An analysis of sexual assault agencies and how the workers effectively help the survivors through the criminal justice system and their healing journey

Approved: Cheryl Banachowski-Fuller

Date: August 12th, 2014
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Seminar Research Paper

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Summer 2014
Criminal Justice Graduate Program
Abstract

Statement of the Problem

“Sexual assault is not about sex or pleasure to a rapist, it’s a crime of violence where sex is used as a weapon, motivated by the desire to have power and control over the victim” (RAIN, 2009). More than 60 percent of sexual assaults were not reported to the police in 5 years according to the National Crime Victimization Survey: 2008-2012. Those offenders, of course, will never spend a day in prison. But even when the crime is reported, it is not likely to lead to an arrest and prosecution. Factoring in unreported rapes, only about 3% of rapists will ever serve a day in prison. One problem is that victims are afraid to report to law enforcement for a number of reasons. According to the article titled, “Reporting Sexual Victimization to the Police and Others: Results from a National Level Study of College Women”, the analysis revealed that although few incidents are reported to the police and/or to campus authorities, a high proportion are disclosed to someone else (mainly to friends). Incidents were more likely to be reported to the police when they had characteristics that made them more “believable” (e.g., presence of a weapon or assailant who was a stranger). The use of alcohol and/or drugs by offenders and/or victims had a unique effect, causing students to be more likely to disclose their victimization to friends but not to campus authorities. The specific research problem is that many rapes go unreported and discuss how different components such as advocacy, therapy and prevention education at Sexual Assault Service programs can help the survivor through the process and for them to feel more supported.
Purpose

The purpose of this paper is to acknowledge that survivors who seek services from their local sexual assault agency receive help in the areas they might be afraid to venture, such as reporting their assault to law enforcement or getting medical attention. I plan to argue that without sexual assault agencies, communities would not be getting the proper education/advocacy on what to do after an assault occurs or primary prevention measures. I also plan to show the effectiveness of community awareness through literature studies already done. I would also like to show how an advocate can properly and effectively work with law enforcement and the county/district attorney’s office to ensure the rights of the survivors throughout the criminal justice process.

Many survivors do not have enough support in going through a difficult process after a sexual assault. The significance of this paper is to show how effective sexual assault agency workers are in supporting survivors as well as providing them with their options. The effects of sexual assault survivors are significant such as Post Traumatic Stress Disorder, substance abuse, self-harm, depression, sexually transmitted diseases, pregnancy, flashbacks, eating disorders, body memories, dissociative identity disorder, suicide, etc (RAIN, 2009). In fact, victims of sexual assault are three times more likely to suffer from depression, six times more likely to suffer from PTSD and twenty-six more times to abuse drugs than non-victims. One cannot face these of these effects themselves, therefore it is very important for a survivor to seek help from a professional. It is very important for a survivor to have as many support systems as he or she can as well.
Significance or Implications of the Study

Many survivors do not have enough support in going through a difficult process after a sexual assault. The significance of this paper is to show how effective sexual assault agency workers are in supporting survivors as well as providing them with their options. The effects of sexual assault survivors are significant such as Post Traumatic Stress Disorder, substance abuse, self-harm, depression, sexually transmitted diseases, pregnancy, flashbacks, eating disorders, body memories, dissociative identity disorder, suicide, etc (RAIN, 2009). In fact, victims of sexual assault are three times more likely to suffer from depression, six times more likely to suffer from PTSD and twenty-six more times to abuse drugs than non-victims. One cannot face these of these effects themselves, therefore it is very important for a survivor to seek help from a professional. It is very important for a survivor to have as many support systems as he or she can as well.

Methods of Approach

Information for this research paper will be based on secondary resources. These sources will include those from the fields of law enforcement and social work. These sources will come from accredited journals, scholarly articles, National Victimization Survey and Bureau of Justice Statistics. I will also reference different Sexual Assault Coalitions and agencies to explore the services that they provide to sexual assault survivors.

Contribution to the Field
This paper will show law enforcement officers, county/district attorneys, hospital personnel, and family members of sexual assault victims how effective sexual assault center workers can be in minimizing the trauma felt by survivors while going through the criminal justice system and rape kit process at the hospital as well as their own healing journey. My hope of this research is to find ways in improving the low numbers of sexual assaults reported to law enforcement and provide a tool in which law explains how law enforcement should and shouldn’t do when it comes to helping or interviewing sexual assault survivors.

Throughout this paper there will be many statistics of how sexual assault can lead to many other problems in a victim’s life. Below is a diagram of an abuse wheel. The abuse wheel shows the different problems that can arise when someone is abused. You will see examples of these throughout this research paper.
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Section I: Introduction

History

The Civil Rights Movement provided a model of how to organize, publicize and articulate a political agenda. It gave women hope that a group of common goal can challenge injustice and institutional violence and obtain equal rights. In 1971 the first rape crisis centers began and by the end of the 1970’s there were at least one in every state. These organizations were all grass roots and had no centers or buildings. The organizations were ran by predominately survivors and volunteers. There was no funding and no board of directors, the organization ran on consensus decision making. The first Take Back the Night was in 1978 in San Francisco, California where 5,000 women came from thirty states. Take Back the Night is an international event and non-profit organization with the mission of ending sexual violence in all forms. Hundreds of events are held in over 30 countries annually. Events often include marches, rallies and vigils intended as a protest and direct action against rape and other forms of sexual violence.

Rape culture is an environment in which rape and sexual violence is prevalent, normalized, and excused in popular media and culture. The discussion of rape culture goes beyond the crime of rape, though, and the focus shifts to examining a culture that promotes sexual violence. Rape culture is extremely common in today’s society, and you do not have to look far to see examples of rape culture all around us every day.
Rape culture is the fact that every two minutes, someone in the United States is sexually assaulted, resulting in about 207,754 victims of sexual assault each year in a culture that promotes sexual assault through popular media and culture. Rape culture is the accepted belief that rape only occurs at the hands of strangers in alleyways and bushes on the side of the road when 73% of sexual assaults are committed by a non-stranger and 4 in 10 assaults take place in the victim’s home.

Rape culture is victim blaming. It is the accepted idea that a woman who was sexually assaulted was “asking for it” when she was sexually assaulted. It is telling a woman that her clothing, makeup, eye contact, shoes, jewelry, or road she took home that night was to blame for her sexual assault. Rape culture is telling women that they must stop drinking alcohol in order to end sexual assault. It is teaching individuals don’t get raped, rather than teaching individuals don’t rape.

Rape culture is the idea that sexual violence and sexual coercion is so normalized in society that people believe rape is inevitable. It is the idea that a song that demeans women and promotes sexual assault with lyrics like, “I know you want it” is the top-selling single of 2013 with over 1.36 million copies sold to date. It is the idea that women are just sexual objects, displayed with over-sexualized images made for sexual pleasure (Illinois coalition against sexual assault, 2010).

A rape culture is one in which rape is prevalent and pervasive, and is sanctioned and maintained through fundamental attitudes and beliefs about gender, sexuality and violence. Traditional gender roles are enforced, which polarize the sexes and offer prescriptions for what is viewed as masculine and feminine. Domination of men over property (women viewed as property) and wealth has been supported by the state going back to classical Greece and Rome.
The media reinforces gender stereotypes, glamorizes aggression, power and control and defines masculinity as dominance, aggression and lack of emotion. Women are portrayed as money-hungry and manipulative, using men for their money and all the while cheating on their partner. Hostility and contempt for women can be found in all forms of media and the media defines women’s sexuality.

Rape crisis work does not rely on a traditional medical-model approach that assumes the victim is “sick and needs to be cured”. Rape crisis work uses a victim-centered, feminist approach that assumes that, with support and information, the victim can direct his/her own recovery. The worker tries to help the victim regain the control that was wrestled away from them by their rapist. The victim is allowed to determine their own needs and not be told what they need by the worker. A victim is given information and a host of options so that she can make his/her own decisions about how they want to deal with the assault. This includes, but is not limited to, whether to tell and who to tell, whether to call the police or seek medical attention, even the decision whether or not to seek services from a rape crisis center. A victim is encouraged to make their own choices and the worker supports the victim’s decisions, even when the worker has concerns about the decisions the victim makes or disagrees with them.

Sexual violence occurs on a continuum across many contexts such as home, family, church, military, workplace, etc. Power imbalances are typical among perpetrators and victims. Imbalances of power may be based on physical ability or perceived weakness, level of authority and access to resources. Although there are differences among victims based on individual characteristics and factors surrounding their specific incidents, victims experience the common reactions of loss of control, fear and humiliation.
Myths & Facts

There are several myths that our society still believes in association with sexual assaults. The first myth is that only, young attractive women or women who engage in risky activities are raped. The fact is that no woman is free from the threat of rape. Any woman can be raped regardless of the size, shape, age or conformity to the American standard of beauty. Women are not raped because they put themselves in a dangerous situation, or wear certain clothes, follow a particular lifestyle, or look a particular way. Women are raped because men choose to exercise their power and control over women.

Another myth is that men rape women because they are overly aroused sexually or have been sexually deprived. The fact is that most men who rape have available sexual partners. Men rape women to exert control and confirm power. Motives for rape often include hostility against women, the desire to feel and exert power and control, the desire to humiliate and degrade, and in some cases, the desire to inflict pain.

The next myth is that rapes are committed by strangers at night in dark alleys. The fact is that most women are raped most commonly in their own homes. Most rapes are committed by someone the woman knows, at any time of the day or night. Research tells us that in approximately three out of four rapes, the women know the perpetrator as husbands, boyfriends, partners, family, friends or other acquaintances. Another myth is that most rapes are committed by black men raping white women. The fact is that men who rape come from all races, all ethnicities, and all social classes. Recent studies conclude that men usually rape women from their own race, ethnicity, and social class.
The next myth is that men who rape are psychologically deranged individuals. The fact is that men who rape are mostly ordinary, everyday guys. The vast majority of rapists are indistinguishable from your friends. Some may even be your friends. The major difference between men who rape and men who don’t is their attitudes towards women. Men who rape typically view women with contempt and sometimes deep hostility. They look at their victims as less than equal. Another myth is that acquaintance rapes are not as serious as stranger rapes. Acquaintance rape is as serious as rape by a stranger. Women who are raped by someone they know usually experience a similar degree of trauma to those raped by a stranger. Sexual assault laws make no distinction between rape by a stranger and rape by someone the victim knows.

The next myth is that women provoke rape by the way they dress or flirt. The fact is that there is no correlation between who is raped and the clothes they are wearing or flirtatious behavior. A man may justify rape by pointing to the woman’s behavior, but this is an excuse and not a reason. It is cruel irony in our society that we encourage women to be sexually attractive and seductive but if they are raped, they are blamed for the other person’s violent act. Another myth is that victims recant their stories of rape because it didn’t really happen. The fact of this myth is that a victim may retract her story about rape because there may be little or not support from family, friends or community. Once reported she may be harassed and intimidated by the rapists friends, her family, her community and society at large. Negotiating with the police and criminal justice system can be difficult and traumatic. The next myth is that men cannot be raped. The fact is that men can and are sexually assaulted. And another myth is that women do not rape, women raping men is rare, but not unknown. Most of these types of acts occur in an authoritative rape, such as female teacher and male student.
The next myth is that if a woman has been sexually assaulted there will be physical, medical and emotional evidence to support it. The fact is that the absence of physical evidence does not negate the victim’s claim of being sexually assaulted. Some sexual assaults leave little or no evidence to corroborate the victim’s story. Additionally, some victims do not report their abuse immediately; therefore, time and daily hygiene routines may destroy physical/medical evidence of the assault. Emotional responses vary among victims of sexual assault. Some victims may exhibit no noticeable signs. It is important to believe a victim when she/he discloses sexual assault regardless of whether they appear traumatized. No single behavior is indicative of being sexually assaulted. A sexual assault experience may differ from one individual to another, as well as from one experience to another for the same individual.

The next myth is that prostituted women cannot be raped because she’s selling it. The fact is that prostituted women have long been considered “fair game” for sexual harassment, rape, gang rape, robbery and beatings. For women who are prostituted, rape is every bit as traumatic as it is for other survivors of sexual assault. It often re-opens old wounds and buried memories of unbearable abuse. The last myth to share within this paper is that a women with a disability who is raped is not harmed because she doesn’t have feelings. Having a disability is not the same as having no sexual feelings. Women with disabilities are at a greater risk of being sexually assaulted because the abuser knows that she won’t be believed. Women with disabilities may be more vulnerable, some defenseless, therefore making it easier to take advantage of. The abuser is most often someone she depends on for her daily needs. Women with disabilities who are sexually assaulted experience the same emotional pain as other women of sexual assault.
When advocates are working with law enforcement on a constant basis it is very important to explain the rape myths and facts that our society still believes and that some law enforcement still believe as well. By explaining to them the real facts by doing law enforcement trainings it teaches them how to be more sensitive to some of the reasons as to why some victims may not want to report at all or why it took them longer to report to law enforcement.

Section II: Literature Review

Advocates Role

Advocates are trained professionals who assist and/or advocate for victims of crime in determining the best options in the aftermath of a crime, whether or not the victim goes through the civil or criminal justice system. Advocacy may include but is not limited to:

• Court accompaniment

• Making victim notification

• Assistance with preparing victim impact statements

• Providing information about the criminal justice system

• Assisting with Victims of Crime Compensation Forms

• Explaining to survivors of crime their rights

• Notifying crime victims of hearing dates and updating them on the status of their case

• Making referrals to appropriate community resources
Serving as a liaison between victims of crime, law enforcement, the prosecuting attorney’s office, the criminal justice system and community resources, Crime victims, community service providers and the criminal justice system expect every Sexual Assault Advocate, paid or volunteer to act with integrity, to treat all victims and survivors of crime, their clients, with dignity and compassion, and to uphold principles of justice for the accused and accuser alike. To these ends, this Code will govern the conduct of Victim Assistance Providers should recognize the interests of the client as a primary responsibility. Advocates should respect and protect the client’s civil and legal rights. They should also respect the client’s rights to privacy and confidentiality, subject only to laws or regulations requiring disclosure of information to appropriate other sources. Advocates should respond compassionately to each client with personalized services. Advocates should accept the client’s statement of events as it is told, withholding opinion or judgment, whether or not a suspected offender has been identified, arrested, convicted, or acquitted. Advocates provide services to every client without attributing blame, no matter what the client’s conduct was at the time of the victimization or at another stage of the client’s life. They should also foster maximum self-determination on the part of the client. Advocates should serve as a victim advocate when requested and, in that capacity, act on behalf of the client’s stated needs without regard to personal convictions and within the rules of the advocate’s host agency. Advocates should one client’s needs conflict with another’s, act with regard to one client only after promptly referring the other to another qualified Victim Assistance Provider. They also need to observe the ethical imperative to have no sexual relations with clients, current or past, in recognition that to do so risks exploitation of the knowledge and trust derived from the professional relationship. Advocates need to make client referrals to other resources or services only in the client’s best interest, avoiding any conflict of interest in the
process. Finally, Advocates need to provide opportunities for colleague Victim Assistance Providers to seek appropriate services when traumatized by a criminal event or a client (Ohio Family Violence Prevention Center, 2014).

The following chart shows the differences and similarities between the civil and criminal justice system and the roles of victims in each:

<table>
<thead>
<tr>
<th>How the Civil Justice System Differs from the Criminal Justice System—A Comparison in Iowa</th>
<th>Criminal Justice System</th>
<th>Civil Justice System</th>
</tr>
</thead>
<tbody>
<tr>
<td>How is the crime defined?</td>
<td>A violation against the State</td>
<td>A violation against an individual</td>
</tr>
<tr>
<td>Who maintains the crime?</td>
<td>The State of Iowa prosecutes and controls the action.</td>
<td>The victim maintains and controls the action.</td>
</tr>
<tr>
<td>What is the victim's role?</td>
<td>The victim is a witness to a crime against the State. While a registered victim has the right to be informed about any plea agreement, often decisions regarding plea agreements are based on factors that have little to do with the victim.</td>
<td>The victim, with the advice of an attorney, makes the decisions. The victim is a party to the action and is entitled to all information relating to the case and can make the decision with respect to any settlement of the claim.</td>
</tr>
<tr>
<td>Will you need to hire a lawyer?</td>
<td>No. The County Attorney prosecutes handles the case for the state. Victims may wish to consult with their own attorney regarding issues of privacy and victim rights.</td>
<td>Yes.</td>
</tr>
<tr>
<td>What is the burden of proof?</td>
<td>The State must prove the perpetrator is guilty beyond a reasonable doubt.</td>
<td>The victim need only prove that the perpetrator is liable by a preponderance of evidence</td>
</tr>
<tr>
<td>Can the perpetrator be compelled to testify under oath?</td>
<td>No. The State of Iowa cannot compel the perpetrator to testify and cannot comment upon the fact that the perpetrator</td>
<td>Yes, the victim can compel the perpetrator to testify under oath both before and during the trial. Although the perpetrator may assert</td>
</tr>
</tbody>
</table>
refused to testify. The factfinder is not to consider the failure to testify against the defendant. the right against self incrimination, the victim’s attorney can comment on this assertion and the fact finder can draw conclusions from the failure to testify.

<table>
<thead>
<tr>
<th>What assumptions will the court make?</th>
<th>Perpetrator is presumed innocent until proven guilty.</th>
<th>Victim and perpetrator appear on equal footing.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can I try again?</td>
<td>If the perpetrator is found &quot;not guilty&quot;, the State can not prosecute him a second time and the State cannot appeal the decision.</td>
<td>Victim can sue the perpetrator in a civil court regardless of the result of a criminal court.</td>
</tr>
</tbody>
</table>

(Civil Justice vs. Criminal Justice, 2014).

Of the research focusing on victims’ perceptions of the police, early research suggested that victims had primarily negative perceptions of law enforcement (Koenig, 1980; Williams & Holmes, 1981). Today, rape victims are more likely to report their victimization to the police than they were in the past (Clay-Warner & Burt, 2005), and the public, including victims, tends to hold favorable attitudes towards the police (Frazier & Haney, 1996; Petresino & Brensilber, 2004; Tewksbury & West, 2001).

While some research uncovered positive perceptions towards the police, and the fact that past research found that offense type influences victims’ attitudes towards the police (Poister & McDavid, 1978), in terms of sexual assault some empirical evidence suggested the possibility of negative perceptions towards the police. These attitudes may influence victims’ decisions to involve the police. “Sexual assault victims fear the loss of privacy in coming forward to report the crime” (Office for Victims of Crime, 1998, p. 22). Much of the concern in the area of the law enforcement response to sexual assault centered on victim blaming and police concerns about credibility (Lonsway, 1996).
When sexual assault cases are handled criminally, law enforcement officers should interact with a number of different officials. Among those involved in this response are sexual assault crisis workers (as well as health care professionals, victim-witness advocates, counselors, mental health workers, and so on). In this context, the label ‘sexual assault crisis workers’ refers to victim advocates who work in non-profit agency that are not attached to any part of the criminal justice system. They are distinguished from victim-witness advocates (ie: employees of the criminal justice system who help victims as long as the victim is willing to serve as a witness in a criminal case). Members of each of these groups have specified roles. The role of sexual assault crisis workers usually entails working for victims to protect their interests. Alternatively, the involvement of law enforcement officers in these cases entails determining (a) if there is probable cause that a crime was committed and (b) if probable cause suggests that the accused was the offender. Not all victims will want to involve the criminal justice system in their cases. While some victims want the offender to be prosecuted others may avoid prosecution because of a fear of negative consequences that may result from a sexual assault prosecution. Any barriers to the successful prosecution of the case will potentially create negative perceptions about the legal system. One possible barrier arises in collaborations between law enforcement and crisis workers: while the roles of the two groups are not completely disparate, they are not necessarily compatible. The possibility of disorder occurs if one group has negative perceptions about the other group.

This study examined how sexual assault crisis workers defined their collaborations with law enforcement officers. Attention was also given to the possible consequences of those perceptions. As an illustration, a survey of 91 police officers found that just over half of them defined rape with ‘definitions that mixed old legal definitions with some victim blaming views’
(Campbell & Johnson, 1997, p. 255). One officer, for instance, offered the following definition of rape: “Sometimes a guy can’t stop himself. He gets egged on by the girl. Rape must involve force and that’s really rare” (p. 270). According to some, the source of victim blaming in sexual assault cases is tied to traditional perceptions about women’s roles (Saunders & Size, 1986). Consider intoxication as an illustration. Traditional roles suggest that women should not drink excessively. Intoxicated sexual assault victims are often blamed for their victimization. One officer told Campbell and Johnson (1997, p. 70) that rape was ‘men taking what women really want at that moment but decide they didn’t the next morning when they sober up’. Surveys of 212 police officers revealed that the officers viewed intoxicated sexual assault victims ‘more negatively’ than those who had not consumed as much alcohol (Schuller & Stewart, 2000). Perhaps not surprisingly, other studies report that intoxicated victims are less likely to report to the police because they do not think they will be believed (Fisher, Daigle, Cullen, & Turner, 2003).

In a study done by B.K Payne & R. Thompson in 2008 titled, “Sexual assault crisis center workers’ perceptions of law enforcement defining the situation from a systems perspective” used a study method to see how sexual assault crisis workers perceived law enforcement, 44 sexual assault crisis workers were asked to complete a survey instrument assessing various issues related to their response to sexual assault. Initially, one of the authors attended a statewide meeting attended by 26 sexual assault crisis center workers. Respondents were told that the researchers were conducting a study for the Virginia Department of Health and that the study was examining the Commonwealth’s response to sexual assault. Several weeks later, a research assistant attended a statewide conference held for sexual assault victim advocates. At that conference 18 additional workers agreed to complete the survey. They were also told that the
study was being conducted for the Virginia Department of Health. Respondents were not paid for their participation. The sampling strategy, a convenience sample, had both strengths and weaknesses. A major strength of this strategy was that access was provided to individuals who had a great deal of insight about the response to sexual assault, and because the respondents were ‘active’ in participating in various forums related to sexual assault, they were willing to provide their opinions. A limitation is that the advocates included in this study may not represent other advocates. On a related point, while the meeting and conference from which participants were drawn were statewide in nature, it is possible that certain regions of the state are not represented. Despite these limitations, as an exploratory study the sample provided insight into an area that warranted attention (Payne et al, 2008).

In reporting the findings, patterns reported are those appearing among at least five of the respondents. Due to the exploratory nature of the research, the specific ‘n’ for each pattern is not reported because doing so would deflect from the underlying importance of each theme (Berg, 2005). That is, the findings are not the numbers, but the themes that are consistent. General problems they noted when trying to collaborate with law enforcement included the following:

- isolating the advocates
- evidentiary questions
- suspicious of victims
- ignoring acquaintance rape/victim blaming
- unaware of issues related to sexual violence
- lack of clear policies

Another study that was researched for this paper was one that targeted ungraduated college women by B. Fisher titled “Barriers to Reporting Sexual Victimization: Prevalence and
Correlates Among Undergraduate Women”. College women represent an important population for research and intervention efforts in this area, as they fall within the highest age-related risk group for sexual assault: 18 to 34 years old (Kilpatrick et al., 1992). A national survey of college women estimated that approximately one fifth to one quarter of women will experience a completed or attempted rape during their college careers (Fisher, Cullen, & Turner, 2000). Some data suggest that women are at highest risk for sexual assault during their first year of college (Humphrey & White, 2000), although findings in the literature regarding specific high-risk time frames remain mixed (Flack et al., 2008). Underreporting of sexual assault incidents represents a major barrier to the prosecution of sexual assault cases, the apprehension of sexual perpetrators, and the ability to connect victims with needed resources. Less than half of sexual crimes are reported to law enforcement (Greenfield, 1997; Rennison & Rand, 2002). Reporting rates are significantly lower among college women, with one national survey estimating that only 2% of sexual assaults among this population are reported to the police (Fisher, Daigle, Cullen, & Turner, 2003). Low reporting rates diminish the ability of the criminal justice system to act as a deterrent, inhibit the apprehension of offenders, and limit victims’ access to health, social, and legal services. To increase reporting rates it is important to understand the barriers to reporting sexual assault incidents.

Some initial research has investigated factors associated with reporting sexual assaults to law enforcement. The most frequently cited barriers to reporting among college women include shame and guilt, fear of not being believed, concerns about confidentiality, not acknowledging the assault as a crime, and not wanting police involvement (Sable, Danis, Mauzy, & Gallagher, 2006; Thompson, Sitterle, Clay, & Kingree, 2007). However, only one study reported the importance of these factors among women who have actually experienced a sexual assault
(Thompson et al., 2007), and no research has examined barriers such as handling the incident in other ways or fears of ending the relationship with the perpetrator. Moreover, no studies have determined whether these barriers can be encompassed under a few dimensions, such as shame, fear, or acknowledgment.

This study used a total of 719 full-time, first-year female students at a southeastern university participated in the study. Data were collected over the course of six weeks at the end of the respondents’ first year as college students. Slightly over half (54%) of eligible women ($n = 1,339$) participated in the study. Data from the Office of Institutional Research indicated that the sample did not differ from the population of first-year females on race or sorority status. However, $t$ tests indicated that the sample had a significantly higher grade point average at the end of their fall semester than did the population as a whole. Of the 719 students surveyed, 127 women (18%) had experienced a sexual victimization incident since beginning the school year. Of these women, 108 (85%) admitted that they did not report the incident to the police and were therefore included in this study. The majority of the women selected for this study were White (81%), with the remaining being Black (16%) and other (3%). The average age was 18.5 years old. Women were recruited into the study by three different means: (a) sending an e-mail message to all first-year women inviting them to the student health center to complete an anonymous survey on women’s health, (b) posting flyers around campus inviting participation in the study at the health center, and (c) setting up a data collection site outside of the library and the campus bookstore. The study was approved by the university’s institutional review board. Informed consent was obtained prior to completing the survey. Participants were informed that the survey was anonymous, that it should take approximately 30 minutes to complete, and that they would receive a $15 gift card for their time. Participants placed completed surveys in a
locked box, were given their incentive, signed their names verifying receipt of payment, and were provided with a list of counseling referral options.

Participants were asked several questions about the sexual victimization incident. If they experienced multiple incidents since attending college, they were asked to focus on the most serious one. A victimization severity variable was created based on the scoring procedures recommended by the developers of the SES (Koss et al., 1987). Experiences were grouped into four levels of severity, including unwanted sexual contact, intercourse that was verbally coerced or coerced through the perpetrator’s position of authority, attempted forcible rape, and completed forcible rape. Items also assessed relationship to the perpetrator (romantic partners, acquaintances, and relatives were dummy coded, with strangers used as the reference group), whether the victim had been using alcohol or drugs, and whether the victim had been physically injured. Finally, race or ethnicity was assessed and coded as White (0) or non-White (1).

If participants met criteria for sexual victimization on the SES, they were asked if the incident was reported to the police. Participants were asked to indicate whether any of the following were reasons that they did not report: (a) I thought that I wouldn’t be believed; (b) I thought that the incident would be viewed as my fault; (c) I didn’t think police could do anything; (d) I was scared of offender; (e) I thought that it was not serious enough, not a crime; (f) I felt shame or embarrassment; (g) I didn’t want anyone to know; (h) I didn’t want involvement with police or courts; (i) I didn’t want him arrested, jailed, deported, stressed out; (j) I handled it myself; (k) I didn’t want relationship to end; and (l) I reported it to someone else. These reasons were adapted from the National Violence Against Women Survey (Tjaden & Thoennes, 2000).

This study had three aims: (a) to examine the frequency of 12 barriers to reporting sexual assault incidents to the police among sexually victimized undergraduate women, (b) to determine
whether these barriers could be categorized on specific dimensions, and (c) to investigate the contributions of victim characteristics, incident characteristics, and trauma-related cognitions to reasons for not reporting the sexual victimization incidents. Similar to prior studies, failure to acknowledge the assault as a crime, shame, confidentiality concerns, and fear of police involvement were among the most frequently cited barriers to reporting the incident. The most frequent reason for not reporting, “I handled it myself,” was a reason that had not been assessed in previous studies. This reason for not reporting was identified by the majority of sexually assaulted respondents and was subsumed under the same factor as failure to identify the incident as serious or a crime. These findings suggest that lack of acknowledgment and the decision to handle the incident without formal assistance are associated and represent significant impediments to reporting sexual assaults among college women. Future research is necessary to determine exactly what sources of assistance might be sought by victims who report that they “handled it” themselves, whether informal support sources support or discourage women from acknowledging or reporting the incident, and whether relying on other types of support ultimately benefits or harms the victims (Zinzow et al, 2011).

From each of these literature reviews mentioned above, the common theme seems to be that victims feel as though law enforcement officials will not believe them which can lead to a higher percentage of non-reporting the sex crime that was committed. There will be recommendations on how advocates can effectively work with law enforcement towards the end of this paper.

**Section III: Framework**

**Theory**
Rape can be used as a form of contemporary social control. Rape and fear of rape keep women from sharing the world equally with men. Women’s activities are restricted such as going out at night, going out alone, camping alone, going to a bar alone, freedom to dress as one chooses, and being in an all-male environment. Girls are warned at a very young age about keeping safe and self-defense classes are recommended. Women are also encouraged to take action to protect themselves from rape such as dressing conservatively, not to go out with someone they don’t know, avoid drinking excessively, not to stay out late, beware of dangerous areas, to not flirt, etc. Social controls are also reinforced by society through rape myths.

To most effectively provide services to victims of sexual assault and hold perpetrators accountable, members of the community must share a common understanding of sexual assault. Although there are many different contexts in which sexual assault occurs—and thus a variety of causes and complicating factors—it is possible to discuss overall trends in the theories that have been advanced to explain why men rape. The psychopathology model long dominated approaches to sexual assault. Under this model, rapists were mentally ill or chemically imbalanced individuals who sexually assaulted because they could not control their sexual impulses. Rape and rapists were thought to be relatively rare. Based on the view that rape was a product of illness, the treatment model adopted was medically oriented and included such approaches as castration, psychotherapy, electric shock, and hormone injections.

In the United States, such psychopathology models began to be challenged in the 1970s, as feminists and other activists began advocating for increased awareness about issues of sexual assault. Activists began to challenge the notion that rapists were mentally ill or chemically imbalanced. As awareness increased, women began to establish crisis centers and hotlines for
victims of sexual assault. These activists found not only that the prevalence of rape and sexual assault was far higher than had been believed, but also that the perpetrators of rape were not mentally ill, and were often people known by the victim.

Although the psychopathology model was eventually abandoned, the belief that rape is a result of irresistible sexual impulses continues to dominate thinking about sexual assault. Under this view, men rape because they cannot control their sexual desires. According to this myth, because men have difficulty controlling themselves, it is women's responsibility avoid "provoking" a rape—they must avoid dressing provocatively or acting in a promiscuous manner. This myth contributes significantly to the "true" and "false" rape dichotomy, according to which there are some (a few) women who are "truly" raped, but many more "false" rapes, situations in which the victim actually "provoked" the assault by failing to take steps to avoid arousing the perpetrator's uncontrollable sexual desire. In part, the "irresistible impulse" myth about sexual assault is connected to understandings of gender roles. Sexual aggressiveness in men is viewed as both natural and admirable. As a result, behaviors that force or coerce sexual contact are often characterized as something men cannot "help," or dismissed with the phrase, "boys will be boys."

Feminists and activists began to draw these connections between sexual assault and patriarchy. In her 1975 book, Against Our Will, Susan Brownmiller argued that rape is a tool of intimidation used by men to control and ensure the subordinate status of women. These theories eventually coalesced into the current understanding of sexual assault—namely, that rape and other forms of sexual assault are acts of violence, not acts of sexual desire. Rape is an act of violence which uses sex as a weapon. Rape is motivated by aggression and by the desire to exert power and humiliate. Just as wife battering had to be taken out of the privacy of the home and
criminalized in order to effect any change, rape must be taken out of the sexual realm and placed where it rightfully belongs in the domain of violence against women. Although sexual desire is sometimes relevant to issues of sexual assault, perpetrators are motivated by a desire for power and domination. "Like other forms of torture, it is often meant to hurt, control and humiliate, violating a person's innermost physical and mental integrity" (The Advocates, 2010).

All men can play a vital role in stopping sexual violence by challenging rape supporting attitudes and behaviors and raising awareness about the damaging impact of sexual violence. Every time a man's voice joins those of women in speaking out against rape, the world becomes safer for us all. Advice for men to start the movement of ending violence against women is to approach gender violence as a men’s issue involving men of all ages and socioeconomic, racial and ethnic backgrounds (Health Education, 2014).

Men can be empowered bystanders who confront abusive peers. If a brother, friend, classmate, or teammate is abusing his female partner -- or is disrespectful or abusive to women in general -- don't look the other way. If you feel comfortable doing so, try to talk to him about it. Urge him to seek help. If you don't know what to do, consult a friend, a parent, a professor, or a counselor. Don’t remain silent. Have the courage to look inward. Question your own attitudes. The reality is that we all have to go through a process of unlearning sexism. Try not to be defensive when something you do or say ends up hurting someone else. Try hard to understand how your own attitudes and actions might inadvertently perpetuate sexism and violence, and work toward changing them. If you suspect that a woman close to you is being abused or has been sexually assaulted, gently ask if you can help. Be an ally to women who are working to end all forms of gender violence. Support the work of campus-based women's centers. Attend "Take
Back the Night" rallies and other public events. Raise money for community-based rape crisis centers and battered women's shelters. If you belong to a team, fraternity or another student group, organize a fundraiser (Health Education, 2014).

Recognize and speak out against homophobia and gay-bashing. Discrimination and violence against lesbians and gays are wrong in and of themselves. This abuse also has direct links to sexism. For example, the sexual orientation of men who speak out against sexism is often questioned; a conscious or unconscious strategy intended to silence them. This is a key reason why so few men speak out. Learn as much as you can. Listen to survivors' stories. Attend programs, take courses, and watch films, and read articles and books about multicultural masculinities, gender inequality, and the root causes of gender violence. Educate yourself and others about how larger social forces affect the conflicts between individual men and women. Don't fund sexism. Refuse to purchase any magazine, rent any video, subscribe to any web site, or buy any music that portrays girls or women in a sexually degrading or abusive manner. Protest sexism in the media. Mentor and teach young boys about how to be men in ways that don't involve degrading or abusing girls and women. Volunteer to work with gender violence prevention programs, including anti-sexist men's programs. Lead by example (Health Education, 2014).

Section IV: Recommendations

Research and experience tells us that we must provide all victims of sexual violence (as well as their loved ones) with as much support as possible. Typically, the best way to do this is to provide advocacy services as early and as often as needed throughout the criminal justice process. This is often the only way that victims will be able to draw together the emotional
resources they need to participate in the investigation and prosecution of their sexual assault. We have all seen how difficult this process can be for victims, especially given the attitudes of doubt and blame that are seen in our society when it comes to sexual assault. This is why at least one expert has described the process of advocating for victims within the criminal justice system as holding their hand on a walk through hell. Clearly, we believe that best practice is to notify an advocate any time a forensic examination or preliminary investigation is going to be conducted with a victim of sexual assault. This means that law enforcement agencies and forensic exam facilities must have written policies documenting their responsibility to notify victim advocates as soon as possible and specifying exactly how this will be done. If this type of written policy is not yet in place in your community, this may be the most important place to begin working.

It is important to recognize the differences in personality and philosophy and strive to emphasize the shared values that underlie the work of all the community professionals who respond to sexual assault. These include an action orientation and a common mission of seeking justice when someone in the community has been wronged. It is often helpful to remind ourselves and others of these commonalities, to help forge trust and respect and to guide the resolution of any disagreements that will inevitably arise.

As the New York State Coalition Against Sexual Assault (NYSCASA) Legal Advocate Manual recommends, any strategies for conflict resolution can involving conveying “the problems from the survivor’s point of view” (Chapter 3, p. 56): “You should always stress your positive intentions which will benefit the immediate survivor as well as keep the door open for future survivors rather than denouncing or discrediting the detective or agency. You can become more comfortable with questioning, negotiating, and even confrontation as you build your
advocacy skills and knowledge of systems. As the advocate, you are seeking accountability and justice from critical actors in significant social and legal systems. This need not come from a place of hostility, disrespect, or distrust. You can re-frame the situation so that it becomes an ethical identification of problems or injustices” (NYSCASA, Chapter 3, pp. 56-7).

Second, the issue of any past conflicts must be addressed head-on. Wherever possible, the conflict must be analyzed not only by the professional disciplines that were involved but also by others who may have important insight into what went wrong, why, and how to fix it. In many cases, the solution is training – particularly cross-training between the professional disciplines that were involved in the conflict. For example, if a conflict arose as a result of a misunderstanding or misinformation, it is critical that the professionals involved clearly understand the roles and boundaries of the other disciplines. This will include recognition of those points where their professional objectives overlap, and when they do not.

One common concern of criminal justice professionals is the belief that community-based advocates will try to talk victims out of reporting the sexual assault or participating in the process of the investigation and prosecution. In some cases, this issue can be addressed by having community-based advocates explain their role as assisting victims in making their own decisions, by providing them with the information they need and supporting them in whatever decision they make – even when the advocate personally disagrees with it. As a result, they will not always agree with each other, but they will hopefully understand and respect that this is because of the differences in their professional roles and not a personal disagreement. However, we also need to recognize that in some communities, community-based victim advocates might actually believe that the local law enforcement agencies will NOT respond appropriately. As a result, the
information that they provide to victims may serve to discourage them from reporting or participating in the investigation. In this case, the Sexual Assault Response and Resource Team should be working collaboratively so that all the involved agencies can be provided with the resources and training to do their job effectively. It does not serve the interests of victims to respond to problems by trying to “work around” one of the core disciplines involved in the criminal justice and community response system.

When discussing concerns that advocates talk victims out of reporting, or withhold important information, the underlying sense among many criminal justice professionals is that advocates aren’t really part of the same “team.” Yet reviewing the history of SARTs can be helpful in this regard. For example, the name alone – Sexual Assault Response TEAM, – leads many criminal justice professionals to believe that if all the members are on the same team, they must all have the same goals. There is a part of this sentiment that is clearly true, but another part is not quite right. On the one hand, almost all of us who are professionals involved in this work can agree that we need to provide effective victim services in order to hold offenders accountable. On the other hand, our professional missions are not exactly the same across disciplines – and in fact they can sometimes be in direct conflict with each other.

To address this particular conflict over the longer-term, advocates and other members of the SART might therefore consider to ask individual victims to write down their account of the sexual assault, either to help them prepare for the law enforcement interview or to provide information in an alternative form if the interview is unsuccessful and/or conducted as an interrogation. Advocates can also provide training to law enforcement and other community professionals involved in sexual assault response on the realistic dynamics of sexual assault, and
challenging the misconception that false reporting is common. Advocates can invite law enforcement professionals to provide training for advocates on the purpose and specific steps involved in an investigation. In some cases, the conflict may actually be the result of a misunderstanding on the part of the advocate. If not, the training may provide the opportunity for dialogue about the nature of the conflict and ways to resolve it in future cases, including a clear explanation of the role of victim advocates and law enforcement investigators. Advocates can regularly schedule formal or informal meetings to discuss specific cases, or hosting meetings any time there is a change in the agency’s staff or administration. This will help to maintain ongoing relationships and ensure continuity in the community response system. They can contact a trusted person within the law enforcement agency whenever questions arise regarding the criminal justice process or an advocate’s response. This type of consultation can help to build trust, and it communicates that their input is valued. If there are concerns regarding the confidentiality of discussing a particular case, the question can often be presented as a hypothetical scenario (NYSCASA Legal Advocate Manual). Advocates can survey victims regarding their experiences with all of the various professionals in the community who responded to their sexual assault and provided them with services. This information can be used to help all of the professionals within the community to respond more effectively to sexual assault cases and victims.

Advocates can establish a structure for ongoing communication and problem-solving among community professionals, such as a Sexual Assault Response and Resource Team (SARRT). This type of structure provides a forum not only for resolving conflicts, but also increasing the level of mutual understanding and respect that are necessary to be successful. It
may also involve coordinated effort to undertake a particular project that will help in some specific way to address the source of conflict within the community.

Advocates can work to develop interagency agreements and community-wide protocols, spelling out the roles and responsibilities of the various professionals involved in responding to sexual assault. Advocates should clearly outline the responsibility of law enforcement professionals to withhold judgment until a thorough investigation has been completed. By articulating this standard of care, it provides the basis for providing training to personnel within the law enforcement agency and holding the agency accountable for fulfilling this responsibility.

Advocates need to advocate for a delay in the comprehensive interview of many victims of sexual assault after the initial disclosure and community response, so they can rest, recuperate, and get support from their friends and family members. Of course, this requires balancing a number of other factors, but whenever possible it can help victims to provide better information and participate in a more productive way during the law enforcement interview. Advocates can gather local data on the realistic dynamics of sexual assault, to compare to known patterns from larger-scale national studies. This type of local data can be invaluable for use in both professional training and community education programs on what sexual assault really looks like and to challenge the myth that false reporting is common. Advocates also need to remain patient, optimistic, and tireless in the pursuit of positive reform. Often these conflicts are not addressed with a single effort, but with persistent work over time. Sometimes it requires a change of agency administration or other aspects of the political climate, as long as the conflict isn’t simply pushed aside in the hopes that such a positive change in the landscape of community agencies will be seen.
Lastly, advocates need to provide positive reinforcement and recognition whenever possible. Advocates can help encourage positive reform in this context by sending thank you notes, or notes of commendation for investigators and officers that conduct a competent and compassionate victim interview, or even for positive aspects of an interview that might not have otherwise been exemplary. Successful interviewers can also be recognized by the agency in any number of informal and/or formal ways, including letters, awards, recognition events, and even small tokens of appreciation (e.g., a mug with agency logo). Anytime such recognition is provided for a community professional, it is also a good idea to send a copy to that person’s supervisor or chief to ensure that others in their chain of command know that they are doing a good job in this area.

Assuming that all of the professionals involved in responding to sexual assault cases want to see more perpetrators held accountable for their crimes, it is clear that we can’t respond to problems with one of the disciplines or agencies involved in our community response systems by excluding them. How can we expect to achieve justice for victims, if advocates try to “work around” law enforcement? How can we expect victims to have the support they need to participate in the law enforcement investigation if officers “don’t allow” advocates to become involved in the process? Ultimately it isn’t fair to victims to let our personal and professional challenges get in the way of meeting their needs – for justice AND healing. Clearly, we will only achieve the goal of holding more perpetrators accountable for their crimes if we can: (1) Work together so the criminal justice system functions effectively; and (2) Ensure that advocacy services are available for every victim, in every case, every time those services are wanted (SANESART.org, 2014).
“We must not, in trying to think about how we can make a big difference, ignore the small daily differences we can make which, over time, add up to big differences that we often cannot foresee.” Marian Wright Edelman

References:


