



# Indiana Coalition to **End Sexual Assault**

Engage. Educate. Empower.

## Sexual Assault & Domestic Violence: Beyond Intersections

Understanding the Crucial Differences in Order to  
Provide the Highest Level of Service

Training Designed for Monroe County Domestic Violence  
Coalition

Friday August 18, 2017

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# What do we do?

- Provide communication and a supportive network to sexual assault service providers, survivors, their support systems, etc. throughout Indiana
- Offer comprehensive training
- Provide public education and raise public awareness about sexual assault and primary prevention
- Actively engage with state legislators on public policy affecting survivors of sexual assault and service providers/healthcare professionals
- Promote and advocate for the expansion of sexual assault services
- Assist in building the capacity of community organizations, service providers and other allies to help survivors and their families throughout Indiana
- And so much more!



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# Forms of Sexual Violence

- IC 35-42-4-1 **Rape** (b), a person who knowingly or intentionally has sexual intercourse with another person or knowingly or intentionally causes another person to perform or submit to other sexual conduct
  - (1) the other person is compelled by force or imminent threat of force;
  - (2) the other person is unaware that the sexual intercourse or other sexual conduct is occurring;
  - or
  - (3) the other person is so mentally disabled or deficient that consent to sexual intercourse or other sexual conduct cannot be given

\*As of July 1, 2014



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# Forms of Sexual Violence (continued)

- **Stranger Rape** – Public perception/media – the most “believable”
- **Date Rape/Acquaintance Rape** – 85%+ of rapes occur at the hands of someone the individual knows
- **Multiple Perpetrator (a.k.a. Gang Rape)** – two or more perpetrators act together to sexually assault the same victim
- **Drug Facilitated Rape**
- **Male Rape** – Rape is rape, but there is often this misconception that men cannot be raped or that the rape of males is very rare.



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# Forms of Sexual Violence (continued)

- **Marital/Spousal Rape** – Until 1975, EVERY state had a “marital exemption” that allowed a husband to rape his wife without fear of legal consequences
- In 1977, Indiana limited the Marital Rape Exemption so that it no longer applied to spouses who were living apart or after one spouse filed for divorce  
In 1998, Indiana completely repealed the Marital Rape Exemption in ALL circumstances – Sex crimes that occur between spouses are treated identically to other crimes under Indiana laws today
- 10-14% of ever married or co-habiting women have been raped at least once by their partner (Finkelhor & Yllo, 1985; Russell, 1990)



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# Forms of Sexual Violence (continued)

- Child Sexual Abuse
- Incest
- Human Sex Trafficking
  - Forced participation in pornography or prostitution



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# Definitions

- Sexual Assault
  - Any sexual contact or behavior that occurs without explicit consent of the victim.
- Sexual Coercion
  - Using trickery, manipulation, emotional/physical pressure, or alcohol/drugs to get someone to agree to sexual contact.
- Sexual Harassment
  - Unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature.
- Sexual Violence
  - Umbrella term that includes all of the above + more

❖ NOTE: These definitions are **non-legal**. The legal definitions vary from state to state.



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# Differences between SV and DV

## Sexual Violence

- 85% is committed by someone known to the victim
- Can be and often is a part of DV
- Most often a unique attack

## Domestic Violence

- By definition, an act always committed by someone known to the victim
- Is less often a part of SV
- Most often a *pattern of abuse*



# Services for SA and DV

- Sexual Assault Services
  - Forensic exam
  - Hospital advocacy
  - Accommodations in school (campus)
- BOTH
  - Filing police report
  - Counseling
  - Legal services
  - Court accompaniment
- DV Services
  - Shelter
  - Daycare
  - Applying for public benefits
  - Financial literacy/job training



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# Back Home in Indiana

- 1 out of 5 women have been a victim of rape at some point in their lifetime
- Females in 9<sup>th</sup>-12<sup>th</sup> grades have the 2<sup>nd</sup> highest rate in the nation of forced sexual intercourse
- Of Indiana females in 9<sup>th</sup>-12<sup>th</sup> grades, 17.3% reported forced sexual intercourse\* as compared to the national average of 10.5%
- 5.2% of males in 9<sup>th</sup>-12<sup>th</sup> grade reported forced sexual intercourse\*
- It is estimated that 85% of sexual assaults are NOT being reported to authorities

\*Language being used here is from [2009 CDC YRBS Study](#)



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# Underreporting and False Reporting

- Rape is the most underreported crime; 63% of sexual assaults are not reported to police and only 12% of child sexual abuse is reported to the authorities
- Only 2%-8% of sexual assault reports are false; ***that means 92%-98% of sexual assault reports are true***



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# So why do people not report?

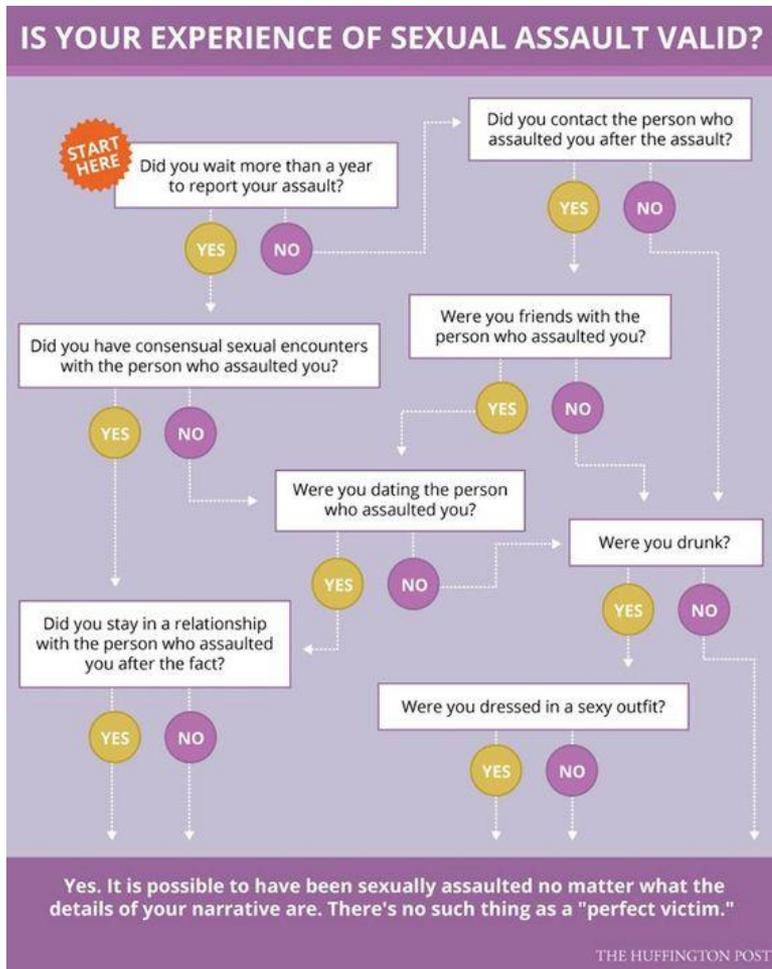
- Victim blaming – holding the victim partly or fully responsible for the crime committed against them
- Common victim blaming statements:
  - She drank too much
  - She provoked him/led him on
  - She was dressed like a slut
  - What did she expect throwing herself at him?
  - She should not have been out at night
  - How could you let that happen?
  - Didn't you have sex with him before?
  - You let him do it!
  - You didn't say "no"
  - You were asking for it



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# So why do people not report?



- Concept of "the perfect victim"
  - Fought back
  - Called the police right away
  - Can recount everything that happened
  - Is calm yet emotional
  - Goes to the hospital to get a forensic exam done right away
  - Has visible injuries on body



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# So why do people not report?

- He said/she said
- Power of perpetrators – perpetrators are usually “everyday people” who are able to manipulate the victim’s trust
  - Perpetrators often hold positions of authority (older siblings, clergy, coaches, police officers, etc.)
  - As the statistics show, perpetrators are not usually deranged strangers jumping out of bushes; they are more likely to be people you know and interact with on a daily basis



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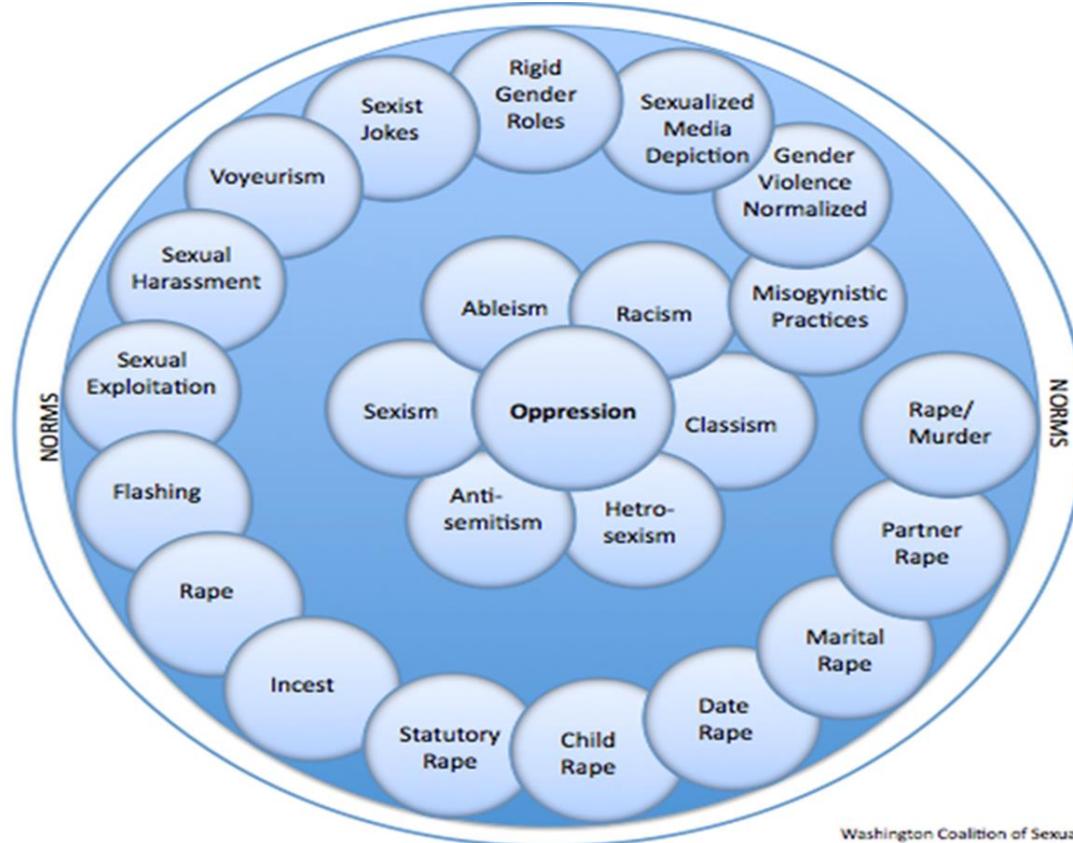
# So why do people not report?



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# Sexual Violence Continuum



Lydia Guy, 2006  
Washington Coalition of Sexual Assault Programs



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# So what do we do about all this?

- Believe victims when they disclose
- Hold perpetrators accountable – even if they are people you know.
- Change the culture!



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# Responding Effectively to Children

- Under Indiana law any individual who has a reason to believe a child is a victim of abuse or neglect has the duty to make a report; therefore, each citizen of Indiana is considered a “mandated reporter.”
- While reporting child abuse is everyone’s responsibility, Indiana law requires some in certain occupations to do so. These professional reporters are staff members in a medical or other public or private institution, school, facility, or agency. These reporters are legally obligated by their profession to report alleged child abuse or neglect.

Indiana Child Abuse and Neglect Hotline

1-800-800-5556



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# Warning Signs in Children

- Physical Signs
  - Pain or bleeding during urination/bowel movements
  - Involuntary urination/defecation
  - Difficulty walking or sitting
  - Torn, bloody, or stained underwear
  - Urinary Tract Infections
  - Pain, itching, or burning in genital area
  - Sexually Transmitted Infection(s)
  - Muscle pain
  - Fatigue



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# Warning Signs in Children

- Emotional
  - Worry
  - Fear
  - Guilt
  - Shame
  - Poor self-esteem
  - Sensitivity
  - Nervousness
  - Irritability
  - Anger
  - Depression



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# Child Abusers and Grooming Tactics

- Abusers often befriend and establish an emotional connection with a child, and sometimes the family, to lower the child's inhibitions and carry out the abuse
- Some common tactics:
  - Identify and target the child
  - Gain trust and access to the child
  - Play a role in the child's life
  - Isolate the child
  - Create secrecy around the relationship
  - Initiate sexual contact
  - Control the relationship



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# What to do when a child discloses...

- **Remain calm and nonjudgmental.** When children disclose, they can often be retraumatized by others' reactions. The majority of children do not disclose right away.
- **Believe** the child and praise them for being brave and sharing the sexual abuse with you.
- **Reassure** the child that they are not to blame for what has happened.
- **Protect** the child by getting them away from the abuser and calling and reporting the abuse to the police.
- **Get help.** Seek medical attention to address any physical injury that may have occurred as a result of the abuse (including STIs). Your child's emotional health must also be a priority and seeking mental health therapy by a professional who specializes in child sexual abuse is highly recommended.
- **Inform** your child of the next steps as they pertain to legal action, court proceedings, etc. The more you are able to prepare you child, the more they will feel in control, empowered, and less anxious.
- **Do not make promises you can't keep** (such as saying you won't tell anyone about the abuse), but let your child know that you will do everything in your power to protect them from harm.



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# Responding Effectively to Adults

- There aren't such clear cut warning signs and you legally do not have a responsibility to report to anyone.



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# DO's and DON'T's

- DO listen carefully to what is shared with you
- DO assure your friend that you believe them
- DO assist your friend in getting the help needed and wanted
- DO say that rape is never the victim's fault, if your friend feels guilty
- DO tell your friend that going along with the rapist does not mean giving the rapist permission
- DO tell your friend they did everything right
- DO tell your friend "Whatever you are feeling is okay"
- DON'T press for details
- DON'T be a vigilante
- DON'T make subsequent decisions for your friend
- DON'T ask if there was anything done to "lead the rapist on"
- DON'T ask why he or she didn't scream or run
- DON'T say what you would have done
- DON'T say "I know how you are feeling" unless you've also been victimized in the past



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# If they want to report, there are *options*...

- First and foremost, make sure your friend is in a safe place.
- **Call the police.** By filing a police report, your friend will be creating a formal, legal record of the crime that was committed against them. However, if the police are called to the scene, your friend is under no obligation to file a formal report.
- **Call a sexual assault service provider.** They will be able to assist your friend and answer any questions they may have about their options. Your friend may speak with an advocate anonymously to receive information.
- **Call National Sexual Assault Hotline at 800-656-HOPE (4673).** Even though this call is free and anonymous, it may appear on your friend's phone bill. If you think that the person you assaulted your friend may check their bill, have them call from your phone or a public phone instead.



# More Options

- **Receive medical attention.** Your friend may not think medical care is necessary if they don't have any visible injuries, but it's important that they receive care for possible internal injuries, sexually transmitted infections, or pregnancy. By going to the hospital, they can also receive a medical forensic exam (a rape kit) which will aid in the collection and preservation of physical evidence as a result of the assault. Important Note: Your friend can consent to a medical examination and the collection of evidence and still withhold consent to release the evidence to the police. If your friend later decides to file a police report and participate in the prosecution of their assailant, they can give their consent at that time to release evidence to the police.



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# Available Resources

- Middle Way House  
Phone: (812) 333-7404  
**Hotline: (812) 336-0846**
  - 24-hour on-call/on-site advocates at hospital
    - IU Bloomington
    - Monroe Hospital
  - Legal advocacy
  - Information/referral
  - Systems coordination/collaboration/case management
  - Community awareness/outreach
  - Support groups



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Questions?