Section 2: Understanding Sexual Assault from a Victim’s Perspective

Time Allotment: 4 Hours, 40 Minutes

TOPIC: INTRODUCTION
(5 MINUTES)

We’ve discussed the merits of a victim-centered approach to managing sex offenders, but before we move on to discussing how to create that kind of collaboration and the specific strategies we can use to bring it about, it’s important that we spend a few minutes talking about what we know about sexual assault: the various forms it can take, the impact it has on victims, the issues involved in working with victims, and the perspective that they can bring to our work.

LEARNING OBJECTIVES
(2 minutes)

At the end of this section, participants will be able to:

- Define what we mean by the terms rape, sexual assault, sexual abuse, incest, and child molestation;
- Identify mistaken beliefs about sexual assault;
- Discuss, in general terms, the prevalence of sexual assault and its impact on victims;
- Identify different forms of intra-familial abuse and some of the family dynamics unique to incest cases; and
- Identify the role of cultural competency in working with victims of sexual assault.

INTRODUCTION
(3 minutes)

As supervision officers charged with the responsibility of managing sex offenders, there will be times when we will be in contact with victims directly rather than working through advocates. We might find ourselves advocating for a victim-centered approach within our agency, or on our case management team. We may be the one who has to remind the team that we need to ask, “What is best for the victim in this case?”

As officers involved in community supervision, we are in a unique position in the criminal justice system. Our jobs require us to work not only with offenders, but with those who live and work with and around the offenders. We are in contact with all kinds of people, including the victims of crime.
### What are some of the circumstances or reasons we might be in contact with sexual assault victims?

Because these contacts are likely, and because they are important to our ability to effectively manage offenders, it is essential that we have a solid understanding of the impact sexual assault can have on a victim. This knowledge can help us in a number of ways as we work with perpetrators to prevent further victimization. For example, it can help us as we try to make sense of the information – or misinformation – that offenders give us. It will help us to understand why a child victim of one of our convicted incest perpetrators is now denying that the abuse took place. It will help us when we are explaining to a family why reunification cannot happen until some time in the future. It will help us explain our case decisions to victims, interested community partners, and our supervisors. In other words, it is essential information for our work with sex offenders.

### TOPIC: THE NATURE AND EXTENT OF SEXUAL ASSAULT
(55 MINUTES)

### Defining Our Terms
(5 minutes)

Before we get into a discussion on sexual victimization, let’s be clear about the terms we’re using and what they mean. The terms sexual assault, sexual violence, sexual abuse, molestation, incest, and rape are often used interchangeably to describe both legal and illegal behaviors that cause victims to feel anything from discomfort to assault and violation. There is disagreement, both within the advocacy community and the criminal justice system, about which is the best, most accurate, and descriptive term to use. You may find that the victims and advocates in your community have preferred terms that will show up in their literature or in their conversations with you. It can be helpful to have a conversation with them about why they use the term or terms that they do. Careful definition of terms can increase your mutual understanding regarding shared information and provide an opportunity to clarify viewpoints.

For the purposes of this training, we will be using sexual assault to describe the range of behaviors committed by sex offenders, since sexual assault is usually a legal term used to describe degrees of sexual victimization ranging from unwanted sexual contact to rape. Legal definitions vary from state to state and you may find yourself having to familiarize victims with your state’s definitions; therefore, your own familiarity with those definitions is important. In terms of

### NOTE: Allow the audience to name as many circumstances or reasons for contact with sexual assault victims as they can. Write their answers on a flipchart or on a blank overhead slide. Possible answers include:
- Home visits to offenders
- Pre-sentence investigations
- Parole hearings or probation revocation hearings
- Investigating whether an offender violated conditions
- Pre-release planning
- Victim notification
- Victim restitution management

### NOTE: You may want to prepare a handout with the statutory definitions of illegal sexual behaviors relevant to your jurisdiction.
specific types of sexual assault, the term *rape* is generally defined as forced or non-consensual sexual intercourse. *Child sexual abuse* or *molestation* is often used when discussing inappropriate sexual acts perpetrated against *children and adolescents*. A central component of any child sexual abuse is the dominant position of an adult that allows him or her to force or coerce a child into sexual activity. *Incest* refers to sexual relations between close relatives, including parent–child, siblings, grandparent–grandchild; it also includes relations between a child and his/her legal guardian or other members of the immediate family. It can include a range of sexual assault behaviors.

The definition of sexual assault for the purposes of this curriculum is: “Forced or manipulated unwanted sexual contact between two or more adults or two or more minors, or any sexual contact between an adult and a minor, or between two minors with a significant age difference between them.” Sexual assault is a broader term than rape and includes various types of unwanted sexual touching or penetration without consent.

**SEXUAL ASSAULT: MYTHS AND FACTS**  
(7 minutes)

As supervision officers, you are probably aware that sexual assault in the United States is widespread. It is estimated that approximately 78 forcible rapes of women 18 years of age and older are committed each hour in the United States, and 1 of 6 women and 1 of 33 men have experienced an attempted or completed rape as a child and/or adult.¹ At least one in five girls and one in seven boys have been sexually abused by age 18.²

Additional information and relevant statistics about sexual assault are summarized in a handout included in your training materials.

Misconceptions about the nature of sexual assault result in a variety of myths that contribute to the tendency to place blame for sexual assault on victims. This “victim-blaming” attitude can lead to underreporting of sexual assault by victims who believe that they will be blamed for the assault and will not receive appropriate support from others when disclosures of sexual assault are made. You may be familiar with many of these myths from your work with offenders, whose cognitive distortions often draw on these very beliefs. These myths are also propagated because they can help us convince ourselves that we can control our safety and the safety of our loved ones. For this reason, it can be difficult to set these myths aside in working with victims.

Let us take a few minutes to examine in more detail some of the most prevalent and damaging of the myths surrounding sexual assault.

**MYTH: Most sexual assaults are committed by strangers.**

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FACT: 3 in 4 victims know their attacker. Most sexual assaults are committed by someone known to the victim or the victim’s family, regardless of whether the victim is a child or an adult.

Adult Victims:

Statistics indicate that the majority of women who have been raped know their assailant. A 1998 National Violence Against Women Survey revealed that among those women who reported being raped, 76% were victimized by a current or former husband, live-in partner, or date.5 Also, a Bureau of Justice Statistics study found that nearly 9 out of 10 rape or sexual assault victimizations involved a single offender with whom the victim had a prior relationship as a family member, intimate, or acquaintance.4

Child Victims:

Approximately 60% of boys and 80% of girls who are sexually victimized are abused by someone known to the child or the child’s family.5 Relatives, friends, baby-sitters, persons in positions of authority over the child, or persons who supervise children are more likely than strangers to commit a sexual assault.6 This means that some of the victims you have contact with will have had some kind of relationship with the offenders on your case load beyond or in addition to the assault – though these are not the cases that are most likely to result in prosecution.

MYTH: If people are careful and alert, they can avoid being victims of sexual violence.

FACT: The majority of victims are assaulted by someone they know. Many people believe that sexual assault can be avoided if certain places or situations are avoided. But more than half of all rapes occur in a home setting and, as we just indicated, most victims are assaulted by someone they trust, like a partner, family member, friend, or neighbor.7 Many sexual assaults of adult women are considered “confidence rapes,” in that the offender knows the victim and has used that familiarity to gain access to her. The overwhelming majority of child and adolescent victims are also assaulted by someone they know who has often worked hard to gain their trust and confidence prior to the assault. Thus, there is no foolproof way for a potential victim to prevent sexual assault. Only the offender can truly prevent an assault, and that’s why our work is so important.

MYTH: Sexual assault is an impulsive crime of sex committed by a sexually frustrated man.

FACT: Most sexual assaults are planned in some way. Most sexual abusers plan the assault and perpetrate against a vulnerable victim, including children or women who are known to them.8 Their
motivations vary, from the urge to cause pain to the desire to exercise power and control to a desire to experience intimacy with someone who is unable to object or find fault with them, to the urge to cause pain. Many offenders have intimate partners with whom they have ongoing sexual relationships at the time they commit their sexual offenses.

**MYTH:** Sexual assault isn’t that harmful to victims unless there is a lot of physical violence involved.  
**FACT:** Victims suffer regardless of whether they sustain visible physical injury. By definition, the absence of consent makes sexual assault an act of violence. The violation of trust that accompanies most sexual assaults has been shown to dramatically increase the level of trauma the victim suffers, and can cause harm that lasts much longer than most physical injuries sustained by victims. Even for the small percentage of victims who are visibly physically injured (Over 2/3 or rape victims (70%) reported no physical injuries; only 4% sustained serious physical injuries, with 24% receiving minor physical injuries), these emotional and psychological injuries can be devastating; in fact, the majority of these victims believed they would be seriously injured or killed. There are a lot of offenders who believe this, who convince themselves that, because they did not use physical violence, they were not really hurting their victims.

**MYTH:** Child sexual abusers usually find their victims by frequenting such places as schoolyards and playgrounds.  
**FACT:** Most child sexual abusers offend against children whom they know and with whom they have established a relationship. Approximately 90% of children know their abuser. Just as in the case of adult victims of sexual assault, child sexual abuse is not a crime predominantly committed by strangers. Child sexual abusers will typically attempt to gain the confidence of children and their parents (grooming) before they commit a sexual assault.

**MYTH:** Women “cry” rape.  
**FACT:** The truth is that approximately 8% of all forcible rape claims are labeled as unfounded. That percentage includes both false reports and unfounded reports, or reports for which insufficient evidence can be found to substantiate a charge – not necessarily an indication that the report is false. This rate is higher than the unfounded rate for other index crimes (which average 2%); however, since some sources estimate that only 16% of all sexual assault victims ever report the crime to police, it still appears that victims are much more likely not to report anything than to make a false report.

**MYTH:** The majority of sexual offenders are caught, convicted, and in prison.  
**FACT:** Only a fraction of those who commit sexual assault are apprehended and convicted for their crimes. Most convicted sex offenders eventually are released to the community under
A 1992 study estimated that only 12% of rapes were reported.¹⁴ According to the Bureau of Justice Statistics there were 209,880 rapes and sexual assaults measured in 2004. However, only 36% of all rapes and sexual assaults reported through the victimization survey were reported to the police.¹⁵ (No current studies indicate the rate of reporting for child sexual assault, although it generally is assumed that these assaults are equally under-reported.) The low rate of reporting leads to the conclusion that the approximate 265,000 convicted sex offenders under the authority of corrections agencies in the United States represent less than 10% of all sex offenders living in communities nationwide.¹⁶

**MYTH:**  All sex offenders are male.
**FACT:**  The vast majority of sex offenders are male. However, females also commit sexual crimes. In 1994, less than 1% of all incarcerated rape and sexual assault offenders were female (fewer than 800 women).¹⁷ By 1997, however, 6,292 females had been arrested for forcible rape or other sex offenses, constituting approximately 8% of all rape and sexual assault arrests for that year.¹⁸ Additionally, studies indicate that females commit approximately 20% of sex offenses against children.¹⁹ Males commit the majority of sex offenses but females commit some, particularly against children. This can create some challenges for us, because if we do have females on our case loads, often there are two few to create a treatment group and we have to seek alternative strategies for working with them.

**MYTH:**  Youths do not commit sex offenses.
**FACT:**  Adolescents are responsible for a significant number of rape and child molestation cases each year. Sexual assaults committed by youth are a growing concern in this country. It is estimated that adolescents (ages 13 to 17) account for up to one-fifth of all rapes and one-half of all cases of child molestation committed each year.²⁰ In 1995, youth were involved in 15% of all forcible rapes cleared by arrest – approximately 18 adolescents per 100,000 were arrested for forcible rape. In the same year, approximately 16,100 adolescents were arrested for sexual offenses, excluding rape and prostitution. The majority of these incidents of sexual abuse involve adolescent male perpetrators. ²¹ However, prepubescent youths also engage in sexually abusive behaviors.

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**The Importance of Understanding These Myths and the Consequences of Misconceptions**

(3 minutes)
Understanding these myths can make a tremendous difference in how we approach victims. The things we believe about sexual assault affect how we as professionals respond to victims and offenders and how we make decisions that contribute to, rather than compromise, victim and community safety. For example, increased understanding by the criminal justice system about the true nature of sexual assault – that it is typically committed by a known offender and without visible physical violence – has led to new methods of evidence collection designed to detect more subtle forms of force and resistance. Had we continued to believe that only victims with visible physical injuries were telling the truth about being assaulted, these new methods would never have been sought out, and our ability to prosecute sexual offenders would have remained limited.

There are other real consequences when the myths about sexual assault remain unchallenged. One consequence of holding misconceptions about sexual assault is that there is a tendency to question the credibility of victims who do not fit the stereotype of how victims “should” behave or who they are. For example, if we believe the myth that only men commit sexual assaults, we may not believe a victim who claims to have been assaulted by a woman. If police and prosecutors believe the myth that all offenders are strangers to their victims, they may be reluctant to pursue cases where the offender is known to, or perhaps even in a relationship with, the victim – regardless of the victim’s willingness to proceed.

When we don’t understand the misconceptions about sexual assault, we’re in danger of not realizing how they may affect and undermine our ability to work effectively with victims. Common myths about sexual assault can and have influenced criminal justice practice and have contributed to the sense of shame that is felt by many victims of sexual assault. For many years, charges were not routinely filed in cases where the victim and perpetrator were on a date because the myths that sexual assault was perpetrated by strangers and that it was unlikely that women could be sexually assaulted by someone known to them, among other myths, were so widely held. And it’s not just myths about victims that can adversely affect the system’s ability to respond to sexual violence – suspects who do not fit the stereotype of a “typical” sex offender (i.e., a “dirty old man” or someone who is mentally unstable) may be treated differently by the system because of these assumptions.

In our job as supervision officers, understanding these myths can help us in a number of ways. They can remind us, for example, that it is important to monitor both the casual and intimate relationships of sex offenders to ensure that they are not in situations where they can be grooming children. When we hear an offender claim that “it just happened” or “it was no big deal – I didn’t hurt her,” we can detect the myths at work and probe more deeply into the offender’s
explanations to consider what led up to the assault and take into account and respond appropriately to the non-physical injuries that are experienced by sexual assault victims.

**LEARNING ACTIVITY: CROSS EXAMINATION OF A ROBBERY VICTIM**
(40 minutes)

The following activity is designed to demonstrate or bring into relief the ways in which sexual assault as a crime is handled differently from other kinds of crime.22 Pay attention to the assumptions that are made about the victim of the crime and think about whether the questions you would ask would be different if the case involved sexual assault.

Cross Examination of a Robbery Victim:

1. Do this Learning Activity with a co-trainer or ask a member of the audience for assistance.

2. Provide a script for the co-trainer or audience volunteer.

3. The trainer should play the defense attorney.

4. The co-trainer or audience volunteer should play the victim.

5. Follow-up with discussion.

Discussion Questions:

1. How does this scenario about a robbery victim relate to perceptions of sexual assault victims (blaming them and saying they wanted it to happen or should have known better)?

2. Why are sexual assault victims more frequently blamed and not believed than victims of other crimes?

3. If a victim complies with the offender, does that mean she was not robbed (or sexually assaulted)?

4. Do people “ask” to be sexually assaulted and violated?

5. What would be a better, more supportive response to a victim of sexual assault?

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### Learning Activity Materials

**Cross-Examination of a Robbery Victim**

*NOTE: This handout can be made available to the audience after the Learning Activity, but it is not recommended to distribute it with the participant materials.*

**Use Slide #7**

Cross-Examination of a Robbery Victim

*NOTE: Watch out for attitudes that attempt to blame victims for being raped. Out of fear, people often try to distance themselves from victims by pointing out how victims “brought the assault/abuse on themselves.”

Personalizing the issue may be the only way to engender compassion for victims. If blame is expressed, probe the audience with such questions as: Haven’t we all, or someone we loved, at one time or another put ourselves in a risky situation? Does anyone deserve to be raped just because they exercised poor judgment?
TOPIC: ADULT VICTIMS OF SEXUAL ASSAULT
(20 MINUTES)

INTRODUCTION
(2 minutes)

Anyone can be a victim of sexual assault. As we will discuss later, the majority of known victims are minors, but sexual assault also occurs against adults of all ages, from young adults to senior citizens. Because of the differences in developmental capacity, experience, maturity, and expectations from others, adults and children can be expected to respond differently to sexual assault and to have different needs from service providers and from us. In these next sections, we will be talking first about the impact of sexual assault on adults and then about the impact of sexual assault on children. We will conclude with information about intra-familial sexual assault, which can involve both adults and children but which has unique dynamics that are important to explore.

As we discuss the impact of sexual assault on victims, we hope one thing will become clear: experiencing a sexual assault can affect the way victims, young and old, interact with their entire world, not just with the perpetrator of the assault.

Understanding how victims react to sexual assault will enhance your interactions with the victims with whom you come into contact in supervising or treating an offender. It will help you interpret information about the victim(s) given to you by the offender, which in turn can provide a basis for sound supervision decisions. Developing competency on victim impact issues enhances your efficacy in protecting victims, supervising offenders, and creating productive and mutually beneficial relationships with the victim advocacy community.

BARRIERS TO DISCLOSURE
(18 minutes)

We mentioned earlier that very few victims report the assault or abuse to the authorities. In fact, the majority of victims do not report their experiences to anyone, including families, friends, law enforcement, or medical personnel. Those that do report often wait anywhere from days to years to do so.

What are some of the reasons a victim may not report a sexual assault?

NOTE: Allow the audience to name as many reasons for non-reporting as they can. Write their answers on a flipchart or on a blank overhead slide. Watch out for attitudes that attempt to blame victims for the sexual assault or for their fear of reporting.

Possible answers include:
- Fear that they won’t be believed
Because these reasons for non- or delayed reporting can impact your interactions with victims in the course of supervising offenders, it’s important to be aware of them and to keep them in mind when you are working with victims and their advocates.

It is also important to remember that the victims that you come into contact with overcame these and other obstacles to report and follow up on the prosecution of the crime. Their experience with the criminal justice system may have been better or worse than they imagined. They may have gone into it knowing what they would encounter, or with a great deal of ignorance or innocence. They may be shocked by what they experienced, or pleasantly surprised. Their prior experience with the system will have a direct impact on how they experience their contact with you.

*Reasons for Non-reporting, Delayed Reporting & Withdrawal of Complaints*

Fear is a big issue for victims of sexual assault. The fears about the sexual assault that influence a victim’s reluctance to tell others, especially law enforcement authorities, include:

- Fear that no one will believe him/her.
- Concern that she/he will not be treated fairly by the criminal justice system or others.
- Fear she/he will be blamed because of alcohol or drug use.
- Fear of everyone knowing the private details of his/her life.
- Fear of retaliation by the offender or the offender’s friends and family.
- Emotional attachment to the offender. Fear of what will happen to the offender and not wanting to get the offender in trouble.
- In incest cases, the victim may be concerned about their family being broken up.
- Women who are in the country illegally may be especially likely to doubt that they will be treated fairly by the system, and may face fears of being deported, criminally charged for other activities, or having children removed from their custody if they...
disclose the abuse.
- Offenders will sometimes use threats to keep a victim from disclosing, often selecting threats that are very specific to the victim (revealing secrets, harming family members, etc.). The victim may fear that the offender will act on his threats.

Other factors that affect disclosure may include:
- Women failing to label coercive sex as sexual assault.
- There may be a failure to identify sexual assault by a friend or lover as criminal behavior.
- Victims may be unable to tell the whole story to the police because of memory loss (e.g., drug-facilitated rapes, disassociation during assault), discomfort with certain details, or illegal behavior that the victim may have engaged in prior to or during the assault (e.g., prostitution, drug use).
- The victim may want to put it all behind her/him. She/he may believe that the situation will go away if the process ends.

The myths we identified earlier may also directly affect a victim’s willingness to come forward. Victims risk significant and possibly permanent changes in their relationships with important people in their lives when they disclose sexual victimization. If friends or family believe the myths about sexual assault, they may blame, rather than support, the victim. It is not surprising, then, that sexual assaults are reported rather infrequently.

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<tr>
<th><strong>TOPIC:</strong> DIFFERENT VICTIMS, DIFFERENT IMPACT</th>
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<td>(30 MINUTES)</td>
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**INTRODUCTION**
(2 minutes)

Whether or not they choose to disclose the fact of the assault to anyone, victims of sexual abuse often experience a wide variety of emotional and physical responses to the abuse. These reactions typically manifest themselves immediately after the abuse and may continue, to some degree, for an extended period of time.

Sexual assault victims may experience one or all of these reactions at any time after the assault. For some victims, these reactions may become chronic. It is important to remember that victims may experience these different reactions in a very unpredictable manner. Outwardly, a victim may appear very self-possessed, or very expressive and emotional. Both are legitimate responses to their experience and should not be used to minimize the trauma of the

**NOTE:** It may be appropriate to remind the audience that while men can be victims of sexual assault, the large majority of victims are female; 1 in 6 females, compared to 1 in 33 males. (The numbers are closer.)
assault in any way. A sexual assault victim’s reaction will be affected by her sexual abuse history (if any), and individual coping mechanisms, support systems, emotional strength, and level of self-esteem.

RAPE TRAUMA SYNDROME
(8 minutes)

Some researchers use the term “Rape Trauma Syndrome” to describe a woman’s physical and emotional responses to being sexually abused. Becoming familiar with this information can help you understand and respond appropriately to the different reactions you may encounter from victims of rape with whom you have contact. It may also help you in explaining case decisions to your team, other criminal justice practitioners, or to offenders.

Rape trauma has both an acute and a long term phase. The three stages of the acute phase of Rape Trauma Syndrome are described as follows:

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<tr>
<th>The acute phase of Rape Trauma Syndrome includes:</th>
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<tr>
<td><strong>Physical reactions</strong> ranging from soreness, bruising, fatigue, difficulty sleeping, nightmares, headaches, loss of appetite, and flashbacks.</td>
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<td><strong>Emotional reactions</strong> including mood swings, fears, phobias, anger, desire for revenge, irritability, loss of control, and heightened sensitivity. While this may be difficult for others to understand, it is not uncommon for victims in this stage to be numb and appear outwardly calm and subdued.</td>
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<td>In the <strong>denial or recoil phase</strong>, the victim wants to forget. This stage of denial may cause the victim to avoid dealing with the trauma by not seeking medical care, not reporting the crime to the police, or not discussing it with others. For victims of sexual assault, engaging in familiar, routine tasks is more than avoidance; it is a way of reaffirming their sense of self and competency.</td>
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<td>The <strong>long-term phase</strong> of Rape Trauma Syndrome consists of:</td>
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<td><strong>Psychological reactions</strong> including dreams, nightmares, fears, and phobias. The victim may experience intense feelings of guilt, self-</td>
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> Use Slide #10
Rape Trauma Syndrome: The Acute Phase

> Use Slide #11
Rape Trauma Syndrome: The Long-Term Phase

when they include only children but are still mostly female.)

This particular research was done on women for that reason, and that is why we use ‘women’ here in talking about Rape Trauma Syndrome. It is not intended to ignore or minimize the experience of men who have been sexually assaulted.
blame, and anger.

*Social reactions* including change of residence, phone number, and disruption of relationships. You will find, if you have not already, that victims are often difficult to locate because of this type of reaction.

*Sexual reactions* ranging from a fear of sex to a marked increase in sexual activity.

Not all women will experience all of these symptoms and they certainly won’t experience them in the same way. Symptoms may vary in duration, frequency, and intensity depending on the woman, the nature of the abuse, and the woman’s ability to obtain support and treatment.
**ADULT SURVIVORS OF CHILDHOOD SEXUAL ABUSE**
(20 minutes)

The experience of childhood sexual abuse can make victims more vulnerable to additional abuse in their lives. Data from the National Violence Against Women Survey suggests that nearly 1 in 5 women who reported being raped before the age of 18 said they were also raped after age 18. By comparison, only 9 percent of the women who reported not being raped before age 18 said they were raped after age 18. In other words, it is quite possible that the adult victims you work with were victims of childhood sexual abuse as well. You may also find yourself supervising an offender who has been imprisoned for a considerable length of time, and whose child victims have grown to adulthood.

The coping mechanisms common in adults who experienced sexual abuse during childhood are similar to those developed by child victims. While these coping mechanisms may work for some child victims while they are still young, helping them to avoid some of the pain resulting from the assault, these mechanisms lose their effectiveness as victims reach adulthood. This often leads to increasingly dysfunctional and/or self-destructive behavior and beliefs that keep these victims isolated and out of healthy, functional relationships. These coping mechanisms account for what many people consider the difficulty of working with victims.

Just as with the myths about sexual assault and the barriers to disclosure, becoming familiar with the concept of coping mechanisms will enhance your ability to work with victims and to understand the important information they offer. Equipped with this knowledge, we are less likely to discredit victims based on behaviors that result from such coping strategies.

The most common coping mechanisms are as follows:

- **Minimizing**: “It wasn’t that bad.”
- **Rationalizing**: Explaining away the abuse.
- **Denying**: Pretending it didn’t happen or it had no impact.
- **Forgetting**: Repressing memories, either short or long term.
- **Splitting**: Separating the offender’s behavior from the offender.
- **Dissociation**: Leaving one’s body; feeling separate and unconnected.
- **Control**: Needing to control anything and everything.
- **Chaos**: Maintaining control by creating chaos.
- **“Spacing out”**: Not being present.
- **Super-alertness**: Avoiding surprises, always knowing what is happening.
- **Busyness**: Keeping very busy to escape.
- **Escape**: Running away physically or emotionally.
- **Mental Illness**: The line between fantasy and reality blurs.

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<th>Content</th>
<th>Trainer Notes</th>
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<tbody>
<tr>
<td><strong>ADULT SURVIVORS OF CHILDHOOD SEXUAL ABUSE</strong> (20 minutes)</td>
<td><strong>Refer to Handout</strong> Adult Survivors of Child Sexual Abuse Coping Mechanisms</td>
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**NOTE:** The objective of this discussion is to introduce to participants behaviors common in adult survivors, as they may encounter them in their work. Concentrate on the issues and ask if anyone has questions about the handout, but do not dwell on its content.

**NOTE:** This list is on the handout.
Content | Trainer Notes
---|---
- **Self-Mutilation**: Hurting one’s self; believing that physical pain is better than the emotional pain of abuse.
- **Addiction**: Temporary means of escape.
- **Isolation**: Cutting one’s self off from people; if no one is close, no one can hurt.
- **Relationship Addiction**: Going from relationship to relationship (may or may not involve sex).
- **Hypervigilance**: Being constantly alert and on edge.
- **Lack of trust**: in self and others.
- **Suicide Ideation and Attempts**: The ultimate (or final) escape.

NOTE: Allow the audience to offer several examples of how behaviors based on coping mechanisms can be misinterpreted.

**TOPIC: CHILD AND ADOLESCENT VICTIMS OF SEXUAL ASSAULT**

(30 MINUTES)

**INTRODUCTION**
(10 minutes)

Sexual assault has been called a “tragedy of youth,” because the majority of victims of sexual assault are 17 years old or younger. Whether you supervise juvenile or adult offenders, the victims you encounter will include a significant number of children and adolescents.

In some jurisdictions, your ability to interact with these victims may be limited. Organizations such as Child Advocacy Centers may manage the interview process with child-victims to ensure their emotional safety and the integrity of the information collected. Protective parents or guardians may also limit your access to child victims in less formal ways. Whether or not you interact directly with victims who are children or adolescents, understanding their experience can still enhance your ability to supervise offenders. You may find it necessary to educate parents about the sexual abuse their children have experienced in the context of explaining an offender’s supervision conditions. Parents may need help understanding how their children will act, or what behaviors may signal renewed abuse, following a renewal of some level of contact with an offender. Or you may need to make sense of information provided by the child or parent, or observed during a routine field visit.

In this next section about child and adolescent victims, we will look...
specifically at:

- Disclosure by children;
- Reactions that children may have given the type of sexual assault they have endured and their relationship to the perpetrator;
- Some common problems that are seen in children who have been victims of sexual abuse; and
- The effects of sexual victimization on children.

We’re also going to briefly review some of the theories about how children respond to sexual assault. As with the information we covered earlier about adult victims, understanding and assimilating this information into your work with child victims will enhance your effectiveness. It may assist you in making effective use of the information you receive from family, friends, or acquaintances of the offender in the context of supervision. It can help you develop a rapport with a child victim whose input you need to inform a pre-sentence investigation or supervision/release plan. And it will enhance your ability to work more effectively with victim advocates and/or your case management team.

Before we begin, I want to point out that there is more detail on the handouts in your materials than in the slides, and we encourage you to review all of the information when you have time. A few key points to keep in mind as we discuss children as victims of sexual assault are:

- Children will not fit neatly into any of the theories or categories presented.
- A child’s reaction to sexual assault will be affected by her/his age, cognitive development, self-esteem levels, support systems, styles of coping, emotional stability, and family reactions/support.
- Signs and symptoms are only warning signs and should not be used to assume sexual abuse has occurred.
- The absence of signs and symptoms does not mean a disclosure by a child is false.
- Children who have been sexually victimized may be more vulnerable to sexually dysfunctional or abusive relationships in the future due to their lack of appropriate and safe relational boundaries as children. It is especially important to protect these children from known offenders.

Finally, perhaps the most important thing to remember in our work with child victims is, like their adult victim counterparts, they are never at fault for the abuse perpetrated against them. Children have inherently less power than adults. Regardless of the motives ascribed to children by perpetrators and others through their cognitive distortions, offenders are always responsible for the sexual assaults they perpetrate against children.
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| **DISCLOSURE BY CHILDREN**  
(5 minutes) |  |

Child victims often feel ambivalent about their perpetrator, which can lead to ambivalence about disclosing the abuse. Children most often are sexually abused by acquaintances, immediate family members, relatives, friends and/or other members of the community who are known to the child. In many cases, the perpetrator is someone they care about, and have trusted. Although the perpetrators have been abusive, they may also have been nurturing and responsive to the child’s needs. The child may depend upon the perpetrator for food, clothing, shelter, attention, and/or emotional support. Whatever we, as adults, think about the perpetrator, the child victim’s experience is likely to be much more complicated. We should not be surprised, then, if a child expresses his or her mixed feelings.

Like adults, children who have disclosed their abuse have made a very difficult decision to come forward. They may have encountered outcomes that were better or worse than they imagined. They may have been implicitly or explicitly threatened with negative consequences if they disclosed, or may have been told directly “not to tell.” Children and adolescents are often not as well equipped as adults to discern which of the perpetrator’s threats are credible and which of their own fears are rational.

By the time we have contact with a child victim (or with their parent or guardian) the victim has experienced at least some of the consequences of disclosure. The perpetrator has been arrested; people in the family or community are aware of what has happened and may be experiencing shock, disbelief, or anger that can be directed at the perpetrator and/or the victim. Although the victim is no longer being abused, it is likely that whatever positive role the perpetrator played in the child’s life has ended. Depending on how adults have responded to the situation, the child may be feeling better or worse than before the disclosure.

Child victims may react to these changes in their lives in a number of ways. They may claim that the disclosure was a lie, in an effort to “backpedal” and undo the changes that their disclosure may have caused. They may talk about missing the perpetrator or about their feelings of fondness or love rather than anger, hurt, outrage, or relief that the abuse has stopped. They may express anger at the adults who intervened (including you), rather than anger at the perpetrator. These reactions are normal and should be accepted as such. They are not an indication that the system has made a mistake in prosecuting the perpetrator, or that the abuse was not particularly bad or harmful.
Theories of Children’s Responses to Sexual Assault
(10 minutes)

The Child Abuse Accommodation Syndrome has been used effectively to explain the patterns of behavior exhibited by children who have been abused. This might help you gain additional insights into the patterns of abuse in which offenders engage. Some of the behaviors observed during and after child victims have been sexually abused are:

- **Secrecy.** The child is threatened into silence and secrecy (e.g., the adult may threaten to hurt someone important to the child or tell the child that they will be abandoned completely if they tell).
- **Helplessness.** Offenders often exploit their power as adults over their child victims, and as a result victims are rendered confused and helpless when sexual abuse occurs. This helplessness may manifest itself in self-blaming or self-hating behaviors, with the child assuming responsibility for the abuse as a way to reassert some degree of power and control.
- **Entrapment and Accommodation.** Because disclosing the abuse often is not a viable option, children in sexually abusive situations learn to adapt to the situation in order to survive. This kind of accommodation can result in self-destructive attitudes and behaviors that may or may not be apparent. The victim may act like a model child or the neighborhood troublemaker, or may display some personality in between that enables them to feel like they have some control over their lives.
- **Delayed, Conflicted, and Unconvincing Disclosure.** When adolescents disclose abuse, particularly abuse which has occurred over a period of time, the behaviors they develop to deal with the abuse may be used to invalidate their disclosure. If their abuse has caused rebelliousness and/or conflict-oriented behavior, they may not be believed on that account. Adolescents may be driven to disclosure after a bad fight, conflict, or disagreement with the offender, and their disclosure invalidated as a means of seeking revenge. Even the model child who discloses may not be believed because they appear so normal and well adjusted.
- **Retraction.** A child or adolescent who discloses may rescind his/her accusation when they realize that all of their fears about disclosure turn out to be true (e.g., it causes tension in the family or they are not believed). The aftermath of disclosure often proves too much for most children to endure. They may believe that retreating back into secrecy will allow them to maintain the status quo in their lives.

Another theoretical framework that has proven useful in understanding the effects of sexual abuse on children is the Traumagenic Dynamics Theory. The Traumagenic Dynamics Theory examines why a child who has been sexually abused develops certain characteristics and how those behaviors may be related to...
specific types of sexual abuse or negative reactions to disclosure. In this theory, four categories of trauma are presented:

- **Traumatic Sexualization.** Traumatic sexualization occurs when the assault affects a child’s sexual development. This can result from abuse that involved bizarre sex or the fetishizing of the child’s body parts. Children may present with overly curious sexual behaviors, re-enactment of abusive acts, aggressive sexual behaviors, sexual dysfunction, sexual identity confusion, sexual fears, or addictions.

- **Betrayal.** The abuse may have damaged the child’s ability to trust. Betrayal may result when the child has been tricked or manipulated into sex, and can be characterized by clinging behavior, vulnerability to future abuse, social withdrawal, depression, and anxiety.

- **Stigmatization.** The child may feel stigmatized upon disclosing of abuse to family and significant others, particularly if the reaction by others is horror or disgust. Manifestations of this stigma can be characterized by low self-esteem, self-disgust, self-harm, guilt, suicide, shame, drug/alcohol abuse, and criminal behavior.

- **Powerlessness.** The child may feel a loss of control following sexual abuse, particularly when the child is tricked into sex or no one believes them when they disclose. Powerlessness may present as anxiety, sleep disorders, fears, hyper-vigilance, learned helplessness, becoming an abuser (to regain control), or re-enactment of the victim role in other areas of their life.

**NOTE:** The handout has more detail than the slides.

**NOTE:** There is a more complete explanation of the Traumagenic Dynamics Theory in an article in the Trainer’s Resources section, “The traumatic impact of child sexual abuse: A review and conceptualization” by David Finkelhor, the clinician who coined the term, and Angela Browne.
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| PROBLEMS THAT MAY BE SEEN IN CHILDREN WHO HAVE BEEN SEXUALLY ABUSED (5 minutes) | Refer to Handout PROBLEMS THAT MAY BE SEEN IN CHILDREN WHO HAVE BEEN SEXUALLY ABUSED  

NOTE: The handout provided lists some common problems that may be experienced by child victims of sexual abuse. It should not be necessary to go over them in detail, but merely to point out that it is useful for officers to have some familiarity with them, if only to be able to better interpret information that may emerge through contacts with other professionals, offender families, or community members who may have contact with the offender.  

There are other indicators that suggest that children may exhibit physical and emotional symptoms during or after the period in which they are sexually abused. These warning signs are only indicators that sexual abuse may have occurred and should be addressed appropriately. If you find yourself in a situation where you suspect a child has been abused, a professional should be sought for appropriate assessment. The list of these behaviors is on your handout. |
**TOPIC: INTRA-FAMILIAL SEXUAL ABUSE (60 MINUTES)**

**INTRODUCTION**

(5 minutes)

We have discussed in a very general way some of the myths and misconceptions about sexual assault, and the impact of sexual assault on adult and child victims. At this point, we will turn our attention to one of the most common and most complex types of cases facing supervision officers, intra-familial sexual abuse, or sexual abuse that occurs between two or more members of a family. Specifically, we will focus on the scope and dynamics of two types of intra-familial sexual abuse: incest and marital or partner rape.

When sexual abuse is occurring within a family, all family members are affected. The response of the non-offending family members to the abuse (i.e., denial, anger, support, etc.) can have a tremendous impact on the outcome for the victim(s) and the offender(s). Although there is always a violation of trust in cases of non-stranger assault, intra-familial sexual assault creates a very specific set of dynamics of which supervision officers should be aware.

Because we know that victims in general and incest victims in particular take huge risks in disclosing the facts of their abuse, it is particularly important to consider the impact on the victim any intervention with an incest offender may have, and to minimize the trauma to the victim. Practices such as removing a child victim from his or her home to ensure his or her safety may be expedient, but the message to the victim may be that he or she is being punished. Policies around community notification can have a tremendous impact on incest victims. Such decisions may be completely out of the control of the supervision officer, but to the extent that they are able, they should be victim-centered when considering such decisions.

To successfully manage sex offenders and ensure community safety, we must understand the many ways in which the lives of victims of intra-familial sexual abuse and their offenders are inextricably linked. The dynamics of these familial relationships often dictate their interactions, behaviors, actions, and decisions with and towards each other.

In today’s society, the definition of family varies greatly across cultural, religious, ethnic, and class lines. Families today can consist of two same sex partners and children, two opposite sex partners and children, extended families, single parent families, and more. It is

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The Role of the Victim and Victim Advocate in Managing Sex Offenders
Section 2: Understanding Sexual Assault from a Victim’s Perspective
Page 21
important to clarify the victim’s definition and/or concept of family, because the dynamics can apply, in varying degrees, to any set of relationships the victim considers family. While legal options may depend upon statutory definitions of family (and it will be important to be aware of what those are for any individual victim), it is the meaning and emotion attached to the relationships between family members that create and sustain the dynamics we’re discussing today.

CHARACTERISTICS: PARENT-CHILD INCEST
(10 minutes)

Today, professionals in the field of sexual assault recognize that intra-familial child sexual abuse, known as incest, is the responsibility of the offending parent or relative and never the fault of the child victim. We have come to recognize that children inherently have less power than adults and are not to blame for their abuse. When offenders describe the seductive behavior of a son or daughter, or insist that the victim sought out the sexual contact, it is important to recognize immediately the cognitive distortions and rationalization at work. It’s also important to remember that the boundaries between right and wrong, and good and bad, are distorted in an incestuous relationship. Children can become confused and may respond in some of the ways we discussed earlier, such as not disclosing or retracting accusations, particularly when the response from other family members to their disclosure is negative.

The following is a list of some of the family dynamics that may be present in cases of parent-child incest. Understanding these may help you understand the information you receive from victims and other family members involved in a parent-child incest case.

- It is not unusual for children to feel love towards the offender. This can be further complicated by physical, emotional, and economic dependence. Victims do not necessarily want the relationship to end; they just want the abuse to stop. They are forced to cope with the contradictory feelings that this love, dependence, and abuse evoke. This may manifest itself in ostensibly mixed messages from the child about the perpetrator and their experience of abuse.
- Secrecy is imposed by the perpetrator via threats and coercion. As a parent or parent-like figure, the offender will often enjoy some level of trust from the child. If the offender says that something bad will happen if the child discloses the abuse, it is likely that the child will believe this.
- Children react to the sexual abuse in a variety of ways ranging from acting out to becoming a model child. Some children – especially if they are an older sibling – may also focus efforts on protecting other children in the home.

NOTE: If you need more information about cognitive distortions by sex offenders, please see http://www.csom.org/train/treatment/long/03/3_3.htm for a discussion about common distortions held by sex offenders and how to address them.

>Use Slide #17
Family Dynamics in Parent-Child Incest Cases

NOTE: Because your audience may have experience with these cases, you may choose to invite them to participate by providing suggestions rather than lecturing from the list. In that case, you can use the list to fill in any points that are not offered by participants. You might pose the question: What are some of the dynamics or behaviors, particularly by the children, that you’ve noticed in families where there has been parent-child incest?
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<td>• Children may prefer the “special” attention of sexual contact –</td>
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<td>despite its painful aspects – to not getting any attention at all.</td>
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<td>Children need the attention of their primary caregivers to assist</td>
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<td>them in mastering essential developmental tasks.</td>
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<td>• Some children may not be aware that the sexual abuse they are</td>
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<td>experiencing is not “normal,” and may be caught in a confusing</td>
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<td>dynamic when the offender insists that the sexual contact be kept</td>
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<td>secret.</td>
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<td>• Some children may experience sexual gratification, intensifying</td>
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<td>their shame and self-blame.</td>
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<td>• Anger, rage, and helplessness may overwhelm victims, leading to</td>
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<td>self-abusive and/or outwardly destructive behaviors.</td>
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In addition to helping you process the information you receive from or about the family, your understanding of these issues may help you develop a rapport with the child victim. It may also help you to assist others in the family who are having a difficult time coping with the aftermath of sexual assault within the family.
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<td><strong>NON-OFFENDING PARENTS</strong> (10 minutes)</td>
<td><strong>NOTE:</strong> While women do commit acts of incest, most of the offenders under supervision are men, and therefore most of the non-offending parents the officers encounter will be female. For this reason, we use “she” when referring to non-offending parents.</td>
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When supervision officers work with an incest perpetrator, the individual they are most likely to have contact with is the non-offending parent. The disclosure of the offender’s behavior may be a surprise to a non-offending parent who was unaware of the abuse. Parents who were aware of the abuse may experience relief that the issue is finally out in the open. It may generate feelings of horror, rage, sadness, and/or guilt.

Regardless of the reaction, disclosure of the sexual abuse will signal major changes in the family, and non-offending parents may welcome the changes or forcefully resist them. If the non-offending parent is in denial about the abuse, the offender may find an ally in minimizing his behavior to himself and others (including supervision officers). That alliance may extend to disobeying the conditions of supervision. The impact on the victim can be enormous when the non-offending parent withholds support or refuses to believe the abuse occurred.

Supervising officers working with families in this situation may find that they represent the major changes the family must undergo and, as a result, may be treated according to whether these changes are welcome or not. The non-offending parent may welcome supervision officers as rescuers, or may treat them with contempt, or as a necessary but unwelcome presence. The observations a supervision officer makes in this situation may be very important both to the victim and to the success of supervision. For example, if notice is taken that the victim is not getting sufficient support, a supervision officer can provide referrals and/or access to appropriate victim services. Likewise, recognizing that an offender’s partner is in denial regarding the abuse can prevent the partner from being able to undermine supervision and help keep child victims safe.

When working with families under these conditions, supervision officers must take care to notice and interpret the behavior of non-offending parents. Understanding why non-offending parents exhibit certain behaviors can enhance the ability of the supervision officer to make decisions about how to work with the offender.

The following are some of the dynamics supervision officers may encounter in working with families where there is intra-familial sexual abuse:

- The victim may feel very angry towards the non-offending parent for not protecting him or her or, alternatively, for being the one to call in the authorities.
- The victim may experience feelings of divided loyalty between the offending and non-offending parent. Again, attachment to the

>Use Slide #18
Dynamics of Non-Offending Parents and Children
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<th>abuser does not mean the abuse did not occur.</th>
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<td>• The non-offending parent may be the victim of physical or sexual abuse perpetrated by the same offender. Many cases of incest involve concurrent battering of the non-offending parent. This experience will make the non-offending parent particularly vulnerable to threats and coercion by the offender. Coercion may be used to prevent disclosure of the abuse (the non-offending parent may have been threatened with harm if she disclosed what she knew) or to prevent disclosure of violations of the conditions of supervision. Non-offending parents who are victims of battering will benefit from referrals to domestic violence services.</td>
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<td>• Non-offending parents may be victims of incest and their own victimization may make them unable to identify the signs of sexual abuse in their child. This is not something that a supervising officer would be expected to be able to detect, but it is important to recognize that this inability to identify the abuse is not necessarily a willful form of denial.</td>
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<td>• Despite the sexual abuse, the emotional ties among family members are strong.</td>
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<td>• The non-offending parent may be dependent upon the offender (i.e., financially, emotionally, etc.). This may make leaving the offender difficult. By understanding the nature of the dependence, and being ready to provide referrals and resources to the non-offending parent, supervision officers can help minimize fear and denial and pave the way for a more successful supervision experience and better support for the child victim.</td>
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**DISCLOSURE OF PARENT-CHILD INCEST**

(5 minutes)

Incest is exceptionally difficult for children to deal with and causes them great emotional distress. As we discussed earlier when we spoke about child victims in general, supervision officers are likely to witness a range of responses by any given child to the abuse they have experienced. The following are some of the issues related to a child’s disclosure in incest cases.

- Children disclose at great risk to themselves and their families. Children often will not disclose for fear of breaking up their families. The trust of children who are being sexually abused is damaged, making disclosure that much more unlikely. Because their experience has taught them that they cannot trust the perpetrator – a family member whom they should be able to trust – they may no longer believe that anyone is trustworthy, including you, or other professionals to whom you refer the family.
- The pressure to recant following disclosure may be intense, as the child observes the disruption resulting from disclosure of the abuse, or the alleged perpetrator may be putting undue pressure.

>Use Slide #19

Child Disclosure in Incest Cases
on the child victim to recant. Though supervision officers are unlikely to be involved with the family at this stage unless they are doing pre-sentence investigations, recantations may come up later as an argument for loosening the restrictions on an offender’s behavior under supervision. Supervision officers should be aware that this is a common response by child victims, but should also be careful to ensure that the child is not being pressured by the perpetrator directly, or by someone else on the perpetrator’s behalf.

- Upon disclosure, a child’s style of accommodation or preferred coping mechanism(s) may be used to discredit his/her disclosure. For example, someone may suggest that a model child “couldn’t possibly” have been sexually abused. For purposes of effectively supervising the offender, supervision officers need to know that any reaction by a child victim of sexual assault is plausible.

- If the non-offending parent is placed at risk (risks to economic and/or physical safety, for example) by the child’s disclosure, she may not believe or support the child’s report of sexual abuse. When this dynamic is observed, supervision officers should be aware that this victim may be in particular need of outside support and services. Supervision officers should also be aware that the non-offending parent may need referrals and resources to address her dependence on or fear of the offender.
SIBLING INCEST
(10 minutes)

Supervision officers who work with juvenile offenders are probably already aware that many of them choose their victims opportunistically. This means that the victims of juvenile offenders are often family members, including siblings. Although statistics that document the incidence of sibling incest are not available, it is likely that sibling cases are largely unreported and that families choose to address them (or not) without outside intervention.

For those supervision officers who do not work with juvenile offenders, it is still important to be aware that sibling incest can often be a response to other forms of abuse being perpetrated against the juvenile offender. This other abuse may or may not be sexual in nature, even though the child acts out sexually. At the very least, sibling incest usually occurs in families where there is a significant amount of ongoing emotional dysfunction within and between various family members. Sibling incest may also be a sign of an unhealthy sexual environment, which may have implications for working with the adults in the household.

Some of the family dynamics in cases involving sibling incest with an older perpetrator and younger victim are similar to parent-child incest, and include:

- The victim typically has less power;
- The offender may use force or coercion against the victim, and may use threats to enforce secrecy;
- The victim may prefer getting special attention to getting no attention at all;
- The victim may not disclose for fear of what would happen to the offender or to the family, or out of fear that the family will not believe them;
- Parents may feel they are being forced to choose between the victim and the offender in responding to the victim’s disclosure. This can be very difficult for parents who continue to feel love and affection for both their children;
- The victim may not be aware that the situation is abusive – it may seem normal; and/or
- Non-offending family members can collude with the offender, reinforcing the denial or minimization.

**NOTE:** For more information about sibling incest see, for example, *Sexual Abuse by Vernon Wiehe.*

**>Use Slide #20**
Title Slide: Sibling Incest

**>Use Slide #21**
Similar Dynamics in Sibling Incest Cases
Dynamics that are unique to sibling incest are also worth noting:

- Like many juvenile offenders, sibling incest offenders are very likely to be victims of abuse themselves, sometimes from an offender within the family. In some cases, the victim of sibling abuse has also been a victim of parent-child incest.35
- Sibling incest perpetrators and victims are often residing in environments that are highly sexualized and are exposed to adult sexual behavior.
- It can be very difficult to distinguish sexual exploration or sex play from abuse, particularly when force or coercion is not explicit and the behavior is occurring among children close to the same age. This can lead to denial and minimization of the behavior, especially by the adults in the family. It is important to remember that just because force or coercion is not explicit and/or the children are close in age does not mean that the behavior is not abusive. Further investigation is necessary.
- Parents are often reluctant to recognize abusive behavior by one of their children or to take steps to address it. These parents may respond by “attacking the messenger” (i.e., blaming the victim, accusing the victim of lying, or acting angrily toward the victim).

For the purposes of supervision, the following dynamics are especially important:

- Parents of sibling incest perpetrators and victims can become extremely resentful of the intrusion of protective services, clinicians, and/or law enforcement into what they may view as a private family matter. This resentment may lead to minimization of the abuse. Parents may deny that they need outside help to stop their child’s sexually abusive behavior or that the behavior is sexually abusive at all.
- It is essential to involve parents in the treatment of both the offender and the victim. This will help parents to overcome their denial and their sense of being split by supporting one child over another. Ultimately, this can create the conditions for family reunification, if reunification is considered to be a viable option.
PARTNER AND MARITAL RAPE

(10 minutes)

It is also important to remember that intra-familial sexual abuse is not limited to abuse perpetrated by adults against children, or by children or adolescents against each other. Adults are also victims of intra-familial sexual abuse, perhaps better known by the phrase “marital rape” or “partner rape.”

Historically, marriage was considered to impart universal consent to engage in sex, whenever one of the marital partners demanded it. In more recent years, this belief has also been applied to couples that are not married but have an intimate relationship. The underlying assumption is that once an individual has consented to an ongoing sexual relationship, the right to decline sexual intimacy is forfeited.

These assumptions have been changing slowly. Although marital rape by force is now a crime in all 50 states if the offender used force or threat of force to gain the victim’s compliance, 33 states still allow husbands exemption from prosecution under certain conditions, such as if the wife is mentally or physically impaired, unconscious, asleep, or legally unable to consent.36

As we discuss the dynamics of what we are calling “marital rape,” keep in mind that these dynamics also apply to sexual assault occurring between co-habiting partners who are not married. While there are fewer legal barriers to obtaining a criminal justice response to sexual assault between non-married domestic partners, many of the same dynamics exist in non-marital partnerships, and may interfere with prosecution of the offense or the effective supervision of the offender.

It is worth noting that this form of intra-familial sexual abuse intersects in significant ways with domestic violence. Not only do victims of domestic violence report a high incidence of sexual abuse in their relationships, but sexual abuse victims who are abused by their intimate partners are often subject to the same types of isolation, control, and threats that exist in domestic violence relationships. It is important that strategies for working with offenders in this category address both the sexual abuse and the dynamics of power and control that are present and that can present real danger to the victim.

The following is a list of some of the dynamics of partner rape. If you have experience working with domestic violence perpetrators, these will probably be very familiar to you.

- Offenders utilize a variety of methods to control the victim, from threats and coercion to restricting access to the outside world, by limiting access to phones, cars, TV, newspapers, etc.

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<td>NOTE: States typically use one of three strategies to address the issue of spousal or marital rape: the majority removed the marital rape exemption from their rape laws; others replaced the exemption language with language stating that marriage is not a defense; others created a new offense called “spousal rape.”38 In some states, spousal rape parallels non-spousal rape, but in others there are differences, such as the ones mentioned in the text here. Attitudes, however, have been even slower to change than laws, and marital rape victims still face obstacles in using the criminal justice system to address their victimization. For more information, see the Web site of the National Center for Victims of Crime: <a href="http://www.ncvc.org">http://www.ncvc.org</a></td>
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<td>&gt;Use Slide #24</td>
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<td>Dynamics in Partner Rape</td>
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• Efforts to isolate the victim and demands on the victim to maintain secrecy often intensify over time, leaving a victim with fewer and fewer options and resources, less information, and less support.
• The pattern of abuse inflicted often includes periods of extreme violence followed by periods of calm, during which the victim may receive the offender’s loving attention, sincere apologies, and promises to stop the violence. This pattern can be extreme to moderate in its swings, leaving the victim confused, hopeful for change, and in a constant state of fear and anxiety. The pattern tends to accelerate and intensify over time.
• The abuse can last for a long time, which can erode the victim’s sense of self-esteem, control, and power over her own life.
• Options for escape become more and more remote over time as the victim’s resources and connections with others decrease.
• Children witnessing the abuse will also be required to keep the abuse secret, but may act out their feelings in self-destructive or other destructive ways.
• Offenders are often very successful at presenting themselves as upstanding citizens outside the abusive relationship, which can make disclosure extremely difficult and vulnerable to discredit.

Marital or partner rape, as well as other forms of abuse, may be occurring in a relationship with someone who has been convicted of another type of sexual assault. The following are issues relating to a woman’s disclosure of marital or partner rape, something to be aware of if you are noticing potential indicators of domestic abuse, or if you are trying to encourage an offender’s partner to speak openly with you:

• Threats and coercion are used to keep a woman in an abusive relationship, making it difficult for her to disclose the abuse. These threats are real and usually specific to that woman’s situation. They may include threats to economic security, to reveal a woman’s immigration status, to have her children taken away, or to hurt the children if she doesn’t comply.
• Victims may believe that enduring the abuse is an easier or better choice than experiencing financial ruin, homelessness, or social isolation.
• Women may be more likely to disclose that their husband is physically abusive than to disclose sexual abuse or rape in the relationship because of the stigma associated with disclosing sexual assault. The sexual abuse can be a source of profound shame and embarrassment for victims, more troubling and difficult to reveal than the non-sexual physical assaults.
• Some women view sex in their marriage as their “duty” and may not even consider violent or harmful sexual contact as sexual abuse. This sense of duty varies in intensity depending upon cultural values and expectations, which are some of many factors.

>Use Slide #25
Disclosure of Marital or Partner Rape
**Final Note on Intra-Familial Abuse**

From the victim-centered perspective, the most important thing to remember about intra-familial abuse is that what happens to the perpetrator directly affects the victim and other family members. Unlike the stranger assailant, or even the acquaintance assailant, the incest perpetrator is part of an ongoing network of kinship relationships, and most likely has played a significant role in the victim’s life beyond engaging in sexually abusive behavior. Decisions about contact and other supervision conditions will have important and long-lasting effects on the victim, the perpetrator, and other family members.

**TOPIC: THE IMPACT OF SEXUAL ASSAULT ON SECONDARY VICTIMS**

(5 MINUTES)

WHAT IS THE IMPACT OF SEXUAL ASSAULT ON SECONDARY VICTIMS?

(5 minutes)

A sexual assault may have a significant impact on other family members of the incest perpetrator and incest victim. Like the ripples created by our supervision decisions in intra-familial abuse cases, sexual assault itself can have far reaching effects. At the center is the person who was sexually assaulted, and the ripples – like the ripples created when a rock is thrown into a pond – represent the many people who may experience harm by knowing or caring for that person. These individuals include immediate family members, friends, relatives, acquaintances, and members of the community. Family members of offenders in non-incest cases are another category of individuals with whom you are likely to come into contact, and who may have difficulty dealing with the situation and their own reactions to it. The offender’s family may know the victim, and may be significantly affected by the experience of disclosure, criminal justice involvement, community stigma, and more.

The following is information about the secondary impact of sexual assault and issues to consider:

- Individuals close to the offender and/or the victim may experience reactions that are similar to victims. The intensity and variety of reactions may depend on their relationship with the victim.
- These individuals need to have their own support systems.
- They often need education about sexual victimization issues and about how they can best support the victims, such as what to say.

>Use Slide #26
Secondary Impacts of Sexual Assault
and do to be helpful and supportive.

- The revenge reaction of those close to the victim must be considered. Some victims’ partners may want instant revenge and threaten to harm the perpetrator. This reaction, which is a legitimate emotional response to the harm their partner has experienced, usually only serves to silence the victim further and requires them to focus on their partner’s anger and potential actions, and not their own response to the sexual assault.

- Individuals close to the offender and/or victim may have been victims of sexual assault themselves. Their own experiences and feelings may be triggered by the assault by, or of, their loved one, which can render them less able to help.

- The pain experienced by individuals close to the offender and/or the victim should never be underestimated.

You are likely to have substantial contact with individuals experiencing secondary impact from sexual assault in the course of your work with sex offenders, especially during interactions with a child victim. Recognizing the phenomenon and being prepared to validate the experience of these individuals, providing referrals as appropriate, and anticipating some of the same issues that you might face in working with the primary victims, will enhance your ability to work effectively with these individuals.

**TOPIC: CULTURAL COMPETENCY: RESPONDING WITH SENSITIVITY TO VICTIMS FROM ALL BACKGROUNDS**

(70 MINUTES)

**INTRODUCTION**

(2 minutes)

Because sexual assault has no ethnic, age, cultural, sexual orientation, religious, geographic, or gender boundaries, it is important to understand the differences in how sexual assault is experienced by victims from different backgrounds. We would like to briefly explore some of the factors that are likely to influence the way different victims experience sexual assault and the decisions that victims must make about whether and whom to tell about the sexual assault. This additional insight may be useful when you are making decisions about how to reach out to a particular victim or community of victims, or when you are trying to develop a rapport with a particular individual who may share some of the experiences we will be describing.

One way of thinking about this is in terms of cultural competence, a factor equally important for working with offenders as well as...
Seniors and People with Disabilities

(13 minutes)

We may have an image in our minds of who we think the victims of sexual assault are, but often that image – whatever it is – neglects two populations that are particularly vulnerable to sexual assault and abuse. People with physical and mental disabilities and the elderly are vulnerable in very distinct ways. The following section addresses some of the ways in which their vulnerability manifests itself and some of the issues they and you may face as a result.

Older Victims:

Older victims can be particularly vulnerable to sexual assault for a number of reasons:

- First, age-related physical conditions can increase a victim’s risk of serious injury when attacked while decreasing their ability to defend themselves.
- Additionally, physical coercion to comply with an offender’s demands can be more easily applied, and can also be less detectable (for example, bruising sustained during a sexual assault could be easily attributed to a fall).
- The social habits and patterns of older people may be predictable because of their reliance upon public transportation or other daily routines, which can make them particularly vulnerable to a planned attack.
- Limited incomes may limit an elderly victim’s choices in terms of both lifestyle and response to crime (for example, they may not have the option of moving to a new home to avoid contact with a perpetrator).
- Older victims may be reliant on caretakers who may be abusing them and may live in quasi-institutional settings where the staff who have decisionmaking power over their daily activities and medication are also the staff who are abusing them.
- Finally, having been raised in an age where sexual matters were not discussed, older victims may be reluctant or ashamed to tell anyone and keep silent.

**What this means for your work:** The concerns and needs of older victims of sexual assault have not always been well addressed, even by the victim advocacy community. Make sure you solicit the help of elder abuse specialists or others who work specifically with older victims of crime to ensure that you have taken relevant issues into account in designing your management plan for the offender(s). At a minimum, considerations might include providing large print versions of written materials for an elderly victim, limiting interviewing to an amount of time that will not overwhelm the victim, utilizing individuals of an age, gender, and/or ethnicity the older person is generally comfortable speaking with, and ensuring that you address their concerns about their safety in a way that is easy for them to understand.

*People with Mental Illness:*

For a mentally ill victim, the trauma of sexual assault may exacerbate their illness and their symptoms. Unfortunately, their illness can be used to discredit their disclosure, especially in the criminal justice system.

**What this means for your work:** Most of the time, you will not be able to distinguish between those who have a diagnosable mental illness and those who do not. If the illness is severe and/or they are not in treatment, you should not use this as an excuse to discredit them or ignore their concerns or input. Make sure your referral list includes traditional mental health service providers, as well as other counseling options for victims, like support groups.

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**NOTE:** For assistance in locating specialists in working with the elderly, call Eldercare Locator: 1-800-677-1116 or contact the National Association for Area Agencies on Aging to find the Area Agency on Aging in your jurisdiction: http://www.n4a.org/

>Use Slide #30
People with Mental Illness
### People with Physical Disabilities:

Physical disabilities often require individuals to depend on family members or paid caregivers for personal care. The privacy and intimacy of these relationships (needing assistance with bathing, for example) can leave the person with disabilities vulnerable to sexual violation. Limited mobility can make someone less able to self-defend or escape from an attack.

Additionally, communities of people with disabilities can be very small and insular, and options for personal care can be limited. This can make it especially difficult to disclose abuse and/or to avoid a perpetrator. Depending on the degree of disability, a person may have very few choices about where to live.

People with disabilities who are sexually assaulted can experience helplessness, and lose confidence in their ability to be independent. Those closest to them may become over protective.

**What this means for your work:** When you work with a victim with a physical disability, do not assume that the physical impairment lessens his/her understanding of the assault or their ability to communicate about details of the assault or the assailant. Speak to him/her directly, not to a family member or care provider who happens to be there. Make sure you take account of his/her safety needs in relation to the offender, since the disability may limit safety options.

### People with Developmental Disabilities:

Victims with developmental disabilities may not be able to understand the intent of the abuse and/or understand the options that are available to them to intervene. They may not understand sexuality or define what it means to engage in sexual behavior in the same way that someone without a disability might define these issues. Many can be easily manipulated because of their desire to be included or liked. They may be particularly reluctant to report for fear of not being believed or being blamed. If they are abused by their caretaker and are dependent upon that person, they may be particularly reluctant to disclose. In communities with few resources for the developmentally disabled, helping a victim find safety away from an abusive caretaker can be extremely challenging.

**What this means for your work:** The materials that you provide to other victims may not be prepared in such a way as to be accessible to people with developmental disabilities. If you need help communicating effectively with a victim and your victim advocacy allies do not have sufficient expertise in this area (and most do not),

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#### Trainer Notes

> **Use Slide #31**

People with Physical Disabilities

**NOTE:** Every state has a Developmental Disabilities Council. A full list of councils and contacts can be found on the Web site of the Administration on Developmental Disabilities: http://www.acf.hhs.gov/programs/add/states/ddcs.html.

> **Use Slide #32**

People with Developmental Disabilities
contact your local independent living center or other disability resource center for support. People with developmental disabilities may also need additional therapy or treatment to respond to abuse; perpetrators may need to be held accountable for these additional expenses.

**LIFE EXPERIENCES OF VICTIMS**

(10 minutes)

The following are some factors or conditions that are part of the lives of many victims. Like age and physical and mental ability, these issues will shape the way a person experiences sexual assault and the way they understand the options they have to respond.

**Survivors of racism/prejudice/homophobia:** In addition to experiencing similar feelings/emotions after a sexual assault as any victim might, people of color and members of religious and sexual minorities will also bring to their experience the additional burden of surviving racism and/or other forms of prejudice. Offenders will often use this fact to further frighten or manipulate a victim into remaining silent. (Some of the specific manifestations of this are discussed below.)

**Mistrust of criminal justice/medical systems:** Due to past treatment and targeting of people of color, victims of color will often not avail themselves of needed services.40 Gays, lesbians, bisexuals and transgender individuals are also suspicious of both the medical and criminal justice systems since they have often been, at best, invisible to them and, at worst, targets for misunderstanding and mistreatment. For immigrants who have come from countries where the criminal justice system is particularly corrupt, the system may not be considered as a potential resource at all. For all these groups, and others, a lack of health insurance may result in a failure to seek medical services, despite the fact that they could potentially be reimbursed through victim compensation or other resources.

**Reluctance to betray her/his community:** When a community has been mistreated or stereotyped, members sometimes prefer to keep problems to themselves, for fear of creating or reinforcing negative perceptions. For example, a man or woman of color may not report a sexual assault by a man of the same racial background to avoid fueling a common myth that men of color are more likely to commit rape. Since 90% of sexual assaults are intra-racial, meaning the offender and victim are typically of the same race, this is a very real concern.41

**Citizenship status:** Immigrant victims may be threatened with loss of citizenship or destruction of important documents if they disclose sexual assault. Fear of deportation may be worse than enduring the abuse. Victims may or may not be aware of resources available to

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them outside the public criminal justice agencies, and may be afraid to report to anyone, including health care providers, for fear that using any part of the system will be an obstacle to gaining citizenship or remaining in the country.

**Language barriers:** Sexual assault can be difficult enough to talk about in one's native language. Many agencies are not prepared to deal with different languages and therefore will have a difficult time communicating with victims who are monolingual in a language other than English, or who are fully competent in English but who are not comfortable using it to discuss sexual assault.

**Taboos:** In some cultures, sex is a taboo subject and thus extremely difficult to discuss in any direct way. In some cultures, disclosing that you have been raped brings shame to your entire family. Older victims, raised in a different era, may also have difficulty disclosing sexual assault. Other taboos, including homosexuality and HIV/AIDS, can prevent victims from asking for the help they need. Confidentiality may be particularly important to these victims, and criminal justice personnel will have to be very careful not to assume that family or other close associates of the victim are aware that they have been victimized.

**Anger:** Men and women may react differently to having been sexually abused. While men and women experience similar feelings of powerlessness and loss of control, men are not supposed to be helpless and may feel particularly ashamed of having been victimized, while in some cultures, expression of anger in women is considered unacceptable. Although men's responses to sexual assault may not always manifest themselves in the same way as women's, they are felt with equal intensity.

**Gender and Sexuality:** Men are usually assaulted by a member of the same sex. Because of homophobia, men who have been sexually assaulted by another man (whether or not the victim is homosexual) may have difficulty disclosing for fear of appearing homosexual or somehow having their masculinity or sexuality called into question. This same problem prevents men from getting health care. Male-on-male rape often involves considerable force and anal sodomy. Sexually transmitted diseases and HIV/AIDS are a real concern but men are afraid to raise this with health care providers. Women who are sexually assaulted by women experience a different obstacle, as many do not believe that women are capable of sexually abusing another person.

**Public Disclosure:** Many victims fear having their name appear on the nightly news or in the newspaper. They fear for their privacy, and fear that the stigma of sexual assault will negatively impact their lives and the lives of their loved ones. Other reasons to fear disclosure include: undocumented immigrants afraid of deportation; gays,
lesbians, and transgender individuals afraid of being exposed, and; people of ethnic or religious minorities afraid of the impact that their disclosure may have on their community if negative news reaches the larger public.

All of the above factors will play out differently for each individual, even those whom you might consider members of the same group or same community. You are not expected to become expert in working with victims in these various circumstances. What you can do is recognize that these factors will impact victims’ experiences, and think through any adjustments you will want to make in your protocols or practices to enable these victims to participate fully, and to benefit from the management strategies in place in your community.
LEARNING ACTIVITY: UNDERSTANDING THE VICTIM’S EXPERIENCE  
(45 minutes)

We have been talking about victims, but it is very important that we include the voices of victims in this work. See if you notice any of the themes or phenomena that we have been discussing as you listen to/watch the following. Try to pay attention to how these stories make you feel – whether anger, sadness, or anything else – because it is important for us to be aware of our own reactions and consider how they influence the way we do this work.

1. Show participants vignettes from a video that features different types of sexual assault survivors talking about their experiences. Strive to find vignettes that show a diversity of experience, such as child sexual abuse, adult sexual assault, assault by acquaintance, male, female, etc.

2. At the end of the video viewing, use the following questions for a brief discussion.

Discussion Questions:

1. What did you notice? What stood out? Can you explain why?

2. What surprised you, if anything? What did you expect that was different from what you heard or read? What did you learn that was new to you?

3. If you were going to summarize the content of this story or stories – for example, if you wanted to show the victim(s) that you heard what was important about what they were saying – what would you say? ("I heard her saying that ….")

4. How does the story (or stories) make you feel? Do you find yourself feeling angry? Sad? Disbelieving or suspicious? Numb (like you’ve heard it all before)? If you were dealing with this victim/these victims in person, how do you think your feelings would affect your interaction?

TOPIC: CONCLUSION  
(5 MINUTES)

There is a great deal to understand about the experience of sexual victimization, and though we have spent substantial time on the topic, we have in no way exhausted it. It serves as a reminder of why working with victim advocates is so important, since they are the experts in this field and bring a unique and necessary perspective to

Refer to Handout
Understanding the Victim’s Experience Discussion Questions
the management of offenders.

In the next section, we will be talking about strategies for working with victims and victim advocates, such as anticipating what some of their needs might be in relation to the supervision process and how we can meet those needs while keeping our focus on our own work.

This might be a good time to remind everyone to pay attention to your own reactions to this material. Many of us have experiences in our past that can be triggered by these discussions, and it is important to notice them and talk about them if that is what we need to do. Working with sex offenders and sexual assault victims is very difficult, and it is important that each of us take care of ourselves in order to be able to continue to do our work well.

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4 Greenfeld, L. (1997). *Sex Offenses and Offenders: An Analysis of Data on Rape and Sexual Assault*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.


6 Ibid.

7 Ibid.


11 Greenfeld, L. (1997). *Sex Offenses and Offenders: An Analysis of Data on Rape and Sexual Assault*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.


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