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**SOMERSET COUNTY PROSECUTOR'S OFFICE**  
40 NORTH BRIDGE STREET  
P.O. BOX 3000  
SOMERVILLE, NEW JERSEY 08876-1262

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908-575-3300  
WWW.SCPO.NET

It has come to the attention of the Somerset County Prosecutor's Office of Victim Witness Advocacy that you reported an incident of sexual abuse. Our office assists victims and their families in the aftermath of a crime. It has been our experience that early intervention through counseling greatly benefits victims of crimes of this nature. The following agency is one that specializes in sexual assault and offers confidential, professional counseling for both victims and family members.

**SASS Sexual Assault Support Services  
at Zufall Health  
71 Fourth Street Somerville, NJ 08876  
24- Hour Confidential Hotline (908) 526-7444**

Our office would like to inform you that there are services we can provide to assist you, regardless of the outcome of the investigation, to include: Counseling referrals, Information regarding medical treatment and follow-up, Victims of Crime Compensation Office applications, Information about the Criminal Justice System and Sexual Assault Survivor Protection Act (S.A.S.P.A.) Orders.

Please be advised that it is your right under the law to submit a written statement about the impact of the crime, which will be considered prior to a final decision being made about criminal charges being filed. If you wish to submit a statement, please send it to the address above or via email to [somerservw@co.somerset.nj.us](mailto:somerservw@co.somerset.nj.us) within 10 days of your report to law enforcement. Regardless of whether the case results in criminal charges, you may request to meet with the Assistant Prosecutor assigned to your case.

I am the Victim Advocate assigned to the Sex Crimes/Child Abuse unit. If you have any questions or wish to speak with me, please do not hesitate to contact me directly at 908-575-3381. Enclosed with this letter is information for your reference to include the Sexual Assault Victim's Bill of Rights, a guide to the criminal case process in New Jersey and S.A.S.P.A. Order information and application.

Very truly yours,

Bobbi Mowery  
Victim Witness Advocate/MDT Coordinator

MICHAEL H. ROBERTSON  
FISCAL

THOMAS J. CHIRICHELLA, JR.  
PRIMER FISCAL AUXILIAR



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Se ha puesto en conocimiento de la Oficina de Defensa de Víctimas y Testigos de la Fiscalía del condado de Somerset que usted informó un incidente de abuso sexual. Nuestra oficina asiste a las víctimas y sus familias con las consecuencias de un delito. Nuestra experiencia indica que la pronta intervención a través de la terapia beneficia en gran medida a las víctimas de delitos de este tipo. La siguiente agencia se especializa en agresiones sexuales y proporciona servicios de terapia confidencial y profesional para las víctimas y sus familiares.

**Servicios de Apoyo contra el Abuso Sexual (Sexual Assault Support Services, SASS)  
en Zufall Health  
71 Fourth Street Somerville, NJ 08876  
Línea directa confidencial disponible las 24 horas (908) 526-7444**

Deseamos informarle que contamos con servicios para brindarle asistencia, independientemente del resultado de la investigación, que incluyen lo siguiente: Recomendaciones para servicios de terapia, información con respecto al tratamiento y seguimiento médico, solicitudes ante la Oficina de Indemnización a Víctimas de Delitos, información sobre el Sistema de Justicia Penal y las órdenes en virtud de la Ley para la Protección de Sobrevivientes de la Agresión Sexual (Sexual Assault Survivor Protection Act, SASPA).

Tenga en cuenta que, según la ley, es su derecho presentar una declaración por escrito sobre el impacto del delito, que se considerará antes de que se tome una decisión final sobre la presentación de cargos penales. Si desea enviar una declaración, envíela a la dirección anterior o por correo electrónico dentro de [somersetvw@co.somerset.nj.us](mailto:somersetvw@co.somerset.nj.us) los 10 días posteriores a su informe a la policía. Tenga en cuenta que, independientemente de que el caso genere cargos penales o no, usted podrá solicitar reunirse con el Fiscal Auxiliar asignado a su caso.

Yo soy el Defensor de la Víctima asignado a la Unidad de delitos sexuales / abuso infantil. Si tiene preguntas o desea hablar conmigo, no dude en comunicarse directamente conmigo al 908-575-3381. Adjunto a esta carta encontrará información de consulta que incluye la Declaración de Derechos de las Víctimas de Agresión Sexual, una guía sobre el proceso de casos penales de Nueva Jersey, así como información y una solicitud de orden en virtud de la ley SASPA.

Saludos cordiales.

Bobbi Mowery  
Defensor de Víctimas y Testigos/Coordinador del equipo multidisciplinario (Multi-Disciplinary Team, MDT)

# Sexual Assault Victim's Bill of Rights

N.J. Stat. Ann. § 52:4B-60.1 et seq.

## In New Jersey, victims of sexual violence are afforded the following rights:

- (1) To have any allegation of sexual assault treated seriously; to be treated with dignity and compassion; and to be notified of existing medical, counseling, mental health, or other services available for victims of sexual assault, whether or not the crime is reported to law enforcement;
- (2) To be free, to the extent consistent with the New Jersey or United States Constitution, from any suggestion that victims are responsible for the commission of crimes against them or any suggestion that victims were contributorily negligent or assumed the risk of being assaulted;
- (3) To be free from any suggestion that victims are to report the crimes to be assured of any other guaranteed right and that victims should refrain from reporting crimes in order to avoid unwanted personal publicity;
- (4) When applicable, to no-cost access to the services of a sexual assault response team comprised of: a certified forensic nurse examiner, a confidential sexual violence advocate, and a law enforcement official as provided in accordance with the Attorney General's Standards for Providing Services to Victims of Sexual Assault, and the choice to opt into or out of any of the team's services;
- (5) To be informed of, and assisted in exercising, the right to be confidentially or anonymously tested for acquired immune deficiency syndrome (AIDS) or infection with the human immunodeficiency virus (HIV) or any other related virus identified as a probable causative agent of AIDS; and to be informed of, and assisted in exercising, any rights that may be provided by law to compel and disclose the results of testing of a sexual assault suspect for communicable diseases;
- (6) To have forensic medical evidence, if collected, retained for a minimum of five years, and to receive information about the status of the evidence upon request;
- (7) To choose whether to participate in any investigation of the assault;
- (8) To reasonable efforts to provide treatment and interviews in a language in which the victim is fluent and the right to be given access to appropriate assistive devices to accommodate disabilities that the victim may have, whether temporary or long term;
- (9) To information and assistance in accessing specialized mental health services; protection from further violence; other appropriate community or governmental services, including services provided by the Victims of Crime Compensation Office; and all other assistance available to crime victims under current law;
- (10) To be apprised of the availability and process by which a court may order the taking of testimony from a victim via closed circuit television in accordance with section 1 of P.L.1985, c.126 (C.2A:84A-32.4); and
- (11) To be apprised of the availability and process by which to seek protections through a temporary or final protective order under the "Sexual Assault Survivor Protection Act of 2015," P.L.2015, c.147 (C.2C:14-13 et seq.), if the victim believes that the victim is at risk for re-victimization or further harm by the perpetrator.



# Declaración de Derechos de La Víctima de Agresión Sexual

N.J. Stat. Ann. § 52:4B-60.1 et seq.

En Nueva Jersey a las víctimas de violencia sexual se les otorgan los siguientes derechos:

- (1) Que toda denuncia de agresión sexual sea tratada con seriedad; ser tratada/o con dignidad y compasión; y de ser notificada/o de servicios disponibles ya sean médicos, de consejería y asesoramiento, de salud mental, o de otros tipos disponibles para las víctimas de agresión sexual ya sea que se haya reportada el delito a las agencias del orden público o no.
- (2) De estar libres, en la medida compatible con la Constitución de Nueva Jersey o de Los Estados Unidos, de cualquier inferencia que las víctimas son las responsables por los delitos que se cometen en su contra o de alguna inferencia que las víctimas contribuyeron al delito por su negligencia o que asumido el riesgo de ser agredidas/os.
- (3) De estar libres de cualquier inferencia que las víctimas deben reportar los delitos para que se les asegure algún otro derecho garantizado y que las víctimas deben evitar reportar los delitos para evitar publicidad personal no deseada.
- (4) Cuando aplique, al acceso sin costo a los servicios de un equipo de respuesta a la agresión sexual comprendido por una enfermera examinadora forense certificada, un asesor confidencial de violencia sexual, y un oficial del orden público como lo indican los Estándares de la Oficina del Fiscal General para proveer servicios a las Víctimas de Agresión Sexual, y de tener la opción de participar o no con los servicios que provee el equipo y que usted escoja.
- (5) De que se le informe y que se le ayude a ejercer su derecho a obtener pruebas confidenciales para detectar el Síndrome de Inmunodeficiencia Adquirida (SIDA) o la infección con el Virus de Inmunodeficiencia Humana (VIH) o de cualquier otro virus relacionado e identificado como probable agente causante del SIDA; y de permanecer informada/o y recibir asistencia al ejercer cualquier derecho que le otorgue la ley para requerir y divulgar los resultados de pruebas que se le hayan hecho a un sospechoso de agresión sexual para detectar enfermedades transmisibles;
- (6) Que se guarden los resultados de las pruebas médicas forenses, si es que se han colectado, por un mínimo de cinco años, y de recibir información sobre la condición/estatus de las evidencias cuando la solicite.
- (7) Decidir si participar o no en la investigación de la agresión.
- (8) Que se hagan esfuerzos razonables para proveer tratamiento y entrevistas en el idioma en el que la víctima hable con fluidez y dar acceso a dispositivos de asistencia adecuados en relación a cualquier incapacidad que pueda tener la víctima ya sea temporal o a largo plazo;
- (9) A tener información y ayuda para poder tener acceso a servicios especializados de salud mental; a protección contra nuevos actos de violencia; a otros servicios apropiados ya sean comunitarios o gubernamentales, incluyendo los servicios proveídos por la Oficina de Compensación para Víctimas del Crimen; y toda otra ayuda disponible a víctimas de delitos conforme a las leyes vigentes.
- (10) De ser informada/o de la disponibilidad y el proceso por el cual un tribunal puede ordenar testimonio de una víctima a través de circuito cerrado de televisión conforme a la sección 1 de P.L. 1985, c.126 (C.2A:84A-32.4); y
- (11) De ser informada/o sobre la disponibilidad y el proceso para solicitar protección mediante una orden de alejamiento temporal o permanente conforme a “la Ley de protección a sobrevivientes de agresiones sexuales del 2015,” P.L.2015, c.147 (C.2C:14-13 et seq.), si la víctima cree que corre el riesgo de ser víctima de nuevo o de daño adicional por parte del autor.

NEW JERSEY OFFICE OF THE ATTORNEY GENERAL

DIVISION OF CRIMINAL JUSTICE



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## Crime Victims Bill of Rights (NJS 52:4B-36)

Without the participation and cooperation of crime victims and witnesses, the criminal justice system would cease to function. The rights of these individuals should be given full recognition and protection. The State has the responsibility to enhance and protect the necessary role of crime victims and witnesses in the criminal justice process. In furtherance of this, the improved treatment of these persons should be assured through the establishment of specific rights. These rights are among the most fundamental and important in assuring public confidence in the criminal justice system.

Crime victims and witnesses are entitled to the following rights:

- a. To be treated with dignity and compassion by the criminal justice system
- b. To be informed about the criminal justice process
- c. To be free from intimidation
- d. To have inconveniences associated with participation in the criminal justice process minimized to the fullest extent possible
- e. To make at least one telephone call provided the call is reasonable in both length and location called
- f. To medical assistance if, in the judgment of the law enforcement agency, medical assistance appears necessary
- g. To be notified if presence in court is not needed
- h. To be informed about available remedies, financial assistance and social services
- i. To be compensated for their loss whenever possible
- j. To be provided a secure, but not necessarily separate, waiting area during court proceedings
- k. To be advised of case progress and final disposition
- l. To the prompt return of property when no longer needed as evidence
- m. To submit a written statement about the impact of the crime to a representative of the county prosecutor's office which shall be considered prior to the prosecutor's final decision concerning whether formal criminal charges will be filed
- n. To make, prior to sentencing, an in-person statement directly to the sentencing court concerning the impact of the crime. This statement is to be made in addition to the statement permitted for inclusion in the presentence report by N.J.S. 2C:44-6. In any homicide prosecution the victim's survivor may display directly to the sentencing court at the time of this statement a photograph of the victim taken before the homicide.

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 Victims of Crime Compensation Office

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## NOTICE

### SEXUAL ASSAULT SURVIVOR PROTECTION ACT OF 2015 (SASPA) – PROCEDURE FOR OBTAINING A TEMPORARY PROTECTIVE ORDER – MODIFIED TO ADDRESS COVID-19

In response to the COVID-19 coronavirus pandemic, the New Jersey Judiciary is implementing all possible measures to apply social distancing in current court operations, consistent with the recommendations of the New Jersey Department of Health and the Centers for Disease Control. Accordingly, the procedures for applying for a SASPA protective order have been temporarily modified.

As part of the new temporary procedures, the Judiciary created the attached application packet to be used by the plaintiff/victim or the parent of a victim to request a SASPA temporary protective order. A parent or guardian may file on behalf of the victim in any case in which the victim (1) is less than 18 years of age; or (2) has a developmental disability or a mental disease or defect that renders the victim temporarily or permanently incapable of understanding the nature of the victim's conduct, including, but not limited to, being incapable of providing consent.

The packet, which also is posted on the Judiciary's website ([www.njcourts.gov](http://www.njcourts.gov)), includes the required forms as well as instructions on how to complete the forms. Once the plaintiff has completed the forms in the packet, they must email them to the Family Division either in the county in which the victim resides, the county in which the defendant resides, or the county where the act occurred. The list of email addresses by each county to be used for this purpose is on page 5 of the Sexual Assault Survivor Protection Act Intake Kit (CN 12590). Family Division staff will promptly review the submitted paperwork that plaintiff has submitted and will contact the plaintiff to coordinate a time for a telephonic or video hearing on the application before a Superior Court judge.

If you are a victim of domestic violence and want to file for a domestic violence restraining order, please contact your local law enforcement agency.

Questions about this notice may be directed to the AOC's Family Practice Division at 609-815-2900 ext. 55350.

A handwritten signature in blue ink that reads "Glenn A. Grant" followed by a stylized signature mark.

Hon. Glenn A. Grant, J.A.D.

Acting Administrative Director of the Courts

Dated: April 2, 2020



## How to File a New Jersey Sexual Assault Survivor Protection Act (SASPA) Complaint Superior Court of New Jersey - Chancery Division - Family Part

**\*\*Please be advised this packet is intended to only be used during the COVID-19 crisis.\*\***

### Who Should Use This Packet?

This packet should only be used the **first time** you file for a Sexual Assault Survivor Protective Order.

#### **Use this packet if you are:**

A victim of nonconsensual sexual contact, sexual penetration, or lewdness, (see definitions on page 3) or any attempt at such conduct, and who does **not** meet the definition of a “domestic violence victim” in the Prevention of Domestic Violence Act (PDVA).

- A victim's parent or guardian may file on behalf of the victim in any case in which the victim:
  - is less than 18 years of age; or
  - has a developmental disability or a mental disease or defect that renders the victim temporarily or permanently incapable of understanding the nature of the victim’s conduct, including, but not limited to, being incapable of providing consent

#### **Do NOT use this packet if:**

- You meet the definition of a “victim” under the PDVA - N.J.S.A. 2C:25-19 (d)(a) which is as follows:
  - A person protected by the PDVA includes any person:
    - **Who** is 18 years of age or older, **or** who is an emancipated minor, and who has been subjected to domestic violence by:
      - ❖ Spouse
      - ❖ Former spouse
      - ❖ Any other person who is a present household member or was at any time a household member, or
    - Who, regardless of age, has been subjected to domestic violence by a person:
      - ❖ With whom the victim has a child in common, or
      - ❖ With whom the victim anticipates having a child in common, if one of the parties is pregnant, or has been subjected to domestic violence by a person with whom the victim has had a dating relationship.

**NOTE:** If you are a victim of domestic violence and want to file for a domestic violence restraining order, please contact your local law enforcement agency.

- If you are filing on behalf of a minor child and the person you are filing against is a parent or guardian of the minor child, you cannot file under the Sexual Assault Survivor Protection Act. You must call the Division of Permanency and Protection at: 1-877 NJ ABUSE (1-877-652-2873); TTY/TDD 1-800-835-5510

Note: These materials have been prepared by the New Jersey Administrative Office of the Courts for use by self-represented litigants. The guides, instructions, and forms will be periodically updated as necessary to reflect current New Jersey statutes and court rules. The most recent version of the forms will be available at the county courthouse or on the Judiciary’s Internet site [njcourts.gov](http://njcourts.gov). However, you are ultimately responsible for the content of your court papers.

**Completed forms are to be submitted to your local Family Division. A list of Family Division Offices can be found on [njcourts.gov](http://njcourts.gov)**

## Things to Think About Before You Represent Yourself in Court

### Try to Get a Lawyer

The law, the proofs necessary to present your case, and the procedural rules governing cases in the Family Division are complex. It is recommended that you make every effort to obtain the assistance of a lawyer. If you cannot afford a lawyer, you may contact the legal services program in your county to see if you qualify for free legal services. Their telephone number can be found online under “Legal Aid” or “[Legal Services](#).”

If you do not qualify for free legal services and need help in locating an attorney, you can contact the bar association in your county. The telephone number can also be found in your local yellow pages. Most county bar associations have a [Lawyer Referral Service](#).

The County Bar Lawyer Referral Service can supply you with the names of attorneys in your area willing to handle your particular type of case and will sometimes consult with you at a reduced fee.

There are a variety of organizations of minority lawyers throughout New Jersey, as well as organizations of lawyers who handle specialized types of cases. Ask the Family court staff in your county for a list of lawyer referral services that include these organizations.

### What You Should Expect If You Represent Yourself

While you have the right to represent yourself in court, you should not expect special treatment, help or attention from the court. The following is a list of some things court staff can and cannot do for you. Please read it carefully before asking court staff for help.

- We *can* explain and answer questions about how the court works.
- We *can* tell you what the requirements are to have your case considered by the court.
- We *can* give you some information from your case file.
- We *can* provide you with samples of court forms that are available.
- We *can* provide you with guidance on how to fill out forms.
- We *can* usually answer questions about court deadlines.
- We *cannot* give you legal advice. Only your lawyer can give you legal advice.
- We *cannot* tell you whether or not you should bring your case to court.
- We *cannot* give you an opinion about what will happen if you bring your case to court.
- We *cannot* recommend a lawyer, but we can provide you with the telephone number of a local lawyer referral service.
- We *cannot* talk to the judge for you about what will happen in your case.
- We *cannot* let you talk to the judge outside of court.
- We *cannot* change an order issued by a judge.

### Keep Copies of All Papers

Make and keep copies for yourself, written agreements, Case Information Statements, and other important papers that relate to your case



## Definitions of Court Terms Used in SASPA Cases

**Certification** - A *certification* is a written statement made to the court when you file papers with the court, swearing that the information contained in the filed papers is true subject to penalty if any statement is willfully false.

**Complaint** - A *complaint* is a formal document filed in court that starts a case. It typically includes the names of the parties and the issues you are asking the court to decide.

**Court Order** - A *court order* is the written decision issued by a court of law. For example, a child support court order sets forth how often, how much, and what kind of support is to be paid.

**Defendant** - the party sued in a civil lawsuit or the party charged with a crime in a criminal prosecution. In some types of cases (such as divorce) a defendant may be called a respondent.

**Docket Number** - The *docket number* is the identifying number assigned to every case filed in the court.

**File** - To *file* means to give the appropriate forms to the court to begin the court's consideration of your request.

**Intimate Parts** - Means the following body parts: sexual organs, genital area, anal area, inner thigh, groin, buttock, or breast of a person.

**Lewdness** - Means the exposing of the genitals for the purpose of arousing or gratifying the sexual of the actor.

**Party** - A *party* is a person, business, or governmental agency involved in a court action.

**Petitioner** - *Petitioner* is another name for the person starting the court action by filing the appropriate papers the court will consider.

**Respondent** - *Respondent* is the person who is named as the other party in the court action filed by the petitioner. This person can respond to the complaint or application filed by the petitioner by filing a cross application or written response with the court.

**Sexual Conduct** - Means an intentional touching by the victim or actor, either directly or through clothing, of the victim's or actor's intimate parts for the purpose of degrading or humiliating the victim or sexually arousing or sexually gratifying the actor.

**Sexual Penetration** - Means vaginal intercourse, cunnilingus, fellatio, or anal intercourse between persons or insertion of the hand, finger, or object into the anus or vagina either by the actor or upon the actor's instruction.

The numbered steps listed below tell you what forms you will need to fill out and what to do with them. Each form should be typed or printed clearly on 8 ½ "x 11" white paper only. Forms cannot be filed on a different size or color paper. Use only the forms included in this packet. Be sure to keep a copy for your records.

## **Steps for Filing a Complaint**

### **STEP 1: Fill out the Intake Form (Form A)**

The Intake form provides your and/or the minor child's demographic information. This information will be kept confidential and will not be shared with the defendant.

### **STEP 2: Fill out the *Verified Complaint* (Form B)**

The *Verified Complaint* is a written request in which you ask the court to establish a court order on your behalf or on a minor child's behalf. The court will establish an order based on testimony of the parties and written documentation submitted.

### **STEP 3: Additional Information Sheet (FORM C)**

This form is provided if you need additional space to type the details of the incident for which you are filing for a protective order.

### **STEP 4: Provide the court with the most recent address of the other party**

If the court grants a temporary order of protection, the court will send a Notice to Appear to the plaintiff and the defendant and any attorney(s) connected to your case when the case is scheduled for a final hearing. Your appearance is **mandatory**.

**Note:** The other party will receive copies of all the papers you attach (except for the Intake Form) to your complaint with the Notice to Appear, unless court rules prohibit this information from being shared.

You must provide the court with the most current address (that you know of) for the other party and the name of their attorney (if you know it) when you file your complaint.

### **STEP 5: Check your completed forms and make copies**

Check your forms and make sure they are complete. Remove all instruction sheets. Make sure you have signed all the forms wherever necessary.

### **STEP 6: E-mail your completed paperwork**

E-mail your completed packet to the emergent filing mailbox in the county where the conduct or attempted conduct occurred, where the defendant resides, or where you reside or are sheltered. E-mail addresses for each vicinage are provided on page 5 of this packet.

### **NOTE:**

These applications may only be filed in the Family Division of the Superior Court during normal business hours.

These applications may only be taken at the Superior Court and are not to be accepted at Municipal Courts and/or police departments.

All courthouse addresses can be found on [njcourts.gov](http://njcourts.gov).

## Where to Email Your Emergent Filing:

Atlantic County -- [AtlEmergent.Mailbox@njcourts.gov](mailto:AtlEmergent.Mailbox@njcourts.gov)  
Bergen County -- [BerEmergent.Mailbox@njcourts.gov](mailto:BerEmergent.Mailbox@njcourts.gov)  
Burlington County -- [BurEmergent.Mailbox@njcourts.gov](mailto:BurEmergent.Mailbox@njcourts.gov)  
Camden County -- [CamEmergent.Mailbox@njcourts.gov](mailto:CamEmergent.Mailbox@njcourts.gov)  
Cape May County -- [CpmEmergent.Mailbox@njcourts.gov](mailto:CpmEmergent.Mailbox@njcourts.gov)  
Cumberland County -- [CumEmergent.Mailbox@njcourts.gov](mailto:CumEmergent.Mailbox@njcourts.gov)  
Essex County -- [EsxEmergent.Mailbox@njcourts.gov](mailto:EsxEmergent.Mailbox@njcourts.gov)  
Gloucester County -- [GloEmergent.Mailbox@njcourts.gov](mailto:GloEmergent.Mailbox@njcourts.gov)  
Hudson County -- [HudEmergent.Mailbox@njcourts.gov](mailto:HudEmergent.Mailbox@njcourts.gov)  
Hunterdon County -- [HntEmergent.Mailbox@njcourts.gov](mailto:HntEmergent.Mailbox@njcourts.gov)  
Mercer County -- [MerEmergent.Mailbox@njcourts.gov](mailto:MerEmergent.Mailbox@njcourts.gov)  
Middlesex County -- [MidEmergent.Mailbox@njcourts.gov](mailto:MidEmergent.Mailbox@njcourts.gov)  
Monmouth County -- [MonEmergent.Mailbox@njcourts.gov](mailto:MonEmergent.Mailbox@njcourts.gov)  
Morris County -- [MrsEmergent.Mailbox@njcourts.gov](mailto:MrsEmergent.Mailbox@njcourts.gov)  
Ocean County -- [OcnEmergent.Mailbox@njcourts.gov](mailto:OcnEmergent.Mailbox@njcourts.gov)  
Passaic County -- [PasEmergent.Mailbox@njcourts.gov](mailto:PasEmergent.Mailbox@njcourts.gov)  
Salem County -- [SlmEmergent.Mailbox@njcourts.gov](mailto:SlmEmergent.Mailbox@njcourts.gov)  
Somerset County -- [SomEmergent.Mailbox@njcourts.gov](mailto:SomEmergent.Mailbox@njcourts.gov)  
Sussex County -- [SsxEmergent.Mailbox@njcourts.gov](mailto:SsxEmergent.Mailbox@njcourts.gov)  
Union County -- [UnnEmergent.Mailbox@njcourts.gov](mailto:UnnEmergent.Mailbox@njcourts.gov)  
Warren County -- [WrnEmergent.Mailbox@njcourts.gov](mailto:WrnEmergent.Mailbox@njcourts.gov)

## Instructions for Completing the SASPA Intake Form (Form A)

1. Part I of the SASPA Intake form is for the Plaintiff/Victim information. If you are the victim, enter your own information or if you are a parent or guardian enter the minor child's information for the following fields:
  - a. Name
  - b. Social security number
  - c. Date of birth
  - d. Address
  - e. Telephone number
  - f. Cell phone number
  - g. Email Address
  - h. Employer name
  - i. Employer address
  - j. Employer telephone number
  - k. Emergency Contact
  - l. Emergency Contact telephone number
  
2. If you are filing on behalf of a minor child, enter complete the following fields on the second portion of the intake form under Parent/Guardian section.
  - a. Name
  - b. Relation to the child
  - c. Social security number
  - d. Date of birth
  - e. Address
  - f. Telephone number
  - g. Cell phone number
  - h. Email Address
  - i. Employer name
  - j. Employer address
  - k. Employer telephone number

**NOTE:** The Intake Form (FORM A) will be kept confidential and will not be given to the other party/defendant.

## Instructions for Completing a Verified Complaint (Form B)

- A. Leave the *Docket Number* blank. The court will provide this number for you.
- B. On the right side of the form, enter the *County* where you are filing the application.
- C. Enter your name or the minor's name, if you are filing a complaint on the behalf of a minor child, in the space marked "*Plaintiff/Victim*".
- D. If you are filing on behalf of a minor child, enter your name in the space marked "*Plaintiff/Parent/Guardian*".
- E. Enter your date of birth or the minor's date of birth in the space marked "*Plaintiff/Victim's Date of Birth*".
- F. Enter your date of birth if you are filing on behalf of a minor child in the space marked "*Plaintiff/Parent/Guardian Date of Birth*".
- G. On the right side of the form, enter the defendant's description if known in the following fields:
  - a. Defendant's sex
  - b. Defendant's race
  - c. Defendant's date of birth
  - d. Defendant's height
  - e. Defendant's weight
  - f. Defendant's eye color
  - g. Defendant's hair color
  - h. Any distinguishing features that the defendant may have such as scars, tattoos, facial hair etc.
  - i. Defendant's driver's license number and the state it was issued if known.
- H. Enter the Defendant's name in the space marked "*Defendant Information: Name:*".
- I. Enter the Defendant's "*home and cell phone number*", "*work phone number*", "*social security number*" "*e-mail address*" and "*home and work address*" in the appropriately marked spaces on the form.
- J. Enter the date the defendant committed the act in the space marked "*ON (Date)*".
- K. Enter the time the defendant committed the act in the space marked "*AT (Time)*".
- L. Enter the details of the act(s) the defendant committed in the space marked "*BY (Details)*". You can continue to use as many lines as necessary to state the exact details of the act(s) the defendant committed against you or minor child.
- M. Check off the act or acts the defendant committed: "*Sexual Contact, Sexual Penetration, Lewdness*". See definitions of each act in the definitions section of this packet.
- N. Answer "*Yes*" or "*No*" on Question 1 regarding prior or pending court proceedings involving yourself, if

you are the plaintiff/victim, or the minor plaintiff/victim, and the defendant in this complaint. If you select "Yes", enter the title of the case, the docket number and the county and state where the case is being heard.

- O. Answer "Yes" or "No" on Question 2 regarding whether a criminal complaint has been filed in this matter. If you select "Yes", enter the date, docket number and the county and state where the case is being.
- P. The form must have the signature of the party filing the complaint. If you cannot scan a signed copy of this document, please type your name in the signature line.



New Jersey Judiciary  
**Sexual Assault Survivors Protection Act (SASPA)**  
**Intake Form**

To assure accuracy of court records – To be filled out by the Plaintiff or Attorney  
**Confidentiality of this information must be maintained**

Please complete the entire form, leaving no blank spaces. If something does not apply to you, enter "N/A". This form is confidential and will not be shared with the other party.

**I. Victim Information**

Name: Last		First		Middle Initial	
Social Security Number			Date of Birth		
Address: Street		City	State	Zip Code	
Telephone Number			Cell Phone Number		
Email Address					
Employer Name					
Employer Address: Street		City	State	Zip Code	
Employer Telephone Number					
Emergency Contact Name			Emergency Contact Telephone Number		

**II. Parent/Guardian Information**

Name: Last		First		Middle Initial	
Relation to the Child		Social Security Number		Date of Birth	
Address: Street		City	State	Zip Code	
Telephone Number			Cell Phone Number		
Email Address					
Employer Name					
Employer Address: Street		City	State	Zip Code	
Employer Telephone Number					
Emergency Contact Name			Emergency Contact Telephone Number		

**III. Hearing Information**

Will an interpreter be required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, indicate language: _____		
Will an accommodation for a disability be required?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, indicate requested accommodation: _____		

**New Jersey Sexual Assault Survivor Protection Act Complaint** County, Superior Court,

Docket Number <b>FV -</b>		Chancery Division, Family Part	
Plaintiff/Victim		Defendant's Sex	Defendant's Race
Plaintiff/Victim's Date of Birth		Date of Birth	Height
Plaintiff/Parent/Guardian of Minor Plaintiff/Victim			Weight
Plaintiff/Parent/Guardian of Minor Plaintiff/Victim Date of Birth		Eye Color	Hair Color
<b>Defendant Information: Name</b>		Distinguishing Features (Scars, Facial Hair, Etc.)	
Home Phone Number	Work Phone Number	Defendant's Social Security Number	
Cell Phone Number:	Email Address:		
Driver's License Number		State	Driver's License Expiration Date

Home Address

Work Address

The undersigned complains that said defendant did commit the following act(s):

ON (Date)	AT (Time)	BY (Details)

The above constitute(s) the following criminal offenses(s): (Check all applicable boxes – see page 3 of instructions):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sexual Contact           | <input type="checkbox"/> Sexual Penetration           | <input type="checkbox"/> Lewdness           |
| <input type="checkbox"/> Attempted Sexual Contact | <input type="checkbox"/> Attempted Sexual Penetration | <input type="checkbox"/> Attempted Lewdness |

1. Any prior or pending court proceedings involving this plaintiff/victim and defendant? (If Yes, enter docket number, court, county, state)  Yes  No
2. Has a criminal complaint been filed in this matter? (If Yes, enter date, docket number, court, county, state)  Yes  No
- If yes, was a Restraining Order granted?  Yes  No

**Certification by Parent/Guardian**

I, \_\_\_\_\_ am the parent or legal guardian of minor victim, \_\_\_\_\_ and am filing this complaint on their behalf. The minor victim is not present for the following reason(s):

**Certification by Plaintiff/Victim**

I certify that the foregoing responses made by me are true. I am aware that if any of the foregoing responses made by me are willfully false, I am subject to punishment.

\_\_\_\_\_ Date \_\_\_\_\_ Signature





New Jersey Judiciary  
Family Practice Division  
**Additional Information Sheet**

**Full Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

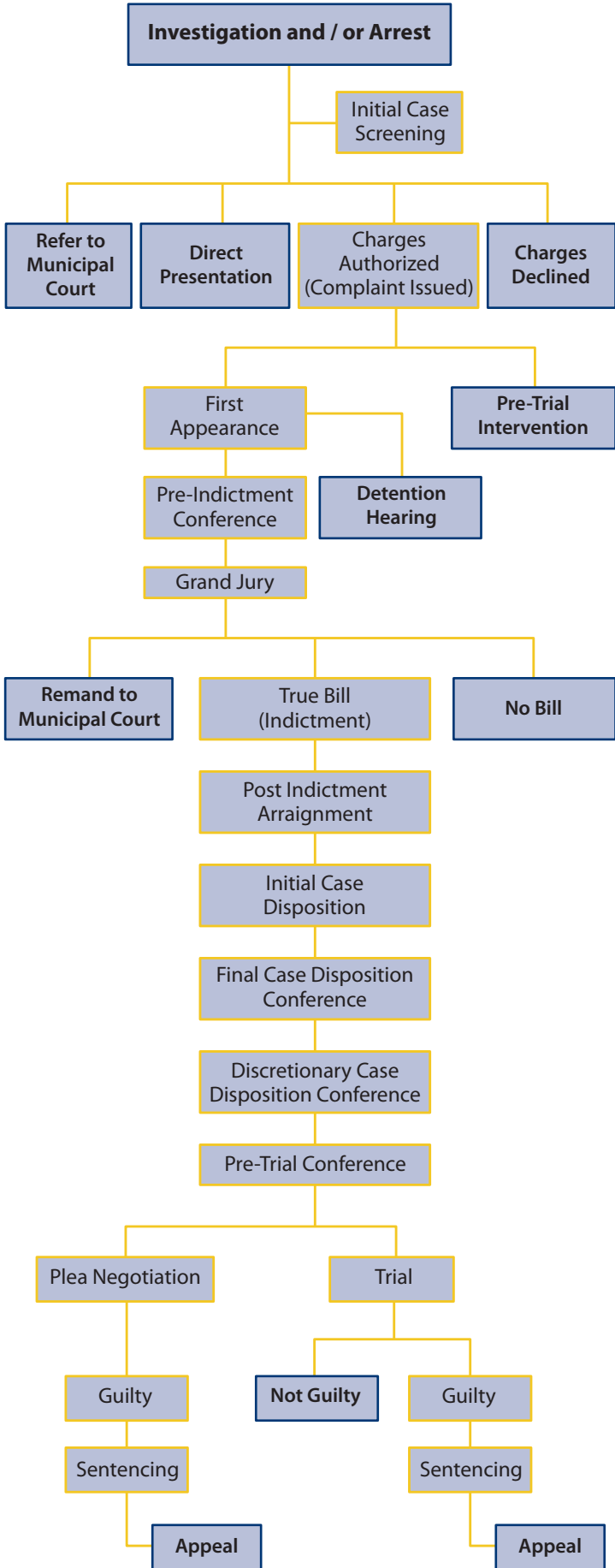
I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment

\_\_\_\_\_  
Date

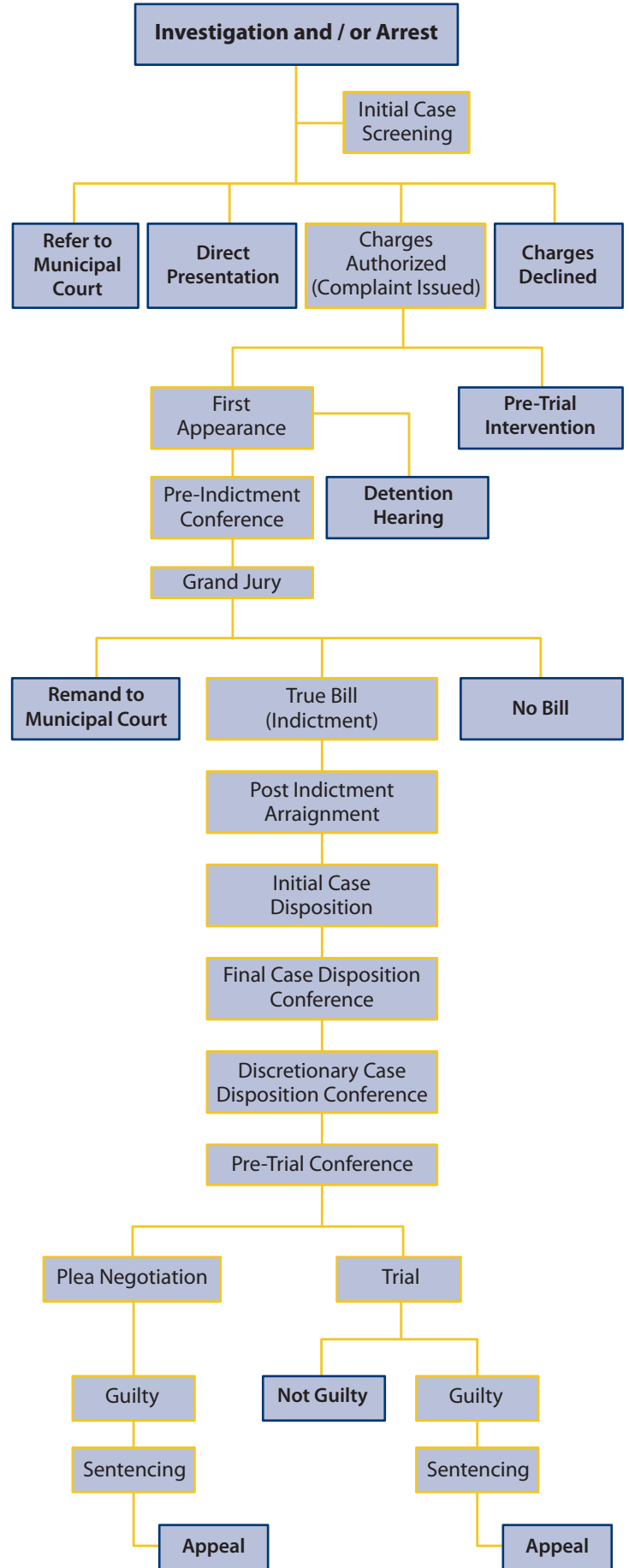
\_\_\_\_\_  
Signature Plaintiff/Counterclaimant



# Criminal Case Process

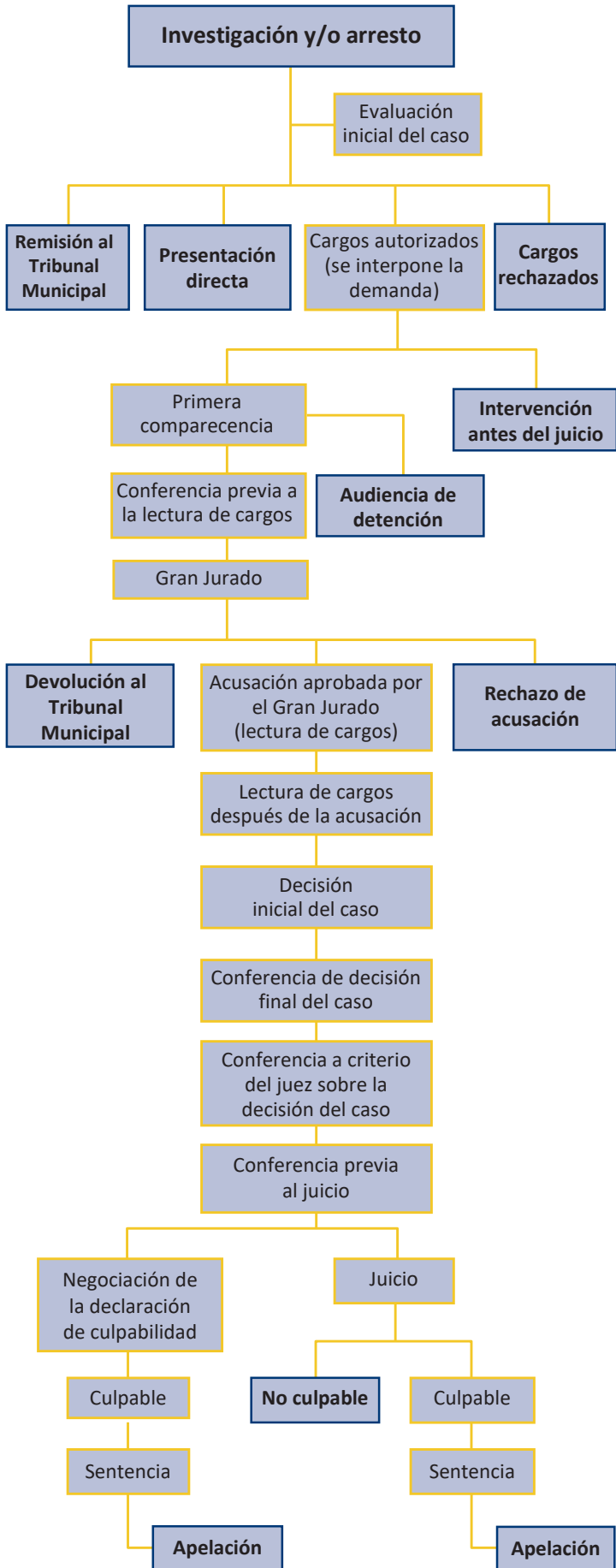


# Criminal Case Process





# Proceso de causas penales





**caring**  
**support**  
**help**  
**dignity**  
**respect**

**NEW JERSEY**  
**VICTIMS OF CRIME**  
**COMPENSATION OFFICE**

*effective.8.1.20*

*We help put the pieces back together*



## our mission

The New Jersey Victims of Crime Compensation Office (VCCO) reimburses certain victims of crime for some of the expenses they suffer as a result of a crime. The VCCO is mindful of the special needs of victims and their right to be treated with fairness, compassion and respect.

## eligible crimes

This is a list of the types of crimes that may qualify. Certain conditions may apply. For more information, please contact the VCCO:

- Assault
- Arson
- Bias crime
- Burglary\*
- Disorderly conduct offenses
- Domestic violence
- Human trafficking
- Indecent acts with children
- Kidnapping
- Lewd, indecent or obscene acts
- Manslaughter
- Motor vehicle offenses
- Murder
- Robbery
- Sexual assault
- Stalking
- Threats to do bodily harm

*\*Must be in structure during burglary.*

*apply online at...*

## conditions

- The crime must have occurred in New Jersey or to a New Jersey resident
- The victim must have reported the crime to police
- The victim should cooperate with the investigation and prosecution of the crime, if reasonable
- The claim must be filed within 5 years of the date of the crime in most cases

[www.njvictims.org](http://www.njvictims.org)  
Toll Free **877-658-2221**

*effective.8.1.20*

## If I qualify, what can the VCCO pay?

Expenses that may be eligible for reimbursement include:

- Hospital, physician and medical expenses
- Mental health counseling expenses up to \$20,000
- Loss of earnings up to \$600 per week
  - Temporary disability, not to exceed 24 months
  - Permanent disability, maximum 60 months
  - Loss of earning for dependants or family members
  - Bereavement, maximum two weeks
  - Loss of wages due to court attendance
- Loss of financial support up to \$600 per week, maximum 48 months
- Funeral expenses maximum \$7,500
- Attorney fees:
  - Victims' rights attorney fees up to \$275 per hour, maximum \$10,000
  - Representation with the VCCO claim up to 15% of award at \$275 per hour
- Relocation expenses up to \$3,000
- Crime scene clean up to \$4,000
- Child care/day care/domestic help services up to \$6,500

### The VCCO is a payer of last resort

- Victims must first utilize and exhaust other resources including State benefits and insurance.

## Frequently Asked Questions

### What is Crime Victims' Compensation?

The Victims of Crime Compensation Office (VCCO) reimburses victims of a crime for some of the expenses they incur as a result of a crime.

### Do all crime victims get paid?

Not always. The law sets forth the types of crimes that can be covered by the VCCO. Further, if victims participated in the crime or contributed to their injuries, they may be denied compensation.

### Who is eligible to file?

- Victims may file their own applications.
- Family members, and dependents of victims or the estate of the victims
- A person who paid for some of the services for the victim
- The guardian, guardian ad litem, estate representative, authorized agent of the victim or the victim's dependents

### Can the VCCO reimburse me directly for expenses?

Yes. Victims or claimants can be reimbursed for some expenses.

### Can I still file a claim if the suspect has not been arrested or if the accused is acquitted at trial?

Yes. Compensation may be made whether or not a person is prosecuted or found guilty.

### Can the VCCO pay providers directly?

Yes. Once a claim is approved, payment can be made directly to providers.

### I have received additional bills that were not considered in my initial award. Can I still submit them?

Yes. Crime related bills can be considered for additional reimbursement after the initial payment award has been made.

## How do I apply?

Complete the online VCCO claim form at [www.njvictims.org](http://www.njvictims.org). Include police reports and any documentation showing financial loss or need if possible. Once an application is received, a claims specialist will contact you.

Applications are also available from any of the 21 County Prosecutors' Offices through their Victim Witness Coordinators.

For more information or for a claim application, please contact us by phone, mail, fax, or visit our web site.

NJ Office of the Attorney General  
Victims of Crime Compensation Office  
50 Park Place, 5th Floor  
Newark, NJ 07102

Hours: 8:00 a.m. to 5:00 p.m.

Walk-in Clients: Please visit our web site, or call our toll free number for details.

Toll Free: 877-658-2221

Phone: 973-648-2107

Fax: 973-648-3937

Web site: [www.njvictims.org](http://www.njvictims.org)



*We help put the pieces back together*

**NJ OFFICE OF THE ATTORNEY GENERAL**  
**VICTIMS OF CRIME COMPENSATION OFFICE**  
[www.njvictims.org](http://www.njvictims.org) • Toll Free 877-658-2221



**cuidado**  
**apoyo**  
**dignidad**  
**ayuda**  
**respeto**

NEW JERSEY

OFICINA DE COMPENSACIÓN  
PARA VÍCTIMAS DEL CRIMEN

vigente.1.8.20

Los ayudamos a normalizar su vida



## nuestra misión

La Oficina de Compensación para Víctimas del Crimen de Nueva Jersey (VCCO) reembolsa a ciertas víctimas del crimen por algunos de los gastos que incurren a causa de un crimen. La VCCO reconoce las necesidades especiales de las víctimas y el derecho que tienen de ser tratadas con justicia, compasión y respeto.

## Crímenes elegibles

Esta es una lista de los tipos de crímenes que pueden calificar. Pueden aplicar ciertas condiciones. Para mayor información, favor contactar a la VCCO:

- Agresión
- Incendio provocado
- Discriminación
- Allanamiento\*
- Ofensas de comportamiento escandaloso
- Violencia Domestica
- Trata de personas
- Actos indecentes con menores
- Secuestro
- Actos lascivos, obscenos o indecentes
- Homicidio Culposo
- Ofensas de vehículos motorizados
- Asesinato
- Robo con violencia
- Agresión Sexual
- Acecho
- Amenazas de lesión corporal

\*Debe encontrarse en el edificio durante la comisión del crimen

aplique en línea en:

## requisitos

- El crimen tiene que haber ocurrido en Nueva Jersey o a un residente de Nueva Jersey
- La víctima debe haber reportado el crimen a la policía
- La víctima debe cooperar con la investigación y el procesamiento del crimen, si es factible
- El reclamo debe ser presentado dentro de un plazo de 5 años de la fecha del crimen en la mayoría de los casos

[www.njvictims.org](http://www.njvictims.org)

Número de llamada gratuita

877-658-2221

vigente.1.8.20

## ¿Si califico, que puede pagar la VCCO?

Gastos que pueden ser elegibles para reembolso incluyen:

- Gastos de Hospital, de médicos y gastos médicos
- Asesoría de Salud Mental gastos de hasta \$20,000
- Pérdida de ingresos de hasta \$600 a la semana
  - Discapacidad Temporal, a no exceder 24 meses
  - Discapacidad Permanente, máximo 60 meses
  - Perdida de ingresos de dependientes o miembros de familia
  - Duelo, máximo dos semanas
  - Perdida de ingresos por asistir al tribunal
- Perdida de apoyo económico de \$600 semanales, máximo 48 meses
- Gastos de funeral hasta \$7,500
- Honorarios de Abogados:
  - Honorarios de abogados de derechos de las victimas hasta \$275 por hora, máximo \$10,000
  - Representación con el reclamo VCCO de hasta el 15% de la compensación en \$275 por hora
- Gastos de Reubicación de hasta \$3,000
- Limpieza lugar del crimen hasta \$4,000
- Cuidado Infantil/Guardería servicios domésticos hasta \$6,500

### La VCCO es pagador de último recurso

- Las victimas primero deberán utilizar y agotar otros recursos incluyendo el seguro y los beneficios del estado.

## Preguntas frecuentes

### ¿Qué es la Compensación para víctimas del crimen?

La Oficina para compensación para víctimas del crimen (VCCO) reembolsa a las víctimas de un crimen por algunos de los gastos que tuvieron como resultado de un crimen.

### ¿Se le paga a todas las victimas del crimen?

No siempre. La ley establece los tipos de crímenes que cubre la VCCO. Además, si las victimas participaron en el crimen o contribuyeron a sus lesiones, se le puede negar la compensación.

### ¿Quién es elegible para solicitar?

- Las victimas pueden presentar sus propias solicitudes.
- Miembros de familia y dependientes de las víctimas o el caudal hereditario de la víctima
- Una persona que haya pagado por algunos de los servicios que recibió la víctima
- El tutor, tutor legal, representante del caudal hereditario, agente autorizado de la víctima o de los dependientes de la víctima

### ¿Puede la VCCO reembolsarme directamente por gastos?

Sí. A las víctimas o reclamantes de les puede reembolsar por algunos gastos.

### ¿Puedo presentar un reclamo si el sospechoso aún no ha sido arrestado o si queda absuelto luego de un juicio?

Sí. La compensación puede otorgarse ya sea que la persona sea enjuiciada o determinada culpable o no.

### ¿La VCCO puede Pagarles directamente a los proveedores de servicios?

Sí. Una vez sea aprobado el reclamo, el pago puede hacerse directamente a los proveedores de servicios.

### He recibido facturas adicionales que no se consideraron en mi otorgamiento inicial.

### ¿Aún puedo presentarlas?

Sí. Se pueden considerar cuentas relacionadas con el crimen para reembolso adicional luego del otorgamiento inicial

## ¿Cómo presento la solicitud?

Llene el formulario VCCO en línea en [www.njvictims.org](http://www.njvictims.org). Incluya informes de la policia y cualquier prueba que muestre pérdidas económicas o necesidad si es posible. Una vez recibamos su solicitud, un especialista en reclamos le atenderá.

También hay solicitudes disponibles en cada una de las 21 Oficinas del Procurador del Condado a través de su Coordinador Victima/Testigo.

Para más información o para pedir una solicitud de reclamo, favor contactarnos por teléfono, correo, fax, o visite nuestro sitio web.

NJ Office of the Attorney General  
Victims of Crime Compensation Office  
50 Park Place, 5th Floor  
Newark, NJ 07102

Horario: 8:00 a.m. a 5:00 p.m.

Atención sin cita: Por favor visite nuestro sitio web, o llame a nuestro número sin cobros para más detalles.

Sin cobros: 877-658-2221

Teléfono: 973-648-2107

Fax: 973-648-3937

Sitio Web: [www.njvictims.org](http://www.njvictims.org)



OFICINA DEL FISCAL GENERAL DE NJ

OFICINA DE COMPENSACIÓN A VÍCTIMAS DEL CRIMEN

[www.njvictims.org](http://www.njvictims.org) • Gratis 877-658-2221

*Los ayudamos a normalizar su vida*

# know your rights as a survivor of sexual violence

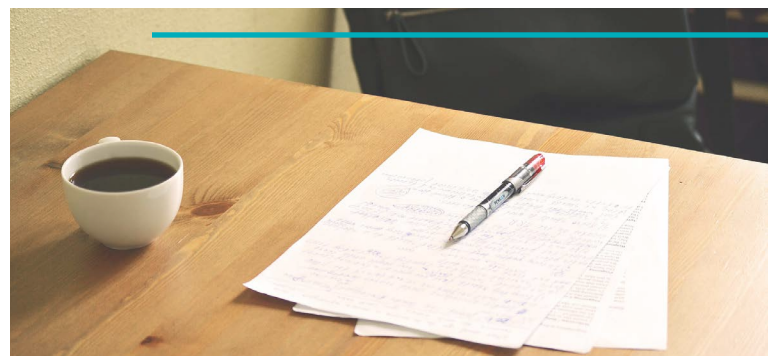


The **Sexual Assault Victim's Bill of Rights** was enacted in 2019 to outline basic protections and fundamental rights for survivors. As a survivor of sexual violence, the time immediately following an assault can seem confusing and overwhelming. Next steps in the aftermath of an assault should be led by the survivor.

**No matter what a survivor chooses to do in the aftermath of an assault, they should know their rights are guaranteed, even if the assault is not reported to law enforcement.** The Sexual Assault Victim's Bill of Rights declares all survivors of sexual violence have the right to be treated with dignity and compassion and the right to be free from blame. The Bill of Rights also affirms that the survivor should be free from any suggestion that they contributed to the risk of being assaulted. *Sexual violence is never the fault of the survivor.*

## SURVIVORS HAVE THE RIGHT TO:

- Choose whether to report to law enforcement.
- Be free from any suggestion that they must report the crime to have their rights guaranteed.
- Be free from any suggestion that victims should refrain from reporting crimes in order to avoid unwanted personal publicity.
- Have their report of sexual assault treated seriously.



## SURVIVORS HAVE THE RIGHT TO BE INFORMED OF AND ACCESS:

- Existing medical, counseling, mental health, or other services available for victims of sexual assault, whether or not the crime is reported to law enforcement.
- Treatment and interviews provided in a language in which the victim is fluent.
- Assistive devices to accommodate disabilities that the victim may have.
- Testing for HIV or any other sexually transmitted infections and assistance with compelling and disclosing the results of testing for a communicable disease from the person who caused harm.



## SURVIVORS HAVE THE RIGHT TO BE INFORMED OF AND ACCESS:

- **Evidence collection and preservation.** Evidence collection is time sensitive and should occur within five days of the assault. Survivors can choose to have evidence collected whether or not they pursue a criminal case. All forensic evidence is retained for a minimum of five years. If the survivor chooses to report to police, either at the time of collection or later, they can request information on the status of the evidence.
- **Financial compensation.** The Victims of Crime Compensation Office (VCCO) offers assistance with accessing compensation for expenses that occurred as a result of an assault, including the cost of mental health counseling, medical bills, relocation, and loss of earnings. Survivors can reach the VCCO at (877) 658-2221 or [www.NJVictims.org](http://www.NJVictims.org).
- **A civil protective order.** Under the Sexual Assault Survivor Protection Act of 2015, survivors can seek a civil protective order against the person who caused them harm if there is risk of further harm.
- **The no-cost services of a Sexual Assault Response Team (SART), if the survivor is over the age of 13.** A SART is comprised of a Confidential Sexual Violence Advocate (CSVA), a Law Enforcement Officer (LEO), and a Forensic Nurse Examiner (FNE).
  - The **CSVA** is a confidential resource who can support the survivor through the SART process. The CSVA provides emotional support and can help the survivor explore their rights, options, and available resources.
  - The **LEO** can provide thorough and objective assistance in responding to and conducting a criminal investigation of sexual assault.
  - If the assault occurred within the last five days, the **FNE** can tend to the medical needs of the survivor and perform a Sexual Assault Forensic Exam (SAFE) Kit to collect forensic evidence. **The survivor can choose to work with one, two, or all three of the SART members.**

The support of a **Confidential Sexual Violence Advocate** is always available, **24 hours a day**. To learn more about survivors' rights and options or to speak with an advocate, contact your **local sexual violence service provider**.

*If you are in immediate danger, call 911.*

New Jersey Coalition Against Sexual Assault  
[www.njcasa.org](http://www.njcasa.org)  
24-hour Statewide Hotline:  
(800) 601-7200



## REFERENCES

<sup>1</sup> Attorney General Standards for Providing Services to Victims of Sexual Assault. (2018, November). Retrieved from <https://www.nj.gov/oag/newsreleases18/AG-SART-Standards.pdf>

<sup>2</sup> N.J. Ct. R. 5:7B. Sexual Assault Victim's Bill of Rights. (n.d.). Retrieved from [https://www.njleg.state.nj.us/2018/Bills/PL19/103\\_.PDF](https://www.njleg.state.nj.us/2018/Bills/PL19/103_.PDF)

© New Jersey Coalition Against Sexual Assault 2020.

The New Jersey Coalition Against Sexual Assault (NJCASA) is the statewide organization representing 21 county-based rape crisis centers and Rutgers University's Office for Violence Prevention and Victim Assistance. NJCASA elevates the voice of survivors and service providers through advocacy, training, and support for efforts to create safer communities for all people.

**njcoalition**  
against sexual assault

## Possible Reactions to Sexual Trauma

**Physical:** Tiredness, exhaustion, headaches, unsteady breathing, increased heartbeat, little desire to do anything, tightness in the chest

**Emotional:** Feelings of hopelessness, guilt, depression, anxiety, irritability, panic attacks, nightmares, poor memory, feeling numb, flash-backs or intrusive memories

**Behavioral:** Increased smoking and/or drinking, over working or missing work, personal neglect, non-stop talking, impulsiveness, changes in eating and/or sleeping patterns, cutting or self-harm

**There are many other possible reactions (or no reaction). There is no right or wrong reaction. Every individual is different.**



## If the Assault Happened in the Past

Many people who have been sexually assaulted in the past did not report it to anyone or sometimes if they did, they weren't believed. There are many reasons why people don't report or seek support. **Please know, it's not too late.**

**You are not alone.**

**We believe you.**

We're here to help provide support through a journey of complex thoughts and feelings.

## The Facts

- Every 98 seconds, someone is sexually assaulted.
- 1 in 5 women have experienced completed or attempted rape in their lifetime.
- 1 in 6 boys are sexually abused before age 16.
- Over 70% of victims know their offender.
- 67.5% of instances of rape are estimated to go unreported.



# SASS

## Sexual Assault Support Services at Zufall Health

Serving Somerset County Since 1988



## Additional Resources

New Jersey Coalition Against Sexual Assault (NJCASA)

1.800.601.7200 NJ State Hotline

[njcasa.org](http://njcasa.org)

National Sexual Violence Resource Center (NSVRC)

[nsvrc.org](http://nsvrc.org)

Rape, Abuse and Incest National Network (RAINN)

1.800.656.HOPE (4673)

[rainn.org](http://rainn.org)

**24-Hour Confidential Hotline 908.526.7444**



[www.zufallhealth.org](http://www.zufallhealth.org)



# 908-526-7444

71 Fourth Street, Somerville, NJ 08876  
24-Hour Confidential Hotline 908.526.7444

## What is Sexual Violence?

**Sexual Violence** is a conduct of sexual nature engaged in without the consent of the other person, or when someone is unable to consent. Sexual violence includes any of the following: sexual assault, domestic abuse, dating violence and stalking.

**Sexual Assault: Any sexual contact without consent is sexual assault.**

Sexual assault can happen through physical force, threats or intimidation or if the attacker gave the victim drugs or alcohol as part of the assault or if the victim is unable to consent because of intoxication, physical, emotional or intellectual disability. It can happen between people of different genders or the same gender.

Sexual assault can take many different forms and be defined in different ways, but one thing remains the same:

**It is never the victim's fault.**

## What is Consent?

**Consent is affirmative.** Consent is an informed and conscious decision by each person to engage in mutually agreed upon sexual activity.

**Consent is voluntary.** Consent means a willing and positive cooperation in an act or expressing a desire to engage in an act. A person can only give their true consent if there is no force, threats or intimidation. Silence does not mean consent.

**Consent is revocable.** Consent to sexual activity on one occasion, does not mean consent has been given to any form of sexual activity on any occasion. A past dating experience or sexual relationship by itself, is not enough to assume consent. Even in the context of a relationship, there always must be mutual consent to engage in any sexual activity at any time. Consent is ongoing: meaning at any point during a sexual encounter consent must be given and can be withdrawn. Once it is withdrawn, the sexual activity must stop immediately.

## Sexual Assault Support Services (SASS)

*"There is no greater agony than bearing an untold story inside you."  
Maya Angelou*

24-hour confidential hotline providing support, information and referral

**908.526.7444**



## Services – Ages 13 and Older

- Crisis intervention, advocacy and accompaniment by trained Confidential Sexual Violence Advocates (CSVA)
- Short and long-term trauma-informed counseling by specially trained, licensed mental health professionals; Spanish speaking counseling available
- Specialized education and prevention programs for schools and community groups. (Ex. healthy relationships, consent, sexual harassment)
- Community outreach and events

**All SASS Services are Free of Charge**

## What Do I Do If I Have Recently Been Sexually Assaulted?

It's hard to know what to do.

**YOU ARE NOT ALONE. YOU ARE NOT AT FAULT.**

The best answer is: **Take care of yourself in the best way for you.**

For some people that means reporting the crime to the police immediately and seeking evidence collection as well as other assistance such as counseling. If the assault has occurred within the last 5 days, you can have a free forensic nurse examination to collect evidence, assess for injury and treat to prevent possible sexually transmitted diseases and/or pregnancy. You can have this exam, or treatment even if you choose not to report to the police. Accompaniment by a trained Confidential Sexual Violence Advocate (CSVA) is available.



For others it means seeking emotional and/or medical care without reporting the assault as a crime.

Some may choose to seek counseling, while others may choose to access emotional support from our hotline. There are no rights or wrongs. It is what works best for **you**.

You can call our hotline at: **908.526.7444** to speak with a trained Confidential Sexual Violence Advocate (CSVA) and get assistance in knowing your options and to make the best decision for you personally.

## Reacciones posibles a un abuso sexual

**Físicas:** cansancio, agotamiento, dolor de cabeza, respiración inestable, ritmo cardíaco acelerado, pocas ganas de hacer cosas, opresión en el pecho

**Emocionales:** sentimientos de desesperanza, culpa, depresión, ansiedad, irritabilidad, ataques de pánico, pesadillas, falta de memoria, sensación de aturdimiento, imágenes retrospectivas o recuerdos invasivos

**Conductuales:** aumento del consumo de tabaco o bebidas alcohólicas, exceso de trabajo o ausentarse de este, negligencia personal, conversación excesiva, impulsividad, cambios en los patrones de alimentación o sueño, autolesiones

**Hay muchas otras reacciones posibles (o ninguna reacción). No hay una reacción correcta o incorrecta. Cada persona es diferente.**



## Si el abuso ocurrió en el pasado

Muchas personas que han sufrido un ataque sexual en el pasado no se lo contaron a nadie o, en algunos casos, sí se lo contaron a alguien, pero no les creyeron. Hay muchos motivos por los cuales las personas no informan los ataques ni buscan apoyo. **Sepa que no es demasiado tarde.**

**No está solo.**

**Le creemos.**

Estamos aquí para brindarle el apoyo necesario durante un proceso de pensamientos y sentimientos complejos.

## Hechos

- Cada 98 segundos una persona es agredida sexualmente.
- 1 de cada 5 mujeres ha sufrido una violación o un intento de violación en el transcurso de su vida.
- 1 de cada 6 jóvenes son abusados sexualmente antes de los 16 años.
- Más del 70 % de las víctimas conocen a sus agresores.
- Se estima que el 67.5 % de los casos de violación no se denuncia.



## Recursos adicionales

Coalición contra el Asalto Sexual de New Jersey (New Jersey Coalition Against Sexual Assault, NJCASA) 1.800.601.7200, línea directa para el estado de New Jersey  
[njcasa.org](http://njcasa.org)

Centro Nacional de Recursos contra la Violencia Sexual (National Sexual Violence Resource Center, NSVRC)  
[nsvrc.org](http://nsvrc.org)

Red Nacional de Violación, Abuso e Incesto (Rape, Abuse and Incest National Network, RAINN) 1.800.656.HOPE (4673)  
[rainn.org](http://rainn.org)

**Línea directa confidencial las 24 horas: 908.526.7444**



[www.zufallhealth.org](http://www.zufallhealth.org)

*La presente (publicación, etc.) fue posible (en parte) por los fondos donados del Centro de asalto sexual, abuso sexual y violación (Sexual Assault, Abuse and Rape Care, SAARC) del estado de Nueva Jersey, administrado por la División de Mujeres del Departamento de Niños y Familias. Las opiniones expresadas en los materiales o publicaciones por escrito no reflejan necesariamente las políticas oficiales del Departamento de Niños y Familias de Nueva Jersey. La mención de nombres, prácticas u organizaciones comerciales tampoco implica el respaldo del estado de Nueva Jersey*

# SASS

## Servicios Asalto Sexual y Soporte en Zufall Health

Al servicio del condado de Somerset desde 1988



# SASS

Servicios Asalto Sexual y Soporte en Zufall Health

EN ZUFALL HEALTH

## 908-526-7444

71 Fourth Street, Somerville, NJ 08876

Línea directa confidencial las 24 horas: 908.526.7444

## ¿Qué es la violencia sexual?

La **violencia sexual** es una conducta de naturaleza sexual que se realiza sin el consentimiento de la otra persona o cuando una persona no puede brindar su consentimiento. La violencia sexual incluye cualquiera de las siguientes situaciones: ataque sexual, abuso doméstico, violencia de pareja o acoso.

**Ataque sexual: cualquier contacto sexual sin consentimiento constituye un ataque sexual.**

Un ataque sexual puede ocurrir mediante el uso de fuerza física, amenazas o intimidación, o si el atacante le suministró drogas o alcohol a la víctima como parte del ataque, o bien, si la víctima no puede brindar su consentimiento debido a una intoxicación o incapacidad física, emocional o intelectual. Puede ocurrir entre personas de sexos diferentes o del mismo sexo.

El ataque sexual puede adoptar muchas formas diferentes y definirse de distintas maneras, pero una cosa sigue siendo igual:

**nunca es culpa de la víctima.**

## ¿Qué es el consentimiento?

**El consentimiento es una respuesta afirmativa.** El consentimiento es la decisión informada y consciente que cada persona toma de participar en una actividad sexual acordada mutuamente.

**El consentimiento es voluntario.** El consentimiento significa una cooperación voluntaria y positiva en un acto o expresar un deseo de participar en un acto. Una persona solo puede brindar su consentimiento verdadero si no se aplican la fuerza, las amenazas o la intimidación. El silencio no significa que haya un consentimiento.

**El consentimiento es revocable.** Consentir una actividad sexual en una ocasión no significa que se ha brindado consentimiento a cualquier forma de actividad sexual en cualquier ocasión. Una experiencia en una cita pasada o relación sexual por sí sola no es suficiente para asumir un consentimiento. Incluso en el contexto de una relación, debe haber siempre un consentimiento mutuo de participar en cualquier actividad sexual en cualquier momento. El consentimiento es continuo: esto significa que en cualquier momento durante el encuentro sexual se debe brindar el consentimiento y este puede retirarse. Una vez que se retira el consentimiento, la actividad sexual debe interrumpirse de inmediato.

## Servicios Asalto Sexual y Soporte (SASS)

**“No existe una agonía mayor que soportar una historia sin contar”.**

*Maya Angelou*

La línea directa confidencial las 24 horas proporciona apoyo, información y derivaciones.

**908.526.7444**



## Servicios: a partir de los 13 años

- Intervención ante una crisis, defensa y acompañamiento por parte de abogados confidenciales capacitados en violencia sexual (Confidential Sexual Violence Advocates, CSVA)
- Asesoramiento informado sobre el trauma a corto y largo plazo por parte de profesionales de salud mental autorizados y especialmente capacitados; asesoramiento disponible en español
- Programas educativos y de prevención especializados para escuelas y grupos comunitarios (p. ej., relaciones saludables, consentimiento, acoso sexual)
- Difusión y eventos comunitarios

**Todos los servicios de SASS son gratuitos**

## ¿Qué hago si recientemente he sufrido un ataque sexual?

Es difícil saber qué hacer.

**NO ESTÁ SOLO. Y NO ES SU CULPA.**

La mejor respuesta es la siguiente: **cuídese a sí mismo al decidir qué es lo mejor para usted.**

Para algunas personas, esto significa denunciar el delito a la policía de inmediato e intentar recopilar evidencia y obtener otro tipo de asistencia, como el asesoramiento. Si el ataque ocurrió dentro de los últimos 5 días, un enfermero forense puede realizarle un examen gratuito para recopilar evidencia, evaluar si presenta lesiones y brindarle un tratamiento a fin de prevenir posibles enfermedades de transmisión sexual o un embarazo. Puede realizarse este examen o tratamiento incluso si decide no denunciar el ataque a la policía. Está disponible el acompañamiento por parte de abogados confidenciales capacitados en violencia sexual (CSVA).



Para otras personas, significa buscar asistencia emocional o médica sin denunciar el ataque como un delito.

Algunas pueden optar por buscar asesoramiento, mientras que otras pueden elegir acceder al apoyo emocional de nuestra línea directa. No hay opciones correctas o incorrectas. Es lo que sea más adecuado para **usted.**

Puede llamar a nuestra línea directa al **908.526.7444** para hablar con un abogado confidencial capacitado en violencia sexual (CSVA) y recibir asistencia para conocer sus opciones y tomar la mejor decisión para usted.

## Counseling Referral and Resources List

*The following list of private therapists is provided as a courtesy and is not meant to endorse any one individual.*

<b>Amy Cavanaugh, PhD</b> Somerset NJ	<b>908-310-8242</b>
<b>Barbara Costlow, LPC</b> Somerville NJ	<b>908-685-0026</b>
<b>Lynne Einhorn, LCSW</b> North Brunswick NJ	<b>973-214-7745</b>
<b>Irene C. Lebbad, LCSW</b> Watchung NJ	<b>908-459-8507</b>
<b>Rachel Modiano, Psy.D</b> Somerset NJ	<b>732-828-4622</b>
<b>Yanela G. Stephenson, LCSW</b> Somerset NJ	<b>732-246-8596</b>
<b>Kimberly Stolow, DSW, LCSW</b> North Brunswick NJ	<b>732-659-0496</b>
<b>Amanda Uhrig, LCSW</b> North Brunswick NJ	<b>908-540-9227</b>

## Victim Resources in Somerset County

<b>Zufall Health Center</b> Sexual Assault Support Services 24 Hour Hotline <a href="http://www.zufallhealth.org">www.zufallhealth.org</a>	<b>908-526-2335 x130</b> <b>908-526-7444</b>
<b>Safe+Sound Somerset</b> (Domestic Abuse Resource) 24-Hr Call or Text Hotline <a href="http://www.safe-sound.org">www.safe-sound.org</a>	<b>908-359-0003</b> <b>866-685-1122</b>
<b>Richard Hall</b> <b>Community Mental Health Center</b> Somerville, NJ	<b>908-725-2800</b>
<b>Family and Community Services</b> <b>of Somerset County</b> Bound Brook, NJ	<b>732-356-1082</b>
<b>Catholic Charities</b> Bridgewater NJ	<b>908-722-1881</b>
<b>Victim Witness Advocacy</b> Somerset County Prosecutor's Office <a href="http://scpo.net">scpo.net</a>	<b>908-575-3359</b>

## Statewide and National Resources

<b>NJ 24-hr Sexual Assault Hotline</b> <a href="http://www.njcasa.org">www.njcasa.org</a>	<b>1-800-601-7200</b>
<b>VCCO</b> <b>Victims of Crime Compensation Office</b> (Provides financial assistance to eligible victims of some crimes) <a href="http://www.njvictims.org">www.njvictims.org</a>	<b>973-648-2107</b>
<b>National Sexual Assault Hotline</b> <a href="http://www.rainn.org">www.rainn.org</a>	<b>800-656-HOPE</b>
<b>National Sexual Violence Resource Center</b> <a href="http://www.nsvrc.org">www.nsvrc.org</a>	

# Information for Victims of Sexual Assault



**Somerset County  
Prosecutor's Office**  
40 North Bridge Street  
P.O. Box 3000  
Somerville, New Jersey  
908-575-3300

Office of Victim Witness Advocacy  
908-575-3359  
Fax: 908-575-3962  
[scpo.net](http://scpo.net)

## What Is Sexual Assault?

The term *sexual assault* encompasses a broad range of unwanted sexual activities, all of which are crimes that have a profound effect on victims. Sexual assault can happen to anyone, regardless of age, racial or cultural background, gender identity/ expression, sexual orientation, or socioeconomic status. Likewise, perpetrators can be anyone: strangers, acquaintances, friends, family members, intimate partners, and other people in positions of trust, such as clergy.

Sex offenders are motivated by the need to control, humiliate, and harm their victims. They may use force, threats, coercion, and manipulation. They may prey on persons who are not free to consent to sexual contact due to mental incapacity, disability, intoxication (voluntary or involuntary), or because the person is under age. Whatever the circumstances, no one asks or deserves to be sexually assaulted.

## If You Are a Victim or Survivor

Understand that you are not to blame. No matter who you are, what you say or do, or where you go you do not deserve to be sexually assaulted. You may feel shocked or angry that it could happen to you.

You may be anxious about your safety. You may feel guilt or shame, or that your family and friends blame you for the assault.

Victims often suffer a variety of physical reactions, from changes in eating and sleeping patterns to nightmares or flashbacks. It is also common to feel powerless. Sexual assault is a violation of a person's sense of safety and trust.

Whatever your reactions or fears, it is important to understand that they are normal. It is also important to know that help is available, whether or not you decide to report the crime.

## What to expect if reported:

- Interview with law enforcement officer.
- Law enforcement may attempt to interview the suspect.
- Suspect may/may not give a statement.
- Law enforcement will continue to investigate.

## Case will be reviewed by an Assistant Prosecutor with the Somerset County Prosecutor's Office

- If charges are authorized, the perpetrator may be arrested and lodged in the county jail. The case will go through the criminal justice process in the Superior Court.
- If charges are not authorized, it does not mean the abuse did not occur. Charges may be declined due to inability to prove beyond a reasonable doubt.
- If a decision regarding charges is delayed, our office may be waiting for lab reports, witness statements, or other reports. Once everything is received, the case will be reviewed by the Assistant Prosecutor.

## Additional Protections Available:

- If criminal charges are **declined** for prosecution, you may still have the ability to obtain a protective order under the "Sexual Assault Survivor Protection Act of 2015" (SASPA). **In order to obtain a SASPA order, you must contact the Somerset County Court Family Division at (908) 332-7700 x 13730.**
- If criminal charges are **authorized**, you may also have the right to obtain a Sex Offense Restraining Order (SORO) against the perpetrator. The Somerset County Prosecutor's Office will assist you in obtaining this order.

Every investigation is unique and there is no set timeline. If you have questions at any time during the investigation process, please contact the Victim Witness Unit of the Somerset County Prosecutor's Office at 908-575-3359.

## Lista de recursos y recomendaciones para servicios de terapia

*Se proporciona una lista de terapeutas privados como cortesía y esta no tiene la finalidad de mostrar preferencia por ningún individuo.*

<b>Amy Cavanaugh, PhD</b> Somerset NJ	<b>908-310-8242</b>
<b>Barbara Costlow, LPC</b> Somerville NJ	<b>908-685-0026</b>
<b>Lynne Einhorn, LCSW</b> North Brunswick NJ	<b>973-214-7745</b>
<b>Irene C. Lebbad, LCSW</b> Watchung NJ	<b>908-459-8507</b>
<b>Rachel Modiano, Psy.D</b> Somerset NJ	<b>732-828-4622</b>
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<b>Kimberly Stolow, DSW, LCSW</b> North Brunswick NJ	<b>732-659-0496</b>
<b>Amanda Uhrig, LCSW</b> North Brunswick NJ	<b>908-540-9227</b>

## Recursos para víctimas en el condado de Somerset

<b>Zufall Health Center</b> Servicios de Apoyo contra la Agresión Sexual Línea directa disponible las 24 horas <a href="http://www.zufallhealth.org">www.zufallhealth.org</a>	<b>908-526-2335 int. 130</b> <b>908-526-7444</b>
<b>Safe+Sound Somerset</b> (Recurso contra el abuso doméstico) Línea directa disponible las 24 horas para llamadas o mensajes de texto <a href="http://www.safe-sound.org">www.safe-sound.org</a>	<b>908-359-0003</b> <b>866-685-1122</b>
<b>Richard Hall</b> <b>Community Mental Health Center</b> Somerville, NJ	<b>908-725-2800</b>
<b>Family and Community Services of Somerset County</b> Bound Brook, NJ	<b>732-356-1082</b>
<b>Catholic Charities</b> Bridgewater NJ	<b>908-722-1881</b>
<b>Oficina de Defensa de Víctimas y Testigos</b> Fiscalía del condado de Somerset <a href="http://scpo.net">scpo.net</a>	<b>908-575-3359</b>

## Recursos estatales y nacionales

<b>Línea directa de NJ contra la agresión sexual disponible las 24 horas</b> <a href="http://www.njcasa.org">www.njcasa.org</a>	<b>1-800-601-7200</b>
<b>VCCO</b> <b>Oficina de Indemnización a Víctimas de Delitos</b> (Proporciona asistencia financiera a víctimas de determinados delitos que cumplan los requisitos estipulados) <a href="http://www.njvictims.org">www.njvictims.org</a>	<b>973-648-2107</b>
<b>Línea directa nacional de asistencia para víctimas de abuso sexual</b> <a href="http://www.rainn.org">www.rainn.org</a>	<b>800-656-HOPE</b>
<b>Centro Nacional de Recursos sobre la Violencia Sexual</b> <a href="http://www.nsvrc.org">www.nsvrc.org</a>	

# Información para víctimas de agresiones sexuales



**Somerset County  
Prosecutor's Office**  
40 North Bridge Street  
P.O. Box 3000  
Somerville, New Jersey  
908-231-7100  
[www.scpo.net](http://www.scpo.net)

Oficina de Defensa de Víctimas  
y Testigos  
908-575-3359  
Fax: 908-575-3962  
[scpo.net](http://scpo.net)



## ¿Qué es la agresión sexual?

El término *agresión sexual* abarca una amplia gama de actividades sexuales no deseadas; todas ellas constituyen delitos que tienen un efecto profundo sobre las víctimas. La agresión sexual le puede suceder a cualquiera, independientemente de la edad, el origen racial o cultural, la identidad/expresión de género, la orientación sexual o el nivel socioeconómico. A su vez, el autor del delito puede ser cualquier persona: extraños, conocidos, amigos, familiares, parejas íntimas y otras personas en puestos de confianza, como el clero.

Los delincuentes sexuales están motivados por la necesidad de controlar, humillar y herir a sus víctimas. Pueden utilizar la fuerza, las amenazas, la coerción y la manipulación. Pueden aprovecharse de personas que no son libres de dar su consentimiento para el contacto sexual porque tienen una incapacidad mental o discapacidad, porque están bajo los efectos de la droga o del alcohol (de forma voluntaria o involuntaria) o porque son menores de edad. Cualquiera sea la circunstancia, nadie pide ser agredido sexualmente ni lo merece.

### **Si usted es víctima o sobreviviente**

Comprenda que usted no tiene la culpa. No importa quién sea usted, lo que diga, lo que haga ni a dónde vaya, no merece sufrir una agresión sexual. Puede sentir sorpresa o enojo por pensar que le podría suceder a usted.

Puede sentir ansiedad con respecto a su seguridad. Puede sentir culpa o vergüenza, o bien sentir que su familia o sus amigos le echan la culpa por la agresión.

Las víctimas, a menudo, sufren una variedad de reacciones físicas, desde cambios en los patrones de alimentación y sueño hasta pesadillas o recuerdos repentinos. También es común sentirse impotente. La agresión sexual es una violación de la sensación de seguridad y confianza de una persona.

Cualesquiera que sean sus reacciones o temores, es importante que comprenda que son normales. También es importante saber que hay ayuda disponible, sin importar si decide informar el delito o no.

### **Qué esperar si lo informa:**

- Tendría una entrevista con un funcionario del orden público.
- Es posible que las fuerzas del orden público intenten entrevistar al sospechoso.
- El sospechoso podría hacer una declaración o no.
- Las fuerzas del orden público continuarán investigando.

### **Un Fiscal Auxiliar de la Fiscalía del condado de Somerset revisará el caso.**

- Si se autorizan los cargos, es posible que se arreste al autor del delito y que este permanezca en la cárcel del condado. El caso pasará por el proceso de justicia penal en el Tribunal Superior.
- Si no se autorizan los cargos, no significa que el abuso no sucedió. Los cargos se podrían rechazar debido a la incapacidad de demostrar un hecho más allá de la duda razonable.
- Si se demora la toma de una decisión con respecto a los cargos, es posible que nuestra oficina esté esperando informes de laboratorio, declaraciones de testigos u otros informes. Cuando se haya recibido todo, el Fiscal Auxiliar revisará el caso.

### **Otras protecciones disponibles:**

- Si se **rechazan** los cargos penales para el procesamiento, aún podría obtener una orden de protección en virtud de la Ley para la Protección de Sobrevivientes de la Agresión Sexual de 2015 (Sexual Assault Survivor Protection Act of 2015, SASPA). **Para obtener una orden en virtud de la ley SASPA, debe comunicarse con la División de Familia del Tribunal del condado de Somerset al (908) 332-7700 int. 13730.**
- Si se **autorizan** los cargos penales, también podría tener el derecho a obtener una orden de restricción por agresión sexual (Sex Offense Restraining Order, SORO) contra el autor del delito. La Fiscalía del condado de Somerset le dará asistencia para obtener esta orden.

Cada investigación es única y no hay cronogramas establecidos. Si tiene preguntas en cualquier momento durante el proceso de investigación, comuníquese con la Unidad de Víctimas y Testigos de la Fiscalía del condado de Somerset llamando al 908-575-3359.