

Community Health Issues in Oconomowoc: Focus on Sexual Assault among Adolescents

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Foreword

The Robert M. La Follette School of Public Affairs at the University of Wisconsin-Madison is pleased to be able to apply part of its efforts to improving health in Wisconsin communities. Each year, in one of its graduate courses, the La Follette School randomly selects several communities from around the state and conducts research to identify important health issues and to work with community leaders to design ways of addressing those issues.

The Wisconsin legislature established the Robert M. La Follette School of Public Affairs in 1984 with a multifaceted mission—to engage in instruction, research, and outreach. The La Follette School fulfills this mission by offering a master's degree in public policy; by encouraging scholarly research on numerous issues that have public policy implications; and by offering numerous enrichment and training opportunities to policy makers at all levels of government.

The School's Center for State, Local and Tribal Governance has contributed to that commitment by establishing an annual program geared toward assisting Wisconsin communities in addressing community health issues. The program is the centerpiece of the Skornicka Seminars at the La Follette School, initiated with support from Joel Skornicka to improve local governance in the state. Joel Skornicka is a former mayor of Madison and assistant to UW chancellors.

The format of these seminars is that students at the La Follette School enroll in a course that provides them with an opportunity to conduct field research and to learn facilitation skills in community development. The students in the course form teams, and each team focuses on a specific community. Students complete an analysis and present it in a case study, like the one that follows. Then community leaders meet to discuss the findings of the case study and to formulate a way of resolving issues raised in the analysis. The La Follette School is happy to assist in any way it can with the implementation of plans designed at these meetings.

Initially, the focus of these seminars was on the issue of gangs and youth violence. We treated this concern as a health and safety issue. We have broadened the scope of the seminar this year to include other community health issues. This expansion is not because gangs and youth violence are no longer matters of concern, but rather to recognize that communities face a variety of health issues. We want to be responsive to the needs and priorities of the people of Wisconsin.

On behalf of the students, faculty and staff at La Follette, I would like to acknowledge and thank the many individuals who have made these studies possible. We appreciate the time and the information that you have contributed. Our hope is that you find our work useful in enhancing the health of the people in our state.

Dennis Dresang
Professor of Political Science and Public Affairs
Director, Center for State, Local and Tribal Governance
Robert M. La Follette School of Public Affairs

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Acknowledgments

We would like to thank the Oconomowoc community members who contributed their time and insights to us. The following individuals consented to be interviewed or provided information about health issues of concern to the community:

- Lora Mae Cochrane, Oconomowoc City Council member;
- Dr. Tim Hill, emergency room physician at Oconomowoc Memorial Hospital;
- Douglas Guy, CEO of Oconomowoc Memorial Hospital;
- Pam Johnson, president of the local Parent-Teacher Association;
- Lori Henn, UW Health Services;
- Ryan Katte, coordinator of Strategic Planning/Business Development, Oconomowoc Memorial Hospital;
- Joel Kleefisch, Director of District Relations, Representative Foti's Office;
- Marlene Schumacher, former mayor of Oconomowoc;
- Janice Steber, Oconomowoc School District health coordinator;
- Laura Vincent-Arnold, adult sexual assault coordinator, Waukesha Women's Center (WWC); and
- Becky Wittig, educational outreach coordinator, WWC;
- Lisa Witkowski, Program Development Coordinator, Wisconsin Coalition Against Sexual Assault

We are especially grateful to Lora Mae Cochrane for her gracious assistance throughout our research for this project.

Dana Langbecker
Sara Mooren
Becky Spithill

April 28, 2003

Executive Summary

The city of Oconomowoc is a community of 12,400 residents. It is predominantly a middle- to upper-middle-class community located near the western edge of Waukesha County.

After speaking with several residents of Oconomowoc, we identified many health issues of concern. Although the most commonly identified problem is drug and alcohol abuse, Oconomowoc has several programs in place to address this concern. A closely related problem that was also identified is sexual assault. Not only do nationwide statistics show sexual assault is the most underreported crime, Wisconsin statistics suggest underreporting is a problem in Oconomowoc as well. Furthermore, adolescents are at the greatest risk for victimization.

As members of a community begin to address the issue of sexual assault, they should focus on three key components: awareness, prevention, and outreach. Increased awareness and outreach are crucial to preventing sexual assault, and ensuring support is available for victims and their families.

This case study explores community perceptions and available resources surrounding the issue of sexual assault in Oconomowoc. The purpose of the public forum (scheduled for April 28, 2003) is to work with community members to find ways to more effectively address the problem of sexual assault among adolescents in Oconomowoc.

Community Health Issues in Oconomowoc: Focus on Sexual Assault among Adolescents

by Dana Langbecker, Sara Mooren, and Rebecca Spithill

When the first settlers arrived in Oconomowoc, they found that the Potawatomi had already appropriately referred to the area as “Coo-No-Mo-Wauk” or “where the waters meet,” or “river of lakes.” In the early 1900s the abundance of lakeshore made Oconomowoc a summer destination for wealthy families from St. Louis, Milwaukee, and Chicago. Many built summer homes along the lakeshores. Today many of the mansions built by the wealthy vacationers are now occupied by year-round residents, as Oconomowoc has become an established community that continues to thrive and expand.

The city of Oconomowoc is located near the western edge of Waukesha County, one of the fastest growing counties in Wisconsin. U.S. Census Bureau data show that the county has experienced 18.4 percent increase in population over the last decade compared with 9.6 percent growth statewide and 13.2 percent nationwide. Oconomowoc has also experienced substantial growth since the 1990 census. The current population of approximately 12,400 residents represents an increase of about 13 percent from a decade ago. The city expects to see continued growth in the area, especially with projects such as the Pabst Farms development, which is currently under construction. The development will provide an additional 300 acres for manufacturing and 120 acres for retail and office development. Oconomowoc’s location along Interstate 94 and its proximity to larger markets such as Milwaukee and Madison will most likely continue to fuel its expansion.

According to the U.S. Census Bureau, the population of Oconomowoc is 96.7 percent white, non-Hispanic. Oconomowoc’s city website reports that the average annual household income in 2000 was \$75,162, and the median household income for that same year was \$59,407.

Seminar Project

This study is the product of a graduate seminar that focuses on community health issues throughout Wisconsin. Students in this seminar are grouped into teams to identify health issues of concern to their assigned communities and to assist those communities in understanding and addressing those issues. This seminar is offered through the Robert M. La Follette School of Public Affairs at the University of Wisconsin–Madison. The goals for this project are:

- To make contacts at the community level in order to identify a health concern that impacts Oconomowoc;
- To research and define the issue as it exists on local, state, and national levels;
- To speak with community members to understand community perceptions and identify existing resources currently available that address the concern;

- To compile findings into a case study to be shared with community stakeholders; and
- To host a community forum to discuss the issue, the case study, and the possibility of further action by the community.

Issues of Concern for Oconomowoc

Our inquiry began in early February with an e-mail survey of several members of the Oconomowoc community, individuals identified as having insight into health issues affecting the community. Along with elected community leaders, the e-mail survey was also sent to school board members, school administrators, hospital personnel, and prosecutors in Oconomowoc. It elicited the following opinions on health issues of concern to the community:

- Mental health, “particularly the inability of families to afford psychiatric evaluation and/or subsequent psychiatric medications for themselves or their children”
- Substance abuse, “far and away the #1 health issue in Oconomowoc;”
- ADD/ADHD: “We also seem to have many kids with autism spectrum disorders. I have also seen several kids with mood disorders . . . recently.”
- Drug and alcohol addiction.

Our preliminary assumption, based on a review of the e-mail responses, was that the community of Oconomowoc, like many other communities in the United States, faces problems associated with drugs and alcohol. In addition, respondents identified mental health issues affecting public school children and the inability of families to afford mental health care.

Interviews of members of the Oconomowoc community began in early February as well. Some of the e-mail survey respondents offered names of individuals in the community who might provide useful information for the project. Those who were interviewed also recommended individuals who were subsequently interviewed. Finally, a number of informal contacts at a downtown restaurant provided additional insights.

The individuals interviewed echoed the concerns about drug and alcohol abuse. They coupled their observations with information about several programs that the schools have in place to prevent drug and alcohol abuse. This suggests that the community is addressing this issue and additional resources may only be marginally effective, if at all.

Informal discussions with community members indicated that Oconomowoc has a large population of elderly citizens. Similar to the issue of substance abuse, it appears that the needs of the community’s elderly are currently being addressed.

Regarding mental health, those interviewed did not identify this as an issue of overwhelming concern for residents of Oconomowoc. One individual offered the opinion that children were often misdiagnosed with Attention Deficit Disorder (ADD) and Attention Deficit Hyperactivity Disorder (ADHD) and too readily prescribed medication. Indeed, the rise in ADD, ADHD, and various autism spectrum disorders among school-age children is an issue of national concern. Although every community will have a stake in determining its

causes and identifying remedies, it is beyond the scope of a community-level project to assist in making those determinations and identifications.

Other issues of concern included respiratory ailments among children, lack of parental involvement, and poor water quality. As the study progressed, the team determined these issues could not be adequately addressed during the course of a semester.

Many of the individuals with whom we spoke identified Pabst Farms as an issue of concern. The land use decisions surrounding this expanse of property within Oconomowoc present many challenges to the community. The Pabst Farm development is viewed both as a blessing and a curse. The long-term economic development advantages it provides are indisputable. Most of the individuals who provided information for this project were of the opinion, however, that any health issues currently experienced by the community will be exacerbated by the development of Pabst Farms.

Some of the individuals interviewed identified sexual assault as an issue of concern. Their perceptions were the result of personal experience and/or of observations following two appearances by a national speaker, Milton Creagh. Creagh is a motivational speaker who discusses the importance of positive decision-making for America's youth. Part of his presentation focuses on sexual assault. Following each of his appearances in Oconomowoc, many young women approached him identifying themselves as victims of sexual assault. Most recently, seventh- and eighth-grade students were asked to describe on note cards what messages they took from Creagh's presentation. After these cards were collected, they were given to Ryan Katte of Oconomowoc Memorial Hospital, who provided them for use in this project. Of the 366 responses:

- 27 percent of seventh-grade students mentioned sexual assault; and
- 51 percent of eighth-grade students mentioned sexual assault.

This data suggests students present during Creagh's presentation left with an increased awareness regarding the topic of sexual assault.

On April 9, 2003, a sample of Oconomowoc High School students responded to a written survey on the topic of sexual assault. The purpose of the survey was to determine whether students think sexual assault is a problem and what they think constitutes sexual assault. Observations from the 32 responses include:

- 20 students would not seek assistance if they had been victims of sexual assault;
- 13 of the 20 students who would not seek assistance indicated they would not do so because of embarrassment;
- 14 students indicated they knew at least one person that had been a victim of sexual assault;
- 8 students indicated they knew at least one person that had committed sexual assault
- 7 students indicated they were aware of a program offered through the school that addressed sexual assault; and
- Only 1 of the 7 students who were aware of the program participated.

Selection of Topic

This case study examines sexual assault among adolescents in Oconomowoc. The issue of sexual assault was chosen for several reasons. First, teams were encouraged to focus their efforts on issues that their communities could address given the current availability of resources.

Second, initial research on the community indicated that sexual assault is underreported. Research shows that sexual assault is the most underreported crime, with an estimated two-thirds of attacks not reported.¹ According to Wisconsin crime statistics, two incidences of sexual assault were reported to local law enforcement officials in Oconomowoc in 2001, but interviews with community members suggest this statistic is low.

Third, while the most commonly identified problem was drug and alcohol abuse, Oconomowoc has several programs in place to address this concern. The risk of sexual assault is often thought to increase when drug and alcohol use are involved. It is important to recognize, however, that sexual assault also occurs in the absence of substance abuse. Perhaps of greater importance to this discussion is that a victim's willingness to report assault may be significantly diminished if he or she was under the influence of drugs or alcohol.

Fourth, the results of the survey we distributed to Oconomowoc high school students indicated there may be a lack of education, awareness, and outreach in the community regarding sexual assault. The high school introduces the topic in sophomore health classes and sponsors an annual voluntary workshop. In spite of these efforts, our survey results indicated that a small percentage of students knew about the workshop, but even fewer students participated. Of the students sampled, no male students participated. A second observation noted from our survey was that most students felt sexual assault was not a problem in their community. However, 44 percent of the students surveyed stated they knew at least one person who had been sexually assaulted.

Statistics

“Every two minutes, somewhere in America, someone is sexually assaulted.”
--Rape Abuse & Incest National Network (RAINN)

The definition of sexual assault is often unclear. Many focus on the crime of forceful rape. However, sexual assault may not involve force and may include grabbing, fondling, or verbal threats. The Wisconsin Office of Justice Assistance (OJA) defines sexual assault in this broader category. The OJA collects reports from local law enforcement that include incidents of rape, forcible sodomy, assault with an object, forcible fondling, and statutory rape. Throughout this report, we define sexual assault using the same terms.

Sexual assault is unlike any other crime. Victims of sexual assault often blame themselves, feel shame or guilt about the assault, and often know the perpetrator. Society blames victims of sexual assault in ways that do not occur in other crimes, so too may their friends and family. If the perpetrator was known to the victim, the question may be asked if the act was indeed sexual assault or consensual.

¹ Rennison, Callie M., Rape and Sexual Assault: Reporting to Police and Medical Attention, 1992-2000. U.S. Department of Justice, Bureau of Justice Statistics, August 2002.

National statistics suggest that over two-thirds of sexual assaults are not reported to law enforcement.² Figure 1 shows the number of reported sexual assaults in eight Wisconsin communities including Oconomowoc.³

Figure 1
Sexual Assaults Reported by Law Enforcement
1998 - 2001

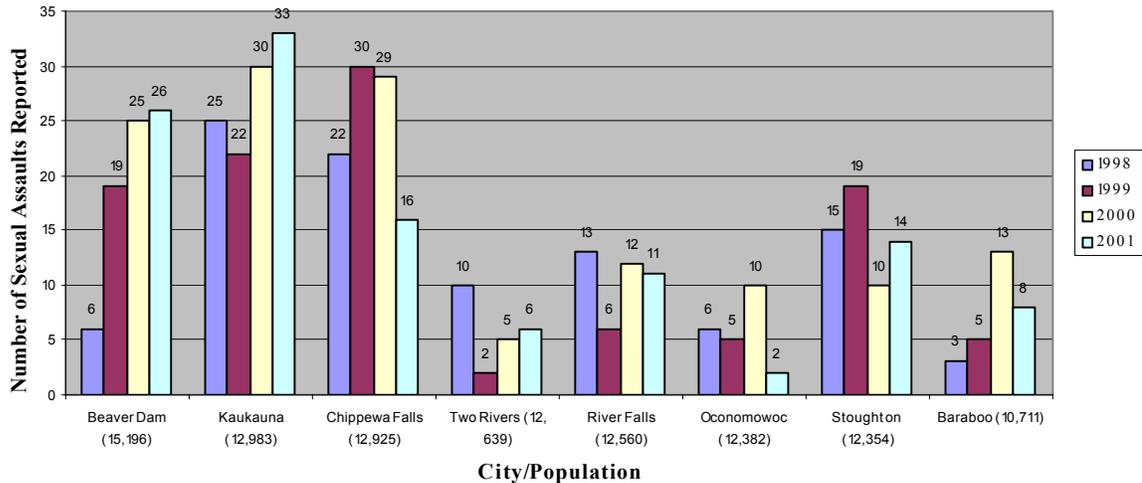


Figure 1 indicates that Oconomowoc, compared to other Wisconsin cities of similar size, is on the low end of sexual assault reporting. Beaver Dam, Chippewa Falls, Baraboo, and River Falls have centers that provide services for victims of sexual assault. Kaukauna, Oconomowoc, and Stoughton are each within 20 miles of a neighboring city with a women’s center.

It is unclear whether closer proximity to a women’s service provider correlates to a higher percentage of reporting of sexual assaults. Menasha, which is 10 miles from Kaukauna, has two centers that focus specifically on addressing the needs of sexual assault victims.⁴ This may explain the higher reporting rate in Kaukauna. Stoughton is 18 miles from Madison and does not have a local women’s center. We assume that residents in Stoughton take advantage of available resources in Madison. Similarly, Oconomowoc’s closest resource for comparable services is the Waukesha Women’s Center, which is nearly 20 miles away. However, this center provides a wide range of services, only one of which is responding to the needs of sexual assault victims.

Our observation is that proximity to a sexual assault resource center alone will not increase reporting of actual assaults. In addition to proximity, outreach is an important component to improving awareness. Among these communities Oconomowoc is one of the most affluent. U. S. Census data show that at \$59,000 per household, the median income in Oconomowoc exceeds the national median by more than 41 percent. Many of the other communities in the above comparison are at or below the national median household income.

² Ibid.

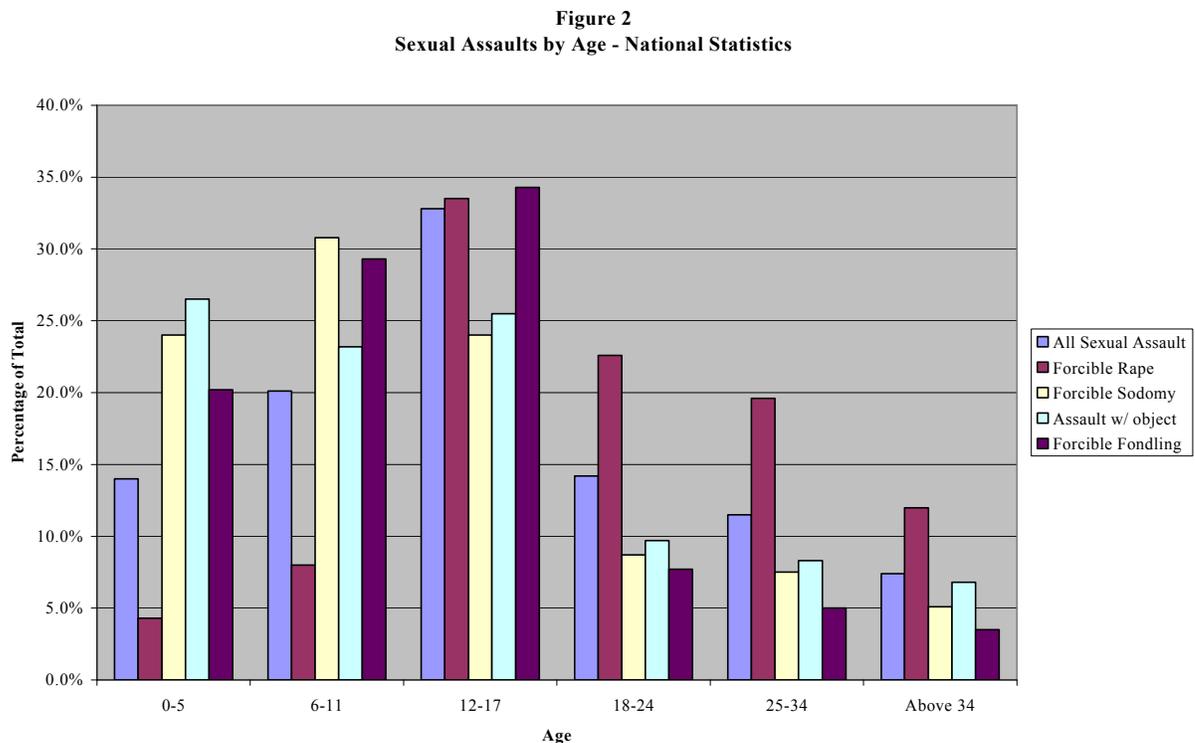
³ Wisconsin Office of Justice Assistance Statistical Analysis Center

⁴ Wisconsin Coalition Against Sexual Assault www.wcasa.org (REACH Counseling Services and Sexual Assault Crisis Center Fox Cities, Inc.)

Adolescents are an especially vulnerable population. The following statistics have been gathered by the Wisconsin Coalition Against Sexual Assault (WCASA):⁵

- 33 percent of sexual assault victims are between the ages of 12 and 17;
- 23 percent of all sexual assault offenders are under the age of 18;
- Teens 16 to 19 years of age are 3 ½ times more likely than the general population to be victims of sexual assault; and
- 42 percent of girls younger than 15 report that their first intercourse was nonconsensual.

Nationally, the highest percentage of all sexual assault victims is between the ages of 12 and 17. Figure 2 represents law enforcement data compiled from 12 states from 1991 through 1996 as reported by the federal Bureau of Justice Statistics.⁶



Narrowed to Wisconsin for 2001, these same statistics show the following:⁷

- 59.4 percent of sexual assault victims were under the age of 18;
- 86.8 percent of these victims were female;
- 73.5 percent of these victims were white;
- 62.9 percent of rape victims were under the age of 20;

⁵ Ibid.

⁶ Snyder, Howard N., *Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics*, National Center for Juvenile Justice – Bureau of Justice Statistics, July 2000

⁷ Wisconsin Office of Justice Assistance Statistical Analysis Center

- 99.1 percent of these victims were female;
- 32.7 percent of offenders were under the age of 18; and
- 87.1 percent of the sexual assaults reported involved someone known to the victim.

These statistics suggest that a high percentage of sexual assault victims in Wisconsin tend to be white females under the age of 20 who typically know their offender. Since young women appear to be especially vulnerable to this type of violence, education prior to entering college may reduce the risk of attack during college. In 2002, University of Wisconsin-Madison's University Health Services conducted a sexual assault study of students on the Madison campus. The following statistics emerged from the 754 responding students:

- 27 percent indicated nonconsensual sexual activity while a student at UW-Madison;
- 53 percent of these incidents occurred during their freshman year; 25 percent occurred during their sophomore year;
- 54 percent of these incidents took place during the fall semester;
- 62 percent indicated they knew the perpetrator;
- 69 percent indicated they were under the influence of drugs or alcohol at the time; and
- 68 percent told someone about the incident after it occurred. However, rather than seek professionals trained to offer intervention services:
 - 94 percent told a friend(s)
 - 57 percent told a roommate

One reason for the underreporting of sexual assault to law enforcement may be the low conviction rate. There is often little satisfaction for victims of sexual assault in the legal system. Table 1 lists statistics associated with sexual assault and conviction rates, as compiled by the Rape and Incest National Network.

Resources

The Women's Center in Waukesha is the closest agency that provides services to sexual assault victims in Oconomowoc. Laura Vincent-Arnold of the Women's Center confirmed that the center treats victims of sexual assault who are from Oconomowoc. At least two sexual assault advocates are on call throughout the week to respond to victims requesting assistance throughout Waukesha County. It is unclear, however, to what extent Oconomowoc residents are aware of the Women's Center services. In their responses to an open-ended question about resources they might seek if they were victims of sexual assault, none of the students specifically mentioned the Women's Center in Waukesha.

Table 1
Probability of Legal Prosecution⁸

51 percent	Chance (if a rape is reported to police) that an arrest will be made.
80 percent	Chance (if an arrest is made) that it will be prosecuted.
58 percent	Chance (if prosecuted) of a felony conviction.
69 percent	Chance (if there is a felony conviction) that the offender will spend time in jail.
16 percent	Chance (if a rape is reported) that the offender will end up in prison.
6 percent	Including unreported rapes, the chance that a rapist will ever spend time in jail.

Oconomowoc Memorial Hospital has a trained sexual assault nurse examiner. This is an emergency room service offered to victims of sexual assault. The hospital handles so few sexual assault cases, however, that it is difficult for an individual to maintain these skills. It is unclear whether community members are aware of this resource. Two of the 32 students surveyed indicated they would seek medical attention.

Conclusion

During the public forum on April 28, 2003, community representatives had the opportunity to consider the problem of sexual assault in Oconomowoc and to recommend what actions the community can take to address the issue.

Attendees to the public forum included:

- Stephanie Byrnes, PAVE (Promoting Awareness, Victim Empowerment);
- Lora Mae Cochrane, Oconomowoc City Council member;
- Dave Corkle, Men Making a Difference (MMD);
- Dennis Dresang, Professor of Political Science and Public Affairs, La Follette School of Public Affairs;
- Steven Foti, State Representative;
- Cristian Harnisch, Detective, City of Oconomowoc Police Department;
- Pam Johnson, president of the local Parent-Teacher Association;
- Bridget Pirsch, Outreach Assistant, La Follette School of Public Affairs;
- Marlene Schumacher, former Oconomowoc mayor; and
- Terry Shelton, Outreach Director, La Follette School of Public Affairs.

⁸ Rape and Incest National Network (RAINN) <http://www.rainn.org/statistics.html>

Forum participants first answered the question, what resources are there currently that could be used to address sexual assault? Responses included both current resources and potential approaches:

- Waukesha Women’s Center
- Waukesha County District Attorney’s victim unit
- Oconomowoc High School counselor
- Oconomowoc elementary and middle schools
- Increase teacher education and awareness
- Sex education - addressing “consent” issues and criminal aspects of sexual activity
- Madison conference May 2004 – teachers and educators (tentative)
- Human growth and development curriculum
- Annual parent nights (all levels)
- Peer education in schools
- Local churches
- Families
- Parochial schools
- Oconomowoc Memorial Hospital
- Child protection center in Waukesha
- Exploring and educating about the basis for sexual assault
- Have safe space for drop-in for youth
- Have PAVE/MMD talk to parent groups, students, etc.

As follow up to the initial question, the group narrowed the discussion to feasible alternatives. These included:

- Initiating a Take Back the Night Rally
- Looking for funding for a program
 - CAP Fund
 - Green Bay Packers Fund
 - Violence Against Women Funding
 - Milwaukee Bucks
- Coordinating current resources
- Involving Liaison officers
- Adding to health class curriculum
- Distributing a brochure to be included in 9th grade informational packets

As a result of the discussion, the group recommended the following steps:

- Reconvene with representatives from the school district, the parochial schools and local government
- Use the report as the basis for further discussion

We appreciate the community members who participated in this process. We hope these recommendations and suggestions provide the foundation for further action.

Contact Information:

Madison Teacher and Community Awareness Conference contact (tentative):

Lexy Anderson

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UW-Madison PAVE (Promoting Awareness, Victim Empowerment)

Upon request, PAVE representatives will visit student organizations and campus units to tell the stories of sexual assault survivors, and talk about issues including consent, alcohol, prevention and resources. To schedule a session, e-mail paverequests@yahoo.com

Appendix 1: Teen Sexual Assault and Abuse

This information sheet was compiled in 2000 by the Wisconsin Coalition Against Sexual Assault (WCASA). WCASA is a membership organization of sexual assault centers, other organizations, and individuals throughout Wisconsin working to end sexual violence. For information sheets on other topics or to become a member contact WCASA, 600 Williamson St., Suite N-2, Madison, WI 53703, (608)257-1516, www.wcasa.org. For more information about sexual assault or to receive support with a sexual assault experience, contact your local sexual assault program. This sheet may be reproduced in its original format only. This information does not constitute legal advice.

Sexual violence is any act (verbal and/or physical), which breaks a person's trust and/or safety and is sexual in nature. Victims/survivors of sexual assaults are forced, coerced, and/or manipulated to participate in the unwanted sexual activity. Adolescent women are at a higher risk for sexual violence than any other age group. Part of the reason for this is the large number of date/acquaintance rapes, which occur at this age. This is coupled with the fact that many adolescents are victims of sexual abuse and incest as well. Due to past or ongoing sexual abuse, teens with these experiences are more likely than their non-abused peers to participate in "delinquent" teenage behaviors including those which result in social problems, conflict with authority, early sexual behavior, and eating problems. These behaviors may help the teen escape from jeopardy and/or to serve as a cry for help.

Date/acquaintance rape is sexual assault perpetrated by someone known to the victim such as: a friend, an employer, a date, or someone the victim/survivor recently met. It is almost entirely perpetrated by males against females. It is NEVER the victim/survivor's fault no matter what she wore, where she was, whether or not she fought back, or whether or not she was drinking. The perpetrators are 100 percent responsible for their actions. Rape, including date/acquaintance rape, is violence where sex is used as a weapon. Date/acquaintance rapists often believe myths such as: women owe men sex if they spend money on her; some women play hard to get and say "no" when they mean "yes;" and women enjoy being pursued by an aggressive male.

Individuals who have been assaulted and/or abused by someone they know may feel guilty or responsible for the abuse, feel betrayed, question their judgement, or have difficulty trusting people. Recovery from an assault can be assisted by contacting an advocate who understands the needs of sexual assault victims. Many communities have rape crisis centers with 24-hour counseling and advocacy services. Adolescents who are being sexually abused can contact the 24-hour National Child Abuse Hotline for assistance and referral: 1-800-422-4453.

Here are the Facts

- Approximately, 1.8 million adolescents in the United States have been the victims of sexual assault. (Kilpatrick, D., Acierno, R., Saunders, B., Resnick, H., Best, C., Schnurr, P. National Survey of Adolescents Executive Summary. Charleston, SC: Medical University of South Carolina, National Crime Victims Research and Treatment Center, 1998.)

- 33 percent of sexual assaults occur when the victim is between the ages of 12-17. (Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. U.S. Department of Justice Statistics, 2000.)
- Females comprised 82 percent of all juvenile victims. (Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. U.S. Department of Justice Statistics, 2000.)
- Teens 16 to 19 years of age were 3 1/2 times more likely than the general population to be victims of rape, attempted rape, or sexual assault. (Bureau of Justice Statistics. National Crime Victimization Survey. U.S. Department of Justice, 1996.)
- A survey of high school adolescents showed that 12 percent of girls and 5 percent of boys had experienced sexual abuse. (The Commonwealth Fund. Improving the Health of Adolescent Girls: Policy Report of the Commonwealth Fund Commission on Women's Health. New York, NY. 1999.)
- Each year an estimated 4000 incidents of rape or other types of sexual assault occur in public schools across the country. (U.S. Department of Education, Violence and Discipline Problems in the U.S. Public Schools. 1997.)
- 7 out of 10 rape or sexual assault victims knew their attacker. (Rennison, Calli M. Criminal Victimization 1998: Changes 1997-1998 with Trends 1993-1998. Bureau of Justice Statistics, U.S. Department of Justice. 1999.)
- Approximately 22 percent of victims are raped by intimates such as current or former boyfriends, 47 percent by acquaintances, and 2 percent by other relatives. (Rennison, Calli M. Criminal Victimization 1998: Changes 1997-1998 with Trends 1993-1998. Bureau of Justice Statistics, U.S. Department of Justice, 1999.)
- 69 percent of the teen sexual assaults reported to law enforcement occurred in the residence of the victim, the offender, or the residence of another individual. (Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. U.S. Department of Justice Statistics, 2000.)
- In 1999 only 28.3 percent of total rapes were reported to police. (1999 National Crime Victimization Survey (NCVS). U.S. Department of Justice, Bureau of Statistics. 2000.)
- 23 percent of all sexual offenders were under the age of 18. (Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. U.S. Department of Justice Statistics, 2000.)
- An offender was arrested in 32 percent of the cases involving victims ages 12-17. (Sexual Assault of Young Children as Reported to Law Enforcement: Victim, Incident, and Offender Characteristics. U.S. Department of Justice Statistics, 2000.)
- In 1998, juveniles accounted for 77.9 percent of sexual assault victims in the state of Wisconsin. The majority (83 percent) of these victims were female. (Crime and Arrests in Wisconsin-1998. Federal Bureau of Investigation Uniform Crime Reporting Program. Wisconsin Office of Justice Assistance, 1998.)
- In Wisconsin, the average age of a sexual assault victim was 15; the average age of a sexual assault offender was 25. (Department of Health and Family Services. Prevent Adolescent Pregnancy. Plan, Recommendations, and Special Areas of Concern. Sexual Assault and Statutory Rape, 2000.)

- 42 percent of girls younger than 15 years reported that their first intercourse was nonconsensual. (Abma, JC, Driscoll, A., Moore, K. Young Women's Degree of Control Over First Intercourse: An Exploratory Analysis. *Family Planning Perspective*. Vol. 30. 1998.)
- From one-half to two-thirds of teenage mothers were sexually molested prior to their first pregnancy; between 30 percent and 44 percent had been the victims of rape or attempted rape. (Wisconsin Subcommittee on Adolescent Pregnancy Prevention. Department of Health and Family Services, 1998.)
- Teen males only father 29 percent of babies born to teen mothers. 71 percent are fathered by adult males over 20 years old. In 20 percent of the cases, the fathers are at least six years older than the mothers are. (Wisconsin Subcommittee on Adolescent Pregnancy Prevention. Department of Health and Family Services, 1998.)
- A history of sexual abuse has been linked to high-risk behaviors that may account for increased risk of early, unplanned pregnancy, including young age at initiation of sexual intercourse, and failure to use contraception. (Stock, J., Bell, M., Boyer, D., Connell, F. Adolescent Pregnancy and Sexual Risk Taking Among Sexually Abused Girls. *Family Planning Perspective*. Vol.29, 1997.)
- Girls who are sexually abused often suffer from a traumatic and profound lack of self-esteem. These girls engage in disempowering and self-defeating behaviors; which can propel them into a cycle of prostitution, addiction, drug dealing, and violence. (Richie, B., Tsenin, K., Spatz, C. Research on Women and Girls in the Justice System Series. Widom Publishing: National Institute of Justice, 2000.)
- 26.6 percent of women suffering from bulimia nervosa were raped at some point in their lives, while only 13.3 percent of women with no eating disorder had been raped. (Dansky, B.; Brewerton, T.; Kilpatrick, D.; and O'Neil, P.; The National Women's Study: Relationship of Victimization and Posttraumatic Stress Disorder to Bulimia Nervosa. *International Journal of Eating Disorders*. Volume 21(3): pp. 213-228, 1997.)
- In a nationally representative sample, youth who experienced sexual assault were twice as likely as their nonvictimized peers to report past-year alcohol or other drug abuse or dependence. (Kilpatrick, D., Acierno, R., Saunders, B., Resnick, H., Best, C., Schnurr, P. Risk Factors for Adolescent Substance Abuse and Dependence: Data from a National Sample. *Journal of Consulting and Clinical Psychology* 68 (1): 1-12. 2000.)
- 48 percent of surveyed teens believed that if a girl says yes to sex and then changes her mind and the guy has sex with her anyway, it is not sexual assault. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)
- 41 percent of surveyed teens believed that if a man forces his wife to have sex, it is not sexual assault. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)
- 44 percent of surveyed teens believed that if a girl had sex with a guy before, it is not sexual assault if he forces her to have sex later. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)

- 42 percent of surveyed teens believed that if a girl or guy have been drinking and are a little drunk, then it is not sexual assault if he forces or coerces her to have sex. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)
- 19 percent of surveyed teens believed that if a guy and a girl have been dating for at least six months, he has a right to expect and force her to have sex. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)
- 18 percent of surveyed teens believed that if a guy buys a girl dinner, he has a right to have sex with her. (Attitude and Behavior Assessment Among Wisconsin High School Students. Wisconsin Coalition Against Sexual Assault Media Campaign, November, 2000.)

Wisconsin Statutory Rape Statistics

Based on Reports made to Law Enforcement in 1998:

- • 22 percent of all sexual assault offenses were statutory rape.
- • The average victim age was 14, and the average offender age was 19
- • Statutory rape offenders were arrested in 69 percent of the cases.
- • 85 percent of arrested offenders were referred to criminal or juvenile court.

Source of Wisconsin Statistics: Wisconsin Office of Justice Assistance. Sexual Assaults in Wisconsin 1998: September 1999.

Appendix 2: Wisconsin Sexual Assault Laws: Statutory Language

1). **FIRST DEGREE SEXUAL ASSAULT** s. 940.225 (1) Whoever does any of the following is guilty of a Class B felony:

- (a) Has sexual contact or sexual intercourse with another person without consent of that person and causes pregnancy or great bodily harm to that person.
- (b) Has sexual contact or sexual intercourse with another person without consent of that person by use or threat of use of a dangerous weapon or any article used or fashioned in a manner to lead the victim reasonably to believe it to be a dangerous weapon.
- (c) Is aided or abetted by one or more other persons and has sexual contact or sexual intercourse with another person without consent of that person by use or threat of force or violence.

Penalties for a Class B felony = imprisonment not to exceed 60 years (s. 939.50(3)(b)).

2). **SECOND DEGREE SEXUAL ASSAULT** s. 940.225 (2) Whoever does any of the following is guilty of a Class BC felony:

- (a) Has sexual contact or sexual intercourse with another person without consent of that person by use or threat of force or violence.
- (b) Has sexual contact or sexual intercourse with another person without consent of that person and causes injury, illness, disease or impairment of a sexual or reproductive organ, or mental anguish requiring psychiatric care for the victim.
- (c) Has sexual contact or sexual intercourse with a person who suffers from a mental illness or deficiency which renders that person temporarily or permanently incapable of appraising the person's conduct, and the defendant knows of such condition. (consent is not an issue)
- (cm) Has sexual contact or sexual intercourse with a person who is under the influence of an intoxicant to a degree which renders that person incapable of appraising the person's conduct, and the defendant knows of such condition. (Alcohol is not considered an intoxicant)(Consent is not an issue)
- (d) Has sexual contact or sexual intercourse with a person who the defendant knows is unconscious. (consent is not an issue)
- (f) Is aided or abetted by one or more other persons and has sexual contact or sexual intercourse with another person without the consent of that person.
- (g) Is an employe of a facility or program under s. 940.295(2)(b), (c), (h) or (k) and has sexual contact or sexual intercourse with a person who is a patient or resident of the facility or program.

Penalties for a Class BC felony = a fine not to exceed \$10,000 or imprisonment not to exceed 30 years, or both (s. 939.50(3)(bc.))

3.) **THIRD DEGREE SEXUAL ASSAULT** s. 940.225 (3) Whoever has sexual intercourse with a person without the consent of that person is guilty of a Class D felony. Whoever has sexual contact in the manner described in sub. (5)(b) 2. [intentional penile ejaculation] with a person without the consent of that person is guilty of a Class D felony.

Penalties for a Class D felony = a fine not to exceed \$10,000 or imprisonment not to exceed

10 years,
or both (s. 939.50(3)(d)).

4). **FOURTH DEGREE SEXUAL ASSAULT** s. 940.225 (3m) Except for sexual contact as described under third degree sexual assault, whoever has sexual contact with a person without the consent of that person is guilty of a Class A misdemeanor.

Penalties for a Class A misdemeanor = a fine not to exceed \$10,000 or imprisonment not to exceed 9 months, or both (s. 939.51(3)(a)).

DEFINITIONS UNDER s. 940.225 (*note gender neutral language*):

"CONSENT", as used in this section, means words or overt actions by a person who is competent to give informed consent indicating a freely given agreement to have sexual intercourse or sexual contact.

Consent is not an issue in alleged violations of sub. (2)(c), (cm), (d) and (g). The following persons are assumed incapable of consent but the presumption may be rebutted by competent evidence, subject to the provisions of s. 972.11 (2): (b) A person suffering from a mental illness or defect which impairs capacity to appraise personal conduct. (c) A person who is unconscious or for any other reason is physically unable to communicate unwillingness to an act. (s. 940.225(4)) (Case law explains that failure to physically resist is not consent.)

"SEXUAL CONTACT" means any of the following: 1. Intentional touching by the complainant or defendant, either directly or through clothing by the use of any body part or object, of the complainant or defendant's intimate parts if that intentional touching is either for the purpose of sexually degrading; or for the purpose of sexually humiliating the complainant or sexually arousing or gratifying the defendant or if the touching contains the elements of actual or attempted battery under s. 940.19 (1). 2. Intentional penile ejaculation of ejaculate or intentional emission of urine or feces by the defendant upon any part of the body clothed or unclothed of the complainant if that ejaculation or emission is either for the purpose of sexually degrading or sexually humiliating the complainant or for the purpose of sexually arousing or sexually gratifying the defendant. (s. 940.225(5)(b) 1&2)

"SEXUAL INTERCOURSE" includes the meaning assigned under s. 939.22(36) as well as cunnilingus, fellatio or anal intercourse between persons or any other intrusion, however slight, of any part of a person's body or of any object into the genital or anal opening either by the defendant or upon the defendant's instruction. The emission of semen is not required. (s. 940.225(5)(c))

MARRIAGE NOT A BAR TO PROSECUTION. A defendant shall not be presumed to be incapable of violating this section because of marriage to the complainant. (s. 940.225(6))

DEATH OF VICTIM. This section applies whether a victim is dead or alive at the time of the sexual contact or sexual intercourse. (s. 940.225(7))

Appendix 3: U.S. Census Bureau Waukesha County Facts

Waukesha County, Wisconsin

	People QuickFacts	Waukesha County	Wisconsin
	Population, 2001 estimate	367,065	5,401,906
	Population percent change, April 1, 2000-July 1, 2001	1.7%	0.7%
	Population, 2000	360,767	5,363,675
	Population, percent change, 1990 to 2000	18.4%	9.6%
	Persons under 5 years old, percent, 2000	6.4%	6.4%
	Persons under 18 years old, percent, 2000	26.3%	25.5%
	Persons 65 years old and over, percent, 2000	12.0%	13.1%
	Female persons, percent, 2000	50.8%	50.6%
	White persons, percent, 2000 (a)	95.8%	88.9%
	Black or African American persons, percent, 2000 (a)	0.7%	5.7%
	American Indian and Alaska Native persons, percent, 2000 (a)	0.2%	0.9%
	Asian persons, percent, 2000 (a)	1.5%	1.7%
	Native Hawaiian and Other Pacific Islander, percent, 2000 (a)	Z	Z
	Persons reporting some other race, percent, 2000 (a)	0.9%	1.6%
	Persons reporting two or more races, percent, 2000	0.9%	1.2%
	Persons of Hispanic or Latino origin, percent, 2000 (b)	2.6%	3.6%
	White persons, not of Hispanic/Latino origin, percent, 2000	94.2%	87.3%
	Living in same house in 1995 and 2000, pct age 5+, 2000	58.6%	56.5%
	Foreign born persons, percent, 2000	3.6%	3.6%
	Language other than English spoken at home, pct age 5+, 2000	5.9%	7.3%
	High school graduates, percent of persons age 25+, 2000	92.0%	85.1%
	Bachelor's degree or higher, pct of persons age 25+, 2000	34.1%	22.4%
	Persons with a disability, age 5+, 2000	39,098	790,917
	Mean travel time to work, workers age 16+ (minutes), 2000	22.2	20.8
	Housing units, 2000	140,309	2,321,144
	Homeownership rate, 2000	76.4%	68.4%
	Housing units in multi-unit structures, percent, 2000	23.2%	26.2%
	Median value of owner-occupied housing units, 2000	\$170,400	\$112,200
	Households, 2000	135,229	2,084,544
	Persons per household, 2000	2.63	2.50
	Median household money income, 1999	\$62,839	\$43,791
	Per capita money income, 1999	\$29,164	\$21,271
	Persons below poverty, percent, 1999	2.7%	8.7%

	Business QuickFacts	Waukesha County	Wisconsin
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	Private nonfarm establishments, 1999	12,461	139,646
	Private nonfarm employment, 1999	219,599	2,368,404
	Private nonfarm employment, percent change 1990-1999	40.2%	21.5%
	Nonemployer establishments, 1999	21,640	264,657
	Manufacturers shipments, 1997 (\$1000)	9,434,623	117,382,992
	Retail sales, 1997 (\$1000)	4,094,223	50,520,463
	Retail sales per capita, 1997	\$11,751	\$9,715
	Minority-owned firms, percent of total, 1997	3.3%	3.7%
	Women-owned firms, percent of total, 1997	24.3%	24.4%
	Housing units authorized by building permits, 2000	2,448	34,154
	Federal funds and grants, 2001 (\$1000)	1,176,142	26,645,345
	Local government employment - full-time equivalent, 1997	10,796	201,633

Geography QuickFacts		Waukesha County	Wisconsin
	Land area, 2000 (square miles)	556	54,310
	Persons per square mile, 2000	649.4	98.8
	Metropolitan Area	Milwaukee-Waukesha, WI PMSA	

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

FN: Footnote on this item for this area in place of data

NA: Not available

D: Suppressed to avoid disclosure of confidential information

X: Not applicable

S: Suppressed; does not meet publication standards

Z: Value greater than zero but less than half unit of measure shown

F: Fewer than 100 firms

Source U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, 2000 Census of Population and Housing, 1990 Census of Population and Housing, Small Area Income and Poverty Estimates, County Business Patterns, 1997 Economic Census, Minority- and Women-Owned Business, Building Permits, Consolidated Federal Funds Report, 1997 Census of Governments.