Establishing a Standard for Care of Sexual Assault Victims
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Purpose
Explore disparities between US state laws in treatment of victims of sexual assault.

Background
Victims' care shouldn't depend on where they live. What makes a youth in Nevada more able to consent than a youth from bordering states? Nothing. Here we examine the varying treatment of victims of sexual assault across the US.

It is estimated that in the United States, 1 out of every 6 women is the victim of attempted or completed sexual assault. Younger girls are at a higher risk. Girls ages 16-19 are four times more likely to be assaulted than the general population. In 2014, the Utah's reported rape rate was higher than the nation's—the only violent crime that occurs in Utah at a higher rate than the national level.

Current methods of collecting evidence in rape cases includes the use of a rape kit, a kit to collect DNA evidence in a rape case including to collect evidence in a sexual assault forensic exam. These kits are then sent to labs for DNA testing. DNA found is added to a national database, which is key in finding and convicting repeat offenders.

Research
What is the age of consent?

The age of consent varies widely from state to state, which is key in defining statutory rape.

There is an overwhelming backlog of rape kits. This backlog stands in the way of justice; processed DNA samples are key in identification, prosecution, and conviction of the perpetrator. The backlog includes both evidence that was collected but never sent to the lab and evidence that arrived at the crime lab, but was never tested. The exact number is unknown, but it is estimated that hundreds of thousands of kits are part of this backlog.

Only some states require the collection of DNA at crime scenes. Were every state required to collect and cross-examine the DNA with the database, many more perpetrators would be identified, prosecuted, and convicted.

Discussion
• What is defined as sexual assault is contested across state lines.
• There is no standard for the care of victims post-assault.
• The backlog of rape kits demonstrates the need for a national standard of care.
• Where you live determines your access to medical care in the US

Conclusion
• We need to create a national standard for sexual assault victims;
• Implementing a standard will ensure that a) location does not deter victim care and b) the backlog would be dealt with.
• Support legislation to end the backlog! Everykitcounts.org
• Setting a precedent of care in the US will create a standard that can be applied globally.

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