

# SPECIAL CONSIDERATIONS FOR WORKING WITH SURVIVORS

## INTIMACY

Because sexual violence involves the use of sexual contact as a way to exert power and control, it often affects both sexual and non-sexual intimacy, including the development of new friendships and romantic relationships. Resuming intimacy will be different for every survivor, but should be a process that happens in a way that is comfortable for the survivor and allows her/him to be in control, especially in determining what happens and when.

### COMMON RESPONSES

Many survivors find they simply lose interest in sex and other forms of intimacy following sexual violence. For others, sex reminds them of the traumatic experience too much, so they want to avoid it as much as possible. It can be helpful to explain that this is a common reaction and normalize it. Encourage the survivor to talk to her/his sexual partner about these feelings, and perhaps to seek couples counseling. Suggest ways to be in control of intimacy and moving at a pace that is comfortable. When the survivor is ready to resume intimacy, it can also be very helpful to alter the environment (lighting, music, room arrangement) to feel more comfortable.

Sometimes survivors have the opposite reaction and seem to become compulsively interested in sex. Children and adolescents sometimes exhibit sexualized behaviors towards themselves or others, including compulsive masturbation, inappropriate touching of peers or other adults, or inappropriately sexualized language and thinking. Adolescents may exhibit increased sexual behavior and promiscuity. These reactions should also be normalized, but a referral to Rape Crisis Center or other experienced therapist is indicated.

### LONG TERM DEVELOPMENTAL CONCERNS

Children and adolescents who have experienced sexual violence may have difficulty with intimacy later in their lives. Often, sexual contact and intimacy act as triggers to rekindle behaviors, thoughts, and emotions associated with the assault trauma, particularly fear, anxiety, and avoidance. It is imperative that adolescents be told that such responses are not uncommon, and that they should talk to someone about their feelings at that time. Parents of children and adolescents should also be educated about this phenomenon, so that they will be able to support their children appropriately and help them address any needs.

Childbirth may also be an unexpected trigger reminding a survivor of past sexual violence. Health care professionals should be aware that the birth of a child may trigger both male and female survivors.

## CHILDREN & ADOLESCENTS

Children and adolescents who survive sexual violence have many of the same reactions as adults. However, they are more likely to express their feelings and thoughts through aggressive or destructive behavior towards themselves, peers, and other adults.

While children and adolescents may appear to have more behavioral responses, this does not mean they are not also experiencing emotional or cognitive reactions. It is imperative that children who are acting aggressively or who demonstrate sexualized behaviors be recognized as survivors and given support and encouragement to express such feelings in a safe environment. Responding to these negative behaviors with punitive punishment or “tough love” is not always productive if the behavior is related to coping with trauma.

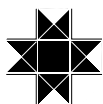
Appropriate discipline and reprimands should be given, but it is also imperative that support and acceptance be conveyed so that feelings of stigma, powerlessness, and worthlessness do not worsen. In general, it is beneficial for children and adolescent survivors of sexual assault to participate in individual therapy with experienced clinicians, who may be available through a Rape Crisis Center.

### CHILDREN'S ADVOCACY CENTERS

Services for children and adolescents may also be available through regional Children's Advocacy Centers. A Children's Advocacy Center is a child-focused, community-based program in which professionals from many disciplines come together under one umbrella to offer comprehensive services: law enforcement, child protective services, prosecution, medical and mental health. In order to better meet children's needs and increase successful prosecutions, Children's Advocacy Centers often provide:

- ◊ Child-friendly facilities for interviewing and providing other services to child victims and non-offending family members;
- ◊ Child sexual abuse medical/forensic examinations conducted by specially trained professionals; and
- ◊ Regular multi-disciplinary case reviews and intensive case follow-up.
- ◊ Professional therapy services, or referrals to such services.

For help with locating the Children's Advocacy Center in your area, contact (859) 261-3441.



## MALE SURVIVORS

Male survivors often deal with cultural bias to an even greater extent than female survivors. Male survivors frequently report feeling that they are not believed, not taken seriously, judged, assumed to have done something to invite the assault, assumed to be homosexual, and generally treated disrespectfully by law enforcement, medical providers, and other professionals. Many report feeling isolated, even among advocates working to end sexual violence, since the context is often the larger movement to end violence against women. Other special issues for male survivors may be related to the cultural construction of “vulnerability” as a “feminine” characteristic. A male survivor may feel ashamed for “not being a man,” because he could not stop the violence. Especially where sexual violence occurred during youth, male survivors may exhibit more high-risk behaviors, including: behavior and legal problems; alcohol and other drug use; use of prostitutes; unprotected sex; a high number of sexual partners; and/or suicide. Some fear that others will question their sexual orientation or “worry about being gay” if their bodies responded during the violence. It is essential that male survivors be helped to understand that neither vulnerability nor physical response is related to sexual orientation. It is critical that male survivors be given all the respect, support, and attention accorded to female survivors. Professionals must be especially vigilant about not perpetuating cultural myths or stereotypes that men can’t be raped. There are likely many, many more sexual assaults against males than are reported – providing good services to male victims and taking these crimes seriously is one way to encourage men to speak out.

## MARITAL RAPE

Sexual violence is often perpetrated in the context of intimate relationships, and as part of a larger picture of physical and emotional abuse. In such cases, survivors may not identify their experiences as “rape,” but still experience many of the same responses as other survivors. It may help to tell survivors that marriage does not mean that one person becomes the property of another, or eliminate one’s right to make choices about sexual intimacy. Instead, Kentucky laws prohibiting sexual violence also prohibit “marital rape.” Survivors assaulted by an intimate may also be especially concerned about: dangers of future violence (physical, emotional, and sexual); living arrangements for their families; economic realities of supporting their families; the safety and well-being of their families; and a myriad of other concerns. Because domestic violence often escalates when victims try to escape or otherwise seek assistance, these concerns must be taken very seriously. Additional information and support is available through regional Domestic Violence Programs throughout Kentucky. For help in locating the Domestic Violence Program in your area, contact the Kentucky Domestic Violence Association (KDVA) at (502) 209-5382 or visit [www.kdva.org](http://www.kdva.org).

## SURVIVORS WITH DISABILITIES

Survivors who have disabilities experience the same types of responses to sexual violence. The ways to help them are really no different from ways to help others, although adaptations may be necessary. In working with survivors with cognitive disabilities, never assume that they do not experience the same reactions as others. You can adjust the amount of information provided and it may be helpful to use materials intended for children and adolescents with adults with developmental disabilities. Issues of shame and stigma should not be overlooked. Deaf survivors should be provided with a highly skilled interpreter who is educated about sexual violence to ensure that there will be accurate and non-judgmental interpretation. Other types of disabilities may require additional adaptations, but information, support, respect and a non-judgmental attitude are always essential. See the following pages for additional information regarding disabilities.

## IMMIGRANTS AND OTHERS WITH LANGUAGE NEEDS

When working with immigrants and others for whom English may be a second language, professionals should take special care to ensure language accessibility and cultural sensitivity. Pursuant to Title VI of the Civil Rights Act, most professionals working in the public sector are required to provide professional interpretation services when needed. Though family members may volunteer, a competent and independent interpreter should always be used in order ensure accuracy and open communication. Always offer to provide an interpreter, as trauma can interfere with the ability to use second languages.

According to federal law, all services necessary to life and safety must be available to all individuals, documented and undocumented. Therefore, those who provide direct services to victims should not make inquiries about immigration or citizenship status as a condition for services. Avoiding such questions can also help to build trust among immigrants, who often experience heightened concerns about official intervention because of fear of deportation, bringing shame to their community, negative experiences with police in other countries, and a myriad of other reasons.

Undocumented immigrant survivors may also be eligible for protection as victims of crime under the U Visa provision of federal law, if they have cooperated in the investigation or prosecution of the crime. Immigrants who have been trafficked in the United States for sexual exploitation under force, fraud, or coercion, may be able to file for relief under the T visa provision of federal law. More information about these issues is available through the KDVA/KASAP Immigrant and Refugee Task Force at (502) 209-5382.

*Adapted from original work by Miriam Silman, MSW*

