A Practical Guide on the Special Needs of Sexual Assault Victims

Representing sexual assault victims is not for everyone. For the professionals who choose to take on this important work, the job requires common sense, an understanding nature, and an informed approach. By understanding the aftermath of sexual trauma, by listening closely to victims, and by respecting the feelings and rights of their clients, attorneys and advocates can have fulfilling and productive relationships with sexual assault victims.

What Is Sexual Assault?

Sexual assault is a violent and personal intrusion on an individual's body and life. Whether it is called sexual battery, sexual imposition, sexual offense, sex crime, sexual abuse, sexual molestation, sexual harassment, sexual exploitation, or rape, a sexual assault is an invasion of a person's inner space in the most threatening way possible. Sexual assault takes away a person's control over her or his own body. It takes away a person's most basic freedom—the freedom of choice. The level of violence varies from case to case, but the effects are similar on people who have been victimized in a sexual assault.

The Emotional Effects of Sexual Assault

Sexual assaults leave profound emotional scars on the victims. Recovery takes a lot of time, and is greatly enhanced by knowledgeable sources of support. Attorneys and advocates who are aware of the characteristics of the impact of sexual assault, and of post-traumatic stress disorder in particular, can help their clients in two ways. They can provide some of the understanding necessary to foster their clients' recoveries, and they can obtain from the victims the information and cooperation necessary to effectively represent and assist the victims.

The aftermath of sexual assault can be understood as consisting of different

phases. The first phase is the "acute" phase, and usually lasts from a few weeks to a few months. This phase is characterized by an overwhelming loss of power and control. The second phase of recovery is the long-term process of reorganization. This phase has been compared to veteran's long-term reactions to the horrors of war. Recovery in this phase can take anywhere from six months to the rest of a person's life.

Sexual assault takes away a person's control over her or his own body.

Short Term Reactions to Sexual Assault

Numbness and Denial

Immediately after their trauma, many victims report a sense that they had watched the attack from a distance. This is a classic shock reaction in which everything seems unreal. It is a bad dream, and when they wake up everything will be okay. Some people feel so strongly that "this couldn't have happened to me," that they deny that an assault even happened.

Self Blame and Guilt

Many victims blame themselves for the sexual assault. They feel they must have "deserved it" in some way. This phenomenon relates to our society's tendency to blame victims. (We tend to blame victims in order to feel safer ourselves. If a victim was raped after drinking in a bar in a bad neighborhood, we conclude that we will not be raped because we would never go to such a place.) Self-blame is also a result of the nature of sexual assaults. Many times

victims are made to participate in the crime itself. They have been forced to perform degrading acts, and sometimes to express pleasure. The victims submit because they have no choice, but afterwards they feel guilty for having complied.

Constant Questioning

Many people become hyper-focused on finding an explanation for why the crime happened to them. If they can figure out what brought on the assault, they feel they can prevent it from happening again.

Fear

Many victims are afraid of revictimization by their perpetrators. They are afraid of anything and anyone that reminds them of the assailant. They are afraid of being alone, and they are afraid of crowds. They are afraid of the police, the medical profession, the possibility of pregnancy or disease, the loss of their freedom, the reactions of their family and friends, the dark. The list goes on and on. Understandably, the victims feel they have lost all control over what happens to them.

Rage

Sexual assault victims are often very angry. This reaction is understandable. Their view of the world has been changed forever. Many victims report that they have lost all faith in people.

Feelings of Going Crazy

Because of extreme stress and anxiety, many victims report that they think they are going crazy. Often they misinterpret physical signs of anxiety such as aches, pains, sweaty hands, and rapid heart beat, and imagine that they are experiencing a serious illness.

Depression

Most often, victims of sexual assault are depressed and extremely upset. When the assault was perpetrated by someone the victim knew, the victim may suffer the additional burden of personal betrayal.

Long Term Reactions to Sexual Assault

Intense Anxieties and Fears

Many victims experience nightmares. Others gain or lose significant amounts of weight. Panic attacks can be brought on by any number of triggers such as seeing someone who looks like the perpetrator, or driving down streets near the place of the assault. Some victims have flashbacks that feel as if the attack is reoccurring.

Hyper-vigilance

Many sexual assault victims experience overwhelming urges to secure their environment. Some develop elaborate rituals upon returning home or at bedtime in which they check locks, search closets, and conduct reconnaissance tours of their living space several times before they can fall asleep. Other victims buy weapons and elaborate security systems. Sometimes fears become so intense that victims change houses or move to another city. Victims tend to believe that if they can control their surroundings, they will be safe. Although some of these behaviors seem logical considering what has happened, they are also symptomatic of severe anxieties that might be eased with group therapy or counseling.

Inability to Make Decisions

Some victims are so distracted and disoriented that they are unable to function as they had before the assault. Many focus on trivial matters in order to avoid thinking about the assault. They have lost confidence in their ability to make decisions, to manage their lives, or to face their problems.

Sexual Concerns

Some victims attempt to resume their sexual lives too soon. This is problematic if certain sexual acts remind them of the assault. Many relationships, unfortunately, are not strong enough to survive the aftermath of sexual assault trauma.

Cultural Problems

Victims are affected by the attitudes of their community. If the victim lives among people who believe that sexual assault is the fault of the victim, and if the victim also subscribes to this belief, then it will be especially difficult for the victim to recover. Recovery is easier for people who receive support and respect from their family, friends, and caregivers.

Strategies for Working with Victims of Sexual Assault

Cultivate Listening Skills

The most positive thing any victim can do to facilitate his or her healing from sexual assault is to talk to understanding and non-judgmental professional counsel. At first, talking allows for expression of the range of emotions the victim may have in reaction to the assault. Later, talking helps a victim to understand what happened, and to share it with the supportive people in his or her life so that they too can be available to help.

The most important thing a professional can give sexual assault victims is the respect they deserve. This can be done by listening to victims' concerns, and by letting them make suggestions and express their needs. Often solutions

or creative approaches can be found. Professionals should be aware of the particular concerns of "special victim populations." The literature is rife with information about child victims, elderly victims, male victims, disabled victims, rape in gangs, victims of spousal rape, gay and lesbian victims, and victims with specific cultural affiliations such as African American, Asian, Latino/Hispanic, Appalachian, and Native American, to name a few.

Be Aware of Communication Style

Communication techniques that may be effective in a competitive and fast-paced legal environment, may not be productive with victims of sexual assault. Many victims feel more comfortable with professionals whose manners are gentle and soothing, and who can speak slowly and softly. It is also important to make and maintain eye contact when speaking with sexual assault victims. Many victims need affirmation about the steps that they have decided to take in an effort to move on from the assault.





necessary to survive, and that it is good that they did survive. Point out examples of the victim's courage.

Accept the full range of a client's feelings. Do not try to cheer them up. There is no correct way to respond to a sexual assault. A statement like, "Things are not really that bad" feels more like a put down than reassurance to someone who is intensely upset. Let the victim know that her or his feelings are understandable under the circumstances. If an attorney is representing a sexual assault victim who needs counseling, the attorney should be ready to refer the client to local crime victim assistance programs.

Put Things in Writing

Many sexual assault victims are "in a daze" and will not remember a great deal of what they are told about their situation. Therefore, many advocates and attorneys who regularly work with sexual assault victims write a lot of letters to their clients to confirm and document important interactions with the clients. This practice helps to avoid confusion down the road, and the letters give victims something to focus on and ask questions about.

Inform Victims about Their Right to Confidentiality

It is a good idea for attorneys and advocates to begin their relationships with sexual assault clients by telling the clients about their rights to confidentiality. Concerns about confidentiality can take many forms, and there are many practices that can preserve it. For example, in the context of civil litigation, it is possible to negotiate voluntary protective orders which can prevent perpetrators from obtaining personal information about victims. Therapy records and other sensitive documents can be filed under seal. Lawsuits can be filed with the victim identified simply as John Doe or Jane Doe.

However, attorneys, advocates, and victims should be aware that even with these safeguards, communications between a sexual assault victim and a counselor may be discoverable in civil cases. Most, but not all states have statutes addressing the confidentiality of communications between assault victims

and their counselors. Even in the states that do have a privilege, the scope of the privilege varies widely, and attorneys must be certain to inform themselves of the scope of the privilege in the jurisdictions in which they practice.

As this article hopefully makes clear, representing sexual assault victims may require special sensitivities and strategies. However, if attorneys and advocates make the effort to educate themselves about the unique needs of this special client population, there is a great potential for a productive and meaningful working relationship.

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If a victim seems to want to take longer than the time allowed for an appointment, it is helpful to recognize such a need as soon as it becomes evident. No one likes to be cut off, but it can be particularly uncomfortable for a sexual assault victim. Not only can the victim feel unimportant, it can also be devastating for a victim to stop talking about the assault itself "in the middle." In talking about the assault, many victims need to tell their story from beginning to end.

It is important to be aware of body language and placement when interacting with a sexual assault victim. Many victims are highly sensitive and will pick up on any mannerisms that suggest discomfort on the part of the professional counsel. One should never touch a sexual assault victim without first asking for permission.

Be Careful About Asking Questions That Begin with the Word "Why"

It is important to let victims know that they did not deserve to be assaulted, and that the assault was not their fault. Pointing out their errors in judgment only serves to blame the victim. Questions like, "Why did you open the door?" or "Why did you go upstairs with him?" can be painful for a victim. While an attorney should be fully informed about all of the relevant facts of a client's case, the attorney should also be sensitive to how certain basic questions can affect a sexual assault victim client. It is helpful to remind clients that they did what was

1. See generally National Center for Victims of Crime, Rape in

Women and Children (1987).

4. See generally Report to Congress: The Confidentiality of Communications Between Sexual Assault or Domestic Violence Victims and Their Counselors—Findings and Model Legislation,

U.S. Dep't of Justice (1995).

^{1.} See generally Ivasional Center for Victims of Crime, rape in America: A Report to the Nation (1992).
2. See, e.g., Judith Herman, M.D., Trauma and Recovery (1997);
Linda Ledray, R.N, Ph.D., Recovering from Rape (1994).
3. See, e.g., Renitta L. Goldman and Virginia R. Wheeler, Silem Shame: The Sexual Abuse of Children and Youth, The Interstate Darville, Ill. (1986); Linda Davis and Elaine Brody, Rape and the College Warman & Guide to Departuring and Proposition. Peris Health. Darville, Ill. (1986); Linda Davis and Elaine Brody, Rape and the Older Woman: A Guide to Prevention and Protection, Dep't Health, Educ. & Welfare Pub. No. (ADM) 78-734 (1979); G.W. Josephson, The Male Rape Victim: Evaluation and Treatment, J.A.C.E.P., 8:13-15 (1979); Assault Prevention Training Project, Myths About the Sexual Assault of Persons Labeled Developmentally Disabled and/or Chronically Mentally Ill, National Assault Prevention Center (1982); Ruth Baetz, Lesbian Crossroads: Personal Stories of Lesbian Struggles and Triumphs (1980); C.C. Garcia, C. Destito, I. Mendez and M. Mercadeo, La Violacion Sexual - The Reality of Rape, AEGIS, (March/April, 1979); Valli Kuaha, Sexual Assault in Southeast Asian Communities: Issues in Intervention, in Response to Victimization of Women and Children (1987).