WHEN SOMEONE YOU KNOW HAS BEEN SEXUALLY ASSAULTED

It is often difficult to know what to do, how to respond, or where to tell the survivor to go for help. Friends and loved ones of the survivor may feel they don’t have a role in the survivor’s recovery because they don’t know where they fit into the process.

Many people have limited knowledge about sexual assault, which is often based on stereotypes that do not reflect the norm of what most survivors experience. Rape is an act of violence, power and control. Sex or sexual touching is the “weapon” used but the act is about control. The survivor has experienced a crime where control over the situation, and indeed the ability to make decisions about their own body, has been taken away. Rape is meant to humiliate and degrade the person violated, so regaining a sense of control is key in the survivor’s recovery process.

WHAT IS MY ROLE IN SURVIVOR RECOVERY?

In the immediate crisis phase after a sexual assault, the survivor may not be ready to begin “recovery” and may just want things to “go back to normal.” They may need a higher level of support from others, or they may not want to talk about it at all. These reactions are common for any kind of trauma or crisis, and even more common with assault because it is a very personal type of violation. Survivors also may not be ready to define what happened as “rape” or “assault.”

Your role as a support person is to help the survivor regain control over everyday decisions. Bring your authentic self to conversations. If you would normally joke with the person, that may be an aspect of support they look for and value from you. Surviving the situation is a testament to the person’s strength and that’s a good way for you to frame it. The person may not be able to see themselves as a “survivor” right away, though. Allow them to use whatever language they are comfortable with in discussing what happened, but also be ok with it if they don’t want to talk.

HOW MIGHT THE SURVIVOR FEEL?

It is natural for survivors to feel a tremendous loss of power and control over all aspects of their lives after a rape. Keep in mind that no two survivors have the same emotional reaction or behaviors.

Sexual Assault is NEVER the victims’ fault.
Common Survivor Feelings:

- Shock, Numbness
- Anger at the perpetrator or at themselves
- Loss of control, even questioning “am I crazy?”
- Humiliation, violation, degradation, betrayal
- Feeling dirty, damaged
- Sadness, Loss (of many things), Depression – in extreme cases, suicidal
- Fear of retribution if they report it or tell anyone
- Fear for safety, Anxiety, Nightmares
- Guilt, Shame, Self-Blame (for any choices which, if done differently, they think may have altered the course of events)
- Fear of being blamed by others (and real encounters of that often happen)
- Confusion, Loss of Memory
- Losing trust and faith in the goodness of others, feeling unsafe in the world
- Questioning their own judgment about everything

Possible Behavioral Changes:

- Changes in eating patterns - eating very little, stress eating, overeating (can even develop eating disorder – which is about having control over something)
- Changes in sleeping patterns – difficulty sleeping, sleeping all the time (keep in mind that sleeping all the time is a common sign of depression)
- Nightmares, anxiety over safety
- Not leaving their room/house, doing the minimal, not going to class or work or social events, withdrawing from friends or activities
- Not caring about their appearance, purposely wearing baggy clothing to avoid romantic attention
- Being more promiscuous
- Excessive drinking
- Excessive exercise
- Self-injury, cutting
- Signs of depression, suicidal risk factors
- Taking out anger on others, strong/exaggerated responses

Symptoms of Post Traumatic Stress Disorder:

In the first weeks, even couple months, after a traumatic event, these symptoms are common & normal responses. It becomes a possible PTSD diagnosis if symptoms persist over time. At that point, therapy to assess & address PTSD may be needed.

Reliving the event (re-experiencing symptoms)
Memories of the traumatic event can come back at any time. Survivor may feel the same fear and horror they did when the event took place. Examples:

- Having **nightmares**.
- Feeling like they are going through the event again, a **flashback**.
- Seeing, hearing, or smelling something that causes them to relive the event. The neuro-biological trauma response kicks in, causing a trauma response even when a trauma is not happening. This is called a **trigger**. Coming into contact
with stimuli that was present during the trauma can be triggering. Examples: News reports, smelling the perpetrator’s cologne, being in a similar room.

**Avoiding situations that remind them of the event**
The survivor may try to avoid situations or people that trigger memories of the traumatic event. They may avoid talking or thinking about the event. Examples:
- Avoiding crowds, because they feel dangerous.
- Avoiding a certain profile/race/ethnicity of person matching the person who assaulted them.
- Avoiding drinking or parties if they had been drinking or at a party when assault occurred.
- Avoiding romantic relationships or sex.
- Keeping very busy or avoiding seeking help in order to keep from having to think or talk about the event.

**Negative changes in beliefs and feelings**
The way they think about self & others changes because of the trauma. This symptom has many aspects, including the following:
- May not have positive or loving feelings toward other people and may stay away from relationships.
- May forget about parts of the traumatic event or not be able to talk about them.
- May think the world is completely dangerous, and no one can be trusted.

**Feeling jumpy (hyperalert, hyperarousal)**
The survivor may be jittery, or always alert and on the lookout for danger. Might suddenly become angry or irritable. This is known as hyperarousal. Examples:
- Difficulty sleeping.
- Difficulty concentrating.
- Easily startled by a loud noise or surprise.
- Intentionally sitting with their back to a wall in a restaurant or waiting room or at events.

**WHAT CAN I DO TO HELP?**

If the survivor talks about what happened with you, it is critical that you demonstrate that you believe them, regardless of what you may think privately. Remind the survivor that healing takes time.

- Listen. Be there. Communicate without judgment.
- Don’t question the details they share, as they may feel cross-examined or feel that you are questioning their honesty. Allow the investigators to do that job. Focusing only on sexual aspects of the rape may further traumatize the survivor, and is unnecessary. Remember that rape is an act of violence.
- Encourage the survivor to get support, preferably with a local Victim Advocate (different from police-based Victim Services). An advocate can explain all options, help consider pros & cons of each option, provide crisis support,
accompany the survivor to resources or set up appointments for them, and make referrals.

- If the survivor seeks medical attention or plans to report, and they are not working with an advocate, offer to be there. Your presence can offer the support they need, which they may not be able to seek from a family member or significant other.
- Be patient. There is no timeline for recovering from trauma. Avoid putting pressure on the survivor to engage in activities they aren’t ready to do yet. It may take weeks, months, years for the person to integrate this trauma into their life experience.
- Encourage them to practice good self-care during this time especially.

**Consider using these phrases:**

- "I’m sorry this happened." Acknowledge that the experience has affected their life. Phrases like “This must be really tough for you,” and, “I’m so glad you are sharing this with me,” help to communicate empathy.
- “It’s not your fault.” Survivors may blame themselves, especially if they know the perpetrator personally. Remind the survivor, maybe even more than once, that they are not to blame.
- “I believe you.” It can be extremely difficult for survivors to come forward and share their story. They may feel ashamed, concerned that they won’t be believed, or worried they’ll be blamed. Leave any "why" questions or investigations to the experts—your job is to support this person. Be careful not to interpret calmness as a sign that the event did not occur—everyone responds differently. The best thing you can do is to believe them.
- “You are not alone.” Remind the survivor that you are there for them and willing to listen to their story. Remind them there are other people in their life who care and that there are service providers who will be able to support them as they recover from the experience.
- “Are you open to seeking medical attention?” The survivor might need medical attention, even if the event happened a while ago. You can support the survivor by offering to accompany them or find more information. It’s okay to ask directly, “Are you open to seeking medical care?”
- “You can trust me.” If a survivor opens up to you, it means they trust you. Reassure them that you can be trusted and will respect their privacy. Always ask the survivor before you share their story with others. If a minor discloses a situation of sexual abuse, you are required in most situations to report the crime. Let the minor know that you have to tell another adult, and ask them if they’d like to be involved.
- “This doesn’t change how I think of you.” Some survivors are concerned that sharing what happened will change the way other people see them, especially a partner. Reassure the survivor that surviving sexual violence doesn’t change the way you think or feel about them.
- “I’m honored that you trust me enough to share this with me.” Let the survivor talk about their experience if they come to you.
- “It took a lot of strength & courage for you to... [seek help, report, tell me, etc.]”
• “You are having a normal response to an abnormal situation.” This will validate their reactions and help them feel more “normal” and less alone.
• “Whatever you did to survive was the right thing because it worked.” Some survivors beat themselves up about what they did or didn’t do. It’s important for them to understand that they were having a trauma response, much of which is dictated by the brain in a subconscious process that they are not even aware of. Focusing on their resilience & survival is affirming.

If they have reported to authorities, used a hotline, sought medical care, gone to counseling, sought financial assistance, sought housing assistance, had to tell a loved one, or their supervisor, then they have already had to retell the story multiple times, both in detail and in summary. Re-telling can be re-traumatizing and triggering. To minimize this, keep your own curiosity in check and only have them talk about it if THEY seem to want or need to tell you.

If they have not done any of these things, you can provide options. But it is imperative that you let the survivor decide whether or not to pursue these resources. You may even want to encourage certain steps if they haven’t considered them (medical attention for treatment of possible sexually transmitted diseases, pregnancy; advocacy or counseling services, support group, to assist in the recovery process). But be accepting of the survivor’s decisions. Remember, the survivor has been robbed of a sense of control over his/her own life. Making decisions on their own, no matter how minor, will help them begin to regain a sense of empowerment and self-determination. [Caveat: Over time, it may be appropriate to gently remind the survivor of resources if they haven’t utilized any. And if they seem to be emotionally deteriorating, then you may need to be more directive, or even provide a psychological intervention.]

Also, if you ask a lot of questions, they may feel that you are skeptical and blaming them. One of the most damaging experiences for survivors is having others perpetuate rape myths that she deserved it or asked for it because she was drinking, wore provocative clothing, didn’t lock doors, or voluntarily allowed herself to be alone with the perpetrator. Especially avoid traditionally victim-blaming questions that imply the survivor could have done things differently like:
  • What were you wearing?
  • Why did you go home with this person?
  • Did you say “no”? Call for help? Scream? Fight? Or why didn’t you...?
  • How much did you have to drink?

Don’t say what you would have done in the situation (to prevent it.) Ex: “I would have screamed, fought, kicked him in the crotch.” That will cause the same pain and make it clear that you just don’t get it.

Be cautious about how you share your own strong emotions – especially anger, unless it is clear that your anger is at the perpetrator. The victim may misinterpret your anger as directed at them. You don’t want to worry the victim that you might act as a vigilante and try to take matters into your own hands. That may worry them and won’t be helpful. You also don’t want them to feel they must be your caretaker if you are having a strong emotional response.
Avoid saying things like: “It’s ok” or “It’s going to be ok.” You may want to try to instill hope that things will get better by focusing on their strength or how they have overcome other obstacles in life. But it really isn’t “ok” right now for the survivor, so if you say that, they may conclude that you don’t see the situation as a valid or serious problem. People can’t just “get over it.”

Respect the survivor’s need for confidentiality and never share what they have told you with others, unless you have their permission. This is really important. Violations of privacy are trust violations, and this may make them feel violated all over again.

Keep in mind that you are not a counselor and you cannot take on responsibility for the survivor’s wellbeing. You can be a support, but within reasonable boundaries. It’s important that you refer the survivor to helping professionals and not allow them to excessively lean on you, call/text you all the time about the situation, in place of seeking professional assistance.

**Continued Support**

There’s no timetable when it comes to recovering from sexual violence. If someone trusted you enough to disclose the event to you, consider the following ways to show your continued support.

- **Avoid judgment.** It can be difficult to watch a survivor struggle with the effects of sexual assault for an extended period of time. Avoid phrases that suggest they’re taking too long to recover such as, “You’ve been acting like this for a while now,” or “How much longer will you feel this way?”
- **Check in periodically.** The event may have happened a long time ago, but that doesn’t mean the pain is gone. Check in with the survivor to remind them you still care about their well-being and believe their story.
- **Know your resources.** You’re a strong supporter, but that doesn’t mean you’re equipped to manage someone else’s health. Become familiar with resources you can recommend to a survivor (see end of document).
- **Remember that the healing process is fluid.** Everyone has bad days. Don’t interpret flashbacks, bad days, or silent spells as “setbacks.” It’s all part of the process.

**WHAT MIGHT I FEEL?**

When someone you care about tells you they’ve been sexually assaulted or abused, it can be a lot to handle. A supportive reaction can make all the difference, but that doesn’t mean it comes easy. You might feel overwhelmed. Don’t hesitate to seek outside support for yourself.

On campus you can call SOS (which is confidential and anonymous) or utilize other local confidential resources. Don’t ignore your own feelings. You may need to talk to someone yourself. But while you are with the survivor, avoid allowing your own emotions to take priority over the survivor’s.
You may feel:

- Pain, sorrow, disgust, self-blame (thinking you could have done something to protect the survivor)
- Sympathy or Empathy for the survivor
- Anger at the rapist(s); wanting revenge
- Protectiveness toward the survivor
- Impatience with the survivor's recovery process
- Frustrated with other's reactions to the survivor
- Frightened or Anxious about your own safety

Furthermore, if you are a survivor of sexual violence, this may activate some of your own feelings of victimization and you may want to revisit your own healing process. Or, it may activate any experiences and feelings of loss that you have struggled with in the past. It is important to stop, listen and attend to those feelings.

**WHAT CAN I DO?**

- Talk to someone you trust about how you are feeling. This may be a crisis for you as well and it is important that you respond to your emotional needs.
- Engage in self-care. Use healthy coping mechanisms that you have used in dealing with other crises.
- If strong feelings persist, you may want to talk to a counselor or attend some form of support group for friends & loved ones of survivors.
- Volunteer in an agency that works to stop sexual assault and other forms of gender-based violence.
- Educate yourself about sexual assault by attending relevant events – Sexual Assault Awareness Month programming, an S.O.S. or other related program in your building, read books, watch movies, take a Women’s Studies class.
- Confront sexism, heterosexism, and other forms of oppression. Confront sexist language and jokes about rape. Help to challenge and change others’ attitudes that allow the rape culture we live in to thrive.

**RESOURCES:**

- *Trauma and Recovery*, by Judith Herman, M.D.
- *Recovery from Rape*, by Linda Ledray
- *Fraternity Gang Rape*, by Peggy Reeves Sanday
- *Yes Means Yes: Visions of Female Sexual Power & A World Without Rape*, by Jaclyn Friedman & Jessica Valenti
- *The Courage to Heal*, by Ellen Bass & Laura Davis (childhood sexual abuse)
- *Allies in Healing*, by Laura Davis (for partners of survivors of childhood sexual abuse)
- *Victims No Longer: The Classic Guide for Men Recovering from Sexual Child Abuse* by Mike Lew
- *Why Does He Do That? Inside the Minds of Angry & Controlling Men* by Lundy Bancroft (IPV)
- *I Never Called It Rape*, by Robin Warshaw (original Mary Koss findings, 1984)
CAMPUS, LOCAL & NATIONAL RESOURCES:

Sexual Offense Support (S.O.S.) – 24 Hour Victim Advocacy: 302-831-1001, press 1 for SOS
Provides crisis intervention/victim advocacy for survivors of sexual assault, dating/domestic violence, sexual harassment & stalking, and for those assisting survivors. Clinician will take a first name & phone number and the advocate will call back within 10 minutes.  www.udel.edu/sos

Student Wellness & Health Promotion – During business hours: 302-831-3457

Center for Counseling & Student Development – During business hours: 302-831-2141 Individual and group counseling, as well as psychiatry services.  www.udel.edu/counseling

UD Helpline 24/7/365 – 24 Hour Helpline for psychological and emotional issues: 302-831-1001, press 1 for SOS, press 2 for immediate counseling assistance

Rape Aggression Defense (RAD) Course – Self Defense Class (for women only):  call 302-831-2222
Classes are $25.  See:  http://www1.udel.edu/police/services/index.html#rad-classes

UD LiveSafe App – Download the UD LiveSafe app on your phone for fast access to these resources.

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YWCA’s Sexual Assault Response Center – 24/7 rape crisis for New Castle County: 1-800-773-8570
http://www.ywcade.org/sarc

ContactLifeline – 24/7 rape crisis for Kent & Sussex Counties, & statewide Suicide Hotline: 1-800-262-9800
www.contactlifeline.org

Delaware Domestic Violence Hotline – 302-762-6110

Psychological Mobile Crisis Unit – will go to the person in distress during psychological crises and provide care, transport to inpatient treatment if needed: 1-800-652-2929

Survivors of Abuse in Recovery (SOAR) - a Delaware counseling agency specializing in sexual assault & relationship abuse. Services on a sliding fee scale & takes insurance: 302-655-3953
https://www.survivorsofabuse.org/

National Sexual Assault Hotline through the Rape Abuse & Incest National Network: 800.656.HOPE (4673) or via online chat at http://online.rainn.org.

National Domestic Violence Hotline – 1-800-799-7233 and online chat: http://www.thehotline.org/