

New York State Coalition Against Sexual Assault  
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Testimony of Joanne Zannoni, New York State Coalition Against Sexual Assault  
**Joint Legislative Hearing on the 2013-2014 Executive Budget Proposal**  
Health/Medicaid  
January 30, 2013

My name is Joanne Zannoni. I'm the Executive Director of the New York State Coalition Against Sexual Assault (NYSCASA). NYSCASA is a nonprofit coalition of community-based rape crisis programs approved by the New York State Department of Health. These programs are located in every county in New York State and provide sexual violence crisis intervention and prevention services. But more resources are needed. Thank you for this opportunity to provide testimony.

According to a survey conducted by the Centers for Disease Control and Prevention in 2010,<sup>1</sup> over eight million people in New York State have been sexually assaulted. More specifically, about two million people have been raped. Nearly five million women and nearly two million men have been victims of sexual violence other than rape. Think of the three females you care about the most; chances are two of them will experience sexual assault or abuse. Think of the five males you care about most; chances are one of them will also experience sexual assault or abuse. Whether we ourselves are victims of sexual violence or we love someone who is victimized, nearly every one of us will be impacted by the sexual assault epidemic at some point in our lives.

Sexual violence and exploitation cause trauma. The Consequences of Lifetime Exposure to Violence and Abuse (COLEVA) Project has identified more than 150 health-related symptoms associated with victimization.<sup>2</sup> These symptoms include physical health, mental health, and behavioral health issues. These symptoms impact daily functioning on the job, in school, with family, and in the community. Research has estimated that each incident of rape costs \$151,425 (in 2008 dollars).<sup>3</sup> However, trauma research also has indicated that "the environment just after the event, particularly other people's responses, may be just as crucial as the event itself."<sup>4</sup> Responses that stigmatize, ostracize, and isolate victims are associated with more severe post-trauma symptoms.

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<sup>1</sup> Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

<sup>2</sup> COLEVA Project. (updated 2011). Consequences Map.

<sup>3</sup> Delisi, M. (2010). Murder by numbers: Monetary costs imposed by a sample of homicide offenders. *The Journal of Forensic Psychiatry & Psychology*, 21, 501-513.

<sup>4</sup> Dobbs, D. A new focus on the 'post' in post-traumatic stress. *New York Times*, Dec. 25, 2012.

We live in a society that tends to blame victims of sexual violence. Though positive strides have been made, our medical and legal systems still often fail to respond to sexual assault victims in supportive and appropriate ways. However, when a rape crisis advocate is present, victims are more likely to have police reports taken and receive better emergency department care.<sup>5</sup> These victims experience fewer negative interactions with police and medical personnel, less distress from these contacts, and fewer psychological and physical health issues.

Most sexual assault victims do not want people to know what has happened to them. To understand this, think about the most humiliating experience of your life. You probably do not want anybody to know about this. You even may not want those who are closest to you to know about this. And you probably do not want to tell the story of your most humiliating experience over and over to total strangers. Yet, this is exactly what society expects victims of rape and other sexual violations to do. Rape crisis advocates do not expect; they listen, they share information about options, and then they support victims in moving forward with the steps the victims have decided to take.

Rape crisis programs provide a wide range of free, confidential services for victims of sexual assault on a 24-hour basis every single day of the year. These services include hotline, crisis counseling, information and referral, advocacy, support groups, and accompaniment through police, medical, and court systems.

But rape crisis programs are dealing with budget cuts, reductions in staff, fewer volunteers (people can't afford to volunteer), and an inability to pay staff the state average rate. These challenges are taking their toll. In a 2012 survey,<sup>6</sup> rape crisis programs reported: struggling to maintain crisis services 24/7; implementing waiting lists; lacking sufficient resources for child clients; reducing levels of some services; and no longer providing certain services. Meanwhile, the total number of victims served by rape crisis programs increased 62% (from 19,069 to 30,981) between 2011 and 2012.<sup>7</sup> And rape crisis programs' prevention efforts remained even more poorly funded and staffed than their crisis services.

The New York State budget has included \$1,999,000 for rape crisis intervention and prevention services since 2008. However, rape crisis programs need approximately 190 additional advocates statewide to address sexual violence in New York State. An additional \$6,299,925 is needed to hire these advocates. In the interest of public health, the New York State Coalition Against Sexual Assault urges New York State legislators to increase funding for rape crisis programs.

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<sup>5</sup> Campbell, R. (2006). Rape survivors' experiences with the legal and medical systems: Do rape victim advocates make a difference? *Violence Against Women*, 12, 30-45.

<sup>6</sup> New York State Coalition Against Sexual Assault survey of member programs in 2012.

<sup>7</sup> New York State Department of Health data regarding rape crisis program services.

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Testimony of Susan Sisto, Sexual Assault and Crime Victims Program  
**Joint Legislative Hearing on the 2013-2014 Executive Budget Proposal**  
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My name is Susan Sisto, Team Leader at the Sexual Assault and Crime Victims Assistance Program for Rensselaer County.

I have worked at this Agency for 14 years. The changes I have seen for the need of services have increased drastically. First of all I would like you to know that Sexual Assault Agencies are on call 24 hours a day, 7 days a week and that **the needs of the client always come first** no matter what. Every sexual assault agency is backed up by volunteers. However, it is not uncommon for a staff person to be called in on a weekend or middle of the night to take a case because the client needs the help. That is what we do – WE GO. All the services are free and confidential. This has proven to be an asset to society since even if a client does have insurance; they are usually only entitled to 4 – 8 visits in a year to get to see a psychiatrist. A survivor needs more time to process the horrific experience he or she had.

We go to hospitals to do a medical accompaniment, legal accompaniments to police departments, district attorney's offices or throughout the court proceedings. We counsel and support the client through this process (which can take 1 or more years to complete). Many times if survivors don't have this support they will drop the case because they "just want it to be over".

As Joanne reported, we know that sexual assault is a public health issue having long time effects on the body. We also know that if a survivor of sexual assault gets counseling immediately, they will recover sooner. They do not develop the unhealthy coping mechanism such as self-medication (alcohol and drugs) or self-mutilation behaviors that many survivors do. That is not to say that people can't get help years after an assault. Many times I have answered my phone and a mom will say "I thought I dealt with this years ago, but my child came home with information about personal safety and I am flooded with memories of a sexual assault. Can I get help?" We respond immediately to get them in for counseling. These clients don't need to tell us their story, we ask them to tell us how this past trauma is affecting them now and address those issues. Many times it is teaching them how to stand up for themselves and saying "no" to someone. Something they couldn't do at the time of the assault.

Sexual assault has a rippling affect too. This trauma not only affects the victim, but the entire family or social network. Many times we do more counseling with parents than with a child who was assaulted because of the anger the parents feel. Children are resilient and will recover if they are supported.

One of my cases came about 2 years after the assault of a young teenage girl. After the entire legal process was completed, an assistant district attorney spoke to me and asked me if I would see a Dad who was really struggling and very angry. Now this man was a tower of strength for his daughter and wife for the past 2 years. He took them to the doctor for appointments, all the meetings with the assistant district attorney for prosecution and now that the trial was over, he needed help. This dad is a wonderful man who did all the right things. He had a purpose during this time – protect and take care of his family. Job completed. Now what does he do? To this man's credit, he came in for counseling. We were able to process his emotions in a safe environment and find ways to help him deal with his anger in a healthy way. I am happy to say this family is doing well and through all the work they have done as a family unit is now speaking out, and lobbying so others will know that there are safe places for them to come and get assistance.

Albany County Crime Victim and Sexual Violence Center (CVSVC)  
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Testimony of Karen Ziegler, Director of CVSVC  
**Joint Legislative Hearing on the 2013-2014 Executive Budget Proposal**  
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Not that long ago, Albany County CVSVC had 16 staff members. Today we have 11.5.

In the past few years, we've lost almost \$15,000 in grant funding from DOH, OVS, and DCJS.

Four of our staff work part time jobs after hours, as we haven't had raises in 5 years.

Our grantors have been supportive. The Albany County Executive and members of the Albany County Legislature have been extremely supportive and are very victim focused. However, finances being what they are, if the grant funding stops, so does the program.

It is exceptionally challenging to recruit and retain volunteers to help cover the 24 hour hotline, as many people are working 2 or more jobs and can't take shifts anymore. This creates additional work for the staff, which leads to burnout and compassion fatigue.

We believe passionately in what we do. We know that victims can and do recover from their traumatic experience and go on to lead fulfilling, meaningful lives. We have formed new and exciting collaborations with other community service providers and are doing more groups than ever in the community.

In the last few years, we have offered clinical and prevention groups in the community at Trinity Institution, Community Maternity Services, several Albany City Middle Schools, the Schuyler Inn program for homeless women and their families, the Child Advocacy Center (CAC) and Choices Counseling.

We are involved with two Multi-county workgroups: Interrupting Oppression, Stronger Together. In the Albany County project "Stronger Together", a collaborative effort between the Albany County Crime Victim and Sexual Violence Center, several state agencies (OPDV and NYSCASA), community partners, local domestic violence programs and the colleges (U Albany, Siena College, the College of St Rose, Sage College of Albany, RPI, and Union College). We would like to partner with the colleges in creating or fostering men's groups to join with us and hold men accountable for interpersonal violence. We believe that most men are not violent towards women and, with

support, can actively use bystander intervention to call attention to abusive behavior and offer alternatives.

The goal of "Stronger Together" is to have community partners and each college singly and collectively work towards bringing this topic to the forefront of the students, men and women. To have them partner and change the attitudes and behavioral expectations of themselves and their peer groups.

Stronger Together is the Albany County component of a larger, multi-county workgroup entitled "Interrupting Oppression". This is comprised of the following counties: Columbia-Greene, Albany, Rensselaer, Saratoga, Schenectady, and Washington: the 787/90/87 corridor. We are planning two cross trainings this year. We also are planning a larger media campaign (which would include a public service announcement) and developing a media guide, to assist us in working more effectively with the media around language and the reporting of interpersonal violence.

NYS Office of Victim Services is very interested in supporting and assisting Stronger Together get the message out across NYS. By creating a public service announcement and giving all 78 Victim Assistance Programs encouragement to work within their communities, high school seniors will hear this message before leaving home for college, while at their respective colleges/universities, then again while they are at home (breaks, vacations), the message will be layered – multi session and multi topic – using the Socio Ecological Model supported by the CDC in doing this work.

With these projects, we are confronting beliefs and behaviors that foster violence against others. Whether that negative agenda manifests as sexual violence, interpersonal violence, racism or homophobia, the core belief system is the same. By working together to stand up and challenge those attitudes and behaviors, we make the world a safer place for us all. We are all affected by violence against any one person or group. We deserve a better future. By exploring the many options available to bystanders, challenging the "Man Box" and gender and racial stereotypes and myths, we begin a dialogue between men's groups and with women as partners.