's determination)]
  [If yes]
  - At what stage?
  - For what investigation decisions or outcomes?
  - To what extent are review criteria consistent across participating agencies?

  [If no]
  - How do you decide when to proceed with an investigation?
  - Who is involved in this decision?
  - To what extent are these decisions consistent across all participating agencies?

- How are cases assigned to investigation (is there a specialized unit for these cases, do cases go to the original investigator, random order, etc.)
  - How does statute of limitations impact assignments?
  - To what extent are these decisions consistent across all participating agencies?

2. How was the SAKI funding used to support investigation of these cases?

3. What agencies were/are involved in the investigation of cases **[associated with unsubmitted/current kits]?**
   - What did/does each agency do?
   - How has it been working [with the other agencies]?
   - How did/do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Were agencies missing from the process that might have benefited it; *[If yes]* what agencies?
   - How could those agencies be more involved?

4. Were/Are the resources and personnel sufficient to investigate all the cases **[associated with unsubmitted/current kits]** in a timely manner?
   [If not:]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What [has] helped the process **[of investigating cases associated with unsubmitted/current kits]** go smoothly?
6. What [has] made the process challenging?
   - How have challenges been addressed?

7. What lessons learned would you share with new SAKI sites about investigating cases **[associated with unsubmitted/current kits]**?
   - Have there been different lessons learned about investigating current cases?

8. About how many of these cases have been investigated so far (percent or number)?

9. How are you tracking the investigation of cases **[associated with unsubmitted/current kits]** (e.g., person investigating, status of investigation)?
   - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system)
   - Are all participating agencies using the same tracking system (or tracking procedures) across the site for [**unsubmitted/current]** cases? [If no], how does tracking differ?

10. Not including Uniform Crime Report data, what data is being tracked on victim reports of sexual victimization (from law enforcement agencies, hospitals, victim services)?
    - Does the tracking vary by participating agency (i.e., are different elements being tracked)?

11. How do you decide when to close an investigation of a case **[associated with unsubmitted/current kits]**?
    - What types of issues do you consider?
    - Who is involved in this decision?
    - *[If not answered already]* to what extent are case closure decisions consistent across participating agencies?

12. Do you have any written protocols regarding the investigation of cases **[associated with unsubmitted/current kits]**? *[If yes]* can you share the protocols with us?

13. Did you or any staff at your agency receive any training or technical assistance in how to investigate cases **[associated with unsubmitted/current kits]**?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

14. Has your site communicated with other SAKI sites about the investigation process [**for cases associated with unsubmitted/current kits]**? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]

- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

15. How do investigators coordinate with other parts of the system during this process?
    - Lab staff
    - CODIS
    - Advocates
    - Prosecutors
    - Anyone else

Investigating Current Sexual Assault Cases

Are you familiar with the site's process for investigating **current** cases?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

How has the SAKI effort affected the investigation of current cases?

1. Tell me about the process being used to investigate **current** cases.
   [If not covered already ask the prompts below]
   - How do you decide when to proceed with an investigation?
   - Who is involved in this decision?
     - To what extent are these decisions consistent across all participating agencies?
   - How are **current** cases assigned to investigation (is there a specialized unit for these cases, random order, etc.)
     - To what extent are these decisions consistent across all participating agencies?

2. How has the SAKI funding been used to support investigation of **current** cases?

3. What agencies are involved in the investigation of **current** cases?
   - What did/does each agency do?
   - How has it been working [with the other agencies]?
   - How do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Are agencies missing from the process that might have benefited it; *[If yes]* what agencies?
   - How could those agencies be more involved?

4. Are the resources and personnel sufficient to investigate all the **current** cases in a timely manner?

[If not]

- What additional resources do you need?
- How would you use those additional resources?

5. What has helped the process go smoothly?

6. What has made the process challenging?
   - How have challenges been addressed?

7. What lessons learned would you share with new SAKI sites about investigating **current** cases?

8. How are you tracking the investigation of **current** cases (e.g., person investigating, status of investigation)?
   - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system). Same system used for tracking unsubmitted kit cases?
   - Are all participating agencies using the same tracking system (or tracking procedures) across the site for **current** cases? *[If no]* how does tracking differ?

9. Is any different data being tracked on **current** victim reports of sexual victimization (vs. any data mentioned on victims with unsubmitted kits)?
   - Does the tracking vary by participating agency (i.e., are different elements being tracked)?

10. How do you decide when to close an investigation of a **current** case?
    - What types of issues do you consider?
    - Who is involved in this decision?
    - *[If not answered already]* to what extent are case closure decisions consistent across participating agencies?

11. Do you have any written protocols regarding the investigation of **current** cases? *[If yes]* can you share the protocols with us?

12. Did you or any staff at your agency receive any training or technical assistance in how to investigate **current** cases?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

13. Has your site communicated with other SAKI sites about investigating **current** cases? For example, did you consult with other sites about their process? Have newer sites consulted with you?
[If yes, ask for details]
- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

14. How do investigators coordinate with other parts of the system during this process?
    - Lab staff
    - CODIS
    - Advocates
    - Prosecutors
    - Anyone else

Prosecute cases

I am interested in hearing both about the process for prosecuting cases associated with unsubmitted kits as well as current sexual assault cases (new cases coming in today).

Are you familiar with the site's process for prosecuting both types of cases?

[If yes, proceed with Section F questions. Asking first about cases associated with unsubmitted kits and then current cases. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process [that was used/being used] to prosecute cases associated with **[unsubmitted/current]** kits.
   [If not covered already ask the prompts below]
   - Who handles the prosecutions (specialized unit, any sex crime specialist, any prosecutor)?
     - To what extent are these assignments consistent across all participating agencies?
   - Do the assigned prosecutors collaborate with victim advocates? *[If yes]* can you provide examples of collaboration?

2. How was the SAKI funding used to support prosecution of these cases?

3. What agencies were/are involved in the prosecution of cases **[associated with unsubmitted/current kits]?**
   - What did/does each agency do?
   - How has it been working [with the other agencies]?

- How did/do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
- Were agencies missing from the process that might have benefited it; *[If yes]* what agencies?
- How could those agencies be more involved?

4. Were/Are the resources and personnel sufficient to prosecute all the cases **[associated with unsubmitted/current kits]** in a timely manner?
   [If not]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What [has] helped the process **[of prosecuting cases associated with unsubmitted/current kits]** go smoothly?

6. What [has] made the process challenging?
   - How have challenges been addressed?
   - Are there certain types of cases that are challenging to prosecute?

7. What lessons learned would you share with new SAKI sites about prosecuting cases **[associated with unsubmitted/current kits]**?
   - Have there been different lessons learned about prosecuting current cases?

8. About how many of these cases have been prosecuted so far (percent or number)?

9. How are you tracking the prosecution of cases **[associated with unsubmitted/current kits]** (e.g., person investigating, status of investigation)?
   - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system)
   - Are all participating agencies using the same tracking system (or tracking procedures) across the site for [**unsubmitted/current]** cases? *[If no]* how does tracking differ?

10. Do you have any written protocols regarding the prosecution of cases **[associated with unsubmitted/current kits]**? *[If yes]* can you share the protocols with us?

11. Did you or any staff at your agency receive any training or technical assistance in how to prosecute cases **[associated with unsubmitted/current kits]**?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

12. Has your site communicated with other SAKI sites about the prosecution process [**for cases associated with unsubmitted/current kits]**? For example, did you consult with other sites about their process? Have newer sites consulted with you?
[If yes, ask for details]
- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

13. How do prosecutors coordinate with other parts of the system during this process?
- Lab staff
- CODIS
- Advocates
- Investigators
- Anyone else

Prosecuting Current Sexual Assault Cases

Are you familiar with the site's process for prosecuting **current** cases?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

How has the SAKI effort affected the prosecution of current cases?

1. Tell me about the process being used to prosecute **current** cases.
[If not covered already ask the prompts below]
   - Who handles the prosecutions (specialized unit, any sex crime specialist, any prosecutor)?
     - To what extent are these assignments consistent across all participating agencies?
   - Do the assigned prosecutors collaborate with victim advocates? *[If yes]* can you provide examples of collaboration?

2. How has SAKI funding been used to support prosecution of **current** cases?

3. What agencies are involved in the prosecution of **current** cases**?**
   - What did/does each agency do?
   - How has it been working [with the other agencies]?
   - How do you exchange information (e.g., reports) and/or interact (e.g., meetings)? How frequently?
   - Were agencies missing from the process that might have benefited it; *[If yes]* what agencies?
   - How could those agencies be more involved?

4. Are the resources and personnel sufficient to prosecute all the **current** cases in a timely manner?
   [If not]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What has helped the process **[of prosecuting cases associated with current kits]** go smoothly?

6. What has made the process challenging?
   - How have challenges been addressed?
   - Are there certain types of cases that are challenging to prosecute?

7. What lessons learned would you share with new SAKI sites about prosecuting **current** cases?

8. How are you tracking the prosecution of **current** cases (e.g., person investigating, status of investigation)?
   - What type of tracking system(s) is/are being used? (e.g., Excel file, online case management system). Same system used for tracking unsubmitted kit cases?
   - Are all participating agencies using the same tracking system (or tracking procedures) across the site for **current** cases? *[If no]* how does tracking differ?

9. Do you have any written protocols regarding the prosecution of **current** cases? *[If yes]* can you share the protocols with us?

10. Did you or any staff at your agency receive any training or technical assistance in how to prosecute **current** cases?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

11. Has your site communicated with other SAKI sites about the prosecution process [**for current cases]**? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

12. How do prosecutors coordinate with other parts of the system during this process?
    - Lab staff
    - CODIS
    - Advocates
    - Anyone else

Victim notification, engagement and support

I am going to ask about engagement of sexual assault victims prior to SAKI, engagement of victims with SAKI cases, and victims with current cases. (Victim engagement includes providing services after the report of the assault, notifying victims about their SAK's status, and involving victims in the stages of investigating and prosecuting their case).

Are you familiar with the site's process for engaging victims prior to and during SAKI?

[If yes, proceed with Section G. If no, go to next lettered section in the respondent's protocol].

Victim Engagement before SAKI

Let's start by talking about victim engagement before SAKI.

1. Historically (before SAKI), how were victims engaged and supported during the case process?
   [If not covered already, ask the prompts below]
   - What agencies were involved in this engagement (i.e., system-based advocates and/or community-based advocates)?
   - What kind of outreach typically took place for victims of sexual assaults?

2. Prior to SAKI, did your agency have victim notification protocols in place for sexual assault kit testing results?

3. Before SAKI, did you have a hotline or any other means of sharing testing results with victims?
   - Has this changed since [site] started participating in SAKI? *[If yes]* In what way?

4. Prior to SAKI, were you keeping track of victim engagement efforts?
   [If yes]
   - What were you tracking? (e.g., number of hotline calls received, percent of victims who participated in their case, attempts to notify victims of SAK updates, number and types of services provided?)

- How was this tracked? (Excel files, electronic case management systems, paper files, etc.)?
- Who did the tracking?

Engagement of Victims with Cases Associated with Unsubmitted Kits
To confirm, are you familiar with the site's process for engaging victims during SAKI?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell me about the process for engaging victims with cases associated with unsubmitted kits.
   [If not covered already ask the prompts below]
   - Which victims are being notified of testing results (i.e., by crime type, by willingness to press charges, by other victim demographics, by kit quality)?
   - How are victims notified (by phone/in person, who notifies, when does notification occur)?

2. How is SAKI funding being used to support victim engagement?

3. Which kind of services does your agency offer to victims?
   - What other agencies provide victim support during the criminal justice process?

4. Were/Are the resources and personnel sufficient to engage victims in a timely manner?
   [If not]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What [has] helped the process **[of engaging victims with cases associated with unsubmitted kits]** go smoothly?

6. What [has] made the process challenging?
   - How have challenges been addressed?
   - Are there certain types of victims that are challenging to engage?

7. What lessons learned would you share with new SAKI sites about engaging victims?
   - Have there been different lessons learned about engaging victims with current cases?

8. Is there any kind of system for documenting victim engagement?

- What type of system(s) is/are being used? (e.g., Excel file, online case management system)
- Are all victim serving agencies using the same tracking system (or tracking procedures) across the site? *[If no]* how does tracking differ?

9. Not including Uniform Crime Report data, what data is being tracked on victim reports of sexual victimization (from law enforcement agencies, hospitals, victim services)?
   - Does the tracking vary by participating agency (i.e., are different elements being tracked)?

10. Do you have any written protocols regarding victim notification? *[If yes]* can you share the protocols with us?
    - To what extent are notification procedures consistent across service agencies?

11. Did you or any staff at your agency receive any training or technical assistance in how to engage victims **[with cases associated with unsubmitted/current kits]**?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

12. Has your site communicated with other SAKI sites about victim engagement? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

13. How do advocates coordinate with other parts of the system during this process?
    - Investigators
    - Prosecutors
    - Anyone else

Engagement of Victims with Current Cases

To confirm, are you familiar with the site's process for engaging victims of current sexual assaults?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

How has the SAKI effort affected the engagement of current victim?

1. Tell me about the process for engaging victims with **current** cases.
   [If not covered already ask the prompts below]
   - Which victims are being notified of testing results (i.e., by crime type, by willingness to press charges, by other victim demographics, by kit quality).
   - How are victims notified (by phone/in person, who notifies, when does notification occur)?

2. How is SAKI funding being used to support engagement of victims with **current** cases?

3. During the criminal justice process, does your agency offer any different services to current victims (vs. services discussed for victims with unsubmitted kits)?

4. Are the resources and personnel sufficient to engage **current** victims in a timely manner?
   [If not]
   - What additional resources did you need?
   - How would you have used those additional resources?

5. What [has] helped the process **[of engaging current victims]** go smoothly?

6. What [has] made the process challenging?
   - How have challenges been addressed?
   - Are there certain types of victims that are challenging to engage?

7. What lessons learned would you share with new SAKI sites about engaging **current** victims?

8. Is there any kind of system for documenting engagement of **current** victims?
   - What type of system(s) is/are being used (e.g., Excel file, online case management system)? Same system as the one used for victims with unsubmitted kits?
   - Are all victim serving agencies using the same tracking system (or tracking procedures) across the site? *[If no]* how does tracking differ?

9. Is any different data being tracked on **current** victim reports of sexual victimization (vs. any data mentioned on victims with unsubmitted kits)?

- Does the tracking vary by participating agency (i.e., are different elements being tracked)?

10. Do you have any written protocols regarding notification of victims with **current** cases? *[If yes]* can you share the protocols with us?
    - To what extent are notification procedures consistent across service agencies?

11. Did you or any staff at your agency receive any training or technical assistance in how to engage **current** victims?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

12. Has your site communicated with other SAKI sites about engaging **current** victims? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

13. How do advocates coordinate with other parts of the system during this process?
    - Investigators
    - Prosecutors
    - Anyone else

Media Engagement

Are you familiar with the site's process for engaging the media around sexual assault cases?

[If yes, proceed with Section H. If no, go to next lettered section in the respondent's protocol].

1. Tell me about how the local media covers the issue of unsubmitted kits.
   [If not covered already, ask the prompts below]

   - Do you have any recent examples coverage? *[If yes, can you share it?]*
   - How are sexual assaults covered in general?

2. How has this coverage impacted [site]'s work on the unsubmitted kits and current cases?

3. How does your site engage the media?
   [If not covered already, ask the prompts below]
   - What types of media do you work with (e.g., social media [Facebook] or traditional media [news reporters])?
   - What type of information is being shared?
     - Does information being shared vary across participating agencies?
   - When is information shared (upon request, at regular intervals, when there are important updates)?
   - How is engagement occurring (press releases, interviews, include in meetings, etc.)?
   - Who within [site] takes the lead on engaging with the media?

4. How is SAKI funding being used to support media engagement?

5. Are the resources and personnel sufficient to engage the media in a timely manner?
   [If not]
   - What additional resources do you need?
   - How would you use those additional resources?

6. What has helped media engagement go smoothly?

7. What has made the process challenging?
   - How have challenges been addressed?
   - Are there certain types of media that are challenging to engage?

8. What lessons learned would you share with new SAKI sites about engaging the media?

9. Did you or any staff at your agency receive any training or technical assistance in how to engage the media?
   [If yes, get details]
   - From who or where?
   - What type of assistance did you receive?
   - How did it impact your activities?
   - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

10. Has your site communicated with other SAKI sites about engaging the media? For example, did you consult with other sites about their process? Have newer sites consulted with you?

[If yes, ask for details]

- Who did they talk with?
- What did they talk about?
- What effect did their communication have?

REPORTING AND RESEARCH

Now we'd like to talk a bit about reporting and research activities.

Reporting ACTIVITIES [Data informants]

1. How are data on case outcomes tracked (e.g., arrests, charges, case outcomes)? *[If not covered]* What data systems are used?

2. Is that data system statewide?
   [If not]
   - Is jurisdictional data reported up to the state-level?
   - Are different systems used across participating cities/counties?

3. Does [site] produce any internal and/or public reports on the inventory and testing of unsubmitted kits and/or case outcomes?
   [If yes]

   - What information is included in these reports?
   - What is the purpose of these reports?
   - When are these reports produced?
   - Who creates these reports?
   - How are they shared?
   - Who uses these reports and how are they used?

Research Partnerships [Site Coordinator/Research Partner Liaison]

[If a site has a known research partner]
When we spoke on the phone, you were working with [research partner].

1. Are you still working with (him, her)?
   [If yes]
   - Is the partner a member of the MDT? *[If yes]* what is his/her role
   - What type of activities is [name] working on?
   - What data are they working with?
   - Are they collecting any data above and beyond what [site location] normally collects?

- In what ways, if any, has having this position/partner been helpful?
- Are there research activities that [site name] has not been able to do that you think would be helpful?
- Are there any things that have made it challenging to engage with the research partner?
- Are there any things that have helped you engage your research partner?

[If a site isn't working with a research partner]

Have you begun working with a research partner?

[If yes ask bulleted questions below; if no, skip to #2]:

- Research partner's name(s)
- What organization is he/she with (i.e., police, prosecutor, university)?
- When did you start working with [research partner name]?
- Is the research partner a member of the MDT? *[If yes]* what is his/her role
- What type of activities is [name] working on?
- What data is [name] working with?
- Is [he/she] collecting any data above and beyond what [site location] normally collects?
- In what ways, if any, has having this position/partner been helpful?
- Are there research activities that [site name] has not been able to do that you think would be helpful?
- Are there any things that have made it challenging to engage with the research partner?
- Are there any things that have helped you engage your research partner?

2. Do you have plans to identify and work with a research partner in the future?

A. **Questions for the Research Partner** [Researcher]

1. Please tell me about your role in SAKI.

[If not covered by description]:

- When did you begin working with the site?
- What type of activities are you working on?
- What data are you working with?
    - Are you collecting any data above and beyond what the site normally collects?
- *[If not covered above]:* Are you involved in evaluating SAKI? *[If yes, get details]*

2. What do you report?
   - To whom, and how often?
   - Have you produced any reports or presentations for the MDT? *[If yes]:* did you observe any outcomes from your report or presentation?

3. Were/Are the resources and personnel sufficient to work with [site] in a timely manner?
   [If not]:
   - What additional resources did you need?
   - How would you have used those additional resources?
   - Do you receive support for your work from any other sources?

4. Are there any things that have helped you in conducting research with [site]?

5. What things have made engaging in research with the [site] a challenge?

6. Did you or any staff you work with receive any training or technical assistance regarding your research?
   [If yes, get details]
   - From who or where?
   - What type of assistance did you receive?
   - How did it impact your activities?
   - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

7. Have you communicated with other SAKI sites or researchers? For example, did you consult with other sites about their research? Have newer sites consulted with you?
   [If yes, ask for details]
   - Who did they talk with?
   - What did they talk about?
   - What effect did their communication have?

8. Do you coordinate with other parts of the system during your research?
   - Lab
   - CODIS
   - Investigators
   - Prosecutors
   - Advocates
   - Anyone else

PROGRAM RESOURCES

[Coordinator]

1. Other than SAKI, has [site] received any additional funding sources to address building capacity in handling sexual assault cases?
   [If yes]:
   - When were funds received?
   - Where did the funds come from?
   - How much was received?
   - How is [site] using these funds?
   - Are you pursuing any other avenues for support, for example, state or local funding, grants, or anything like that?

2. When you began the SAKI project, which aspect of your work needed the most resources?

3. Which aspect needs the most resources now?

4. Has [site] examined the costs vs. benefits related to the SAKI project or other changes related to SAKI?

5. Has your site communicated or coordinated with other SAKI sites about resource utilization and sources of support? Have newer sites consulted with you?
   [If yes, ask for details]
   - Who did they talk with?
   - What did they talk about?
   - What effect did their communication have?

6. What do you think will happen to SAKI efforts when the grant funding is gone?

Now we have a few questions about sustainability:

1. To what extent have resources been put in place to sustain changes? (probe for details – specifically what has been done)?

2. To what extent does staff buy-in exist to sustain changes?

3. Are staff positions needed to sustain changes? *[If yes]* how will those positions be funded after SAKI ends?

CONTEXTUAL FACTORS

Policy and legislation

Are you familiar with local/state policy and legislation around sexual assault cases?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell us a little about the policy climate in [site] with respect to sexual assault kits and the SAKI project.

   [Based on respondent's level of familiarity with policy, continue with questions below or move to other questions.]

   - What are the most salient laws and policies that affect SAKI kits and case processing currently?
   - Do you know if [site] is engaged in any other policy-related work, for example, working to get any specific bills passed? *[If yes get details (what is the purpose of the work, what stage is the work in, what is helping and what is hindering the work)]*.
   -

Community trust and reporting of sexual assaults

Are you familiar with the site's process for process for engaging the community to foster trust and encourage reporting of sexual assaults?

[If yes, proceed with questions below. If no, go to next lettered section in the respondent's protocol].

1. Tell me about how you engage the community.
   [If not covered already, ask the prompts below]
   - Historically (prior to SAKI), what was the general level of trust in the community regarding the handling of sexual assaults? (Get examples if possible)
   - Did the likelihood of victim reporting vary by participating (city/county)?

2. How is SAKI funding being used to support community engagement?
3. Are the resources and personnel sufficient to engage the community in a timely manner?
   [If not]
   - What additional resources do you need?
   - How would you have use those additional resources?

4. What has helped the process of engaging the community go smoothly?

5. What has made the process challenging?
   - How have challenges been addressed?

- Are there certain types of victims that are challenging to engage?

6. What lessons learned would you share with new SAKI sites about engaging the community?

7. Not including Uniform Crime Report data, what data is being tracked on victim reports of sexual victimization (from law enforcement agencies, hospitals, victim services)?
    - Does the tracking vary by participating agency (i.e., are different elements being tracked)?

8. Are you aware of any surveys that have been conducted (or other data) about community trust and victims' experiences with local law enforcement agencies? *[If yes, can you share that with us?]*

9. Have you implemented any procedures to address community trust and reporting issues?
   [If yes get details]
    - When were these procedures implemented?
    - Who took the lead in developing these procedures?
    - Who else is involved in the development of these procedures? How are they involved?
    - Do you have any written protocols regarding these procedures? *[If yes]* can you share the protocols with us?

10. Did you or any staff you work with receive any training or technical assistance regarding community engagement?
    [If yes, get details]
    - From who or where?
    - What type of assistance did you receive?
    - How did it impact your activities?
    - Do you have any documentation related to any of the assistance you mentioned? *[If yes]* can you share the documentation with us?

11. Have you communicated with other SAKI sites about community engagement? For example, did you consult with other sites about their process? Have newer sites consulted with you?
    [If yes, ask for details]
    - Who did they talk with?
    - What did they talk about?
    - What effect did their communication have?

WRAP UP [All respondents]

Any additional comments that you would like to make?

Appendix 3. Code Book

The code book was created using constructs from the Areas of Worklife Model and the Trauma and Attachment Belief Scale. Highlighted in red are changes that were made to the code book, however, only the code "resources" was added during the coding process. All other highlighted text indicated here describes changes that were made during analysis to better understand themes.

Parent Code	
Burnout	Specific comments discussing stress at work or the work being extremely difficult to handle, including terms such as "burnout," "overwhelmed," and "burdened." Other specific ideas regarding how the person speaking or the group being discussed is talked about including: o Emotional Exhaustion – feeling emotionally extended, exhausted, or drained by work. o Depersonalization: becoming detached, unfeeling, or impersonal toward coworkers, victims, or to individuals in general. o Insufficient personal accomplishment: feelings of incompetence or feeling unaccomplished (i.e. respondent may indicate they do not feel they are able to make real change because of workload or some other factor)
Child codes under Burnout ***These constructs will include both risk factors and protective factors so both challenges and facilitators related to these ideas will be included in these codes.***	
Workload	The ability to meet demands of the job and sustain it over time or the inability to do this. Could include comments about amount or type of caseload or difficulty with keeping up with daily tasks.
Control	Autonomy and the ability or inability to influence decisions at work such as changes in policies or protocols.
Resources *[Added after inter-rater reliability check]*	Access to funding, staffing, training, or any other resources. This could include discussion around insufficient resources to complete tasks at work.

Reward	Rewards, reinforcement, and recognition given at work that assists in building efficacy of employees.
Community	Engagement at work including job-related relationships and social support or the lack of engagement and social support among peers and supervisors at work. [Code any information about the MDT and other workgroups here].
Fairness *[This code was eventually moved under Workload after coding was complete]*	Decisions at work being fair and equitable compared to peers (i.e. this could be the amount of work demands per person or discussion around being treated fairly) [Example: Respondent may say that work is distributed evenly among coworkers].
Values	Goals and expectations of an individual or group of people matching others' goals and expectations (or mismatching). This may include individuals having the same or similar goals as another group they must collaborate with or their leadership.
Parent Code	
Vicarious Trauma *[This was combined with burnout after coding was completed to avoid the overlap of ideas]*	Specific comments discussing a negative reaction to trauma exposure including disruptions in thinking and changes in beliefs about one's sense of self, one's safety in the world, and the goodness and trustworthiness of others; as well as shifts in spiritual beliefs. Code here if any of the following terms are discussed: vicarious trauma, secondary trauma, compassion fatigue, or secondary traumatic stress. • Secondary Traumatic Stress: stress specifically in relation to working with victims of trauma, but unrelated to work pressures. • Compassion Fatigue: physical or emotional depletion specifically in reference to caring for victims of trauma Keep in mind the following ideas and code here if you see any discussion around: o Safety: Changes in perceptions about the safety of themselves and their loved ones (i.e. does individual now feel unsafe walking home due to this work or worry about the safety of their loves one more often?) o Trust: Changes in who and how an individual trusts and whether they trust themselves. o Esteem: Changes in self-esteem and in respecting other individuals.

	○ Intimacy: Changes in feelings of intimacy including relationships and experiencing deep connection with other individuals. ○ Control: Changes in feeling in control of their personal environment or changes in effectiveness [if you cannot tell the difference between control related to the work environment and control outside of the work environment place in both vicarious trauma and in control code under burnout]

Appendix 4. IRB Approval and IRB Authorization Agreement

Westat | An Employee-Owned Research Corporation

Memo

Date: August 5, 2019

To: Jessica Taylor, Project Director

From: Sharon Zack, Westat IRB Administrator

Subject: **Amendment Approval of Evaluation of BJA Sexual Assault Kit Initiative (SAKI), Project Number 6481**
FWA 00005551

As Administrator of the Westat Institutional Review Board (IRB), I reviewed the materials submitted for the following: **Evaluation of BJA Sexual Assault Kit Initiative (SAKI), Project Number 6481**. The Westat IRB reviews all studies involving research on human subjects. This project was last reviewed in June 2019.

This request allows project staff to access SAKI interview data for additional analyses. The University of Maryland IRB manager will contact Westat's IRB to execute an IRB Authorization Agreement.

Pursuant to 28 CFR 46 under Pre-2018 Requirements and the information provided, this project is approved under expedited authority.

Please note the following:

- You are required to submit this study for a continuing review before June 7, 2020.
- IRB approval is required before any new or modified research activities are conducted or when there is a problem involving risks to human subjects.
- Upon learning of an incident, you must contact the IRB Office within 24 hours via telephone (301-610-8828) or email (IRB@westat.com).

cc: Institutional Review Board
Janet Ciarico

Institutional Review Board (IRB) Authorization Agreement (IAA)

Institution A - Name of Institution or Organization Providing IRB Review: Westat, Inc. IRB Registration #: 00000695 Federalwide Assurance (FWA) #: 00005551

Institution B - Name of Institution Relying on the Designated IRB: University of MD IRB Registration #: IRB00000474 Federalwide Assurance (FWA) #: 00005856

The Officials signing below agree that: Institution B (**[Institution B]**) may rely on Institution A (Westat) for review and continuing oversight of its human subjects research described below: (*check one*)

(__) This agreement applies to all human subjects research covered by **[Institution B]**'s FWA.

(_X__) This agreement is limited to the following specific protocol(s):

Title of Research Project:	Evaluation of the Bureau of Justice Assistance Sexual Assault Kit Initiative
Westat Project Director:	Jessica Taylor
Institution B's Principal Investigator:	Kristi Meadows
Sponsor or Funding Agency:	National Institute of Justice
Award Number, if any:	

This agreement allows Institution A (Westat) to act as the IRB for Institution B (**[Institution B]**). Both institutions have completed an OHRP-approved FWA.

A. <u>Responsibilities of Westat IRB</u>

1. The review and continuing oversight performed by [IRB registration number(s)] will meet the human subjects protection requirements of **[Institution B]**'s OHRP-approved FWA.
2. Westat's IRB will follow written procedures for reporting its findings and actions to appropriate officials at **[Institution B]**.
3. Westat's IRB shall make available to **[Institution B]** copies of its relevant IRB policies and procedures.
4. Westat's IRB shall report promptly to officials at **[Institution B]**, and make available copies of records adequate to document:
    a. Any serious or continuing noncompliance by investigators with the requirements of the Westat IRB discovered by Westat;
    b. Any suspension or termination of the Westat IRB approval of a protocol, including a statement of the IRB's reasons for such action; and

c. Any administrative termination of the Westat IRB's approval of a protocol.

5. Relevant IRB meeting minutes will be provided to **[Institution B]** upon request.

B. Responsibilities of [Institution B]

1. **[Institution B]** acknowledges that it is solely responsible for ensuring compliance with Westat IRB's determinations, to protect the rights and welfare of human subjects in this study, and meet the terms of its OHRP-approved FWA or other applicable laws and regulations.

2. **[Institution B]** remains responsible for educating the members of its research community to establish and maintain a culture of compliance with Federal regulations, **[Institution B]**'s policies relevant to the protection of human subjects, and Westat IRB's policies and procedures.

3. **[Institution B]** shall report promptly to the Westat IRB and make available copies of records adequate to document:

   a. Any serious or continuing noncompliance by investigators with Federal regulations or the requirements of the Westat IRB discovered by **[Institution B]**; and

   b. All reports of research oversight performed by **[Institution B]**.

4. **[Institution B]** shall promptly make available upon request of the Westat IRB or its duly authorized representatives access to and copies of documents and records under its control as necessary to carry out periodic random or for-cause audits or monitoring to ascertain or verify compliance with Federal regulations or Westat IRB requirements.

5. **[Institution B]** shall abide by the decisions made by the Westat IRB and shall not administratively overrule Westat IRB's disapproval.

6. **[Institution B]** shall cooperate with reporting requirements.

C. General Provisions

1. This document must be kept on file at both institutions and provided to OHRP upon request.

2. **Termination of this Agreement**

   a. This Agreement will remain in effect as long as **[Institution B]** is engaged in the research for which it relies on the services of Westat's IRB for this study only.

   b. **In the event of a breach**, the non-breaching party may terminate the Agreement upon ten (10) days notice in the event that the breach has not been cured during the notice period. The notice shall be in writing and provide reasonably sufficient detail regarding the breach.

   c. Either party may terminate the Agreement for cause based upon material breach of this contract by the other party, provided that the non-breaching party shall give the breaching party written notice specifying the breach and shall afford the breaching party a reasonable opportunity to correct the breach. If within thirty (30) days after receipt of notice, the breaching party has not corrected the breach or, in the case of a breach which cannot be corrected within thirty (30) days, begun, and proceeded in good faith to correct the breach, the non-breaching party may declare the breaching party in default and terminate the contract effective immediately. Notwithstanding the foregoing, the Westat IRB may terminate the Agreement effective immediately upon notice to **[Institution B]**, if **[Institution B]** fails to maintain the insurance required under Paragraph E1 below.

D. Indemnification

1. **[Institution B]** agrees to defend, indemnify, and hold harmless Westat and its respective trustees, officers, employees, agents, contractors and subcontractors (collectively, "Westat Indemnitees") from and against any third party claim, and any related liability or expense (including reasonable attorneys' fees) to the extent such claim, liability, or expense both:

    a. Arises from the negligent or wrongful acts or omissions of **[Institution B]**, or its directors, officers, employees, or agents, and

    b. Is asserted against or incurred by the Westat Indemnitees on a derivative basis solely because of the arrangements with respect to Westat IRB's function as IRB of record on **[Institution B]**'s FWA.

2. Westat shall give **[Institution B]** timely notice in writing of any such claim or action promptly after the Westat becomes aware of it;

3. **[Institution B]** shall have sole control of the defense of such claim; and

4. **[Institution B]** shall not be responsible for the settlement of any claim, demand, or lawsuit made by Westat without **[Institution B]**'s written consent.

E. Insurance

1. At all times during the term of this Agreement, **[Institution B]** shall maintain at its sole expense, comprehensive general liability insurance coverage in amounts not less than $2,000,000 per incident and $2,000,000 in the annual aggregate and naming the Westat Indemnitees as additional insureds; provided, however, that such amounts shall not be construed to be a limit to **[Institution B]**'s liability with respect to indemnification under the terms of this agreement. Such comprehensive general liability insurance shall provide broad form contractual liability coverage for **[Institution B]**'s indemnification under this Agreement;

2. **[Institution B]** shall provide Westat with written evidence of such coverage upon request by Westat. **[Institution B]** shall provide Westat with written notice at least fifteen (15) days prior to the cancellation, non-renewal or material change in such insurance; if **[Institution B]** does not obtain replacement insurance providing comparable coverage within such fifteen (15) day period, Westat shall have the right to terminate this Agreement effective at the end of such fifteen (15) day period without any notice of additional waiting periods.

3. **[Institution B]** shall maintain such comprehensive general liability insurance beyond the expiration or termination of this Agreement during the period that any service relating to this Agreement is being performed by Westat IRB and for five (5) years after **[Institution B]** has ceased any research activity covered by this Agreement.

F. Independent Contractors

1. **[Institution B]** is and shall perform this Agreement solely as an independent contractor and, as such, shall maintain complete supervision and control over all of its employees, agents, subcontractors, and operations. Nothing in this Agreement shall constitute Westat Parties as employees, agents, representative partners, or joint venturers of **[Institution B]**.

2. Nothing contained in this Agreement shall be construed to create a joint venture, partnership, association, or other affiliation or like relationship between the parties, it being specifically agreed that their relationship is and shall remain that of independent parties to a contractual relationship as set forth in this Agreement.

G. Notices

1. Except as otherwise provided in this Agreement, all notices, consents and approvals required under this Agreement shall be in writing and shall be deemed sufficiently given if sent by electronic printed communication or registered or certified mail, postage prepaid, or delivered during business hours as follows:

a. **For Westat:** [Sharon Zack, 1600 Research Blvd, Rockville MD. 20850. 301-610-8828]

b. **For [Institution B]:** [Andrea Dragan, 1204C Marie Mount Hall, College Park, MD. 20742. 301-405-7326]

c. Or to such other persons or addresses as either party shall have indicated by proper written notice to the other party.

H. Non-Assignment

Neither party may assign its rights or delegate its obligations under this Agreement without the other party's prior written consent; provided, however, that any bona fide entity owned, controlled, or related to Westat shall be allowed to continue to function as IRB of record in connection with this Agreement.

This agreement goes into effect upon the signature of both institutions AND the designation of Westat's IRB on **[Institution B]**'s FWA.

Authorized Official of (A): WESTAT, INC.	**Authorized Official of (B): University of MD**
Date: 8/20/2019	**Date:** 08/19/19
Name: Scott Royal	**Name: Joseph M. Smith**
Title: President/Institutional Official	**Title: Director – Human Research Protection Program**
Signature: Scott W. Royal	**Signature:** Joseph M. Smith

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