



National Task Force to End Sexual & Domestic Violence

May 13, 2025

The Honorable Robert F. Kennedy, Jr.
Secretary of Health and Human Services
U.S. Department of Health & Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Dear Secretary Kennedy,

We, the member organizations of the National Task Force to End Sexual and Domestic Violence (NTF) Steering Committee, comprising national organizations working to end domestic violence, sexual assault, dating violence, and stalking, and representing thousands of community-based programs and millions of victims and their advocates, are writing to express our grave concern about FY25 and FY26 funding for domestic violence shelters and programs, rape crisis centers, culturally specific programs, supportive resources, and prevention from the U.S. Department of Health and Human Services (HHS). We are particularly concerned about programs and resources administered by the Office on Family Violence Prevention and Services (OFVPS) and the Centers for Disease Control and Prevention (CDC) Injury Center, Division of Violence Prevention. FY25 funding delays, absence of funding opportunities, lack of communication and guidance, severe reductions in force, proposed funding cuts, and proposed program eliminations have led local, state, and national organizations to fear and plan for layoffs and program closures and will lead to severe setbacks in our nation's decades long commitment to address and end domestic violence and sexual assault. These concerns have been widely covered by the media in recent weeks.¹

Office on Family Violence Prevention and Services (OFVPS)

OFVPS has yet to release Notices of Funding Opportunities (NOFOs) that continue the Office's critical work of addressing domestic violence and sexual assault services, resources, and

¹ See for example:

<https://www.npr.org/sections/shots-health-news/2025/02/07/nx-s1-5290088/cdc-funding-delays-rape-crisis-centers>

<https://www.npr.org/2025/04/08/nx-s1-5349529/hhs-layoffs-sexual-assault-rape-prevention>

<https://www.kshb.com/news/local-news/amid-growing-need-kansas-city-domestic-violence-shelter-faces-potential-federal-funding-cuts>

partnerships as laid out in FY24 report language for the Family Violence Prevention and Services Act (FVPSA). The FVPSA program supports lifesaving services, including emergency shelters, crisis hotlines, counseling, and programs for communities throughout the United States and territories. FVPSA is the only federal funding solely dedicated to domestic violence shelters and programs and is the cornerstone of our nation's efforts to address domestic violence. There are approximately 2,000 FVPSA-funded community-based domestic violence programs and over 240 tribes and tribal organizations for victims and their children. Domestic violence programs, including culturally specific programs, use FVPSA funding to keep their lights on and doors open, which is essential for victims in every community, who must have a place to which they can flee when they are escaping life-threatening violence while also keeping the community at-large safe.

Moreover, OFVPS funding and resources for sexual assault programs including culturally specific organizations are essential to addressing the long-term public health implications of sexual assault and child sexual abuse. These funds have been crucial to ensuring all victims receive supportive services, and the commitment to this work at OFVPS must continue. The appropriated investment in domestic violence, culturally specific, and sexual assault programs at OFVPS and opportunities for community leaders to inform program development to meet the needs of their communities remains a top priority for our organizations.

CDC Injury Center Division of Violence Prevention

The Rape Prevention & Education Program (RPE) and Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA) programs at the CDC Division of Violence Prevention are under grave threat. Delays, massive staff cuts, huge proposed funding cuts, and a proposed restructuring imperil RPE and DELTA. Earlier this year, RPE formula grant funds to states were delayed resulting in some programs having to lay off staff. Some states have remained uncertain about subgranting funds due to the federal funding environment leading local programs to worry about the future of their prevention work. The substantial reductions in force (RIFs) issued by HHS on April 1 have interrupted essential functions of rape and domestic violence prevention efforts and threatened decades of a successful public health response to sexual assault and domestic violence. Furthermore, the RPE coalition grants are due to be renewed for the second year of a five-year contract by June 30, but the lack of a FY25 funding plan for CDC places these grants in jeopardy.

In addition, a budget passback document from the Office on Management and Budget (OMB) to HHS dated April 10, 2025 recommended consolidating and cutting the RPE and DELTA programs and moving them to a newly created agency, the Administration for a Healthy America. RPE, a formula grant that goes to State Health Departments in all 50 states, was first authorized by Congress as part of the original Violence Against Women Act in 1994. The program has been reauthorized with increased funding several times, most recently in the Violence Against Women Act of 2022 with an authorization of \$100 million. DELTA is the only federal funding source dedicated to the primary prevention of domestic violence, supporting community and societal-level strategies in 13 states and about 45 communities. In past budgets, domestic and sexual violence efforts, RPE, and DELTA combined were funded at \$107.45 million. This proposal consolidates all of these efforts into one new program funded at \$38 million. As a reminder, RPE alone was funded at \$61.75 million and DELTA at \$7.5 million in

FY24 and FY25. These plans for FY26 leave community programs and state coalitions in grave doubt about their FY25 funding as well.

Protecting and funding RPE and DELTA is not just the right thing to do—it is a strategic move toward a healthier, more prosperous future where fewer communities and individual lives are impacted by violence. Cutting or consolidating these programs will have serious consequences: fewer resources for prevention, higher long-term costs for healthcare and criminal justice, and more communities left without the tools to stop violence before it starts.

Programs at OFVPS and the CDC save lives, but they also save money. Cutting these important programs and the national organizations who support the responsible implementation of appropriated federal funds for these programs will only lead to greater inefficiency.

We urge you to communicate concrete plans for the swift release of FY25 funds appropriated to address the needs of victims of domestic violence and sexual assault and keep our communities safe.

For more information, please contact Terri Poore, National Alliance to End Sexual Violence (NAESV), at terri@endsexualviolence.org or Melina Milazzo, National Network to End Domestic Violence (NNEDV), at mmilazzo@nmedv.org.

Respectfully,

The National Task Force to End Sexual and Domestic Violence