

**Bridging the Gaps:
Needs Assessment to Strengthen
Services for Survivors of Sexual Assault**



This resource was made possible by Grant Numbers 90EV0563 and 90EV0562 from the Administration for Children and Families, Office of Family Violence Prevention and Services, U.S. Department of Health and Human Services.

The opinions, findings, conclusions, and recommendations expressed are those of the author(s) and do not necessarily reflect the views of the Administration for Children and Families, Office of Family Violence Prevention and Services.

This needs assessment was conducted during the spring and summer of 2025 by Dr. Laura Sinko and Kayleigh Izzo (IRB Protocol #32468) from the Phoenix Gender-Based Violence Lab at Temple University College of Public Health.



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The National Sexual Violence Resource Center (NSVRC) was tasked with reaching out to the public to learn more about how they view and understand sexual assault services and resources available in the United States. This trauma-informed needs assessment surveyed 645 participants nationwide to identify emerging issues and promising practices in sexual assault response and prevention, training and support needs, and service demands for sexual assault survivors.

The findings reveal significant gaps in service accessibility, persistent barriers to seeking help, and clear preferences for specific types of support resources. While this needs assessment was not large enough to provide a comprehensive overview, it offers valuable information for professionals working to support survivors and prevent sexual abuse, assault, and harassment.

The needs assessment consisted of a survey that collected 645 completed responses through online research platforms and social media promotion. Of the people who took the survey:

- 42% identified as survivors of sexual harm (259 people),
- 27% were actively supporting a survivor in their life (165 people),
- 22% identified as a part of the general public (134 people),
- 9% said they weren't sure if they experienced sexual violence (54 people).

The people who took the survey represented a mix of ages, genders, races, ethnicities, abilities, sexualities, and other backgrounds.

Key Takeaways:

- Participants most commonly went to social media, news media, friends and family, websites, and online search engines for information on sexual harm.
- When specifically seeking support services, participants used search engines, social media, healthcare provider referrals, and recommendations from friends and family.
- Of the people who said they were survivors of sexual harm, about two-thirds (64%) have reached out for professional support (such as legal, healthcare, or law enforcement).
- Major barriers for survivors include stigma/shame (52%), fear of disclosure (51%), and cost concerns (46%).
- Individual counseling/therapy is the most desired resource; 78% were likely/very likely to use it.
- Online and virtual options are increasingly important, with 76% likely/very likely to use informational websites.
- Anonymity and 24/7 availability are top priorities for digital resources.
- Survivors were more likely to know about local resources, with 26% very familiar compared to only 4% of the general public. Still many people lack awareness: 17% of survivors and 35% of the general public said they didn't know about any community resources.

Focus Groups with Survivors

Twelve survivors who participated in the survey volunteered to participate in one of four focus groups, with three survivors in each group. These trauma-informed focus groups identified emerging issues, training needs, promising practices, and service demands for sexual assault survivors. Participants used photography to capture both meaningful support in their healing journeys as well as gaps and barriers in current services. Survivors who participated shared these photographs with each other during the focus group to discuss under the guidance of a trained facilitator.





Key Findings:

- Survivors need body-based healing approaches that address trauma somatically (for example: breath work, yoga, meditation, or somatic experiencing).

“A lot of what’s left is the shock in my body... giving my body opportunities to relax is a huge part of the journey that I’m on now.”

- Survivors need individualized, culturally-responsive services rather than one-size-fits-all approaches.

“Every survivor has gone through a different experience, have different needs, have different support systems... I don’t understand why that concept has not been passed down to other forms of support.”

- Survivors need long-term support that recognizes healing as a lifelong journey.

“We’re not a survivor just when it happens... we’re a survivor... decades later, you know? And we’re still dealing with very difficult things.”

“...healing gave a lot of us the capacity to feel joy again...”

- Peer support and community connection are “the biggest keys” to healing. Survivors struggle to combat isolation and shame alone.

“You’re not the only one. In fact, most of us have been through this. So just kind of hearing that and feeling validated... it’s the club no one wants to be in, but it’s nice to know you’re not alone.”

“That connection has been probably one of the biggest keys to my healing and continued healing... we might not have the same experience, but we know.”

“The perception needs to change from seeing us as broken individuals that can’t handle anything, to being survivors that have overcome the worst thing that could happen to them.”

- Nature-based healing and creative expression are essential recovery resources (64.1% of survivors were interested in nature-based healing).

“Nature really, in all of its elements, grounds me in every way... I wish everyone had access to this multitude of nature and wildlife and being outdoors.”

“I get a lot of healing through music... art is a really great healing technique for everybody.”

- Systems and service providers often fall short of what survivors need. There is a greater need for training and standards for trauma informed care across systems.

About primary care response to sexual assault:

“The treatment I got from him was just ice cold... I felt as if, like, I had committed a crime the way... what questions were asked of me.”

About disclosure response in treatment:

“They said we don’t talk about that here.”

- The importance of validating that all experiences deserve care. A critical finding was that 51.6% of survivors felt their experience “wasn’t serious enough” to seek help, yet when services did provide simple validation and genuine listening, survivors experienced profound healing.

“I wish there had been someone to talk to who would believe me without blaming.”

Critical Gaps to Bridge:

- Survivors did not understand the range of free and confidential sexual assault support services offered at community programs.

“We underestimate the village, you know, and how much power that can bring to us as a whole.”

- Medical and mental health providers overly relied on medication and symptom management rather than supporting a range of healing practices.

“My drug dealer was my doctor... here’s a prescription of Xanax, and here’s a prescription of Zoloft, go home.”

- There was a lack of trauma-informed training across healthcare, education, and service systems.

“The focus wasn’t... on healing, it was symptom management. It was, okay, how do we just suppress these out-of-control emotions.”

“The perception needs to change from seeing us as broken individuals that can’t handle anything, to being survivors that have overcome the worst thing that could happen to them.”



- Financial costs and insurance were often barriers to evidence-based trauma treatments.

“That is completely out of my budget...[and]... it felt like the most culturally relevant healing program that I had encountered.”

- There are not enough culturally-sensitive providers, especially for LGBTQ+ survivors and survivors of color.

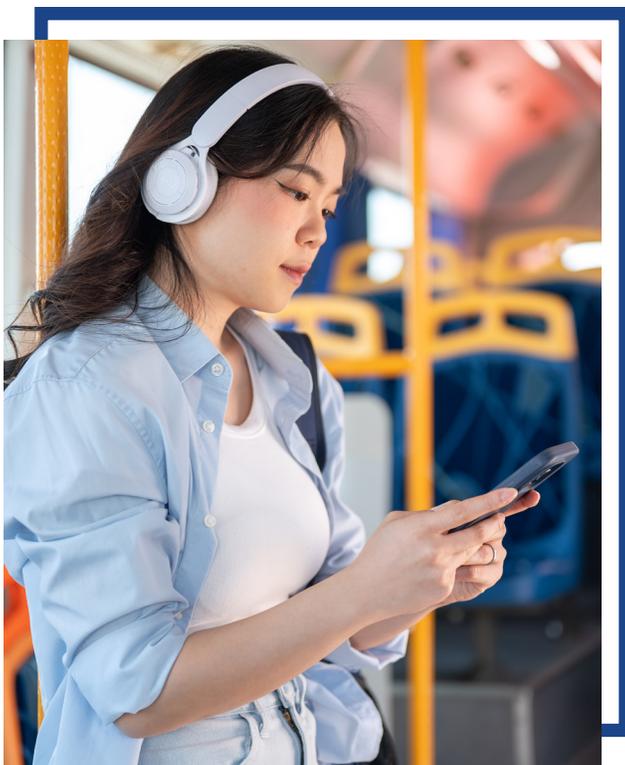
“Finding practitioners in different modalities that I wanted that also understood my lived experience as a Black woman, from the Southeast... not needing to translate that lived experience can be really important in therapy.”

“Having that weaponized against me about, that’s why you’re gay... never really having a place where I could fully talk about my experiences.”

- Healing starts with meeting basic needs. Without stable housing, transportation, or access to food, it’s nearly impossible for survivors to attain other forms of support. These fundamental needs must be addressed first.

About finding affordable, safe, stable housing:

“A lot of these organizations don’t know the full impact of the experiences, and there’s so many timelines that you have to meet. There’s so many requirements, so many barriers, just to get in to help... Some places don’t even allow you to have your kids, you know, they don’t allow you to have your pets. They ask you to surrender so many things that have kept you in the present moment, or given you some type of support, or hope.”



About Transportation Barriers:

“You’re literally barring me from accessing this care... if you’re not... taking me there, like, you take me to places that are further than there.”

- Survivors face fragmented care which requires them to coordinate multiple systems while healing from trauma. It is challenging for survivors to navigate disconnected healthcare, legal, housing, and service systems simultaneously, with no single place to get coordinated support.

“[State insurance] is able to pay for me to have transportation to medical appointments, [but] they say it has to be a medical appointment or a

service that's billed to [state insurance]. And a lot of the time, sexual assault services are free... anybody who requests transportation to this place should have a right to, and no transportation requests to this place should be denied."

- Addressing the root causes of sexual violence requires comprehensive prevention education across the lifespan.

"I believe my own assault could have been prevented by better education, better sex education in the schools...not enough kids...know that that's a thing."

"There's a lot of people that don't know that coercion is a form of sexual assault... I am tired of telling the boys, like, if that girl is knocked out, she's not consenting."

- Survivors deserve to be empowered to heal and reclaim life beyond survival.

"After a traumatic event, like, the sun will shine again. It feels like it's not going to shine again, but ...the sun is shining again for me."

"How healing gave a lot of us the capacity to feel joy again in ways that it seems like being stuck, or numb or frozen, really stole... joy as foundational is kind of a motivator to get you there."



