



**Working to end sexual violence in Maryland**

P.O. Box 8782  
Silver Spring, MD 20907  
Phone: 301-565-2277  
www.mcasa.org

For more information contact:  
Lisae C. Jordan, Esquire  
lcjordan@mcasa.org

**Statement of Lisae C. Jordan, Esquire  
Executive Director & Counsel  
Maryland Coalition Against Sexual Assault**

**Before the Subcommittee on  
Crime and Federal Government Surveillance  
of the House Judiciary Committee**

**Committee Hearing on “Peace of Mind: Strengthening Victim Protections Under  
Kayleigh’s Law”**

**April 29, 2026**

**Mr. Chairman, Ranking Members, and distinguished Members of the Committee:  
Thank you for the opportunity to be here today.**

**My name is Lisae C Jordan, and I serve as the Executive Director & Counsel of the  
Maryland Coalition Against Sexual Assault**

The **Maryland Coalition Against Sexual Assault (MCASA)** is a non-profit membership organization that includes all of the State’s rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute which provides direct legal services for survivors across the State of Maryland. SALI helps enforce crime victims’ rights like the right to a permanent injunction that you are contemplating today.

**MCASA is Maryland’s sexual assault coalition. We have sister coalitions in states and territories across the country.** Each of these coalitions help the survivors in your states,

and help support the community-based rape crisis centers that that respond to your constituents. Your state coalitions can provide you with a direct and honest connection with what is happening on the ground in your districts and I urge you to forge strong ties with them. The **National Alliance to End Sexual Violence** represents us here in DC and can help support you in these efforts.

I have worked to end violence against women and children for virtually my entire legal career, spanning over three decades now. At MCASA, I support an expert and committed staff and our work includes providing training for advocates, prosecutors, law enforcement, schools, and communities about ending sexual violence and responding to survivors. MCASA supports local Sexual Assault Response Teams (SARTs), educates policymakers, and provides public education. We house Maryland's **Sexual Assault Kit Initiative's Victim Notification Team**, providing information and support to survivors with untested rape kits and advocating for meaningful access to forensic exams. MCASA is also home to **SALI, the Sexual Assault Legal Institute**, which provides direct legal services to survivors of sexual violence. We help enforce the laws that our legislature and this Congress enact.

### **HR8481 – Permanent Injunctions**

The bill before you today, HR8481, known as Kayleigh's Law, is an excellent example of one small aspect of the myriad of needs a sexual assault survivor faces. Very, very few sexual assault or child sexual abuse cases are prosecuted, fewer are successfully prosecuted, and even fewer result in a conviction for a sexual crime. However, when a sex offender is convicted, it is critical that the survivor have the ability to prevent the offender from contacting them.

It is correct that current federal law fails to include adequate protections for survivors and keep offenders away from survivors. With great respect we suggest that, as proposed, HR8481

has some technical flaws. More importantly, if the members wish to address the needs of sexual assault survivors and to hold offenders accountable, HR8481 should be expanded to more fully address the needs of survivors.

### **Incidence of Sexual Violence**

According to the Centers for Disease Control and Prevention (CDC) data, nearly half of all women in the United States experience physical sexual violence in their lifetime.<sup>1</sup> According to the National Domestic Violence Hotline, an average of 24 people per minute are victims of rape, physical violence, or stalking by an intimate partner in the United States—more than 12 million women and men over the course of one year.<sup>2</sup>

Nationwide, more than one woman in five has been raped, or subjected to attempted rape.<sup>3</sup> In some states, that number is closer to 40%.<sup>4</sup> In marginalized communities, the rate may be even higher.<sup>5</sup> And while most perpetrators of sexual violence target women and girls, men and boys also experience sexual violence—10% of adult rape victims in the United States are male, and boys comprise approximately 18% of the victims of child sexual assaults that are reported to law enforcement.<sup>6</sup>

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<sup>1</sup> Ruth W. Leemis, et al., *The National Intimate Partner and Sexual Violence Survey: 2023/2024 Sexual Violence Data Brief*, CENTERS FOR DISEASE CONTROL AND PREVENTION (2025) <https://www.cdc.gov/nisvs/media/pdfs/sexualviolence-brief.pdf>.

<sup>2</sup> NATIONAL DOMESTIC VIOLENCE HOTLINE, <https://www.thehotline.org/stakeholders/domestic-violence-statistics/> (last visited Apr. 27, 2026).

<sup>3</sup> Ruth W. Leemis, et al., *The National Intimate Partner and Sexual Violence Survey: 2023/2024 Sexual Violence Data Brief*, CENTERS FOR DISEASE CONTROL AND PREVENTION (2025) <https://www.cdc.gov/nisvs/media/pdfs/sexualviolence-brief.pdf>.

<sup>4</sup> *Id.*

<sup>5</sup> U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, *American Indians and Crime, 1992-2002* (2004).

<sup>6</sup> U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, *Sexual Assault of Young Children as Reported to Law Enforcement* (2000).

More than 80% of rape survivors were raped when younger than age 25, and nearly half of rape survivors were assaulted as minors—almost always by someone they knew<sup>7</sup> and often by someone they or their family trusted.<sup>8</sup> Under such circumstances, many survivors struggle to come forward. Domestic and sexual violence also inflicts emotional distress that tracks the degree of trust that is violated: Among survivors victimized by a stranger, 67% experience emotional distress. For survivors victimized by a family member or close friend, the prevalence of emotional distress rises to 79%. Where the perpetrator is an intimate partner, the figure increases to 84%.

The trauma from domestic and sexual violence compounds when survivors do not feel safe. More than one in five women—22.5% or 28.8 million—in the United States have experienced stalking during their lifetimes.<sup>9</sup> Nearly all female stalking victims felt afraid, threatened, or concerned for their safety or the safety of others. More than half were threatened with physical harm, and most female victims suffered mental or emotional harm as a direct result of stalking behaviors.<sup>10</sup>

### **Most Sexual Assault Does Not Result in Prosecution or Conviction**

The realities of sexual assault can be surprising to many of us because so few rapes are ever reported to the police. Unfortunately, rape, sexual abuse, and human sex trafficking continue to be crimes shrouded in secrecy and shame. Only about 30% of sexual assault victims ever report their attacks to law enforcement. Out of every 1,000 rape cases, 11 are referred to prosecution and 7 result in a felony conviction. Sexual assault survivors can experience

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<sup>7</sup> *Statistics: Perpetrators of Sexual Violence*, RAINN, <https://rainn.org/facts-statistics-the-scope-of-the-problem/statistics-perpetrators-of-sexual-violence/> (last visited Apr. 27, 2026).

<sup>8</sup> *This April marks 25 years of Sexual Assault Awareness Month*, NAT'L CENTER FOR VICTIMS OF CRIME (Apr. 13, 2026), <https://victimsofcrime.org/sexual-violence-is-more-common-than-many-people-realize-do-you-know-the-stats/>.

<sup>9</sup> Smith SG, et al., *The National Intimate Partner and Sexual Violence Survey: 2023/2024 Stalking Data Brief*, CENTERS FOR DISEASE CONTROL AND PREVENTION (2025), <https://www.cdc.gov/nisvs/media/pdfs/stalking-brief.pdf>.

<sup>10</sup> *Id.*

physical and emotional problems for years including the same symptoms of post-traumatic stress disorder that affect our troops returning from combat service. Federal resources have and should continue to open doors to survivors for assistance in their recovery.

Approximately 1,640 rape crisis centers across the country help victims of rape, sexual assault, sexual abuse, and incest rebuild their lives by providing a range of vital services to survivors. These centers operate 24-hour hotlines, provide 24-hour accompaniment to law enforcement departments, hospitals, and legal proceedings, and offer short- and long-term individual counseling and support groups for victims and their families. Local programs also assist victims with obtaining compensation and restitution. Rape crisis centers serve all victims of sexual violence, including women who have been raped, child sexual assault and incest survivors, adult survivors of childhood sexual abuse, male victims, sex trafficking survivors, persons with disabilities, and victims who experience abuse in later life. Many also provide necessary aid to family members and others affected by sexual violence. Services provided by rape crisis centers do not discriminate based on gender or characteristics of the person assaulted. They are available to all victims and survivors.

### **Federal Support for Survivors Seeking Access to Justice**

The federal response to ending sexual violence, including child sexual abuse, is wide ranging. Support for basic needs like housing, and for mental health support and counseling, is often a prerequisite to seeking justice. Survivors need to feel supported in order to come forward. We should help these survivors because they deserve our support as crime survivors, but also because survivors who come forward are heroes. **Without the brave survivors who report sexual abuse and assault, communities are in danger because sex offenders go free.**

The Sexual Assault Services Program (SASP) is one of several Violence Against Women Act (VAWA) grant programs that help provide fundamental structural support for rape crisis centers. The Victim of Crime Act (VOCA), provides support for survivors of all types of crime, including survivors of sexual assault and child abuse. Funding from the Rape Prevention & Education (RPE) act, administered by the Centers for Disease Control, help stop sexual assault before it happens. All are critical to responding to sexual assault.

**Legal services are key to supporting survivors.** The Legal Assistance to Victims (LAV) program under the Violence Against Women Act (VAWA) supports survivors, as does funding under VOCA and through the Office of Victims of Crime. Consider the proposal under HR8481: a crime victims' rights attorney could assist a survivor with the process proposed. They could help communicate with the prosecutor, advocate for prompt prosecution, file a motion at the sentencing hearing, and – if an order was violated – file a petition for contempt. Unlike prosecutors, crime victims' rights attorneys follow the direction of the survivor. Crime victims' rights attorneys also work with local community rape crisis centers to ensure survivors have safety planning and referrals.

Legal needs of survivors are not limited to crime victims' rights. For example, legal services help these survivors:

- a sex trafficking survivor protecting privacy;
- a survivor who is abused by her teacher and needs accommodations at school, such as changing classrooms or rescheduling exams;
- protective parents need legal help to obtain a custody order and deny visitation when their child has been sexually abused by the other parent.

The list goes on and on and the legal needs of survivors are too often seen as “extra” even though having effective counsel and legal services is the key to making the laws enacted by legislators effective. We urge the members to work to ensure legal services for survivors have consistent and sustained support.

### **Federal Delay is Harming Survivors and Endangering Our Communities**

Maryland is fortunate to have some state support for rape crisis centers and for legal services for survivors. Despite this state support, the persistent delays and instability at the federal level are threatening services. Like all nonprofits, sexual assault services providers face workforce challenges. When vacancies occur, programs are now scared to fill them because it is unclear if federal funding will be available. Programs like SALI, the Sexual Assault Legal Institute, wish to compete for regularly available federal funds, but OVW funding announcements (Notice of Funding Opportunity) have not been issued. Other programs have applied for federal funds and then faced long delays about whether they have received an award. Programs are considering whether they should cut back and stop the work that supports survivors and helps hold sex offenders accountable.

Cuts to VOCA funding are devastating programs across the country. The safety net that America has built to help victims of crime is at risk of breaking. MCASA appreciates that the House has passed the Crime Victims Fund Stabilization Act: it is critical for survivors across the country. If HR8481 was enacted, the services that VOCA and VAWA funds are needed to help survivors have meaningful access to the law.

The National Alliance to End Sexual Violence performs an annual survey of sexual assault program across the country and the results of this year’s survey are frightening. Rape crisis services report a 46% decrease in sexual assault services and a 50% decrease in funding for

sexual assault prevention. At the same time, 60% of programs report an increase in need for sexual assault services generally, with a 44% increase in need for services by adults sexually abused as children. Maryland's experience is no different. Grants have been delayed. Planning is very difficult. Reductions in the federal workforce mean we are seeing demand from people who may have sought private services in the past. They also reduce donations and support.

### **Maryland's Permanent Protective Order**

Permanent Protective Orders can be an important part of access to justice. We echo the message of all the witnesses here today to say that a permanent order to stay away from a victim can provide the peace of mind to help a victim become a survivor. We applaud Kayleigh Kozak and her work using her voice as a survivor to make changes in state law. Our concerns about HR8481 are about the scope and technical aspects, and in no way a disagreement with her efforts or the general idea of permanent orders.

In Maryland, we have a Permanent Protective Order available to survivors in only very specific cases, Md. Code Ann., [Family Law Article §4-506\(k\)](#):

- when there is a civil protective order in place, AND the defendant was criminally prosecuted and sentenced to at least five years for the act or abuse and served one year;
- a defendant violated a protective order by committing an act of abuse AND criminally prosecuted and sentenced to at least five years for the act or abuse and served one year;
- or when the defendant consents to the entry of the permanent order, often as a provision in a plea agreement.

These Maryland orders are permanent "unless terminated at the request of the victim". During the 2025 Maryland legislative session, the provision allowing for entry of a permanent order by consent was added to the statute. This was supported by both victim/survivor advocates and the defense bar because it is hugely important to survivors and because it often allows defendants to negotiate a more favorable plea agreement. Maryland's law is complicated and limited and is

not suggested as a model, but it is a good example of the types of options available at the state level.

The benefit of adding a permanent option to a *civil* protective order statute is that it is more easily enforced by law enforcement responding to a reported violation of the order. In at least some cases, if an offender approaches the victim and there is a protective order in place, they can be arrested.

The *criminal* justice system also includes various approaches to keep offenders away from victims and survivors. However, a criminal stay-away order typically requires that the defendant be under the supervision of parole or probation. Parole and probation are controlled by government officials, not by survivors, and government does not always fully address survivors' needs. Adding a permanent order to this system would require extending supervision and keeping court cases open in order to be effectively enforceable. Adding a permanent protective order initiated by survivors is an improvement to one controlled by government, but this would require creating systems to both request and enforce the order. Another variation to consider is that some criminal sentences for sex offenders include lifetime supervision, and this may include a stay-away order. Again, however, this is a function of government supervision, not a survivor's choice.

As drafted, HR8481 suggests enforcement by contempt of court. This process is unwieldy for survivors and poses challenges in the field. If an offender approaches a survivor in violation of an injunction enforced by contempt of court, they are not arrested. Instead, the survivor would have to report the violation and begin an involved court process.

### **Centering Survivors**

As the members consider this important legislation, MCASA urges you to center the needs of survivors and to appreciate the complexity of survivors' experiences. Consider, as an example, a case of a 14 year old girl who is vulnerable and suffering low self-esteem. She is targeted by an abuser calling her beautiful and helping her feel special. The abuser recruits her into human trafficking using all the slow and careful grooming that sex offenders use. He gains her trust. He cuts her off from the support of those who love her. He draws her in and then exploits her.

Before this young woman ever reports, she needs to know that what is happening is not her fault and that it's illegal. She needs to have information. She needs counseling to address guilt and shame. She may or may not have become entangled in the juvenile justice system or be using drugs. She needs a safe place to stay. She needs to make up the education she has missed or receive support to gain employment. To help prosecute the offender, she needs trained prosecutors who will take her story seriously and prosecute swiftly. She needs her own advocate or attorney to help ensure that her rights to be notified, present, and heard in court are enforced. She needs help ensuring that whatever safety provisions are available, are included in any sentence imposed. And she needs to have advocacy if and when any of those rights are violated. A permanent protective order should be one of the protections available, and more is needed for this young woman to access justice. MCASA urges the subcommittee to take every step available to ensure sexual assault survivors have *all* of the tools and support they need for safety, healing, and justice.



# RAPE CRISIS SERVICES ARE ESSENTIAL

Rape Crisis Centers (RCC)s across the country are facing funding delays and cuts. At the same time, demand for services and prevention is increasing. As a result, individuals and communities will suffer. RCCs are critical for survivor healing and safety.



National Alliance to End Sexual Violence

*I will never forget the way you listened without judgement, supported without condition, and always had your doors open. You gave me dignity when it was being stripped away, and you reminded me that I had a voice worth hearing and rights worth defending. You were, and still are, part of my survival and healing story. —Survivor, Alaska RCC*

## DECREASE IN FUNDING

46%

report a decrease in funding for **sexual assault services**.

50%

report a decrease in funding for **sexual assault prevention**.

53%

report a **decrease in staff**.

*Our staff is at a breaking point and cannot continue to manage the influx of demand at the current funding level.*

—**Pennsylvania RCC**

DATA REFLECTS FINDINGS FROM THE NAESV 2025 ONLINE SURVEY OF RAPE CRISIS CENTERS.

## INCREASE IN DEMAND

60%

report an increase in demand for **sexual assault services**.

44%

report an increase in demand for services for **adult survivors of child sexual abuse**.

56%

report an increase in demand for sexual assault **prevention** and **education activities**.

70%

report an increase in demand for **housing services**.

## CONSEQUENCES TO RCCs AND SURVIVORS

**30%** of staffing reductions were **lay-offs** due to **funding cuts**.

**33%** report a **waiting list** for mental health counseling/therapy services.

**50%** report having **no mental health** counseling or therapy providers on staff.

*Following a recent funding loss, our counseling team has been reduced, resulting in a waitlist for ongoing therapeutic services....demand continues to grow, yet reduced staffing limits how quickly survivors can access the long-term support they need.*

—**Texas RCC**

*Currently, due to limited staffing we have a counseling waiting list of over 100 people. It is taking on average 4 months for new clients to get in for counseling. Additionally, there are times we do not have a sexual assault nurse or advocate available for clients to obtain a sexual assault exam. —Florida RCC*

# FUNDING IS CRITICAL

## for Sexual Assault Services and Prevention



National Alliance to  
End Sexual Violence

*In these challenging times, it is up to us to make sure these services remain available and let survivors know they don't have to face this road in solitude.*—**Colorado RCC**

## WHAT RAPE CRISIS CENTERS ARE SAYING



**Housing** is the **#1 unmet need of survivors of sexual assault**, followed by cash assistance, basic needs (such as food and clothing), and mental health care.



Many programs lack capacity for **support groups, transportation options** and **housing resources** for survivors.

*I am no longer the person I was when I walked through those doors. Because of the tools I received, I am continually overcoming obstacles. My future is brighter than my past. I can now help other women see their worth. I am writing books about my experiences. I am grateful for the way you made me feel like I was the only client you had. I felt seen.*

—**Survivor, Illinois RCC**

*A survivor was able to receive support and advocacy during a SANE exam. Follow-up care afterwards included counseling services, court advocacy and safety planning. The survivor was also able to obtain a protection order as part of a safety plan and reestablish a support system in friends and family during their healing journey. The survivor later reported that they felt supported and empowered by the advocacy services they received from our organization.*

—**Missouri RCC**

*Without additional funding and staff capacity, survivors may face delays in accessing the care and safety they urgently deserve.*

—**Ohio RCC**

*Sometimes, the most meaningful support is not just in the services we provide, but in the humanity we offer.*

—**California RCC**

*Sexual assault survivors seeking out mental health services at our organizations are added to our waiting list and provided referrals to other therapy providers in the community. However, resources are limited community-wide and most face significant wait times to access mental health services.*

—**North Dakota RCC**

**Rape Crisis Centers need increased investment to continue their vital work—sexual violence prevention, awareness, and supporting survivors at every stage of their healing.**

HAVE ADDITIONAL QUESTIONS?  
Contact Terri Poore, Policy Director  
[terri@endsexualviolence.org](mailto:terri@endsexualviolence.org)