

**Maine Sexual Assault
Services Assessment
2017-2018**

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Introduction

MECASA is committed to ensuring that all survivors have access to the services they need in their local communities. We believe that violence is rooted in oppression, and the same oppression that makes someone vulnerable to sexual violence also creates barriers in accessing services. Our approach to sexual violence services includes both undoing the underlying oppression, as well as the barriers to support and healing.

MECASA provides training, technical assistance, coalition building, and resource development to support sustainable, community-led sexual violence services for underserved populations. We work to build the capacity of local sexual assault support centers as well as culturally- and community- specific services.

The work to create more inclusive services and a world without sexual violence is informed by decades of victim advocacy by survivors and activists in Maine and as part of the national anti-sexual violence movement. In particular, the women of color within the anti-sexual assault movement fought for federal funding in the form of the Violence Against Women Act (VAWA) to expand resources for culturally specific services in order to address the identified needs in their communities. Through their leadership, and the voices and expertise of others within oppressed communities, the anti-sexual violence movement strives to constantly improve our work by constantly learning and adapting our programs to meet the safety and service needs of all survivors.

Role of this Assessment

The first Underserved Needs Assessment was done in 2015 by the Maine Intercultural Communication Consultants to give us more information about Maine's population-specific survivors and identify the strengths and gaps in the service provision for these communities. The needs assessment included ten recommendations to inform MECASA's work plan for programming, training, and technical assistance. After that needs assessment, MECASA hired our first Underserved Programs Coordinator (now Equity and Access Coordinator) and implemented many of the recommendations. This assessment is a follow up of the first, and is intended to measure the impact of MECASA and local centers efforts, as well as to learn if culturally and community-specific providers feel supported by their partnerships with MECASA and local sexual assault support centers.

This needs assessment set out to answer the following questions:

1. To what extent do current sexual assault services reflect community needs?
2. To what extent are partner agencies prepared to effectively support survivors of sexual assault?
3. To what extent are effective, competent, and appropriate services available for underserved survivors of sexual assault in Maine, and what are the gaps?
4. To what extent are MECASA's services (training, technical assistance, and resource development) enhancing the ability of sexual assault service providers as

well as partner agencies to meet the needs of underserved survivors of sexual assault?

We will use this needs assessment to analyze the work we have done, review previous recommendations and prioritize next steps regarding training, coalition building, policies, and practices.

Definitions

Different language is used in different arenas to reflect that there are certain populations who don't have the same access to appropriate services as others due to marginalization. It has been articulated so we as a movement can fix it, but language is important, and we wanted to offer context to where some of this language came from.

Underserved: Victims of sexual violence who do not receive services and support that can fully meet their physical, emotional, spiritual, and financial needs after a victimization.¹

Populations who face barriers in accessing and using victim services, which include populations underserved because of geographic location, religion, sexual orientation, gender identity, underserved racial and ethnic populations, populations underserved because of special needs (such as language barriers, disabilities, alienage status, or age), and any other population determined to be underserved.² In the field of sexual violence, we may find populations who are underserved, but not otherwise marginalized, like cisgender men or veterans.

This is language connected to specific federal and state funding.

Culturally or ethnically specific services: We associate the term “culturally specific communities” to racial and ethnic identities, specifically: American Indians (including Alaska Natives, Eskimos, and Aleuts); Asian Americans; Native Hawaiians and other Pacific Islanders; Blacks; and Hispanics.³

This language is connected to federal funding, advocated for and by the black, brown, and indigenous women of our movement.

Marginalized population: A group of people united by shared experience of oppression and cultural resilience on the basis of such identities as race, ethnicity, language, immigration or refugee status, gender identity/expression, sexual orientation, ability, blindness, Deaf/hard of hearing, religion, or Tribal sovereignty. We mean communities whose access to safety, resources and services has been – and often still is – limited.⁴

¹ OVC National Victim Assistance Academy

² VAWA

³ This is in line with many federal funding sources' definitions, especially at the Dept. of Justice, which oversees the Office of Violence Against Women and the Office of Victims of Crime.

⁴ Oregon Coalition Against Domestic and Sexual Violence.

Methodology

Survey Design & Process

This assessment was conducted through the following means:

1. Collecting data from three groups: sexual assault support center staff; partner organizations; and survivors of sexual assault. Surveys were all conducted using electronic survey tools or paper surveys which were then entered into the electronic system.
2. Reviewing existing data available in our statewide services database and the United States Census Bureau.
3. A brief literature review to obtain other data related to prevalence of violence within subpopulations.

The purpose of the survivor survey was to gain insight into survivor awareness of local sexual assault support services, to determine which services were the most helpful to the survivor, and to determine whether services were administered in an appropriate manner. If the survivor indicated that they did not receive services, they were asked about their reasons behind that decision so that potential barriers to Maine survivors accessing services could be identified. The survivor survey was conducted in 2017 using Survey Monkey and led to a total of 103 responses, 75 of which identified as being part of an underserved population.

The purpose of the partner organization survey was to gather information about the trainings partner organization staff have received regarding sexual assault, how many organizations access MECASA trainings, and to gain a better understanding of the relationship between partner organizations and sexual assault support centers. The partner organization survey was conducted in 2017 using Survey Monkey and 27 responses were received.

The purpose of the sexual assault support center survey was to identify the strengths possessed and challenges faced by Maine sexual assault support centers in serving underserved populations. The center surveys were primarily conducted by paper over the course of the two-day Affinity meeting in June 2017, with several responses subsequently received through Survey Monkey. A total of 45 responses were received from sexual assault support center staff.

Demographic and Crime Victimization Analysis

Data from the United States Census Bureau, Gallup, and other sources was gathered to form a baseline comparison between demographic data and Maine sexual assault support service statistics. In addition and where possible, data was collected for crime victimization rates among specific underserved populations to better inform demographic comparisons and to evaluate which populations are being served at rates reflective of their population, where there was successful specialized programming, and where we have room for improvement.

The Muskie School for Public Service at the Cutler Institute of the University of Southern Maine reviewed (deidentified) demographics and service statistics within the EmpowerDB statewide sexual violence service database in 2018 and analyzed the information. Additional service statistics were downloaded from EmpowerDB for review by MECASA staff in 2017 and again in 2019.

Special thanks to Courtney Burne, MECASA's Americorps VISTA during the summer of 2017, for her work on the majority of the demographic and crime victimization information.

Review of 2015 Recommendations

In reviewing the 2015 recommendations we are confident that MECASA and member programs have meaningfully implemented many of these recommendations. There are some we are still working on, others yet to begin (and others a very, very long game), but progress has been made.

1. "We don't know what we don't know." Begin to collect additional demographic data of each client served and those people reached in outreach efforts.

The launch of EmpowerEB has offered an opportunity for big and small pictures of population-specific data. Our focus now is learning how to use that data to help us and centers build training and programs.

2. "We gotta know our populations." Receive on-going, culturally broad and culturally specific trainings to deeply understand the underserved population and hone cultural competency.

One of the goals of the Equity & Access program the last two years was to weave population specific training within affinity, the conference, webinars, and other foundational training.

3. "Go where they are." Provide sexual assault trainings, outreach, and services where the population is and, when possible, in partnership with those who are already serving the population well or with members of the underserved community as partners.

Empower data reflects an increase in outreach and drop-in services by centers and MECASA to other populations and communities. MECASA TA includes community mapping and drop-in services.

4. Leverage technology to serve diverse populations.

Zoom and the equipment to support Zoom was purchased with this goal in mind. We all continue to grow our literacy and ideas around what is possible when it comes to using technology to support survivors.

5. “Hire people who look like me.” Employ and retain center staff who know and understand the underserved communities.

This work is on-going, and we look forward to using the 2020 assessment to talk more meaningfully about hiring and supporting a diverse and thriving staff.

6. Nurture and develop partnerships with underserved community members and their service providers.

This was highlighted as one of the most valuable means with which to reach survivors who are a part of marginalized communities and we continue to prioritize this.

7. Consider expanding the fold of MECASA to include additional organizations that are currently providing services to (traditionally underserved) survivors of sexual violence.

MECASA has increased relationship-building and training & Technical Assistance to organizations currently providing services to survivors to traditionally underserved or marginalized communities.

8. Consider public awareness/media campaigns that address popular misconceptions.

We have two population-specific media campaigns in our sights: One in late 2019 (rural) and the other for 2020 (English-language learners).

9. Consider a standardized, statewide approach to serving particular groups with technical assistance from national stakeholders.

MECASA staff are always connecting to national stakeholders and local center staff for approaches, ideas, needs, and information sharing.

10. More staff, more funding.

The expansion of VOCA funds into primary underserved and/or rural positions was driven by this work and the 2015 assessment.

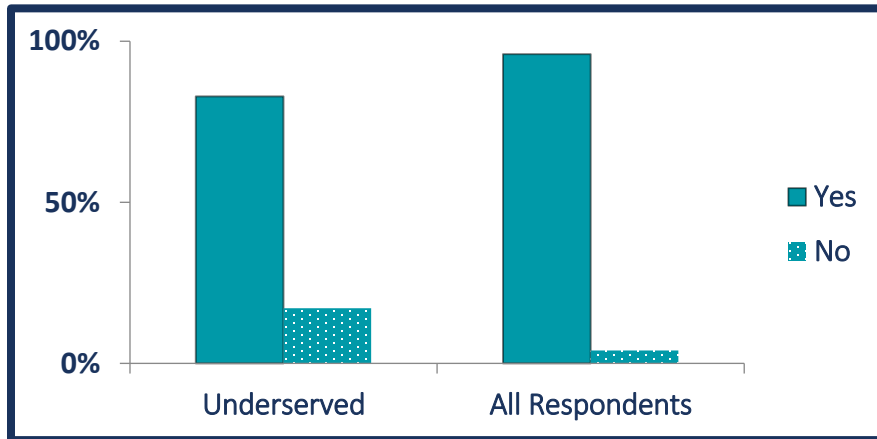
Overall Survey Findings

A total of 103 survivors completed the statewide survey, 75 of whom identified as being a part of one or more underserved populations. While our analysis compares survivors from specific demographics as compared with individuals who did not identify as a marginalized population, it should be noted that **many survivors identified with more than one underserved population**. This is an important reminder that competency or knowledge in a specific population does not create readiness to serve a whole person; it simply allows providers to be better informed. Trauma-informed appropriate services meet the needs of the whole survivor.

Where there were population-specific findings, the information is included in the population-specific section below. Some general findings across all types of populations include the following:

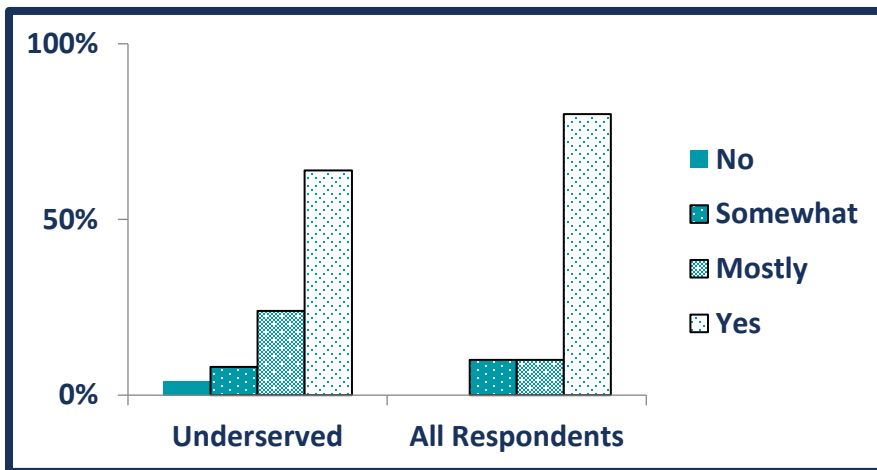
Awareness of sexual assault services across all communities was high among respondents to the survivor survey. Still, survivors from underserved or marginalized populations are less likely to be aware of sexual assault services in their communities.

Question: Are you aware of sexual assault services in your community?



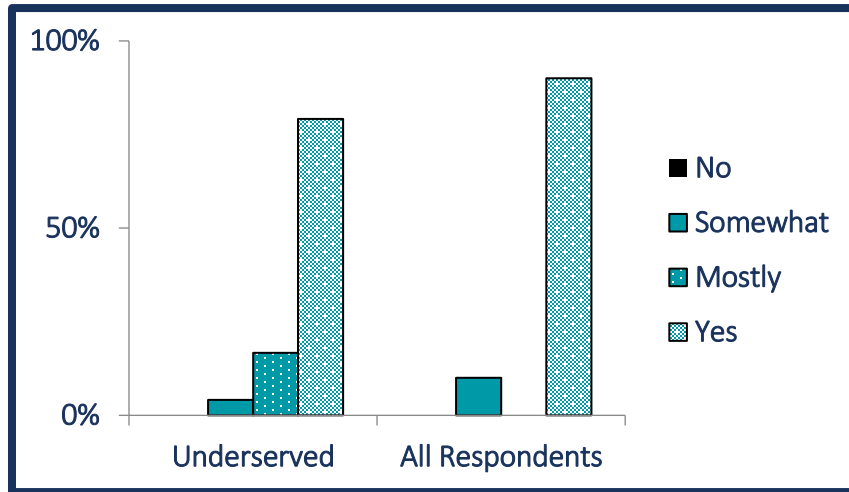
Survivors report that Maine’s sexual assault services have met their needs related to their victimization. Still, survivors from underserved populations are more likely to answer that their needs were ‘mostly’ met by services, instead of to answer ‘yes, their needs were met’.

Question: Did This Center Meet Your Needs Related to Experiencing Sexual Abuse or Sexual Assault?



Survivors feel heard by Maine’s sexual assault service providers. Survivors from underserved populations are slightly more likely to answer that they are ‘mostly’ heard – but less likely to answer ‘no’ than their peers.

Question: Did you feel heard by the service provider/s?



A statewide survey of sexual assault service providers was conducted to assess overall successes and barriers in developing and providing programming for underserved populations. Providers indicated high levels of competency across a range of populations (see full survey in the appendix), and many centers had developed either special funding, relationships, or programs to support outreach with specific populations.

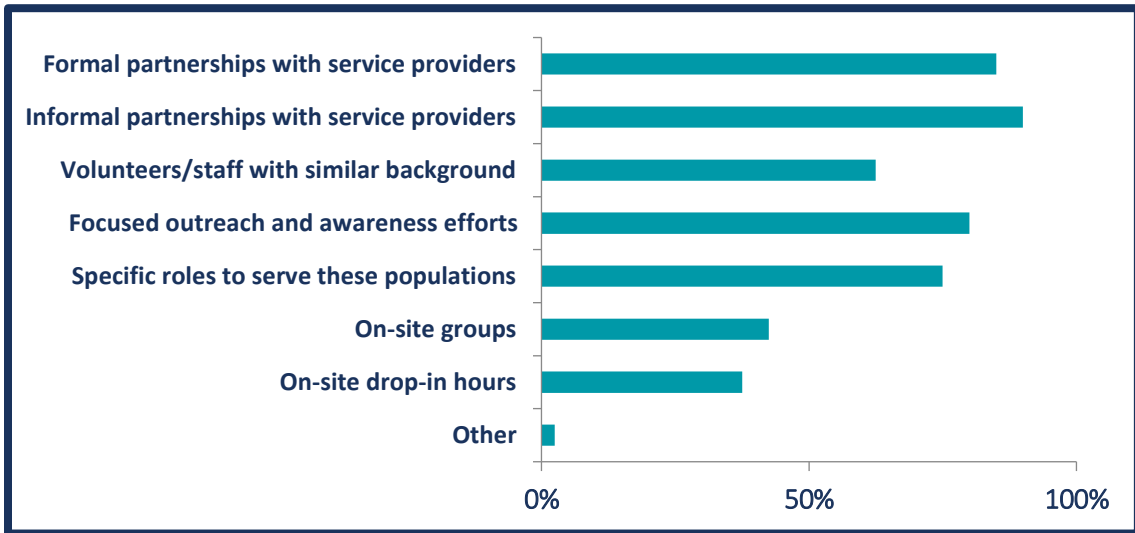
In general, sexual assault service providers report the following:

Formal and informal relationships with allied service providers are the backbone of effective engagement with underserved populations. In the “Collaboration Findings and Recommendations” section, this is addressed further; in short, sexual assault services are often enhanced through a teamwork approach, and such collaboration has been a hallmark of sexual assault services for decades. Informal and formal partnerships were rated at 90 percent and 85 percent respectively for factors that contribute to success.

Focused staff roles and specific programs lead to more successful outreach with specific populations. Centers able to develop funding or programming to support specific staff and outreach report that they are some of the most valuable tools for success (75 and 80 percent, respectively).

Lack of staff capacity, time, or funding to develop specialized outreach or programs is the key barrier to success in serving special populations. As a result of these survey findings, MECASA has focused specifically on addressing this barrier. Projects such as rural-specific advocates, underserved-specific advocates, and specialized programming such as the co-facilitated Trans*- support groups have all been developed with the attempt to address this barrier. Still, we know there is more work to do.

In your opinion, what factors contribute to success for you or your organization in serving underserved populations?

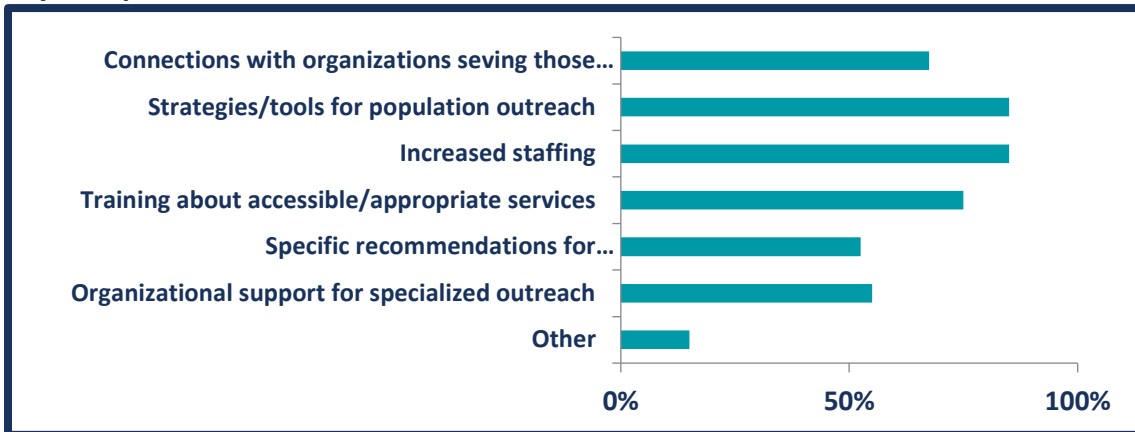


In your opinion, what factors contribute to barriers for you or your organization in serving underserved populations?



Other: Cultural barriers/trust from communities, lack of diversity in staff, lack of accessibility of our services

In your opinions, what resources are needed to address those barriers?



Other: Time, funding, diversity, education about where these populations reside in services areas and rates of sexual violence, hiring that reflects these needs, better targeted outreach materials and dissemination, prioritizing this population and breaking down barriers to them accessing services.

Review of population-specific data

The following section looks at statistics by population, including survey feedback, 2018 service statistics, and national or statewide statistics. The purpose is to look for places of strength or gaps in serving a particular population and offer resources to support services. See the appendix for center-specific, comparative 2016, 2017, and 2018 statistics.

Age^{5,6,7}

Age is a critical factor for risk and vulnerability to sexual assault. While both younger and older people share the characteristic of having caregivers trusted with their health and safety, those age 65 and older are 92% less likely than 12-24 year olds to be a victim of rape or sexual assault, and 83% less likely than 25-49 year olds.⁸ Many older sexual abuse victims are not receiving help: Social stigma may prevent older individuals from discussing sexual activities or reporting sexual violence, especially if the perpetrator is a family member.⁹

Stats Snapshot

In a study of elder female sexual abuse victims, 81% of the abuse was perpetrated by the victim's primary caregiver.

Fewer than one in five female 18-24-year-old survivors receive services following an assault.

In 2015, approximately 50% of calls to Maine's sexual assault crisis and support line related to child sexual abuse.

⁵ (Stats Snapshot #1) Ramsey-Klawnsnik, H. (1991). Elder sexual abuse: Preliminary findings. *Journal of Elder Abuse & Neglect*, 3(3), 73-90. doi:10.1300/J084v03n03_04

⁶ (Stats Snapshot #2) U.S. Department of Justice (December 2014). "Rape and Sexual Assault Victimization Among College Females, 1995-2013." Bureau of Justice Statistics. Retrieved from <https://www.bjs.gov/content/pub/pdf/rsavcaf9513.pdf>, 1

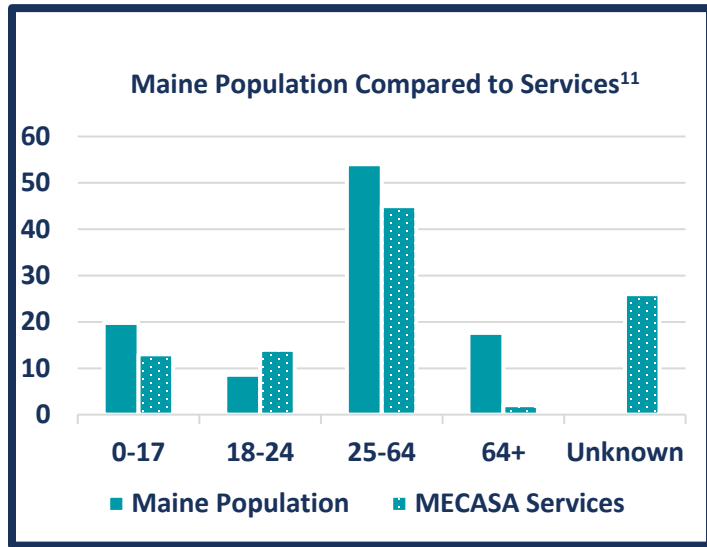
⁷ (Stats Snapshot #3) MECASA Center Service Statistics, 2015.

⁸ Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, *Crimes Against the Elderly, 2003-2013* (2014).

⁹ Burgess Clements, 2006; NSVRC, 2010.

Younger people are at a higher risk of victimization, but they may be more likely to report their experiences to law enforcement and know what services exist and how to access them than the older population.

MECASA member center agencies report that they are significantly more likely to have youth-specific programs or initiatives than for any other subpopulation. In proportion to Maine population, centers are providing more services to young people ages 18-24 than any other demographic: nearly 80 percent of MECASA member center staff responding to this needs assessment report that their agency has “many specific programs, trainings, or services” for youth. This strength is reflected in the survivors they serve; individuals ages 18-24 make up a greater share of clients than the population as a whole.



Approximately one third (32 percent) of centers report they have “many specialized programs” for elders, and survivors ages 65 and greater are served at different rates in different locations across the state. On the whole, statewide services to elders do not keep pace with the rate of Mainers in that age range.

Approximately 78 percent of client records indicated the age of the client, while the remaining 22 percent of client records were missing age data.¹⁰

2018 Service Statistics by Age

Age	AMHC	IRCM	RRS	SAC&SC	SAPARS	SARSSM	SASSMM
0 - 17	87 (22%)	3 (3%)	153 (30%)	244 (34%)	462 (40%)	217 (25%)	117 (24%)
18 - 23	47 (12%)	7 (6%)	57 (11%)	59 (8%)	111 (10%)	69 (8%)	43 (9%)

¹⁰ “Underserved Populations: A Gap Analysis of Victims of Crime in Maine,” by C. Benner and G. Shaler, 2018, Cutler Institute Muskie School of Public Service.

¹¹ U.S. Census Bureau. “Age and Sex: 2011-2015 American Community Survey 5-Year Estimates” Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_S0101&prodType=table

24 - 64	234 (59%)	93 (85%)	240 (47%)	387 (54%)	438 (37%)	399 (47%)	273 (56%)
65+	15 (4%)	6 (5%)	5 (1%)	16 (2%)	17 (1%)	10 (1%)	14 (3%)
Unknown	16 (4%)	0	53 (10%)	7 (1%)	140 (12%)	153 (18%)	40 (8%)
Total Clients:	399	109	508	713	1168	848	487

Gender^{12,13,14}

Women are significantly more likely to experience sexual violence than men. However, many men are sexually victimized in their lifetimes, and social norms regarding masculinity make it harder for male survivors to disclose abuse they experience or to seek services. When we consider gender as an underserved population, enhancing services and outreach for male survivors is often the priority.

Men in specific subpopulations have much more risk of experiencing sexual violence – especially male children and youth; gay, queer, and transgender individuals; and incarcerated individuals. More information about trans survivors in the LGBTQ+ section.

Approximately 16 percent of sexual assault support center clients are male. Because reporting of sexual violence in male populations is so low, it's hard to know whether this is representative of male survivors. We do know that there has been an increase in services to male survivors in both Maine and nationally over time.

Stats Snapshot

Of Maine high school students, 10 percent of female and 4.1 percent of males have been forced to have sexual intercourse against their will.

At least 1 in 6 men have been sexually abused or assaulted.

Only 16% of men with documented histories of sexual abuse (by social service agencies) considered themselves to have been sexually abused, compared to 64% of women with documented histories in the same study.

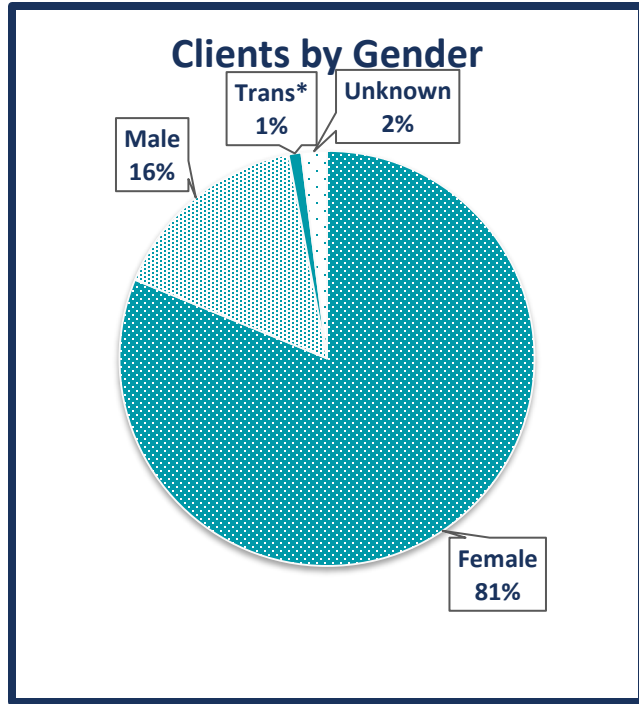
¹² (Stats Snapshot #1) Maine Department of Health and Human Services, Maine Department of Education. (November 20, 2015). "Maine Integrated Youth Health Survey." Retrieved from https://data.mainepublichealth.gov/miyhs/files/HS_Detailed_Reports_MIYHS2015/Maine_High_School_Detailed_Tables.pdf, 65

¹³ (Stats Snapshot #2) Dube, S.R., Anda, R.F., Whitfield, C.L., et al. (2005). Long-term consequences of childhood sexual abuse by gender of victim. *American Journal of Preventive Medicine*, 28, 430-438.

¹⁴ (Stats Snapshot #3) Widom, C.S. & Morris, S. (1997). Accuracy of adult recollections of childhood victimization part 2. Childhood sexual abuse. *Psychological Assessment*, 9, 34-46.

The current rate of 16 percent is up significantly from ten years ago, when males made up approximately ten percent of the total population served, but down slightly from four years ago, when males made up closer to 20 percent of survivors. In general, we see an increase in the proportion of non-female clients (male, gender non-conforming or non-binary, or other genders) as a sign of successful outreach to these populations.

Nearly all client records (98 percent) had gender demographic information reported¹⁵, making it one of the most reported demographics.



2018 Service Statistics by Gender

Gender	AMHC	IRCM	RRS	SACSC	SAPARS	SARSSM	SASSMM
Female	337 (84%)	91 (83%)	429 (84%)	552 (77%)	933 (80%)	678 (80%)	384 (79%)
Male	57 (14%)	18 (16%)	76 (15%)	159 (22%)	213 (18%)	154 (18%)	95 (20%)
Trans	4 (1%)	0	2	2	10	4	3
Unknown	1	0	1	0	12 (1%)	11 (1%)	5 (1%)
Total Clients	399	109	508	713	1168	848	487

Race & Ethnicity

Maine, the state with the least amount of racial or ethnic diversity in the nation (approximately 95 percent of Mainers are white), has very limited data regarding survivors of color. However, in any environment, racial and ethnic minorities experience more sexual violence than white people, as well as greater barriers in accessing culturally appropriate and affirming services.

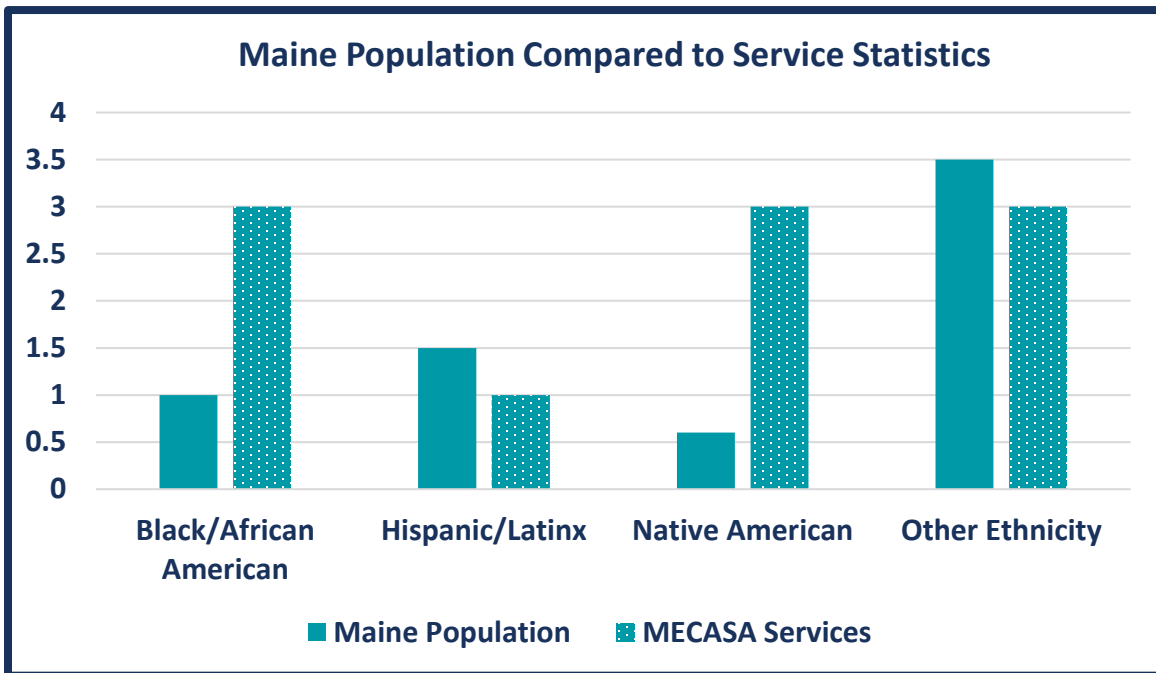
¹⁵ Muskie report.

Slightly more than half of all client records (56 percent) had race demographic information reported. The two categories of White and Unknown account for 94 percent of total client records.¹⁶ The majority of people of color who received services did so from the culturally specific agency. And while the majority of non-white survivors receiving sexual assault services did so through these culturally specific providers, it should be noted that at mainstream service providers, Black or African-American survivors were served at a higher rate than their representation within the population as a whole.

Stats Snapshot

In the United States, about 20 percent of white women experience rape or attempted rape, as compared with nearly 32 percent of multiracial women, and 29 percent of Alaska Native or American Indian women. Rates for Black and Hispanic women are approximately the same as those of white women; rates for Asian/Pacific Islander women are about 9.5 percent.

About 5 percent of white men experience rape or attempted rape, as compared with 9 percent of Hispanic or Black men, 13 percent of American Indian men, and 15 percent of multiracial men.



¹⁶ Muskie report.

2018 Service Statistics

Primary Race	AMHC	IRCM	RRS	SACSC	SAPARS	SARSSM	SASSMM
American Indian/ Alaskan Native	14 (3%)	0	32 (6%)	7 (1%)	1	4	0
Asian	2	6 (6%)	4	2	0	5	1
Black	3	95 (87%)	11 (2%)	4	38 (3%)	13 (1%)	4
Hispanic or Latino	5 (1%)	0	3	2	5	20 (2%)	5 (1%)
Multi-Racial	7 (2%)	0	6 (1%)	32 (4%)	36 (3%)	21 (2%)	3
Native Hawaiian/ Pacific Islander	1	0	0	3	1	0	0
Other	4 (1%)	0	2	0	1	1	2
Unknown	70 (18%)	0	143 (28%)	106 (15%)	184 (16%)	399 (47%)	280 (58%)
White	293 (73%)	8 (7%)	307 (60%)	557 (78%)	902 (77%)	385 (45%)	192 (39%)
Total Clients	399	109	508	713	1168	848	487

Intellectual and physical disabilities^{17, 18}

Individuals with disabilities are one of the populations at highest risk for sexual victimization, and experience rape or sexual assault at more than three times the rate of the general population.¹⁹ These rates are highest among individuals with cognitive or intellectual disabilities, and individuals with multiple types of disability experience much more violent crime than those with only one type of disability.

¹⁷ (Snap shot stats #1-3) U.S. Census Bureau. "Disability Characteristics: 2011-2015 American Community Survey 5-Year Estimates" Retrieved from https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_15_5YR_S1810&prodType=table

¹⁸ (Snap shot stat #4) Sobsey, D., Doe, T. (1991). Patterns of sexual abuse and assault. *Sexuality and Disability*, 9(3), 243-259.

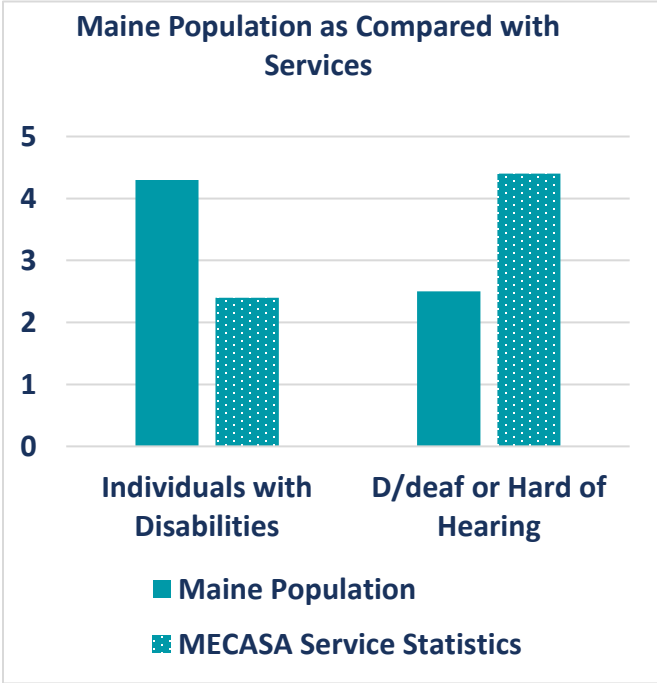
¹⁹ Bureau of Justice Statistics (July 2017) . "Crime Against Persons With Disabilities, 2009-2015 – Statistical Tables." Retrieved from <https://www.bjs.gov/content/pub/pdf/capd0915st.pdf> (pg. 3).

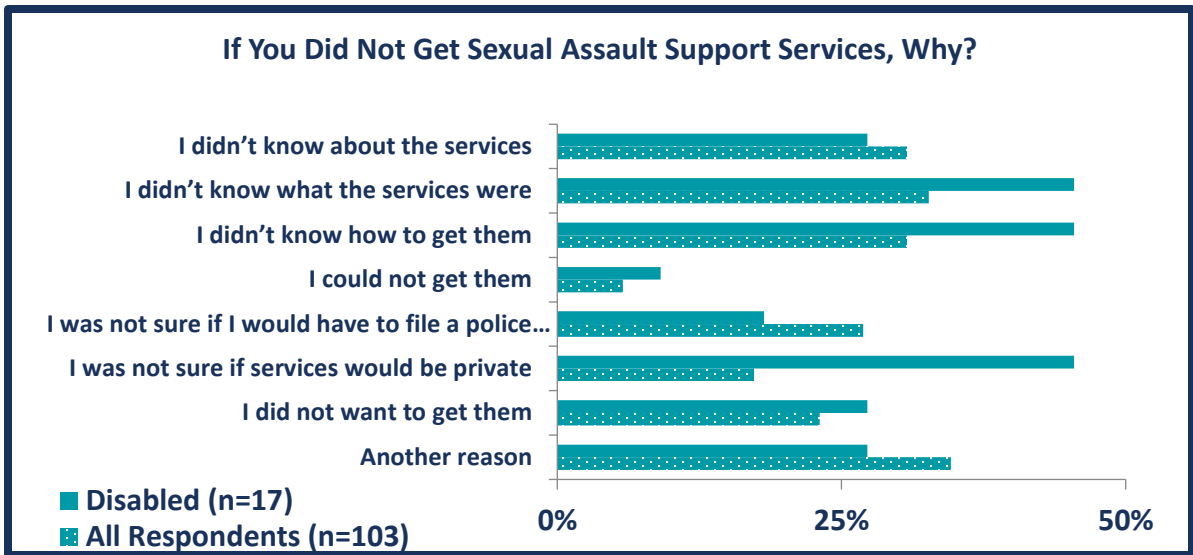
Individuals with disabilities may face a wide array of barriers to accessing services. These may be physical barriers such as lack of communication technology for Deaf individuals or lack of physical access for those with mobility concerns; systemic barriers such as lack of privacy to reach out to services for individuals who live in residential settings or have caregivers; or cultural or social barriers, such as lack of healthy sexuality education for individuals with cognitive disabilities. These overlapping concerns highlight the critical need for providers to consider many kinds of efforts to increase accessibility.

Stats Snapshot

- 16% of Mainers have at least one disability.
- 5% of Mainers are Deaf or have hearing difficulty.
- 7% of Mainers have intellectual or cognitive disabilities.
- 80% of people with disabilities are sexually assaulted; half of those have more than 10 assaults.

In this assessment, survivors with disabilities were only slightly less likely to be aware of local sexual assault services than the general population but were significantly more likely not to know what those services were or how to access them. The most widely reported reason individuals did not access services is due to concern about the privacy of the services - at twice the rate of overall respondents. One survivor noted that they did not access services because they did not realize that the services were free. Maine’s sexual assault support centers serve a significantly higher population of Deaf or hard of hearing individuals than other types of disabilities.





Other, Individuals with Disabilities: Didn't know services were free.

Other, All Respondents: Fear, shame, concerns about appropriateness of services.

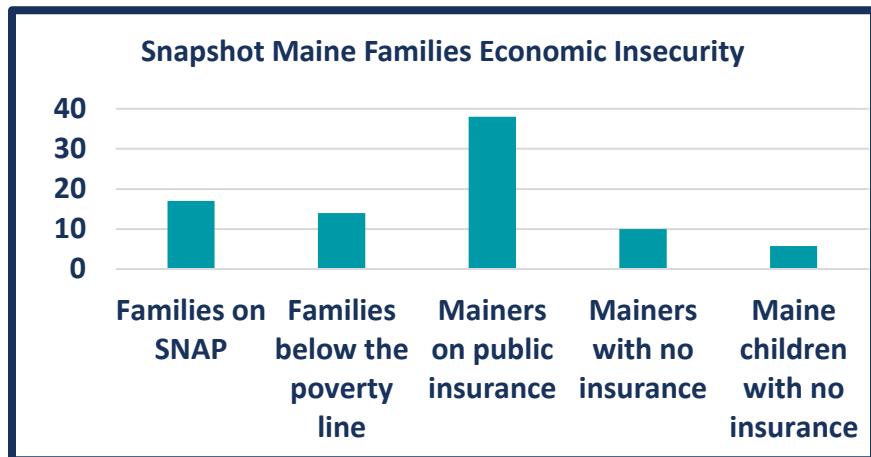
2018

	AMHC	IRCM	RRS	SACSC	SAPARS	SARSSM	SASSMM
Intellectual or Physical Disability	39	5	26	58	19	49	36
Deaf/ Hard of Hearing	0	0	2	3	2	5	3

Economic and Shelter Insecurity

Those living at or below the federal poverty level experience greater instances of nonfatal violent crime than those in other income brackets. This includes experiences of rape or sexual assault, where the victimization rate of those at or below the federal poverty level is more than triple that of those with high incomes.²⁰

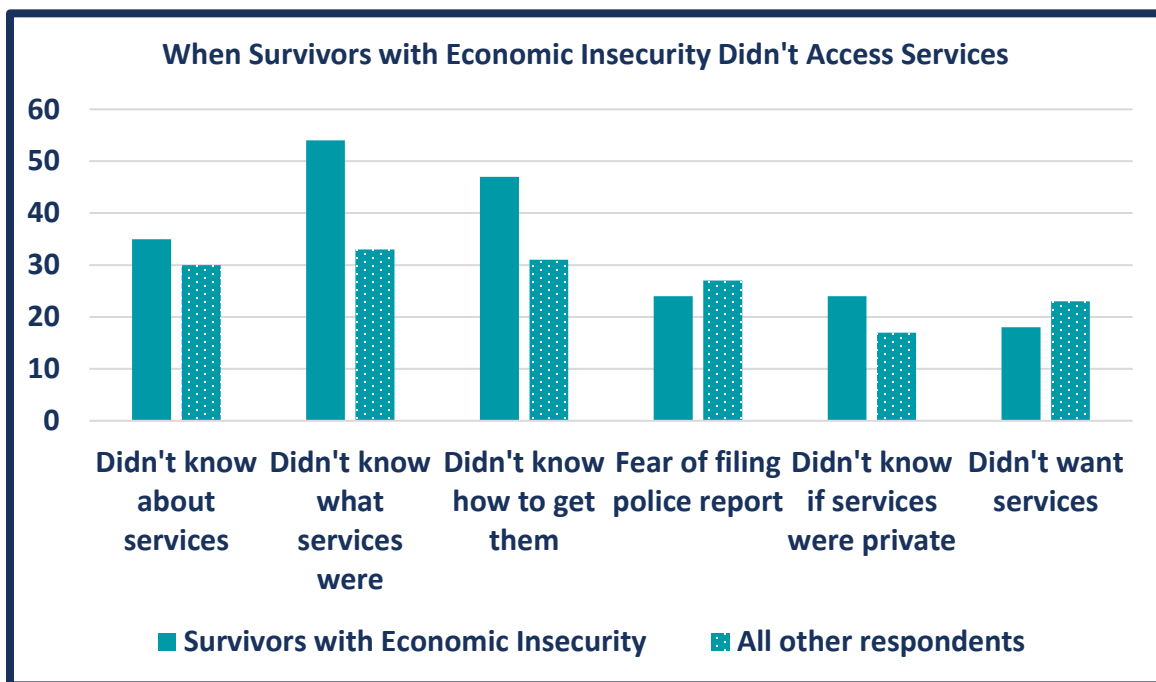
Economic insecurity can result in not only decreased access to supports and services, but housing instability or homelessness as



²⁰ Bureau of Justice Statistics (November 2014). "Household Poverty and Nonfatal Violent Victimization, 2008-2012." Retrieved from <https://www.bjs.gov/content/pub/pdf/hpnnv0812.pdf>, 2

well. Homeless individuals experience some of the highest rates of sexual violence. In a survey of homeless women conducted by Preble Street, 44 percent reported being a victim of sexual assault since becoming homeless.²¹ Homeless youth are also at an increased risk of sexual violence, with 21 percent to 42 percent reporting sexual abuse.

Homeless	2017	2018
Yes	142	139
No	2881	2094
Unknown/NA	638	259
Unanswered	5	1737



LGBTQ+

Individuals who identify as lesbian, gay, bisexual, transgender, and/or queer (LGBTQ+) experience sexual violence at higher rates, including LGBTQ+ students who experience dramatically more sexual violence than their heterosexual peers. Additionally, as with all marginalized populations, LGBTQ+ individuals face more burdens in accessing services or law enforcement. This is particularly true of trans individuals, who face significant barriers in accessing appropriate health care, mental health care, and criminal justice response.

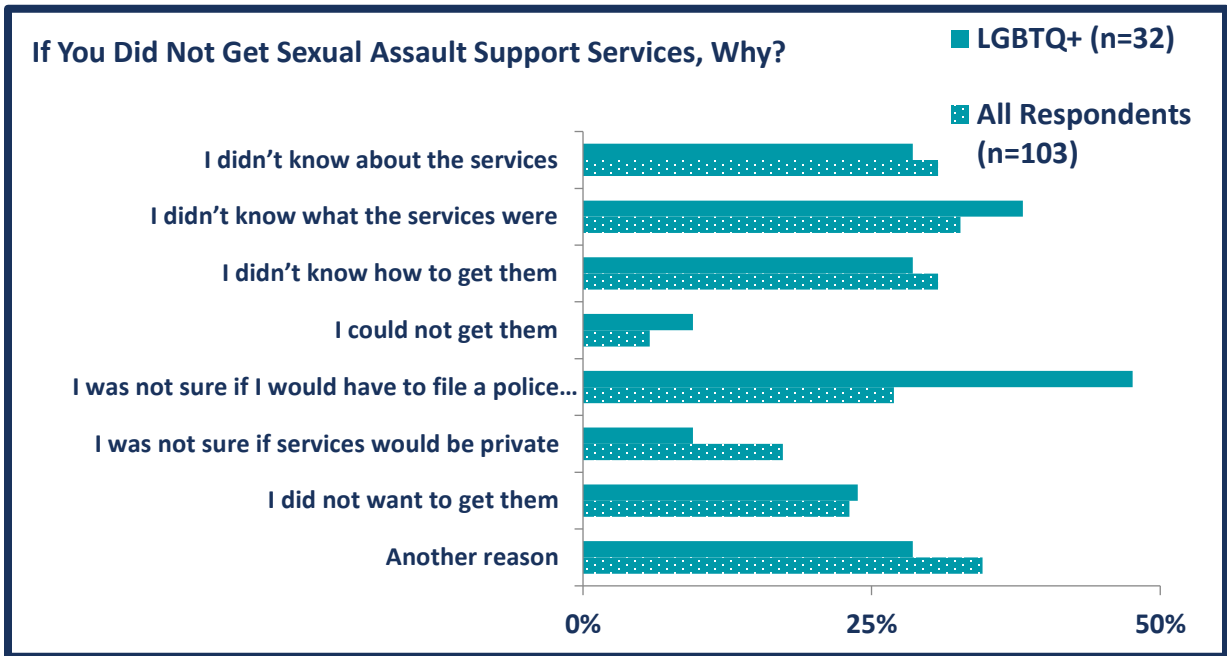
²¹ McLaughlin, Thomas Chalmers, PhD (March 2009). "Women and Homelessness: Understanding Risk Factors and Strategies for Recovery." Preble Street Reports. Retrieved from http://2cr732439v3d2avmc3ve53z.wpengine.netdna-cdn.com/wp-content/uploads/PS_reports-women_and_homelessness.pdf, 5

In the 2017 Underserved Needs Assessment, nearly one in five respondents identified as LGBTQ+. Of respondents, 20 percent were not aware of a local sexual assault support agency, as compared to 14 percent of all respondents. For LGBTQ+ survivors who did access sexual assault services, 83 percent report that the center respected their background or identity (while 17 percent report that the center “mostly” respected their background or identity.)

Maine Stats Snapshot
 5% of Maine adults identify as LGBTQ+; 8% of Maine high students identify as LGBTQ+.

The rate of forced sexual contact for gay, lesbian, or bisexual Maine students (27 – 32%) are significantly higher than for heterosexual Maine students (7.6%).

Over 50% of trans people will experience sexual violence.



2018

	AMHC	IRCM	RRS	SACSC	SAPARS	SARSSM	SASSMM
LGBTQ+	8	4	7	4	17	12	13
Trans	4	0	2	2	10	4	3
Total:	12	4	9	6	27	16	16

For survivors who did not seek sexual assault services, LGBTQ+ individuals were significantly more likely than respondents as a whole to avoid services as a result of concern about having to file a police report (47.62 percent). One respondent noted that they did not seek services because of “concern about the treatment of trans people.”

Since 2016, LGBTQ+ individuals served by centers has grown from one percent to seven percent.

Incarceration²²

Sexual violence often occurs at higher rates within institutions. Survivors who are incarcerated are more likely than their peers to have experienced sexual violence before becoming incarcerated, and then have higher rates of victimization during detention than the population as a whole.²³

As of 2018, all jails and prisons in the state except for one received one-to-one support and/or support groups and/or has access to helpline support.

Stats Snapshot

4% of state and federal prison inmates and 3.2% of jail inmates reported experiencing one or more incidents of sexual victimization by another inmate or facility staff

Non-heterosexual inmates experience sexual violence at almost 3 times the rate of heterosexual inmates.

Number of survivors served while incarcerated

Gender	2016	2017	2018
Female	69	71	72
Male	17	38	41
Trans	1	1	2
Total:	87	110	115

Service Statistics Findings

The launch of a statewide database in 2015 greatly increased our ability understand the survivors being served in Maine, as well as what services are being accessed. In addition to our own observations, we partnered with the Muskie School of Public Service to more fully analyze (deidentified) service and demographic data for underserved populations in 2018. Through that project, we found less information about demographics than expected, but more important information about how we gather data. This effort highlighted several additional challenges:

Anonymity

Because the majority of the services provided at Maine’s sexual assault support centers are through the anonymous helpline, the vast majority of ‘client profiles’ in our database contain limited information. As a service provider network which values ease of access and confidentiality as foundational to our work, we have to make the trade to ensure anonymity even when it compromises the data. We know more about the demographics

²² Beck, Allen J. (2013). “Sexual Victimization in Prisons and Jails Reported by Inmates, 2011–12.” Retrieved from: <https://www.bjs.gov/content/pub/pdf/svpjri1112.pdf>

²³ U.S. Department of Justice (December 2016). “Prisoners in 2015.” *Bureau of Justice Statistics*. Retrieved from <https://www.bjs.gov/content/pub/pdf/p15.pdf>, 5

of survivors who access support group or accompaniment services, but very little about the demographics of those who access the helpline; this is not likely to change.

Data Integrity

Even with a comprehensive statewide database manual and statewide definitions, data collection methods, practices, and training still vary across different programs and position types. Because there is so much we don't know about the people we serve (due to the anonymity of services), it is especially important to ensure that the data we do collect is as consistent and accurate as possible. In the last year, we have focused on site-specific database training across the state to address this.

Analysis

The effort to analyze data (to download it, review it for context, and pull information that could be helpful for program improvement) is significant. We have more ability to collect data than we do to analyze it at this time.

Collaboration Findings

Partner Organizations

Because sexual assault is so under-reported and marginalized survivors may be reluctant to seek services, partner providers are some of our coalition's greatest allies for responding to sexual violence. Allied or partner providers who are themselves competent in issues related to sexual violence are more likely to respond appropriately and effectively to sexual assault disclosures, and to follow up with a referral. Additionally, survivors are more likely to access services when they receive a referral from a trusted resource, or through a network that they are already connected with. For example, an individual who receives sliding-scale reproductive health care from a community agency usually has an opportunity to speak with a counselor as part of the appointment; an intimate conversation leading to a referral to services ("Let's call my friend Mika together") is more likely to make a connection than a poster in a public hallway (though that can be an important door too).

For these reasons, building both formal and informal connections with partner providers has always been one of the most important elements of sexual assault service provision. The survey conducted in 2017 illustrates active, but informal partnerships with population-specific community partners. Local centers and community partners share in committee work, awareness efforts, informal staff relationships, and some cross-training and cross-referring. Partner providers report the following:

Partners report very high levels of collaboration with sexual assault services; 75 percent report that they 'always' or 'often' collaborate with their local sexual assault agency.

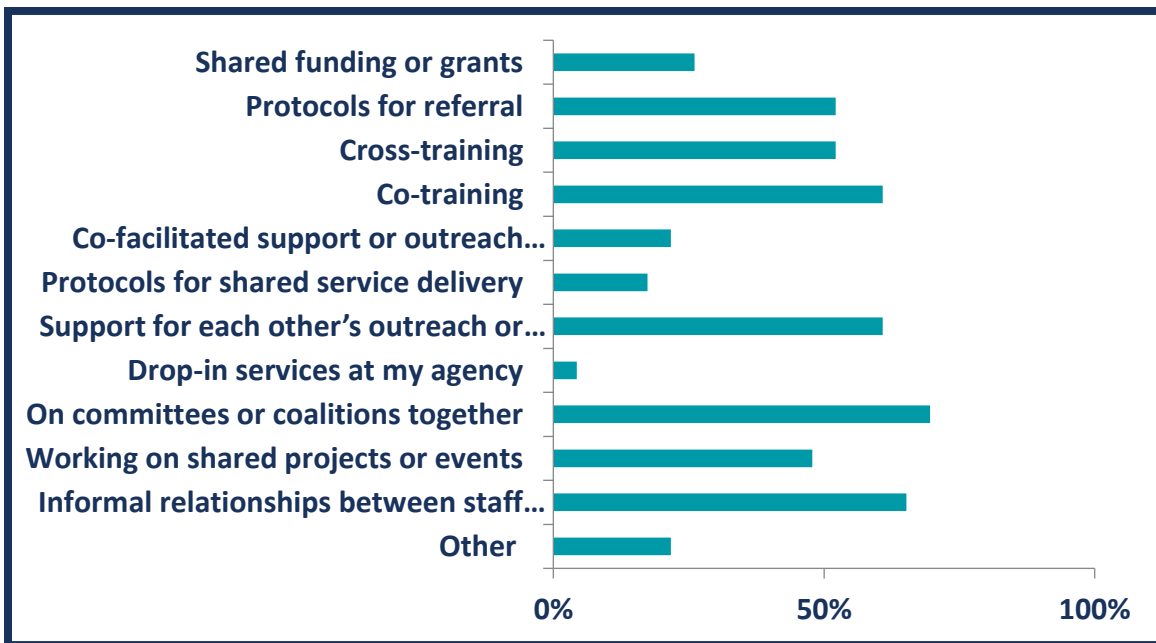
Partners are most likely to report serving on committees with sexual assault services (70 percent); informal staff-to-staff relationships (65 percent); co-training together (61 percent); and support for each other’s outreach campaigns (61 percent).

Partners are least likely to report more formal relationships, such as on-site drop-in hours (5 percent); protocols for shared service delivery (17 percent); co-facilitated support or outreach groups (22 percent); or shared funding or grants (26 percent).

The greatest interest from partner providers is more training about sexual assault prevention and response (67 percent) and information about the same (58 percent) as well as a desire for more opportunities for shared programming or projects (54 percent).

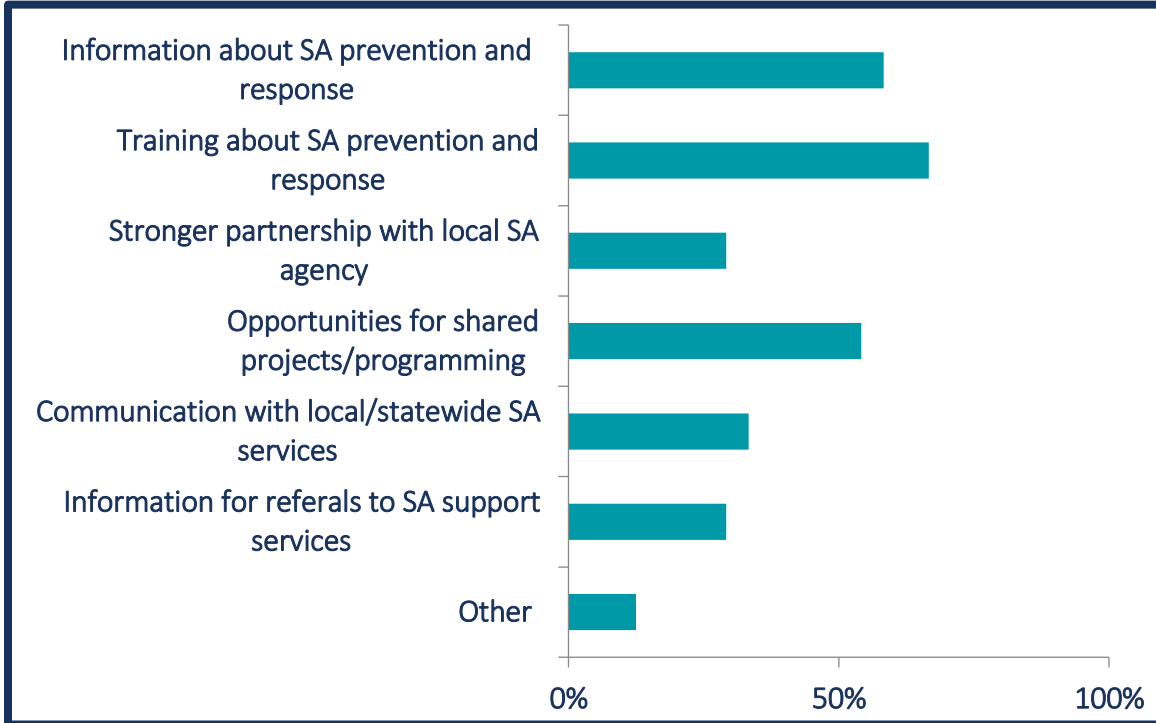
Partner and Center Survey Results

Do You or Your Agency Participate In Any Of The Following Efforts With Your Local Sexual Assault Agency?



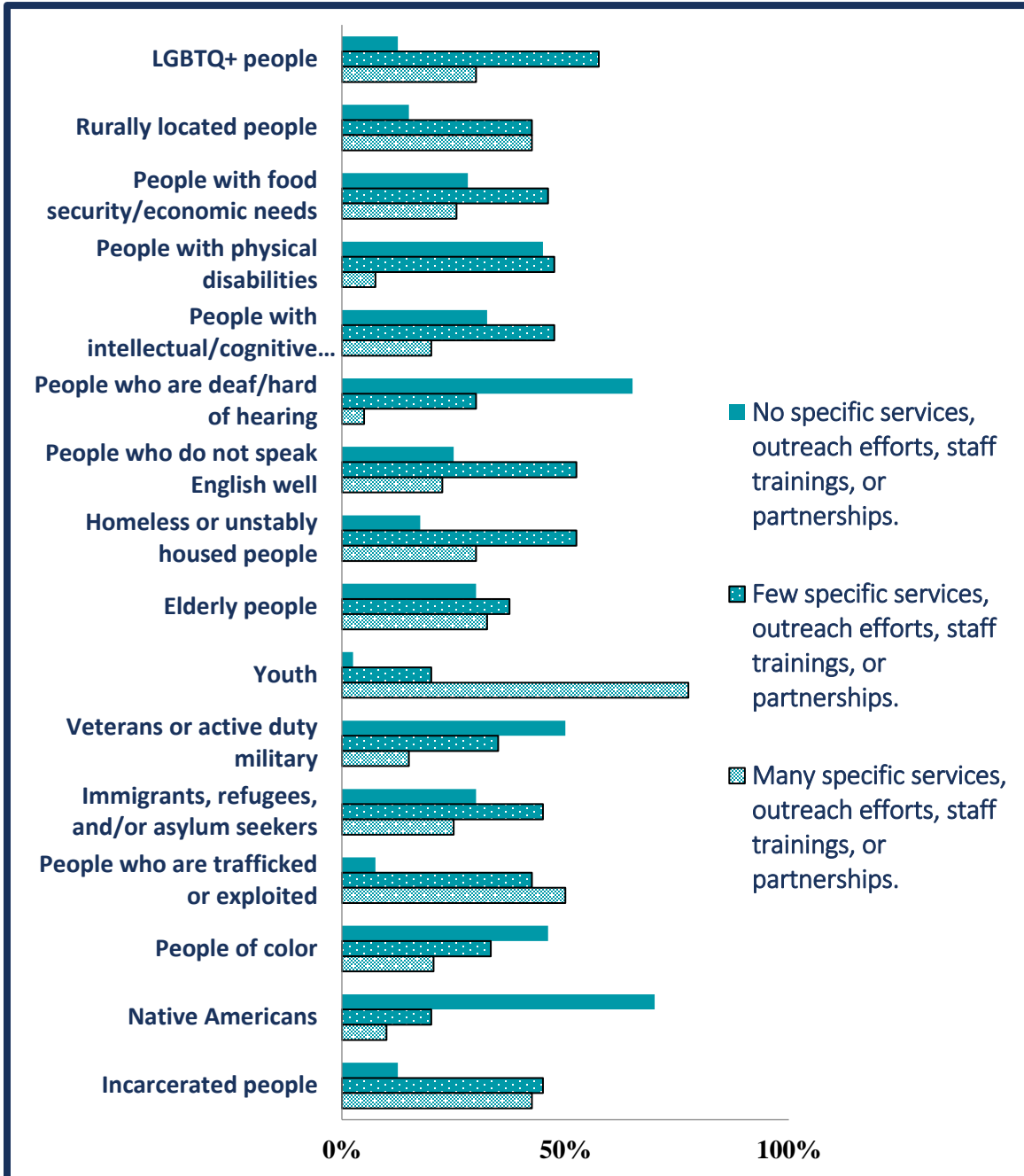
*Other: Referrals, safety-planning collaboration, and clinical collaborations

What Resources about Sexual Assault Would be Beneficial to Your Organization?



*Other: Greater understanding of how medical and mental health communities diagnose post-traumatic effects, how that impacts the victim’s ability to receive jobs or benefits.

Describe Your Sexual Assault Center Outreach Efforts for the Following Populations:



Possible next steps

Prioritize population-specific training, partnerships, and outreach for statistically underserved populations – older adults, individuals with disabilities, and transgender survivors. *Use survey data to identify and address the population-specific reasons survivors did not access services.*

Commit resources to services that support multiple underserved or marginalized populations of survivors, like language access, co-delivered services, and ongoing assessment and reflection on this issue as an agency.

Use sexual assault support center-specific data and local needs assessments to create individualized plans for centers regarding population-specific programs and outreach.

Support, train, collaborate with, and fund population-specific agencies and programs who work with survivors from underserved or marginalized populations.

Make a plan for future needs assessment to include more input from survivors and programs serving survivors from underserved or marginalized populations. *Models could include advisory boards, focus groups, and platforms for ongoing feedback.*

Population-specific resources

Age

Maine Council for Elder Abuse Prevention

The Maine Council for Elder Abuse Prevention (MCEAP) supports collaborative efforts to combat elder abuse, neglect, and exploitation. MCEAP acts as a resource for training and education efforts among existing stakeholders. MCEAP is comprised of over 80 organizations and individuals from across Maine.

Legal Services for the Elderly

LSE provides persons age 60 and over with free legal advice regarding health care, health insurance, Medicare (including Part D), MaineCare (Medicaid), Social Security and other public benefits, pension and retirement benefits, powers of attorney, consumer matters including creditor and bankruptcy problems, physical and financial abuse, guardianship defense, and other issues.

Area Agencies on Aging are a critical resource here because they are the folks local to centers for building a network.

Gender

The Voiceless

A new documentary has some amazing clips and an overview on their website. *Matter of fact, that day was probably the day I became fast. I just wanted to run away and get away from everything.* – Male survivor, *The Voiceless*

[Speak Up, Speak Out Outreach Campaign](#)

by the Texas Coalition, including the voice of prison rape survivor, [Jorge Antonio Renault](#): *You want to control how people see you and I think admitting to this you give up that control.*

[Resource Sharing Project Newsletter](#)

On Serving Men and Boys, including: fact sheets, voices of survivors, barriers and considerations for services, programming assessments, and conversations about language.

[1 in 6](#)

The mission of 1in6 is to help men who have had unwanted or abusive sexual experiences live healthier, happier lives.

See the LGBTQ+ section for resources in support of transgender or gender-nonconforming survivors.

Race

[Black Women’s Blueprint](#) and their video series from their [Black Women’s Truth and Reconciliation Commission](#)

[Racial Justice 101](#) which provides a solid introduction to racial justice, including a glossary of terms, videos, and introductory articles.

[Racial Justice Deep Dive](#) that explores many of the sectoral areas that applicants selected on their proposals. Use this to dig deeper into specific subject areas.

Individuals with Disabilities

[Disability Rights Maine](#) – including training on gesture communication and supported decision making.

[Accessing Safety Initiative](#), Vera Institute

[Maine Guardianship Resource](#)

Nonprofit AF - [25 simple ways we can all be more disability-inclusive](#)

[Guardianship in Maine](#)

Economic and Shelter Insecurity

Focus on sharing outreach materials not only in shelters, but at Federally Qualified Health Centers, local General Assistance offices, WIC (Women, Infants, and Children) offices, food pantries, clothing closets and thrift stores, libraries, soup kitchens, affordable housing, and other community settings in your region where people access supports for basic needs.

LGBTQ+

[Forge](#)

Training, resources, and services for transgender, gender non-conforming and gender non-binary survivors of sexual assault.

Handout: [Quick tips: trans inclusion](#)

Handout: [Know Your Rights!](#) As a transgender survivor of sexual assault you have right to access equal survivors.

[Northwest Network](#) of Bisexual, Trans, Lesbian, and Gay Survivors of Abuse

Manual: [It Takes a Village, People!](#) For Advocacy, Friends and Family, and LGBT survivors of Abuse

Resources: [Clearinghouse of data & research.](#)

[National Child Traumatic Stress Network](#)

Video: [Safe Places, Safe Spaces: Creating Welcoming and Inclusive Environments for Traumatized LGBTQ Youth Video](#) & [Safe Places, Safe Spaces: Resource Guide](#)

[Washington Coalition of Sexual Assault Providers](#)

Webinar: [Bystander Intervention in Marginalized Communities](#)

Webinar: [Follow the Yellow Brick Road:](#) Re-learning Consent From Our ForeQueers

Webinar: [Transgender Youth Sexual Assault Survivors](#)

Handout: [Working With LGBTQ Teen Survivors](#)

Incarceration

[PREA Resource Center](#)

[Just Detention International](#)

Center Statistics

AMHC Sexual Assault Services

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	38	11%	59	16%	87	22%
18 - 23	39	12%	42	12%	47	12%
24 - 64	238	70%	226	63%	234	59%
65+	18	5%	22	6%	15	4%
Unknown	6	2%	11	3%	16	4%
Total Clients:	339		360		399	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	288	85%	289	80%	337	84%
Male	48	14%	66	18%	57	14%

Transgender	3	1%	4	1%	4	1%
Total Clients:	339		360		399	

Homeless

Homeless	2016	2017	2018
Yes	13	16	20
No	316	336	294
Unknown/NA	10	9	14
Unanswered	0	0	71
Total Clients:	339	360	399

Incarcerated

Incarcerated	2016	2017	2018
Female	6	3	8
Male	4	1	6
Transgender	0	0	0
Total Clients:	10	4	14

Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	27	8%	23	6%	14	3.5%
Asian	1	-	2	-	2	-
Black	4	1%	8	2%	3	-
Hispanic or Latino	1	-	2	-	5	1%
Native Hawaiian / Pacific Islander	1		2	-	1	-
White	255	75%	258	72%	293	73%
Multi-racial	0	-	5	-	7	1%
Other	2	-	2	-	4	1%
Unknown	48	14%	58	16%	70	18%
Total Clients:	339		360		399	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	42	12%	59	16%	39	10%
Deaf/Hard of Hearing	2	-	3	-	0	-
Limited English Proficiency	0	-	1	-	1	-
Immigrant/Refugee/Asylum Seeker	0	-	0	-		
LGBTQ+	3	-	16	4%	8	2%
College Student	3	-	10	-	8	2%
Veteran	0	-	1	-	1	-
Unanswered	155	46%	181	50%	318	80%
Total Clients:	339		360		399	

Immigrant Resource Center of Maine

Age

Age	2017	2017	2018	2018
0 - 17	2	2%	3	3%
18 - 23	5	6%	7	6%
24 - 64	73	87%	93	85%
65+	4	5%	6	5%
Unknown	0	-	0	-
Unanswered	0	-	0	-
Total Clients:	84		109	

Gender

Gender	2017	2017	2018	2018
Female	69	82%	91	83%
Male	15	18%	18	16%
Transgender	0	-	0	-
Total Clients:	84		109	

Homeless

Homeless	2017	2018
Yes	4	0
No	79	100
Unknown/NA	1	9
Total Clients:	84	109

Incarcerated

No applicable data for incarcerated services.

Race

Race	2017	2017	2018	2018
American Indian / Alaskan Native	0	-	0	-
Asian	8	10%	6	5%
Black	65	77%	95	87%
Hispanic or Latino	-	-	0	-
Native Hawaiian / Pacific Islander			0	-
White	11	13%	8	7%
Multi-racial	0	-	0	-
Other	0	-	0	-
Unknown	0	-	0	-
Unanswered	0	-	0	-
Total Clients:	84		109	

Other Populations

Population	2017	2017	2018	2018
Disabled	5	6%	5	5%
Deaf/Hard of Hearing	0	-	0	-
Limited English Proficiency	61	73%	62	57%
Immigrant/Refugee/Asylum Seeker	75	89%	87	84%
LGBTQ+	0	-	4	4%
College Student	1	-	0	-
Unanswered	2	2%	6	6%
Total Clients:	84		109	

Rape Response Services

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	17	7%	121	25%	150	30%
18 - 23	42	17%	62	13%	57	11%
24 - 64	151	61%	212	45%	240	47%
65+	6	2%	6	1%	5	1%
Unknown	31	13%	72	15%	53	10%
Total Clients:	247		473		508	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	207	84%	379	80%	429	84%
Male	35	14%	87	18%	76	15%
Transgender	3	-	4	-	2	.4%
Other	0	-	0		1	-
Unknown	2	-	3	-	0	-
Total Clients:	247		473		508	

Homeless

Homeless	2016	2017	2018
Yes	35	22	35
No	167	158	172
Unknown/NA	37	41	17
Unanswered	8	252	284
Total Clients:	247	349	508

Incarcerated

Gender of Incarcerated Client	2016	2017	2018
Female	11	9	5
Male	0	3	2
Transgender	0	0	0
Total Clients:	11	11	7

Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	12	5%	26	5%	32	6%
Asian	2	-	1	-	4	
Black	2	-	8	2%	11	2%
Hispanic or Latino	2	-	4	-	3	
Native Hawaiian / Pacific Islander	1	-	1	-	0	
White	137	-	259	55%	307	60%
Multi-racial	2	-	3	-	6	1%
Other					2	
Unknown	89	36%	171	36%	143	28%
Total Clients:	247		473		508	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	32	13%	24	3%	26	5%
Deaf/Hard of Hearing	1	-	1	-	2	-
Limited English Proficiency	3	-	1	-	3	-
Immigrant/Refugee/Asylum Seeker	2	-	1	-	1	-
LGBTQ+	5	-	5	-	7	1%
College Student	0	-	9	2%	16	3%
Veteran	0	-	0	-	3	-
Unanswered	192	-	422		453	
Total Clients:	247		473		508	

Sexual Assault Crisis and Support Center

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	307	38%	308	36%	244	34%
18 - 23	73	9%	60	7%	59	8%
24 - 64	401	50%	446	53%	387	54%
65+	8	-	19	2%	16	2%
Unknown	10	-	16	2%	7	1%
Total Clients:	799		849		713	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	590	74%	615	72%	552	77%
Male	206	26%	232	27%	159	22%
Transgender	1	-	2	-	2	-
Other	0	-	0	-	0	-
Unknown	2	-	0	-	0	-
Unanswered	0	-	0	-	0	-
Total Clients:	799		849		713	

Homeless

Homeless	2016	2017	2018
Yes	12	15	19
No	351	414	363
Unknown/NA	46	27	21
Unanswered	390	393	310
Total Clients:	799	849	713

Incarcerated

Gender of Incarcerated Client	2016	2017	2018
Female	3	8	13
Male	2	13	7
Transgender	0	1	1

Total Clients:	5	22	21
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Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	8	-	6	-	7	-
Asian	5	-	1	-	2	-
Black	5	-	5	-	4	-
Hispanic or Latino	1	-	6	-	2	-
Native Hawaiian / Pacific Islander	1	-	1	-	3	-
White	701	88%	721	85%	557	78%
Multi-racial	15	2%	24	3%	32	4%
Other	1	-	2	-	106	15%
Unknown	62	8%	83	10%		
Total Clients:	799		849		713	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	29	4%	38	3%	58	11%
Deaf/Hard of Hearing	0	-	1	-	3	-
Limited English Proficiency	1	-	0	-	1	-
Immigrant/Refugee/Asylum Seeker	2	-	0	-	0	-
LGBTQ+	1	-	3	-	4	-
College Student	0	-	5	-	10	-
Veteran	0	-	0	-	4	-
Unanswered	731	91%	728		632	89%
Total Clients:	799		849		713	

Sexual Assault Prevention and Response Services

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	285	28%	351	32%	462	40%
18 - 23	128	13%	126	12%	111	10%
24 - 64	306	30%	409	37%	438	37%
65+	15	-	15	-	17	1%
Unknown	273	27%	192	18%	140	12%
Total Clients:	1007		1093		1168	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	790	78%	873	80%	933	80%
Male	194	19%	195	18%	213	18%
Transgender	7	-	10	1%	10	-
Other	0	-	0	-	0	-
Unknown	16	2%	15	-	12	-
Unanswered	0	-	0	-	0	-
Total Clients:	1007		1093		1168	

Homeless

Homeless	2016	2017	2018
Yes	5	2	7
No	441	557	521
Unknown/NA	204	41	25
Unanswered	357	493	615
Total Clients:	1007	1093	1168

Incarcerated

Gender	2016	2017	2018
Female	3	11	15
Male	3	1	0
Transgender	0	0	0
Total Clients:	6	12	15

Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	2	-	3	-	1	-
Asian	1	-	0	-	0	-
Black	16	2%	21	2%	38%	3%
Hispanic or Latino	3	-	1	-	5	-
Native Hawaiian / Pacific Islander	1	-	1	-	1	-
White	706	70%	855	78%	902	77%
Multi-racial	3	-	19	2%	36	3%
Other	6	-	1	-	1	-
Unknown	269	27%	192	18%	184	59%
Unanswered						
Total Clients:	1007		1093		1168	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	22	2%	28	3%	19	2%
Deaf/Hard of Hearing	0	-	0	-	2	-
Limited English Proficiency	0	-	1	-	1	-
Immigrant/Refugee/Asylum Seeker	2	-	2	-	3	-
LGBTQ+	0	-	5	-	17	1%
College Student	0	-	6	-	15	-
Unanswered	828	82%	953		1086	93%
Total Clients:	1007		1093		1168	

Sexual Assault Response Services of Southern Maine

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	12	2%	82	14%	217	25%
18 - 23	95	15%	64	11%	69	8%
24 - 64	215	33%	272	46%	399	47%
65+	7	-	5	-	10	1%
Unknown	325	50%	162	28%	153	18%
Unanswered						
Total Clients:	654		585		848	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	517	79%	477	82%	678	80%
Male	102	16%	102	17%	154	18%
Transgender	5	-	0	-	4	-
Other	1	-	0	-	11	-
Unknown	29	4%	6	-	0	-
Unanswered					0	-
Total Clients:	654		585		848	

Homeless

Homeless	2016	2017	2018
Yes	28	34	44
No	457	360	351
Unknown/NA	168	56	123
Unanswered	1	135	330
Total Clients:	654	585	848

Incarcerated

Gender of Incarcerated	2016	2017	2018
Female	29	24	29
Male	6	12	15
Transgender	1	0	1
Total Clients:	36	36	45

Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	5	-	8	-	4	-
Asian	4	-	5	-	5	-
Black	6	-	3	-	13	1%
Hispanic or Latino	11	2%	7	-	20	2%
Native Hawaiian / Pacific Islander	0	-	0	-	0	-
White	92	14%	189	32%	385	45%
Multi-racial	1	-	9	2%	21	2%
Other	4	-	6	-	1	-
Unknown	531	81%	585	61%	399	47%
Total Clients:	654		860		848	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	24	4%	20	3%	49	58%
Deaf/Hard of Hearing	0	-	3	-	5	-
Limited English Proficiency	4	-	5	-	13	2%
Immigrant/Refugee/Asylum Seeker	4	-	3	-	8	-
LGBTQ+	4	-	7	-	12	-
College Student	0	-	11	2%	11	-
Veteran	0	-	0	-	2	-
Unanswered	616		535	91%	761	90%
Total Clients:	654		585		848	

Sexual Assault Services of Midcoast Maine

Age

Age	2016	2016	2017	2017	2018	2018
0 - 17	39	9%	40	12%	117	24%
18 - 23	32	8%	42	12%	43	9%
24 - 64	220	53%	215	62%	273	56%
65+	15	4%	15	4%	14	3%
Unknown	110	26%	35	10%	40	8%
Total Clients:	416		347		487	

Gender

Gender	2016	2016	2017	2017	2018	2018
Female	333	80%	287	83%	384	79%
Male	79	19%	56	16%	95	20%
Transgender	1	-	1	-	3	-
Other	0	-	0	-	5	-
Unknown	3	-	3	-	0	-
Total Clients:	416		347		487	

Homeless

Homeless	2017	2018
Yes	10	14
No	439	293
Unknown/NA	96	53
Unanswered		127
Total Clients:	545	487

Incarcerated

Gender	2016	2017	2018
Female	20	13	4
Male	5	9	11
Transgender	0	0	0
Total Clients:	25	22	15

Race

Race	2016	2016	2017	2017	2018	2018
American Indian / Alaskan Native	2	-	1	-	0	
Asian	0	-	0	-	1	
Black	2	-	5	-	4	
Hispanic or Latino	3	-	1	-	5	1%
Native Hawaiian / Pacific Islander	2	-	1	-	3	
White	204	49%	191	55%	192	39%
Multi-racial	3	-	5	-	3	
Other	3	-	1	-	2	
Unknown	197	47%	142	41%	280	57%
Total Clients:	416		347		487	

Other Populations

Population	2016	2016	2017	2017	2018	2018
Disabled	12	3%	12	3%	36	7%
Deaf/Hard of Hearing	0	-	1	-	3	-
Limited English Proficiency	0	-	0	-	1	-
Immigrant/Refugee/Asylum Seeker	0	-	2	-	1	-
LGBTQ+	4	-	13	4%	13	3%
College Student	0	-	14	4%	9	2%
Veteran	0	-	0	-	5	-
Unanswered	234	56%	207	60%	419	86%
Total Clients:	416		347		487	