

Prairie Center Against Sexual Assault

Jody Clark, B.S., CADAC, CTP

Prairie Center Against Sexual Assault

- We offer:

- Legal Advocacy

- Medical Advocacy

- Counseling

- Community Education

- Professional Training

- 24-Hour Hotline

No Charge For Services

- We service 11 counties:

- Sangamon, Logan, Christian,
Cass, Morgan, Greene,
Montgomery, Macoupin,
Mason, Menard & Scott

We respond to 2 hospitals:

- Lincoln Memorial, St. John's &
Memorial

Sexual Assault Definitions

- **Acquaintance Rape**
 - Victims know their assailant
- **Date Rape**
 - Assault occurs during date
 - Substance facilitated rape
- **Marital Rape**
 - Sexual violence by the victim's spouse
- **Stranger Rape**
 - Sexual assault by someone unknown to the victim

Basics of Sexual Assault

Sexual Assault is about **Power and Control**.

Examples:

1. Physical Violence
2. Coercion
3. Intimidation
4. Emotional Abuse
5. Minimizing, Denying and Blaming
6. Economic Abuse
7. Isolation
8. Using Male Privilege

Sexual assault is never the victim's fault.

Basics of Sexual Assault continued

- Most sexual violence occurs with “no” witnesses present to corroborate the victim’s recollection of the assault.
- These cases are difficult to prove in a court of law because of “she said – he said” testimony.
- **Vulnerability** and **Availability** are key factors in sexual assault cases.

Basics of Sexual Assault continued

- Sexual assault primarily occurs with **Acquaintances**:
 - Family
 - Friends
 - Co-workers
 - Religious leaders
 - Neighbors
 - Fellow students

Sexual Assault Statistics continued

- **8 out of 10 women** were raped by someone they knew and trusted
- **4 out of every 10 rapes** happen to women and girls between the ages of 16-24
- **2 out of every 10 rapes** are stranger rapes

Sexual Assault Statistics continued

- Only 1 out of every 10 rapes are reported:
 - *Rape is the most under-reported crime.*
 - Our society as a whole finds it difficult to think that someone they know would commit this type of despicable crime.
 - *Stranger rape is more uncommon in our society.*

Sexual Assault Statistics continued

- **1 in 3 girls** will be sexually abused before they reach the age of 18
- **1 in 6 boys** will be sexually abused before they reach the age of 18
- **Male victims** are less likely to report rape than women
- **Most males** were raped by another male, the majority of which were heterosexual
- **Males** often suffer more physical injuries than females, either because weapons are used or multiple offenders are involved

Sexual Assault Statistics continued

- **99%** of perpetrators are men regardless of the gender of the victim
- **20%** of children will be exposed via the Internet to sexually explicit material
- **40%** of sexual assaults occur in the victim's home
- **20%** of sexual assaults occur in the home of a friend, relative or neighbor

Myth: True victims report immediately

FACT:

As with any violent crime, there is no typical victim response: don't know what to do, fear of retaliation, etc.

Myth: Rape is an expression of sexual desire.

FACT:

Rape is a violent expression of the perpetrator's desire for **power** and **control** over his/her victim.

Myths and Misconceptions

Myth: A woman invites sexual assault by the way she dresses.

FACT: The victim is not responsible for the behavior of the perpetrator, regardless of the victim's style of dress or behavior.

Myth: A person's prior consensual sexual relations with the accused implies consent.

FACT: Most sexual assaults are committed by someone known to the victim. A person retains the right to say "no" at any time during any sexual interaction.

Myths and Misconceptions

Sexual Assault Cases

SAFETY of the victim is the top priority.

- ❑ Recommend that the victim get to a “safe” place
- ❑ Recommend that the victim **NOT**:
 1. Change clothes
 2. Take a bath or shower
 3. Brush teeth
 4. Eat
 5. Drink
 6. Smoke
 7. Urinate
 8. Wash or destroy any items involved in the assault

Sexual Assault Cases

Initial Response from officer on duty should consider the following:

- ❑ No sexual assault victim is the same.**
- ❑ Victims often remember “details” of the assault in stages.**
- ❑ Reliving the sexual assault and telling the story over and over again is a very difficult process for the victim.**

Responses to Sexual Assault

- ◆ **Anxiety and Fear**
 - Excessive worry, phobic reactions, and panic attacks
- ◆ **Depression**
 - Crying, helplessness, feelings of guilt and/or worthlessness
 - loss of interest in formerly enjoyable activities, and suicidal thinking or attempts
 - concentration difficulties, sleeping too little or too much, chronic fatigue, lack of activity, and weight gain or loss
- ◆ **Disorientation and Difficulty Concentrating**
- ◆ **Unwanted, Intrusive, and Distressing Memories of the Assault**
 - Flashbacks and reexperiencing physical sensations that occurred during the assault
 - Dreams and nightmares

Responses to Sexual Assault

- ◆ **Physical Activation or “Hyperarousal”**
 - Difficulty falling or staying asleep
 - Hypervigilance and exaggerated startle response
 - irritability, anger, and rage
 - Heart pounding, difficulty breathing, shaking sweating
- ◆ **Anger**
 - Fear often expressed as anger
 - Anger toward the person who harmed her
 - Anger toward other people: herself, police, medical personnel, family members and perhaps the rape crisis counselor

Responses to Sexual Assault

- ◆ **Self-blame, Guilt, and Shame**
- ◆ **Avoidance of Memories and Reminders of the Assault**
- ◆ **Shutting Down or Emotional Numbing**
 - Inability to have loving feelings, enjoy activities, have fun, or feel a range of emotions
- ◆ **Negative Beliefs About Self, Others, and the World**
 - Distrust in people and have misgivings about people in authority
 - Men are dangerous
 - View themselves as different, worthless, and damaged

Responses to Sexual Assault

◆ Interpersonal Effects

- Loss of interest in physical intimacy, social withdrawal, poor communication

◆ Physical Health Symptoms and Problems

- Pain for a wound, pelvic pain, rectal pain or bleeding, stomach pain, or pain during urination
- Stress-related illnesses - headaches, nausea or gastrointestinal problems

◆ Problematic Coping Responses

- Alcohol and/or other drug use
- Social isolation
- Anger and aggressive behavior
- Avoidance - not thinking about the trauma or not seeking treatment

Helper's Initial Response to the Victim

- Respect the victim's space
- Pay attention the victim's mood
- Establish rapport
- Address immediate need(s) first
- Be careful with language
- Provide emotional support
- Educate about Rape Trauma Syndrome

Tips for Helpers

- Be real! People in crisis are very sensitive to others; they will catch you hiding behind a role.
- A victim may need space to vent his/her feelings before calming down and talking.
- Maintain eye contact even if the victim doesn't. The victim will be aware of it.
- Position yourself at the victim's level. (sitting or kneeling) Do not stand over the victim.

Tips for Helpers (cont.)

- Do not do anything that could be perceived as intrusive.
- When discussing the assault, use the same language as the victim.
- Let the victim set the tone of the conversation.
- The victim may use a variety of coping strategies.

Tips for Helpers (cont.)

- Do not answer a question that you are unsure of.
- Do not make any promises that you can not keep.
- Maintain a respectful, non-judgmental attitude toward the victim.
- Be aware of what the victim is saying and what the victim means. They are not always the same.

Tips for Helpers (cont.)

- Take what the victim says, make it simpler and present it back.
- Prioritize together. Help the victim determine what needs to be dealt with first and start with that.
- Present options.
- Don't get into "why" during the crisis intervention. This is more for in-depth counseling.

Disclosure Do's and Don'ts

Because it is often difficult for victims to report an assault, the following guidelines are recommended when a victim discloses an assault.

Disclosure Do's and Don'ts (cont.)

DO:

- Always believe the victim
- Find a private place to talk
- Keep calm and respond to the victim in an understanding, non-judgmental and encouraging way.
- Believe the victim is **NOT** to blame.

Disclosure Do's and Don'ts (cont.)

- Validate the victim's feelings.
- Reassure the victim that they are brave and made the right choice to tell you about the assault.
- Tell the victim that they are not alone and there are people who can help keep them safe.
- Recommend help from a counselor or advocate.
- Help the victim seek medical attention.

Disclosure Do's and Don'ts (cont.)

DON'T:

- Express shock, disgust or anger. The victim may believe these reactions are an expression of how you feel about them.

Disclosures Do's and Don'ts (cont.)

- Pressure the victim to talk about the details of the assault.
- Avoid talking about the assault; this will not help them to forget the assault happened.
- Blame the victim!-IT IS NEVER THE VICTIM'S FAULT!
- Confront the perpetrator; let the police handle the confrontation.

Disclosure Do's and Don'ts (cont.)

- Give advice
- Use judgmental statements
- Tell the victim you understand how they feel.
- Compare the victim with other cases or victims.

WHAT TO DO TO HELP SOMEONE WHO WAS RECENTLY ASSAULTED

- Get the victim to a safe place
- Try not to remove anything from the scene of the crime
- Call 911 and the PCASA hotline (753-8081)

References

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Questions ??

THANK YOU!!