REPORT ON CREATING AN EFFICIENT TRACKING METHOD FOR DEOXYRIBONUCLEIC ACID (DNA) RAPE KITS


Submitted to the Twenty-Seventh State Legislature
Regular Session of 2014

I. BACKGROUND ON HOUSE CONCURRENT RESOLUTION NO. 99, HOUSE DRAFT 1

House Concurrent Resolution No. 99, House Draft 1, requests that the Department of the Attorney General (Department) submit a report to the 2013 and 2014 Legislature with the following information:

(1) The status of its effort in creating an efficient tracking method for DNA rape kit processing;
(2) Potential sources of additional funding for the Honolulu Police Department Crime Laboratory; and
(3) Other recommendations, including any proposed legislation.

II. STATUS OF EFFORT TO CREATE AN EFFICIENT TRACKING METHOD FOR DNA RAPE KIT PROCESSING

The Hawaii Sexual Assault Response and Training (HSART) Program has provided a November 2013 “Response to the State of Hawaii: Department of the Attorney General on Deoxyribonucleic Acid (DNA) Analysis of Sexual Assault Kits.” See Attachment 1. The Department acknowledges the time and effort provided by HSART members in producing the report.

HSART is led by the Kapiolani Medical Center for Women and Children, Sex Abuse Treatment Center (SATC). HSART members include representatives from the four police departments (Honolulu, Maui, Hawaii, and Kauai), the four departments of the prosecuting attorney (Honolulu, Maui, Hawaii, and Kauai), and the sex assault centers (SATC-Oahu,
Child and Family Services-Maui, YWCA Empowering Alternatives-Hawaii, and the YWCA of Kauai). Sex Assault Nurse Examiners (SANE) or Sex Assault Forensic Examiners (SAFE) from each of the four counties also attend the meetings and are members of HSART.

HSART has made substantial progress in identifying an efficient tracking system for DNA rape kits that is acceptable to all members. Several issues were considered by HSART in developing the tracking system as identified in the HSART report. In 2014, HSART members will be working towards obtaining necessary approval from their respective agencies to implement the efficient tracking system.

III. POTENTIAL SOURCES OF ADDITIONAL FUNDING FOR THE HONOLULU POLICE DEPARTMENT CRIME LABORATORY

There are a limited number of grant programs for DNA or laboratory enhancements for the Honolulu Police Department Crime Laboratory. The Department administers the federal Paul Coverdell Forensic Science Improvement Grant (Coverdell) Program and solicits applications from eligible laboratories which include the Honolulu Police Department’s Scientific Investigation Section (HPD SIS). HPD SIS Forensic Laboratory Director, Wayne Kimoto, is notified annually about the available grant funding. HPD is one of the recipients of the federal fiscal year 2013 Coverdell grant in the amount of $25,538.

HPD currently applies for and receives funding from the National Institute of Justice (NIJ) DNA Backlog Reduction Program. The grant program supports existing crime laboratories that conduct DNA analysis to process, record, screen, and analyze forensic DNA and/or DNA database samples, and to increase the capacity of public forensic DNA and DNA database laboratories to process more DNA samples, thereby helping to reduce the number of forensic DNA and DNA database samples awaiting analysis. HPD was the recipient of a federal fiscal year 2012 award in the amount of $242,239. (NIJ has not released the award information for the federal fiscal year 2013 grant.)

IV. OTHER RECOMMENDATIONS, INCLUDING ANY PROPOSED LEGISLATION

The Department’s recommendation is to allow HSART sufficient time to implement the efficient tracking system as members work with their respective agency to adopt the system. The Department does not propose any legislation as a result of House Concurrent Resolution No. 99, House Draft 1 (2012).
Hawaii Sexual Assault Response and Training (HSART) Program:

I. Hawaii Sexual Assault Response and Training (HSART) Program

In 1998, the Sex Abuse Treatment Center (SATC) was selected by the State of Hawaii Department of the Attorney General to manage a project to develop and implement a standard protocol for the State of Hawaii for medical care of sexual assault victims and for the collection, preservation, and transfer of forensic evidence in these cases. This medical-legal project was the precursor to what is now known as the Hawaii Sexual Assault Response and Training (HSART) Program.

Through partnerships with the U.S. Attorney’s Office – Hawaii, Honolulu Police Department’s Scientific Investigation Section (HPD SIS), all County Chiefs of Police and Prosecutors, and identified sexual assault service providers and medical personnel in the community, the medical-legal project yielded a new statewide sexual assault evidence collection kit and accompanying protocols. The protocols were designed to heighten consistency in the investigation of sexual assault cases, improve the overall quality and quantity of forensic evidence through uniform specimen collection and preservation techniques, and increase forensic credibility in the court system. The sexual assault kit and protocols were implemented statewide in August 2000.

The success of the medical-legal project fostered ongoing statewide collaboration aimed at bridging victims’ emotional and medical needs with the goals of law enforcement and the criminal justice system. Over time, this group of statewide multi-disciplinary professionals formalized the membership of the HSART Program.

The HSART Program assembles key decision-makers from police departments, sexual assault centers, medical providers, and prosecutor’s offices from each county for regularly scheduled day-long meetings. The HSART Program researches and incorporates state-of-the-art medical forensic services, coordinates multidisciplinary training, explores national issues and best practices, addresses statewide standardization, works to identify and resolve challenges, and provides the forum for ongoing assessment of practices. During these meetings, collaborative dialogue occurs and action items are identified; between these meetings, further work is conducted to achieve specific goals prioritized by the membership.

II. Background on DNA Analysis of Sexual Assault Kits

The issue of analyzing sexual assault kits for DNA evidence has received national and local attention in recent years. For example, the U.S. Department of Justice (DOJ) Office on Violence Against Women (OVW) convened a roundtable discussion of multi-disciplinary representatives from across the country in 2010 to address DNA analysis of evidence from sexual assault kits (DOJ OVW, 2010). The National Institute of Justice sponsored studies on DNA backlogs and testing of sexual assault kits (Nelson, 2011; Peterson et al., 2012; Ritter, 2011, 2012). Organizations such as the National Sexual Violence Resource Center (NSVRC)
and the National Center for Victims of Crime (NCVC) advocate for the consideration of victim rights and perspectives on this issue.

III. Should all sexual assault kits be analyzed for DNA evidence?

National and local debate centers on whether or not all sexual assault kits should be analyzed for DNA evidence. Some jurisdictions such as the State of Illinois (Ritter, 2011) and New York City (Peterson et al., 2012) have adopted policies to analyze all sexual assault kits for DNA evidence. The benefits or considerations for analyzing all sexual assault kits include:

1. Potentially identifying a serial rapist in other non-stranger cases.
2. Affirming the victim’s version of events.
3. Discrediting the perpetrator.
4. Exonerating an innocent suspect.
5. For untested kits long held in police custody, evolving advancements in DNA technologies could be used to solve cold cases.
6. Generating future hits as the Federal Bureau of Investigation’s Combined DNA Index System (CODIS) expands.
7. Overcoming or eliminating potential bias against certain victims who are sex workers or drug users, or have mental health issues or disabilities.
8. Revealing potential connections between stranger and non-stranger sexual assaults.

(Ritter, 2011, 2012)

On the other hand, considerations for not analyzing all sexual assault kits for DNA evidence include:

1. Crime laboratories are not exclusively dedicated to forensic analysis of sexual assault cases.
2. Crime laboratories face high demand for forensic analysis of other cases such as homicides and property crimes, as well as other duties such as processing samples for offender/arrestee databases.
3. Crime laboratory resources including time, funding, and staffing are extremely limited.
4. Hiring and training new crime laboratory staff is a time-consuming process.
5. Retaining qualified crime laboratory staff is difficult because private sector or other laboratories may offer more competitive pay.
6. Instead of testing all sexual assault kits, jurisdictions should prioritize cases based on probative value to determine which sexual assault kits or samples should be analyzed.
7. Costs for testing all sexual assault kits are prohibitive; approximate costs are $1,000/sexual assault kit at minimum.
8. A test-all policy would create delays in crime laboratories due to increased workloads and generate backlogs of sexual assault kits awaiting analysis.
9. Evidence may not be required for every case; for example, cases with guilty pleas entered, charges dropped, or charges not filed.
Stakeholders on each side of the debate hold robust sentiments as the issue of analyzing all sexual assault kits stands mired in complexity. A recently released training bulletin (first in a series) from End Violence Against Women International illustrates these complexities (see Attachment A).

IV. State of Hawaii House Concurrent Resolution No. 99, House Draft 1

Locally, the State of Hawaii Legislature issued in 2012, House Concurrent Resolution (HCR) No. 99, House Draft (HD) 1, which tasked the Department of the Attorney General to work with key stakeholders to create an efficient tracking method for DNA rape kits (SOH, 2012). The resolution identified key stakeholders as social service agencies, the Sex Abuse Treatment Center, county police departments, county prosecuting attorneys, and forensic laboratories.

The Department of the Attorney General subsequently consulted with the HSART Program regarding the resolution given that the HSART Program membership reflects all parties identified in the resolution.

V. HSART Program Discussions on DNA Analysis of Sexual Assault Kits

Discussions were held amongst the HSART Program membership from October 2012 through October 2013 regarding HCR No. 99, HD 1. As in other jurisdictions, numerous challenges exist in Hawaii to testing all sexual assault kits. Many of the issues reflected in section III (page 2) of this document were echoed locally during HSART Program discussions.

HSART membership agreed that Hawaii would benefit from a tracking system to ensure that every sexual assault kit is thoroughly considered for probative value of DNA analysis. The tracking system outlined below and illustrated in Attachment B is in the process of being developed.

SATC: SATC will begin its tracking with the number of sexual assault kits ordered and received from the manufacturer. SATC will distribute the sexual assault kits to designated representatives in each county. In three of the four counties, the sexual assault kits are managed by sexual assault centers: YWCA of Hawaii Island for the County of Hawaii, Child and Family Service for the County of Maui, and the Sex Abuse Treatment Center for the City & County of Honolulu. In the County of Kauai, the sexual assault kits are managed by the Kauai Police Department. The county representatives will submit to SATC on a monthly basis:

a) Number of sexual assault exams conducted.

b) Number of sexual assault kits used in police-reported exams.
The number of sexual assault kits used in police-reported exams is equivalent to the number of sexual assault kits that enter the law enforcement system.

c) Number of sexual assault kits used in non-police* reported exams.

(*) Note – Where circumstances of the sexual assault do not meet the mandatory reporting statutes for the state of Hawaii, a victim has the ability to make a decision with regards to reporting the sexual assault to the police. A victim has a right to receive a medical forensic examination at no cost, regardless of police-reporting status.

Police: Police in each county will begin their tracking with the number of sexual assault kits that enter the law enforcement system. Police in each county will track:

a) Number of sexual assault kits sent from police to HPD SIS for analysis. Police investigators and deputy prosecuting attorneys will confer to determine the probative value of requesting DNA analysis based upon the specific factors of each case. Probative value is the ability of a piece of evidence to make a relevant disputed point more or less true (Cornell University Law School LII, 2013). Conferral between police and prosecutors often occurs in consultation with HPD SIS. (HSART members are currently devising a means of documenting this conferral process. Approval by all relevant parties will subsequently be sought.)

HPD SIS has an established working relationship with county police departments to serve as a statewide resource in analyzing forensic evidence. County police departments send sexual assault kits needing analysis to HPD SIS, unless required scientific methodology is not available through HPD SIS or due to time constraints.

b) Number of sexual assault kits sent from police to private laboratories other than HPD SIS for analysis where scientific methodology required is not available through HPD SIS or due to time constraints.

c) Number of sexual assault kits analyzed by private laboratories other than HPD SIS. Police in each county will track the number of sexual assault kits that are analyzed by private laboratories other than HPD SIS.

d) Number of sexual assault kits in police custody not sent to laboratories for analysis.

HPD SIS: HPD SIS will begin its tracking with the number of sexual assault kits that it receives from the police for analysis. HPD SIS will track:
a) Number of sexual assault kits analyzed by HPD SIS.

b) Number of sexual assault kits received by HPD SIS from police that are awaiting analysis.

HSART Program membership will work to obtain necessary approval for this tracking system for sexual assault kits. Once approved, HSART Program membership will select an appropriate start date and implement the tracking system.

VI. Recommendations

The members of the HSART Program concur with HCR No. 99, HD 1 on the need to implement a statewide tracking system to ensure that all sexual assault kits are thoroughly considered for DNA analysis. The HSART Program directly engaged its members in drafting the aforementioned tracking system, and is pursuing necessary approval.
References


Attachment 1: Hawaii Sexual Assault Response and Training (HSART) Program November 2013 Page 6
Understanding the Role of DNA Evidence in a Sexual Assault Investigation: Part I

Unpacking Common Assumptions

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Kimberly A. Lonsway, Ph.D.

This training bulletin is the first in a series developed to explain the role of DNA evidence in a sexual assault investigation. In this first installment, we will unpack some assumptions that influence both discussions and policy initiatives in this area. In subsequent bulletins, we will explore alternative sources of DNA evidence and their potential significance or impact on a sexual assault investigation. We will also provide a case example illustrating many of our points, and offer a brief historical perspective on the use of DNA evidence within the criminal justice system. Finally, we will conclude by charting a course for reform and offering best practice recommendations.

Some of the information in this series will overlap with the recent training bulletin addressing the question of whether we should “test anonymous kits.” While that bulletin focused specifically on evidence collected during a medical forensic exam with a victim who has not personally reported to law enforcement, this series is designed to address the role of DNA evidence in the investigation of sexual assault cases more generally.

Note: This series is adapted from a collection of articles originally appearing in Sexual Assault Report (Volume 14, Number 3), published by the Civic Research Institute, all rights reserved.

Underlying Assumptions

In recent years, there has been extensive media coverage of the “DNA backlog” and the problem of untested evidence in sexual assault cases. There are also significant policy reforms underway — on the local, state, and federal level — to address these problems. Yet underlying the discussion are a number of implicit assumptions. They are not often stated outright, but these assumptions nonetheless influence how these problems are formulated, how their causes are diagnosed, and how the solutions are designed.

In fact, we believe there are three basic assumptions that underlie much of the discourse surrounding the DNA backlog and the problem of untested evidence. If pressed, most people would probably recognize that these assumptions are not accurate—or at least overly simplified. However, we will state them in their absolute form, to more clearly see their influence on how we think about these issues:

1. The purpose of a medical forensic exam of a sexual assault victim is to collect DNA evidence.

2. The process of investigating a sexual assault proceeds directly from the medical forensic exam, to the identification of a DNA profile, to the courtroom trial (from kit to court*).
3. DNA evidence provides a "yes or no" answer to the question of whether a particular suspect committed a sexual assault against a particular victim.

Based on such assumptions, it is understandable that the public is outraged by the images of rape kits piled up in property rooms, never to be sent to crime labs for DNA testing. This image has certainly been fueled by media coverage, including a 2010 report by Human Rights Watch, entitled: *I used to think the law would protect me: Illinois’ failure to test rape kits*. That report opens with the experiences of a sexual assault survivor referred to as Carrie. Both her experiences -- and the conclusion of the report's authors -- perfectly illustrate the issues we would like to address in this paper, so we will briefly summarize them here.

**Carrie's Experience**

Carrie was sexually assaulted while she was in high school, by a family friend of her father's, "someone she barely knew" (p. 2). Immediately afterward, she reported the rape to police and submitted to a medical forensic exam. The police told Carrie that they had picked up this same suspect before, "for sexually assaulting the teenage daughter of a family friend" (p. 2).

The suspect was arrested, and although Carrie called repeatedly to find out what was happening in her case, she did not hear back from the prosecutor until six months later. At that point, the prosecutor "told her that there was not enough evidence" (p. 5) to pursue her case. She reportedly told Carrie: "Maybe if we get this guy coming in again for rape, we can move forward. In acquaintance rapes, it helps to establish a pattern" (p. 5).

Carrie asked if her rape kit could be tested to see if it was linked with any other cases, but her suggestion was refused. When Carrie requested a copy of the investigative file for her case, she discovered that:

> The police had not interviewed the suspect, not interviewed other potential witnesses, nor considered the hospital examiner's report, which indicated 'vaginal swelling and tearing consistent with forced penetration.' As far as Carrie knows, her rape kit continues to sit in police storage, untested (p. 5).

With stories like this, it is no wonder that the public is outraged. It appears that the criminal justice and community response system completely failed Carrie. However, we believe this outrage is directed to some extent at the wrong problem.

It is clear that the authors of the report viewed the primary problem as the failure to “test Carrie’s rape kit.” That is indeed a failure, which we will discuss in greater detail later.
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Suffice it to say that Carrie was exactly right; analyzing the evidence might have linked her case to others, which could potentially have assisted in the prosecution of her case.

Yet the far more significant failure is stated in the sentence before that one, which states: “The police had not interviewed the suspect, not interviewed other potential witnesses, nor considered the hospital examiner’s report” (p. 5). This is the sentence that should cause the real outrage in our country, because we can test all the evidence in the world, and we will not be able to hold a single perpetrator accountable if law enforcement fails to conduct the type of investigation that will support successful prosecution. In other words, the problem is even more serious than people think; or at least it is larger and more complicated, because it extends beyond possible sources of DNA evidence to the entire investigation.

This series is designed to address the larger contours of this problem. We therefore return to the three basic assumptions outlined above, to understand their influence.

#1: Not Just DNA Evidence

First, there is the common impression that the purpose of a medical forensic exam is to collect DNA evidence. This is illustrated with the definition of a “rape kit” offered in the 2010 Human Rights Watch report:

When a person is sexually assaulted and reports the crime, she¹ will be asked by the hospital staff or the police to consent to the collection of a rape kit. A rape kit is the DNA evidence gathered from an examination of the victim’s body, a process which can last between four and six hours (p. 3).²

In fact, biological evidence (such as DNA) is not the only evidence that is collected and documented during a medical forensic exam — and it is not always the most important evidence for advancing a sexual assault case through successful investigation and prosecution.³ In most sexual assault cases, the victim and suspect know each other,

¹ We prefer to avoid gendered terminology, in order to be inclusive of both male and female victims of sexual violence. However, this is a direct quote from the 2010 Human Rights Watch report.
² While the forensic medical exam can take as long as four to six hours to conduct, this is on the long end of the spectrum. The Sexual Assault Nurse Examiner (SANE) Development and Operation Guide conducted a survey of SANE programs and found that: “The time estimated to complete an exam ranged from 2.5 to 5 hours with an average of 3.2 hours” (Ledray, 1999, p. 48).
³ This perception of a “rape kit” as including only biological evidence is further fueled by the description of the process offered in the 2010 Human Rights Watch report. In a breakdown of the steps involved, the final one is described as follows: “The nurse or doctor then collects other samples, such as fingernail scrapings, pubic hair combings, and urine and blood, placing each in separate envelopes or tubes. The swabs are labeled and sealed in containers with evidence tape. All of the evidence is then placed in a large white envelope — the rape kit” (p. 8). While it is true that this type of white envelope (or other similar package) is what people think of when they use the term “rape kit,” this obscures the fact that clothing and other items may also be collected from the victim during a medical forensic exam.
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and the suspect does not deny that the sexual act took place. Rather, most suspects argue that the victim consented. Thus, evidence is required to overcome the consent defense, by corroborating the element of force, threat or fear—or establishing that the victim was unable to consent. Typically, biological evidence is not used for this purpose; this is more likely to be accomplished with other evidence that is collected and documented in a medical forensic exam, including a history taken from the victim, photographs, and other documentation of injuries. Ultimately, these other types of evidence are more likely than DNA to help overcome a consent defense and lead to the successful investigation and prosecution of a sexual assault perpetrator.

For this reason, we try to avoid using the term "rape kit," preferring instead more general terms such as "forensic evidence kit" or even simply the "evidence from an exam." This highlights the fact that various forms of evidence are collected and documented during the process of a medical forensic exam, and it helps to keep in mind that evidence can be collected from both the suspect as well as the victim.

This more general orientation also reminds us that a medical forensic exam should be obtained in many different types of sexual assault cases. For example, despite the fact that most jurisdictions have established standards for how long an exam can be conducted following a sexual assault (e.g., 96 hours, 120 hours), emerging evidence suggests that forensic evidence may be available on the body of the victim (and suspect) far longer than was previously believed. Moreover, many people think a medical forensic exam is only needed in cases where sexual penetration was completed. However, as our case example will illustrate, critical evidence can be recovered in cases where penetration is attempted but not completed, and in cases where there are other forms of personal contact (e.g., the suspect covers the victim’s mouth with his hand).

This discussion even highlights the fact that these issues are not unique to sexual assault. As DNA technology advances and resources become available, forensic evidence will likely be recovered from the bodies of victims and suspects in other types of cases where there is personal contact (e.g., robberies, assaults). In sum, a variety of types of evidence may be collected and documented during a medical forensic exam, as well as the law enforcement investigation, and some of this evidence may be far more significant in advancing the investigation and prosecution than DNA.

Photographs and statements will also be taken, and any of these items may be more critical than DNA evidence for advancing the investigation, depending on the assault history.

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4 While the longest of these (120 hours) can be used as a general guideline, best practice is for each sexual assault to be evaluated on a case by case basis as recommended in the National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents (Second Edition, April 2013). The question of whether or not to conduct an exam should be based on the facts of the case, the victim’s history, the likelihood of recovering evidence, and the types of evidence that will be needed for successful prosecution. This issue is discussed in detail in a Promising Practices article from the e-newsletter sent on May 19, 2005 from Sexual Assault Training & Investigations (SATI), Inc. The article was also published in Sexual Assault Report, Volume 10, Number 3, January/February 2007, p 33-47.
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#2: Not From “Kit to Court”

Another common assumption is that the process of investigating a sexual assault proceeds directly from the medical forensic exam, to the identification of a DNA profile, to the courtroom trial. Or, as we describe it, “from kit to court.” Clearly, the process is much more complicated than this. Successful prosecution of a non-stranger sexual assault case typically requires a far wider range of evidence than just DNA; the medical forensic exam of the victim (and the evidence collected for a “kit”) is only one part of a much broader investigation. This reiterates the points made in the previous section.

#3: Not a “Yes or No” Answer

Finally, the public discussion often makes it sound like DNA evidence provides a “yes or no” answer — as if it could determine whether a particular suspect sexually assaulted the victim. This perception is based on a lack of understanding regarding the alternative sources of DNA evidence, the potential purposes for DNA evidence in a sexual assault case, the process for developing a DNA profile, and the criteria for entering a DNA profile into the national database (Combined DNA Index System or CODIS). This is particularly true for the majority of cases where the victim knows the suspect and the defense is consent.

This misperception is illustrated quite poignantly with another survivor account in the 2010 Human Rights Watch report. Julie, 25 was raped by a friend of a friend:

I tried pushing him, I tried screaming, ‘No,’ I screamed, ‘Stop,’ I said, ‘You’re hurting me,’ nothing was helping so I ran out of the apartment and got into my car and was in hysterics and then we ended up going immediately to the hospital. From there I agreed to do a rape kit (p. 4).

Julie goes on to describe how difficult it was to go through the process of a medical forensic exam. Ultimately, the evidence that was collected during her exam was not sent to the crime lab for analysis, and the case was not prosecuted. She recognizes that her case may not have gone to court even if the rape kit had been analyzed, but she believes this would have provided her with answers or a sense of closure:

I feel like even though my case may not have gone to court regardless if my kit were tested or not, I feel like I would have had somewhat of a closure, I feel like I would have had answers, maybe not answers that I liked, but I would have answers. If the rape kit was tested, I feel like I, in some part, would have internal justice. It would have ... I wouldn’t be wondering why. It’s hard and it’s difficult to think that you could potentially be setting someone free to do it to someone else, and the reason not testing a kit (p. 4).
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It is clear from Julie's comment that she is seeking answers or a sense of closure that could never have been provided by submitting forensic evidence to the crime lab for analysis. Her story thus provides an excellent starting place for our discussion of the alternative sources and potential purposes of DNA evidence in a sexual assault case. These issues will be explored in another training bulletin in this series.

References


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Proposed Tracking System for DNA Analysis of Sexual Assault Kits
Hawai‘i Sexual Assault Response and Training (HSART) Program

Step 1 (SATC)
- SATC: # of kits received from manufacturer
- SATC: # of kits sent to each county
- SATC: # of kits used in all counties for Police Reported exams

Step 2 (Police)
- Police: # of kits in law enforcement system (police custody)
- Law enforcement process for requesting analysis
- Police: # of kits sent to HPD SIS for analysis
- Police: # of kits sent to private labs for analysis
- Police: # of kits not sent to labs for analysis

Step 3 (Labs)
- HPD SIS: # of kits received for analysis
- HPD SIS: # of kits analyzed
- Private labs: # of kits received for analysis
- Private labs: # of kits analyzed

HPD SIS/Private labs: # of kits analyzed

# of kits received by labs awaiting analysis

SATC/Police: # of kits in law enforcement system (police custody)

- (minus)