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The Minnesota Sexual Assault Kit Research Project

2019-MU-MU-0095

Final Report

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Executive Summary

At the direction of the 2015 Minnesota legislature (Minnesota 2015 Session Laws, chapter 65, section 37), Minnesota's state crime laboratory, the Bureau of Criminal Apprehension, compiled an inventory of untested sexual assault kits (SAKs) across the state of Minnesota, identifying 3,482 SAKs held at local law enforcement agencies. More than 500 untested SAKs (n = 503) were identified from Anoka County Sheriff's Office in Anoka County, Minnesota – the second most untested SAKs from a single jurisdiction. In 2018 and 2019, the Minnesota Office of Justice Programs was awarded funds from the Bureau of Justice Assistance to fund the Minnesota Sexual Assault Initiative (MN SAKI) project to "test these SAKs, gain insight into the nature and extent of the challenges regarding the collection and processing of SAKs, and provide critical information for policy and programmatic interventions to improve the statewide response to sexual assault" (Minnesota Office of Justice Programs, para 1, n.d.). The MN SAKI project partners include the Bureau of Criminal Apprehension, the Anoka County Sheriff's Office, Anoka County Attorney's Office, Alexandra House (a victim service provider), and the Minnesota Coalition Against Sexual Assault (the statewide coalition of sexual assault programs). The project partners coordinate their work through a Multidisciplinary Team (MDT) lead first by the Minnesota Coalition Against Sexual Assault, and later the Bureau of Criminal Apprehension.

Using funds from a National Institute of Justice award (Grant No. 2019-MU-MU-0095), the present project employed a variety of methods to evaluate the activities undertaken by stakeholders involved in the MN SAKI project: 1) Eliminate untested SAKs, 2) Build capacity for criminal justice agencies to test SAKs, pursue all investigatory leads, provide victim referrals, and prosecute cases resulting from testing, and 3) Strengthen victim services. In addition, 4) we

completed a cost-benefit analysis of MN SAKI Project SAK testing efforts. As noted above, while the MN SAKI project is a statewide effort, the Anoka County Sheriff's Office is the law enforcement agency partner for this project. As such, the present evaluation focused on the testing of SAKs, victim notifications, and outcomes from Anoka County Sheriff's Office's cases; however, when addressing building capacity, we examined both efforts localized in Anoka County as well as statewide.

Goal 1 – Eliminate untested kits.

Among the 503 previously untested SAKs reviewed by the MN SAKI Case Review Team, 403 SAKs were sent for testing. A review of the law enforcement case files showed that all the cases with a previously untested SAK had been assigned a detective and investigated when it was reported. Further, most cases had been closed by law enforcement after forwarding the case to the prosecutor, with 65 cases resulting in a conviction without testing the SAK. Cases that were forwarded to the prosecutor and declined (without testing the SAK) were primarily "consent cases" where the perpetrator was known to the victim. No information about why SAKs were not tested as part of the original investigation was included in the case files, but it is likely that the detectives and/or prosecutors believed that the SAK had little evidentiary value in these cases. However, 6% of untested SAKs were associated with an inactive investigation where there was an unknown and/or a familial perpetrator; it is unknown why these SAKs were not tested.

Further, binary logistic regression analysis of cases with a previously untested SAK (i.e., treatment group cases) and cases with a SAK that was tested as part of the original investigation during the same time period (i.e., control group cases) revealed that cases with an untested SAK were less likely to involve stranger perpetrators or other known perpetrators, injured victims, and victims who wanted an investigation, and were reported less quickly than cases with a tested SAK. These findings were largely consistent when victim and suspect characteristics were added

to the model; cases with victims who identified as Black were less likely to have an untested SAK, and suspect characteristics were not significantly related to SAK testing status.

Taken together, these findings suggest that most previously untested SAKs had not been tested for practical reasons related to the perceived evidentiary value of the SAK (e.g., the SAK did not need to be tested because the suspect was known to the victim). As such, the MN SAKI project presents a different picture of previously untested SAKs than some other SAKI projects. These results highlight the need for a broader understanding of why criminal justice system actors may have, historically, chosen not to test a SAK and the implications on SAKI projects and project outcomes (e.g., new charges, convictions). For SAKI projects, understanding the specific case characteristics associated with their untested SAKs may help team members better set goals, create guidelines, and make staffing decisions rather than relying on information from prior projects with potentially wildly different cases.

Goal 2 – Build capacity to test SAKs and process cases after SAK testing.

Our review of the historical context and legislative and policy changes regarding the response to sexual assault in Minnesota revealed sweeping changes over the last decade. At the time of writing, the BCA has finished testing all previously untested SAKs identified in the statewide 2015 inventory. Since 2015, Anoka County Sherrif's Office has submitted all new, unrestricted SAKs for testing, and since 2022, all law enforcement agencies in Minnesota submit all unrestricted SAKs for testing. Further, not only has the Minnesota legislature mandated that all unrestricted SAKs be tested, but it has allocated considerable one-time and continuous funding to support mandatory SAK testing. Further, multiple SAKI projects across major cities and counties in Minnesota (e.g., Duluth, Minneapolis, Anoka County) have led to reengagement with hundreds of victim-survivors and the opportunity for victim-survivors to make decisions about how their previously reported sexual assault will be handled moving forward. Further,

Minnesota has also instituted a statewide tracking system for newly submitted SAKs so that victims, healthcare professionals, detectives, and forensic scientists have real time information about the SAK.

In addition, the MN SAKI project has supported statewide training to educate stakeholders on these changes to support the consistent application and enforcement of the numerous new mandates regarding SAK submission, testing, tracking, and victim's right to information on their SAK (i.e., Track-Kit). The MN SAKI MDT has also supported the development of a statewide investigative guide, to again, support consistency in sexual assault investigations across the state.

Goal 3 – Strengthen victim services.

Consistent with best practices from other SAKI projects, the MN SAKI project created trauma-informed guidelines for victim notification and used a case review team to make decisions regarding active notifications. They notified victim-survivors only when the recently tested SAK produced forensic evidence and the SAKI investigator believed there was the possibility of new investigatory leads, and the case review team had no compelling evidence that the victim-survivor did not want an investigation or would be unduly harmed by the notification. A victim advocate conducted the initial victim notifications, and most notifications were conducted by phone.

Active victim notifications required significant effort by the victim advocate to locate victim-survivors, and while most victim-survivors were located and notified, the majority did not want to participate in a new investigation. Of note, victim notifications were conducted more than 11 years on average since the assault and data from victim reaction forms and MDT member interviews suggests that victim-survivors had moved on and were not interested in reopening the past trauma of the assault. At the same time, interviews with victim-survivors

suggested that they were glad they were notified and that being notified over the phone was their preferred method of notification. Further, victim-survivors whose cases were forwarded to law enforcement by the prosecutor reported that they were likely or very likely to call formal systems of care (i.e., an advocate, the police, or legal assistance), go to the hospital and undergo a sexual assault exam if they were to start the process over, while victim-survivors whose cases were not forwarded to the prosecutor did not.

Goal 4 – Assess the costs and benefits of testing SAKs.

Testing the approximately 400 previously untested SAKs held by Anoka County Sherrif's Office resulted in CODIS hits to 74 offenders across 11 states, 24 of whom were not the principal suspect in the case and 15 of whom were previously unknown or known only by a nickname. Further, 107 new DNA profiles were uploaded to CODIS. The majority (64%) of these 74 serial offenders identified in the MN SAKI project had committed serious crimes before the sexual assault associated with the untested SAK. Further, most (71%) committed new serious crimes after the sexual assault – they were responsible for nearly 500 new criminal charges after the reported sexual assault associated with the untested SAK. These charges included new sexual assaults, domestic violence crimes, drug offenses, property crimes, and other crimes.

We identified that the MN SAKI project submitted cases to ViCAP but did not use it as an investitive tool. A deeper dive with MN SAKI team members as well as staff from another SAKI site and BJA revealed that there are opportunities to increase awareness regarding how best to leverage ViCAP for cases of sex crimes. Finally, our cost benefit analysis suggests that the investment in the MN SAKI project that led to two new convictions resulted in cost savings of $150,000 to $300,000 in tangible and intangible costs associated with the prevention of future sexual assaults. Additionally, given the rates of serial offending in this sample compared to the

cost of testing SAKs, if testing the SAKs during the original investigation had supported the convictions of these offenders, the cost savings would have been much higher.

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Chapter 1: Project Background

Sexual assault is a significant public health problem, with the most recent national epidemiological data, the 2016-17 National Intimate Partner and Sexual Violence Survey, indicating that 26.8% of women and 3.8% of men experience an attempted or completed rape during their lifetime (Basile et al., 2022). Sexual assault is also one of the most underreported of all violent crimes (Rennison, 2002; Thompson & Tapp, 2023; Tjaden & Thoennes, 2006). For example, according to data from the National Crime Victimization Survey (NCVS) in 2021, nearly 21.5% of rapes/sexual assaults were reported to the police compared to 60.5% of aggravated assaults and 60% of robberies (Thompson & Tapp, 2023). Reasons for underreporting vary, but studies suggest that primary motivations for victim silence include feelings of shame and embarrassment about the assault, fear that they will not be believed, and fear that not enough will be done if they do report (i.e., they will not receive justice) (Bachman, 1998; Cantor et al., 2015).

For victims who do report sexual assault, they are routinely advised – by law enforcement, victim advocates, and various other sources – to complete a sexual assault forensic examination (Campbell, 2008; Martin, 2005). The sexual assault forensic exam includes a health care component which cares for any injuries and includes administering emergency contraception for pregnancy and prophylaxis for sexually transmitted infections (Department of Justice, 2013). The forensic exam is also comprised of a lengthy interview about the assault – including questions about the types of physical contact between the victim and perpetrator – and a corresponding head-to-toe physical exam including photographing, fingernail scraping, skin swabs and vaginal and anal swabs for DNA evidence (e.g., hair, saliva, blood, semen) (Department of Justice, 2013). Together, this evidence collection is referred to as a sexual assault

kit (SAK). To preserve the chain of custody, the SAK should be sealed and signed by a medical professional in the presence of a law enforcement officer, and then turned over to the law enforcement officer (Department of Justice, 2013), ostensibly to be tested for the presence of DNA evidence that will be used in the investigation and potential prosecution of the suspected perpetrator. However, an ever-growing body of evidence demonstrates that this has not routinely been the case (Lovrich et al., 2004; Office of the Press Secretary, 2015).

Untested Sexual Assault Kits

As explained by Campbell and Feeney (2023), beginning in the 1990s requests for DNA testing at U.S. forensic crime labs began increasing exponentially, greatly outpacing capacity. As a result, crime labs developed backlogs of submitted evidence waiting to be tested (Government and Accountability Office, 2019). Likewise, law enforcement departments began necessarily prioritizing the submission of evidence and seemingly "stopped submitting some types of crime evidence for forensic DNA testing altogether" (Campbell & Feeney, p. 13) leaving crime scene evidence untested in law enforcement storage facilities.

For decades, investigative reports suggested that police departments in large (e.g., New York City), medium (e.g., Albuquerque) (Strickler, 2009), and small (e.g., Mobile, Alabama) jurisdictions (Langhinrichsen-Rohling et al., 2023) across the United States had significant numbers of untested SAKs in storage with many jurisdictions reporting that the number of untested SAKs in their custody is unknown (Keteyian, 2009). One estimate from a 2003 NIJ-funded survey of a nationally representative sample of over 1,600 police departments suggested there were more than 169,000 untested SAKs – some of which dated back nearly two decades – in law enforcement custody at that time (Lovrich et al., 2004). The White House estimated that 400,000 SAKs remained untested in police storage across the country in 2015 (Office of the

Press Secretary, 2015). Although the exact number of untested kits is unknown, Strom and Hickman (2010) assert that each untested kit represents "justice denied" (p. 382) as (1) survivors receive the message that their assault is of little societal concern, (2) perpetrators are left to commit assaults without fear of accountability, (3) falsely accused suspects are denied forensic evidence for exoneration, and (4) the criminal justice system misses opportunities to identify serial perpetrators and/or uncover the identities of previously unknown perpetrators whose DNA is associated with multiple SAKs or other crimes in a national database.

Testing Untested SAKs

Prior research has indicated a range of reasons for untested SAKs, noting that it is often a multifaceted problem stemming from decades of unclear and/or outdated policies, agency deficiencies, and insufficient resources (Campbell et al., 2015; Lovell et al., 2018; Wells et al., 2016; Wells et al., 2017). Untested SAKs often date back many years, even decades, when there was little specialized training for sexual assault among criminal justice system actors. Research highlights myriad reasons why investigators may decide not to submit a SAK for testing. To begin, most sexual assaults include offenders who are known to the victim (Richards et al., 2019). Under these circumstances, the case often hinges on questions of consent (i.e., was this consensual sexual contact or a sexual assault), so investigators may perceive that DNA evidence is unnecessary and forgo submitting a SAK for testing (Davis et al., 2020). Similarly, in cases where offenders admit to the sexual assault or where there are witnesses or other supporting evidence, testing the SAK may be seen as redundant, especially in jurisdictions where there are limited resources to test forensic evidence (Davis et al., 2020; Strom & Hickman, 2016).

At the same time, evidence suggests that historically, when victims whose assaults did not conform to stereotypical notions about "real rape" (e.g., non-stranger assaults, assaults involving weapons) (Estrich, 1987) reported sexual assault, they were met with disbelief by law

enforcement. For example, Campbell and colleagues' (2015) review of police decision-making for Detroit SAKs found that SAKs were routinely left untested because officers felt "the complainant was not credible" or "the complainant was lying about the rape" (p. 45). Research on prosecutorial decision-making in sexual assault cases has found that prosecutors similarly impose credibility concerns on victims (Lapsey et al., 2023; Spohn & Tellis, 2014). Further, research has found that investigators and prosecutors discuss sexual assault cases "off the books" which leads to a strong emphasis of extralegal influence on case processing (Frohmann, 1997; LaFree, 1980; Spohn & Tellis, 2014). Prior research from both Detroit and Houston also notes that SAKs from certain "types" of victims – those with a history of substance abuse, mental health issues, or perceived or actual participation in prostitution – were often not submitted for testing (Campbell et al., 2015; Menaker, Campbell, & Wells, 2017; Wells et al., 2016). In addition, it was commonplace to leave SAKs untested if the victim engaged in behavior perceived as "unexpected from a victim seeking prosecution," such as failure to return phone calls or show up for appointments related to the assault (Campbell et al., 2015, p. 45; Wells et al., 2016). At the same time, research finds that victim engagement with the criminal justice system is one of the strongest predictors of case advancement (Lapsey et al., 2023).

When the decision to test a SAK is made, a victim-centered notification process is paramount. Sexual assault forensic examinations are lengthy, invasive, and can be retraumatizing for victims, as the exam in many ways mimics the sexual assault. Further, most victims are not routinely updated about the status of their SAK or the progress of their case, so they are unaware that their SAK has not been tested (Busch-Armendariz, 2015). Notification that a SAK from years prior will be tested for the first time – and relatedly, was not tested immediately after the assault – may be extremely traumatizing (Busch-Armendariz, 2015; Campbell et al., 2015;

Campbell et al., 2017). While the research on the impact of untested SAK notification on victims is limited, there is an extensive literature on the negative impact of criminal justice and medical system actors' mistreatment of sexual assault victims (i.e., "the second rape," [Madigan & Gamble, 1991] or "secondary victimization" [Martin & Powell, 1994]).

Campbell et al.'s (2015) Detroit research project held a two-day retreat with a multidisciplinary stakeholder group (including police, advocates, prosecutors, and academics) to develop trauma-informed practices for victim notification. The resulting model suggested that (1) only victims whose SAK yields a Combined DNA Index System (CODIS) hit or an investigatory lead should receive "active outreach" (i.e., notification through direct communication; this strategy was also employed in Houston by Wells et al. [2016]), (2) the initial notification should be simple and brief to establish rapport, and (3) notifiers include an apology regarding the previously unsubmitted SAK, acknowledgement that the SAK had been tested, concern for the victim's well-being, and information on next steps should the victim be willing to further engagement; information on the tested SAK should also be shared in the initial contact upon the victim's request. Campbell's team considered multiple professionals (e.g., law enforcement officers, advocates, forensic nurses) and multi-disciplinary teams as well as phone versus in-person notification. Their final model included a single police officer making an in- person notification or phone notification; however, these practices were largely decided due to safety concerns (for the victim and notifier). While police officers are likely the best choice for conveying information about the history of the SAK and the investigation, given that the initial notification is focused on building trust and rapport with the victim (Wells et al., 2016), it is likely that inclusion of an advocate in the notification process would be beneficial to victims given the risk of re/traumatization and the potential need for follow-up services. Further, victims

may feel some “betrayal” by law enforcement generally given that their SAK was left untested for an extended period.

Research comparing victim notification methods is sparse. Campbell and colleagues (2017) evaluated the Detroit notification process detailed above with a sample of 41 victims that the prosecutor’s office and/or the notification review team chose for notification. Cases were assessed on three outcomes: 1) the ability to locate victims several years after collecting a SAK, 2) victim reaction to being notified of SAK testing results and response to investigators, and 3) victim willingness to reengage with the criminal justice system. Findings indicated 31 of the 41 victim-survivors were located and notified during the study period (76%). Most notifications were completed by two investigators in person at the victim-survivor’s residence. Using a rating form, investigators perceived that 16% of (n = 5) victim-survivors had a strong negative emotional reaction to the notification, 29% (n = 9) had a strong positive emotional reaction, and 55% had neither a strong negative nor positive emotional reaction. Of these 31 victim-survivors, investigators had follow-up meetings with 28 to continue to discuss the case in more detail, review options, and meet with a community based advocate; of these 28 victim-survivors, 16 agreed to reengage in the investigative process and potential prosecution of their assailant (i.e., 39% of victim-survivors chosen for notification; 52% of victim-survivors notified; and 57% of victim-survivors who had a second meeting with investigators/advocates

Building Capacity

Prior research on testing previously untested SAKs indicates that approximately 50% or more of tested kits that yield DNA achieve a “hit” in CODIS (i.e., a match with an existing DNA profile) (Lovell et al., 2018; Wells et al., 2016). For example, in Houston, a analyses of data collected from a sample of nearly 500 SAKs , 48.9% of those with DNA resulted in a CODIS hit (Wells et al., 2016); in Los Angeles, of the nearly 2,000 SAKs tested, 49.6% of kits yielding

DNA also resulted in a CODIS hit (Peterson et al., 2012); and of the nearly 5,000 SAKs tested in Cuyahoga County, 66% of SAKs with DNA resulted in a CODIS hit (Lovell et al., 2018).

In addition to CODIS, the Violent Crime Apprehension Program (ViCAP) can be a valuable tool in cases where there is no DNA or if cases are linked by DNA but there is not a name attached. ViCAP allows agencies to capture descriptions of suspects, vehicle information, incident accounts, and other data that can help connect cases. ViCAP was created to develop better communication and cooperation between law enforcement agencies and aid in the investigation and apprehension of violent serial offenders (Haskins, 2019; Howlett et al., 1986). BJA began requiring SAKI grantees to enter information from cases associated with untested SAKs into ViCAP in 2017 (FBI, 2019); however, the impact of using ViCAP – in conjunction with or independent of CODIS – is not yet known.

Once a CODIS or ViCAP hit is established, as described above, the notification process should be deployed, and the victim should be informed about their SAK. For victims who report wanting continued engagement after the initial contact, a second contact meeting should be arranged. In Campbell's (2015) examination of second contacts among 33 notified victims, 55% of victims who had a first notification agreed to a secondary meeting; however, assessing whether this rate of secondary meetings was "good" is not possible because no other studies have assessed the prevalence or context of secondary contacts. Further, 57% of the victims who participated in the second contact meeting expressed a desire to continue to participate in the investigation and potential prosecution of their case. Again, there are no other studies in the literature on victim notification in previously unsubmitted SAKs, so it is impossible to discern whether this rate was "good." Further, no information was gathered from victims on their decision-making regarding participation in a second contact and/or continued engagement with

the criminal justice system.

Prior research suggests that testing previously untested SAKs will increase the number of offenders held accountable by the criminal justice system. For example, as of September 2016, Cuyahoga County had seen more than 600 indictments and 400 convictions associated with newly tested SAKs from their untested kits (BJA, 2018; Lovell et al., 2018). At the same time, testing SAKs also increases the number of staff, and broadens necessary staff expertise. Evidence also suggests that these cases are time consuming: in Detroit, simply finding victims associated with previously untested SAKS sometimes required 12+ phone calls and 6+ in-person visits to various locations. Wells and colleagues (2016) noted that after CODIS hits were returned on the initial kits tested in Houston, a specialized CODIS-unit was developed to investigate all CODIS-hit cases moving forward. In addition, specialized training on trauma informed care was identified as a significant need for all criminal justice system personnel working on CODIS-hit cases (Campbell & Wells, 2014). Further information about agency staffing, multi-agency collaboration, and staff training is needed.

Finally, the surge in SAK testing has increased the number of DNA profiles in CODIS. While at first blush this may seem like a minor byproduct of SAKI projects, it is a significant outcome for researchers to track: as the number of DNA profiles available in CODIS increases, so do the opportunities to identify serial offenders and previously unidentified perpetrators who are linked to existing SAK "cold cases." However, information on the forensic testing results from samples of SAKs is quite limited (Wells et al., 2016), and information on unique profiles produced by SAK testing initiatives is even rarer. However, one study by Lovell et al. (2018) reported that Cuyahoga County's SAKI added nearly 1,000 unique DNA profiles to CODIS. Our project builds upon the lessons learned in prior SAKI sites by tracking additional data regarding

CODIS hits and the unique profiles added to CODIS that have not been historically tracked or reported in research.

Support for Survivors

Consistent with literature on sexual assault reporting (e.g., Spohn & Tellis, 2014), most of the survivors involved in Campbell's (2015) study experienced victim-blaming from police when reporting their victimization. Prior studies have shown that revictimization by the criminal justice system inhibits victim participation (80% on average do not want any further contact/help; e.g., Campbell, 2008). Victim advocates are important in increasing sexual assault victim participation in criminal justice system processes (Campbell, 2006), and may increase participation in criminal justice system activities stemming from a CODIS or ViCAP hit or other investigatory lead associated with a SAK (Campbell, Fehler- Cabral, & Horsford, 2017; Wells et al., 2016). Further, DOJ's *National Best Practices for Sexual Assault Kits* indicates that collaborating with victim advocates can strengthen and improve the

process by (a) providing victims needed support and a central point of contact in the prosecutor's and law enforcement agency's offices, and (b) creating a bridge between victims and members of the criminal justice system for improved communication (p. 64). No studies to date have examined the types of victim services offered to, and accessed by, victims upon notification of a newly tested SAK and/or during their participation in the criminal justice system.

Victim participation in the criminal justice system may also be related to victim empowerment and satisfaction, which are important processes and outcomes for trauma-informed care. Victim empowerment is the process of providing victims opportunities to take control, have a say, be listened to, act on their own choices, and have the choices made respected by others (i.e., moving from victim to survivor) (Cattaneo & Goodman, 2010). An empowerment

model for victims of sexual assault relies on the premise that victims should lead decision-making regarding their recovery (Ullman & Townsend, 2008), including playing a central role in any criminal justice process. Cattaneo and Goodman (2010) suggest that "regardless of the outcome of the criminal case…if a victim feels ignored, coerced, or blamed, the effect of her involvement in the system on her well-being may be a net negative for her" (p. 483).

Likewise, victim empowerment through the court process may itself be associated with increased victim satisfaction. While no research to date has examined victim participation in the criminal justice process, empowerment, and satisfaction regarding testing SAKs, similar prior research is encouraging. First, Zweig and Burt (2003) found that when female victims of intimate partner violence (IPV) and sexual assault perceived that they had control over what happened in the court system, they were more satisfied with their experience and reported they would use the criminal justice system in the future. Belknap and Sullivan (2003) reported similar results in that perceived control over the court processes predicted IPV victims' levels of satisfaction at 6- and 12-months after disposition. Finally, Cattaneo and Goodman (2010) found that IPV and stalking victims' perceptions of empowerment in the court process predicted increased quality of life, decreased rates of depression, and greater intent to use the criminal justice system at follow-up. Taken together, research is sorely needed on victim participation, empowerment, and satisfaction associated with SAK testing.

Cost/Benefit of Testing SAKs

The proliferation of agencies using national databases has allowed for the linking of DNA from multiple SAKs from the same perpetrator over time and place as well as linkages between perpetrators of sexual assault with their non-sex crimes. As a result, recent studies have revealed that a significant number of perpetrators are serial perpetrators who commit additional sexual assaults and other felonies while the "primary SAK" sat untested (Lovell et al., 2018). For

example, in Cuyahoga County, testing backlogged SAKs resulted in the identification of over 800 serial offenders (Bureau of Justice Assistance, 2018). Further, this research has demonstrated that serial offenders often assault different "types" of victims – from strangers, to intimates, to children – and commit other crimes (e.g., burglary, assault) over the course of their criminal careers (BJA, 2018). As a result, initial cost benefit analyses estimate that testing all SAKs has the potential to yield significant savings to the criminal justice system regarding investigating and prosecuting future crimes. For example, in Denver, Davis and Wells (2019) found that although 40% of cases, after CODIS hits, failed to result in an offender being arrested or convicted, the conviction rate upon arrest was over 90%, thus costing Denver roughly $16,000 per conviction. Estimating the cost of sexual assault to be somewhere in the range of $108,000 to $283,000, the researchers concluded "as long as at least one recidivist crime is prevented by every seven convictions…the costs of the Denver cold case sexual assault program was worth the investment" (p. 47). In Cuyahoga County, Singer et al. (2016) projected 1, 290 indictments and 948 convictions because of testing untested SAKs. They estimated the total cost of testing and investigating the SAKs at $9.6 million. Balanced against the estimated $48.3 million saved in future averted sexual assaults (note that over 25% of indicted defendants were serial sex offenders, see Lovell et al., 2018), the Cuyahoga intervention resulted in a net savings of $38.7 million. These initial findings show promise regarding the cost effectiveness of investing in testing all SAKs.

Chapter 2: Project Background, Goals, Research Questions, and Methods

MN SAKI Project Background

At the direction of the 2015 Minnesota legislature (Minnesota 2015 Session Laws, chapter 65, section 37), Minnesota's state crime laboratory, the Bureau of Criminal Apprehension, compiled an inventory of untested sexual assault kits (SAKs) across the state of Minnesota, identifying 3,482 SAKs held at local law enforcement agencies (See BCA memo in Appendix A). More than 500 untested SAKs (n = 503) were identified from Anoka County Sheriff's Office in Anoka County, Minnesota – the second most untested SAKs from a single jurisdiction. In 2018, the Minnesota Office of Justice Programs was awarded a $2 million grant from the Bureau of Justice Assistance (Grant No. 2018-AK-BX-0019) and subsequent grants in 2019 (Grant No. 2019-AK-BX-0018) and 2020 (Grant No. 2020-AK-BX-0008) to fund the MN SAKI project to "test these SAKs, gain insight into the nature and extent of the challenges regarding the collection and processing of SAKs, and provide critical information for policy and programmatic interventions to improve the statewide response to sexual assault" (Minnesota Office of Justice Programs, para 1, n.d.). While these funds were used to test all untested kits identified as part of the 2015 inventory, testing began with Anoka County Sherrif Offices' kits given the high number of kits they had in storage.

The MN SAKI project partners include the Bureau of Criminal Apprehension (BCA), the Anoka County Sheriff's Office (ACSO), Anoka County Attorney's Office (ACAO), Alexandra House ([AH]; a victim service provider), and the Minnesota Coalition Against Sexual Assault ([MCASA]; the statewide coalition of sexual assault programs). The project partners, along with numerous stakeholders, coordinate their work through a Multidisciplinary Team lead first by the MNCASA, and later BCA. The earliest work by the MN

SAKI project (i.e., in 2018) consisted of making decisions regarding whether each previously untested SAK from ACSO would be tested. The MN SAKI project employed a Case Review Team (CRT) consisting of representatives from the BCA, ACSO, AH, MNCASA, ACAO, and the state's Sexual Assault Nurse Examiner Program which reviewed each case to determine whether the SAK would be submitted to BCA for testing (see Chapter 6). All testing was done through the BCA. In addition, beginning in 2019, a dedicated SAKI victim advocate from AH conducted active notifications with a subset of victim-survivors (see Chapter 5) and provided services and support to victims-survivors. A dedicated investigator from ACSO conducted new investigations stemming from previously untested SAKs and the ACAO was responsible for making decisions regarding prosecutions (See Chapter 6).

MN SAKI Project Evaluation Background and Research Questions

In 2019, the principal investigator (PI) and co-investigators (Co-Is) of the current project were awarded funds from the National Institute of Justice ([NIJ] Grant No. 2019-MU-MU-0095) to conduct an evaluation of the Omaha SAKI project. However, in the interim period, from submitting the grant proposal (i.e., in 2018) to the award of the funds (i.e., in 2019) there were significant personnel changes among the Omaha SAKI project team. Additionally, the Omaha SAKI project had experienced challenges regarding the implementation of a new data system at the Omaha Police Department. As a mitigation strategy, the PI/Co-Is engaged with the project's NIJ Scientist, Tina Crossland, as well as the SAKI Training and Technical Assistance Providers at RTI International to identify other SAKI sites that (1) did not have a current research partner and (2) had the necessary sample size to support the proposed project. With the assistance of Ms. Crossland and RTI, we identified several potential sites and began initial communications. After several zoom meetings with different MN SAKI MDT members, on January 27, 2021, we

began our collaboration with the MN SAKI site.

We employed a variety of methods described below to evaluate the activities undertaken by stakeholders involved in the MN SAKI project: 1) Eliminate untested SAKs, 2) Build capacity for criminal justice agencies to test SAKs, pursue all investigatory leads, provide victim referrals, and prosecute cases resulting from testing, and 3) Strengthen victim services. In addition, 4) we completed a cost-benefit analysis of MN SAKI Project SAK testing efforts. As noted above, while the MN SAKI project is a statewide effort to test kits, the ACSO is the law enforcement agency on the project. As such, the present evaluation focused on the SAKs, victim notifications, and case outcomes stemming from ACSO; however, when addressing building capacity, we examined both efforts localized in Anoka County as well as statewide.

To evaluate the MN SAKI project activities, we replicated and advanced several areas of prior research on the testing of SAKs. The research team collected and analyzed data to address the following goals and answer the following specific research questions:

Goal 1 – Eliminate untested kits.

RQ1a: What are the characteristics of cases associated with untested SAKs in Anoka County, MN?

RQ1b: What are the causes of previously untested SAKs in Anoka County, MN?

Goal 2 – Build capacity to test SAKs and process cases after SAK testing.

RQ2: What gaps exist in the current response system to sexual assault in Anoka County, MN (and statewide)?

Goal 3 – Strengthen victim services.

RQ3a: What do victim notifications and the notification process look like?

RQ3b: What are victims' perceptions of the notification process and their help seeking needs?

RQ3c: What impacts empowerment and future help-seeking?

Goal 4 – Assess the costs and benefits of testing SAKs.

RQ4a: What are the outcomes of testing SAKs in Anoka County, MN, including the number of CODIS and ViCAP uploads and hits?

RQ4b: What are the costs and benefits of testing SAKs in Anoka County, MN?

Data and Procedures

The case data used here stems from Anoka County, MN. Anoka County is the fourth most populous county in Minnesota with a population of approximately 361,000 people (in 2021) (DataUSA, 2023). Residents are primarily White (79%) with the largest minority populations identifying as Black (7%), Asian (5%), or multi-racial (3%). In 2021, the median household income was $88,680 and the unemployment rate was less than 6% (DataUSA, 2023).

Goal 1 – Eliminate untested kits.

To examine the characteristics of cases associated with untested SAKs and causes of previously untested kits, the project team created a database containing victim, suspect, and case information from ACSO's criminal incident reports and forensic data from the BCA for the previously untested SAKs associated with alleged criminal sexual conduct (i.e., the treatment group) and the population of cases with SAKs associated with alleged criminal sexual conduct that were tested as part of the original investigation (during the same time frame) to serve as a control group.

Treatment group files from ACSO were shared with the PI via an encrypted thumb drive. Case files were then uploaded to a password protected folder on the PI's university network. Case files were only accessible to project team members who were trained to conduct coding; all coders completed CITI human subjects training and signed confidentiality agreements and non-disclosure agreements. Control group cases were coded by a subset of the coding team – the PI and one Co-I and two doctoral students – during a site visit to Anoka County, MN. Data for

control group cases were extracted from paper files and were coded in person at ACSO.

In total ten individuals were trained to code information from the law enforcement case files: two faculty members, six doctoral students, one master's student, and one undergraduate student. The PI and three doctoral students formulated, and pilot tested the initial coding framework. Pilot testing was first completed independently using three randomly selected case files from the treatment group sample. Coders took detailed notes regarding the coding framework's conceptual inclusiveness for each variable as they completed the initial round of coding. Then, the initial coding team met to discuss pilot coding and inter-rater reliability for the operationalization of each variable until saturation was reached.

Additional coders including one of the Co-I's, three additional doctoral students, one master's student and one honor's undergraduate student were onboarded over the life of project. To onboard a new member of the team, the project coordinator conducted approximately 30-minutes to 1-hour training sessions (in-person and via zoom) covering the project's purpose, overall methodology, and the coding framework. New coders were asked to code a randomly selected case and discuss their coding results with the project coordinator so that inconsistencies in operationalization could be identified and corrected. Given the heterogeneous and nuanced nature of the data, the coding team met bi-monthly, for 1-hour to 1.5-hours to discuss unique or difficult-to-code case files. In these meetings, agreement-based discussions were used to make decisions when disagreements in coding arose, and coding decisions were made by majority consensus. Finally, the PI and project coordinator were available for individual consultation for specific questions and concerns that arose.

Regarding the analyses for goal 1, first, descriptive statistics for the treatment group are presented. Then, the treatment and control groups are compared across a range of victim,

suspect, and case characteristics to determine whether there were measurable differences between the two groups regarding the decision to test SAKs. Specifically, we used bivariate means tests (i.e., t-tests and chi-square tests) and logistic regression models to determine what victim, suspect, case, and community characteristics differentiated SAKs that were tested as part of the MN SAKI project versus those that were tested at the time of the original investigation.

Goal 2 – Build capacity to test SAKs and process cases after SAK testing.

To understand Anoka County's and Minnesota's statewide capacity to respond to sexual assault, we first reviewed polices, practices, and legislation related to SAKs prior to and during the MN SAKI project. Then, we examined data from a statewide survey of training needs conducted by MNCASA; the survey was conducted via SurveyMonkey in August of 2021. We also reviewed information on the trainings provided by MN SAKI MDT members in response to the results of the survey. Finally, we interviewed MN SAKI MDT members regarding the impact of the MN SAKI project. Specifically, we asked questions about respondents' perceptions of agency/statewide changes in the response to sexual assault and interagency communication and collaboration when responding to sexual assault; we also asked about any "lessons learned" during the MN SAKI project (See Appendix B for interview guide and Appendix C for passive consent form). Interviews were conducted by the PI via zoom and lasted approximately 30 minutes each.

Goal 3 – Strengthen victim services.

To understand what victim notifications/the notification process entailed, we obtained de-identified data from Alexandra House regarding the active victim notification process (n = 80). We assessed efforts by the advocate that are not typically captured by traditional measures of "success" in criminal justice cases (e.g., arrests, citations). Here, we focused on the process of locating victims (e.g., effort to locate, ability to locate) to notify them of SAK testing results,

victim referrals to services, and whether the case resulted in a new investigation and/or prosecution. In addition, we captured the victim advocate's perceptions about victim-survivors' reaction to the notifications (Campbell et al., 2017) (n = 15) and interviewed victim-survivors (n = 4) about their experiences and perceptions of the notification process (see Lovell et al., 2018), help-seeking, empowerment (modified from Cattaneo & Goodman, 2010), and future use of the system (modified from Cattaneo & Goodman, 2010).

The victim-survivor reaction form was completed by the victim advocate directly after completing an active notification (See Appendix D for reaction form). The victim advocate completed a reaction form for successful notifications where the victim advocate talked with the victim-survivor (e.g., by phone, in person, or zoom) after the start of the researcher-practitioner partnership project presented in this report. In other words, the victim advocate did not complete a victim-survivor reaction form for active notifications that were conducted prior to the start of the project.

The interview script was designed with intentionality and care to reduce re-traumatization among victim-survivors. The script was developed in close collaboration with the community-based victim advocate as well as advocates and other staff from MNCASA; a victim-survivor representative from the Kentucky Sexual Assault Kit Initiative Working Group also reviewed the interview script (See Appendix E for interview script). An Alexandra House victim advocate **who did not conduct** any of the active victim notifications solicited participation for interviews through direct phone outreach with victim-survivors who did not communicate that they were opposed to future communication by the MN SAKI project partners after the initial active notification (n = 18); the same victim advocate conducted the interviews. Interviews lasted approximately 1 hour, and victim-survivors were compensated $20 for their time (See Appendix

F for passive consent form).

Goal 4 – Assess the costs and benefits of testing SAKs.

To understand outcomes, as well as the costs and benefits of the MN SAKI project, we collected data on several outcomes associated with SAK testing efforts: development of DNA profiles, profile uploads to CODIS, and CODIS hits; use of the Violent Criminal Apprehension Program (ViCAP); and the benefit of SAK testing related to the costs of future crimes. To assess the outcomes of SAK testing, we examined data from the BCA regarding the forensic testing process, whether a DNA profile was uploaded to CODIS, and whether there was a CODIS hit. Regarding CODIS uploads and hits, we excluded profiles/hits from consensual sexual partners. Regarding ViCAP, we tracked whether a case was entered in ViCAP and examined bivariate differences between cases entered in ViCAP and those not entered in ViCAP. We also interviewed MN SAKI law enforcement personnel and forensic scientists regarding their ViCAP training and the process of entering cases into ViCAP and BJA Forensic Unit leadership and key staff to better understand BJA expectations regarding SAKI-ViCAP collaborations. We also worked with BJA to identify a "model" ViCAP SAKI site and interviewed team members from that site to learn more about their success using ViCAP in SAKI cases. Interviews were conducted via zoom by the PI or Co-I and a doctoral student research assistant. Interviews with the MN SAKI team members and BJA Forensic Unit Leadership and staff were conducted in September and October 2022, respectively and the interview with the model SAKI-ViCAP site was conducted in July 2023; interviews lasted from 30 minutes to one hour (See Appendix G for interview questions and Appendix B for passive consent form).

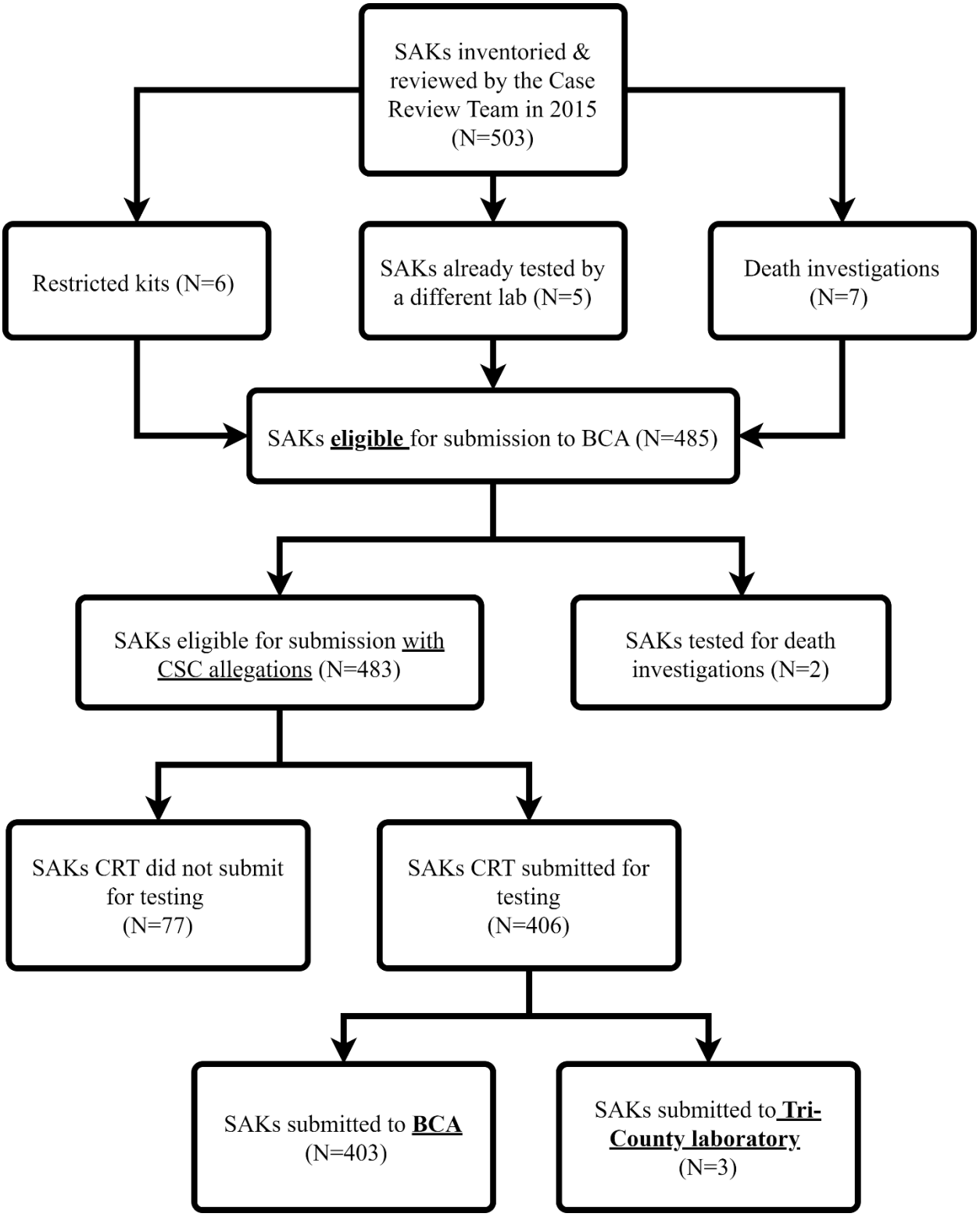
Finally, replicating Lovell et al.'s (2021) work in Cuyahoga County, we estimated the costs and benefits associated with testing, investigating, and prosecuting untested SAKs in Anoka County, MN. Using criminal history and recidivism data for each offender involved in a

CODIS hit, and tangible and intangible crime cost estimates from McCollister et al. (2010) (adjusted to 2023 dollars), we estimated the societal costs of untested SAKs. Criminal history and recidivism data was extracted from Minnesota Case Search, a publicly available data system housed in the Minnesota Judicial Branch which provides information for all court cases in the state of Minnesota. Minnesota Case Search allows users to search by offender name and view the case details (e.g., charges, date of incident, case outcomes) and public documents for each case associated with the offender; for offenders who were identified from other states, public facing databases were searched where available (i.e., Maryland, Oklahoma, New Jersey). Costs for violent and nonviolent crimes committed after the CODIS hit allowed us to speak to how much untested SAKs cost in terms of tangible and intangible costs.

Chapter 3: Eliminate Untested Sexual Assault Kits.

Our first research question (RQ1a) asked "What are the characteristics of cases associated with untested SAKs in Anoka County, MN?". To address RQ1a, we began by examining case progression from identification in the 2015 inventory to CRT decision-making regarding SAK submission for testing. As shown in Figure 1, among the 503 untested SAKs reviewed by the CRT, six were associated with restricted kits (i.e., the victim did not sign a consent form authorizing law enforcement to submit for forensic testing), five SAKs had already been tested in a different laboratory (i.e., were not "untested"); and seven were associated with SAKs collected as a routine procedure in death investigations that did not need further testing; leaving 485 SAKs eligible for submission to BCA for further testing (See Figure 1). Among these 485 SAKs, two SAKs were associated with death investigations and were excluded from further analysis here, leaving a final sample of 483 previously untested SAKs associated with a CSC allegation and eligible for submission for testing. **All 483 cases had been assigned a detective and had been investigated.**

Figure 1. Case Processing in Minnesota Statewide SAKI Initiative: Case attrition in MN SAKI 2015 Inventory (*N* = 503).



What are the characteristics of MN SAKI cases?

Case Characteristics

We computed descriptive statistics for the 483 cases of alleged criminal sexual conduct with a previously untested SAK (n = 484 victim-survivors) reviewed in the Minnesota Sexual Assault Kit Initiative (i.e., MN SAKI) (See Table 1). Most incidents occurred from 2010-2015 (41.1%), followed by 2005-2009 (34.9%), 2000-2004 (21.7%), and 1995-1999 (1.9%); there were two cases between 1985-1994. On average, the time between the incident and the report to law enforcement was less than a single day (*M* = 0.13 days, *SD* = 0.63). In 66.9% of cases, at least one witness was identified by law enforcement. On average, there were 1.43 witnesses per case (*SD* = 1.50), with as many as 8 witnesses in a single case. Regarding location of the incident, incidents occurred at the victim's or suspect's residence at equal frequencies (26.0%, respectively), followed by a third-party's residence (19.7%), a vehicle (8.3%), outdoors (7.6%), a hotel (3.9%), and "other" locations (e.g., public restrooms, hospitals) (3.9%). In 5.6% of cases, the victim reported multiple incidents occurring in two or more locations.

In most cases, the victim reported that one perpetrator was involved in the incident (85.5%); however, incidents involved up to 5 reported perpetrators (*M* = 1.18 perpetrators; *SD* = 0.60). The most common victim-perpetrator relationship was acquaintances/known by sight (31.4%), then romantic partners (current/former; 22.7%), and strangers (18.8%). Though less common, victim-perpetrator relationships also included friends (16.5%) and family (5.6%). There were 52 victims who reported at least two perpetrators were involved. In these instances, the second perpetrator was most often a stranger (50.0%), followed by an acquaintance (23.3%), friend (8.3%), family (1.7%), and romantic partner (current/former; 3.3%). In instances where there were three or more perpetrators, the third perpetrator was identified as either a stranger

(72.7%) or acquaintance/known by sight (18.2%); fourth or fifth perpetrators were all strangers to the victim. Victims reported that perpetrator(s) used a condom in 10.0% of incidents and ejaculated in 29.8% of incidents; however, there was a substantial amount of missing data on these variables (in 31.4% and 53.0% of cases, respectively).

Weapon use or threats of a weapon were rare. Weapon use occurred in 4.8% of cases, with knives being the most common weapon used (56.5%), followed by a gun (21.7%), and other weapons (21.7%). Threats of a weapon occurred in 5.4% of cases, and again, knives were most common (53.8%), then guns (30.8%), followed by other weapons (15.4%). It was more common for a perpetrator to use force (49.0%) than to threaten to use force (7.9%). Coercion was used in 11.6% of cases. For example, one victim alleged the perpetrator threatened to kidnap their shared children if she did not comply. Approximately one-third of victim-survivors sustained injuries (33.9%) which predominantly included cuts and bruises. In 5.0% of incidents, the perpetrator kidnapped the victim; 6.0% of incidents involved the perpetrator holding the victim captive (for more time than it took to complete the assault); and 5.2% of incidents included strangulation.

Law enforcement identified at least one suspect in most cases (78.5%). On average, law enforcement identified 0.84 suspects (*SD* = 0.51), and as many as three were identified. Further, law enforcement interviewed at least one suspect in 64.7% of cases, and 12.6% of interviewed suspects made a confession to law enforcement. Law enforcement forwarded 72.1% of cases with an identified suspect to prosecution; prosecutors filed charges in 31.0% of these cases. More than one-third of all cases had a final case status of "prosecution declined" (37.8%), 16.1% of cases were open investigations (both active and inactive), 18.8% were exceptionally cleared, 9.3% were unfounded. Prosecutors filed charges in 17.6% of cases, and 77.6% of these cases resulted in a conviction. At the time of writing, there was one charged case (1.2%) that was still

in progress and, therefore, no final disposition (e.g., conviction, acquittal, etc.) was available.

Victim Characteristics

Most cases involved a female victim (97.5%). Victims ranged in age from 2-82 years old and were 24.29 years old on average (*SD* = 10.84); 28.9% of victims were minors (less than 18 years of age) at the time of the incident. Most victims were White/Caucasian (74.4%), followed by Black/African American (6.6%), Hispanic (5.0%), American Indian/Alaskan Native (0.8%), and Asian/Pacific Islander (0.4%); notably, victim race was missing for 12.8% of cases. Most victims (91.3%) provided a formal statement to law enforcement, but only 57.0% elected to continue with an investigation into the incident. In approximately one-fourth of cases (24.6%), the victim initially supported an investigation, but then changed their mind (e.g., stopped answering law enforcement officer's phone calls, returning phone calls/letters).

In 24.6% of cases, crime incident reports included direct statements by criminal justice actors (e.g., law enforcement, prosecutors, judges) concerning the victim's credibility. In about one-third of cases (32.9%) the victim reported losing consciousness during the incident and in 22.5% of cases the incident report noted that the victim had a mental health or disability diagnosis. About 11% of victims reported having a consensual sexual partner within 72 hours preceding the incident. Slightly less than half of victims (45.5%) had consumed alcohol prior to the incident, which was most often self-supplied and voluntarily consumed (37.0%). However, many victims also voluntarily consumed alcohol provided by the perpetrator (26.0%) or a third-party (e.g., bar, restaurant; 23.0%). In a minority of cases, victims alleged that they were forced to consume alcohol (1.7%) or unknowingly ingested alcohol (1.3%). Less than one-fifth (18.8%) of victims reported consuming drugs prior to the incident; however, 41.6% of these victims believed they had unknowingly ingested drugs (e.g., drink spiking). In addition, victims reported voluntarily consuming drugs provided by either the perpetrator (22.5%), self-supply (16.9%) or a

third-party (5.6%). Three victims (3.4%) alleged they were forced by the perpetrator to consume drugs.

Suspect Characteristics

In cases with one or more identified suspects, the first suspect consisted of mostly men (99.2%); all additional suspects (i.e., second suspect, third suspect) were men. Most Suspect one's were White/Caucasian (57.9%); followed by Black/African American (16.3%), Hispanic (6.1%), American Indian/Alaskan Native (1.8%), and Asian/Pacific Islander (1.6%); Suspect one's race was missing in 13.2% of cases. On average, suspects were 28.87 years-old (*SD* = 11.82) but ranged in age from 11-74 years old. Among the cases with more than one suspect, second suspects were primarily White/Caucasian (44.0%) or Black/African American (36.0%); Second suspect's race was missing in 20.0% of cases. Second suspects were 28.55 years-old on average (*SD* = 12.84) but ranged in age from 13-58 years of age. Third suspects were also mostly White/Caucasian (40.0%) or Black/African American (20.0%). On average, third suspects were 23.91 years-old (*SD*=11.82) but ranged in age from 16-37 years old. In 43.8% of cases, the victim alleged the suspect(s) consumed alcohol prior to the assault, while in 12.1% of cases, the victim alleged the suspect(s) consumed drugs prior to the assault; 16.0% and 22.8% of data was missing for these variables, respectively.

Table 1. Descriptive Statistics for Cases of Alleged Criminal Sexual Conduct with a Previously Untested SAK Reviewed by CRT (*N* = 483 SAKs, *N* = 484 victims).[1]

Case Characteristics	*N*	%
Offense year [2]		
1985 – 1989	2	0.4
1990 – 1994	0	0.0
1995 – 1999	9	1.9
2000 – 2004	105	21.7
2005 – 2009	169	34.9
2010 – 2015	199	41.1
Time between Incident and Report (Days)[3]	*M* = 0.13; *SD* = 0.63 Range (0-10)	

Any witnesses identified		
No	160	33.1
Yes	324	66.9
Number of witnesses	*M* = 1.43; *SD* = 1.50 Range (0-8)	
Location of incident		
Vehicle	40	8.3
Outdoors	37	7.6
Victim's residence	126	26.0
Suspect's residence	126	26.0
Third-party residence	90	18.6
Hotel	19	3.9
Other	19	3.9
Multiple locations		
No	453	93.6
Yes	27	5.6
Multiple alleged perpetrators		
No	414	85.5
Yes	56	11.6
Number of alleged perpetrators [4]	*M* = 1.18; *SD* = 0.60 Range (1-5)	
Victim-perpetrator relationship (Perpetrator 1)		
Stranger	91	18.8
Acquaintance (known by sight)	152	31.4
Friend	80	16.5
Family member	27	5.6
Romantic partner (current/former)	110	22.7
Victim-perpetrator relationship (Perpetrator 2) (*n* = 60)		
Stranger	30	50.0
Acquaintance (known by sight)	14	23.3
Friend	5	8.3
Family member	1	1.7
Romantic partner (current/former)	2	3.3
Victim-perpetrator relationship (Perpetrator 3) (*n* = 22)		
Stranger	16	72.7
Acquaintance (known by sight)	4	18.2
Victim-alleged perpetrator relationship (Perpetrator 4) (*n* = 9)		
Stranger	8	88.9
Victim-alleged perpetrator relationship (Perpetrator 5) (*n* = 5)		
Stranger	4	80.0
Perpetrator used a condom		
No	283	58.5
Yes	49	10.1
Perpetrator ejaculated		
No	82	16.9
Yes	144	29.8
Perpetrator used a weapon		

No	435	89.9
Yes	23	4.8
Type of weapon used (n = 23)		
Gun	5	21.7
Knife	13	56.5
Other weapon	5	21.7
Perpetrator threatened a weapon		
No	432	89.3
Yes	26	5.4
Type of weapon threatened (n = 26)		
Gun	8	30.8
Knife	14	53.8
Other weapon	4	15.4
Perpetrator used force		
No	190	39.3
Yes	237	49.0
Perpetrator threatened force		
No	389	80.4
Yes	38	7.9
Perpetrator used coercion		
No	388	80.2
Yes	56	11.6
Victim injured		
No	306	63.2
Yes	164	33.9
Incident involved kidnapping		
No	451	93.2
Yes	24	5.0
Incident involved captivity		
No	446	92.1
Yes	29	6.0
Incident involved strangulation		
No	445	91.9
Yes	25	5.2
Suspect/s identified		
No	104	21.5
Yes	380	78.5
Number of identified suspects	M = 0.84; SD = 0.51 Range (0-3)	
Suspect interviewed (n = 380)		
No	131	34.5
Yes	246	64.7
Suspect confessed (n = 246)		
No	215	87.4
Yes	31	12.6
Case forwarded to Prosecutor (n = 380)		
No	106	27.9
Yes	274	72.1

Prosecutor filed charges (n = 274)		
No	189	69.0
Yes	85	31.0
Current/Final Case Status		
Prosecution Declined	183	37.8
Prosecution Charged	84	17.6
Exceptionally Cleared	91	18.8
Unfounded	45	9.3
Open (Active or Inactive Investigation)	79	16.1
If charged, suspect convicted (n = 84)		
No	19	21.2
Yes	65	77.6
Victim Characteristics		
Victim sex		
Female	472	97.5
Male	12	2.5
Victim age at time of incident	M = 24.29; SD = 10.84 Range (2-82)	
Victim was a minor at time of incident		
No	342	70.7
Yes	140	28.9
Victim race/ethnicity		
White/Caucasian	360	74.4
Black/African American	32	6.6
American Indian/Alaskan Native	4	0.8
Asian/Pacific Islander	2	0.4
Hispanic, any race	24	5.0
Another race	0	0.0
Victim provided statement to law enforcement		
No	32	6.6
Yes	442	91.3
Victim cooperated with investigation		
No	71	14.7
Yes	276	57.0
Changed their mind	100	20.7
Victim credibility		
No	361	74.6
Yes	119	24.6
Victim loss of consciousness		
No	304	62.8
Yes	159	32.9
Victim mental health or disability diagnosis		
No	367	75.8
Yes	109	22.5
Consensual partner within last 72-hours		
No	397	82.0
Yes	54	11.2

Victim consumed alcohol prior to assault		
No	220	45.5
Yes	230	47.5
Who provided victim alcohol (n = 230)		
Self-supplied	85	37.0
Perpetrator supplied, but voluntarily consumed	60	26.1
Third-party/Unknown supplier, but voluntarily consumed	53	23.0
Victim alleged forced to consume alcohol	4	1.7
Victim alleged unknowingly ingested alcohol	3	1.3
Victim consumed drugs prior to assault		
No	345	71.3
Yes	89	18.4
Who provided victim drugs (n = 89)		
Self-supplied	15	16.9
Perpetrator supplied, but voluntarily consumed	20	22.5
Third-party/Unknown supplier, but voluntarily consumed	5	5.6
Victim alleged unknowingly ingested drug	37	41.6
Victim alleged forced to consume drug	3	3.4
Suspect Characteristics		
Suspect sex (Suspect 1) (n = 381)		
Female	3	0.7
Male	377	99.2
Suspect race/ethnicity (Suspect 1) (n = 318)		
White/Caucasian	220	57.9
Black/African American	62	16.3
American Indian/Alaskan Native	7	1.8
Asian/Pacific Islander	6	1.6
Hispanic, any race	23	6.1
Another race	0	-
Suspect age at time of incident (Suspect 1)	M = 28.87; SD = 11.82 Range (11-74)	
Suspect sex (Suspect 2) (n = 25)		
Male	24	96.0
Suspect race/ethnicity (Suspect 2) (n = 25)		
White/Caucasian	11	44.0
Black/African American	9	36.0
Suspect age at time of incident (Suspect 2) (n = 25)	M = 28.55; SD = 12.84 Range (13-58)	
Suspect sex (Suspect 3) (n = 5)		
Male	4	80.0
Suspect race/ethnicity (Suspect 3) (n = 5)		
White/Caucasian	2	40.0
Black/African American	1	20.0
Suspect age at time of incident (Suspect 3) (n = 5)	M = 23.91; SD = 11.82 Range (16-37)	
Suspect consumed alcohol prior to assault		
No	156	40.9

Yes	167	43.8
Suspect consumed drugs prior to assault		
No	251	65.9
Yes	46	12.7

Table Notes:

1. The sample includes 484 unique victim-survivors associated with 483 SAKs.
2. One case involved a homicide with suspected CSC. Since the victim was deceased, the date reported was used to calculate offense year, time to report, and all ages.
3. Percentages may not add up to 100% due to unknown/missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).
4. There is an important distinction between "perpetrators" and "suspects" in the dataset. Perpetrators were derived from the victim-survivor's report of what happened, while suspects refer to a specific individual identified by the victim and/or law enforcement and named as a suspect in the incident report.
5. Conditional percentages reflect the subsample *n* provided with each variable.

Why were SAKs associated with the MN SAKI project not tested during the original investigation?

Next, we examined the original case files and the detailed notes from the CRT to explore why SAKs were not tested during the original investigation. More specifically, we examined the closing/case summary statements from the assigned detective (from the original investigation) as well as the detailed notes developed by the SAKI detective that were presented to the CRT as well as the comments added from the CRT during case conferencing. Review of this information uncovered that there was no information directly related to why the SAK was not tested in the case files – in other words, there were no case notes from the original detective and/or prosecutor regarding decisions to test or not test the SAK. As such, we considered the case outcomes for closed cases and the case contexts for cases that were inactive investigations in an attempt to shed light on why SAKs were not tested.

As noted above, all cases were assigned a detective and investigated, and the majority were closed during the original investigation (82.8%) as opposed to being inactive investigations (17.2%). Beginning with the closed cases, 66% (n = 264) were forwarded to the prosecutor (54.7% of all cases); 65 of these cases were charged and convicted, while 16 were charged

without securing a conviction (i.e., dismissed or acquitted). In addition, 183 cases were forwarded to the prosecutor, but the prosecutor declined to file charges. Most cases declined by the prosecutor were "consent" cases (91.8%) where the victim and suspect agreed that sex occurred, but the victim reported a sexual assault and the suspect reported consensual sex; 8.2% of cases declined by the prosecutor were cases of reported stranger or familial-perpetrated sexual assault. In addition, 18.8% of all cases with an untested SAK were exceptionally cleared. According to the FBI (2004), cases may be cleared through exceptional means if the agency has established the following four conditions. The agency must have (a) identified the offender; (b) gathered enough evidence to support an arrest, make a charge, and turn over the offender to the court for prosecution; (c) identified the offender's exact location so that the suspect could be taken into custody immediately; and (4) encountered a circumstance outside the control of law enforcement that prohibits the agency from arresting charging, and prosecuting the offender (p. 81). Finally, 8.2% of cases were unfounded. Again, as noted by the FBI (2004), law enforcement may unfound cases, "if the investigation shows that no offense occurred nor was attempted" (p.77).

Comparatively, 17.2% of cases with an untested SAK were inactive investigations. In 6.0% of these cases, the case involved an unknown/stranger or familial perpetrator, and no victim credibility concerns were noted by the detective. As such, it is unknown why these 29 SAKs were not tested. In nearly 5% of these cases, the victim reported not wanting an investigation or stopped engaging in the investigation (i.e., stopped returning phone calls, not coming in for meetings). In 2.3% of cases, respectively, the detective cited the victim's credibility regarding the report or that their mental health was a concern or that the case rested on consent. Further, in 1.2% of cases the report did not include penetrative criminal sexual conduct,

while in 0.6% of cases, the file could not be found, so there was limited information available about the case details.

Table 2. Descriptive Statistics for Reasons SAKs were not Tested as Part of the Original Investigation (*N* = 483 SAKs).

Reason SAK was not originally tested	N	%
Closed Cases	400	82.8
Case charged without SAK, conviction	65	13.5
Case charged without SAK, no conviction	16	3.3
Case sent to prosecutor without SAK, prosecutor declined	183	37.9
Consent case	168	91.8
Stranger or family member	15	8.2
Case exceptionally cleared	91	18.8
Case unfounded	45	9.3
Open/Inactive Cases	83	17.2
Unknown, stranger/family member perpetrator and no credibility concerns	29	6.0
Victim did not want an investigation or stopped engaging in investigation	23	4.8
Victim credibility or mental health concerns	11	2.3
Consent case	11	2.3
Report did not include penetrative CSC	6	1.2
Unknown, original case file could not be located	3	0.6

How did the case review team decide which previously untested SAKs to submit for testing?

After further review of the 483 SAKs by the CRT, 406 SAKs were sent for testing and the remaining 77 SAKs were not sent for testing (See Table 3). Two independent researchers examined the CRT's notes to determine why these 77 SAKs were not sent for testing. The majority (71.4%) of kits weren't tested because there was a suspect that had already been charged (and most often convicted). In less than a quarter of cases (23.4%), the CRT indicated that the cases had been unfounded and the "SAK does not need testing," and in 5.2% of cases (n = 4), the case had been exceptionally cleared (See Table 3). Among the 4 cases that were exceptionally cleared: in 1 case the CRT indicated that the case had been "exceptionally

cleared," and the "SAK does not need testing"; in the other 3 cases, the CRT indicated that the victim did not want to pursue an investigation (e.g., "victim was adamant she did not want to file a report", "victim did not want to pursue charges") and the "SAK does not need testing."

Table 3. Descriptive Statistics for Reasons the Case Review Team did not Submit SAKs for Testing as Part of the MN SAKI Project (*n* = 77).

Reason CRT did not submit SAK for testing	N	%
Case charged without SAK, conviction or no conviction	55	71.4
Case unfounded	18	23.4
Case exceptionally cleared	4	5.2

What are the differences between MN SAKI cases with a tested versus untested SAK?

Next, we examined the bivariate differences between MN SAKI cases with SAKs that the CRT submitted to the BCA or an alternative laboratory for testing (n = 406) and cases with SAKs that the CRT did not submit for testing (n = 77) (See Table 4).

Case Characteristics

Starting with case characteristics, untested kits were more likely to have at least one witness than tested kits (χ^2 = 7.63, p = .007) and had significantly higher numbers of witnesses (t = -2.72, p = .007). There were significant differences in tested and untested kits regarding the location of the incident (χ^2 = 10.15, p = .006) — with fewer unsubmitted SAKs associated with public locations (z = -2.5) than expected by chance. There were also significant differences in tested and untested kits regarding victim-perpetrator relationship (for perpetrator 1) (χ^2 = 6.44, p = .04), with cases associated with untested kits having fewer cases involving strangers (z = -2.1, p = .01) than expected by chance. Perpetrators in cases associated with tested kits were also more likely to have ejaculated (χ^2 = 4.59, p = .03) or to have used force (χ^2 = 4.85, p = .03); perpetrators in cases associate with an untested kit were more likely to have used coercion (χ^2 = 4.47, p = .03).

Further, cases associated with tested kits were less likely to have an identified suspect (χ^2 = 8.34, p = .004) or a confession from the suspect (χ^2 = 34.32, p < .001) and less likely to have had charges filed by the prosecutor (χ^2 = 144.17, p < .001). Likewise, there were significant differences between cases associated with tested and untested kits regarding final case status (χ^2 = 222.68, p < .001): more cases associated with an untested kit were charged by the prosecutor (z = 11.2) or unfounded (z = 3.7) than expected by chance; fewer cases associated with an untested kit had charges declined (z = -5.2) or exceptionally cleared (z = -2.8) than expected by chance; fewer cases with tested kits were charged (z = - 4.9) and more had charges declined (z = 2.3) than expected by chance. Finally, of cases that were charged, cases associated with untested kits were more likely to result in a conviction than cases associated with tested kits (χ^2 = 29.95, p <.001).

Cases associated with tested versus untested kits were not significantly different regarding time between the incident and report, whether the incident occurred at multiple locations, whether there were multiple perpetrators, the number of perpetrators, whether the perpetrator used a condom, whether the perpetrator used or threaten a weapon, the type of weapon used or threatened, or whether the perpetrator threatened to use force. Further, cases associated with tested versus untested kits were not significantly different regarding whether the victim was injured, kidnapped, held captive, or strangled, or whether at least one suspect was interviewed.

Victim Characteristics

Regarding victim characteristics, victims associated with untested kits were significantly younger on average than victims associated with tested kits (t = 4.13, p < .001). Likewise, cases associated with untested kits were more likely to involve a minor victim (χ^2 = 43.39, p < .001). In comparison, cases associated with tested kits were more likely than cases associated with untested kits to involve victim credibility concerns (χ^2 = 8.45, p = .004). Cases associated with

tested kits tested versus untested kits were significantly different regarding victim participation in the investigation ($\chi^2 = 9.49$, $p = .009$) with cases associated with untested kits involving fewer victims who changed their mind about participating in the investigation than expected by chance ($z = - 2.1$). Cases associated with untested kits had fewer victims who reported consuming alcohol ($\chi^2 = 20.56$, $p < .001$) or drugs ($\chi^2 = 6.68$, $p = .01$) prior to the incident than cases associated with tested kits. Cases associated with tested versus untested kits were not significantly different regarding victim sex, victim race/ethnicity, whether the victim provided a statement to law enforcement, whether the victim loss consciousness during the incident, whether the victim had consensual sex (< 72 hours) prior to the incident, or whether the victim had a mental health or disability diagnosis.

Suspect Characteristics

Finally, cases associated with tested versus untested kits were compared on suspect characteristics. Cases associated with tested kits involved first suspects who were older on average ($t = 2.58$, p = .006) and were more likely to have a suspect that consumed alcohol ($\chi^2 = 8.23$, $p = .004$) and/or drugs prior to the assault ($\chi^2 = 3.87$, $p = .049$). Cases were not significantly different regarding the first suspect's sex or race/ethnicity.

Table 4. Descriptives and Bivariate Tests for Characteristics of Cases associated with SAKs Case Review Teams (*N* = 484) Decided to Test (*n* = 407) or Not Test (*n* = 77) SAKs.

Variable	*M* (*SD*)/% Total (*N* = 484)	Tested (*n* = 407)	Not Tested (*n* = 77)	t/χ^2 (*p*) [5]
Offense year [2]				-
1985 – 1989	0.4	0.5	0.0	
1990 – 1994	0.0	0.0	0.0	
1995 – 1999	1.9	2.0	1.3	
2000 – 2004	21.7	19.2	35.1	
2005 – 2009	34.9	35.1	33.8	
2010 – 2015	41.1	43.2	29.9	
Time between Incident and Report (Days)	*M* = 0.13; *SD* = 0.63 Range (0-10)	*M* = 0.12; *SD* = 0.65 Range (0-10)	*M* = 0.14; *SD* = 0.53 Range (0-3)	-0.25 (.81)
Witnesses Identified				7.63 (.006)
No	33.1	35.6	19.5	
Yes	66.9	64.4	80.5	
Number of witnesses	*M* = 1.43; *SD* = 1.50 Range (0-8)	*M* = 1.35; *SD* = 1.47 Range (0-8)	*M* = 1.86; *SD* = 1.59 Range (0-7)	-2.72 (.007)
Location of incident				10.15 (.006)
Private location	70.9	68.1	85.7	
Semiprivate location	7.2	7.6	5.2	
Public location	16.3	18.4	5.2	
Multiple locations [2]				-
No	93.6	93.9	92.2	
Yes	5.6	5.4	6.5	
Multiple alleged perpetrators				1.40 (.24)
No	85.6	84.5	90.9	
Yes	11.6	12.3	7.8	
Number of alleged perpetrators	*M* = 1.18; *SD* = 0.60 Range (1-5)	*M* = 1.19; *SD* = 0.60 Range (1-5)	*M* = 1.13; *SD* = 0.55 Range (1-5)	0.82 (.41)

Victim-perpetrator relationship (Perpetrator 1)				6.44 (.04)
Stranger	18.8	20.6	9.1	
Other known	53.5	51.6	63.6	
Romantic partner	22.7	22.1	26.0	
Perpetrator used a condom				0.13 (.71)
No	58.5	58.2	59.7	
Yes	10.1	9.8	11.7	
Perpetrator ejaculated				4.59 (.03)
No	16.9	15.2	26.0	
Yes	29.8	30.7	24.7	
Perpetrator used weapon [2]				-
No	89.9	89.8	4.8	
Yes	4.8	4.9	3.9	
Type of weapon used (n = 23) [2, 3]				-
Gun	21.7	20.0	33.3	
Knife	56.5	60.0	33.3	
Other weapon	21.7	20.0	33.3	
Perpetrator threatened weapon [2]				-
No	89.3	88.5	93.5	
Yes	5.4	5.4	5.2	
Type of weapon threatened (n = 26) [2, 3]				-
Gun	30.8	27.3	50.0	
Knife	53.8	59.1	25.0	
Other weapon	15.4	13.6	25.0	
Perpetrator used force				4.85 (.03)
No	39.3	36.6	53.2	
Yes	49.0	50.4	41.6	
Perpetrator threatened force				.46 (.50)
No	80.4	78.9	88.3	
Yes	7.9	8.1	6.5	
Perpetrator used coercion (e.g., pressured victim to comply)				4.47 (.03)

No	80.2	80.6	77.9	
Yes	11.6	10.1	19.5	
Victim injured				2.66 (.06)
No	63.2	61.7	71.4	
Yes	33.9	35.4	26.0	
Incident involved kidnapping				1.44 (.23)
No	93.2	93.4	92.2	
Yes	5.0	4.4	7.8	
Incident involved captivity				0.78 (.37)
No	92.1	91.4	96.1	
Yes	6.0	6.4	3.9	
Incident involved strangulation				1.35 (.24)
No	92.1	90.9	97.4	
Yes	3.0	5.7	2.6	
Suspect/s identified				8.34 (.004)
No	21.5	23.8	9.1	
Yes	78.5	76.2	90.9	
Number of identified suspects	*M* = 0.84; *SD* = 0.51 Range (0-3)	*M* = 0.83; *SD* = 0.54 Range (0-3)	*M* = 0.94; *SD* = 0.34 Range (0-2)	-2.33 (.021)
Suspect interviewed (*n* = 380) [3]				0.55 (.46)
No	34.5	33.5	38.6	
Yes	64.7	65.4	61.4	
Suspect confessed (*n* = 246) [3]				34.32 (<.001)
No	87.4	93.1	60.5	
Yes	12.6	6.9	39.5	
Case forwarded to prosecutor (*n* = 380) [3]				3.71 (.05)
No	27.9	30.0	18.6	
Yes	72.1	70.0	81.4	
Prosecutor filed charges (*n* = 274) [3]				144.17 (<.001)
No	69.0	86.2	3.5	
Yes	31.0	13.8	96.5	

Current/Final Case Status				222.68 (< .001)
Prosecution Declined	37.8	44.7	1.3	
Prosecution Charged	17.6	7.3	71.4	
Exceptionally Cleared	18.9	21.3	5.2	
Unfounded	9.3	6.8	22.1	
Open (Active or Inactive Investigation)	16.1	19.2	0.0	
If charged, suspect convicted (n = 84) [3]				29.95 (<.001)
No	21.4	53.3	3.6	
Yes	78.6	43.3	96.4	
Victim Characteristics				
Victim sex				2.79 (.09)
Female	97.5	98.0	94.8	
Male	2.5	2.0	5.2	
Victim age at time of incident	M = 24.29; SD = 10.84 Range (2-82)	M = 25.19; SD = 10.56 Range (2-82)	M = 19.51; SD = 11.10 Range (3-67)	4.13 (<.001)
Victim Minor				43.39 (<.001)
No	70.7	76.7	39.0	
Yes	28.9	23.1	59.7	
Victim race/ethnicity				1.45 (.48)
White/Caucasian	74.4	75.9	66.2	
Black/African American	6.6	6.1	9.1	
Another race	6.2	6.1	6.5	
Victim provided statement to law enforcement				1.93 (.16)
No	6.6	5.9	10.4	
Yes	91.3	91.6	89.6	
Victim participated in investigation				9.49 (.009)
No	14.7	15.5	10.4	
Yes	57.0	54.8	68.8	
Changed their mind	20.7	22.9	9.1	

Victim credibility				8.45 (.004)
No	74.6	72.0	88.3	
Yes	24.6	27.0	11.7	
Victim loss of consciousness				2.34 (.13)
No	62.8	61.2	71.4	
Yes	32.9	34.2	26.0	
Victim had consensual partner				0.31 (.58)
No	82.0	82.1	81.8	
Yes	11.2	11.5	9.1	
Victim mental health or disability diagnosis				1.16 (.28)
No	75.8	74.7	81.8	
Yes	22.5	23.3	18.2	
Victim consumed alcohol prior to assault				20.56 (<.001)
No	45.5	40.8	70.1	
Yes	47.5	51.6	26.0	
Victim consumed drugs prior to assault				6.68 (.01)
No	71.3	68.3	87.0	
Yes	18.4	51.6	9.1	
Suspect Characteristics				
Suspect Sex (Suspect 1) (n = 380) [3]				0.68 (.41)
Female	0.8	1.0	0.0	
Male	99.2	99.0	90.9	
Suspect race/ethnicity (Suspect 1)				
White/Caucasian	57.9	59.2	46.8	0.23 (.89)
Black/African American	16.1	16.7	13.0	
Another	9.5	9.3	9.1	
Suspect age at time of incident (Suspect 1)	M = 28.87; SD = 11.82 Range (11-74)	M = 29.64; SD = 11.58 Range (11-65)	M = 25.32; SD = 12.36 Range (12-74)	2.58 (.006)
Suspect consumed alcohol prior to assault				8.23 (.004)
No	41.1	37.6	50.6	
Yes	42.4	46.9	27.3	
Suspect consumed drugs prior to assault				3.87 (.049)

No	66.1	63.7	68.8
Yes	12.1	13.5	5.2

Table Notes.

1. Percentages may not add up to 100% due to unknown/missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).
2. Bivariate analyses were not computed for comparisons due to small cell sizes ($n < 5$).
3. Conditional percentage computed based on subsample in parentheses.
4. Alpha is set at $p < .05$ for all analyses.

What are the characteristics of cases with a tested SAK from the same time period as MN SAKI cases?

The second research question under Goal 1 (RQ1b) asked, "What are the causes of untested SAKs in Anoka County, MN?" For this research question, we gathered data on the population of cases of criminal sexual conduct (CSC) from Anoka County, MN during a similar period as the cases included in the MN SAKI project *but with a SAK that was tested during the initial investigation* (n = 173). These 173 cases comprise the control group which we compare to the MN SAKI cases (i.e., treatment group). The control group was constrained to cases from 2008 to 2015 because the BCA files prior to 2008 were not digitized.

Case Characteristics

Descriptive statistics for the control group are presented in Table 5. Most incidents in the control group occurred from 2014-2015 (34.1%); followed by 2012-2013 (27.2%), 2010-2011 (18.5%), and 2008-2009 (20.2%). On average, the time between the incident and the report to law enforcement was less than a single day (M = 0.59; SD = 1.47) and in most cases (65.9%), at least one witness was identified by law enforcement. On average, there were 1.53 witnesses per case (SD = 1.72), with as many as 10 witnesses. Regarding location of the incident, incidents primarily occurred in either the victim's (28.3%), suspect's (26.6%), or a third party's (17.3%) residence. Fewer incidents occurred outdoors (8.1%), in a vehicle (7.5%), other locations (4.6%), or in a hotel (3.5%); 1.7% of incidents occurred in multiple locations.

In most cases, the victim reported one perpetrator was involved in the incident (84.4%); however, incidents involved up to 4 perpetrators (M = 1.16, SD = 0.48). The most common victim-perpetrator relationship was acquaintances/known by sight (26.6%) and friends (23.1%) followed by strangers (20.8%), family (13.3%), and romantic partners (current/former, 11.0%). There were 19 victims who alleged at least two perpetrators were involved in the incident. In

these instances, the second perpetrator was most often a stranger (45.0%) or acquaintances (40.0%), followed by a friend (10.0%). In instances where there were three or more perpetrators, the third perpetrator was identified as either a stranger (57.1%) or an acquaintance (28.6%). Victims reported the perpetrator used a condom in 8.7% of incidents and ejaculated in 23.1% of incidents; however, 42.8% and 63.0% of data was missing on these variables, respectively.

Use or threats of a weapon were rare. Weapon use occurred in 4.0% of cases, with guns being the most common weapon used (57.1%), knives were used in 14.3% of incidents and other weapons in 28.6% of incidents. Threats of a weapon occurred in 5.2% of cases, and again, guns were most common (55.6%), then knives (33.3%), followed by other weapons (11.1%). Compared to weapon use/threats, it was more common for a perpetrator to use force (46.8%) or to threaten to use force (15.6%) or to use coercion (used in 8.7% of cases). Almost 47% of victim-survivors sustained injuries. In 8.7% of incidents, the perpetrator kidnapped the victim; 5.8% of incidents involved the perpetrator holding the victim captive (for more time than it took to complete the assault); and 4.6% of incidents included strangulation.

Law enforcement identified at least one suspect in most cases (82.1%). On average, law enforcement identified 0.88 suspects (SD = 0.49), and as many as three were identified. Further, law enforcement was able to interview at least one suspect in 68.3% of cases, and 5.2% of interviewed suspects made a confession to law enforcement. Law enforcement forwarded 78.6% of cases with an identified suspect to the prosecution; prosecutors filed charges in 57.3% of these cases. More than 27% of all cases had a final case status of "prosecution declined," 24.3% of cases were open investigations (both active and inactive), 5.8% were exceptionally cleared or unfounded, respectively. Prosecutors filed charges in 36.4% of all cases, and 68.3% of these cases resulted in a conviction.

Victim Characteristics

Regarding victim characteristics in control group cases, most cases involved a female victim (95.4%). Victims ranged in age from 4-84 years old and were 25.74 years old on average (*SD* = 13.48); 37.6% of victims were minors (less than 18 years of age) at the time of incident. Most victims were White/Caucasian (68.2%); followed by Black/African American (11.0%), Hispanic (3.5%), Asian/Pacific Islander (2.9%), and American Indian/Alaskan Native (1.2%) and Another race (1.2%); victim race/ethnicity was missing for 12.1% of cases. Most victims (98.3%) provided a formal statement to law enforcement, but only 85.5% elected to continue with an investigation into the incident. In 3.5% of cases, the victim initially supported an investigation, but then changed their mind about wanting to proceed with an investigation (e.g., stopped answering law enforcement officer's phone calls, returning phone calls/letters).

In 24.3% of cases, crime incident reports included direct statements by criminal justice actors (e.g., law enforcement, prosecutors, judges) concerning the victim's credibility. In 41.0% of cases the victim reported losing consciousness during the incident and in 25.4% of cases the incident reported noted that the victim had a mental health or disability diagnosis. Less than 10% of victims reported having a consensual sex partner within 72-hours preceding the incident. Less than half of victims (46.8%) had consumed alcohol prior to the incident, which was most often supplied by a third-party and voluntarily consumed (48.8%); victims also voluntarily consumed self-supplied alcohol (25.0%), or alcohol provided by the perpetrator (21.3%). In a minority of cases, victims alleged that they were forced to consume alcohol (1.3%). About 20% of victims reported consuming drugs prior to the incident; 38.2% of victims believed to have unknowingly ingested drugs (e.g., drink spiking). In addition, victims reported voluntarily consuming drugs that were self-supplied (23.5%) or provided by the perpetrator (20.6%), or a third-party (11.8%). One victim (2.9%) alleged they were forced by the perpetrator to consume drugs.

Suspect Characteristics

In control cases with one or more identified suspects, the first suspects were all men (100%); all additional suspects (i.e., second, third) were most often men. Most first suspects were White/Caucasian (47.2%); followed by Black/African American (26.8%), Hispanic (6.3%), American Indian/Alaskan Native (2.1%), and Asian/Pacific Islander (1.4%). On average, first suspects were 30.06 years-old (*SD* = 10.88) but ranged in age from 13-61 years old. Among the cases with more than one suspect, second suspects were primarily Black/African American (40.0%) or White/Caucasian (20.0%) followed by Asian/Pacific Islander or Hispanic (10%, respectively); nearly 13% of data on race/ethnicity was missing. Second suspects were 32.64 years-old on average (*SD*=14.32) but ranged in age from 17-49 years of age. There was a single case with a third suspect who was Black/African American, male, and 16.91 years old. In 39.3% of cases, the victim alleged the suspect consumed alcohol prior to the assault, while in 8.7% of cases, the victim alleged the suspect consumed drugs prior to the assault; 11% of data on suspect alcohol use and 19.7% of data on suspect drug use was missing.

Table 5. Descriptive Statistics for Cases of Alleged Criminal Sexual Conduct with SAK Tested During Investigation (*N* = 173).

Case Characteristics	*N*	%
Offense year		
2008 – 2009	35	20.2
2010 – 2011	32	18.5
2012 – 2013	47	27.2
2014 – 2015	59	34.1
Time between Incident and Report (Days) [1]	*M* = 0.59; *SD* = 1.47 Range (0-10)	
Any witnesses identified		
No	59	34.1
Yes	114	65.9
Number of witnesses	*M* = 1.53; *SD* = 1.72 Range (0-10)	
Location of incident		
Vehicle	13	7.5
Outdoors	14	8.1

Victim's residence	49	28.3
Suspect's residence	46	26.6
Third-party residence	30	17.3
Hotel	6	3.5
Other	8	4.6
Multiple locations		
No	168	97.1
Yes	3	1.7
Multiple alleged perpetrators		
No	146	84.4
Yes	19	11.0
Number of alleged perpetrators	$M = 1.16$; $SD = 0.48$ Range (1-4)	
Victim-perpetrator relationship (Perpetrator 1)		
Stranger	36	20.8
Acquaintance (known by sight)	46	26.6
Friend	40	23.1
Family member	23	13.3
Romantic partner (current/former)	19	11.0
Victim-perpetrator relationship (Perpetrator 2) ($n = 20$)		
Stranger	9	45.0
Acquaintance (known by sight)	8	40.0
Friend	2	10.0
Victim-perpetrator relationship (Perpetrator 3) ($n = 7$)		
Stranger	4	57.1
Acquaintance (known by sight)	2	28.6
Perpetrator used a condom		
No	84	48.6
Yes	15	8.7
Perpetrator ejaculated		
No	24	13.9
Yes	40	23.1
Perpetrator used a weapon		
No	166	96.0
Yes	7	4.0
Type of weapon used ($n = 7$)		
Gun	4	57.1
Knife	1	14.3
Other weapon	2	28.6
Perpetrator threatened weapon		
No	164	94.8
Yes	9	5.2
Type of weapon threatened ($n = 9$)		
Gun	5	55.6
Knife	3	33.3
Other weapon	1	11.1
Perpetrator used force		

No	92	53.2
Yes	81	46.8
Perpetrator threatened force		
No	146	84.4
Yes	27	15.6
Perpetrator used coercion (e.g., pressured victim to comply)		
No	151	87.3
Yes	15	8.7
Victim injured		
No	91	52.6
Yes	81	46.8
Incident involved kidnapping		
No	158	91.3
Yes	15	8.7
Incident involved captivity		
No	163	94.2
Yes	10	5.8
Incident involved strangulation		
No	165	95.4
Yes	8	4.6
Suspect/s identified		
No	31	17.9
Yes	142	82.1
Number of identified suspects	$M = 0.88$; $SD = 0.49$ Range (0-3)	
Suspect interviewed ($n = 142$)		
No	43	30.3
Yes	97	68.3
Suspect confessed ($n = 97$)		
No	92	94.8
Yes	5	5.2
Case forwarded to prosecutor ($n = 140$)		
No	29	20.7
Yes	110	78.6
Prosecutor filed charges ($n = 110$)		
No	47	42.7
Yes	63	57.3
Current/Final Case Status		
Prosecution Declined	48	27.7
Prosecution Charged	63	36.4
Exceptionally Cleared	10	5.8
Unfounded	10	5.8
Open (Active or Inactive Investigation)	42	24.3
If charged, suspect convicted ($n = 63$)		
No	20	31.7
Yes	43	68.3

Victim Characteristics		
Victim sex		
Female	165	95.4
Male	8	4.6
Victim age at time of incident	*M* = 25.74; *SD* = 13.48 Range (4-84)	
Was the victim a minor at time of incident?		
No	104	60.1
Yes	65	37.6
Victim race/ethnicity		
White/Caucasian	118	68.2
Black/African American	19	11.0
American Indian/Alaskan Native	2	1.2
Asian/Pacific Islander	5	2.9
Hispanic, any race	6	3.5
Another race	2	1.2
Victim provided statement to law enforcement		
No	3	1.7
Yes	170	98.3
Victim participated in investigation		
No	18	10.4
Yes	148	85.5
Changed their mind	6	3.5
Victim credibility		
No	131	75.7
Yes	42	24.3
Victim loss of consciousness		
No	102	59.0
Yes	71	41.0
Consensual partner within last 72-hours		
No	134	77.5
Yes	17	9.8
Victim mental health or disability diagnosis		
No	129	74.6
Yes	44	25.4
Victim consumed alcohol prior to assault		
No	77	44.5
Yes	81	46.8
Who provided victim alcohol (*n* = 81)		
Self-supplied	20	25.0
Perpetrator supplied, but voluntarily consumed	17	21.3
Third-party/Unknown supplier, but voluntarily consumed	39	48.8
Victim alleged forced to consume alcohol	1	1.3
Victim consumed drugs prior to assault		
No	120	69.4
Yes	34	19.7

Who provided victim drugs (*n* = 34)		
Self-supplied	8	23.5
Perpetrator supplied, but voluntarily consumed	7	20.6
Third-party/Unknown supplier, but voluntarily consumed	4	11.8
Victim alleged unknowingly ingesting drug	13	38.2
Victim alleged forced to consume drug	1	2.9
Suspect Characteristics		
Suspect sex (Suspect 1) (*n* = 142)		
Female	0	0
Male	142	100.0
Suspect race/ethnicity (Suspect 1) (*n* = 142)		
White/Caucasian	67	47.2
Black/African American	38	26.8
American Indian/Alaskan Native	3	2.1
Asian/Pacific Islander	2	1.4
Hispanic, any race	9	6.3
Another race	1	0.7
Suspect age at time of incident (Suspect 1) (*n* = 142)	*M* = 30.06; *SD* = 10.88 Range (13-61)	
Suspect sex (Suspect 2) (*n* = 10)		
Female	1	10.0
Male	9	90.0
Suspect race/ethnicity (Suspect 2) (*n* = 10)		
White/Caucasian	2	20.0
Black/African American	4	40.0
Asian/Pacific Islander	1	10.0
Hispanic, any race	1	10.0
Suspect age at time of incident (Suspect 2) (*n* = 10)	*M* = 32.64; *SD* = 14.32 Range (17-49)	
Suspect sex (Suspect 3) (*n* = 1)		
Male	1	100.0
Suspect race/ethnicity (Suspect 3) (*n* = 1)		
Black/African American	1	100.0
Suspect age at time of incident (Suspect 3) (*n* = 1)	16.91 years old	
Suspect consumed alcohol prior to assault		
No	56	32.4
Yes	68	39.3
Suspect consumed drugs prior to assault		
No	94	54.3
Yes	15	8.7

Table Notes:

1. Percentages may not add up to 100% due to unknown/missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).
2. Conditional percentage computed based on subsample in parentheses.

What are the differences between MN SAKI cases and cases with a tested SAK from the same time period as MN SAKI cases?

Further, we examined bivariate differences between MN SAKI cases that the CRT submitted for testing (i.e., treatment group) (n = 406 SAKs, n = 407 victims) and CSC cases with SAKs tested as part of the initial investigation (i.e., control group) (n = 173) (See Table 6).

Case Characteristics

Starting with case characteristics, both treatment and control group cases were reported in less than one day on average; however, treatment group cases were reported more quickly on average than control group cases (i.e., 0.12 days on average versus 0.59 days on average) (t = 3.97, $p < .001$). There were also significant differences between treatment and control group cases regarding whether incidents occurred at multiple locations, (χ^2 = 3.94, p = .047), with a higher percentage of treatment group cases occurring at multiple locations than control group cases. Treatment and control group cases differed regarding victim-perpetrator relationship (for Perpetrator 1) (χ^2 = 10.85, p = .004), with fewer control group cases involving romantic partners than expected by chance (z = -2.4). Treatment group cases were also more likely to involve perpetrators who used force than control group cases (χ^2 = 5.76, p = .02), and control group cases were more likely to involve perpetrators who threatened to use force than treatment group cases (χ^2 = 4.55, p = .03). Treatment group cases were also less likely to involve victim injuries (χ^2 = 5.66, p = .02) or be forwarded to the prosecutor than control group cases (χ^2 = 4.05, p = .04) and, among cases forwarded to the prosecutor, treatment group cases were less likely to be charged than control group cases (χ^2 = 67.71, $p < .001$). Likewise, there were significant differences between the treatment and control groups regarding final case status (χ^2 = 91.92, $p < .001$): fewer treatment group cases were charged (z = -4.4) than expected by chance; fewer control group cases were declined (z = -2.5) or exceptionally cleared (z = -3.5) and more control group cases

were charged by the prosecutor ($z = 6.7$) than expected by chance.

Treatment and control group cases were not significantly different regarding whether there were witnesses or the number of witnesses, the location of the incident, whether there were multiple perpetrators, number of perpetrators, whether the perpetrator used a condom, whether the perpetrator ejaculated, whether the perpetrator used or threaten a weapon, or whether the perpetrator used coercion. Further, treatment and control group cases were not significantly different regarding whether the victim was kidnapped, held captive, or strangled, whether at least one suspect identified, the number of suspects identified, whether there was at least one suspect interviewed, and whether any suspects confessed.

Victim Characteristics

Regarding victim characteristics, treatment group cases were less likely than control group cases to involve a minor victim ($\chi^2 = 13.98$, $p < .001$), a victim who provided a statement to law enforcement ($\chi^2 = 4.96$, $p = .03$), or a victim who participated in the investigation ($\chi^2 = 45.24$, $p < .001$). More specifically, treatment group cases involved more victims who changed their mind about participating in the investigation ($z = 3.0$) and fewer victims who participated in the investigation ($z = -2.0$), while control group cases involved more victims who participated in the investigation ($z = 3.0$) and fewer victims who changed their mind about participating in the investigation ($z = -4.5$) than expected by chance. Treatment and control group cases were not significantly different regarding victim sex, victim race/ethnicity, victim credibility, whether the victim loss consciousness during the incident, whether the victim had consensual sex (< 72 hours) prior to the incident, or whether the victim had a mental health or disability, or whether the victim consumed alcohol or drugs prior to the assault.

Suspect Characteristics

Finally, treatment and control group cases were compared on suspect characteristics.

There were significant differences regarding first suspect's race/ethnicity ($\chi^2 = 7.64$, $p = .02$). There were no significant differences regarding first suspect's age or whether they consumed alcohol or drugs prior to the assault.

Table 6. Descriptive and Bivariate Analyses for Characteristics Comparing the Treatment and Control Group Cases (*N* = 580).

Variable	*M* (SD)/% Total Sample (*N* = 580) [1]	*M* (SD)/% Treatment Group (*n* = 407) [1]	*M* (SD)/% Control Group (*n* = 173)	t/χ^2 (*p*) [7]
Time between Incident and Report (Days)[2]	*M* = 0.26; *SD* = 0.99 Range (0-10)	*M* = 0.12; *SD* = 0.65 Range (0-10)	*M* = 0.59; *SD* = 1.47 Range (0-10)	3.97 (<.001)
Witnesses Identified				0.12 (.73)
No	35.2	35.6	34.1	
Yes	64.8	64.4	65.9	
Number of witnesses	*M* = 1.41; *SD* = 1.55 Range (0-10)	*M* = 1.35; *SD* = 1.47 Range (0-8)	*M* = 1.53; *SD* = 1.72 Range (0-10)	1.19 (.24)
Location of incident				1.21 (.54)
Private location	69.7	68.1	73.4	
Semiprivate location	7.1	7.6	5.8	
Public location	17.9	18.4	16.8	
Multiple locations				3.94 (.047)
No	94.8	94.6	97.1	
Yes	4.3	5.4	1.7	
Multiple alleged perpetrators				0.15 (.70)
No	84.5	87.3	84.4	
Yes	11.9	12.7	11.0	
Number of alleged perpetrators	*M* = 1.18; *SD* = 0.57 Range (1-5)	*M* = 1.19; *SD* = 0.60 Range (1-5)	*M* = 1.16; *SD* = 0.48 Range (1-4)	-0.67 (.50)
Victim-perpetrator relationship (Perpetrator 1) [3]				10.85 (.004)
Stranger	20.7	20.6	20.8	
Other known	55.0	51.6	63.0	
Romantic partner	18.8	22.1	11.0	
Perpetrator used a condom				0.03 (.86)
No	55.3	85.6	48.6	
Yes	9.5	14.4	8.7	

Perpetrator ejaculated				0.40 (.53)
No	14.8	33.2	13.9	
Yes	28.4	66.8	23.1	
Perpetrator used weapon				0.36 (.55)
No	91.0	94.8	96.0	
Yes	4.7	5.2	4.0	
Type of weapon used (n = 27) [6]				-
Gun	29.6	20.0	57.1	
Knife	48.1	60.0	14.3	
Other weapon	22.2	20.0	28.6	
Perpetrator threatened weapon				2.92 (.32)
No	90.3	94.2	94.8	
Yes	5.3	5.8	5.2	
Type of weapon threatened (n = 31) [6]				-
Gun	35.5	27.3	55.6	
Knife	51.6	59.1	33.3	
Other weapon	12.9	13.6	11.1	
Perpetrator used force				5.76 (.02)
No	41.6	42.1	53.2	
Yes	49.3	57.9	46.8	
Perpetrator threatened force				4.55 (.03)
No	80.5	90.7	84.4	
Yes	10.3	9.3	15.6	
Perpetrator used coercion (e.g., pressured victim to comply)				0.53 (.47)
No	82.6	88.9	87.3	
Yes	9.7	11.1	8.7	
Victim injured				5.66 (.02)
No	59.0	63.5	52.6	
Yes	38.8	36.5	46.8	
Incident involved kidnapping				3.18 (.05)
No	92.8	95.5	91.3	
Yes	5.7	4.5	8.7	

Incident involved captivity				0.12 (.73)
No	92.2	93.5	94.2	
Yes	6.2	6.5	5.8	
Incident involved strangulation				0.35 (.55)
No	92.2	94.1	95.4	
Yes	5.3	5.9	4.6	
Suspect/s identified (n = 452)				2.47 (.12)
No	22.1	23.8	17.9	
Yes	77.9	76.2	82.1	
Number of identified suspects	M = 0.84; SD = 0.53 Range (0-3)	M = 0.83; SD = 0.54 Range (0-3)	M = 0.88; SD = 0.49 Range (0-3)	1.23 (.22)
Suspect interviewed (n = 452)				0.44 (.51)
No	32.5	33.9	30.3	
Yes	66.4	66.1	68.3	
Suspect confessed (n = 452)				0.34 (.56)
No	93.7	93.1	94.8	
Yes	6.3	6.9	5.2	
Case forwarded to Prosecutor (n = 452)				4.05 (.04)
No	27.2	30.0	20.7	
Yes	72.8	70.0	78.6	
Prosecutor filed charges (n = 327)				67.71 (<.001)
No	71.6	86.2	42.7	
Yes	28.4	13.8	57.3	
Current/Final Case Status				91.92 (<.001)
Prosecution Declined	39.7	44.9	27.7	
Prosecution Charged	16.0	7.4	36.4	
Exceptionally Cleared	16.7	21.5	5.8	
Unfounded	6.6	6.9	5.8	
Open (Active or Inactive Investigation)	20.7	19.3	23.1	
If charged, suspect convicted (n = 93) [4]				4.58 (.03)
No	38.7	55.2	31.7	

Yes	60.2	44.8	68.3	
Victim Characteristics				
Victim sex [6]				-
Female	97.2	98.0	95.4	
Male	2.8	2.0	4.6	
Victim age at time of incident (n = 575)	M = 25.35; SD = 11.49 Range (2-84)	M = 25.19; SD = 10.56 Range (2-82)	M = 25.74; SD = 13.48 Range (4-84)	0.52 (.60)
Victim Minor				13.98 (<.001)
No	71.7	76.8	60.1	
Yes	27.4	23.2	37.6	
Victim race/ethnicity				5.9 (.05)
White/Caucasian	73.6	75.9	68.2	
Black/African American	7.6	6.1	11.0	
Another race	6.9	6.1	8.7	
Victim provided statement to law enforcement				4.96 (.03)
No	4.7	6.0	1.7	
Yes	93.6	94.0	98.3	
Victim cooperated with investigation				45.24 (<.001)
No	14.0	16.6	10.4	
Yes	64.0	58.8	85.5	
Changed their mind	17.1	24.5	3.5	
Victim credibility				0.57 (.45)
No	73.1	72.7	75.7	
Yes	26.2	27.3	24.3	
Victim loss of consciousness				1.39 (.24)
No	60.5	64.2	59.0	
Yes	36.2	35.8	41.0	
Consensual partner within last 72-hours				0.12 (.73)
No	80.7	87.7	77.5	
Yes	11.0	12.3	9.8	

Victim mental health or disability diagnosis				0.17 (.67)
No	74.7	76.2	74.6	
Yes	24.0	23.8	25.4	
Victim consumed alcohol prior to assault				0.94 (.33)
No	41.9	44.1	44.5	
Yes	50.2	55.9	46.8	
Victim consumed drugs prior to assault				0.03 (.86)
No	68.6	77.2	69.4	
Yes	20.0	22.8	19.7	
Suspect Characteristics				
Suspect Sex (Suspect 1) (n = 452) [3,5,6]				-
Female	0.7	1.0	-	
Male	99.3	99.0	100.0	
Suspect race/ethnicity (Suspect 1) (n = 452) [3,5]				7.64 (.02)
White/Caucasian	43.3	45.2	38.7	
Black/African American	15.5	12.8	22.0	
Another race	7.6	7.1	8.7	
Suspect age at time of incident (Suspect 1) [3]	M = 29.77; SD = 11.35 Range (11-65)	M = 29.64; SD = 11.58 Range (11-65)	M = 30.06; SD = 10.88 Range (13-61)	0.36 (.72)
Suspect consumed alcohol prior to assault (n = 452)				0.02 (.90)
No	38.3	44.5	32.4	
Yes	47.3	55.5	39.3	
Suspect consumed drugs prior to assault (n = 452)				0.77 (.38)
No	64.6	82.5	54.3	
Yes	12.6	17.5	8.7	

Table Notes.

1. Cases excluded from presented analyses include the 77 cases from the treatment group the case review team decided not to submit for further testing (see Table 3). The presented sample includes the remaining 407 treatment group cases and the 173 control group cases.

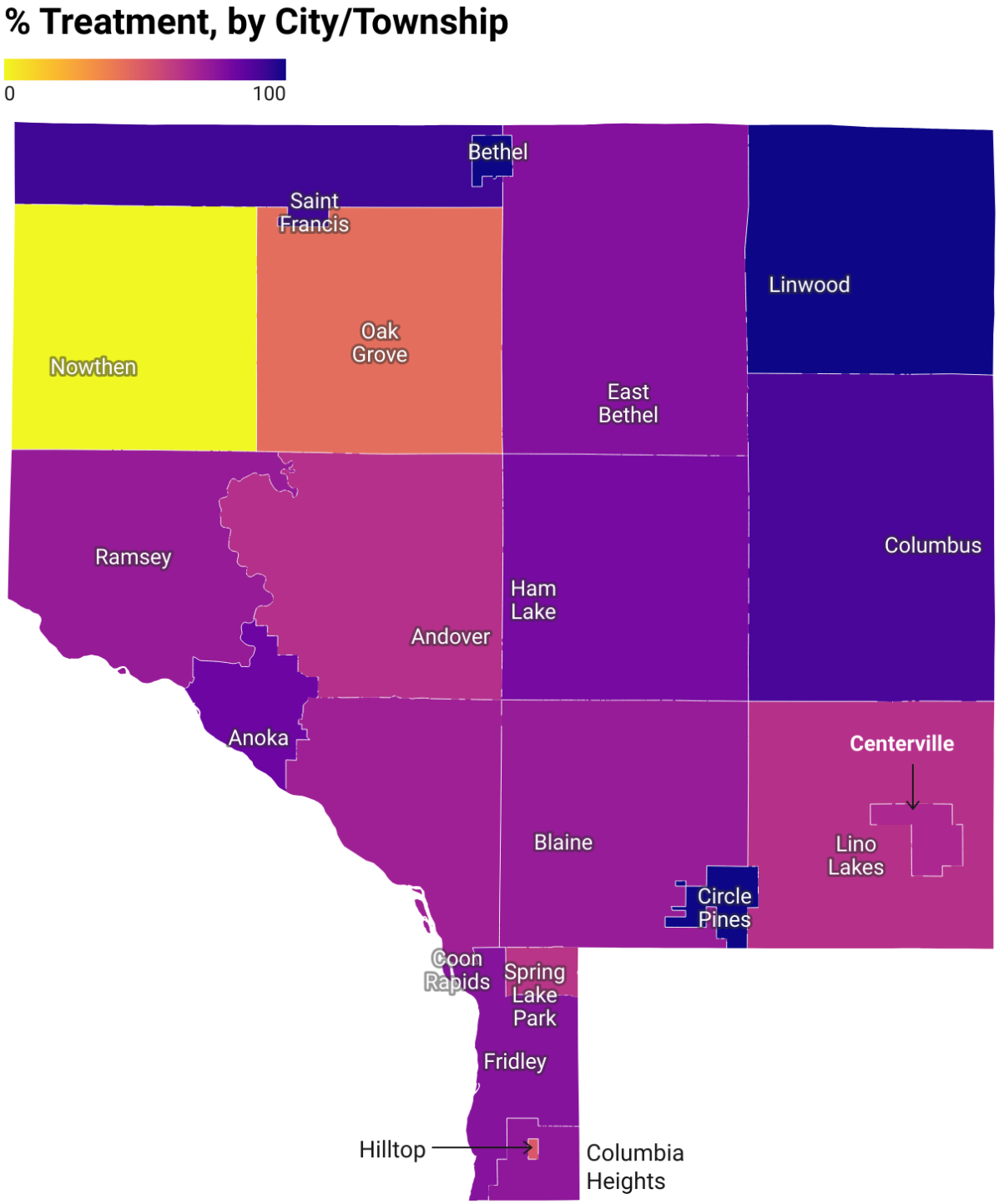
2. Percentages may not add up to 100% due to unknown/missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.). Conditional percentages reflect the subsample n provided with each variable.

3. Analyses only include information up to the first perpetrator/suspect (i.e., Victim-perpetrator relationship (Perpetrator 1)) due to small n-values.

4. An additional case was removed for these specific analyses because the case has not been fully adjudicated.
5. Due to small n-values, victim and suspect race/ethnicity was collapsed to White/Caucasian, Black/African American, Other.
6. Bivariate analyses were not computed for comparisons due to cell sizes $n < 5$.
7. Alpha is set at $p < .05$

We also examined the distribution of SAKI cases (i.e., percentage of cases in the treatment group vs. control group) by incident location across the cities and townships in Anoka County, MN to determine which locations were most impacted by the MN SAKI project. In other words, we were interested to know which cities/townships had the most previously untested SAKs (relative to tested SAKs in the control group) that were tested due to the MN SAKI project. We obtained "community" and "address points" shapefiles from the Anoka County, MN government website and matched the incident addresses from the casefiles to the addresses found in the address points shapefile (e.g., addresses had to be an exact match or precise enough to locate within a city/township). The match rate was 97% (5 addresses could not be matched to a city/township and 14 addresses matched to cities/townships outside of Anoka, e.g., Minneapolis). Then, using data visualization software (i.e., Datawrapper), we created a choropleth map that depicts the cities and townships in Anoka County, MN and uses darker shades to represent a larger percentage of SAKI cases (again, relative to control group cases). Cities and townships had from 0 to 100% SAKI cases (M = 74% SAKI cases, SD = 11%) with most locations in the 70-80% SAKI case range. Outliers included Nowthen with zero SAKI cases (n = 4) and Linwood (n = 3), Circle Pines (n = 10), Lexington (n = 8 cases), and Bethel (n = 3), which had 100% SAKI cases, respectively. Taken together, the map shows that rural jurisdictions were most impacted by the MN SAKI project. This is likely due to resource constraints that results in decisions not to test SAKs.

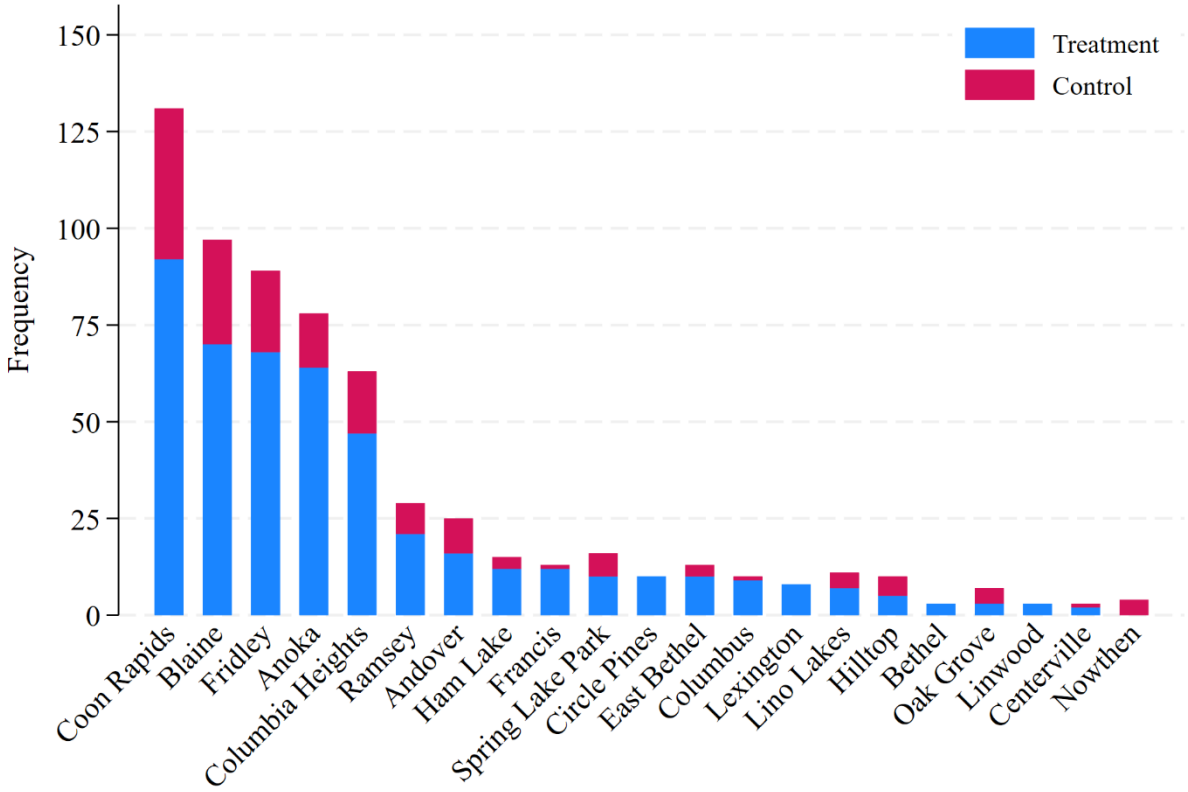
Figure 2. Percent of Treatment Group Cases vs. Control group Cases in each Anoka County City/Township (*n* = 638).



NOTE: 638 of 657 addresses are included here (5 addresses were blank and 14 matched to cities/townships outside of Anoka County, e.g., Minneapolis).

Created with Datawrapper

Figure 3. Frequency of Treatment Group Cases vs. Control group Cases in each Anoka County City/Township (*n* = 638).



Finally, we examined multivariate differences between the treatment and control groups. Specifically, we estimated a series of binary logistic regression models to examine which case, victim, and suspect factors predicted not testing a SAK during the original investigation (i.e., treatment group) compared to testing a SAK during the original investigation (i.e., control group). These models were restricted to cases with female victims and male perpetrators.

In model 1, we examined victim and case characteristics and whether a suspect was identified. Given that victim race was missing for 11.9% of treatment and control group cases, we computed two models: one excluding victim race and one including victim race. Findings from model 1 which excluded victim race, show that cases involving perpetrators who were strangers to the victim were significantly less likely to be in the treatment group than cases

involving perpetrators who were the victim's current or former romantic partners (see Table 7). Similarly, cases involving perpetrators who were known to the victim as an acquaintance, friend, or family member (i.e., "other known" perpetrator) were less likely to be in the treatment group than cases involving perpetrators who were the victim's current or former romantic partner. Cases that were reported less quickly or involved victim injuries were also significantly less likely to be in the treatment group compared to cases that were reported more quickly or did not involve victim injuries. Cases involving victims who did not want an investigation were significantly less likely to be in the treatment group than cases involving victims who wanted an investigation. Assault location, whether force was used or threatened, victim credibility, whether the victim became unconscious, victim mental health or disability diagnosis, and whether a suspect was identified was not significantly related to group membership.

Table 7. Binary Logistic Regression Comparing Victim and Case Characteristics for the Treatment and Control Group (*n* = 440).[1]

Variable	B	S.E.	OR	*p*
Stranger perpetrator	-1.48	.45	.23	<.001
Other known perpetrator	-.91	.32	.40	.01
Private location	-.60	.31	.55	.054
Semi-private location	-.09	.59	.91	.88
Perpetrator used/threaten force	.48	.26	1.61	.07
Time to victim report	-.48	.14	.62	<.001
Victim injuries	-.54	.24	.58	.02
Victim credibility concerns	.30	.26	1.35	.26
Victim became unconscious	-.07	.27	.93	.80
Victim wanted investigation	-1.28	.28	.28	<.001
Victim age (years)	-.28	.41	.99	.50
Victim mental health/disability diagnosis	-.01	.01	.76	.41
Suspect identified	-.04	.27	.96	.89
Constant	3.46	.71	31.96	<.001
- 2 Log likelihood = 490.33, Nagelkerke R^2 = .21				
χ^2 = 70.267, *df* = 13, < .001				

Table Notes:

1. Cases were excluded from the presented analyses for the following reasons: 77 cases were excluded from the treatment group because the CRT did not submit them for testing, two cases were excluded because our stakeholders indicated SAK testing may not have been available at time of report (in 1985 and 1989, respectively), 16 cases were excluded because they had a male victim, and among the cases with female victims, 1 case was excluded because it had a female perpetrator and 31 cases were excluded because the sex of the perpetrator was unknown (e.g., victim was unconscious). Consequently, the final sample used here before missing data is *n* = 530.
2. Reference categories include current/former romantic partner perpetrator and public location.

In model 2, we included victim race (Black or Another race compared to White). Findings show that all variables that were significant in model 1, were also significant in model 2 (see Table 8). In addition, cases involving victims who were Black were less likely to be in the treatment group compared to cases involving victims who were White.

Table 8. Binary Logistic Regression Comparing Victim and Case Characteristics for the Treatment and Control Group (*n* = 387).[1]

Variable	B	S.E.	OR	*p*
Stranger perpetrator	-1.73	.48	.18	<.001
Other known perpetrator	-1.05	.35	.35	.002
Private location	-.57	.33	.56	.08
Semiprivate location	-.12	.62	.89	.85
Perpetrator used/threaten force	.46	.28	1.59	.10
Time to victim report	-.44	.15	.64	.004
Victim injuries	-.55	.25	.58	.03
Victim credibility concerns	.36	.29	1.43	.22
Victim became unconscious	-.07	.29	.93	.81
Victim wanted investigation	-1.52	.31	.22	<.001
Victim mental health/disability diagnosis	-.02	.01	.98	.14
Victim age (years)	.13	.30	1.13	.68
Victim identifies as Black	-1.01	.43	.36	.02
Victim identifies an Another race	-.60	.41	.55	.14
Suspect identified	-.37	.44	.69	.40
Constant	4.10	.80	60.28	<.001
- 2 Log likelihood =422.16, Nagelkerke R^2 = .23				
χ^2 = 70.506, *df* = 15, < .001				

Table Notes:

1. Cases were excluded from the presented analyses for the following reasons: 77 cases were excluded from the treatment group because the CRT did not submit them for testing, two cases were excluded because our stakeholders indicated SAK testing may not have been available at time of report (1985 and 1989, respectively), 16 cases were excluded because they had a male victim, and among the cases with female victims, 1 case was excluded because it had a female perpetrator and 31 cases were excluded because the sex of the perpetrator was unknown (e.g., victim was unconscious). Consequently, the final sample used here before missing data is *n* = 530.
2. Reference categories include current/former romantic partner perpetrator, public location, and Victim identifies as White.

In model 3, we included victim, case, and suspect characteristics. Given that suspect characteristics are examined, cases without an identified suspect were excluded from the model. Findings from model 3 show that like in models 1 and 2, cases involving perpetrators who were strangers to the victim or who were known to the victim as an acquaintance, friend, or family member (i.e., "other known" perpetrator) were significantly less likely to be in the treatment group than cases involving perpetrators who were the victim's current or former romantic partners (see Table 9). Cases where the victim was assaulted in a private location were less likely to be in the treatment group than cases where the victim was assaulted in a public location. In addition, cases that were reported less quickly and cases involving victims who were injured were also significantly less likely to be in the treatment group than cases that were reported more quickly or cases involving victims who were not injured. Cases involving victims who did not want to participate in an investigation were significantly less likely to be in the treatment group than cases involving victims who did want to participate in an investigation. Further, cases involving victims who were Black were less likely to be in the treatment group compared to cases involving victims who were White. Once suspect age and race were included in the model, victim age was no longer significantly related to group membership. Finally, whether force was used or threatened, victim credibility, whether the victim became unconscious, victim mental health or disability diagnosis, and suspect age and race were not significantly related to group membership.

Table 9. Binary Logistic Regression Comparing Victim, Case, and Suspect Characteristics for the Treatment and Control Group (n = 280).[1]

Variable	B	S.E.	OR	p
Stranger perpetrator	-2.07	.64	.13	.001
Other known perpetrator	-1.23	.41	.29	.003
private location	-.98	.45	.38	.03
semiprivate location	-.44	.81	.64	.59
Perpetrator used/threaten force	.56	.34	1.75	.10
Time to victim report	-.88	.27	.41	.001
Victim injuries	-.49	.31	.61	.12
Victim credibility concerns	.46	.38	1.59	.23
Victim became unconscious	.15	.36	1.16	.67
Victim wanted investigation	-2.06	.42	.13	<.001
Victim mental health/disability diagnosis	.26	.40	1.29	.52
Victim age (years)	-.02	.02	.98	.31
Victim identifies as Black	-1.38	.63	.25	.03
Victim identifies an Another race	-.96	.55	.38	.08
Suspect age (years)	-.03	.02	.97	.07
Suspect identifies as Black	-.62	.40	.54	.12
Suspect identifies an Another race	.08	.49	1.08	.87
Constant	5.57	1.04	261.34	<.001
- 2 Log likelihood =285.39, Nagelkerke R^2 = .32				
χ^2 = 74.64, df = 17, < .001				

Table Notes:

1. Several types of cases were excluded from presented analyses: 77 cases were excluded from the treatment group because the CRT did not submit them for testing, two cases were excluded because our stakeholders indicated SAK testing may not have been available at time of report (1985 and 1989, respectively), 16 cases were excluded because they had a male victim, and among the cases with female victims, 1 case was excluded because it had a female perpetrator and 31 cases were excluded because the sex of the perpetrator was unknown (e.g., victim was unconscious). Consequently, the final sample used here before missing data is n = 530.
2. Reference categories include current/former romantic partner perpetrator, public location, Victim identifies as White, and Suspect identifies as White.

Summary and Conclusions

The analyses presented in Chapter 3 answered research questions RQ1a and RQ1b which sought to examine why SAKs were untested and understand differences regarding characteristics and correlates of cases associated with untested SAKs compared to cases with tested SAKs. To begin, we identified that all cases associated with an untested SAK in Anoka County had been assigned a detective and investigated. Further, in Anoka County, more than half of cases associated with an untested SAK had been forwarded to the prosecutor, 81 cases had been charged, and 65 convictions had been secured. Of the cases that were declined by prosecutors, the majority were consent cases (i.e., the suspect was known). At the same time, 9.3% of cases had been unfounded without testing the SAK, and 6.0% of cases involved an unknown/ stranger or a familial member perpetrator and the investigation was "inactive pending further leads," and yet the SAK had not been tested. Further, 2.3% of cases with an untested SAK had noted victim credibility or mental health concerns related to the sexual assault in the summary statement, again noting the investigation was "inactive pending further leads". These findings are markedly different than the Detroit and Cuyahoga County SAKI projects where most cases had not been investigated. Further, Campbell and Fehler-Cabral (2018) ethnographic research with Detroit's SAKI project, identified that victim credibility and victim cooperation were more influential in explaining why rape kits were not tested than practical reasons.

These findings are in line with a recent systematic review of 16 studies that examined the reasons SAKs were not tested in multiple jurisdictions. Specifically, Wallenborn's (2022) review revealed that 5 studies (31.3%) indicated SAKs were not tested because the suspect was known, while 3 studies (18.75%) mentioned victim credibility/or extralegal factors (e.g., rape myths, victim blaming) as a factor that prevented testing. Studies also included crime lab processing

times (n = 6 studies, 37.6%), crime lab resource constraints (n = 5 studies, 31.3%), or police resource constraints (n = 5 studies, 31.3%) as reasons kits were not tested. Finally, 6 studies (37.6%) indicated that SAKs were not tested because the victim did not consent to testing or did not want to move forward with the case.

Further, most studies examining practitioner decision-making in sexual assault cases focus on formal decisions to arrest and/or prosecute (Lapsey Jr., et al., 2023), yet fewer scholars have assessed more informal decisions such as the decision to present a case to prosecutors before making an arrest (Campbell et al., 2021; Frazier & Haney, 1996; Pattavina et al., 2021). Building on research regarding informal pre-arrest decisions, some studies have begun examining the case, victim, and suspect characteristics correlated with justice practitioners' decisions to submit and test SAKs (see Patterson & Campbell, 2012; Shaw & Campbell, 2013; Shaw et al., 2020; Valentine et al., 2019). Thus, the analyses presented in Chapter 3 add important information to this small area of research.

Overall, results from the analyses of data collected from the Anoka County Sheriff's Office are similar to findings from previous studies. For example, findings demonstrated that cases involving victims who sustained physical injuries were more likely to be tested. This finding mirrors Patterson and Campbell's (2012) analysis of 244 cases, which demonstrated that when a victim sustained physical injury, SAKs were 4.26 times more likely to be submitted and tested. Injuries to the victim have also been shown to increase police decisions to arrest and prosecutor decisions to accept charges in cases of sexual assault (see Lapsey Jr. et al., 2023). In the Anoka County sample, cases involving offenders who were unknown to the victim, and cases involving victims and offenders who were acquaintances were also more likely to be submitted in comparison to intimate partner cases. These findings match qualitative data gleaned from

interviews with sex crimes investigators, who indicated that SAK testing should be prioritized to identify unknown offenders via DNA (Menaker et al., 2017).

Victim participation also significantly affected decisions to submit and test SAKs. Specifically, victims who engaged with police investigators throughout the investigation were more likely to have their SAK submitted and tested. This finding is in line with studies that found cases are more likely to result in arrest and charges when a victim is perceived to be cooperating by police investigators (Bostaph et al., 2021; Campbell et al., 2021). In fact, recent meta-analyses determined that victim participation was the most important predictor of arrest (Lapsey Jr., et al., 2021) and prosecution (Lapsey Jr. et al., 2023) across studies.

Regarding victim race, the analyses presented here indicated that non-White victims were more likely to have their kit submitted and tested, in comparison to White victims. This finding mirrors results from Shaw and Campbell's (2013) analysis of SAK submission decisions in a sample of 393 cases, which found that the odds of SAK submission increased by more than 2 times when the victim was non-White. They suggest this could be because of the racial identity of the suspect, meaning that the suspect's race may have affected outcomes more than the victim's race in these decisions. However, we did not find a significant relationship between the suspect's race and SAK testing here.

Finally, prompt reporting was also associated with an increased likelihood of testing SAKs in the Anoka County sample. This may be because police investigators and/or prosecutors believed evidence would be available in these SAKs that could confirm victim reports or exonerate suspects. This finding is consistent with qualitative research on detectives' perceptions of which SAKs should be prioritized for testing. Specifically, interviews with a sample of 44 sex crimes investigators revealed that officers believed SAKs collected from victims who

immediately go to a hospital and complete the exam are one of the most important pieces of evidence for investigators (Menaker et al., 2017).

Taken together, these findings demonstrate that the decisions to submit (or not submit) cases in Anoka County were affected by correlates like those found in some other jurisdictions and decision points. These findings suggest two primary policy recommendations. First, it is important that all unrestricted SAKs (i.e., SAKs with permission to be tested by the victim; see Chapter 4) are submitted and tested. This mandatory submission policy can enhance justice for victims and increase the potential for serial offenders to be identified by uploading more DNA profiles to CODIS. Importantly, Anoka County Sherrif's Office instituted a policy regarding submitting all SAKs for testing shortly after the 2015 inventory, and since 2020, statewide legislation has mandated that all unrestricted SAKs be submitted for testing in Minnesota (see Chapter 4). Second, it is important that police officers likely to engage directly with sexual assault victims receive training on trauma informed interviewing and investigations to enhance victim engagement, promote well-being, and increase the likelihood offenders are held accountable for their actions (see Mourtgos et al., 2021). Recent studies of police sexual assault investigations training programs have demonstrated that such training programs can improve officer behavior in hypothetical (Campbell et al., 2022) and actual cases (Mourtgos et al., 2021). As noted in the next chapter of this report (Chapter 4), the MN SAKI project has made great strides in statewide training regarding a trauma-informed response to sexual assault and the development of an investigative guide. In addition, Anoka County Sherrif's Office made connections with advocacy over the course of the MN SAKI project.

Chapter 4: Build Capacity to Test SAKs and Process Cases After SAK Testing

Our second research question focused on the potential gaps that exist in the current response system to sexual assault in Anoka County, MN and statewide. To be clear, by "current" we mean prior to and during the MN SAKI project, a time when the MN SAKI MDT was focused on understanding and addressing statewide training needs, and multiple legislative changes unfolded. To begin, we examined the historical context of untested SAKs in Minnesota as well as the legislative and policy changes regarding sexual assault that were directly or indirectly related to the MN SAKI project.

What was the historical context, and the legislative and policy changes in response to sexual assault in Minnesota?

Since at least 2005 the BCA had worked informally to coordinate with local law enforcement agencies regarding untested SAKs (See BCA memo in Appendix A). In 2005, the BCA contacted many of the larger Minnesota law enforcement agencies (e.g., Minneapolis Police Department, St. Paul Police Department, Duluth Police Department, Rochester Police Department, among others) regarding any untested SAKs held by the agencies. According to the BCA, agencies reported that there were no untested SAKs that required testing (See BCA memo in Appendix A). However, in 2011, law enforcement agencies began identifying untested SAKs in their custody and sought out the BCA for assistance with testing. Due to the number of cases, from 2011 through 2015, the BCA developed submission plans with agencies requesting testing assistance: St. Paul Police Department, Minneapolis Police Department, and Duluth Police Department, for the submission and testing of over 359 untested SAKs from 1994 to 2013. Submission plans were necessary due to the volume of untested SAKs that needed testing compared to the BCA resources available for testing SAKs.

Then, as previously noted, in 2015 the Minnesota Legislature mandated that the BCA compile an inventory of untested SAKs held by all law enforcement agencies and forensic science laboratories across the state of Minnesota (i.e., SF 1081). In service to developing the inventory, the BCA surveyed all local law enforcement agencies and the state's four forensic laboratories regarding untested SAKs in their possession as of July 1, 2015. The survey requested the following information from each agency/lab: (1) a list of untested SAKs in the agency's/lab's possession, (2) the date of offense for each untested SAK, (3) the date of collection for each untested SAK, and (4) the reason the SAK was not submitted for testing: BCA provided seven options in a drop-down menu (i.e., anonymous report, incident currently under investigation, kit not relevant for prosecution: confession, kit not relevant for prosecution: consent, prosecution declined, victim elected not to participate further in the criminal justice process, and other). The BCA identified 3,482 untested SAKs from 171 agencies. There were also 157 untested SAKs at the BCA in the queue awaiting testing. In 2015, the Duluth Police Department was awarded a Bureau of Justice Assistance grant to fund submission of their untested SAKs to BCA for testing; additional BJA funds were awarded to Duluth in 2017 (City of Duluth Police Department SAKI, n.d.). Further, in 2017, the Minnesota Legislature introduced HF1877, which required prompt submission of newly collected rape kits and established a survivor's right to information about their SAK; however, this bill failed to pass the legislature.

Then, in 2018 the Minnesota Office of Justice Programs was awarded a $2 million, three-year SAKI grant from the BJA (i.e., MN SAKI project) to begin testing Minnesota agency SAKs using a tiered approach that prioritized agencies with the most sexual assault kits reported in the 2015 inventory. Funds supported testing SAKs (50% of funds) as well as sexual assault

investigations, protocol development, and victim advocacy (50% of funds). In 2018, the Minnesota Legislature also passed SF2863, which mandated that law enforcement officers collect unrestricted SAKs[1] from healthcare professionals within 10 days and submit the SAK for testing within 60 days; it also granted victim-survivors the right to notice regarding SAK testing status/results (i.e., whether a DNA profile was developed from the SAK) within 30 days and mandated that restricted SAKs[2] be stored for a minimum of 18 months (See MN Statute Ch. 160 S.F. No 2863, Sec 2). In 2019, the MN SAKI project received an additional $2 million from BJA to continue SAK testing, sexual assault investigations, and victim advocacy and Duluth received additional BJA funds to "improve the quality of responses to future reports of sexual assaults" (City of Duluth Police Department SAKI, n.d.). Also in 2019, the Minneapolis Police Department identified nearly 1,700 previously unidentified, untested SAKs, and in 2020, it received BJA funds to test these SAKs, investigate and prosecute cases, and re-engage victim-survivors (City of Minneapolis SAKI, n.d.). In 2020, Duluth was awarded additional BJA funds to collect lawfully owed DNA samples from identified offenders, test the samples and upload eligible DNA profiles into CODIS, and to investigate and prosecute cold case sexual assaults (City of Duluth Police Department SAKI, n.d.). The BCA was also awarded BJA funds to track and report [3] on SAKs.

Additionally, in 2020, the Minnesota Legislature passed HF2983, which eliminated language that previously allowed law enforcement agencies to hold back certain SAKs from testing, mandated BCA to store restricted kits for at least 30 months, mandated the

[1] An "unrestricted SAK" refers to a SAK that has an accompanying release form signed by the patient allowing law enforcement to submit the kit to a forensic laboratory.
[2] A "restricted SAK" refers to a SAK that does not have an accompanying release form signed by the patient authorizing law enforcement to submit the kit to a forensic laboratory or includes a form indicating that the SAK is restricted.
[3] "Tracking" refers to the monitoring and accounting of sexual assault kits through the course of their movement from collection through final disposition. "Reporting" refers to delivering a written report to the appropriate entity within the prescribed period and with the applicable data provided (Department of Justice, 2020).

superintendent of BCA to develop a uniform SAK consent form, and required the Commissioner of Public Safety to maintain a website database providing victim-survivors with information on the status of their kits (See MN Statutes 2020 section 299C.106, subd.3).

Per the mandate from HF2983, the BCA implemented the Minnesota Track-Kit system (i.e., Track-Kit is an off-the-shelf cloud solution from Invita Health; Minnesota Department of Public Safety, Office of Communications, 2022). The Track-Kit system allows victim-survivors access to information about the status of their SAK through a secure online portal (See Appendix H for victim-survivor brochure). According to the Minnesota Department of Public Safety, Office of Communications (2022),

> *Track-Kit uses a barcode system to update information about a kit's status and location in real time. The medical facility that collects the kit creates the record by scanning the kit's barcode into the system. Law enforcement updates the status when the kit is sent for testing to an accredited forensic laboratory in the state. The forensics lab updates the status again when it receives the kit and when testing is complete. At any time, a victim-survivor can use their unique login and password to see the status of their kit (para 3).*

The BCA deployed Track-Kit across the state region by region over a three-month period starting in April of 2022. All SAKs collected after Track-Kit was deployed in the respective region are entered in the new system. Then in 2023, HF2890 was signed into law, allocating funds to reduce turnaround times for SAK testing in Minnesota. According to this bill, as of July 1, 2024, forensic laboratories "must strive" for a 90-day testing timeline. Further, HF1279 also passed in 2023, shifting the costs of administering sexual assault exams from the county, city, and private hospitals to the state (See MN Session Laws, 2023 Ch. 52, article 5, section 46). The importance of this change was highlighted by MNCASA in that, "Minnesota has 87 counties" …and prior to the new law, "87 different methods for sexual assault exam billing" (MNCASA, para. 6, 2023). It was further noted that, "billing inconsistencies not only threaten the sustainability of medical forensic programs, but they can also prevent victims/survivors from

accessing much-needed medical care, particularly in rural areas" (MNCASA, para. 5, 2023).

Finally, as the current evaluation was closing in November 2023, the MN SAKI MDT was finalizing an investigative guide for cold case sexual assault investigations to "provide law enforcement with up-to-date procedures for SAK testing, processing, and investigation; increase clarity regarding recent state legislative changes and legal obligations; and model trauma responsive and victim/survivor-centered practices that law enforcement can use in their work" (p.2).

What were the training needs and what training was provided?

The MN SAKI team also collected data on training needs regarding the SAKI project. In August 2021, MNCASA developed and deployed a survey regarding training needs. MNCASA sent email invitations for the survey to their list of statewide contacts for TTA; the invitation asked respondents to forward the survey link to appropriate professional/s within their organization/jurisdiction (i.e., snowball sampling). Given the nature of the survey distribution, it is impossible to know how many people received the survey link or develop a response rate.

One-hundred and ten respondents (n = 110) completed the survey. Most respondents were in the Metro region (e.g., Minneapolis, St. Paul) (n = 50; 45.5%); however, all regions of the state were represented: Central (n = 11; 10.0%), Arrowhead (n = 9; 8.2%), Southeast (n = 9; 8.2%), West Central (n = 8; 7.3%), Northwest (n = 5; 4.5%), North Central (n = 4; 3.6%), East Central (n = 4; 3.6%), Southwest Central (n = 4; 3.6%), Northeast (n = 1; 0.9%), and Southwest (n = 1; 0.9%), two respondents (1.8%) were professionals who worked statewide and one respondent worked in Western Wisconsin (0.9%). Respondents included law enforcement officers (n = 65; 59.1%), advocates (n = 37; 33.6%), healthcare professionals (n = 4; 3.6%), prosecuting attorneys (n = 3; 2.7%), and one forensic scientist (0.9%). To begin, respondents

were asked how familiar they were with the statewide SAKI project (see Table 10). Most respondents from all professional categories indicated being “somewhat familiar” (44.5%) or “very familiar” (32.7%) with the SAKI project. The highest concentrations of unfamiliarity (“not familiar at all” or “somewhat familiar”) were reported by advocates (27.0%) and law enforcement officers (18.5%).

Table 10. Ratings of Current Familiarity with the Statewide Sexual Assault Kit Initiative Project by Profession (*N* = 110).

Profession	Respondents within the profession		Not at all familiar		Somewhat unfamiliar		Neutral/Not applicable		Somewhat familiar		Very familiar	
	N	%	*n*	%	*n*	%	*n*	%	*n*	%	*n*	%
Advocacy	37	33.6	3	8.1	7	18.9	1	2.7	15	40.5	11	29.7
Forensic Science	1	0.9	0	-	0	-	0	-	1	100.0	0	
Healthcare/Public health	4	3.6	0	-	0	-	0	-	2	50.0	2	50.0
Law Enforcement	65	59.1	4	6.2	8	12.3	2	3.1	29	44.6	22	33.8
Prosecution/Attorney	3	2.7	0	-	0	-	0	-	2	66.7	1	33.3
Totals	110	100.0	7	6.4	15	13.6	3	2.7	49	44.5	36	32.7

Next respondents were asked about which training topics would be beneficial to their organization/jurisdiction; topics were not mutually exclusive such that respondents could choose more than one training topic (see Table 11). There was wide variability across professions regarding training needs. As might be expected, 81.1% of advocates indicated that advocacy training would be beneficial; however, 43.2% and 16.2% of advocates, respectively, indicated that law enforcement training and lab personnel training would be beneficial to their organization/jurisdiction. Further, 66.2% of law enforcement respondents indicated that law enforcement training would be beneficial; however, 43.21% and 50.8% of law enforcement respondents, respectively, indicated that general SAKI information and opportunities to ask specific questions would be beneficial to their organization/jurisdiction.

Table 11. Topics that would be Most Beneficial for Your Organization/Jurisdiction/Community by Profession (*N* = 110).

Profession	Respondents within the profession		General Information on SAKI		Opportunities to ask specific questions		Advocacy training		LE training		Lab personnel training	
	N	%	*N*	%	*N*	%	*N*	%	*N*	%	*N*	%
Advocacy	37	33.6	20	54.1	22	59.5	30	81.1	16	43.2	6	16.2
Forensic Science	1	0.9	1	100.0	1	100.0	0	-	0	-	1	100.0
Healthcare/ Public health	4	3.6	2	50.0	4	100.0	2	50.0	0	-	1	25.0
Law Enforcement	65	59.1	28	43.1	33	50.8	12	18.5	43	66.2	7	10.8
Prosecution/Attorney	3	2.7	0	-	2	66.7	1	33.3	2	66.7	0	-
Total	110	100.0	51	46.4	62	56.4	45	40.9	61	55.5	15	13.6

Finally, respondents were asked about their preferred training modality; respondents could choose more than one preferred modality. The modality that was chosen most often was virtual, live trainings (70.0%); however, live, regional trainings (63.6%) and recorded webinars (57.3%) were also chosen by more than half of respondents as a preferred modality. Regarding responses by profession, advocates most preferred virtual, live trainings (89.2%) compared to 66.7% of prosecutors, 50.6% of law enforcement respondents, and 50.0% of healthcare professionals. In comparison, law enforcement respondents most preferred recorded webinars (60.3%) compared to 56.8% of advocates, 50.0% of heath care professionals and 33.3% of prosecutors. Regarding live, in person regional trainings, 66.7% of prosecutors preferred this type of training strategy compared to 64.9% of advocates, 58.6% of law enforcement respondents, and 50.0% of prosecutors.

Table 12. Training Methods that Would be Most Beneficial for Your Organization/Jurisdiction/Community by Profession (*N* = 110).

Profession	Respondents within the profession		Virtual, live trainings (i.e., Zoom)		Recorded webinars		Live, in person in your region		Live, in person at your individual agency	
	N	%	N	%	N	%	N	%	N	%
Advocacy	37	33.6	33	89.2	21	56.8	24	64.9	17	45.9
Forensic Science	1	0.9	1	100.0	1	100.0	1	100.0	0	-
Healthcare/ Public health	4	3.6	2	50.0	2	50.0	2	50.0	2	50.0
Law Enforcement	65	59.1	39	50.6	38	60.3	41	58.6	16	45.7
Prosecution/Attorney	3	2.7	2	66.7	1	33.3	2	66.7	0	-
Total	110	100.0	77	70.0	63	57.3	70	63.6	35	31.8

In response to the survey and the multiple changes in legislation detailed in the section above, the MN SAKI MDT held monthly office hours for advocates, law enforcement officers, and prosecuting attorneys statewide. MDT members also provided training on restricted and unrestricted SAKs, partially tested SAKs (i.e., SAKs that have been tested for the presence of body fluid only), and the Track-Kit system. In addition, in 2022, SAKI MDT members provided a training on sexual assault investigations, kit handling, and legislative changes for prosecutors, public defenders, and law enforcement officers. Training was provided in a variety of modalities including in person meetings, live, virtual sessions, and in-person/virtual hybrid sessions.

What are the MN SAKI Team's perspectives on gaps and improvements in response to sexual assault in Minnesota?

Finally, we interviewed MN SAKI MDT members about the historical and/or continued gaps in responding to sexual assault as well as ways in which the MN SAKI project has helped to improve the response. ***To begin, we asked MDT members about what "changes in the response to sexual assault (in Anoka County and statewide) they observed during the SAKI project".*** One of the law enforcement respondents noted, "the main change: We're testing all kits now. And it is state law now, but I mean…after our 2015 inventory, we looked at our own policies in house here and we started changing things before it was mandated most of our kits that we didn't test were for reasons… were legitimate reasons, they [i.e., philosophies and resources on testing] just changed over time. Now we just view them [SAKs] as not just the kit for this case... It's the bigger picture now". He went on to explain that "in house here [Anoka County Sherrif's Office] we've also **streamlined our whole collection and testing process**: where it used to be on each individual detective to go get a kit, and then submit it, now we've put in place that our lab personnel pick up the kit. And then, obviously with track kit, we know is there. The lab personnel are double checking every kit, if they're not getting you know, submission in a timely

manner, sending out a reminder email, and so we've got a lot more checks and balances than we did before."

The victim advocate noted that "statewide, SAKI pushed out lots of important things: awareness about cold cases, Track-Kit, trainings, funding for sexual assault, testing all the kits." She noted that being embedded in the Anoka County Sherrif's Office was a substantial positive change that occurred because of the MN SAKI project. She indicated that the SAKI project provided an opportunity for law enforcement officers to work directly with advocates. She noted that while she was met with "some barriers" (e.g., officers who were hesitant to have an advocate in interviews with victims), she felt that, overall, she had "built momentum around **victim centered practices and policies.**" She further explained that having the **embedded advocate** made it easier to collaborate, that some law enforcement officers would plan for her to accompany victims to interviews. They would say, "hey, I have this victim coming in – can you talk to her?" or they would be speaking with a victim, and the victim would be having a hard time so they would call her in. She also noted that the SAKI project had implications across all agencies represented on the MDT (i.e., county attorney's office, MNCASA, BCA, Alexandra House, and Anoka County Sherrif's Office) regarding **cross-teaching and cross-learning**. And, that it had "deepened relationships and brought folks together (e.g., via case review) for conversations about 'how could we have done better, differently (i.e., with the original report, original investigation)?'"

Regarding changes to the BCA, the forensic scientist highlighted the legislative changes that mandate that **every unrestricted SAK must be tested** (HF2983): "we have to test every kit now and so our staffing had to be increased…like more than doubled for scientists that are currently doing sexual assaults". She also noted that with the newest law (i.e., HF2890), "we

[forensic laboratories] also have to strive for a **90-day turnaround time**, which we're [BCA] actually pretty close to". As a result, the forensic scientist noted there were **substantial implications for forensic scientist training and BCA staffing**. She explained that "it takes so long to train DNA scientists and it takes about a year to complete all the training you need to do all the testing on sexual assault kits... I think we've gotten like 10 or 15 positions just from all these different statutes going into law for sexual assaults."

She further explained that because of the increase in volume of SAKs and short turn-around time, "about 60% of our scientists [BCA scientists] do CSCs [testing for criminal sexual assaults] and only CSCs right now. Which has been a huge change for us. We used to just have scientists doing all case types. We would just take the next violent crime on the list, so CSCs would be sprinkled in there, but now it has basically restructured how our laboratory scientists do case work".

In addition, the forensic scientist highlighted the impact(s) of the mandatory testing statute on SAK outcomes regarding **adding DNA profiles to CODIS and CODIS hits**. She confirmed that "it is helpful that all kits be submitted even if prosecution has been denied because a lot of these agencies said, 'oh, we never submitted this kit because we sent the whole case [to the prosecutor] and they were like, we'll never be able to charge that... Based on the story alone, not based on the DNA'. And…now we're uploading those kits to CODIS and we're getting hits, you know, to 3 other rapes, that's huge and we've had it happen. With not just SAKI but with other kits that are being submitted now that had, you know, quote, 'no chance to go to court' and now they're able to charge them because there's like 3 or 4 incidents".

Next, we asked about interagency collaboration. One law enforcement respondent noted that "I think it's very beneficial to have a MDT. [But] You need to have the right MDT

where…we're all working together as a team towards the goal. You need to pick your MDT properly. I don't think people need to come in just because they're interested". The victim advocate noted that "the collaborative approach of the MDT was helpful. She indicated that "law enforcement officers learned that other specialties can be useful…that they cannot do it in a vacuum…that they don't have to do it alone". Similarly, one of the law enforcement respondents noted that "We [law enforcement in Anoka County] think about advocacy more. I do anyway. I don't know about office wide, but I think about advocacy services more and pulling them in. Obviously, working with an advocate, having her right next to me was a benefit." A second law enforcement respondent echoed the progress on law enforcement-advocacy partnerships, "just following up on advocacy, I think that it is getting some more traction even in our patrol division, and in developing some additional protocols…I think it's in a better place than it was prior. For sure".

The forensic scientist echoed the value of the MDT, and the opportunity to create relationships with other agencies. She also highlighted that the **MDT was working on a statewide investigation booklet**. She explained that the booklet aims to provide "guidance for sexual assault investigations and SAK handling so that if a CSC happens to you in Duluth versus…a really small town, it should be investigated very similarly. It doesn't matter where you are or who's doing it [the investigation]".

In addition, we asked MDT members if they ***"would do anything differently regarding the MN SAKI project, if they were starting again with all the knowledge and experience, they had now"?*** The law enforcement respondents indicated that they wouldn't do anything differently, but one noted that he **was surprised that they did get more charges** from testing the kits and notifying victim-survivors. He noted, "I was surprised. The results of most of these. I

was really surprised at how many victims didn't want anything to do with it. I mean, I knew there'd be some, but it seems like the vast majority just said, 'you know, I've moved beyond that, it's in my past, I don't want to go back.' I thought we'd get more charges. I'm not unhappy with them [the results] as long as there is satisfaction by the victim. Whatever that is for them. That's fine, but it's just it was surprising for me." He went on to say that "as for our policies and procedures that we developed, no, I'm happy with the way they, they landed".

The forensic scientist noted that it would have **been helpful to have the investigation booklet earlier on in the SAKI process**, similar to the victim notification and case review protocols that were developed. She explained, "I think developing statewide investigative guidelines on how to investigate, how testing works, all that stuff right from the beginning, would have been helpful. I think a more in-depth one that brought in attorneys, investigators, advocates, and just said, like, 'what are you guys doing now? And do we all agree that this is the best practice' and having that booklet right away, like in the first year or two would have been very helpful".

Finally, we asked MDT members about ***next steps for the response to sexual assault in Anoka County and statewide.*** The law enforcement respondents explained that they [Anoka County Sherrif's Office] had received new BJA SAKI funds to **investigate cold case homicides and other violent crimes** due to their **probable connections to sexual assault**. One law enforcement respondent noted, "it'll be interesting to see what comes of it. I'm very excited…to dive in and see what evidence we have that can now be tested for DNA that couldn't be tested, you know, 20-30 years ago, and see what comes with it. I'm hoping that we get some positive results, and we can put some people in jail."

The forensic scientist also noted that the BCA had reallocated some of the BJA funding

to support the initiation of a statewide **lawfully owed DNA** project and reiterated plans for a **statewide investigatory booklet as well as associated training**. Regarding the guidelines/trainings she noted that the goal is to "have more standardization across the state" in the "investigation right from the beginning to the end". The victim advocate [who was leaving the jurisdiction since the current phase of the MN SAKI project was ending] noted that she was **hopeful that the collaborative approach from the SAKI project would continue** moving forward and noted that Anoka County Sherrif's Office was discussing the possibility of hiring a permanent advocate beyond the life of the MN SAKI project. Further, the victim advocate closed her interview by noting that "even if we (only) had one person participate (i.e., one victim) – it will have been worth it. From an advocacy perspective, what is success? It's hard to quantify. Did survivors feel better, did they get an acknowledgement? It's the difference that it made with a survivor – [in them knowing] 'hey were taking a look at things, we owe you an apology, we care about how you're doing now'". Similarly, one of the law enforcement respondents closed their interview by saying, "I think it's a worthwhile project. I guess, if you get to help one person, money well spent, right?"

Summary and Conclusions

In the past decade, the state of Minnesota has made substantial changes regarding the response to sexual assault, and in SAK testing and kit handling, in particular. Of note, at the time of writing this report, the BCA had finished testing all previously untested SAKs that needed to be tested – nearly 2,400 of the 3,500 SAKs identified in the 2015 inventory (i.e., case review teams determined that some previously untested SAKs did not need to be tested). Since 2015, Anoka County Sherrif's Office has submitted all new, unrestricted SAKs for testing, and since 2022, as mandated by state legislation all law enforcement agencies in Minnesota submit all

unrestricted SAKs for testing. As such, Minnesota is a "mandatory testing" state like Utah, Michigan, Kentucky, and others. In addition, Minnesota has allocated considerable one-time and continuous funding to support mandatory SAK testing. As noted by Mourtgos and colleagues (2021), mandatory testing policies in the absence of additional resources to ensure timely testing may have unintended, negative consequences. Without adequate funding, increased testing volume leads to longer wait times for forensic testing, and meanwhile, prosecutors wait to move forward on cases and victims become frustrated and disengage from the process. As a result, the anticipated increases in arrests and prosecution for sexual assault associated with mandatory SAK testing is not fully realized (Mourtgos et al., 2021).

In addition to changes in SAK testing and kit handling, multiple SAKI projects across major cities and counties in Minnesota (e.g., Duluth, Minneapolis, Anoka County) have led to reengagement with hundreds of victim-survivors and the opportunity for victim-survivors to make decisions about how their previously reported sexual assault will be handled moving forward. Best practices regarding trauma-informed care for survivors of sexual violence include supporting survivor "empowerment, voice, and choice" (U.S. Department of Health and Human Services Substance Abuse and Mental Health Services Administration, 2014, p.9). Interviews with the MN SAKI law enforcement and advocate respondents – as well as the policies regarding notifications (See Chapter 5) – highlight their commitment to survivor-led decision making. Further, Minnesota has also joined Utah, Washington, Indiana, and Wisconsin, among other states, in instituting a statewide tracking system for newly submitted SAKs. As noted by one of the law enforcement respondents interviewed here, this system has added new "checks and balances" to SAK submission and processing in Minnesota. Tack-Kit not only helps to ensure that all SAKs are submitted, but it also allows victims and investigators real time information

about where the SAK is in the testing process.

In addition to the considerable changes made in Minnesota regarding the response to sexual assault, the MN SAKI project has supported statewide training to educate stakeholders across the state on these changes. Training is vital to safeguarding the consistent application and enforcement of the numerous new mandates regarding SAK submission, testing, tracking, and victim's right to information on their SAK (i.e., Track-Kit). The MN SAKI MDT has also supported the development of a statewide investigative guide.

Taken together, Minnesota has instituted sweeping changes to the statewide response to sexual assault, and these changes have been incremental and consistent over the past decade. And, at the time of writing this report, additional work is in progress: Anoka County Sherrif's Department had received new SAKI funding from BJA to investigate cold case homicides, and the BCA had received two additional SAKI grants from BJA to continue work on tracking and reporting SAKs and to obtain lawfully owed DNA. Given the number of CODIS hits to known offenders across SAKI projects – 74 hits to known offenders were identified from the Anoka County SAKs alone (See Chapter 6) – continuing to populate CODIS with lawfully owed DNA from known offenders will result in the identification of serial sex offenders as well as the identification of previously unknown sexual assault assailants who had been convicted for other types of crime.

Chapter 5: Strengthen Victim Services

Our third research question (RQ3) considered the process of notifying victim-survivors. We measured efforts by advocates that are not typically captured by traditional measures of "success" in criminal justice cases (e.g., arrests, citations): We focused on the process of locating victims (e.g., ability to locate, effort to locate) to notify them of SAK testing results as well as outcomes of cases where the victim was notified (e.g., participation in new investigations, utilization of supportive services).

What are the MN SAKI Project's Notification Guidelines?

To begin, we reviewed the *MN SAKI Project's Notification Guidelines,* a set of directives developed by the MN SAKI project partners that guide "decision-making and inform every interaction with victim/survivors" (p. 2) (see Appendix I). Guiding principles include, for example:

1. Prioritizing a victim-survivor's choices, safety, privacy, and wellbeing.
2. Minimizing the risk of re-traumatization when contacting victim-survivors.
3. Offering all victim-survivors advocacy and supportive services including safety planning independent of whether they choose to reengage in the criminal justice process.
4. Ensure confidentiality regarding communication between the victim-survivor and the victim advocate.

Regarding decisions about victim notifications, the *Notification Guidelines* indicate that once a SAK is tested by the BCA and the results are known, the detective and advocate collaborate with the case review team to consider specific information about the case (e.g., does the detective believe the case may be further investigated, was there evidence in the original case file that the victim did not want the case investigated). If the detective believes that the case

could be reinvestigated and there is no compelling evidence that the victim-survivor did not want an investigation (as well as other considerations for specific populations, e.g., minors, see pp.8-9), then the victim advocate should attempt to locate the victim-survivor for an "active notification". "Active notification" means the advocate will make concentrated efforts to locate and contact the victim-survivor, such as by phone, letter or email, through social media, or, if necessary, with the detective at a known home address" (p.3).

What do MN SAKI project victim notifications look like?

For active notifications, the victim advocate should (1) explain the MN SAKI project, (2) determine if the victim-survivor is interested in further contact including the SAKI detective about their SAK, and (3) communicate information about safety-planning and supportive services. In addition, the MN SAKI project provided an opt in/opt out method of notification through a help line that was advertised on MN SAKI partner websites and social media. When a victim-survivor phones the help line, they are connected to a victim-centered voice recording asking for contact information for a safe and secure call back from a victim advocate within two business days that will address their questions about their case and/or SAK. At the conclusion of a victim advocate contact with a victim-survivor (whether through active notification or call back from the opt in/opt out helpline), if the victim-survivor does not want further contact regarding the SAKI project, the victim advocate will apologize for the delay in testing and for intruding on their life now, verify that they do not want to be involved with any possible investigation, obtain verbal permission to relay their wishes to the detective, provide assurances that they will not be further contacted, and provide information about available supportive services (p. 6).

Following the Notification Guidelines, the case review team identified 80 cases for active victim notifications. On average, there were 4,203 days between the assault and the first

notification attempt (*SD* = 1613.7 days; Range = 1560 – 7258 days; *M* = 11.5 years). Table 13 presents the case characteristics, victim, and suspect information for cases with an active victim notification.

Case Characteristics

Most incidents occurred in 2010-2015 (48.8%), followed by 2005-2009 (32.5%), and 1995-2004 (18.8%). On average, the time between the incident and the report to law enforcement was less than a single day (M=0.38, SD=0.19). In 66.9% of cases, at least one witness was identified by law enforcement. On average, there were 1.23 witnesses per case (SD=1.35), with as many as 5 witnesses in a single case. Regarding location of the incident, incidents most often occurred at the victim's residence (30.0%), followed by the suspect's residence or a third-party's residence (23.8%, respectively), a vehicle or outdoors (7.5%, respectively), or a hotel or "other" locations (e.g., public restrooms, hospitals) (2.5%, respectively). In 3.8% of cases, the victim reported multiple incidents occurring in two or more locations.

In most cases, the victim alleged one perpetrator was involved in the incident (83.8%); however, incidents involved up to 2 alleged perpetrators (*M* = 1.22; *SD* = 0.66). The most common victim-perpetrator relationship (for Perpetrator 1) was stranger perpetrators (31.3%), followed by acquaintances/known by sight (30.0%), romantic partners (current/former; 18.8%), and friends (13.8%). There were 11 victims who alleged at least two perpetrators were involved. In these instances, the second perpetrator was most often a stranger (70.0%), followed by an acquaintance (20.0%), friend (10.0%). In instances where there were three or more perpetrators, the third perpetrator was a stranger to the victim. Victims reported that perpetrator(s) used a condom in 8.8% of incidents and ejaculated in 40.0% of incidents.

Weapon use or threats of a weapon were rare. Weapon use occurred in 3.8% of cases, and

the weapon of choice in all cases was a knife. Threats of a weapon occurred in 7.5% of cases; knives were most common (50.0%), then guns (33.0%), followed by other weapons (17.0%). It was more common for a perpetrator to use force (45.5%) than to threaten to use force (11.3%). Coercion was used in 3.8% of cases. More than 40% of victim-survivors sustained injuries which predominantly included cuts and bruises. In 7.5% of incidents, the perpetrator kidnapped and/or held the victim captive (for more time than it took to complete the assault), respectively; and 8.8% of incidents included strangulation.

In the original investigation (i.e., prior to the MN SAKI project), law enforcement identified at least one suspect in most cases (68.8%). On average, law enforcement identified 0.73 suspects (*SD* = 0.53), and as many as two were identified. Further, law enforcement interviewed at least one suspect in 50.9% of cases with an identified suspect, and 10.7% of interviewed suspects made a confession to law enforcement. Law enforcement forwarded 50.9% of cases with an identified suspect to the prosecution; prosecutors filed charges in 17.9% of these cases. Regarding case outcomes prior to the MN SAKI project, nearly 24% of cases had a final case status of "prosecution declined" (23.8%), 35.0% of cases were open investigations (both active and inactive), 31.3% were exceptionally cleared, and 3.8% were unfounded. Prosecutors filed charges in 6.3% of cases (n = 5), and 1 case resulted in a conviction.

Victim Characteristics

Regarding victim characteristics, all cases involved a female victim. Victims ranged in age from 2-60 years old and were 24.05 years old on average (*SD* = 9.07); 22.5% of victims were minors (less than 18 years of age) at the time of incident. Most victims were White/Caucasian (73.8%); followed by Black/African American (11.3%), Hispanic (7.0%), and Asian/Pacific Islander (1.3%). Most victims (87.5%) provided a formal statement to law enforcement, while 43.8% elected to continue with an investigation into the incident. In a little more than one-third

of cases (33.5%), the victim initially supported an investigation, but then changed their mind about wanting to proceed with an investigation (e.g., stopped answering law enforcement officer's phone calls, returning phone calls/letters).

In 26.3% of cases, crime incident reports included direct statements by criminal justice actors (e.g., law enforcement, prosecutors, judges) concerning the victim's credibility. In about one third of cases (32.5%) the victim reported losing consciousness during the incident and in 18.8% of cases the incident report noted that the victim had a mental health or disability diagnosis. About 15.0% of victims reported having a consensual sexual partner within 72-hours preceding the incident. Half of victims (51.2%) had consumed alcohol prior to the incident, which was most often self-supplied and voluntarily consumed (34.1%) or supplied by the perpetrator (but voluntarily consumed) (31.7%). One-quarter of victims reported consuming drugs prior to the incident; 20% of victims reported voluntarily consuming drugs provided by either the perpetrator or self-supply, respectively, while another 5% of victims reported voluntarily consuming drugs provided by a third-party; 20% of victims believed to have unknowingly ingested drugs (e.g., drink spiking). In addition, 10.0% of victims alleged they were forced by the perpetrator to consume drugs.

Suspect Characteristics

In cases with one or more identified suspects, the primary suspect consisted of mostly men (98.2%); all additional suspects (i.e., Suspect 2) were all men. Most suspects were White/Caucasian (43.6%); followed by Black/African American (30.9%), Hispanic (10.9%), American Indian/Alaskan Native (1.8%), and Asian/Pacific Islander (3.6%). On average, suspects were 31.27 years-old (*SD*=10.28) but ranged in age from 18-57 years old. In the three cases with a second suspect, suspect 2 was Black/African American in two cases and in one case suspect race was missing from the case file. Second suspects were 22.88 years-old on average

(*SD*=8.26) but ranged in age from 16-32 years of age. In 52.7% of cases, the victim alleged the suspect(s) consumed alcohol prior to the assault, while in 16.4% of cases, the victim alleged the suspect(s) consumed drugs prior to the assault.

Table 13. Descriptive Statistics for SAKI Cases with an Active Victim Notification (*N* = 80).

Case Characteristics	*N*	%
Offense year		
1985 – 1989	-	-
1990 – 1994	-	-
1995 – 2004	15	18.8%
2005 – 2009	26	32.5%
2010 – 2015	39	48.8%
Time between Incident and Report (Days)	*M* = 0.38; *SD* = 0.19 Range (0-1)	
Any witnesses identified		
No	34	42.5
Yes	46	57.5
Number of witnesses	*M* = 1.23; *SD* = 1.35 Range (0-5)	
Location of incident		
Vehicle	6	7.5
Outdoors	6	7.5
Victim's residence	24	30.0
Suspect's residence	19	23.8
Third-party residence	19	23.8
Hotel	2	2.5
Other	2	2.5
Multiple locations		
No	77	96.3
Yes	3	3.8
Multiple alleged perpetrators		
No	67	83.8
Yes	11	13.8
Number of alleged perpetrators	*M* = 1.22; *SD* = 0.66 Range (0-5)	
Victim-perpetrator relationship (Perpetrator 1)		
Stranger	25	31.3
Acquaintance (known by sight)	24	30.0
Friend	11	13.8
Family member	2	2.5
Romantic partner (current/former)	15	18.8
Victim-perpetrator relationship (Perpetrator 2)		
Stranger	7	70.0
Acquaintance (known by sight)	2	20.0

Friend	1	10.0
Victim-perpetrator relationship (Perpetrator 3)		
Stranger	3	100.0
Perpetrator used a condom		
No	48	60.0
Yes	7	8.8
Perpetrator ejaculated		
No	6	7.5
Yes	32	40.0
Perpetrator used a weapon		
No	70	87.5
Yes	3	3.8
Type of weapon used (n = 3)		
Gun	0	-
Knife	3	100.0
Other weapon	0	-
Perpetrator threatened weapon		
No	67	83.8
Yes	6	7.5
Type of weapon threatened (n = 6)		
Gun	2	33.0
Knife	3	50.0
Other weapon	1	17.0
Perpetrator used force		
No	28	35.0
Yes	45	56.3
Perpetrator threatened force		
No	64	80.0
Yes	9	11.3
Perpetrator used coercion (e.g., pressured victim to comply)		
No	69	86.3
Yes	3	3.8
Victim injured		
No	44	55.0
Yes	34	42.5
Incident involved kidnapping		
No	73	91.3
Yes	6	7.5
Incident involved captivity		
No	73	91.3
Yes	6	7.5
Incident involved strangulation		
No	71	88.8
Yes	7	8.8
Suspect/s identified		
No	25	31.3
Yes	55	68.8
Number of identified suspects	M = 0.73; SD = 0.53	

	Range (0-2)	
Suspect interviewed (*n* = 55)		
No	26	47.3
Yes	28	50.9
Suspect confessed (*n* = 28)		
No	25	89.3
Yes	3	10.7
Case forwarded to prosecutor prior to victim notification (*n* = 55)		
No	27	49.1
Yes	28	50.9
Prosecutor filed charges prior to victim notification (*n* = 28)		
No	23	82.1
Yes	5	17.9
Case status prior to victim notification		
Prosecution Declined	19	23.8
Prosecution Charged	5	6.3
Exceptionally Cleared	25	31.3
Unfounded	3	3.8
Open (Active or Inactive Investigation)	28	35.0
If charged, suspect convicted		
No	4	80.00
Yes	1	20.00
Victim Characteristics		
Victim sex		
Female	80	100
Male	-	-
Victim age at time of incident	*M* = 24.05; *SD* = 9.07 Range (2-60)	
Was the victim a minor at time of incident?		
No	61	76.3
Yes	18	22.5
Victim race/ethnicity		
White/Caucasian	59	73.8
Black/African American	9	11.3
Asian/Pacific Islander	1	1.3
Hispanic, any race	7	8.8
Victim provided statement to law enforcement		
No	8	10
Yes	70	87.5
Victim participated in investigation		
No	15	18.8
Yes	35	43.8
Changed their mind	28	35.0
Victim credibility		
No	58	72.5
Yes	21	26.3
Victim loss of consciousness		

No	48	60.0
Yes	26	32.5
Consensual partner within last 72-hour		
No	66	82.5
Yes	12	15.0
Victim mental health or disability diagnosis		
No	64	80.0
Yes	15	18.8
Victim consumed alcohol prior to assault		
No	35	43.8
Yes	41	51.2
Who provided victim alcohol (n = 41)		
Self-supplied	14	34.1
Perpetrator supplied, but voluntarily consumed	13	31.7
Third-party/Unknown supplier, but voluntarily consumed	11	26.9
Victim alleged forced to consume alcohol	1	2.4
Victim consumed drugs prior to assault		
No	53	66.3
Yes	20	25.0
Who provided victim drugs (n = 20)		
Self-supplied	4	20.0
Suspect supplied, but voluntarily consumed	4	20.0
Third-party/Unknown supplier, but voluntarily consumed	1	5.0
Victim alleged unknowingly ingesting drug	4	20.0
Victim alleged forced to consume drug	2	15.0
Suspect Characteristics		
Suspect sex (Suspect 1) (n = 55)		
Female	1	1.8
Male	54	98.2
Suspect race/ethnicity (Suspect 1)		
White/Caucasian	24	43.6
Black/African American	17	30.9
American Indian/Alaskan Native	1	1.8
Asian/Pacific Islander	2	3.6
Hispanic, any race	6	10.9
Suspect age at time of incident (Suspect 1)	M = 31.27; SD = 10.28 Range (18-57)	
Suspect sex (Suspect 2) (n = 3)		
Female	-	-
Male	3	100
Suspect race/ethnicity (Suspect 2)		
White/Caucasian	-	-
Black/African American	2	96.3
Asian/Pacific Islander	-	-
Hispanic, any race	-	-
Suspect age at time of incident (Suspect 2)	M = 22.88; SD = 8.26 Range (16-32)	

Suspect consumed alcohol prior to assault		
No	16	29.1
Yes	29	52.7
Suspect consumed drugs prior to assault		
No	32	58.2
Yes	9	16.4

Table Notes:

1. Percentages may not add up to 100% for every variable due to missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).
2. Conditional percentages reflect the subsample *n* provided with each variable.

Regarding data on the process of locating and notifying victim-survivors, we first examined the victim advocate's case notes documenting active notifications from August 22, 2019, to March 31, 2022. As of March 31, 2022, the victim advocate had made 467 individual attempts to notify victim-survivors (See Table 14). On average, the victim advocate had made 5.8 attempts (SD = 3.7). In terms of types of active notification attempts, the victim advocate used phone calls (n = 371; 79.4%), emails (n = 48; 10.3%), social media (n = 21; 4.5%), and letters (n = 16; 3.4%) to try to contact victim-survivors; the victim advocate (accompanied by the detective) visited 9 victim-survivors in-person, and video-chatted (through zoom) with two victim-survivors. On average, 4,203.4 days (SD = 1,613.7) passed between the date of the incident and the first attempt by the victim advocate to contact the victim-survivor. Again, as of March 31, 2022, 60 victim-survivors (75.0%) had been successfully contacted by the victim advocate, while an additional victim-survivor was identified as deceased. Most successful contacts stemmed from phone calls (88.3%) or emails (6.7%); 2 successful contacts were made via social media and 1 successful contact was made in-person.

The victim advocate continued to attempt to contact the remaining 19 victim-survivors from April 1, 2022, to September 26, 2023. Once all cases associated with an active victim notification were closed (as of September 26, 2023), we reexamined the data on notification attempts. In total, the victim advocate made 552 notification attempts. On average, victim-

survivors were contacted 6.9 times (SD = 4.8). In terms of types of notification attempts, the victim advocate used phone calls (n = 425; 77.0%), emails (n = 64; 12.5%), social media (n = 28; 5.1%), and letters (n = 23; 4.2%) in attempts to contact the victim-survivor; the victim advocate (accompanied by the detective) visited 10 victim-survivors in-person, and video-chatted (through zoom) with two victim-survivors, comprising an additional 54 phone calls, 16 emails, 7 social media messages, 7 letters, and 1 in-person visits from April 1, 2022 to September 26, 2023.

Taken together, a total of 69 victim-survivors were successfully contacted by the victim advocate (again, one additional victim-survivor was found to be deceased). Most successful contacts stemmed from phone calls (85.7%) or emails (7.1%); 3 successful contacts were made via social media and 1 successful contact was made in-person. Overall, the victim advocate was unable to contact 13.8% of victim-survivors. Among the 69 victim-survivors who the victim advocate was able to successfully contact, the majority did not want to participate in a new investigation of their assault (88.4% of contacted victim-survivors); while 8 victim-survivors agreed to participate in a new investigation (see Table 14).

Table 14. Descriptive Statistics for Victim-Survivor Notifications Attempts as of March 2022 and October 2023 (*N* = 80).

Case Characteristics	As of March 31, 2022		As of September 26, 2023	
	n	%	*n*	%
Type of victim-survivor contact attempts	*N* = 467		*N* = 552	
Phone call	371	79.4	425	77.0
Email	48	10.3	64	12.5
Outreach via social media	21	4.5	28	5.1
In-person visit	9	1.9	10	1.8
Letter	16	3.4	23	4.2
Zoom call	2	1.1	2	0.4
Number of victim-survivor contact attempts	*M* = 5.8; *SD* = 3.7 Range (1-17)		*M* = 6.9; *SD* = 4.8 Range (1-20)	
Victim-survivor successfully contacted	*N* = 80		*N* = 80	
No	19	23.8	10	12.5
Yes	60	75.0	69	86.3
Found to be deceased	1	1.3	1	1.3
Successful contact type	*n* = 60		*n* = 69	
Phone	53	88.3	60	85.7
Email	4	6.7	5	7.1
Social media	2	3.3	3	4.3
In-Person	1	1.7	1	1.4
Final notification status				
Notification was never successful or victim-survivor deceased	-	-	11	13.8
Victim-survivor notified, did not want to participate	-	-	61	76.3 (88.4) [a]
Victim-survivor notified, participated in new investigation	-	-	8	8.8 (11.6) [a]

Table Notes:

[a] Conditional on number of victim-survivors contacted.

Table 15 presents the final case outcomes across the 80 victim-survivors with whom the victim advocate attempted an active notification. There were no charges (either before or in conjunction with the MN SAKI project) among victim-survivors who were never successfully notified (n =11). Among victim-survivors who were successfully notified but who did not want to participate in a new investigation (n = 61), there were 4 cases that were charged, but all charges stemmed from the original investigation. In one case, the suspect – the 18-year-old boyfriend of the 12-year-old victim – confessed to sexual intercourse with a minor and was convicted of 5th degree criminal sexual conduct; however, upon testing the SAK in conjunction with the MN SAKI project, a DNA profile was developed, entered in CODIS, and hit to a known offender who was not the original suspect. The victim was notified but did not wish to reopen the case. Finally, among these 8 victim-survivors who agreed to participate in a new investigation, 6 cases were reinvestigated but did not result in a new prosecution, while 2 cases resulted in new charges and prosecutions because of the MN SAKI project; 1 resulted in a conviction and 1 had been charged but had not been prosecuted at the time of writing. Further, while the victim advocate provided information on available resources – and safety planning as needed – with every victim-survivor contacted, they provided additional resources to 4 victim-survivors. Resources included mental health referrals, ongoing advocacy, and legal resources.

Table 15. Final Case Outcomes by Victim Notification Status among Victim-Survivors with Active Victim Notification Attempts (*N* = 80).

	Notification never successful/victim-survivor deceased		Victim-survivor notified, did not want to participate		Victim-survivor notified, participated in new investigation		Total	
	n = 11		*n* = 61		*n* = 8		*N* = 80	
	n	(%)	*n*	(%)	*n*	(%)		
Final case outcome								
prosecution declined	4	36.4	12	19.7	3	37.5	19	23.8
prosecution charged	0	0	4	6.6	2	25.0	6	7.5
exceptionally cleared	3	27.3	21	34.4	1	12.5	25	31.3
unfounded	0	0	3	4.9	0	0	3	3.8
open (inactive investigation)	4	36.4	21	34.4	2	25.0	27	33.8
If charged, suspect convicted (*n* = 6)								
No	0	0	3	75.0	0	0	3	50.0
Yes	0	0	1	25.0	1	50.0	2	33.3
In progress	0	0	0	0	1	50.0	1	16.7

What are victim-survivors' perceptions of the notification process and their help seeking needs? What impacts empowerment and future help-seeking?

In addition, we considered victim-survivors' perceptions of the notification process and their help seeking needs as well as what impacts empowerment and future help-seeking (RQ3b). We first focused on understanding victim-survivors' reactions to the active notification process and their choices regarding next steps after the notification (e.g., schedule a meeting with the investigator and advocate, request to have the case closed) (See Appendix D for reaction form). The victim reaction form was integrated into the victim-advocate's process for notifications after they had actively notified many of the 80 victim-survivors who were identified by the Case Review Team as appropriate for active notification. The victim advocate completed a victim reaction form with 15 victim-survivors: 5 of these victim-survivors were from the original active notification group (described above), while 10 were from a second round of active notifications attempts with victim-survivors whose cases were rereviewed by the Case Review Team in an effort to "look beyond the kit" (i.e., the SAK did not produce new evidence, but the investigator believed there were other avenues for new leads). Table 16 presents descriptive statistics for these 15 survivors.

Table 16. Descriptive Statistics for SAKI Cases with Victim Reaction Forms (*n* = 15) or Victim Interviews (*n* = 4).

	Victim Reaction Forms ($N = 15$)		Victim Interviews ($N = 4$)	
Case Characteristics	*n*	%	*n*	%
Offense year				
2000 – 2004	3	20.0	-	-
2005 – 2009	5	33.3	2	50.0
2010 – 2015	7	46.7	2	50.0
Time between Incident and Report (Days)	$M = 0.40$; $SD = 1.06$ Range (0-4)		$M = 0.00$; $SD = 0.00$ Range (0)	
Any witnesses identified				
No	7	46.7	2	50.0
Yes	8	53.3	2	50.0
Number of witnesses	$M = 1.07$; $SD = 1.16$		$M = 1.00$; $SD = 1.41$	

	Range (0-3)		Range (0-3)	
Location of incident				
Vehicle	1	6.7	-	-
Outdoors	3	20.0	-	-
Victim's residence	2	13.3	1	25.0
Suspect's residence	4	26.7	2	50.0
Third-party residence	2	13.3	1	25.0
Other	2	13.3	-	-
Multiple locations				
No	15	100.0	3	75.0
Yes	-	-	1	25.0
Multiple alleged perpetrators				
No	14	93.3	4	100.0
Yes	1	6.7	-	-
Number of alleged perpetrators	M = 1.20; SD = 0.78 Range (1-4)		M = 1.00; SD = 0.00 Range (1)	
Victim-perpetrator relationship (Perpetrator 1)				
Stranger	8	53.3	-	-
Acquaintance (known by sight)	4	26.7	2	50.0
Family member	1	6.7	1	25.0
Romantic partner (current/former)	1	6.7	1	25.0
Victim-perpetrator relationship (Perpetrator 2)				
Stranger	1	6.7	-	-
Victim-perpetrator relationship (Perpetrator 3)				
Stranger	1	6.7	-	-
Perpetrator used a condom				
No	8	53.3	2	50.0
Yes	2	13.3	-	-
Perpetrator ejaculated				
No	3	20.0	-	-
Yes	3	20.0	2	50.0
Perpetrator used a weapon				
No	13	86.7	3	75.0
Yes	1	6.7	-	-
Type of weapon used				
Gun	-	-	-	-
Knife	1	6.7	-	-
Other weapon	-	-	-	-
Perpetrator threatened weapon				
No	12	80.0	3	75.0
Yes	2	13.3	-	-
Type of weapon threatened				
Gun	1	6.7	-	-
Knife	1	6.7	-	-
Other weapon	-	-	-	-
Perpetrator used force				
No	6	40.0	2	50.0

Yes	8	53.3	1	25.0
Perpetrator threatened force				
No	14	93.3	3	75.0
Yes	-	-	-	-
Perpetrator used coercion (e.g., pressured victim to comply)				
No	12	80.0	2	50.0
Yes	1	6.7	-	-
Victim injured				
No	8	53.3	3	75.0
Yes	5	33.3	1	25.0
Incident involved kidnapping				
No	14	93.3	4	100.0
Yes	1	6.7	-	-
Incident involved captivity				
No	15	100.0	4	100.0
Yes	-	-	-	-
Incident involved strangulation				
No	15	100.0	4	100.0
Yes	-	-	-	-
Suspect/s identified				
No	8	53.3	4	100.0
Yes	7	46.7	-	-
Number of identified suspects	M = 0.47; SD = 0.52 Range (0-1)		M = 1.00; SD=0.00 Range (1)	
Suspect interviewed				
No	6	85.7	4	100.0
Yes	1	14.3	-	-
Suspect confessed				
No	1	100.0	-	-
Yes	-	-	-	-
Case forwarded to prosecutor prior to victim notification				
No	5	71.4	2	50.0
Yes	2	28.6	2	50.0
Prosecutor filed charges prior to victim notification				
No	2	100.0	2	100.0
Yes	-	-	-	-
Case status prior to victim notification				
Prosecution Declined	1	6.7	2	50.0
Exceptionally Cleared	3	20.0	1	25.0
Open (Active or Inactive Investigation)	11	73.3	1	25.0
Victim Characteristics				
Victim sex				
Female	15	100.0	4	100.0
Male	-	-	-	-

Victim age at time of incident	*M* = 25.31; *SD* = 9.81 Range (13-44)		*M* = 25.39; *SD* = 3.89 Range (21-29)	
Was the victim a minor at time of incident?				
No	11	73.3	4	100.0
Yes	4	26.7	-	-
Victim race/ethnicity				
White/Caucasian	6	40.0	4	100.0
Black/African American	2	13.3	-	-
Hispanic, any race	1	6.7	-	-
Victim provided statement to law enforcement				
No	1	6.7	-	-
Yes	14	93.3	4	100.0
Victim participated in investigation				
No	1	6.7	-	-
Yes	9	60.0	4	100.0
Changed their mind	4	26.7	-	-
Victim credibility				
No	13	86.7	4	100.0
Yes	2	13.3	-	-
Victim loss of consciousness				
No	11	84.6	1	25.0
Yes	2	15.4	3	75.0
Consensual partner within last 72-hour				
No	14	93.3	3	75.0
Yes	1	6.7	1	25.0
Victim mental health or disability diagnosis				
No	12	80.0	4	100.0
Yes	3	20.0	-	-
Victim consumed alcohol prior to assault				
No	5	33.3	1	25.0
Yes	10	66.7	2	50.0
Who provided victim alcohol				
Self-supplied	3	30.0	1	50.0
Perpetrator supplied, but voluntarily consumed	4	40.0	1	50.0
Third-party/Unknown supplier, but voluntarily consumed	2	20.0	-	-
Victim consumed drugs prior to assault				
No	9	64.3	2	50.0
Yes	5	35.7	1	25.0
Who provided victim drugs				
Suspect supplied, but voluntarily consumed	4	66.7	1	75.0
Suspect Characteristics				
Suspect sex (Suspect 1)				
Female	-	-	-	-
Male	7	100.0	4	100.0
Suspect race/ethnicity (Suspect 1)				

White/Caucasian	1	14.3	2	50.0
Black/African American	1	14.3	1	25.0
Hispanic, any race	1	14.3	1	25.0
Suspect age at time of incident (Suspect 1)	*M* = 36.19; *SD* =10.49 Range (21-48)		*M* = 36.92; *SD* = 4.99 Range (32-43)	
Suspect consumed alcohol prior to assault				
No	5	55.6	-	-
Yes	4	44.4	1	25.0
Suspect consumed drugs prior to assault				
No	6	66.7	1	25.0
Yes	2	22.2	1	25.0

Table Notes:

1. Percentages may not add up to 100% for every variable due to missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).

Regarding victim-survivor reactions to the notification, the most frequent reaction involved the victim-survivor indicating that they did not want to bring this [the sexual assault] up again (60.0%) (see Table 17). Other common reactions include not wanting to discuss the case, being suspicious of the contact, and mentioning a lack of response from law enforcement and advocates (40%, respectively). Regarding next steps after the active notification, 40% of victim-survivors wanted their case closed; 33.3% wanted to speak with both the investigator and the advocate, and 20% wanted to speak with only the advocate. One victim-survivor wanted to have their case closed, but also requested a follow-up call with an advocate and a referral to other community services.

Table 17. Summary of Victim-Survivor Notification Case Details (*n* = 15).

Notification Reactions and Next Steps	*n*	%
Victim Reaction to Case Notification [a]		
Did not want to discuss the case	6	40.0
Was suspicious of contact	6	40.0
Cried/Sad	4	26.7
Asked why the case is being looked into now	4	26.7
Became very upset	2	13.3
Excited that the case was re-opened/something being done finally	2	13.3

Expressed concerns about privacy	2	13.3
Not sure they want to bring this all up again/been a long time	9	60.0
Indicated that notification process was retraumatizing	1	6.7
Mentioned lack of response from law enforcement	6	40.0
Mentioned lack of response from advocates	6	40.0
Lacked emotion/was matter of fact	1	6.7
Was angry	3	20.0
Demeanor changed over the course of the contact	-	-
Next steps [a]		0.0
Wanted to speak with SAKI investigator and advocate	5	33.3
Case closed	7	46.7
Wanted to speak with SAKI advocate only	4	26.7
Referred to community-based advocacy services	-	-
Wanted to speak with SAKI investigator only	-	-
Referred to other community service	1	6.7

Table Notes:

[a] Reactions and next steps are not mutually exclusive.

In addition, one of our advocate partners who did not complete any of the active victim notifications interviewed four victim-survivors about their experiences and perceptions of the notification process (see Lovell et al., 2018), help-seeking, empowerment (modified from Cattaneo & Goodman, 2010), and future use of the system (modified from Cattaneo & Goodman, 2010) (See Appendix E for interview script). The victim-survivors who participated in the interviews had all been in the original active notification group and decided not to participate in a new investigation. Overall, these incidents "looked like" typical (Basile et al., 2022; Richards et al., 2019;) (but not stereotypical, e.g., Estrich, 1987) sexual assaults: all victim-survivors had been assaulted in their 20's by a perpetrator who was known to them (i.e., an acquaintance, family member, former romantic partner). All incidents had identified suspects, but the incidents included consent credibility concerns (i.e., they were "he said, she said" assaults): three of the incidents involved alcohol or drug use by the victim and a loss of

consciousness by the victim during the assault; the fourth incident involved a former romantic partner. All four of the victim-survivors participated in the original investigation, and in two of the cases, law enforcement forwarded the case to the prosecuting attorney, but the prosecutor declined the case. The oldest case occurred nearly thirteen years prior to the active notification, the most recent case occurred nearly five years prior to the active notification (see Table 16).

To begin, the victim advocate asked victim-survivors whether they were glad they were notified. Three of the four victim-survivors reported that they were glad they were notified. For example, one victim-survivor noted, "...for me…to have them reach back out knowing it wasn't just done - that they were still doing something about it - I appreciated that," while another stated, "Yes and no. I felt blindsided by it and was upset, but it made me realize I had more healing to do." The fourth victim-survivor reported that they were not glad that they were notified, stating that, "Not at all. It was too little too late, and I felt pressured to move forward when I said I did not want to." The victim advocate also asked victim-survivors whether they were glad that they were notified in the way they were notified or if they would have preferred a different method. All four victim-survivors were notified by phone, three of the four victim-survivors reported that the phone was their preferred method; however, one victim-survivor noted that, "I was called while on break at work. It would have been nice to do some relationship building or offering resources before dropping the bomb about the kit"; they also suggested, "a letter with resources would be helpful".

Regarding the notification process with the victim advocate, most of the victim-survivors (75%) noted that the victim advocate was courteous and empathetic, listed to their questions and concerns in a compassionate manner and showed them respect during the notification process (see Table 14). Half of victim-survivors strongly disagreed that the victim advocated did not

pressure them to decide about participating in a new investigation during the notification.

Table 18. Victim-Survivor Perceptions of the SAK Notification: Interactions with Advocates (n = 4).

	Strongly disagree	Disagree	Neither agree/ disagree	Agree	Strongly agree	Prefer not to answer
	n (%)					
1. The advocate apologized that my kit was not tested sooner.	1 (25)	-	-	1 (25)	-	2 (50)
2. The advocate was courteous and showed empathy during the notification process.	-	1 (25)	-	-	3 (75)	-
3. The advocate explained the criminal justice process that would follow the notification.	-	1 (25)	-	1 (25)	-	2 (50)
4. The advocate did not pressure me to make a decision about participating in a new investigation during the notification.	2 (50)	-	-	-	1 (25)	1 (25)
5. The advocate explained that it was my choice to continue with an investigation.	-	-	-	-	2 (50)	2 (50)
6. The advocate allowed me to ask questions about the next steps without interrupting me.	-	-	-	-	2 (50)	2 (50)
7. The advocate listened to my questions or concerns in a compassionate manner.	-	-	-	-	3 (75)	1 (25)
8. The advocate showed me respect during the notification process.	-	-	1 (25)	-	3 (75)	-
9. The advocate offered advice on how I could obtain resources and services.	-	1 (25)	-	1 (25)	1 (25)	1 (25)

Among the three victim-survivors who completed a follow-up contact with the detective, only one victim-survivor elected to answer questions about the notification process with the detective. The victim-survivor strongly agreed that the detective (1) apologized that the SAK was not tested sooner, (2) was courteous and empathetic during the notification process, (3) explained

the criminal justice process that would follow the notification, (4) did not pressure them to a decide about participating in a new investigation during the notification, (5) explained that it was the victim-survivor's choice to continue with an investigation, (6) allowed the victim-survivor to ask questions about the next steps without interruption, (7) listened to the victim-survivor's questions/concerns in a compassionate manner, (8) showed the victim-survivor respect during the notification process, and (9) offered advice on how the victim-survivor could obtain resources and services.

Table 19. Victim-Survivor Perceptions of the SAK Notification: Interactions with Detectives (n = 3).

	Strongly disagree	Disagree	Neither agree/ disagree	Agree	Strongly agree	Prefer not to answer
			n (%)			
1. The detective apologized that my kit was not tested sooner.	-	-	-	-	1 (25)	2 (50)
2. The detective was courteous and showed empathy during the notification process.	-	-	-	-	1 (25)	2 (50)
3. The detective explained the criminal justice process that would follow the notification.	-	-	-	-	1 (25)	2 (50)
4. The detective did not pressure me to make a decision about participating in a new investigation during the notification.	-	-	-	-	1 (25)	2 (50)
5. The detective explained that it was my choice to continue with an investigation.	-	-	-	-	1 (25)	2 (50)
6. The detective allowed me to ask questions about the next steps without interrupting me.	-	-	-	-	1 (25)	2 (50)
7. The detective listened to my questions or concerns in a compassionate manner.	-	-	-	-	1 (25)	2 (50)
8. The detective showed me respect during the notification process.	-	-	-	-	1 (25)	2 (50)

9. The detective offered advice on how I could obtain resources and services.	-	-	-	-	1 (25)	2 (50)

The victim advocate also asked victim-survivors about how likely they would be to use informal and formal resources if they were to start the process over. One victim-survivor noted that they were very unlikely to contact anyone from a formal system – an advocate, the police, or legal assistance – and very unlikely to go to the hospital or undergo a sexual assault exam. Two victim-survivors reported that they were likely or very likely to call a friend or family member, call formal systems of care (i.e., an advocate, the police, or legal assistance), go to the hospital and undergo a sexual assault exam, and want their offender prosecuted - unsurprisingly, these were the two victim-survivors whose cases were forwarded to law enforcement by the prosecutor. The final victim-survivor preferred not to answer the specific questions on each resource, but instead noted, "Looking back I would not have reported because of how I was treated at the hospital, by law enforcement, and the victim advocate (at the time). If I were assaulted now, I would go forward because I know more, I would know what to ask and what to call out if they missed something".

Table 20. Victim-Survivor Likelihood of Future Use of the System (n = 4).

	Very unlikely	**Unlikely**	**Not really sure**	**Likely**	**Very Likely**	**Prefer not to answer**
			n (%)			
1. Call a friend or family member?		-	-	-	2 (50)	2 (50)
2. Go to the hospital?	1 (25)	-	-	-	2 (50)	1 (25)
3. Undergo a sexual assault exam?	1 (25)	-	-	1 (25)	1 (25)	1 (25)
4. Call a victim advocate?	1 (25)	-	-	-	2 (50)	1 (25)
5. Call the police?	1 (25)	-	-	1 (25)	1 (25)	1 (25)

6. Call for legal assistance like calling a lawyer or an agency like legal aid?	1 (25)	-	-	1 (25)	1 (25)	1 (25)
7. Want the offender criminally prosecuted?	-	-	-	-	2 (50)	2 (50)

Finally, the victim advocate asked the victim-survivors a series of questions on empowerment. Three of the four victim-survivors strongly disagreed that they "got what I hoped for from undergoing the sexual assault exam"; the fourth victim-survivor answered neither agree nor disagree and noted, "they didn't test the kit, so it felt like there was nothing they did against him". Two of the four victim-survivors agreed or strongly agreed that the detective "treated them fairly and listened to their side of the story" and "considered my wishes regarding investigating my sexual assault just as important as his wishes regarding investigating my sexual assault" – again, these were the two victim-survivors whose cases were forwarded to law enforcement by the prosecutor. Three of the four victim-survivors strongly disagreed with the statements, "I got what I hoped for from allowing the detective to investigate my sexual assault" and "I got what I hoped for from pursuing a criminal case." Again, these findings are unsurprising given that these victim-survivors participated with the original investigation, all of which had known suspects, and none of which were prosecuted. Finally, two of the four victim-survivors noted that they "got what they hoped for from pursuing services from the victim advocate".

Table 21. Victim-Survivor Empowerment (n = 4).

	Strongly disagree	**Disagree**	**Neither agree/ disagree**	**Agree**	**Strongly agree**	**Prefer not to answer**
			n (%)			
1. I got what I hoped for from undergoing the sexual assault exam.	3 (75)	-	1 (25)	-	-	-

2.	I feel the detective treated me fairly and listened to my side of the story.	1 (25)	-	-	1 (25)	1 (25)	1 (25)
3.	I think the detective considered my wishes regarding investigating my sexual assault just as important as his wishes regarding investigating my sexual assault.	1 (25)	-	-	1 (25)	1 (25)	1 (25)
4.	I got what I hoped for from allowing the detective to investigate my sexual assault.	3 (75)	-	-	-	-	1 (25)
5.	I got what I hoped for from pursuing a criminal case.	3 (75)	-	-	-	-	1 (25)
6.	I got what I hoped for from pursuing services from the victim advocate.	1 (25)	-	-	-	2 (50)	1 (25)

Summary and Conclusions

In accordance with the current best practices in SAKI work (see RTI, n.d.), the MN SAKI project developed a set of guidelines for victim notification that was centered in trauma-informed care. Like the Detroit SAKI project (Campbell et al., 2015), the MN SAKI project decided to notify victim-survivors only when the recently tested SAK produced forensic evidence and the SAKI investigator believed there was the possibility of new investigatory leads, and the case review team had no compelling evidence that the victim-survivor did not want an investigation or would be unduly harmed by the notification (See Appendix I for notification guidelines). The MN SAKI project diverges from Detroit, in that a victim advocate conducted the initial victim notifications, not an investigator or investigators.

Following the MN SAKI guidelines, the case review team identified 80 victims eligible for active notification. The victim advocate was able to locate and notify 86.3% of victim-survivors (n = 69), compared to 75.6% in Detroit (n = 31 of 41). In Anoka County, the notifier made an average of 7 notification attempts (Range = 1-20), compared to an average of 3 in

Detroit (Range = 1-16). Of the victim-survivors who the victim advocate was able to notify, 11.6% agreed to participate in a new investigation (n = 8), compared to 52% of victim-survivors notified in Detroit (n = 16).

While the present data cannot speak to the exact reason/s for the higher location rate and/or the lower rate of re-engagement in Anoka County, a few differences in these SAKI projects are worth noting. First, in Anoka County, the notifiers made more notification attempts per victim-survivor allowing for more opportunity to locate victim-survivors; in addition, 8 victim-survivors were still pending notification in Detroit at the time of study completion. Second, active notifications were completed from the end of 2018 to 2023 compared to 2012 to 2013 in Detroit. As such, it is likely that Anoka County benefited from the increased reach of internet search capabilities and social media to locate victims' contact information. In addition, in Anoka County, notifications were completed by a victim advocate, while in Detroit notifications were completed by investigators, and in most cases a team of two investigators. Further, in Anoka County, most notifications were completed by phone, while in Detroit they were most often completed in person. As such, it is possible that victim-survivors in Detroit were more highly engaged by investigators' knowledge of the case and their authority regarding the possibility of reinvestigation at this first notification; they may have also felt some increased sense of duty to participate given that they were meeting in person with investigators.

At the same time, in Anoka County the victim advocate attempted the first notification an average of 11.5 years after the assault, while in Detroit notifications were made an average of 9 years after the assault. Further, in Detroit researchers observed that "the longer the period of time between when the assault occurred and…the victim was notified, the more likely a survivor would have a negative reaction to the notification" and that "many of the survivors who were

angry at the notification expressed that had ‘moved on’ with their lives (Campbell et al., 2015, p. 269). Similarly, among the victim-survivors whom the victim advocate completed a notification reaction form, the most cited reaction among survivors was that they were “not sure they want to bring this all up again/been a long time”. Taken together, it is likely that length of time since the assault contributed to the lower reengagement rate of victim-survivors in Anoka County: victim-survivors had moved on and were not interested in reopening the past trauma of the assault. As noted by the SAKI investigator regarding victim notification and reengagement “the vast majority just said, ‘you know, I've moved beyond that, it’s in my past, I don't want to go back’” (See interview in Chapter 4).

We also attempted to understand victim-survivors’ experiences with the notification process and the impact of the SAKI on empowerment and future use of the system. Our victim advocate partner faced many challenges in identifying victim-survivors for interviews as most victim-survivors were uninterested in reengaging on their assault; of the 18 victim-survivors that she identified as potential interviewees only 4 chose to participate. Of the four victim-survivors who agreed to participate in interviews, two consistently chose “prefer not to answer” for many of the closed ended the questions, and one victim-survivor did have a follow-up with the detective and thus did not answer the related interview questions. These four survivors’ cases all “looked like” typical (Basile et al., 2022; Richards et al., 2019) (but not stereotypical, Estrich, 1987) sexual assaults (e.g., victim-survivors were in their 20’s when they were assaulted, perpetrator who was known to them, incidents included consent credibility concerns). All four of the victim-survivors participated in the original investigation, and in two of the cases, law enforcement forwarded the case to the prosecuting attorney, but the prosecutor declined the case. Three of the four victim-survivors reported being glad they were notified and that being notified

over the phone was a positive/a preferred method to other methods (e.g., in-person, a letter, an email, etc.). Victim-survivors reported varied experiences with the notification process with one victim-survivor reporting an overall positive experience with both the advocate and the detective, while the other victim-survivors reported greater variation and/or preferred not to answer many of the questions.

While the sample size was too small to rigorously examine the relationships between perceptions of the notification process on empowerment and future use of the system, it is worth noting that the two victim-survivors whose cases were forwarded to law enforcement by the prosecutor reported that they were likely or very likely to call formal systems of care (i.e., an advocate, the police, or legal assistance), go to the hospital and undergo a sexual assault exam if they were to start the process over, while the remaining two victim-survivors did not. These findings are consistent with the larger body of research regarding victim satisfaction with criminal justice and victim service systems and future use of the system (Belknap & Sullivan, 2003; Cattaneo & Goodman, 2010; Zweig &, Burt, 2003).

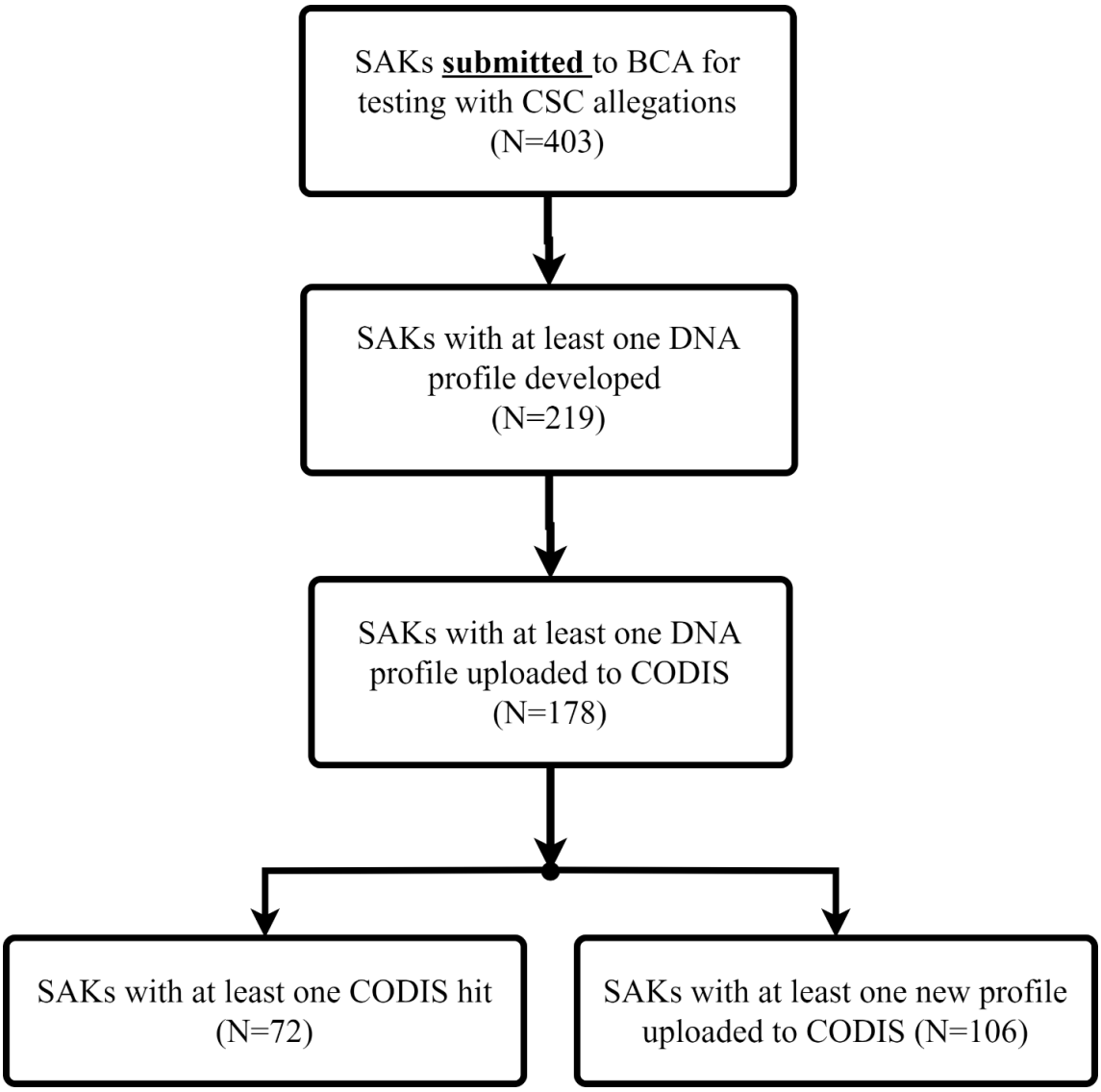
Based on the present findings, we would suggest that SAKI projects consider having an advocate and a detective on hand for active notifications so that the victim-survivor is well supported, but also has ready access to case details and answers to questions regarding participating in a new investigation. SAKI projects should also plan that locating victim-survivors may take significant staff time and effort, especially if many cases are from 9 or more years ago. Further, SAKI projects should set their expectations and goals for the project with the understanding that many, and perhaps most, victim-survivors may not want to engage in new investigations.

Chapter 6: Understanding SAK Outcomes, Costs and Benefits

What are the outcomes of testing SAKs in the MN SAKI project, including the number of CODIS uploads and hits?

To begin, we examined data from the BCA on the 403 SAKs (from 404 victims) submitted for testing in the MN SAKI project (See Figure 4). DNA evidence suitable for autosomal testing was identified in 58.8% of SAKs submitted to BCA for testing and slightly more than half (54.1%) of tested SAKs produced at least one DNA profile. Eighty-one and half percent (81.5%) of SAKs with a DNA profile had at least one profile uploaded to CODIS: 1 SAK produced 2 profiles that were uploaded to CODIS and 1 SAK produced 3 profiles that were uploaded to CODIS for a total of 181 profiles uploaded to CODIS.

Figure 4. Forensic Testing for SAKs Submitted to BCA (*N* = 403).



Of the 178 SAKs with profiles uploaded to CODIS, 72 SAKs resulted in at least one CODIS hit (see Table 22). Three SAKs produced multiple hits: two SAKs with one DNA profile, respectively, produced hits to twins, while one SAK with three distinct DNA profile uploads produced hits to three different offenders. Across these 72 SAKs there were 75 CODIS hits to 74 unique offenders: 1 SAK resulted in CODIS hits to three distinct offenders, 1 SAK resulted in

CODIS hits to 2 distinct offenders, and 2 different SAKs resulted in CODIS hits to the same offender. The majority of CODIS hits stemmed from an offender hit (74.7%) while 6.7% of hits were forensic hits and 18.7% of hits were to both an offender and a forensic hit. CODIS hits to offenders and/or offender and forensic hits stemmed from 11 states including Minnesota, Arkansas, Colorado, Illinois, Maryland, Michigan, New Jersey, Ohio, Oklahoma, South Carolina, and Texas. More than one third of CODIS hits (32.0%) were linked to someone who was not listed as a principal suspect in the case and 62.5% of these CODIS hits were to offenders' whose identities were previously unknown (e.g., unknown suspect or known only by first name or nickname).

Table 22. Summary of SAKs Submitted to BCA for Testing in MN SAKI (*N* = 403).

Variables	***n***	**%**
DNA evidence suitable for Autosomal testing…	237	58.8 (49.1) [a]
SAKs with DNA Profiles developed	219 [a]	54.1
SAKs with DNA Profiles uploaded to CODIS	178 [b]	81.5
SAKs with **at least one** CODIS hit	72	40.9
Total Number of CODIS hits	75[c]	
Forensic Hit	5	6.7
Offender Hit	56	74.7
Forensic and Offender Hit	14	18.7
State of CODIS hit		
MN	58	85.1
AR	2	2.7
CO	1	1.4
IL	1	1.4
MD	1	1.4
MI	1	1.4
NJ	1	1.4
OH	1	1.4
OK	1	1.4
SC	1	1.4

TX	2	1.4
CODIS hit to someone other than the principal suspect	24	32.0
CODIS hit to suspect who was previously unknown/known by nickname only	15	62.5

Table Notes:
[a] Unconditional percentage based on total number of previously untested SAKs in MN SAKI *n* = 483; [b] One SAK resulted in the upload of two distinct DNA profiles and one SAK resulted in the upload of 3 profiles for a total of 180 profiles uploaded to CODIS; [c] One SAK resulted in CODIS hits to three distinct offenders, one SAK resulted in CODIS hits to two distinct offenders, and two different SAKs resulted in CODIS hits to the same offender.

Table 23 presents a comparison of testing results for SAKs from national data (Research Triangle Institute [RTI], 2018), ACSO, and several other individual jurisdictions with published evaluation data. Comparisons show that ACSO has a slightly lower percentage of SAKs with DNA evidence suitable for testing (58.8%) compared to the other jurisdictions with this information available: Los Angeles (67.8%) and Houston (68.4%); however, a higher percentage of ASCO kits with DNA evidence suitable for testing returned a DNA profile: 92.4% of ACSO's SAKs compared to 80.4% of SAKs in Houston. Regarding the percentage of developed DNA profiles uploaded to CODIS, the ASCO rate (81.3%) was higher than the rate in Houston (78.9%) (Wells et al., 2018). The ACSO CODIS hit rate from uploaded profiles (44.2%) was nearly identical to the national rate (44.1%) (RTI, 2018), and lower than the other individual jurisdictions, from 48.9% in Houston (Wells et al., 2018) to 67.1% in Kentucky (Campbell et al., 2018). Finally, we note the number of new profiles uploaded to CODIS, that is profiles that were uploaded to CODIS for the first time (i.e., that did not result in a CODIS-hit): ACSO SAKs produced 107 new DNA profiles that were uploaded to CODIS or 60.1% of the profiles uploaded in the MN SAKI. In comparison, 55.9% of profiles uploaded to CODIS nationally were new profiles.

Table 23. Summary of Results for SAKs Tested in MN SAKI Compared to Other SAKI Jurisdictions.

	SAKs	SAKS with DNA Evidence Suitable for Testing	SAKS with DNA Profile Developed [b]	SAKS with Profiles Uploaded to CODIS [c]	SAKS with CODIS-hits [d]	SAKS with new Profiles Uploaded [d]
National Estimates RTI International (2018) [a]	42,484	-	-	11,336 - (26.7%)	5,001 44.1% (11.8%)	6,335 55.9% (14.9%)
ACSO (2021)	403	237 58.8%	219 92.4% (54.3%)	178 81.3% (44.2%)	72 40.7% (17.9%)	107 60.1% (26.6%)
Los Angeles Peterson et al. (2012)	1,948	1,320 67.8%	-	699 - (35.9%)	347 49.6% (17.8%)	352 50.4% (18.1%)
Detroit R. Campbell et al. (2015)	1,595	-	-	785 - (49.0%)	455 58.0% (28.5%)	300 42.0% (20.5%)
Houston Wells et al. (2016)	493	336 68.4%	270 80.4% (55.0%)	213 78.9% (43.0%)	104 48.9% (21.1%)	109 51.1% (21.9%)
LMPD KY B. Campbell et al. (2018)	403	-	-	173 - (42.9%)	116 67.1% (28.8%)	57 32.9% (14.1%)

Table Notes:

[a] Based on 54 jurisdictions as of October 2018 (https://www.rti.org/impact/sexual-assault-kit-initiative-saki-training-and-technical-assistance-tta); [b] First percentage listed is the conditional percentage – using # SAKs with DNA evidence suitable for testing; Percentage in parenthesis is the unconditional percentage – using # of Tested SAKs; [c] First percentage listed is the conditional percentage – using # SAKs with DNA profile developed; Percentage in parenthesis is the unconditional percentage – using # of Tested SAKs; [d] First percentage listed is the conditional percentage – using # SAKs with profiles uploaded to CODIS; Percentage in parenthesis is the unconditional percentage – using # of Tested SAKs.

What are the outcomes of testing SAKs in the MN SAKI project, including the number of ViCAP uploads and hits?

Beginning in 2018, SAKI sites must submit all "eligible" sexual assault cases to ViCAP (BJA, 2018; RTI, n.d.). The intention of this SAKI-ViCAP partnership is to increase the use of ViCAP and foster greater interagency communication to strengthen investigations of serial sexual assaults (BJA, 2018). While ViCAP's success and effectiveness as an investigative tool for such crimes is dependent on the quality of data being entered and number of agencies using the system in their investigations (Bennell et al., 2012; Haskins, 2019), little is known about the implementation processes in individual SAKI sites after the 2018 requirement was established, or what barriers SAKI sites have faced in meeting the requirement.

How did the MN SAKI team select cases to enter in ViCAP?

To begin understanding more about how ViCAP is used within SAKI jurisdictions, we conducted interviews with key members of the MN SAKI team to discuss their selection and decision-making processes. For the MN SAKI team, the ViCAP case selection involved a meeting of their MDT to review and select cases that involved a stranger perpetrator with some unique features (e.g., perpetrator said a particular phrase or used an uncommon item). The team indicated confusion regarding which cases were "ViCAP eligible." Some team members believed only cases involving a stranger perpetrator and a very clear, novel case detail (e.g., the perpetrator said or did something unique) should be uploaded to ViCAP. Further, another team member indicated they had been told cases involving perpetrators known to the victim (particularly intimate partner perpetrators) could not be entered. This was a concern to the MN SAKI team as prior research has demonstrated serial sexual offenders do not usually specialize in types of victims (i.e., assaulting both known and/or intimate individuals and strangers) (Lovell et al., 2016, 2017).

What are the differences between MN SAKI cases that were and were not entered in ViCAP?

Next, we identified the MN SAKI cases entered in ViCAP and examined bivariate differences between cases entered in ViCAP and those not entered in ViCAP. Descriptives for cases submitted to ViCAP and the results of the bivariate tests are presented in Table 24. Of the 407 SAKs in the treatment group, 22 (5.4%) were submitted to ViCAP. There were no investigatory leads or "hits" developed from ViCAP. Regarding the 22 cases submitted to ViCAP, offenses either occurred in a private location (i.e., victim's, suspect's, or third party's residence) (50%) or a public location (i.e., in a vehicle or outside) (45.5%) (see Table 10). Most ViCAP submitted cases did *not* involve multiple locations (95.4%) or multiple perpetrators (81%). The vast majority of ViCAP cases involved a stranger perpetrator (86.4%), with only one of the 22 cases (4.5%) perpetrated by a former intimate partner. The MDT decided to enter the case involving an ex-intimate partner suspect in ViCAP – despite confusion on whether cases involving intimate partners were eligible – because of the severity of the incident (i.e., involved kidnapping/captivity), unique statements made by the assailant during the assault, and because the victim reported the suspect had previously assaulted her in a similar manner, indicating he may be a serial offender. Additionally, the suspect was an illegal alien who was believed to be on the run from police since the incident. In many cases (40.9%) the perpetrator did not use a condom and perpetrators ejaculated in over a quarter (27.3%) of ViCAP cases. The perpetrator used, or threatened to use, a weapon in 31.8% of cases; typically using, or threatening to use, a knife (85.7%) or another type of weapon (14.3%) other than a gun. Perpetrators in ViCAP submitted cases also used or threatened to use force in 81.8% of cases and the victim was injured in almost half (45.5%) of ViCAP cases.

Due to small incidence counts (i.e., < 5 cases) for ViCAP cases across many of the

variables of interest, we were unable to conduct bivariate significance tests comparing ViCAP cases to non-ViCAP cases for some variables. For variables we were able to compare, ViCAP cases were significantly more likely to involve the use or threat of a weapon ($\chi^2 = 21.49$, $p < 0.001$) and the use or threat of force ($\chi^2 = 8.40$, $p < 0.01$). Suspects were significantly *less* likely to be identified in a ViCAP submitted case compared to non-ViCAP cases ($\chi^2 = 43.08$, $p < 0.001$) and, on average, significantly fewer suspects were identified overall for ViCAP cases compared to non-ViCAP cases ($t = 5.08$, $p < 0.001$). Finally, the victim was significantly less likely to have lost consciousness during the incident in ViCAP cases than non-ViCAP cases ($\chi^2 = 6.12$, $p < 0.05$). This is perhaps an unsurprising finding considering ViCAP is intended to compare cases based on detailed and unique aspects of the criminal offense, information that is more easily obtained from victim-survivors who were conscious.

Table 24. Descriptives for Characteristics Comparing the Treatment Group Cases Submitted to ViCAP and Not Submitted to ViCAP (*N* = 406 SAKs, *N* = 407 Victims).

Variable	Treatment Group (*N* = 407) [1] *M* (*SD*)/%	ViCAP Cases (*n* = 22) *M* (*SD*)/%	Non-ViCAP Cases (*n* = 385) *M* (*SD*)/%	t/x^2 (*p*-value) [7]
Time between Incident and Report (Days)[2]	*M* = 0.12; *SD* = 0.65 Range (0-10)	*M* = 0.24; *SD* = 0.89 Range (0-4)	*M* = 0.12; *SD* = 0.64 Range (0-10)	-0.83 (.41)
Witnesses Identified				0.01 (.94)
No	35.6	36.4	35.6	
Yes	64.4	63.6	64.4	
Number of witnesses	*M* = 1.35; *SD* = 1.47 Range (0-8)	*M* = 1.14; *SD* = 1.17 Range (0-4)	*M* = 1.37; *SD* = 1.49 Range (0-8)	0.71 (.48)
Location of incident				--
Public Location	68.1	45.5	20.5	
Private Location	7.6	50.0	68.8	
Semiprivate Location	18.4	-	4.7	
Multiple locations				--
No	94.6	95.4	93.8	
Yes	5.4	4.5	5.5	

Multiple alleged perpetrators				0.81 (.37)
No	87.3	81.0	84.9	
Yes	12.7	18.2	11.9	
Number of alleged perpetrators	*M* = 1.19; *SD* = 0.60 Range (1-5)	*M* = 1.29; *SD* = 0.78 Range (1-4)	*M* = 1.19; *SD* = 0.59 Range (1-5)	-0.72 (.47)
Victim-perpetrator relationship (Perpetrator 1) [3]				--
Stranger	20.6	86.4	17.9	
Romantic Partner	51.6	4.5	22.9	
Other Known Person	22.1	-	55.1	
Perpetrator used a condom				0.13 (.72)
No	85.6	40.9	59.2	
Yes	14.4	9.1	9.9	
Perpetrator ejaculated				1.64 (.20)
No	33.2	27.3	14.5	
Yes	66.8	27.3	30.9	
Weapon used/threatened				21.49 (< .001)
No	94.2	59.1	88.1	
Yes	5.8	31.8	6.0	
Type of weapon used/threatened (*n* = 30)				--
Gun	27.3	-	34.8	
Knife	59.1	85.7	47.8	
Other weapon	13.6	14.3	17.4	
Force used/threatened				8.40 (.004)
No	41.0	9.1	37.1	
Yes	59.0	81.8	49.6	
Coercion used (e.g., pressured victim to comply)				0.06 (.81)
No	88.9	86.4	80.3	
Yes	11.1	9.1	10.1	
Victim injured				1.19 (.28)
No	63.5	50.0	62.3	
Yes	36.5	45.5	34.8	
Incident involved kidnapping				--
No	95.5	86.4	93.8	
Yes	4.5	9.1	4.2	
Incident involved captivity				2.18 (.14)

No	93.5	81.8	91.9	
Yes	6.5	13.6	6.0	
Incident involved strangulation				--
No	94.1	90.9	90.9	
Yes	5.9	4.5	5.7	
Suspect/s identified (n = 407)				43.08 (< .001)
No	23.8	81.8	20.5	
Yes	76.2	18.2	79.5	
Number of identified suspects (n = 407)	M = 0.83; SD = 0.54 Range (0-3)	M = 0.27; SD = 0.70 Range (0-3)	M = 0.86; SD = 0.51 Range (0-3)	5.08 (< .001)
Suspect interviewed (n = 307)				3.06 (.08)
No	33.9	75.0	33.0	
Yes	66.1	25.0	66.0	
Suspect confessed (n = 307)				--
No	93.1	75.0	94.4	
Yes	6.9	25.0	4.6	
Case forwarded to Prosecutor (n = 310)				0.74 (.39)
No	30.0	50.0	30.1	
Yes	70.0	50.0	69.9	
Prosecutor filed charges (n = 216)				--
No	86.2	-	86.4	
Yes	13.8	100.0	13.6	
Current/Final Case Status				--
Prosecution Declined	44.9	-	45.5	
Prosecution Charged	7.4	9.1	7.5	
Exceptionally Cleared	21.5	-	16.4	
Unfounded	6.9	-	6.8	
Open (Active or Inactive Investigation)	19.3	86.4	15.6	
Victim Characteristics				
Victim sex				--
Female	98.0	100.0	97.9	
Male	2.0	-	2.1	
Victim age at time of incident	M = 25.19; SD = 10.56 Range (2-82)	M = 28.49; SD = 13.92 Range (13-60)	M = 24.99; SD = 10.33 Range (2-82)	-1.51 (.13)
Victim Minor				0.98 (.32)
No	76.8	68.2	77.1	

Yes	23.2	31.8	22.6	
Victim race/ethnicity				--
White/Caucasian	75.9	68.2	76.4	
Black/African American	6.1	9.1	6.0	
Other Race/Ethnicity	6.9	4.5	6.2	
Victim provided statement to law enforcement				--
No	4.7	-	6.2	
Yes	93.6	95.5	91.4	
Victim cooperated with investigation				--
No	14.0	-	16.4	
Yes	64.0	86.4	53.0	
Changed their mind	17.1	-	24.2	
Victim credibility concern				1.30 (.25)
No	73.1	59.1	72.7	
Yes	26.2	36.4	26.5	
Victim loss of consciousness				6.12 (.01)
No	60.5	81.8	60.0	
Yes	36.2	9.1	35.6	
Consensual partner within 72 hours of offense				0.11 (.74)
No	80.7	81.8	82.1	
Yes	11.0	9.1	11.7	
Victim mental health or disability diagnosis				0.28 (.60)
No	74.7	77.3	74.5	
Yes	24.0	18.2	23.6	
Victim consumed alcohol prior to assault				1.01 (.32)
No	41.9	50.0	40.3	
Yes	50.2	40.9	52.2	
Victim consumed drugs prior to assault				0.27 (.61)
No	68.6	63.6	68.6	
Yes	20.0	13.6	20.5	
Suspect Characteristics				
Suspect 1 Sex (n = 310) [6]				--
Female	1.0	-	1.0	
Male	99.0	100.0	99.0	
Suspect 1 race/ethnicity (n = 265)[5, 6]				--
White/Caucasian	45.2	-	60.1	
Black/African American	12.8	75.0	16.0	

Other Race/Ethnicity	7.1	25.0	9.2	
Suspect 1 age at time of incident (n = 299)	M = 29.64; SD = 11.58 Range (11-65)	M = 29.29; SD = 15.00 Range (18-39)	M = 29.66; SD = 11.59 Range (11-65)	0.04 (.96)
Suspect consumed alcohol prior to assault (n = 263) [6]				--
No	44.5	4.5	30.1	
Yes	55.5	22.7	36.6	
Suspect consumed drugs prior to assault (n = 240) [6]				--
No	82.5	4.5	51.2	
Yes	17.5	18.2	9.9	

Table Notes.

1. The sample of treatment group CSC cases sent for testing includes the 407 unique victim-survivors associated with 406 SAKs.
2. Percentages may not add up to 100% for every variable due to missing data. Data is unknown or missing on some variables because (1) police report and/or SANE report are missing from file or (2) victim does not know or cannot remember (e.g., was unconscious, assaulted in dark room, etc.).
3. Analyses only include information up to the first perpetrator/suspect (i.e., Victim-perpetrator relationship (Perpetrator 1)) due to small n-values.
4. There is an important distinction between "perpetrators" and "suspects" in the dataset. Perpetrators were derived from the victim-survivor's report of what happened, while suspects refer to a specific individual identified by the victim and/or law enforcement and named as a suspect in the incident report.
5. Due to small n-values, victim and suspect race/ethnicity was collapsed to White/Caucasian, Black/African American, Other.
6. Bivariate analyses were not computed for comparisons due to small cell sizes (< 5%).
7. Alpha is set at $p < .05$

What are the processes, barriers, and opportunities for SAKI-ViCAP?

In addition, we interviewed members of the MN SAKI team, key staff from the Bureau of Justice Assistance (BJA) Forensics Unit, and team members from a SAKI site identified by BJA as a 'model' SAKI-ViCAP site to better understand SAKI-ViCAP processes, barriers, and opportunities.

MN SAKI Team Perspectives

We first interviewed members of the MN SAKI team to better understand their case submission processes, use of ViCAP as an investigatory tool, and barriers to greater use of ViCAP. Once a SAKI case was selected for ViCAP entry, the case files would be sent to one of two forensic scientists at the BCA to enter relevant case information into the ViCAP system. A handful of early SAKI cases selected for ViCAP were entered by a data analyst within ACSO.

The team identified several major barriers to their increased use of ViCAP for SAKI cases, including the time consuming, confusing, and burdensome case entry process. Notably, the entry personnel for this team are forensic scientists or data analysts, rather than law enforcement officers (LEO). The forensic scientists responsible for entering ViCAP cases shared that the system was "clearly created for law enforcement to enter their cases, not for scientists." The biggest challenge they faced was unfamiliar law enforcement-specific terminology used throughout the system regarding components of the sexual assault investigations which were difficult to understand or quickly identify within the case files. Additionally, because the entry personnel were not LEOs, they faced long wait times to gain approval and access to LEEP, the law enforcement portal under which the ViCAP system is housed. The data analyst who previously entered ViCAP cases suggested a potential solution to the long approval and account creation periods could be to allow access to only the ViCAP system, instead of the entire LEEP system. Long wait times on background checks and account approvals created even longer delays in case entry for the SAKI site. These concerns are further exacerbated by high rates of staff or role turnover, meaning new ViCAP entry personnel regularly need authorization and access to ViCAP.

Other barriers to increased use of ViCAP included challenges accessing the original sexual assault investigation records and the cumbersome process of identifying all fields ViCAP requests in the original case files. Most SAKI cases submitted to ViCAP (n = 12, 60%) were from between 1995-2004, meaning the original investigations were conducted at best over 14 years before the data analysts were entering data into ViCAP. Many original investigators had left the agency or moved to other departments by 2018 when SAKI established the new ViCAP requirement. Further, the MN SAKI team members had varied training experiences for ViCAP.

The lead data analyst and ViCAP entry personnel attended a two-day, extensive training on ViCAP entry and investigative capabilities, but another detective who had previously entered ViCAP cases for the team had only a brief online training explaining the purpose of ViCAP, but not how to use the system. These variations in training left many team members feeling unfamiliar with the system and increased the amount of varied information and misconceptions being shared between the team. Due to these barriers and lack of clear information regarding case eligibility and how to use ViCAP for investigative purposes, the MN SAKI team currently uses ViCAP as mandated by the SAKI grant by entering cases but is not leveraging ViCAP to its fullest for sexual assault investigations.

Bureau of Justice Assistance Forensics Unit Perspectives

To learn more about BJA's expectations for SAKI sites and the use of ViCAP for SAKI cases and investigations, we interviewed the supervisor and a key staff member of the BJA forensics unit. These interviewees are responsible for overseeing the National SAKI and were essential in developing the SAKI-ViCAP partnership and ViCAP-related award requirement changes. The interview with BJA focused on gaining further insight into the SAKI-ViCAP partnership and how ViCAP can be more successfully implemented in SAKI sites. BJA emphasized that "entering cases in ViCAP is the bare minimum", and that many jurisdictions are not fully leveraging ViCAP or the available ancillary services/resources. BJA identified several misconceptions or confusions prevalent among law enforcement agencies and SAKI teams, including that only stranger assaults can be uploaded or only cases with DNA, that an automated system or the ViCAP crime analysts will do all the work connecting cases for the agency, and/or that ViCAP is only a database of serial cases.

Case eligibility, or the types of cases appropriate for ViCAP, is a major source of confusion and misunderstanding between SAKI sites. Based on interviews with the MN SAKI

team, their MDT only selects cases that have clearly unique features to upload to ViCAP. BJA clarified that "about 95% of cases *should* be submitted to ViCAP [and] only a handful of cases should not" (emphasis added). Specifically, any case that is possibly serial in nature should be submitted. This would include every case with a CODIS hit (i.e., two or more cases connected through matching DNA in CODIS). Many sites, BJA acknowledged, believe they should only be submitting cases without a known suspect, but ViCAP can be useful for cases with a known suspect, with or without DNA, as it can tie together incidents committed by the same offender but that may not have DNA.

Identifying investigative leads and connected cases in ViCAP is another breakpoint for SAKI teams in ViCAP. BJA suggested that "sites that get the most out of [ViCAP] seem to be the ones that do not just enter cases and leave," instead it is the sites actively searching ViCAP for similar cases and working with their site's ViCAP analyst that have the most success (see below for more detail on ViCAP processes and recommendations from one such a site). Many sites view ViCAP outcomes as similar to CODIS, in which automatic "hits" for connected cases will be generated by the system or by ViCAP analysts and sent to the investigators with little direct input or effort on the investigator's part. Instead, investigators must search key words and case characteristics to identify possible connected cases. This misconception may be aggravated by the limited public-facing information on ViCAP, most discussions on ViCAP in relation to SAKI sites simply tacks ViCAP on with CODIS and requirements to "submit eligible cases" (BJA, 2018; Powers & Mills, 2018; RTI, n.d.).

On a related note, a "hidden gem" of ViCAP is that it is not just a database but "also a service… with a team of analysts to which you can put an official request to for them to coordinate between agencies that have entered connected cases across the country." These

analysts can create timelines, compile criminal histories or suspect profiles, cross match cases, and send out alerts across the country with suspect or offense information. The problem is that many SAKI sites and law enforcement agencies do not know about or take advantage of this resource.

BJA ViCAP and SAKI offer multiple training courses on entry processes, requirements, and searching ViCAP for investigative leads. The challenge, they acknowledge, is keeping SAKI sites continuously trained as SAKI site coordinators and/or ViCAP entry personnel for the site regularly leave or change positions, bringing new, untrained staff in. Sites using law enforcement or retired law enforcement personnel for ViCAP entry have an easier time accessing and getting familiar with ViCAP as it uses common law enforcement terminology and is connected to several other investigative tools or systems (i.e., through the Law Enforcement Enterprise Portal [LEEP]). Another issue with training is when entry personnel do not regularly use ViCAP and must re-familiarize themselves with the system every time a new case comes across their desk. The BJA team suggested entry personnel can retain familiarity and comfort with working in the system if they increase their use of ViCAP for more than just case entry (i.e., searching for investigative leads regularly).

An additional challenge BJA identified was the lack of staffing for ViCAP analysts. There are currently eight analysts for the entire country; as case entry increases with the SAKI requirements and increased knowledge of ViCAP in law enforcement agencies the workload can far outpace the staffing available. This puts greater pressure on the personnel in individual agencies entering cases to ensure they are entering cases correctly and with as much information as possible on the front end – not relying on analysts to tell them what is still needed or inaccurate. They acknowledged that sexual assault cases “can be the best [types of] cases to

search in ViCAP because the victims are alive to confirm details." If more jurisdictions increased their use of ViCAP – in both case entry and searching for investigative leads – the system could become an even more valuable tool.

Model SAKI-ViCAP Site Perspectives

We additionally interviewed a "model" SAKI site referred to us by the BJA forensics unit. This site was lauded as an ideal example of a site using ViCAP as it is intended for sexual assault cases. A major theme throughout the interview with the model SAKI site was that too few SAKI sites, and law enforcement agencies in general, are entering into ViCAP. This lack of widespread participation makes it difficult to get full value out of the system. As with many nation-wide databases, "ViCAP is only as good as the number of cases [and quality of information] that get entered." The model SAKI site expressed a strong desire for more sites to enter cases, but also for sites to regularly search the system to make connections between cases and increase communication across jurisdictions. The model site identified the earlier discussed misconception about ViCAP and receiving "hits" automatically, like an investigator might receive through CODIS, as a major barrier to greater participation in more jurisdictions. However, the interviewees also indicated they personally did not have difficulty using ViCAP as an investigative tool once processes were established. One recommendation presented for other jurisdictions is to increase how often investigators/ViCAP staff are engaging with the system. In other words, they recommend developing processes or habits that have investigators regularly searching ViCAP for connected cases on a weekly basis.

The model SAKI-ViCAP site team also highly recommended taking advantage of the services and assistance offered through a jurisdiction's ViCAP analyst/representative. As discussed above, ViCAP crime analysts are available to aid investigators in connecting cases, creating timelines or suspect profiles, bridging connections between distant jurisdictions, and

providing national alerts and bulletins to more quickly and efficiently solve or close cases. The model site indicated their good-standing relationship with their jurisdiction's ViCAP analyst was essential in at least one of their ViCAP success stories and has helped ViCAP entry personnel and investigators quickly answer questions or share new important information with the rest of the SAKI team.

Two success stories from the model SAKI-ViCAP site demonstrate the potential of ViCAP for sexual assault investigations. In the first example, an investigator described using the ViCAP search engine to look for cases with matching or similar characteristics to a series of rapes that had occurred in their jurisdiction. They identified five cases within the ViCAP system nationwide that were potential matches to their cases, one of which was just a few counties away from their jurisdiction. Triangulating the ViCAP information and other law enforcement systems at their disposal, like the Link system, investigators were able to confirm the other jurisdiction's case was nearly identical to the cases they were investigating and were able to identify a connected suspect from the other jurisdiction's reports. In a second example, the model SAKI-ViCAP site reached out to their ViCAP representatives to request an alert be sent out nationwide to apprehend a known suspect who had fled their area. Within a day the alert was sent to ViCAP sites across the country and the suspect was apprehended several miles away.

One key recommendation from the model SAKI-ViCAP team included sending ViCAP representatives from site-to-site to walk SAKI teams through the ViCAP cases entry and case search processes. While the team reported that the trainings currently offered through SAKI and the FBI are useful, these are not required of all SAKI personnel and their availability may not be widely known – particularly when turn-over in SAKI site personnel occurs frequently for smaller jurisdictions. Ultimately, the model SAKI-ViCAP site team praised ViCAP as a relatively easy

tool to use, both in submitting and searching cases, and very valuable for investigating unique and serial sexual assault cases. However, the team also agreed ViCAP is still underutilized and largely misunderstood across many SAKI sites.

Overall, these interviews demonstrate that ViCAP can be a valuable tool for sexual assault investigations but currently the widespread misunderstandings/confusion and lack of buy-in are limiting the full potential of ViCAP. Misunderstandings largely center on case eligibility requirements, how to connect cases within ViCAP (i.e., manual searches for similar case features or "hits" sent by ViCAP analysts), and what trainings are available and how to access them. BJA and the ViCAP team offer multi-day training for ViCAP entry and investigative use; however, the high rates of turnover among SAKI sites means that basic-level trainings need to be regularly available on short notice to get new personnel up to speed on terminology, how to enter cases, and how to search for similar cases in other jurisdictions. The 2018 SAKI-ViCAP partnership is increasing knowledge of ViCAP and its value for criminal investigations, but continued education and information sharing to SAKI sites is vital to continue to increase buy-in. The time, personnel, and effort required for entering cases, the challenge of accessing ViCAP for new and non-law enforcement personnel, the difficulty getting required case information for older cases, and the lack of participation by many other law enforcement agencies in the state and country were identified as major factors limiting the value of ViCAP for investigations.

What are the costs and benefits of testing SAKs in Anoka County, MN regarding the identification of serial offenders?

One of the benefits to SAKI projects may be the detection of serial sexual perpetrators, or the identification of previously unknown offenders in both sex and non-sex crimes. As noted above, the MN SAKI project resulted in 180 profiles uploaded to CODIS and the detection of 74 unique offenders across 72 SAKs. We used Minnesota Case Search to identify other criminal

cases associated with these 74 offenders; for offenders who were identified from other states, or had offender IDs from other states, public facing databases for those states were examined, too. Incidents were categorized as followed in accordance with the Minnesota Criminal Code (1) Rape (i.e., attempted or completed CSC 1st degree vaginal or anal penetration), (2) Other CSC (i.e., any other attempted or completed CSC 2nd – 5th degree), (3) Domestic violence (i.e., domestic assault – any degree – or violation of protection order, (4) Other violent crime against persons (e.g., assault, homicide, bodily harm, harassment, threats of violence, (5) Property crimes (e.g., burglary, arson, theft of property), (6) Drug crimes (e.g., possession, possession intent to sell), and (7) Other crimes (e.g., disorderly conduct, DWI). Traffic offenses (e.g., speeding) were excluded.

As noted above, one of the 74 offenders in the current analysis was associated with a CODIS hit to two separate cases in the MN SAKI project. Results indicated that the majority of these 74 offenders (64.0%) had committed a crime prior to the offense associated with the SAK tested in the MN SAKI project. The total number of criminal history charges ranged from 0 to 57 (M = 5.9; SD = 9.8) for a total of 441 charges. Nearly 10% of offenders had at least one prior criminal charge for rape or criminal sexual conduct (Range = 0 – 7; M = 0.24; SD = 0.98), nearly 23% for domestic violence (Range = 0 – 6; M = 0.52; SD = 1.1), and 25% for other violence (Range = 0 – 6; M = 0.52; SD = 1.1). In addition, 34.7% of offenders had at least one prior criminal charge for property crimes (Range = 0 – 40; M = 5.2; SD = 1.7), 33.3% for drug crimes (Range = 0 – 8; M = 0.75; SD = 1.6), and 48.0% for other crimes (Range = 0 – 11; M = 1.7; SD = 2.7).

Nearly 71% (70.7%) of offenders had at least one criminal charge after the offense associated with the SAK tested in the MN SAKI project. The total number of criminal recidivism

charges ranged from 0 to 33 (M = 6.5; SD = 7.8) for a total of 489 charges. Nearly 11% (10.7%) of offenders had at least one criminal charge for rape or criminal sexual conduct after the offense associated with the SAK tested in the MN SAKI project (Range = 0 – 3; M = 0.17; SD = 0.55), nearly 23% for domestic violence (Range = 0 – 7; M = 1.1; SD = 1.8), and 25% for other violence (Range = 0 – 6; M = 0.75; SD = 1.4). In addition, 34.7% of offenders had at least one criminal charge for property crimes (Range = 0 – 15; M = 1.3; SD = 3.0), 33.3% for drug crimes (Range = 0 – 8; M = 0.79; SD = 1.5), and 48.0% for other crimes (Range = 0 – 20; M = 2.4; SD = 3.8) after the offense associated with the SAK tested in the MN SAKI project.

What are the monetary costs and benefits of testing SAKs in Anoka County, MN?

Finally, we were interested in the monetary costs and benefits of testing SAKs in the MN SAKI project. Table 25 displays the cost parameters associated with the SAK initiative in Anoka County. Testing supplies for each kit were estimated at $400, and the forensic scientists who tested them earned approximately $32 per hour. They estimated it took about 16 hours to test each kit; thus, the total cost of DNA testing (including supplies and wages for the forensic scientists) was $912 per kit. Meanwhile, the cost associated with investigating and providing victim advocacy worked out to $1,864 per kit resulting in a CODIS hit (n = 72) and $932 per kit that did not result in a CODIS hit (n = 331). Finally, the societal cost of sexual assault breaks down as follows: $8,098 in tangible costs per victim (e.g., medical expenditures, cash losses, property theft/damage, lost wages due to injury, and other victimization-related costs) and $290,999 in intangible costs per victim (e.g., pain and suffering, decreased quality of life, and psychological distress based on jury awards; see McCollister et al., 2010). When estimating recidivism rates for the indicted, non-dismissed investigations that resulted in conviction (n = 2), we took two approaches. First, we follow Lovell et al. (2021), who estimated that 25% of

offenders in Cuyahoga County would have committed a future sexual assault (they note this is likely an underestimate). Second, we assume a 50% recidivism rate, based on the observation that 1 of the 2 individuals convicted because of the MN SAKI was charged with 1st degree criminal sexual conduct for an offense (among several) committed just two months after his original SAK offense (wherein the kit was not tested). Of course, even 50% might be an underestimate, given that only 1 in 5 rapes/sexual assaults are reported to police (Thompson & Tapp, 2023).

Table 25. Cost Parameters of the MN Sexual Assault Kit Initiative Project.

	CODIS hits (n = 72)	No CODIS hits (n = 331)
Cost of testing SAKs		
Cost for testing supplies per kit	$400	$400
Cost of forensic scientists per hour	$32	$32
Estimated number of hours spent testing kits	1,152	5,296
Cost for forensic scientists to test each kit	$512	$512
Total cost of DNA testing per kit	$912	$912
Cost of investigating and providing victim advocacy		
Cost of investigator's time per hour	$50	$50
Estimated number of investigative hours	2,365	5,435
Cost to investigate each kit	$1,642	$821
Cost of victim's advocate time per hour	$23	$23
Estimated number of victim's advocacy hours	694	1,594
Cost of victim advocacy per kit	$222	$111
Total cost to investigate and provide victim advocacy per kit	$1,864	$932
Cost to victims (societal cost)		
Total tangible cost of a sexual assault per victim	$8,098	$8,098
Total intangible cost of a sexual assault per victim	$290,999	$290,999
Estimated recidivism for indicted, non-dismissed investigations that resulted in conviction	25-50%	25-50%

We present the total costs of the MN SAKI in Table 26. Overall costs are presented, as well as costs associated specifically with kits that resulted in CODIS hits or no CODIS hits, respectively. Of the 403 previously untested kits, 72 resulted in at least one CODIS hit. These CODIS hits resulted in 8 new investigations being opened, 2 indictments being returned, and 2 convictions being secured. Overall, the cost of testing supplies needed to test 403 kits was $161,200. The overall cost associated with salaries for the forensic scientists was $206,336. Meanwhile, the overall cost of the investigator's salary (over a 3.75-year period) was $389,975. Finally, the cost of victim advocacy was estimated at $52,725. Ultimately, the cost to test, investigate, and provide victim advocacy for these 403 previously untested kits was $810,236.

Following Lovell et al. (2021), if we assume the individuals who were convicted would have recidivated at a rate of 25%, then the estimated tangible cost savings of future sexual assaults averted would be $4,049, and the estimated intangible cost saving would be $145,500. Subtracting these tangible and intangible savings from the total cost of testing, investigating, and providing victim advocacy, the net cost of the MN SAKI would be $660,687. For kits resulting in a CODIS hit, the price tag was $125 each; for kits not resulting in a CODIS hit, it was $1,514.

Importantly, the 25% recidivism rate is just an estimate – one that Lovell et al. (2021) pointed out was likely an *under*estimate. In fact, with the benefit of hindsight, we know that 1 of the 2 individuals who were convicted because of the MN SAKI project went on to commit 1st degree CSC just two months after his initial SAK offense. Thus, the cost-benefit analysis works out differently if we assume a 50% recidivism rate – which is reasonable if we assume these two individuals would have continued offending at a similar rate were they not convicted. Assuming a 50% recidivism rate, the tangible cost savings of future sexual assaults averted would be $8,098 and the intangible cost savings would be $290,999. Subtracting these savings from the

overall cost of testing, investigating, and providing victim advocacy, the overall net cost of the MN SAKI would be $511,139 – or $1,268 per kit. However, strictly investigating those kits that resulted in a CODIS hit would yield $246 in *cost savings* per kit, or just shy of $100,000.

Table 26. Total Costs of the MN Sexual Assault Kit Initiative Project.

	Assuming 25% recidivism			**Assuming 50% recidivism**		
	Overall	CODIS hits	Difference	Overall	CODIS hits	Difference
Number of kits tested	403	72	331	403	72	331
Number of investigations	8	8	0	8	8	0
Number of indictments	2	2	0	2	2	0
Number of convictions	2	2	0	2	2	0
Total cost of testing supplies	$161,200	$28,800	$132,400	$161,200	$28,800	$132,400
Total cost of forensic scientists	$206,336	$36,864	$169,472	$206,336	$36,864	$169,472
Total cost of investigations	$389,975	$118,224	$271,751	$389,975	$118,224	$271,751
Total cost of victim advocacy	$52,725	$15,984	$36,741	$52,725	$15,984	$36,741
Total cost to test, investigate, and provide victim advocacy	$810,236	$199,872	$610,364	$810,236	$199,872	$610,364
Estimated total tangible cost savings of future sexual assaults averted due to convictions	$4,049	$4,049	0	$8,098	$8,098	0
Estimated total intangible cost savings of future sexual assaults	$145,500	$145,500	0	$290,999	$290,999	0

averted due to convictions						
Estimated total (tangible + intangible) cost savings of future sexual assaults averted due to convictions	$149,549	$149,549	0	$299,097	$299,097	0
Societal total cost (tangible and intangible cost to victims)						
Total cost due to Task Force	$660,687	$50,323	$610,364	$511,139	-$99,225	$610,364
Total cost due to Task Force per kit	$1,639	$125	$1,514	$1,268	-$246	$1,514
Societal tangible cost to victims only						
Total cost due to Task Force	$806,187	$195,823	$610,364	$802,138	$191,774	$610,364
Total cost due to Task Force per kit	$2,000	$486	$1,514	$1,990	$476	$1,514
Cost to law enforcement						
Total cost due to Task Force	$810,236	$199,872	$610,364	$810,236	$199,872	$610,364
Total cost due to Task Force per kit	$2,010	$496	$1,514	$2,010	$496	$1,514

Table Notes: (-) indicates cost savings.

As noted above, our data also shows that most of the offenders identified through CODIS hits went on to commit additional serious crimes after the sexual assault associated with their previously untested SAK. Importantly, more than 50% of the cases associated with CODIS hits were either open investigations or had been declined by the prosecutor, and another 30% had been exceptionally cleared by the original detective (See Chapter 3). As noted by Hoelscher (2018), it is reasonable to question whether testing these SAKs during the original investigation

may have bolstered the investigation and led to additional prosecutions for the sexual assault, thereby reducing the opportunity for these individuals to commit additional crimes and the associated costs of these crimes. As such, using previously identified estimates of the tangible and intangible costs of serious crimes: murder, rape/sexual assault, domestic violence, other violent crime, and property crimes, we estimated the costs of recidivist crimes for individuals associated with CODIS hits in the MN SAKI project. For murder, rape/sexual assault, other violent crime, and property crime cost estimates stemmed from McCollister et al. (2010) and were adjusted to 2023 dollars using the U.S. Bureau of Labor Statistics CPI inflation calculator. Tangible costs include cost to the victim (e.g., medical expenses, property theft or damage, lost earnings because of injury), criminal justice system costs (e.g., police protection costs, legal and adjudication costs, and corrections costs), and criminal careers costs (e.g., productivity losses associated with perpetrators choosing crime as opposed to legal employment); intangible costs included pain and suffering and risk of homicide costs. For domestic violence, tangible cost estimates stemmed from Peterson et al. (2018), and similar to the cost estimates from McCollister et al. (2010) described above, include cost to the victim (e.g., medical expenses, property theft or damage, lost earnings because of injury), criminal justice system costs (e.g., police protection costs, legal and adjudication costs, and corrections costs), and criminal careers costs (e.g., productivity losses associated with perpetrators choosing crime as opposed to legal employment). Estimates of intangible costs for domestic violence were difficult to find in the published literature; however, one study from Clark et al. (2002) estimates the intangible costs of non-fatal physical assaults against women inclusive of jury awards for pain, suffering, and lost quality of life; costs were corrected for 2023 dollars.

As seen in Table 27, the 74 offenders associated with CODIS hits in the MN SAKI

project were convicted for 1 murder, 10 rapes/sexual assaults, 47 domestic violence offenses, 34 other violent crimes (aggravated assault and robbery), and 68 property crimes (average of costs for arson, motor vehicle theft, stolen property, household burglary, embezzlement, forgery/counterfeiting, fraud, vandalism, and larceny/theft). Tangible recidivist costs per conviction ranged from $10, 571 for property crime to $1,873,234 for murder while the intangible costs per conviction ranged from $886 for property crime to $12,305,091 for murder; the total costs for the 160 recidivist convictions totaled $30,759,139 (See Table 26). Again, while it is unlikely that testing these SAKs during the original investigation would have led to deterrence of *all* these recidivist offenses, it draws attention to the high costs of recidivist crimes among these offenders, and highlights that the tangible costs of recidivist crimes far exceed the cost of testing SAK evidence.

Table 27. Cost-Per-Recidivist Conviction Calculations from Offenders Identified by CODIS Hits in the MN Sexual Assault Kit Initiative Project.

Offense	Total Recidivist Convictions	Tangible Costs per conviction	Intangible Costs per conviction	Combined Costs per conviction	Total Costs
Murder	1	$1,873,234	$12,305,091	$14,178,325	$14,178,325
Rape/Sexual Assault	10	$60,129	$290,999	$351,128	$3,511,280
Domestic Violence	47	$136,485	$41,479	$177,964	$8,634,308
Combined Other Violent Crime Average	34	$29,769	$85,706	$115,475	$3,926,150
Combined Property Crime Average	68	$10,571	$886	$11,457	$779,076
Total	160	$1,883,805	$12,305,977	$14,189,782	$30,759,139

Table Notes:

1. Tangible and intangible costs for murder, rape/sexual assault, combined other violent crime average, and combined property crime average come from McCollister et al. (2010) and were converted from January 2008 dollars to October 2023 dollars.
2. Tangible costs for domestic violence come from Peterson et al. (2018) and were converted from January 2014 dollars to October 2023 dollars; intangible costs come from Clark et al. (2002) and were converted from January 1198 dollars to October 2023 dollars.
3. Combined other violent crime average is an average of the costs associated with aggravated assault and robbery.
4. Combined property crime average is an average of the costs associated with arson, motor vehicle theft, stolen property, household burglary, embezzlement, forgery/counterfeiting, fraud, vandalism, and larceny/theft.

Summary and Conclusions

The information presented above regarding CODIS hits and ViCAP highlight that the success and effectiveness of these programs as investigative tools are highly dependent on the quality and quantity of data entered and the number of agencies using these systems in their investigations. In Anoka County, based on the high rate of CODIS hits produced by processing previously untested SAKs, the mandatory testing policies and additional funding dedicated to SAK testing (See Chapter 4), will likely continue to increase arrests and prosecutions for sexual assault in Minnesota. Research on SAK testing efforts have revealed that the failure to test SAKs denies justice to sexual assault survivors and allows serial offenders to go unidentified (Valentine et al., 2019; Lovell et al., 2018). As the data in this report show, offenders linked through CODIS hits are likely serial offenders who have lengthy criminal records and who go on to commit additional sexual assaults and other violent crimes. Like Lovell et al. (2018), data in Anoka County revealed that additional crimes may have been prevented if SAKs were submitted and tested during the original investigation. The data also revealed that 74 unique offenders were linked to offender or forensic hits across 11 states. As more cases are processed through CODIS, more cross-jurisdictional offenders can be identified and held accountable. Minnesota has already taken steps toward preventing future backlogs by passing legislation mandating all unrestricted SAKs be submitted and tested and tested quickly (i.e., as close to 90 days as possible) as well as providing continuous funding to support timely testing. Testing SAKs quickly may increase the investigative utility of forensic evidence and CODIS hits to hold offenders accountable and prevent future crimes.

Like CODIS, the utility of ViCAP is also dependent on the information entered into the program. From interviews with key stakeholders in Minnesota and other jurisdictions, the

research team learned that confusion was common regarding which cases were eligible for ViCAP entry and the investigative benefits of the program for SAKI sites. To combat this issue, ViCAP training should be offered more frequently to keep SAKI personnel up to date. More information on ViCAP requirements, case eligibility criteria, and functionality should also be available on the SAKI TTA website and distributed to existing SAKI sites. Making more information readily available could reduce some confusion among ViCAP users and promote the program as an important investigative tool. Additionally, it may be beneficial to require new applicants for SAKI funding to include a salary line for at least one full-time employee to enter cases and search ViCAP regularly for investigative leads.

The costs associated with testing Anoka County's 403 previously untested SAKs as part of this initiative totaled approximately $810,000. Calculating the cost *benefits* of the initiative is a thornier analysis, but we have taken several approaches to generate several estimates. Assuming those convicted because of the initiative would have committed future sexual assaults at a rate of 25% (Lovell et al., 2021), the savings in terms of tangible and intangible costs to society would be approximately $150,000. However, we observed that one of the two persons convicted had reoffended ~2 months after his initial offense that generated an untested SAK. So, if we assume those convicted because of the initiative would have recidivated at a rate of 50%, the tangible and intangible cost savings would be closer to $300,000. Similarly, we show that cost savings were likely much higher once we account for the fact that many offenders identified through CODIS hits went on to commit additional serious crimes after the sexual assault associated with their previously untested SAK. Had their SAKs been tested during the original investigations, there may have been additional prosecutions for sexual assault (and other crimes), thereby averting approximately $30 million dollars in tangible and intangible costs to society.

Chapter 7: Summary of Project Findings and Implications

This evaluation used a multimethod design to examine the context and correlates of cases of reported criminal sexual conduct associated with untested SAKs (Goal 1), the process of victim notification and advocates' and victim-survivors' perspectives on notifications (Goal 3), and the outcomes of testing previously untested SAKs in the MN SAKI project (Goal 4). We also explored changes in the legislative, policy, and training initiatives related to the responses to sexual assault in Minnesota before and during the MN SAKI project (Goal 2). Below we summarize the major findings for each goal and outline the limitations and opportunities for future research.

Goal 1 – Eliminate Untested Kits

Findings from a review of the law enforcement case files showed that all the cases of criminal sexual misconduct associated with an untested SAK in the MN SAKI project had been assigned a detective and investigated when it was reported. Further, most cases had been closed by law enforcement after forwarding the case to the prosecutor, with 65 cases resulting in a conviction without testing the SAK. Cases that were forwarded to the prosecutor and declined (without testing the SAK) were primarily "consent cases" where the perpetrator was known to the victim. No information about why SAKs were not tested as part of the original investigation was included in the case files, but it is likely that the detectives and/or prosecutors believed that the SAK had little evidentiary value in these cases. However, 6% of untested SAKs were associated with an inactive investigation where there was an unknown and/or a familial perpetrator; it is unknown why these SAKs were not tested.

Further, binary logistic regression analysis of cases with a previously untested SAK (i.e., treatment group cases) and cases with a SAK that was tested as part of the original investigation

during the same time period (i.e., control group cases) revealed that cases with an untested SAK were less likely to involve stranger perpetrators or other known perpetrators, injured victims, and victims who wanted an investigation, and were reported more quickly than cases with a tested SAK. These findings were largely consistent when victim and suspect characteristics were added to the model; cases with victims who identified as Black were less likely to have an untested SAK, and suspect characteristics were not significantly related to SAK testing status.

Taken together, these findings suggest that most previously untested SAKs had not been tested for practical reasons related to the perceived evidentiary value of the SAK (e.g., the SAK did not need to be tested because the suspect was known to the victim). As such, the MN SAKI project presents a different picture of previously untested SAKs than some other SAKI projects. For example, in Detroit, evidence suggests that many cases with previously untested SAKs had not been investigated at the time of report and that victim characteristics (e.g., race, age) and victim credibility concerns were primary reasons for the failure to investigate the case or test the kit.

Results highlight the need for a broader understanding of why criminal justice system actors may have, historically, chosen not to test a SAK and the implications on SAKI projects and project outcomes (e.g., new charges, convictions). For example, in jurisdictions where most untested SAKs are associated with cases that had been fully investigated at the time of report, the suspects are known to the victim-survivors, and the prosecutor had declined to prosecute, testing the SAKs may not change the status of the cases. In other words, testing SAKs may not result in high numbers of new charges or new convictions. For SAKI projects, understanding the specific case characteristics associated with their untested SAKs may help team members better set goals, create guidelines, and make staffing decisions rather than relying on information from prior

projects with potentially wildly different cases.

While the analyses for goal 1 were strengthened by using a quasi-experimental design, some limitations should be noted. First, there was some missing data for victim and suspect race. We did compare cases with and without missing victim and/or suspect race data and did not find any significant differences on case characteristics, but this missing data did result in loss of cases/sample size in the final multivariate models. Further, our control group includes cases from 2008 to 2015; 2008 is the first year that the BCA's SAK case records are digitized. While approximately 25% of the treatment group cases are from before 2008, it was not feasible to include control group cases from these earlier years.

Goal 2 – Build Capacity to Test SAKs and Process Cases After SAK Testing

Our review of the historical context and legislative and policy changes regarding the response to sexual assault in Minnesota revealed sweeping changes over the last decade. At the time of writing, the BCA has finished testing all previously untested SAKs identified in the 2015 inventory. Since 2015, Anoka County Sherrif's Office has submitted all new, unrestricted SAKs for testing, and since 2022, all law enforcement agencies in Minnesota submit all unrestricted SAKs for testing. Further, not only has the Minnesota legislature mandated that all unrestricted SAKs be tested, but it has allocated considerable one-time and continuous funding to support mandatory SAK testing. Further, multiple SAKI projects across major cities and counties in Minnesota (e.g., Duluth, Minneapolis, Anoka County) have led to reengagement with hundreds of victim-survivors and the opportunity for victim-survivors to make decisions about how their previously reported sexual assault will be handled moving forward. Further, Minnesota has also instituted a statewide tracking system for newly submitted SAKs so that victims, healthcare professionals, detectives, and forensic scientists have real time information about the SAK.

In addition, the MN SAKI project has supported statewide training to educate stakeholders across the state on these changes to support the consistent application and enforcement of the numerous new mandates regarding SAK submission, testing, tracking, and victim's right to information on their SAK (i.e., Track-Kit). Finally, the MN SAKI MDT has supported the development of a statewide investigative guide, to again, support consistency in sexual assault investigations across the state.

Minnesota has made consistent, incremental changes in their response to sexual assault over the past decade. Taken together, we would recommend that other states consider similar legislative changes that (1) mandate testing all unrestricted SAKs, but also (2) allocate adequate funding to ensure that SAKs can be tested in a timely manner. Further, training opportunities that support trauma-informed investigations across an entire state will likely increase the likelihood that victim-survivors are treated with compassion and dignity and that perpetrators are held accountable.

While we conducted a thorough review of legislation and policy changes, reviewed data on training needs and the trainings provided, and interviewed detectives, advocates, and forensic scientists, we were not able to interview the team member from the Anoka County Attorney's Office (ACAO). Since interviews asked SAKI team members to reflect on the SAKI project, they were conducted at the end of the project study period. The MN SAKI ACAO prosecutor left the project in the weeks before interviews were conducted, and it was not feasible to interview him before he left his position. As such, it should be noted that an important MDT member's perspective is omitted from this analysis.

Goal 3 – Strengthen Victim Services

Consistent with best practices from other SAKI projects, the MN SAKI project created

trauma-informed guidelines for victim notification and used a case review team to make decisions regarding active notifications. They notified victim-survivors only when the recently tested SAK produced forensic evidence and the SAKI investigator believed there was the possibility of new investigatory leads, and the case review team had no compelling evidence that the victim-survivor did not want an investigation or would be unduly harmed by the notification. A victim advocate conducted the initial victim notifications, and most notifications were conducted by phone.

Active victim notifications required significant effort by the victim advocate to locate victim-survivors, and while most victim-survivors were located and notified, the majority did not want to participate in a new investigation. Of note, victim notifications were conducted more than 11 years on average since the assault and data from victim reaction forms and MDT member interviews suggests that victim-survivors had moved on and were not interested in reopening the past trauma of the assault. At the same time, interviews with victim-survivors suggested that they were glad they were notified and that being notified over the phone was their preferred method of notification. Further, two victim-survivors whose cases were forwarded to law enforcement by the prosecutor reported that they were likely or very likely to call formal systems of care (i.e., an advocate, the police, or legal assistance), go to the hospital and undergo a sexual assault exam if they were to start the process over, while the remaining two victim-survivors whose cases were not forwarded to the prosecutor did not.

Based on the present findings and prior research from Detroit (Campbell et al., 2015), we suggest that SAKI projects consider having both an advocate and a detective available for victim notifications. Jurisdictions may consider having the detective complete the notification with an advocate on hand for victim-survivor support or having the victim advocate complete the

notification with the detective on hand to provide details and answer questions about participating in a new investigation. SAKI projects should also plan that locating victims-survivors, especially victim-survivors whose assault was 9 or more years ago – may take considerable time and effort on the part of the notification team. Further, SAKI projects should consider that many victim-survivors may not want to engage in a new investigation when crafting their expectations and goals for their project.

While the present findings add to the limited literature on advocate's perceptions of victim notifications and victim-survivors' experiences with notifications, findings must be interpreted with consideration of the small sample sizes for victim reaction forms and victim-survivor interviews. As noted above and in Chapter 5 of this report, very few victim-survivors were interested in re-engaging with system actors regarding their previously untested SAK. As such, soliciting victim-survivors for interviews posed a significant challenge for our victim advocate partner. Further, since victim notifications in the MN SAKI began before this evaluation, there was no opportunity to make research-informed suggestions regarding the notification process and limited opportunity to gather data from the victim advocate regarding her perceptions of victim-survivors' reactions to notifications.

Goal 4 – Assess the Costs and Benefits of Testing SAKs

Compared to other SAKI projects in larger, more urban jurisdictions – Houston, Los Angeles, and Detroit – testing SAKs in Anoka County resulted in slightly lower rates of CODIS hits (~41% versus 49%, 50% and 58%), and as such, higher rates of uploads of new DNA profiles to CODIS. More specifically, testing the approximately 400 previously untested SAKs held by Anoka County Sherrif's Office resulted in CODIS hits to 74 offenders across 11 states, 24 of whom were not the principal suspect in the case and 15 of whom were previously unknown

or known only by a nickname. Further, 107 new DNA profiles were uploaded to CODIS.

The majority (64%) of these 74 serial offenders identified in the MN SAKI project had committed serious crimes before the sexual assault associated with the untested SAK. Further, most (71%) committed new serious crimes after the sexual assault – they were responsible for nearly 500 new criminal charges after the reported sexual assault associated with the untested SAK. These charges included new sexual assaults, domestic violence crimes, drug offenses, property crimes, and other crimes. Minnesota has already taken critical action to prevent future untested SAKs by passing legislation mandating (1) all unrestricted SAKs be submitted and tested (2) and tested quickly (i.e., as close to 90 days as possible) as well as (3) funding these mandates to support forensic laboratories so that backlogs are not created due to capacity issues. Supporting testing SAKs quickly will likely increase the investigative utility of forensic evidence for the investigation and prosecution of cases. Taken together, it is likely that Minnesota will see increases in the rates of prosecutions for new reports of sexual assault as well as continued increases in the identification of serial offenders.

We identified that the MN SAKI project submitted cases to ViCAP but did not use it as an investitive tool. A deeper dive with MN SAKI team members as well as staff from another SAKI site and BJA revealed that there are opportunities to increase awareness regarding how best to leverage ViCAP for cases of sex crimes. Finally, our cost benefit analysis suggests that the investment in the MN SAKI project that led to two new convictions resulted in cost savings of $150,000 to $300,000 in tangible and intangible costs associated with the prevention of future sexual assaults. Additionally, given the rates of serial offending in this sample compared to the cost of testing SAKs, if testing the SAKs during the original investigation had supported the convictions of these offenders, the cost savings would have been much higher.

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Appendices

Appendix A: Bureau of Criminal Apprehension Report on the MN Law Enforcement Agency Survey of Untested Rape Kits as Required by SF0878

Bureau of Criminal Apprehension

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www.dps.state.mn.us/bca/

November 3, 2015

Report on the MN Law Enforcement Agency Survey of Untested Rape Kits as required by SF0878

EXECUTIVE SUMMARY

The MN Bureau of Criminal Apprehension (BCA) has completed the collection and compilation of untested rape kit survey results from law enforcement agencies and forensic science laboratories from the State of Minnesota. The survey indicates that there are 3,482 untested rape kits in the possession of 171 agencies. As of July 1, 2015, the BCA Laboratory was in possession of 157 untested kits not included in the reports of the submitting agencies.

The BCA proposes three options for potential testing that include internal testing, external testing by private laboratories, or a combination of the two. This report has also addressed the increase of submissions in 2015.

ENABLING LEGISATION - (2015 Session Laws, Chapter 65)

Chapter 65 requires a complete inventory of untested rape kits that are in the possession of all publicly funded forensic laboratories, county sheriff offices, and police departments in Minnesota. The law required inventories to be submitted to the superintendent of the BCA by August 1, 2015 in a form prescribed by the Superintendent. The statewide inventory applied only to untested rape kits collected prior to July 1, 2015. The legislation also required the BCA to submit a report to the Legislature by December 1, 2015 which included the following information:

1) Summarization of results of all untested rape kits reported by local law enforcement agencies in Minnesota as well as the four forensic science laboratories operating forensic DNA testing laboratories (BCA St. Paul, BCA Bemidji, Hennepin County Sheriff's Office, and Tri-County Regional Crime Lab).

2) A plan for addressing the potential untested rape kits reported by the local entities.

UNTESTED RAPE KIT SURVEY AND RESULTS

On June 25, 2015, the BCA communicated via email to all law enforcement agencies (LEA's) advising them of their responsibility to submit their survey results to the BCA by August 1, 2015. This email also contained instructions on how to submit the survey information along with information to assist them in filling out the survey. The survey form and instructions were also placed on the BCA Laboratory website. The cover letter and survey form are included in this report as Appendix A and Appendix B.

In an effort to obtain the most comprehensive assessment of the number of untested rape kits, reports received through October 8, 2015 are included in the BCA summary.

SURVEY RESPONSE SUMMARY	
Total agencies - surveyed	434
Total agencies - response received by BCA	409
Total agencies - no response received by BCA	25
Total agencies - possessing untested kits	171
Total agencies - possessing no untested kits	238

The reported offense dates ranged from the early 1990's through 2015. Agency responses and offense date data are summarized in Appendix C and Appendix D.

Survey Process

The following information was requested during the survey.

- Agency contact information
- List of untested rape kits in possession of the agency (including case numbers)
- Date of offense for each untested kit
- Date of collection for each untested kit
- Reason for not submitting each kit for forensic examination – There were seven options that could be selected from a drop-down menu. Those options and survey results are included in the table below.

Survey Option	Number of untested kits reported
Anonymous Report	175
Incident currently under investigation	92
Kit not relevant for prosecution (Confession)	181
Kit not relevant for prosecution (Consent)	257
Prosecution Declined	738
Victim elected not to participate further in the criminal justice process	1056
Other	983
Total reported untested rape kits	**3482**

If the selection was 'Other', a space was provided for a brief explanation. Explanations (provided by reporting agencies) were then further subdivided into the following nine common categories for ease of summarization (based on the prevalence across agencies). Those categories and survey results are included in the table below.

Local Agency Explanations for "other" Survey Option	Number of untested kits reported
Unfounded/false report	193
Adjudicated	41
Different jurisdiction	37
Testing not needed	166
Investigation closed	144
Consent	3
Victim not participating	20
Unknown	329
Miscellaneous/Other	50

Previous BCA Untested Rape Kit Efforts

Over the past 10 years, the BCA has been proactive in its efforts to coordinate with local law enforcement agencies regarding the topic of untested rape kits. In 2005, the BCA Laboratory contacted the larger Minnesota law enforcement agencies (LEA) to inquire about the existence of untested rape kits that may exist within their jurisdictions. This outreach included but was not limited to police departments in Minneapolis (MPD), St. Paul (SPPD), Duluth, and Rochester. This was an unofficial inquiry limited to verbal communication. Generally, agencies indicated they were unaware of the existence of any untested kits that required testing.

Starting in 2011, agencies began identifying untested rape kits in their custody and sought out the BCA Laboratory for assistance. Due to the volume of cases, it quickly became apparent that a submission plan for each agency backlog was required. This was necessary to avoid shifting local agency backlogs to the laboratory. Submission plans helped to mitigate the negative impact on current reactive cases.

From 2011 through 2015, the BCA Laboratory entered into submission plans with St. Paul Police Department, Minneapolis Police Department, and Duluth Police Department, resulting in the submission and testing of over 359 untested rape kits with offense dates ranging from 1994 to 2013.

MN BCA Laboratory – Untested kits

The BCA Laboratory does not hold kits that would be considered "untested kits" because all kits accepted for testing by the BCA are immediately placed in a queue for examination[1]. The amount of time it takes to start the testing on a given kit is dependent upon the number of kits already waiting in line. Therefore, the "untested kits" at the BCA Laboratory as of the July 1, 2015 were kits awaiting testing and totaled 202. These kits can be categorized as follows:

BCA Kits Pending Testing	
Current cases awaiting testing - normal testing queue	126
Untested kits submitted for testing - but also included on the local agency's survey	45
Untested kits submitted for testing - NOT included on local agency's survey	31
TOTAL	202

PLAN FOR ADDRESSING UNTESTED RAPE KITS

Following the review of the statistics and supporting information contained within the reports submitted by Minnesota's law enforcement agencies and forensic laboratories, the Legislature may determine that all or a portion of the kits require testing. These policy decisions will determine the overall impact and required resources to accomplish Minnesota's response to this potential issue.

Testing decisions will need to address two different aspects.
1) Existing untested kits currently stored by local agencies dependent upon the decisions made by policy makers
2) Increase in current submissions likely due to changes in local agency policies with regards to which cases will be submitted for testing today and in the future.

Testing options to consider include internal testing by the BCA Laboratory, external testing by a private laboratory, or a combination of the two. It should be noted, however, that external testing will also require BCA Laboratory involvement as outlined below.

Cost of Testing – Existing Untested Kits in Possession of Local Agencies

An analysis of current costs associated with testing of untested kits in the possession of local agencies has been completed and scalable figures have been calculated. Staffing and supply requirements for the following areas were considered during this cost assessment:

[1] Starting in May of 2015, some agencies began submitting their "untested kits" to the BCA Laboratory. Kits with offense dates prior to 2014 were accepted and placed into a pending status while this survey process was underway.

1) Kit submission to laboratory
2) Tracking of kits throughout the process
3) Laboratory testing of kits
4) Entry of DNA results into the Combined DNA Index System (CODIS)
5) Follow up DNA testing and reporting for CODIS hits
6) Final dispositioning of kits upon completion of testing
7) Anticipated costs of additional case evidence submissions (e.g. clothing, bedding)

The resources required will be directly proportional to the number of untested kits that will require testing. All estimates must consider the existing backlog of untested kits as well as the increasing submissions of current and future rape kits. An assessment of additional funding needed to adequately address increases in future submissions for testing by the BCA Laboratory is included following Option 3.

Option 1: *BCA to conduct all testing for existing untested kits in the possession of local agencies.*

Kits would be handled and tested according to current laboratory protocols.

The cost for staff and supplies to test all reported untested kits would be approximately $4.4 million. Testing could be completed in approximately 3 years provided an additional 8 dedicated staff (FTEs) are funded or 6 years with 4 additional dedicated FTEs.

This cost estimate is scalable in the event that policy decisions determine that less than 100% of the existing backlog requires testing. For example, the cost for staff and supplies to test *half* of the kits would be approximately $2.7 million. Testing could be completed in under 2 years provided an additional 8 dedicated FTEs are funded.

The completion times are based on average scientist case output and include training of new staff. The number of dedicated FTE's include scientists plus one support position. The cost estimates are based on current supply costs and salaries.

Refer to Appendix E contains the range of scalable options.

Option 2: E*xternal private laboratory(ies) to conduct all testing for existing untested kits in the possession of local agencies.*

Testing would be subject to external laboratory protocols. Two significant points must be considered.

a. BCA Laboratory would still need to be heavily involved if this Option is ultimately selected. The BCA Laboratory serves as the administrator of the State DNA Index System (SDIS) which is the state's portion of CODIS. As such, the responsibility and oversight of the state DNA database resides with the BCA Laboratory; and all DNA profiles that will be entered into SDIS must meet strict quality assurance

requirements set by the FBI. Therefore, any external laboratory generating DNA results that will be entered into CODIS must be audited and approved by the BCA Laboratory. Additionally, all data must be reviewed by BCA scientists prior to entry into CODIS and any DNA hits resulting from CODIS searches must be handled by BCA scientists according to BCA protocol. This oversight and responsibility will require a significant resource investment in the form of staffing and supplies by the BCA Laboratory in addition to the cost of actual testing by the external laboratory.

b. Rape kits usually consist of several evidence swabs that have been used to collect samples from various areas of the victim's body. When kits are examined by the BCA Laboratory, all or some of these swabs are customarily examined first for the presence of semen or saliva (or other biological material depending on the circumstances of the case). Based on the results of these examinations, various levels of DNA testing will be performed on some or all swabs. However, the selection of services offered by external vendors varies significantly. For example, one vendor provides at least three options for testing ranging from limited male DNA screening for one kit swab only to a full examination similar to that employed by the BCA Laboratory. The price of testing will be dependent upon the service selected.

Based on quotes obtained as of September 21, 2015, cost of external testing for all reported untested kits would range from approximately $2.4 to $5.5 million depending on the service level selected as described in (b) above. This estimate includes 2 additional dedicated FTEs for the BCA Laboratory to perform the duties outlined in (a) above. The timeframe for testing is undetermined at this time. This would be subject to contract negotiations with the private laboratory.

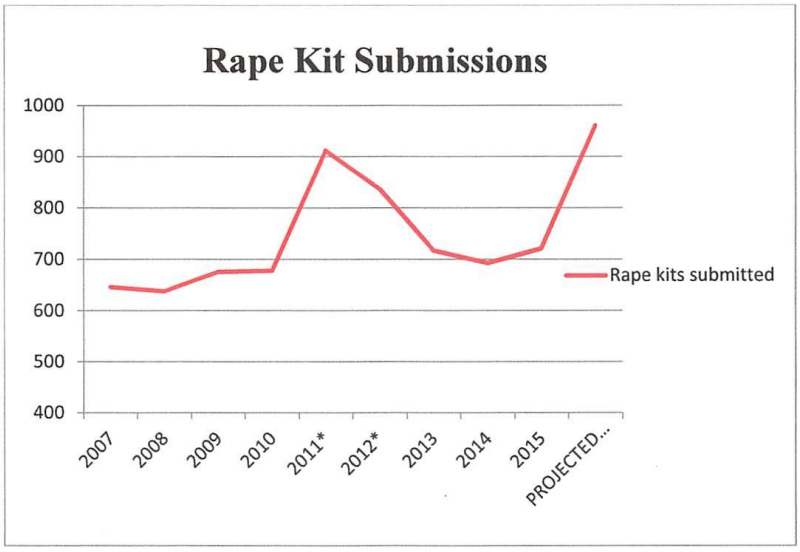
Option 3: *A combination of Option 1 and Option 2*

A hybrid approach may be warranted dependent upon the policy decisions made with consideration to factors such as desired timeframe, type of testing, or other level of triaging of the untested rape kits.

ADDITIONAL CONSIDERATION

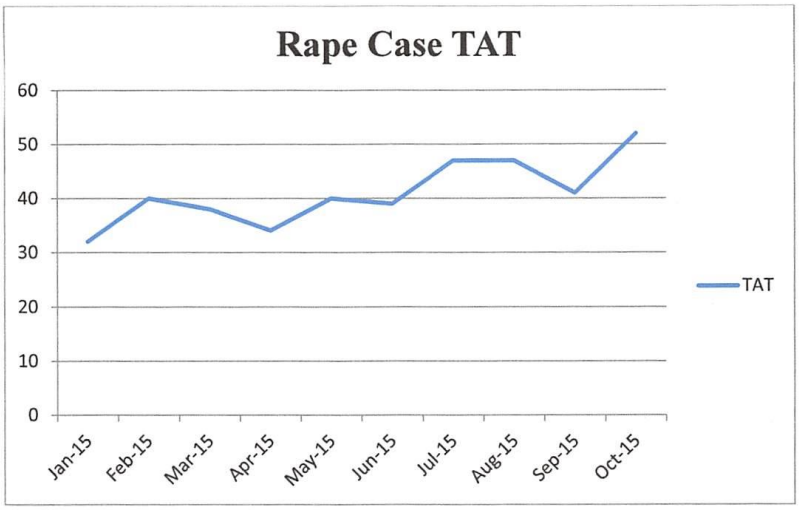
Increase in requests for testing of rape kits

It is important to note that the BCA Laboratory has experienced a sharp increase in rape kit submissions for testing in 2015. Thus far, the 2015 submissions represent a projected 39% increase over 2014 submissions. As a result, the turn-around time (TAT) for current rape kit testing will likely surpass 60 days by the end of 2015. This increase in rape kit submissions will slow the processing of other violent crime evidence as well.



It is anticipated that as changes in submission trends at the local level continue, the BCA Laboratory will experience a persisting elevation in requests for testing of rape kits.[2]

[2] The spike in 2011 and 2012 includes over 300 untested older rape kits submitted as a result of the BCA Laboratory's submission agreement with St. Paul Police Department



Over the past 5 years, the DNA Section has had an increase in case submissions of 43%. This increase in demand has primarily been addressed by implementation of automation and other procedural efficiencies. With these efficiencies along with select case submission restrictions, the DNA Section reached an average TAT of 33 days in 2013. Since then, demand continued to grow which caused a steady increase in the TAT to approximately 48 days by the end of 2014. This 48-day TAT held steady until mid-2015 when a sharp increase in demand for testing of sexual assault kits occurred. The BCA attributes this increase to increased scrutiny at the local level. The BCA DNA Laboratory can no longer maintain the expected TAT. The current sharp increase in submissions will lead to TATs exceeding 60-70 days by the end of 2015. In order to achieve the ideal TAT of 30 days for all DNA cases without implementation of an excessively restrictive case submission policy, an additional 8 FTE's would be needed ($1million annually).

Appendix B: MDT Interview Questions

MDT Interview Questions

1. What "changes in the response to sexual assault (in Anoka County and statewide) have you observed during the SAKI project".
2. What if any changes have you seen regarding interagency collaboration during the SAKI project?
3. Would do anything differently regarding the MN SAKI project, if they were starting again with all the knowledge and experience, you have now?
4. What do you see as next steps for the response to sexual assault in Anoka County and statewide?

Appendix C: Stakeholder Informed Consent Form

University of Nebraska, Omaha Research Study
Minnesota Sexual Assault Kit Initiative (SAKI) Research Project

Title of Study: **Minnesota Sexual Assault Kit Initiative (MN SAKI) Research Project**

What this study is about and why you are being asked to participate: This study is funded by the National Institute of Justice (NIJ) (NIJ project 2019-MU-MU-0095). The purpose of this study is to examine the outcomes of the MN SAKI project as well as the processes by which the project produced these outcomes. You are being asked to participate in a survey, interview, and/or focus group because you work in the criminal justice and/or victim service systems in Minnesota.

If you participate, here is what will happen in this study:

- If you participate in a survey: We will ask you to complete a survey that takes no more than 10 minutes.
- If you participate in a focus group: We will ask you to participate in a group discussion with other criminal justice and/or victim service professionals that lasts no more than 30 minutes. The discussion will be led by a facilitator and a note taker will record notes in a WORD document. The focus group will be recorded, but only a written, de-identified transcript will be saved.
- If you participate in an interview, we will ask you questions for approximately 20-30 minutes. A note taker will record notes in a WORD document. The interview will be recorded, but only a written, de-identified transcript will be saved.
- Responses will be kept confidential. Results of the study may be published, but neither your name nor any other information that would identify you will not be reported.

What are the risks and benefits of your participation? Participation in this study poses minimal risk to you: no greater risk than those encountered in routine conversations about your professional practice with colleagues. You are not expected to receive any direct benefit from participating in this study, but we hope to use the information learned to benefit victim-survivors of sexual assault and criminal justice and victim service professionals in Minnesota.

Please understand that:

- Your participation in this study is completely voluntary. You may choose not to participate. You may stop participating at any time. You may choose not to answer specific questions.
- Choosing not to participate in this study or withdrawing at any time will not impact your relationship with the investigators, UNO, your agency, or your community.
- The researchers do not expect or intend to profit from the findings of this study. We make no guarantees or assurances about the results of the study.
- There is no cost to participating in this study and you will not be paid to participate in this study.
- Your information will be kept confidential to the research team involved in this study.
- De-identified data will be archived with the National Archive of Criminal Justice Data.
- There are no serious risks involved in this study.

If you have questions or concerns about the research, you may contact:

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Appendix D: Victim Reaction Form

Victim Reaction Form

WHERE IS THE VICTIM LOCATED

- ☐ Anoka County
- ☐ Twin Cities
- ☐ Minnesota
- ☐ Out of State
- ☐ Jail/Prison
- ☐ Unknown

DID THE VICTIM DO ANY OF THE FOLLOWING?

- ☐ Did not want to discuss case
- ☐ Was suspicious of contact
- ☐ Cried/Sad
- ☐ Asked why the case is being looked into now
- ☐ Became very upset
- ☐ Excited that case was re-opened/something being done finally
- ☐ Expressed concern about privacy
- ☐ Not sure they want to bring all this up again/been a long time
- ☐ Indicated that the notification process was re-traumatizing
- ☐ Mentioned lack of response from Law Enforcement
- ☐ Mentioned lack of response from Advocacy
- ☐ Lacked emotion/matter of fact with notifier
- ☐ Angry
- ☐ Their demeanor changed over time - please specify
- ☐ Other - please specify

RESULT FROM THE NOTIFICATION

- ☐ Scheduled meeting with SAKI Investigator+ Advocate
- ☐ Scheduled meeting with SAKI Advocate only
- ☐ Scheduled meeting with SAKI Investigator Only
- ☐ Case Closed per Victim's Request
- ☐ Referral to community-based advocacy services
- ☐ Referral to other community resources

DIRECT QUOTES FROM THE VICTIM?

WHAT QUESTIONS DID THE VICTIM HAVE?

Appendix E: Victim-Survivor Experiences Interview Guide

ICR #_____

Advocate Interview Guide for Victim-Survivors' Experiences Interview

Victim-Survivor Experience with Service Providers During/After Reporting the Sexual Assault

Advocate Introduction: First, I'd like to ask you a few questions about your experiences when you initially reported your assault, if you are okay with that. And whatever you remember is okay, don't feel like you have to remember everything, the time that has passed is certainly a factor. I understand that this might be difficult to think about or talk about, please know you can skip any questions and we can stop at any time. Does this sound alright so far?

1. When you initially reported the sexual assault, did you have support from family or friends? (i.e., was someone with you, someone to talk to on the phone)
    a. What about in the days or weeks after you reported? Did you have support from family or friends? (i.e., did you have someone to support you after you reported)

2. When you initially reported the sexual assault, who did you report the assault to:
    a. Law enforcement/Detective
    b. A nurse
    c. A counselor
    d. A victim advocate
    e. Other

3. Was anyone else involved when you initially reported the assault?
    a. Law enforcement/Detective
    b. A nurse
    c. A counselor
    d. A victim advocate
    e. Other
    f. The victim-survivor did not receive help from anyone else.

4. What was your initial reporting experience with _____ like (ask individually if they were involved with more than one provider from Q2 or Q3)?

5. Between the initial report and the notification from Alexandra House, did you hear anything about your sexual assault kit?
    a. Yes
    b. No

6. If yes, who did you hear from:
    a. Law enforcement/Detective
    b. Nurse

c. Advocate
d. Counselor
e. Other_____

7. What did _____ tell you about your sexual assault kit? (ask individually if they heard something from more than one provider Q6)?

Victim Perceptions of the SAK Notification

Advocate Check in: These next questions ask about your experiences with the detective and advocate who notified you that your previously unsubmitted sexual assault kit had been tested. First, I want to check in and see if you are ok to keep going. If you would like to stop now, we can. If you feel ok to keep going, we can stop at any time.

For the following questions please tell me how strongly you agree or disagree with the statements below based on your interaction with the **advocate** who was involved in notifying you. Just to remind you, the advocate is Vanessa Ellingson, she is the confidential advocate at Alexandra House.

	Strongly disagree	**Disagree**	**Neither agree/disagree**	**Agree**	**Strongly agree**	**Preferred not to answer**
1. The advocate apologized that my kit was not tested sooner	1	2	3	4	5	6
2. The advocate was courteous and showed empathy during the notification process	1	2	3	4	5	6
2a. **If 1 or 2**: Can you tell me a little bit more about what the advocate said or did that <u>was not empathic or courteous</u> during the notification process?						
2b. **If 4 or 5:** Can you tell me a little bit more about what the advocate said or did that <u>was empathetic or courteous</u> during the notification process?						
3. The advocate explained the criminal justice process that would follow the notification	1	2	3	4	5	6
4. The advocate did not pressure me to make a decision about participating in a new investigation during the notification	1	2	3	4	5	6
4a. **If 1 or 2:** Can you tell me a little bit more about what the advocate said or did that <u>pressured you</u> to make a decision about participating?						

4 b. **If 4 or 5:** Can you tell me a little bit more about what the advocate said or did that freed you from pressure to make a decision about participating?						
5. The advocate explained that it was my choice to continue with an investigation	1	2	3	4	5	6
6. The advocate allowed me to ask questions about the next steps without interrupting me	1	2	3	4	5	6
7. The advocate listened to my questions or concerns in a compassionate manner	1	2	3	4	5	6
8. The advocate showed me respect during the notification process	1	2	3	4	5	6
8a. **If 1 or 2:** Can you tell me a little bit more about what the detective said or did that did not show you respect during the notification process?						
8b. **If 4 or 5**: Can you tell me a little bit more about what the detective said or did that showed you respect during the notification process?						
9. The advocate offered advice on how I could obtain resources and services	1	2	3	4	5	6

Next, please tell me how strongly you agree or disagree with the statements below based on your interaction with the **detective** who was involved in notifying you. Just to remind you, the detective is Chris Johnson from Anoka County Sheriff's Department.

	Strongly disagree	**Disagree**	**Neither agree/disagree**	**Agree**	**Strongly agree**	**Preferred not to answer**
1. The detective apologized that my kit was not tested sooner	1	2	3	4	5	6
2. The detective was courteous and showed empathy during the notification process	1	2	3	4	5	6
2a. **If 1 or 2:** Can you tell me a little bit more about what the detective said or did that was not empathic or courteous during the notification process?						
2b. **If 4 or 5:** Can you tell me a little bit more about what the detective said or did that was empathetic or courteous during the notification process?						
3. The detective explained the criminal justice process that would follow the notification	1	2	3	4	5	6
4. The detective did not pressure me to make a decision about participating in a new investigation during the notification	1	2	3	4	5	6

4a. **If 1 or 2:** Can you tell me a little bit more about what the detective said or did that pressured you to make a decision about participating?						
4 b. **If 4 or 5:** Can you tell me a little bit more about what the detective said or did that freed you from pressure to make a decision about participating?						
5. The detective explained that it was my choice to continue with an investigation	1	2	3	4	5	6
6. The detective allowed me to ask questions about the next steps without interrupting me	1	2	3	4	5	6
7. The detective listened to my questions or concerns in a compassionate manner	1	2	3	4	5	6
8. The detective showed me respect during the notification process	1	2	3	4	5	6
8a. **If 1 or 2**: Can you tell me a little bit more about what the detective said or did that did not show you respect during the notification process?						
8b. **If 4 or 5**: Can you tell me a little bit more about what the detective said or did that showed you respect during the notification process?						
9. The detective offered advice on how I could obtain resources and services	1	2	3	4	5	6

10. Are you glad you were notified? (Can you tell me a little bit about why?)

11. Are you glad you were notified _____ (i.e., by phone vs. in person vs. by letter)? (Can you tell me a little bit about why?)

    a. If not, how would you have liked to be notified?

12. Would you like to tell me anything else about how you were treated during the notification or what could have been better?

Future Help-Seeking and Use of the System

Advocate Check in: The next few questions ask about the types of support and services you might have wanted or needed during this process. I understand that this might be difficult to think about or talk about. I want to check in and see if you are ok to keep going. If you would like to stop now, we can. If you feel ok to keep going, we can stop at any time.

Knowing what you know now, if you were to start the process over…

1. Who would you go to for help? (this could be anyone: friends, family, etc.)

2. What kind of help do you think you would want or need?

Knowing what you know now, if you were to start the process over, please tell me how likely you would be to do the following:

	Very unlikely	**Unlikely**	**Not really sure**	**Likely**	**Very Likely**	**Preferred not to answer**
1. Call a friend or family member?	1	2	3	4	5	6
2. Go to the hospital?	1	2	3	4	5	6
3. Undergo a sexual assault exam?	1	2	3	4	5	6
4. Call a victim advocate?	1	2	3	4	5	6
5. Call the police?	1	2	3	4	5	6
6. Call for legal assistance like calling a lawyer or an agency like legal aid?	1	2	3	4	5	6
7. Want the offender criminally prosecuted?	1	2	3	4	5	6

8. Would you like to tell me anything else about what you might want or need?

Empowerment

Advocate check-in: These final questions ask about your experiences with the advocate and detective since being notified that your previously unsubmitted sexual assault kit was tested.

Please tell me how strongly you agree with the statements below based on your experiences with the advocate and detective since being notified that your previously unsubmitted sexual assault kit was tested.

	Strongly disagree	Disagree	Neither agree/disagree	Agree	Strongly agree	Preferred not to answer
1. I got what I hoped for from undergoing the sexual assault exam.	1	2	3	4	5	6
Any victim-survivor comments:						
2. I feel the detective treated me fairly and listened to my side of the story.	1	2	3	4	5	6
Any victim-survivor comments:						
3. I think the detective considered my wishes regarding investigating my sexual assault just as important as his wishes regarding investigating my sexual assault.	1	2	3	4	5	6
Any victim-survivor comments:						
4. I got what I hoped for from allowing the detective to investigate my sexual assault.	1	2	3	4	5	6
Any victim-survivor comments:						
AND/OR						
5. I got what I hoped for from pursuing a criminal case.	1	2	3	4	5	6
Any victim-survivor comments:						
AND/OR						
6. I got what I hoped for from pursuing services from Alexandra House.	1	2	3	4	5	6
Any victim-survivor comments:						

7. Is there anything else you would like to tell me about your experiences with the or advocate or detective since being notified that your previously unsubmitted sexual assault kit was tested?

8. Do you have any questions for me at this time?

Advocate Debriefing and Thank you

Okay, we are at the end of what was devised by our SAKI team and our research partner with the victim-survivors' best interests always at the forefront of what we are trying to do. Is there anything else at all you would like us to know or make note of? Please feel free to be open with us, as long as you feel comfortable doing so. As the SAKI team we can meet and come up with only so much; this is about your experience. No matter what you share, or how little or how much feedback you choose to share, thank you so much for your time and trusting us with your experiences. We hope to be able to contribute to improved victim-survivor resources and understanding and your input will do that.

Please reach out to us if anything comes up from taking part in our interview and know Alexandra House is always available to process with you at 763-780-2330. If you'd like to talk to someone else you could also call the Rape Abuse and Incest National Network (RAINN)- 800-656-HOPE or National Domestic Violence Child Abuse and Sexual Assault Hotline: 800-799-7233

Take care of yourself. Thank you.

Appendix F: Victim-Survivor Informed Consent Form

University of Nebraska, Omaha Research Study
Minnesota Sexual Assault Kit Initiative (SAKI) Research Project

Title of Study: **Minnesota Sexual Assault Kit Initiative (MN SAKI) Research Project**

What this purpose of this study: The purpose of this study is to examine the processes and outcomes of the Minnesota Sexual Assault Kit Initiative. We want to hear directly from survivors about their experiences with criminal justice system, victim service providers, and health care professionals. This study will ultimately inform law enforcement officers, victim service providers and advocates, health care professionals, policy makers, and survivors. This study is funded by the National Institute of Justice (NIJ) (NIJ project 2019-MU-MU-0095).

If you participate, here is what will happen in this study:

- A victim advocate from Alexandra House will ask you questions for approximately 20-30 minutes and record your responses.
- Responses will be kept confidential. Results of the study may be published, but neither your name nor any other information that would identify you will not be reported.

What are the risks of your participation? Answering question about reporting your sexual assault, or your experiences with the criminal justice, victim service, or health care systems may difficult to think about or talk about. If you experience discomfort during the interview, you can take a break, skip any questions, or stop participation in the interview at any time. If you experience distress during the interview, the advocate is there to support you. If you experience distress after the interview, please call the 24-hour helpline at Alexandra House (763-780-2330) or one of these other free helplines: Rape Abuse and Incest National Network (RAINN)- 800-656-HOPE or National Domestic Violence Child Abuse and Sexual Assault Hotline: 800-799-7233.

What are the benefits of your participation? Participants will receive a $20 e-gift card. In addition, we hope to use the information learned to benefit survivors of sexual assault and to inform law enforcement officers, victim service providers and advocates, health care professionals, and policy makers.

Please understand that:

- **Your participation in this study is completely voluntary.** You may choose not to participate. You may stop participating at any time. You may choose not to answer specific questions.
- Choosing not to participate in this study or withdrawing at any time will not impact your relationship with Alexandra House or any other victim service providers, or with law enforcement, the courts, or with any health care providers.
- There is no cost to participating in this study.
- Your information will be kept confidential to the research team involved in this study.
- De-identified data will be archived with the National Archive of Criminal Justice Data.
- There are no serious risks involved in this study.

If you have questions or concerns about the research, you may contact:

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Appendix G: ViCAP Interview Guide

ViCAP Interview Questions:

1. How familiar are you with ViCAP?
2. When did your jurisdiction begin entering sexual assault cases into ViCAP?
3. Did you receive any training on ViCAP?
    a. How many of you received training?
    b. What type of training? Can you describe what all training was provided and on what components of ViCAP?
        i. Did training focus on how to upload cases, what kinds of cases to submit, how to use ViCAP for investigations?
        ii. Were there issues with non-LEOs obtaining access to the ViCAP system?
    c. Who hosted the trainings?
    d. How helpful were these training(s)?
    e. How often is training offered?
4. What are the "decision rules" that you follow in deciding cases to submit to ViCAP?
    a. Who is responsible for making these decisions? (e.g., individual investigators, a ViCAP team)
    b. Were you given guidance on submission criteria for cases from ViCAP?
5. In which kinds of cases does it make the most sense to submit to ViCAP? Why?
    a. What "unique" features of a case do you look for to submit to ViCAP? (relationship to victim, statements the suspect made, items used, "MO")
    b. Which cases do NOT work well for submission to ViCAP?
    c. Are there types of cases *not* currently submitted to ViCAP that you think should be? (e.g., intimate partner sexual assaults)

6. For your jurisdiction, who enters cases into ViCAP?
    a. How many personnel enter cases into ViCAP?
7. How do ViCAP qualifying cases come to your (or the personnel submitting cases') attention?
8. What is the submission process like?
    a. How easy is the submission process?
    b. How long does it typically take to enter a case?
    c. Are there challenges or common issues entry personnel face?
    d. Are ViCAP personnel generally helpful during submission? How so?
    e. How quickly do cases typically get reviewed and quality checks completed?
    f. How quickly do submitted cases "go live"?
9. How would you improve the submission process?
10. How have your unit's policies regarding ViCAP submission and/or usage changed over time?
    a. Are these policies clear and/or well known?
11. In the past 12 months about what percentage of sexual assault cases that you investigated qualified for ViCAP?
    a. How many were submitted to ViCAP?
12. How do you use ViCAP for sex assault investigations?
    a. Could you provide detail on how ViCAP played a role in closing cases?
    b. Do you search for possibly connected cases upon submitting a ViCAP qualifying case?
    c. Or does ViCAP send notifications of possible connections?

13. How do you obtain ViCAP "hits"? What does a hit look like?
    a. How do you use these hits in sex assault investigations?
    b. Can you give an example of how a ViCAP hit has led to a sex assault being solved?
14. How valuable or useful has ViCAP been for sex assault investigations?
15. Would submitting more cases to ViCAP be helpful to investigations?
    a. Why / How so / In what ways?
    b. Why not?
16. How do you suggest other jurisdictions better utilize ViCAP?
17. Do you have recommendations for how ViCAP can achieve better buy-in from other jurisdictions or make the submission/usage processes easier?

Appendix H: Minnesota Track-Kit Patient Guide

Minnesota Track-Kit

The survivor portal is the web-based access point for information on your kit

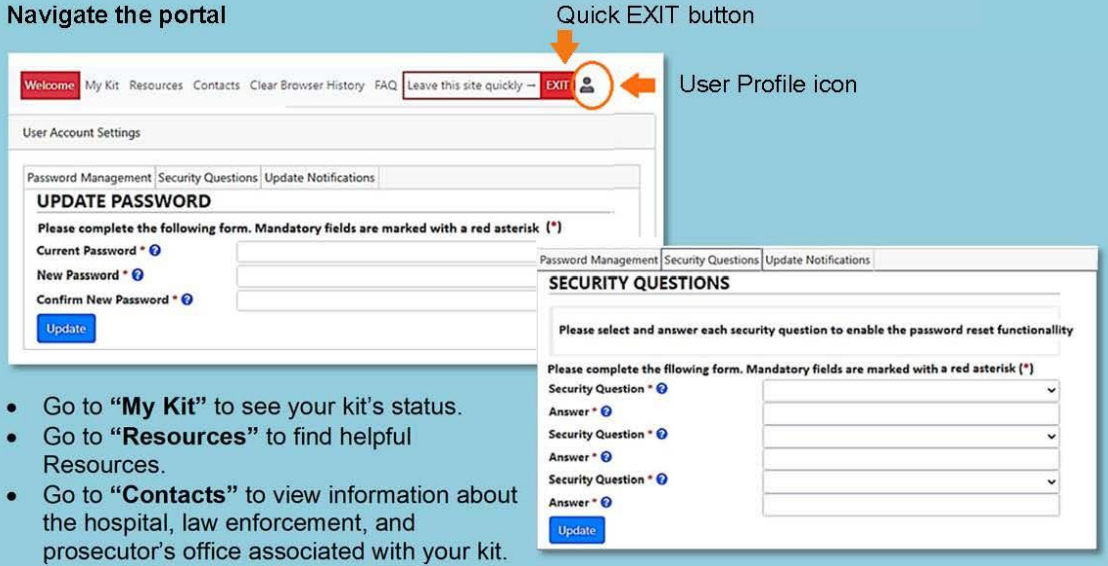
On the survivor portal, you can:

- See your kit's progress as it moves from the medical facility to the law enforcement agency to the lab.
- Find survivor resources.
- Find contact information for the hospital, law enforcement agency, and prosecutor's office affiliated with your kit.
- Subscribe to updates on changes to your kit's status.
- Use the quick exit feature to leave the site quickly and clear your browser history.

Log in

- Go to the web address given to you at the time of your exam. https://mn.track-kit.us/
- Enter your username (the kit barcode) and your temporary password.
- The first time you log in you will be prompted to change your password.
- After that, you can change your password at any time by going to **User Profile > Password Management**
- Set up security questions to help you reset your password if you forget it.
- Go to **User Profile** > **Security Questions** and follow the on-screen instructions.
- If you forget your password you can reset it by answering security questions (if you set them up) or by clicking on **Forgot Your Password?** on the login page.

Navigate the portal



- Go to **"My Kit"** to see your kit's status.
- Go to **"Resources"** to find helpful Resources.
- Go to **"Contacts"** to view information about the hospital, law enforcement, and prosecutor's office associated with your kit.
- Go to **"FAQ"** to learn about Frequently Asked Questions.
- Go to the User Profile icon to manage your password and subscribe to updates.
- Log out using the **"EXIT"** button.

PORTAL DETAILS AND SETTINGS

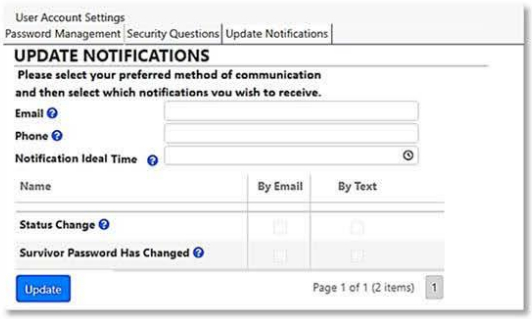
Understanding the options available in the survivor portal

View your kit's details

- Whether or not you gave consent to have your kit tested.
- Discard date for your kit if you did not give consent for testing.
- Current status and location of your kit.
- The history of your kit's progress through the system.

Set up notifications

- To receive updates on your kit, go to **User Profile** > **Update Notifications** and choose the updates you wish to be sent by email or text.
- You can also designate an ideal time of day for update.



Use the privacy and security features

- In the upper-left corner of the screen verify the time of your last login to ensure that your account is secure.

- Click on the "EXIT" button in the upper-right corner of the screen to leave the site quickly.
- Go to "Clear Your Browser History" for instructions on clearing survivor portal from your browser's history.

Find resources and help

- In this section you can search for victim advocacy services, telephone hotlines, or other helpful resources such as links to websites, resource guides, or videos.
- You can filter the resources by geographical area to find something close to home.

Appendix I: Minnesota SAKI Victim-Survivor Notification Guide

VICTIM/SURVIVOR NOTIFICATION GUIDELINES

Minnesota Sexual Assault Kit Initiative

Piloted in Anoka County

Processing untested cold case sexual assault cases in Anoka County providing trauma-informed notification to victim/survivors and pursuing applicable cases in the justice system through investigation and prosecution.

Developed by: Minnesota Sexual Assault Kit Initiative (SAKI) MDT

With guidance from City of Duluth MDT and the SAKI TTA website resources

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In 2015 the Minnesota Bureau of Criminal Apprehension, (BCA), conducted a statewide survey of law enforcement agencies' untested sexual assault kits (SAKs). The intent of that survey was to quantify the extent of previously untested SAKs across the state of Minnesota. It was learned that Anoka County had the second highest number of untested SAKs, totaling 498. In response, the Office of Justice Programs (OJP) applied for and received federal grant dollars to process these SAKs, including submission to the state lab for testing. This program is being piloted in Anoka County then will go statewide and address the roughly 3,000 other previously un-submitted SAKs in jurisdictions across the state. Under the grantee OJP, Alexandra House, Anoka County Sheriff's Office, Minnesota Coalition Against Sexual Assault (MNCASA), and the BCA are sub-grantees working towards the goals of this project. The Anoka County Attorney's Office was added as a sub-grantee in the grant as well in 2020.

Goals:

1. Eliminate the backlog of untested SAKs in the state of Minnesota and create and put policies in place to prevent this from happening again.

2. Establish uniform protocols and procedures related to the handling and testing of future SAKs in Minnesota.

3. Establish trauma-informed protocols for sexual assault investigation, prosecution, and victim service provision.

Guiding Principles:

- As a multidisciplinary team (MDT), our core values and philosophy will guide decision-making and inform every interaction with victim/survivors.

- A victim/survivor's choices, safety, privacy, and wellbeing are the primary focus of this group and this project.

- While the risk of re-traumatization cannot always be avoided, when contacting victim/survivors about the assault they have experienced, do your best to minimize harm.

- All victim/survivors need access to advocacy and support services whether they choose to reengage in the criminal justice process or not. They may not have had access to such services at the time their SAK was collected. Safety planning will be a component of all victim notifications.

- Communications between victim/survivors and the community-based advocate are **confidential**.

- Every notification is important and will be conducted with the utmost respect and competency.

- Effective collaboration between advocates and law enforcement is crucial to building rapport with victim/survivors, successfully re-engaging victim/survivors in the criminal justice system and demonstrating to the greater community the change this project will standardize.

- Case reviews will be utilized as an opportunity to identify and problem solve issues that arise and celebrate successes.

Notification Team Procedure

Once SAKs are tested by the BCA lab and results are known, the detective and advocate will proceed as follows:

- Collaborate on case review and explore methods to locate victim/survivors.
- Review the case file to learn about specifics of each case.
    - If the detective believes there could be potential movement on the case, it may be further investigated.
    - The first step in further investigation is a reach out to the victim/survivor by the advocate to explain about the SAKI project, the purpose of the call and to determine if they are interested in further conversation including the SAKI detective about their SAK.
- Develop a notification and safety plan.
    - The plan will outline what information each team member will share with the victim/survivor, as well as how they will explain the separate roles and responsibilities, to ensure that the victim/survivor understands the partnerships coming together for this project.
    - The plan can also help identify safety issues that should be discussed with the victim/survivor and communicate to the victim/survivor that their safety is a primary concern of this process.

Victim/Survivor Notification

Once the SAK has been tested by the BCA, and the detective and the advocate have familiarized themselves with the specific case, the advocate will attempt to contact the victim/survivor initially to bring awareness to SAKI and the new information about their kit being tested. From there it is the victim's choice to move forward and receive the updates and the results of their kit being tested under the SAKI grant. If the victim/survivor chooses to have further conversation the advocate and detective will provide information about the status of the case, the results of the SAK testing, and anything learned as a result. The notification team will conduct active notification and opt-in/opt-out notification practices, based on criteria detailed below. Active notification means the advocate will make concentrated efforts to locate and contact the victim/survivor, such as by phone, letter or email, through social media, or, if necessary, with the detective at a known home address. Opt-In/Opt-Out Notification means a victim/survivor can contact the advocate on the designated help line and ask about their SAK and any results. The type of notification will be determined as follows:

Active Notification:

- Cases where the SAK produced DNA that hit to a match in CODIS, the state and/or national database for DNA profiles and have a possibility of further investigation.

  *exception – cases where there are circumstances that indicate notification may not be beneficial, and the potential for harm to the victim outweighs notification, will be brought to the Case Review Subcommittee for a decision regarding notification.

Opt-In/Opt-Out Notification:

- Cases where the SAK was returned with no or insufficient DNA present, the case file was reviewed by the detective, and a determination was made that no further investigation was warranted.
- Cases that have already been investigated fully and/or adjudicated.

13. How do you obtain ViCAP "hits"? What does a hit look like?
    a. How do you use these hits in sex assault investigations?
    b. Can you give an example of how a ViCAP hit has led to a sex assault being solved?
14. How valuable or useful has ViCAP been for sex assault investigations?
15. Would submitting more cases to ViCAP be helpful to investigations?
    a. Why / How so / In what ways?
    b. Why not?
16. How do you suggest other jurisdictions better utilize ViCAP?
17. Do you have recommendations for how ViCAP can achieve better buy-in from other jurisdictions or make the submission/usage processes easier?

update in their case and address the "why now?" if applicable. Sharing information related to the case will be fairly limited during this initial contact. The advocate will determine if the victim/survivor is open to an in-person meeting with the detective and advocate and if so, schedule a meeting. The advocate will ask during this conversation for a verbal release in order to let the detective know this victim/survivor wants to meet and the details necessary to set that up. It is important to have multiple ways of contacting the victim/survivor so the advocate should try securing an alternative method of contact.

- Letter or Email– An alternative method of contact is to send a letter to the victim/survivor's last known address. The contents of this letter will be kept intentionally vague and refer to the victim/survivor as a "victim of a crime" and not a "victim of sexual assault." Maintaining a victim/survivor's privacy and confidentiality is of the utmost importance. The letter will include ways to contact the advocate.

- Facebook Message- Our subcommittee discussed the use of social media to attempt to actively notify victim survivors and determined we would utilize Facebook messenger as a tool. We first discussed Facebook calling, as it is more personal, but due to how the software is designed, a typed message must be sent if there is not a friend link between individuals on Facebook. The advocate created a basic professional Facebook profile strictly for this purpose and will send messages in this format if a current phone number, email, or sometimes a physical address cannot be located.

- In Person - If the individual does not have a phone, or cannot be reached by phone or other methods, the detective and the advocate may go to the victim's most recent address, or known whereabouts, and attempt a brief face-to-face meeting.

- In Person – Another Jurisdiction - If the victim/survivor no longer lives in the region, the detective may ask an officer from the appropriate jurisdiction to go to the victim's most recent known address to attempt to notify. In such instances, the officer will be asked to deliver a brief, scripted message requesting that the victim contact the advocate. The message delivered by the officer should be decided ahead of time and stay in line with the victim-centered goals of the SAKI project. The detective and the advocate will develop a generalized script that will be provided to the officer to help minimize the potential for triggering the victim/survivor and maintain their confidentiality and safety.

Opt-in/Opt-out Notification Method

Victim/survivors may also initiate contact through the opt-in/opt-out notification help line. This empowers the victim and gives them control over initiating contact to learn information about their SAK. When a victim/survivor phones the help line, they will get a victim-centered voice recording letting them know they will receive a return call from the advocate within the next two business days that will address questions they may have related to their case, and/or their sexual assault kit. No new information should be provided to the victim/survivor over the help line. The advocate will explain that we may not have the results of their SAK yet but will notify them as soon as we have them and have had an opportunity to review their case.

Information to include in the voicemail message:

- ❖ Thank them for reaching out to the help line.
- ❖ Clearly state that if this is a current emergency, or they are calling because they were recently assaulted, they should seek emergency assistance, call 911, or go to the local hospital.
- ❖ Inform them that any communication between a victim/survivor and an advocate is confidential, with the exception of things that as an advocate we are mandated to report such as child abuse, being a threat to yourself or others, etc.
- ❖ Provide a timeline for when they may expect a response and information about what can and cannot be shared over the phone.
- ❖ Request the following information: contact information, whether is it safe for us to return the call, is it safe for the advocate to identify themselves and leave a voicemail if applicable, current address, and basic details from the time of the report that they may remember- year it occurred, their age at that time, was a report filed with law enforcement, etc.

At the conclusion of initial notification, whether active or opt-in/opt-out, if victim/survivor does not want to have further contact regarding the SAKI project:

- Apologize for the delay in testing and for this call intruding on their life now.
- Verify they do not wish to be involved in moving forward with any possible investigation.
- Obtain verbal permission to relay their wishes to the detective.
- Assure them that no one else will contact them again regarding this project.
- Notify them that Alexandra House services are available, regardless of law enforcement engagement and provide contact information.

Meeting with the Detective and Advocate

The focus of the in person meeting is to discuss in detail information about the case, including the result of the tested SAK. It is an opportunity for the victim/survivor to ask any follow up questions and to learn the process of what will happen if they choose to move forward with additional investigation. The detective may also want to discuss, or have questions about, the initial incident. The advocate's role is to provide consistent, non-judgmental support. It is important to validate the survivor's experience; time has passed, sometimes many years, and they may not remember certain things about what happened, or may remember them differently.

Stress to the victim/survivor that any further movement related to their case is their choice and that they do not need to make a decision immediately. Encourage them to think it over and to discuss it with a supportive person or an advocate.

Meetings between the victim/survivor and the detective and advocate will be held under the following circumstances, often depending on the results of the testing of the SAK:

If the test results indicate sufficient DNA was present, but there is no match in the combined data index systems (CODIS), the advocate and detective will meet with the victim/survivor if they wish to have a face to face conversation. If no additional evidence has been identified and/or there are no new investigative avenues to explore, the objective of this meeting will be to answer any questions the victim may have, explain the process that was followed with their SAK and offer resources and support.

If the test results indicate that DNA was present and there was a match in CODIS, the advocate will make every attempt to schedule an in-person meeting with the victim/survivor. The objective of this meeting will be to provide the victim/survivor with as much information as possible, so they can make an informed decision about whether they wish to participate in any further investigation and/or prosecution.

If the victim/survivor makes contact via the opt-in/out-out notification line and wants to have a face to face meeting, the detective and the advocate will hold a brief meeting with the victim/survivor to answer any questions they may have, to explain the process that was followed, and to offer resources and support.

- Attempts will be made to schedule in person meetings within a few days of the initial notification. It is important not to let so much time pass that it feels like you are re-notifying the victim.
- The victim/survivor can choose where the meeting will take place - in their home if safe, Alexandra House offices, a neutral location, or law enforcement offices. In cases where there is potential to move forward with the investigation, holding the meeting in the sheriff's office where an interview can be recorded is likely necessary.
- Ask victim/survivor if they would like a meeting reminder call.
- Verify that the victim/survivor has the advocate's contact information in the event they may need to reschedule.
- Confirm you have at least one alternative method of contact.

Bring a packet of resources to leave with victim/survivor regardless of any further contact, if they are agreeable to taking the information. Items to include in the packet:

1. Contact information for the detective and advocate
2. Counseling resources
3. Information about the Minnesota SAKI program
4. Community resources and hotlines

*Every victim/survivor will also need to sign a release of information and Alexandra House's Data Privacy Act Disclosure form when meeting in person.

In the event the victim/survivor does not want to meet in person, they will be offered the option of meeting over the phone via conference call with the detective and the advocate. In keeping with the victim-centered project goals it is important to make sure the victim/survivor feels comfortable.

Prosecution

If the victim/survivor wishes to participate in moving forward with the case, the detective will be working closely with the prosecutor to determine if sufficient evidence exists to go forward with a criminal charge. If the case is charged, the SAKI advocate will notify the victim/survivor of the Victim Witness Program in the county attorney's office and connect the victim/survivor to a Victim Witness Specialist. In this scenario, the SAKI advocate will coordinate with the victim witness specialist to provide services and will continue to support the victim/survivor without judgment and ensure all parties involved understand their wishes.

In those cases where the county attorney's office has declined to file charges someone from their office

will contact the victim/survivor to discuss the reasons for this decision. In these instances, the SAKI advocate will provide support to the victim/survivor and ensure their wishes are communicated and understood by all parties involved. The SAKI advocate will work along with the county attorney-Victim Witness Specialist to explain to the victim/survivor the factors involved that led to the decision not to prosecute while validating the victim's experience.

Working with victim/survivors from certain cultures and populations:

- **Non-housed individuals**: Victim/survivors from this population are likely have more imminent needs, such as safe shelter or housing, or adequate food access, which take precedence over meeting to talk about their SAK being tested. That doesn't mean their case does not still affect them, or that speaking with the advocate and/or law enforcement is not important to them, but currently their basic needs must be met for the victim/survivor to be in a place where they can address other concerns.

- **Youth**: Working with younger victim/survivors can take more than one interaction to gain their trust, especially if the youth has prior involvement with law enforcement or the criminal justice system and had a negative experience. It is common working with younger people who have been assaulted by adults these victim/survivors have learned to not trust, open up, or talk to adults. The detective and advocate in these circumstances might have to have a couple interactions before the young victim/survivor will feel safe enough to discuss their assault and possible case.

Factors to consider when deciding if notification of a minor victim will take place:

- Was the victim the reporting party or was it a parent/guardian/mandated reporter?
- Would testing the kit have made a difference in the original investigation?
- Sufficient vs. insufficient DNA present in SAK.
- If DNA is sufficient, was there a hit to CODIS?
- Age of the victim at the time of assault.

- **Limited English Proficiency**: If the advocate calls for the initial notification and discovers a need for an interpreter, they will either use the Language Line, or arrange for an in-person interpreter through the Sheriff's Office if that better meets the victim/survivor's needs. If that individual does want to go forward and meet with the detective in person, then the Sheriff's Office would arrange for an interpreter to be present and the conversation would be held at the Sheriff's Office. If the victim/survivor does not want to go forward with law enforcement but would like to receive advocacy services, from that point on an interpreter would be utilized through Alexandra House.

- **Elders:** Elderly victim/survivors may require a slower pace than the advocate and detective are accustomed to. Allowances would have to be made to make sure the victim/survivor understands what is going on with their case currently, what this project is doing with their information, and what is expected and sometimes those steps will have to be repeated multiple times. Like with all victim/survivors, mirroring the language each individual uses and meeting each victim where they are at goes a long way to making each person feel valued and that their story matters.

- **Persons with mental health concerns:** The notification team must be prepared for working with victim/survivors that present with mental health concerns. Trauma may manifest itself differently, and communication strategies might need to be adjusted. It is best to use basic, nonthreatening language, check in frequently with how the person is feeling about what

is being discussed, assure the victim/survivor there is no judgment, and reaffirm throughout that you believe what the victim is saying.

- **Prior victimization and trauma:** Adults who were assaulted as children can sometimes regress to the age they were when the traumatic event happened. Care must be used when talking to a victim/survivor of childhood abuse who is now an adult. Great ways to do this is include being aware of body language and breathing, to take as many breaks as the victim needs, and to allow the victim/survivor to direct the interaction as much as possible.
- **LGTBQIA+ and male identifying victims:** Regardless of sexual preferences, these are two populations where sexual assault is vastly underreported. Some reasons for underreporting in these populations are fear of exposure, thinking they won't be believed by those in the reporting fields, and disbelief or shaming by their loved ones and those in their communities. It is very important for the notification team to be aware of pronouns used by victim/survivor and other parties. Also "she" is not always the victim and the relationship partner of "her" is not always a "he." As with all notifications there should be no judgment bestowed on the victim/survivor. When reporting sexual assaults or discussing their trauma even years later, these victim/survivors may be dismissive because they most likely have been routinely dismissed and disrespected in regards to experienced trauma. Validating their trauma and treating them with dignity around their notification will show that their experience deserves attention and resolve; again, however they choose to handle it.

Example Initial Phone Contact Script

"Hello, my name is Vanessa and I am an advocate calling to speak with you about a report you made back in (jurisdiction) in (month, year). So, I know I am speaking with the right person, can you verify your birthdate for me?"

"Thank you. I am calling you about a sensitive topic you might not be available to discuss, are you somewhere you can speak in private? Do you have a few minutes to talk? I can call back if you have a time that works better for you."

"I am an advocate with Alexandra House, a nonprofit organization in Anoka County, are you familiar with what we do? (Explain if not) Anything you discuss with me is confidential and I will not disclose, not even to law enforcement, without your consent. We are collaborating with a multi-disciplinary response team including Anoka County Sheriff's Office (ACSO), to look into cold case reported assaults. I would like to speak with you about the report you made in (month, year), do you recall the incident I am referring to?"

"I know this call and bringing up that event could be a shock for you, I want to apologize for the time that has passed before someone reached out to you. We have created a team to address these cases and do our very best to resolve them, connect with the victim/survivors, provide any additional information we possibly can and provide you with support and resources."

"If you are open to it, the main purpose of this call is to arrange a meeting with you, myself, and the detective with ACSO to review your case and let you know about new developments. I know this might be a lot to take in; you certainly don't have to decide right now. If you need, please take a few days to think about it and reach back out to me with whatever you decide. If you are okay with it, can I check back in with you in five days if I haven't heard back from you? Are you willing to give me an alternative way to contact you, besides this number, so I don't lose contact with you?"

"Remember, because I am what's called a community-based advocate, with Alexandra House, and anything you and I discuss privately is kept strictly confidential. I don't share anything you tell me without at least a clear, verbal release, for instance with the ACSO Detective, letting him know when you'd like to follow up, or a signed release, if you want to be connected with other resources in our community that might want to verify with me you are a client of Alexandra House, if you want to get to that point.

Even if you choose not to follow up, don't want to talk about your previous report and don't want to go forward with an in-person meeting, please know Alexandra House has a 24/7 hotline you can call to process anything that comes up or ask questions. That number is 763-780-2330 and we also have information on what we do and resources on our website www.alexandrahouse.org. Again, my name is Vanessa and my direct number is (work cell number). Thank you so much for taking the time to speak with me today.

Example Letter as Attempt at Contact

Letterhead from Alexandra House
Victim/survivor name
Victim/survivor address

Dear Victim/survivor,

I am looking to connect with you regarding an incident you reported to Anoka County Sheriff's Office in [month, year]. I know it has been (x) years since that report was made and I want to apologize to you for the time that has passed since someone reached out to you. Your report is currently being reviewed by a response team and we would like to discuss what that looks like with you. If you are interested in speaking further about your case, we are available to meet at your earliest convenience. I have tried to contact you at (phone number) but it appears that is not a correct number for you. If you could call me, we could schedule a meeting to go through questions you probably have. My phone number is 763-218-5463. I am a community-based advocate, so our conversations will be confidential. I can answer some of your general questions about the process and our response team. My office is at the Anoka County Sheriff's Office and if you decide you want to go forward with an in-person meeting with myself and a detective, I will ask you for a verbal release to pass on your basic contact information and I would set that meeting up in a location that is convenient for you.

By contacting me it does not mean your case automatically moves forward. That decision is strictly up to you and you don't have to decide anything immediately. If you are not ready to contact me right away, keep my information and contact me when you are ready.

Thank you very much for your time. I look forward to hearing from you.

Sincerely,

Vanessa Ellingson
Advocate 763-218-5463
vellingson@alexandrahouse.org

Case Process