

SEXUAL VIOLENCE FACTS AND STATISTICS

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SECTION I

ACQUAINTANCE RAPE

ACQUAINTANCE RAPE

INTRODUCTION

Acquaintance rape occurs when a person known to the victim uses force to coerce the victim into having sex. At least 80% of all sexual assault is committed by an acquaintance of the victim. Legally, acquaintance rape carries the same penalties as sexual assault committed by a stranger.

High-school and college-aged women are the most vulnerable to acquaintance rape. The vast majority of sexual assaults on campus are committed by boyfriends, friends and acquaintances of the victim. A survey of 6,000 students from 32 colleges found that one of six female students had been a victim of rape or attempted rape within the preceding year. One of 15 male students reported committing sexual assault within the preceding year.⁸

Acquaintance rape often occurs on dates or at parties. It usually takes place in an apartment, car, or fraternity house. Drinking by the offender and/or the victim may play a part in the attack. Acquaintance rape at parties may be perpetrated by more than one man.

Cultural views on sexual relationships between men and women play a significant role in acquaintance rape. Many young women who were victims of attacks that met the legal definition of rape did not know that what happened to them was rape. Victims may believe rape can only be committed by a stranger, or may blame themselves for the rape. An offender may not realize that the victim's no meant no. Sex is often seen - especially by sexually aggressive males - as an inherently adversarial relationship. Their belief is that when women say no, men should insist. The result is miscommunication and aggression.

The best hope of ending acquaintance rape is through educational programs in which young people are taught that women and men should be treated with respect. Women have the right to say no to sex, in any situation - and men must accept that when women say no, they mean it.

STATISTICS

PREVALENCE

84% of all sexual assaults are committed by an acquaintance of the victim.¹⁵

57% of all sexual assaults occur during a date.¹⁵

60% of men raped by other men knew their attackers.¹⁵

AGE OF VICTIM

38% of acquaintance rape victims are 14-17 years old. The average age of all adolescent and college victims is 18.5 years. (MS. survey)¹⁵

Women aged 16-25 are three times more likely to be raped than other women.³

COLLEGE STUDENTS

20% of college-aged women will be victims of sexual assault at some point during their college careers.⁸

86% of sexual assaults involving college students took place off-campus, often in a fraternity house or apartment.⁸

In 55% of campus sexual assaults, the offender and/or the victim were drinking or using drugs.⁸

1% - 2% of all women on college campuses are raped by two or more offenders.¹⁰ 16% of completed rapes and 10% of attempted rapes are committed by multiple offenders. Gang rape is most often committed by fraternity men and athletes.

19.7% of reported campus sexual assaults in 1989-90 resulted in criminal penalties. 38.8% resulted in some type of punishment instituted by the college administration.¹⁴

MIDDLE SCHOOL AND HIGH SCHOOL STUDENTS

32% of sexual assaults occur when the victim is between the ages of 11 and 17.¹⁶

In a survey of high school students, 56% of the girls and 76% of the boys believed forced sex was acceptable under some circumstances. (Goodchilds)¹⁶

In a survey of 11-to-14-year-olds, 51% of the boys and 41% of the girls said forced sex was acceptable if the boy "spent a lot of money" on the girl; 31% of the boys and 32% of the girls said it was acceptable for a man to rape a woman with past sexual experiences; 87% of the boys and 79% of the girls said sexual assault was acceptable if the man and woman were married; and 65% of the boys and 47% of the girls said it was acceptable for a boy to rape a girl if they had been dating for more than six months. (Rhode Island Rape Crisis Center)¹⁶

In a survey of adolescent girls, 27% said they had unwanted sex because of psychological pressure. (Miller)⁹

OFFENDERS

1 of 12 male college students committed acts that met the legal definition of rape. (MS. survey)¹⁵

84% of men whose actions came under the legal definition of rape believed they had not committed rape. (MS. survey)¹⁵

In a survey of male college students, 51% reported they might rape a woman if assured they would not get caught. (Feshbach and Malamuth)⁸

43% of college-aged men admitted using coercive behavior to have sex, including ignoring a woman's protest, using physical aggression, and forcing intercourse. 15% acknowledged they had committed acquaintance rape; 11% acknowledged using physical restraint to force a woman to have sex.¹²

MARITAL RAPE

14% of married women said their husbands had used physical force or threat to try to have sex with them. (Russell)⁶

Women who did not finish high school reported four times more incidents of marital rape than women who received their diploma.⁶

Women sexually abused as children were three times more likely to be victimized by a husband.⁶

In 70% of the marital rape cases, the husband had been drinking.⁶

REPORTING ACQUAINTANCE RAPE

Almost half of the victims of acquaintance rape told no one of the attack; only 5% visited a rape crisis center.⁸

During a one-year period, 15% of all college students reported at least one incident of rape; 12% reported attempted rape.⁸

While students may report sexual assault to college officials, they often do not file criminal charges with the police. Fewer than 5% of sexually assaulted students reported the crime to police.⁸

IMPACT ON THE VICTIM

Victims of acquaintance rape often suffer serious, long-term psychological effects. Compared to victims of stranger rapes, acquaintance rape victims often blame themselves more, see themselves more negatively, and suffer more serious psychological problems. They often have difficulty trusting people in their relationships. It may also take victims a longer time to recover from the attack, particularly if it involved physical violence. Acquaintance rape victims are less likely to seek crisis services, tell someone, report to police, and seek counseling.

Acquaintance rape victims feel particularly vulnerable and unsafe, since they have found that even people they trusted can commit an act of violence upon them. Family and friends may not be a source of support for acquaintance rape victims, as they may be for victims of stranger rapes. If they tell friends or family, the severity of the attack may be minimalized, or the victim may be blamed for the rape.⁷

INTERVENTION

CRIMINAL JUSTICE SYSTEM

Acquaintance rape cases are extremely difficult to prosecute. Police officers may determine that the case cannot be proven, and so will not file charges. State's Attorneys may be reluctant to pursue a case of acquaintance rape. There are many reasons for this reluctance on the part of criminal justice officials:

- 1) Cultural attitudes about sexual assault. The myth persists that "real" rape is only perpetrated by strangers. This myth extends to both the criminal justice system and members of the general public. In addition, there remains a social stigma against women being in certain situations: in a man's home or car, or at a party, or engaging in drinking. The victim's conduct becomes an issue to juries.
- 2) Legally, cases hinge on the question of consent. Usually it is admitted that the sex act took place. It is difficult to prove in court that the victim did not consent. In most cases, there are no witnesses, making it a case of the victim's word against the offender's.
- 3) Socially, there are differences between how men and women perceive consent. Many men continue to believe that when a woman says no, she means yes. Some offenders do not realize they have committed sexual assault, though their actions meet the legal definition of the crime.

- 4) Most rape cases include consideration of the use of force by the offender. If a victim of acquaintance rape does not suffer physical injuries, juries may be reluctant to believe that the rape occurred.
- 5) The rape shield statute does not apply in situations in which victims have a prior sexual relationship with the offender. Therefore, a victim's past sexual history with the offender is admissible in court.¹

Marital Rape

Marital rape is rarely reported to criminal justice authorities. Although Illinois has abolished the spousal rape exemption in state law, usually only the most violent cases are prosecuted. Often the victim is separated or divorced from the offender at the time of the rape.

UNIVERSITY RESPONSE TO ACQUAINTANCE RAPE

Universities and colleges are often not prepared to handle acquaintance rape complaints. Most lack specific penalties for sexual assault, prosecuting instead under the student conduct code. The existing systems are usually not set up to handle the influx of increases in complaints that have taken place in the last few years. The university often does not have the means of ensuring confidentiality for the victim, leading to situations in which she/he is harassed by other students.⁴

Universities usually take one of three stances on acquaintance rape cases:

1. The institution condemns the incident but takes minimal action.
2. The incident is handled quietly, while the institution publicly pretends to take a tough stance on rape, through materials development, classes, etc.
3. The institution takes an aggressive stance against rape, through development of task forces, rape crisis centers on campuses, policies, and sanctions.²

Universities can improve their action on acquaintance rape cases by taking the following steps:

1. Be responsible to the victim. Offer legal information, support services, medical care, counseling, financial assistance, medical and court advocacy, and protection from harassment.
2. Investigate the charge. Establish who is responsible for investigation; keep records; ensure legal rights for the offender; ensure that officials are sensitive to the needs of the victim.

3. Establish a disciplinary procedure for offenders. Follow through on disciplinary action, even if the victim drops the charges. The disciplinary process should be adequate for a charge of this degree of seriousness. The sanctions for specific offenses should be specified. A policy should be made for dealing with an entire fraternity.

ACQUAINTANCE RAPE PREVENTION PROGRAMS

Acquaintance rape education and prevention programs greatly improve the chances of men and women seeking counseling for acquaintance rape, both as victims and as offenders. Cornell University cites a 450% increase in students seeking services after its prevention program was established.¹¹

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SECTION II

AIDS AND SEXUAL ASSAULT

AIDS AND SEXUAL ASSAULT

INTRODUCTION

AIDS - Acquired Immune Deficiency Syndrome - is a fatal disease which can affect anyone. AIDS is caused by the HIV virus, which is transmitted through blood-to-blood contact, body fluid to blood contact, and from a mother to an unborn or nursing child. Sexual behavior and IV drug use are the most common means of transmission of the HIV virus.

AIDS destroys the body's immune system, making people vulnerable to many types of infections and diseases. Women's symptoms often begin with recurring and/or severe gynecological problems, such as pelvic inflammatory disease, yeast infections, severe menstrual disorders, and cervical cancer. If a person's immune system is weakened by AIDS, these diseases eventually may cause death.

Victims of sexual assault who are penetrated orally, vaginally, or anally are at risk of contracting the HIV virus that leads to AIDS. It is impossible to calculate how many victims have become HIV infected due to sexual assault. If a rape victim is or has been sexually active, or has a history of IV drug use or other high risk behavior, it may be impossible to assess with certainty whether AIDS was contracted as a result of the reported sexual assault.

Sexual assault victims should be informed of the possibility of HIV infection. Many will be concerned about the risk of contracting the virus. It is important for counselors and others who work with victims to have accurate and current information about HIV, HIV testing and AIDS.

STATISTICS

LIFE EXPECTANCY

Forty percent of people diagnosed HIV positive will demonstrate AIDS symptoms within 5 years of infection. Once symptoms begin, women diagnosed with AIDS have shown an average life expectancy of four months. Men with AIDS symptoms live an average of 1.3-1.7 years.²

WOMEN WITH AIDS

According to the Centers for Disease Control, 15,000 women in the United States have AIDS. Of these, 72% are African American or Latina. Over 50% are IV drug users.⁵

By 1993, women will make up 15% of the people with AIDS. However, these figures may be at least 40% too low, because the Centers for Disease Control does not currently include many women's diseases as symptoms of AIDS.²

AIDS AND PREGNANCY

Because the placenta is a natural protective barrier, 70%-80% of HIV-infected women give birth to healthy babies.²

NUMBER OF SEXUAL ASSAULT VICTIMS WITH AIDS

There are no statistics on the number of sexual assault victims who contract AIDS through rape. It is often impossible to determine with certainty whether a rape victim was infected because of the sexual assault, or through prior sexual activity or drug use.

SEXUAL ABUSE SURVIVORS AND AIDS

One study found that survivors of child sexual abuse often engage in high-risk behaviors that lead to HIV exposure. These include substance abuse, prostitution, and having multiple sex partners.

Female survivors were four times as likely than non-survivors to have worked as a prostitute; male survivors were eight times as likely. Survivors were 40% more likely to have sex with someone they didn't know.

The study found that male survivors were twice as likely as non-survivors to be HIV positive; these men were not IV drug users. The female survivors in the study were only slightly more likely to be HIV positive.⁶

INTERVENTION

AIDS TESTING

When to Obtain an AIDS Test

Testing involves the detection of antibodies which react to the HIV virus. After infection, HIV antibodies appear within 2 weeks to 6 months, with 3-6 months the most reliable time frame. 90% of those who test positive will do so within 6 months of infection.

Positive HIV Test Results

A positive HIV test does not necessarily result in an immediate diagnosis of AIDS. For every 50 to 100 people who test positive for HIV, there are 10 persons with immediate AIDS symptoms that are not severe or chronic, and one person with AIDS.

40% of persons diagnosed HIV positive will contract AIDS within 5 years. Others may live up to ten years without contracting AIDS.

Test Procedures

In Illinois, anyone can receive an HIV test free-of-charge at a local Department of Public Health. An appointment should be made to be tested at the HIV antibody testing clinic.

Counseling will take place prior to the test. Counseling includes discussion of what the test means, at-risk behaviors, risk reduction behaviors, and how clients will be informed of the results of the test. Test results, either positive or negative, are given in-person at a return appointment in about two weeks.

During the test, blood is drawn from the client and analyzed. The first test is called the ELISA (enzyme linked immune sorbent assay) test. If this test is positive, it is performed again. If the result remains positive, the Western Blot test is performed, and if this test is positive, the person is considered seropositive to HIV.

Recordkeeping

Two types of records may be kept on people who receive an AIDS test: confidential and anonymous.

The Illinois Department of Public Health keeps *anonymous* records. People tested are given a code number under which all records are kept. The client never has to give her or his name. The information is stored in locked files and arranged chronologically. These files cannot be subpoenaed.

Confidential testing is done by clinics and physicians that are not connected with the Department of Public Health. These records are kept by name. Although these records should be confidential, they are not anonymous, because the patient's name is on file.

It is recommended that victims of sexual assault concerned about anonymity receive testing through a public health clinic.

WHAT COUNSELORS CAN DO

The National Institute for Drug Abuse suggests that counselors follow these steps with people who inquire about AIDS testing:

1. Review the risk of infection and the person's motivations for wishing to take the test.
2. Clarify that the test is for HIV antibodies only. A positive result does not mean that the victim currently has AIDS.
3. Explain the limits of the test results.
4. Help the person think about possible emotional reactions to the test results. Who would she or he need to tell if the results were positive?
5. Help the person reach a decision about testing.

A counselor may wish to help a person who is HIV positive by doing the following:

1. Assess the person's HIV positive status. Find out where, when and how testing occurred.
2. Does she or he currently have AIDS? What symptoms are exhibited, if any?
3. Discuss ways of reducing the possibility of transmission to others.
4. Provide information on maintaining and improving general health.
5. Refer the person to a support group.⁵

SPECIAL ISSUES

TESTING SEX OFFENDERS FOR AIDS

Prior to an accused offender's conviction, a sexual assault victim can ask the State's Attorney to request the court to order the defendant to be tested for the HIV virus. The test results are delivered to the judge in a sealed envelope. The judge has the discretion to determine whether the victim should receive the results of the test.

The costs of the test are paid by the county.

The Illinois Supreme Court has upheld the constitutionality of post-conviction HIV testing of sex offenders.

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SECTION III

CHILD SEXUAL ABUSE

CHILD SEXUAL ABUSE

INTRODUCTION

DEFINITION

Child sexual abuse is the sexual exploitation of a child by an adult, adolescent, or older child. The sexual activity does not necessarily involve force; children are often bribed or verbally coerced into sexual acts. The difference in age and sexual knowledge between a child and an older person makes informed consent to sexual activity impossible.

Sexual abuse includes a range of behaviors, including vaginal, anal, or oral penetration, fondling, exhibitionism, prostitution, and photographing a child for pornography.

INCEST

Incest is sexual relations between family members. Relatives may include parents, stepparents, siblings, uncles, grandparents, and other blood relations as defined by law. Incest constitutes abuse when the child is unable to give informed consent to sexual activity due to the authority of the relative, the child's dependency and lack of power, and/or the difference in ages between the child and the relative.

ADULT SURVIVORS

The term "adult survivor" is commonly used in social services to define an adult, male or female, who was sexually abused as a child. The phrase connotes the ability of an adult to move from being a "victim" to a "survivor," thereby overcoming the long-term psychological effects of the abuse.

HOW STATISTICS ARE COLLECTED

Governmental Statistics

There is no statistic on the number of reported child sexual abuse cases in the U.S., since the federal government does not monitor these figures. In Illinois, the Department of Children and Family Services records the number of sexual abuse complaints received by its hotline, and notes the number of reports confirmed by the agency.

Child protective service and law enforcement statistics do not present the full extent of child sexual abuse. Children often do not tell anyone of sexual abuse. If a child does disclose abuse, the information is often not referred to authorities. However, public education and prevention

programs seem to be improving the rate of reporting: in fiscal year 1990, 10,324 reports of child sexual abuse were called into the Illinois Department of Children and Family Services; in FY92, 130,550 reports were filed.

Studies and Surveys

The following fact sheet presents statistics gathered primarily from studies and surveys. These surveys were usually conducted with adults who relayed child sexual abuse experiences to the interviewer. Surveys regarding the prevalence of sexual abuse were conducted randomly, by telephone or in person. Studies on an aspect of sexual abuse (such as pregnancy and sexual abuse) were usually conducted using questionnaires with selected groups of individuals.

Because of the range of methods used and victims interviewed, there is some disparity between statistical results of different studies.

STATISTICS

PREVALENCE

One in three girls and one in six boys are sexually abused before the age of 18.¹⁴

From July 1991-June 1992, 130,550 reports of child sexual abuse were received by the Illinois Department of Children and Family Services (DCFS). Of these reports, 42,971 were indicated, or confirmed, instances of sexual abuse. In FY91, 107,307 instances were reported; 37,335 were indicated by DCFS.

In a 1991 survey conducted by the National Victim Center, 61% of adult women said they had been sexually assaulted before the age of 18. The random survey of 4,008 women included only cases involving penetration.¹³

A random survey of 2,627 men and women conducted by the *Los Angeles Times* found that 27% of the women and 16% of the men had been sexually abused as children.⁵

AFRICAN-AMERICAN VICTIMS

A study by Wyatt and Russell found that African-American victims of child sexual abuse are often more severely abused, with more use of force, than Caucasian children. The African-American girls also are more often abused by relatives other than their fathers; often the offender is an uncle. African-American girls are sexually abused at about the same rate as Caucasian girls.¹⁵

AGE OF VICTIM AT TIME OF ABUSE

The average age at which a child is first sexually abused is ten.

The National Victim Center survey found that 29% of child sexual assaults involving penetration occurred before the child reached the age of 11; 32% occurred between the ages of 11 and 17.¹³

The *Los Angeles Times* poll found the following percentages for a child's first incident of sexual abuse: 0-6 years old, 14%; 7-12 years old, 61%; 13-18 years old, 25%.⁵

INCEST

16% of girls are sexually abused by a family member; of these, 12% are abused before the age of 14.¹⁴

Of girls with biological fathers, 2.3% are sexually abused by them. 17% of girls with stepfathers are sexually abused by them. Girls with stepfathers are seven times more likely to be sexually abused than other girls.¹⁶

About one-third of boy victims are related to the men who molest them. 8% of boys are sexually abused by fathers or stepfathers.¹⁸

20-25% of incest is committed by a sibling, usually an older brother.¹⁰

MALE VICTIMS

About 70% of male victims are abused by men.¹⁸

83% of abused boys are under the age of 12; 26% are under the age of 6.¹⁸

OFFENDERS

93% of offenders who abuse children are men.⁵

One-third of convicted sex offenders were sexually abused as children.⁹

Most men who abuse boys define their sexual orientation as heterosexual.¹⁸

OFFENDER'S RELATIONSHIP TO THE VICTIM

31% of women surveyed were sexually abused by someone outside the family; of these, 20% were abused before the age of 14.¹⁴

Offenders outside the family are often acquaintances of the victim. In one survey, 11% were strangers; 42% were casual acquaintances; and 43% were boyfriends.¹⁴

PREGNANCY AND SEXUAL ABUSE

The rate of pregnancy among children and adolescents who have been sexually abused is significantly higher than that of non-victims. 66% of pregnant adolescents reported being sexually abused at some point in their lives, 62% prior to their pregnancy.²

11% of pregnant adolescents reported becoming pregnant as a result of sexual assault, mostly incest.²

PROSTITUTION AND SEXUAL ABUSE

66% of all prostitutes were sexually abused as children.

66% of sexually abused prostitutes were abused by fathers, stepfathers, or foster fathers. 10% were sexually abused by strangers.¹⁷

TYPE OF ABUSE

55% of sexual abuse involves intercourse; 36%, fondling; 7%, exhibitionism; and 1%, sodomy.⁵

IMPACT ON THE VICTIM

INITIAL EFFECTS

Psychological reactions that children exhibit immediately following sexual abuse include fear, anger, hostility, guilt and shame, low self-esteem, anxiety, early overt sexual behavior, and behavioral disturbances (such as running away and truancy).¹⁶

Sexually abused children often engage in behavior that is emotionally and physically dangerous. In one study, 10% of sexually abused adolescents exchanged sex for money; 9% exchanged sex for shelter; 7% exchanged sex for drugs or alcohol.²

Dr. Roland Summit has identified five stages that children go through following sexual abuse. Summit calls this pattern the Child Sexual Abuse Accommodation Syndrome. Children often go through the following emotional phases: secrecy, helplessness, accommodation (self-blame), delayed disclosure, and retraction.

LONG-TERM EFFECTS

Psychological effects of child sexual abuse often last into adulthood. Adult survivors of child sexual abuse may exhibit depression, anxiety, sleep disorders, dissociation, and low self-esteem.¹⁶ 40% of child sexual abuse victims seek mental health treatment after reaching adulthood.³

Survivors of incest may have particularly severe problems, especially if the offender was a father or stepfather.⁸ 53% of adult survivors of incest said the abuse caused "some" or "great" long-term psychological effects.¹⁴

The duration of sexual abuse affects the severity of psychological trauma. The following percentages of survivors called their abuse "extremely traumatic:" 73% whose abuse lasted more than 5 years; 62% whose abuse lasted 1 week - 5 years; and 46% who experienced one incident of abuse.¹⁴

The age at which the sexual abuse first occurred does not seem to affect the degree of trauma.⁸

Victims suffer more long-term trauma when they are sexually abused by adults, rather than adolescents.⁸

REVICTIMIZATION

Many victims of child sexual abuse are vulnerable to sexual assault as adults. Studies have found that child sexual abuse victims are at least twice as likely as non-victims to be sexually assaulted later in their lives. This may be because victims engage in behaviors that put them at higher risk for attack; or it may be that sex offenders sense vulnerability in victims.

63% of child sexual abuse victims reported being sexually assaulted as adults, compared to 36% of women who were not victims.¹⁶

College women who were sexually assaulted as adolescents had a 239% higher chance than non-victims of experiencing a completed or attempted sexual assault during their first year on campus.¹⁹

INTERVENTION

REPORTING SEXUAL ABUSE

Many children who are sexually abused do not tell anyone of the abuse. Often, the crime is never reported to the police. In one survey, 42% of all respondents who were sexually abused told someone of the abuse within a year; 21% told someone at some point after a year had passed; and 36% never told anyone. Only 3% reported the crime to police.⁵

In a survey conducted by Diana Russell, only 2% of incest cases and 6% of extrafamilial child sexual abuse cases were reported to the police.¹⁴

INDICATORS OF SEXUAL ABUSE

Parents, teachers, and others should be aware of behaviors that indicate a child has been sexually abused. These include:

- Alteration in a child's feelings, awareness, and behavior regarding sexuality.
- Sudden knowledge about sex, and/or strong reactions to physical contact - either withdrawal, or excessive sexual play. The child may pretend to have sex, or become sexually active, with other children.
- Regression to an earlier phase, either physiologically or behaviorally. This includes abrupt and significantly negative changes in sleeping habits, eating, school performance, bowel and bladder control, and/or social relationships.
- New interpersonal problems which may revolve around school performance. These include disciplinary problems, avoiding assignments, and/or withdrawal or aggression.
- Emotional distress, including worry, fear, sensitivity, nervousness, irritability, anger, and depression. The child may also exhibit stress-related physical problems.

SPECIAL ISSUES

MANDATED REPORTING

Some professionals who come into contact with the public are legally mandated to report child abuse, including sexual abuse, to child protective services. In Illinois, these professionals must report to the Illinois Department of Children and Family Services. Reports should be made to 1-800-25A-BUSE.

The following professionals are mandated reporters in the State of Illinois:

Medical: chiropractors, podiatrists, Christian Science practitioners, coroners, medical examiners, emergency medical technicians, registered nurses, licensed practical nurses;

Mental health services: crisis line or hotline personnel, social workers, social service administrators, registered psychologists, assistants of a psychologist or psychiatrist, substance abuse treatment personnel, domestic violence program personnel;

Education: school personnel, educational advocates, truant officers;

Law Enforcement: law enforcement officers, probation officers;

State employees: field personnel of the Illinois Departments of Public Aid, Public Health, Mental Health and Developmental Disabilities, Corrections, Children and Family Services, Human Rights, or Rehabilitation Services; supervisors and administrators of general assistance under the Illinois Public Aid Code;

Child care: directors and staff assistants of nursery schools or day care centers; foster parents, homemakers, or any other child care worker;

Recreation: recreational program or facility personnel.

In Illinois, mandated reporters who fail to report are referred to the State's Attorney. Physicians are referred to the Illinois State Medical Disciplinary Board. Professionals who are licensed by the Illinois Department of Professional Registration will be referred to that organization. Teachers and school personnel are referred to the Illinois State Board of Education.

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SECTION IV

**ECONOMIC COSTS OF
SEXUAL VIOLENCE**

ECONOMIC COSTS OF SEXUAL VIOLENCE

INTRODUCTION

It is impossible to assess the economic toll of sexual violence upon society. Public and private funds are spent on mental health services, medical treatment, and criminal justice services. Work days are lost because of injury and illness. Businesses lose money through sexual harassment suits. Victims pay for sexual violence out of their own pockets, and the public pays through provision of services to offenders, victims, and victims' significant others.

STATISTICS

GENERAL COSTS OF VIOLENT CRIME

There were 34.4 million criminal victimizations in 1990. Of these, 17.5% were violent crimes: sexual assault, robbery and assault. (Bureau of Justice Statistics)²

In 1990, \$19.2 billion was lost due to violent crime. Costs associated with sexual assault were \$63 million. These included medical expenses, lost pay, theft and damage, and other costs. (Bureau of Justice Statistics)¹

IMPACT ON THE VICTIM

MENTAL HEALTH SERVICES

Victims of sexual assault often receive counseling and advocacy services following an attack. Their significant others may also receive counseling. In 1991, the average yearly budget of a rape crisis center was \$249,791. (National Victim Center)⁶

Almost one-third of sexual assault victims suffer from rape trauma syndrome at some point in their lives. Symptoms of rape trauma syndrome may include major depression, suicide attempts, and drug and alcohol abuse. Victims may seek treatment at rape crisis centers, mental health centers, hospitals and substance abuse centers. It is impossible to estimate the cost of this treatment to victims and the public. (National Victim Center)⁵

LOST WORK TIME

19.5% of sexual assault victims lost time from work. Victims of acquaintance rape were somewhat more likely to lose time from work. 79% of sexual assault victims lost 1-5 days; 21% lost 11 days or more. (Bureau of Justice Statistics)¹

Six percent of all violent crime victims lost time from work: 18% lost less than one day, 50% lost from 1-5 days, 11% lost 6-10 days, and 15% lost 11 or more days. (Bureau of Justice Statistics)¹

THEFT AND DAMAGE TO PROPERTY

Crimes of violence often include theft and property damage resulting in direct monetary loss to victims. 30% of crime victims lost less than \$50; 11% lost from \$50-\$99; 16% lost \$100-\$249; 8% lost \$250-\$499; 15% lost \$500 or more. (Bureau of Justice Statistics)¹

15% of all sexual assault victims incurred a direct economic loss from the crime, mostly due to damage to property. (Bureau of Justice Statistics)¹

INTERVENTION

CRIMINAL JUSTICE COSTS

Criminal justice funds spent due to sexual violence include: law enforcement expenses, court costs, criminal justice personnel, public education, and incarceration of the offender. Sexual violence reported to authorities accounted for .7% of violent crime in the U.S. (Bureau of Justice Statistics)¹

In 1990, federal, state and local governmental spending for criminal justice activities was \$74 billion - an increase of 63% since 1985. (Bureau of Justice Statistics)²

Spending on criminal justice services in Illinois rose from \$1.8 billion in 1974 to \$2.7 billion in 1990. In 1990, \$230/year was spent per resident. (Bureau of Justice Statistics)²

In 1988, 15,562 felony convictions in state courts were for sexual assault. 87% of the offenders were given an average sentence of 15 years, 3 months, with an expected time served of 5 years, 11 months. (Bureau of Justice Statistics)¹

In Illinois, 10% of alleged child abuse cases involving a caretaker were cases of sexual abuse. Arrest rates for child sexual abuse in Illinois are expected to increase 10% between the years 1988-2000. (Illinois Criminal Justice Information Authority)⁴

Federal funding for foster care increased 600% from 1981-1991. (U.S. Department of Health and Human Services)⁵

MEDICAL CARE

Sexual assault victims require a range of medical services. These include emergency medical care following the sexual assault pregnancy testing; HIV testing; testing for sexually transmitted diseases; and, possibly, abortion. The total cost of these services is unknown.

31% of violent crime victims incurred medical expenses. Of these victims, 11% spent less than \$50; 20% spent \$50-\$249; 37% spent \$250 or more; and 32% listed their expenses as unknown. About 60% of violent crime victims received care in the emergency room. (Bureau of Justice Statistics)¹

64% of violent crime victims seeking medical assistance had health insurance or state-funded medical care. (Bureau of Justice Statistics)¹

SPECIAL ISSUES

COSTS OF SEXUAL HARASSMENT

In 1988, sexual harassment cost the typical Fortune 500 company \$6.7 million per year, or \$282 per employee. (Klein)³

Over two years, the U.S. government lost over \$267 million in diminished productivity and turnover due to sexual harassment. (U.S. Merit Systems Protection Board)⁵

90% of Fortune 500 companies surveyed received complaints of sexual harassment. Over one-third experienced lawsuits; over one-fourth had repeated lawsuits. (Klein)³

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SECTION V

PORNOGRAPHY

PORNOGRAPHY

INTRODUCTION

ADULT PORNOGRAPHY

"Pornography is about violence, degradation and abuse in a sexual context...it teaches people violence is sexy and good sex is violent; that women like to be sexually dominated and abused; that sexual contact with children is harmless; and that men are expected to be sexually aggressive." - Marie Fortune

"Pornography promotes a climate of opinion in which sexual hostility against women is not only tolerated, but ideologically encouraged. The intent is to deny the humanity of women, so that acts of aggression are viewed less seriously, and to encourage aggression." - Susan Brownmiller

"The term pornography refers to only one form of sexually explicit media: commercially produced sexual material that promotes and legitimizes a particular set of attitudes and behaviors based on abusive male power." - Marty Langelan and Deborah Chalfie

"Pornography is the ideology of a culture which promotes and condones rape, woman-battering, and other crimes of violence against women." - Laura Lederer

"Pornography has a central role in institutionalizing a subhuman, victimized, second-class status for women." - Catharine MacKinnon

"Pornography is the theory, and rape the practice." - Robin Morgan

"Erotic: a mutually pleasurable, sexual expression between people who have enough power to be there by positive choice...Pornography: its message is violence, dominance and conquest. It is a depiction of sex in which there is clear force, or an unequal power that spells coercion." - Gloria Steinem

CHILD PORNOGRAPHY

"Child pornography is...the depiction or portrayal of children for the purpose of sexual arousal...in both pictorial child pornography and writings such as paperback books with written descriptions of sexual activities involving minors." - Lore Stone and David Finkelhor

"Child pornography is the permanent record of the sexual abuse of a child. It is photographs of a crime in progress." - Kenneth Lanning

STATISTICS

PREVALENCE

Pornography is a \$4-\$6 billion/year industry in the U.S. (Women Against Pornography)⁸

There are more than 15,000 adult bookstores in the United States. (Attorney General's Report on Pornography)⁷

The pornography industry is larger than the commercial movie and record industries combined.

The circulation of *Playboy* and *Penthouse* - 24 million - is twice that of *Newsweek* and *Time* combined. (Task Force on Prostitution and Pornography)⁶

75% of video stores sell pornography, which makes up 50%-60% of sales. Profits from pornographic videos are at least \$100 million per year. (Women Against Pornography)⁸

The annual box office receipts for pornographic films total \$500 million per year. (Newsweek)³

More than 800,000 calls are made daily to phone pornography in New York City. (Attorney General's Commission on Pornography)⁷

PUBLIC OPINIONS ABOUT PORNOGRAPHY

57% of individuals surveyed by the *Washington Post* favored stricter anti-pornography legislation. Men and women responded differently: 10% of men found the laws too strict, 41% found them not strict enough, 47% found them just about right. Of women, 2% found the laws too strict, 72% found them not strict enough, 23% found them just about right.⁴

A poll conducted by *Newsweek* showed that 75% of respondents believed magazines showing sexual violence should be banned, and 68% believed films and videos showing sexual violence should be banned. 32% advocated banning x-rated videos, 50% advocated banning magazines portraying adult sex, and 40% believed there should be no public display of magazines with sexual content.

73% of those polled believed sexually explicit movies, magazines and books led some people to commit sexual violence. 76% said such media led people to lose respect for women. 67% said it led to "breakdown of public morals."⁴

A survey conducted by *Women's Day* found that 21% of readers were sexually assaulted as a direct result of pornography. 24% said they were forced to perform sex acts portrayed in pornographic videos and movies. 88% said that pornography encourages violence against women.⁴

PORNOGRAPHY AND YOUNG PEOPLE

Young people ages 12-17 were the primary purchasers of pornography. The average age at which an adolescent first views a pornographic magazine is 13½. Their first pornographic film or video is usually viewed at age 14½. 46% of junior high school students had viewed one or more x-rated movies. 66% of 6th graders had seen cable TV programs with heavy sexual content.⁴

IMPACT OF PORNOGRAPHY: PORNOGRAPHY AND SEXUAL VIOLENCE

Studies have established a link between the viewing of sexually violent and violent media and the commission of sexually violent acts. It is generally believed that pornography does not *cause* rape or child sexual abuse - but it does lower inhibitions in men already inclined to committing sexual violence. Viewing violent pornography and general violence against women also promotes beliefs in rape myths and increased tolerance for violence.

Pornography that does not include overt violence against women is less likely to encourage viewers to commit sexual violence, according to most studies.

DOES PORNOGRAPHY CAUSE SEXUAL VIOLENCE?

Dr. Nicholas Groth, a therapist and researcher who works with sex offenders, states: "I have seen 3,000 sex offenders in some capacity, and what has presented itself as influential in these people's lives has not been pornography. I cannot imagine any conditions during adulthood under which exposure to sexual media could *develop* a sexual interest in sexual aggression or in child molesting. I think either those inclinations are there or they are not there."⁵

Most offender treatment experts agree with Dr. Groth. They generally believe that offenders are motivated by their own childhood abuse and negative male role models.

However, there is evidence that pornography - particularly with sexually violent content - can lower inhibitions and encourage someone who wants to commit sexually violent behavior. According to Dr. Robert Freeman-Longo: "In essence, pornography says to the man: Here are the pictures; other people are doing it; the pictures are published; I can purchase them; so it must be okay to some degree."⁵

Dr. Diana Russell has testified that pornography contributes to sexual violence because it supports the four preconditions for sexually violent behavior developed by David Finkelhor:

- someone must want to abuse
- internal inhibitions are undermined
- social inhibitions to acting out are undermined
- the perpetrator must undermine or overcome the victim's ability to resist (by using pornography with victims)⁵

EFFECT OF SEXUALLY VIOLENT PORNOGRAPHY ON VIEWERS

"All sexually violent material in our society, whether sexually explicit or not, tends to promote aggression against women." - Edward Donnerstein

Below are the results of studies which have been conducted on the effects of sexually violent media on men:

- 25%-30% of men who view sexually violent media identify with the rapist. After only ten minutes of exposure to aggressive pornography, men are much more willing to accept rape myths. Men also accept ideas that women are excited by force and aggressiveness. (Donnerstein)⁵
- A group of men who watched five minutes of a video in which a woman was being raped and shown to enjoy it gave these responses: 25% said women they know would enjoy being raped; 57% would commit a rape if they wouldn't get caught. (Malamuth)⁵
- Media that depicts aggression against women but includes only sexual innuendo or little sex affects rape-supportive attitudes in men. After viewing five violent videos in five days, men, but not women, became desensitized to the violence. Their attitudes toward rape victims were less sympathetic than those of a control group that viewed non-violent, sexually suggestive, or sexually explicit films. (Attorney General's Commission on Pornography.)⁷
- In one study, three groups of men were shown the same film edited three different ways. Those who viewed a film showing violence against women showed the greatest acceptance of rape myths; those shown the film with both violent and sexually explicit content showed somewhat less acceptance of rape myths; and those shown the film with sexually explicit content showed the least acceptance of rape myths. (Donnerstein)⁵
- In one study, men began by viewing R-rated material, then viewed violent X-rated films, then viewed non-violent X-rated films. The study found: "Subjects find less violence against women in these films over repeated exposure. They are just as sexually aroused....They feel much less likely to censor the material, they are less offended by the material, they see it as less graphic and less gory, they look away less. What this

means is on the first day when they saw women being raped and aggressed against, it bothered them. By day five, it does not bother them at all - in fact, they enjoy it." (Donnerstein)⁵

- In one study, a group of men who watched a series of "slasher" movies took part in a mock rape trial. These men were more likely than a control group to acquit and excuse the defendant, place responsibility on the victim, and question the victim's resistance. (Krafka)⁵
- Adolescent boys who receive no other sex education may be particularly vulnerable to the effects of sexually violent pornography. (Stickrod, O'Brien)⁵

SEX OFFENDERS AND PORNOGRAPHY

Most experts believe that offenders utilize pornography, but the pornography does not lead them to commit the offense. Offenders use pornography to:

- serve a pre-existing disposition;
- meet emotional needs;
- facilitate and perpetuate the sexual assault cycle
- sexualize relations with victims. (Freeman-Longo)⁵

Pornography legitimizes abusive activity for men inclined to commit sexual assault. It may be used as part of the preparation for committing sexual assault. It helps offenders to depersonalize and objectify potential victims.

65% of rapists in one study used pornography, and often mimicked it in their crimes. (Scully)⁵

In one survey, offenders at an outpatient treatment clinic used highly explicit pornographic material more often than non-offenders. 83% of the rapists, 67% of the pedophiles, 53% of the incest offenders, and 29% of the non-offenders used pornography. (Marshall)⁵

In one survey, all the child sex abusers in one treatment unit had used some type of pornography:

- 14% - used commercial child pornography
- 16% - took photographs of children for personal use
- 49% - used adult pornography to seduce child victims
- 49% - used adult pornography for personal use (Wall)⁵

Pedophiles with a large number of victims are most likely to use child pornography. (Marshall; Abel)⁵

INTERVENTION

LEGAL ASPECTS OF PORNOGRAPHY

Current law

Adult Pornography

In *Miller v. California*, the U.S. Supreme Court defines obscene materials as those which: "...depict or describe sexual conduct. That conduct must be specifically defined by the applicable state law...A state offense must be limited to works which, taken as a whole, appeal to the prurient interest in sex, which portray sexual conduct in a patently offensive way, and which, taken as a whole, do not have serious literary, artistic, political or scientific value."⁴

Child Pornography

In *U.S. v. Ferber*, the U.S. Supreme Court found that there is clear harmfulness demonstrated in the production of child pornography. Because a child cannot consent to a sexual act, sexual abuse — a criminal offense — occurs during production of child pornography. According to the law, the protection of children is more important than free speech, and so child pornography is not covered under the First Amendment.

The MacKinnon/Dworkin Ordinance

In 1984, feminist scholars Catharine MacKinnon and Andrea Dworkin developed language for an anti-pornography ordinance which addressed pornography as a violation of civil rights. This ordinance, presented to the Minneapolis City Council, stated that pornography, because it discriminates against women, is a form of sex discrimination. Because pornography silences women and denies them freedom of speech, it is therefore not subject to protection by the First Amendment. Pornography, MacKinnon wrote, "undermines sex equality, a compelling state interest and legitimate concern of government, by harming people, differentially women." She cited group libel, privacy, child pornography and obscenity laws as legal precedents. The ordinance was vetoed by the Mayor of Minneapolis on the grounds of being too broad and vague.

The city of Indianapolis, Indiana passed a version of the MacKinnon/Dworkin anti-pornography ordinance. The U.S. District Court struck it down, ruling that the interest in prohibiting sex discrimination did not outweigh the interest in free speech. The U.S. Court of Appeals upheld this ruling on the basis that the ordinance was so vague that any work of art that portrayed women as submissive or domineered could lose the protection of the First Amendment. The Court stated that the Constitution forbids "a state to declare one perspective right and silence opponents." The U.S. Supreme Court affirmed the appeal court's ruling in 1986.

In 1992, a law based on the MacKinnon/Dworkin ordinance was upheld by the Canadian Supreme Court. Obscenity in Canada is now defined by the harm it does to women's pursuit

of equality. In its unanimous decision, the court clarified the obscenity law, stating that, "The portrayal of sex coupled with violence will almost always constitute the undue exploitation of sex. Explicit sex which is degrading or dehumanizing may be undue if the risk of harm is substantial."

Position of the American Civil Liberties Union (ACLU)

The ACLU "opposes any restraint on the right to create, publish and distribute material." It supports the right to "choose what materials one may read or view." As its policy, it does not evaluate the merit of the speech or urge its circulation.

The ACLU believes in "legally punishing the act that is the harm, not the content of the speech based on beliefs of how that content will affect the recipient."

WAYS TO OPPOSE PORNOGRAPHY

Robin Morgan proposes the following strategies to oppose pornography which are consistent with the First Amendment:

1. Use the logic that pornography interferes with civil rights, presenting a clear danger to women, inciting violence against women and violating public nuisance laws.
2. Limit distribution of pornography through zoning and display laws.
3. Discuss how men use pornography to pressure women into sexual activity.
4. Boycott advertisers, media and businesses that distribute or display pornography.
5. Picket businesses that display pornography.
6. Urge newspapers to resist advertisements from theaters that show pornography.
7. Research and expose pornographers and their backers.
8. Pressure public officials.
9. Resort to civil disobedience.²

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SECTION VI

**PREGNANCY, ABORTION, AND
SEXUAL ASSAULT**

PREGNANCY, ABORTION AND SEXUAL ASSAULT

INTRODUCTION

Issues surrounding pregnancy and abortion are very important to sexual assault victims and treatment providers, for two primary reasons:

- Sexual assault victims are concerned about the possibility of becoming pregnant following rape, and will likely want to know options for preventing pregnancy and/or terminating pregnancy; and
- Childhood victims of sexual abuse have a significantly higher rate of pregnancies in adolescence than do non-victims.

There are few statistics about rape victims, pregnancy and abortion. The statistics cited in this fact sheet were collected through studies of relatively small groups of women and adolescent girls.

PREGNANCY

Adults

Fear of pregnancy is one of the most common fears of both women and adolescent girls following sexual assault. 34% of rape victims in the National Victim Center survey feared becoming pregnant.⁷

Studies show differing rates of pregnancy among adults following sexual assault:

Of 4,500 rape victims examined in a District of Columbia hospital over a seven-year period, 1% became pregnant as a result of sexual assault. (Haymen)²

In another study, 3% of adult and adolescent rape victims became pregnant as a result of the sexual assault (out of 200 individuals). (MacDonald)²

Adolescents

Studies show that the rate of pregnancy among children and adolescents who have been raped is significantly higher than the rate of pregnancy among adults.

In one study, 11% of pregnant adolescents reported they became pregnant as a result of sexual assault, mostly incest.¹ Another study, conducted in 1969 with adolescents selected through social service agencies, also reached a figure of 11%. (DeFrancis)²

Adolescents who are pregnant have experienced a much higher rate of sexual assault and sexual abuse than adolescents who have not been pregnant.

The rate of sexual abuse and sexual assault among pregnant adolescents is higher because:

- pregnancy may be the result of sexual assault
- there is incest in the family
- because of social pressure, a girl may base her self-esteem on her sexuality
- sexually abused children have lower self-esteem and more emotional needs, which may lead to more sexual relationships
- the pregnancy may be planned to escape an abusive situation.

66% of the pregnant adolescents in one study reported being sexually abused or sexually assaulted at some point in their lives, 62% prior to their pregnancy. (In the general population, about 25% of girls under 18 are sexually abused.)¹

Sexually abused adolescents reported that their first sexual experience, whether consensual or non-consensual, occurred at an age younger than most adolescents — usually 13. Among the general population, the first sexual experience usually occurs at 16.¹

10% of sexually abused girls exchanged sex for money; 9% exchanged sex for shelter; 7% exchanged sex for drugs and alcohol. All of these girls had been previously sexually victimized.¹

54% of the adolescents had been sexually abused by a family member.¹

ABORTION

75% of Americans believe abortion should remain an option for all women.⁴

In the United States, about 30% of all pregnancies end in abortion.⁶

In a single year, more than a million teenagers become pregnant.⁶

40% of all American women become pregnant at least once before they turn 20. 40% of the teenagers who become pregnant choose to have an abortion.⁶

25% of all women and girls who receive abortions are under the age of 19.⁶

Nearly 70% of the women who obtain abortions in the U.S. are white.⁶

81% of women are unmarried at the time of the abortion.⁶

33% of the women obtaining abortions have family incomes of less than \$11,000.⁶

Women of all religious backgrounds obtain abortions. 33% are Catholic; 15% defined themselves as born-again Christians.⁶

The lack of Medicaid funding for abortions for low-income women results in a huge societal cost. When a baby is born to Medicaid-eligible families, the average government expenditure is \$6,750. The average cost of an abortion is \$200 to \$300.³

INTERVENTION

COUNSELING SEXUAL ASSAULT VICTIMS ON PREGNANCY AND ABORTION

Pregnancy

The chances of pregnancy resulting from a sexual assault are increased if a woman is not on any form of birth-control and/or she is near the middle of her menstrual cycle, between the 12th and 16th day before her next period is due. Women are least likely to become pregnant just prior to, during, and immediately after their menstrual periods.

An accurate pregnancy test cannot be given until about 6 weeks after the last period.

To determine whether a victim is at risk for pregnancy, consider the following questions:

- What was the gender of the assailant?
- Was there vaginal penetration?
- Has the woman had a tubal ligation or hysterectomy?
- Is she taking oral contraceptives or does she have an intrauterine device?
- At which stage is she in her menstrual cycle?
- If the rapist was an acquaintance, is it known if he had a vasectomy?

DES - Morning After Pill

A counselor may discuss with a victim the option of taking diethylstilbestrol (DES) or Ovral to prevent pregnancy that could occur from sexual assault. DES is synthetic estrogen; Ovral is a birth control pill. Neither drug has been approved by the FDA as a preventive for pregnancy; physicians, however, are allowed to prescribe them.

DES, or the morning after pill, is usually prescribed in 5.0 mg. tablets. Five tablets are taken twice daily for five days. The physician should ensure that the use of DES is not contraindicated by other medication the victim is taking. To be effective, DES must be taken within 72 hours of intercourse. Menstruation should begin within seven days after the pills have been taken. If menstruation does not occur, the woman should immediately consult her physician.

DES reduces the chance of pregnancy to less than .03 percent. However, women who take DES usually experience one or more of its side effects: nausea, vomiting, abdominal pain, lack of appetite, diarrhea, dizziness, headaches, anxiety, and allergic reactions. DES may also cause side effects in women with liver, kidney or heart disease, and can aggravate conditions of epilepsy, migraine headache, asthma, and cardiac or renal dysfunction. Women who should not take DES include:

- women who are pregnant;
- women who have tumors in the breast or reproductive organs, or who come from families with a history of such tumors;
- women who are subject to blood clots;
- women who have high blood pressure;
- women who are breast feeding babies.

Controversy surrounds the use of DES, which has been linked to cancer of the uterus. The FDA stated, "There is no data for specific studies establishing any minimum safe amount for the ingestion of DES." It is uncertain whether DES given for five days is carcinogenic.

If a victim has any reason to believe she may already be pregnant prior to sexual assault, she should avoid the use of DES. DES can cause cancer and other conditions in children of women who use DES during pregnancy.⁸

Ovral

Ovral is a birth control pill. The prescribed treatment to prevent pregnancy is two pills taken within 72 hours of intercourse, and two more pills taken 12 hours later. Trials indicate a failure rate of .16-1.6% (compared to the 5% pregnancy rate from random intercourse). The hormone dosage is much lower than that of DES, and the side effects are minimized. Menstruation should begin within two weeks after the Ovral is taken. If bleeding does not occur, a pregnancy test should be given.⁸

Abortion

A victim who becomes pregnant as a result of sexual assault may wish to have an abortion. A counselor may provide victims with information about abortion, and referrals to agencies which provide abortions or abortion information.

In keeping with its policy of providing victim-centered services, the Illinois Coalition Against Sexual Assault has a pro-choice position on abortion. ICASA also opposes laws that restrict teenagers' access to abortion. These laws include parental notification, parental consent, and waiting periods prior to abortion.

ICASA also supports overturning the "gag rule" which bans the dissemination of abortion information at federally funded clinics.

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SECTION VII
PROSTITUTION

PROSTITUTION

INTRODUCTION

Most prostitutes have been victimized, at some point in their lives, by sexual violence. More than 90% suffered childhood sexual abuse, often incest. Many others have been sexually assaulted in the course of working in prostitution. About 75% were violently raped as adults in situations not involving their work.

At least two-thirds of prostitutes began working in prostitution before the age of 16. Young women and men often enter prostitution as a way of escaping an abusive home situation. They see prostitution as their only means of survival.

STATISTICS

ADULT PROSTITUTION

Number of Women and Girls Who Work as Prostitutes

One million women and girls work as prostitutes. (Akers)⁵

One percent of US women have worked as prostitutes at some point, with 4 years being an average length of career. (Lockett)⁴

There are 100,000 arrests annually for prostitution. (Bureau of Justice Statistics)⁵

Of women held at the Cook County Jail over a one-year period, about 75% were first arrested for prostitution. (Genesis House)⁷

Family Backgrounds of Prostitutes

Two-thirds of prostitutes in one study were from families of average or high income, though as adults they lived in poverty. (Silbert)⁹

76% of prostitutes in one study came from families that regularly attended church. (Silbert)⁹

More than half of prostitutes in one study said one or both parents drank to excess; more than half had family members who abused drugs regularly. (Silbert)⁹

51% of prostitutes in one study had a father who battered their mother. 62% of the prostitutes were physically abused as children. (Silbert)⁹

Only 19% of prostitutes believed they had a positive relationship with their fathers. Less than one-third believed they had good relationships with their mothers. (Silbert)⁹

CHILD PROSTITUTION

Numbers of Child Prostitutes

.5 - 1.2 million children are involved in child prostitution. There are at least 300,000 male prostitutes under age 16. (Lloyd)⁸

In one study, 78% of adult prostitutes began prostitution as juveniles: 60% were 16 years of age and under, and some were as young as ten. (Silbert)⁹

Entering Prostitution

Most children enter prostitution at the age of 14. (Enablers; James)⁸

60% of child prostitutes are first recruited by peers. (Bracey)⁸

96% of prostitutes who began committing prostitution as juveniles were runaways. Most stated they had no option for making money other than prostitution. (Silbert)⁹

Health Risks

Venereal disease and suicide attempts are the two greatest health risks for juvenile prostitutes. (Deisher)⁸

Male Prostitutes

There are an estimated 5,000 male prostitutes under the age of 14 in Los Angeles. (Crewdson)¹

27% of juvenile male prostitutes are involved in the pornography industry. (Weisberg)⁸

Male prostitutes are much less likely to be arrested for prostitution than females. (Deisher)⁸

IMPACT ON THE VICTIM

PSYCHOLOGICAL EFFECTS OF PROSTITUTION

Because many prostitutes have been sexually assaulted, they suffer from the psychological effects of rape and child sexual abuse. These include rape trauma syndrome, low self-esteem, guilt, and self-destructiveness.

Prostitutes often will not seek counseling for their problems because they are suspicious of outsiders and authorities, fear rejection, and fear change. Prostitutes often fear admitting they have been harmed. They may have difficulty establishing enough control over their own lives to seek counseling. Ninety percent of prostitutes in one survey believed the medical community would not help them recover from sexual assault because they were prostitutes.

Mimi Silbert, a counselor, states that many prostitutes have a "psychological paralysis" that involves wanting help, but rejecting it. However, it has been found that if 24-hour hotlines, counseling, advocacy and shelter care are made specifically available to prostitutes that these services will be used. Counseling has been found to help prostitutes recover from sexual trauma and improve their self-esteem.⁹

INTERVENTION

PROSTITUTION AND THE LAW

National Laws

Prostitution is considered a consensual offense - an illegal act in which both participants willingly participate. Laws vary considerably from state-to-state; for instance, Nevada prohibits prostitution only in counties with a population of over 200,000, while Alabama considers prostitution to be a first or second degree felony. (Miller)⁵

Illinois Law

In Illinois, prostitution is a Class A misdemeanor for both the prostitute and the customer. A third or subsequent violation is a Class 4 felony. Soliciting a juvenile is a Class 1 felony.

Prosecution

The FBI defines prostitution as: "To unlawfully engage in or promote sexual activities for profit." Customers are not included in FBI statistics for prostitution arrests.

Prostitutes are more often sentenced, and receive more severe sentences, than customers. (Miller)⁵

Legalization of Prostitution

There is considerable debate among prostitutes and former prostitutes about whether prostitution should be legalized. Groups such as WHISPER believe that prostitution is sexual assault and should remain illegal, with stronger enforcement of laws against solicitation. Other groups, such as COYOTE, believe that violence against prostitutes would decrease if prostitution were legalized, making it a legitimate form of commerce. This, they argue, would decrease the stigma against prostitution.

Genesis House, an organization that assists former prostitutes, summarizes the debate as follows: "Where prostitution is illegal, the arrest and incarceration of the prostitute merely confirm her low self-worth and expectations of abuse...legalizing prostitution does not help the prostitute, in that it confirms her idea that this is all she can do or be worth."⁷

SPECIAL ISSUES

CHILD SEXUAL ABUSE AND PROSTITUTION

Most prostitutes have been sexually abused as children. Finkelhor and Browne² state that child sexual abuse leads to feelings by the victim of betrayal, powerlessness, stigmatization, and the sense that sex is a commodity. These feelings often make children vulnerable to revictimization, including child prostitution.

Two-thirds of prostitutes were sexually abused from the ages of 3-16. (The average age of victimization was 10). (Silbert)⁹

Two-thirds of prostitutes abused in childhood were molested by natural, step-, or foster fathers. Ten percent were sexually abused by strangers. (Silbert)⁹

Over 90% of prostitutes lost their virginity through sexual assault. (Silbert)⁹

70% of prostitutes believed that being sexually abused as children influenced their decisions to become prostitutes. (Silbert)⁹

91% of prostitutes sexually abused as children told no one. Only 1% received counseling for the effects of the abuse. (Silbert)⁹

SEXUAL VIOLENCE, PHYSICAL ASSAULT AND PROSTITUTION

Sexual Violence

73% of prostitutes reported being sexually assaulted as adults in situations unrelated to prostitution. Most of these were violent stranger rapes with physical injuries. (Silbert)⁹

70% of prostitutes were victims of sexual assaults by customers. (Silbert)⁹

Only 7% of sexually assaulted prostitutes sought counseling. Only 7% reported the crime to police. (Silbert)⁹

Physical Violence

Two-thirds of prostitutes reported being physically assaulted by customers. Two-thirds reported being beaten by pimps. (Silbert)⁹

50% of prostitutes reported being kidnapped by pimps; 76% were beaten by pimps; and 79% were beaten by customers. (Giobbe)³

Pornography

38% of prostitutes stated that pimps regularly exposed them to pornography. 80% stated that customers used pornography and photographs to demonstrate which activities they wanted the prostitutes to perform. (Giobbe)³

SUICIDE AND PROSTITUTION

15% of all suicide victims are prostitutes. (Giobbe)³

One survey of prostitutes found that 75% had attempted suicide. (Giobbe)³

AIDS AND PROSTITUTION

Prostitutes do not carry the HIV virus at a greater rate than other non-high risk groups. HIV infection in prostitutes is almost always related to IV drug use, either by the prostitute or a partner. (Pheterson, 1989)⁶

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SECTION VIII

RITUAL SEXUAL ABUSE

RITUAL SEXUAL ABUSE

INTRODUCTION

Ritual abuse includes:

- sadistic acts that accompany sexual abuse;
- sexual abuse that occurs in conjunction with group acts of worship; and/or
- acts committed as a means of intimidating children to make them compliant victims and to keep their testimony from being believed.

David Finkelhor has defined three types of ritual abuse. These are:

- **Cult-based ritual abuse.** Sexual abuse is a means of inducing a mystical or religious experience in the abuser, and involves an elaborate belief system or ideology.
- **Pseudo-ritual abuse.** Children are exploited through psychological, sadistic intimidation and to inhibit disclosure of the abuse. Costumes and animal sacrifices are two of the methods used to frighten children into submission. Pornography is usually involved.
- **Psychopathological ritualism.** Abuser is an obsessive, sadistic individual, rather than a group concerned with religious or other experience.³

Ritual aspects of sexual abuse may include ceremonies, torture of children or animals, frightening costumes, group sex, and/or animal sacrifice. Some of the most grotesque acts witnessed by children may be simulations designed to intimidate the child into submission and discredit his or her testimony.

Threats are often made against the child, the child's family, or the child's pets.

STATISTICS

It is impossible to estimate the prevalence of ritual sexual abuse because many child victims and adult survivors do not reveal that they were abused. Victims fear they will not be believed, expect to be labeled crazy, and fear retaliation by the offender(s).

The Chicago branch of Believe the Children received 300-400 inquiries about ritual abuse in 1991.⁸

In one group of 500 child sexual abuse victims, 55 were victims of ritual sexual abuse:

- 11 were victims of "pseudo-ritual" abuse, involving threats, group sex, drugs, and consumption of human waste.
- 10 were "private" rituals in which the behavior was committed by one perpetrator and was ritualized for personal, sadistic reasons.
- 32 were organized, group rituals. Out of these 32, four were intergenerational; eight involved children taken into group ritual abuse situations by their parents; and 20 children were victims of extra-familial ritual abuse that occurred outside of the home. Nineteen of these extra-familial cases occurred in day care centers, and one in a Boy Scout troop.⁷

13% of child sexual abuse cases in day care included ritual aspects.³

IMPACT ON THE VICTIM

Psychological symptoms of child victims and adult survivors include suicidal or homicidal urges, eating disorders, substance abuse, depression, and low self-esteem. Multiple personality disorder is one of the most severe emotional outcomes of ritual abuse.

Ritually abused children may act out what has been done to them by harming other children or animals, committing self-mutilation, and chanting. Ritually abused children are usually abused more often than other sexual abuse victims, and their abuse includes elements of physical torture and psychological manipulation and control. Ritually abused children are often led to believe they are evil, or are forced to abuse other children, which incriminates them in the abuse. Ritually abused children may feel guilty, and fear the police and other authority figures. If their families are involved in the abuse, they may be isolated from people not involved in the abuse.

INTERVENTION

CRIMINAL JUSTICE SYSTEM

"Unbelievable Accounts"

Most people's initial reaction to accounts of ritual abuse is disbelief. It may be difficult to accept reports of child victims and adult survivors who say they witnessed human sacrifices or were sexually tortured or put in underground coffins.

Some ritual abuse experts maintain that body parts and fluids are consumed during rituals, with no evidence remaining. Other experts believe sacrifice rituals are usually staged, using dolls or stuffed animals as a form of psychological manipulation. Children also may be given drugs which alter their perceptions.

When children reveal elements of ritual abuse in a trial, they are subject to defense contentions that the charges are too extreme to be believed. Defense attorneys often contend that the allegations are fantasies, or that the children were coached. Successful ritual abuse trials use concrete factual evidence to substantiate the children's allegations.

Children as Witnesses

Children's credibility as witnesses is almost inevitably questioned in a criminal trial. The younger the child, the more difficult it is for her or him to adapt to a court system designed for adults.

Considering a child's literal interpretation of events and lack of broad factual knowledge, there is an amazing consistency to the stories of ritually abused children. Children across the country who have never met each other cite instances of sexual abuse, animal torture, chants, threats to parents and/or pets, and consumption of human waste, blood and body fluids.

Therapists as Interviewers

Because police are often not accustomed to interviewing children, therapists may be used to elicit information from them about the case. This has resulted in defense contentions that therapists manipulate the testimony through the use of leading questions. This line of defense is often successful, even though "the conclusive finding is that even three and four-year-olds are very resistant to that kind of leading question, especially when it involves sexual behavior."³

Improved police interviewing techniques and cooperation between police and children's therapists have eliminated some of these problems. Prosecutors in successful ritual abuse cases believe therapists should not be involved in the criminal investigation, and advise that interviews between children and therapists not be videotaped.⁵

Multi-Agency Cooperation

Many experts believe the key to winning ritual sexual abuse cases is to improve the police and child protective investigation from the beginning of the case. The investigative roles of police, medical personnel, child protective agencies, prosecutors and therapists must be clarified.

The Law in Illinois

In 1992, the Illinois Ritual Abuse of Children Task Force assisted in the passage of legislation that makes ritual abuse a specific crime. It is now a felony to involve a child in a number of *actual or simulated* ritually abusive acts. The law enhances penalties for child sexual abuse with ritually abusive aspects.

SPECIAL ISSUES

OFFENDERS WHO COMMIT RITUAL ABUSE

Ritual abuse is often initiated by family members who abuse their own children. These abusers may have been abused children themselves.¹

One study found that 64% of ritual abuse perpetrators are women. In standard child sexual abuse cases, about 75% of the perpetrators are men.¹

The social background of the abusers is often upper-middle-class or middle-class, and includes people from all professions.¹

Groups involved in ritual abuse include religious organizations, crime organizations, and right wing political groups. Pornography is often involved. Some experts theorize that pornography is sold to raise funds for the organization. Pornography is a \$3 billion business in the U.S.²

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SECTION IX

SELF-DEFENSE

SELF-DEFENSE

Studies have consistently found that resistance to sexual assault is much more effective in avoiding attack than a passive response. Active resistance includes actions that range from screaming and running away to the use of physical force. Passive responses include crying and pleading with the attacker.

Opinions differ on whether the use of physical force in resisting an attack results in more physical injury to the victim.

RESISTANCE TO AN ATTEMPTED ASSAULT

ACTIVE RESISTANCE

Active resistance to sexual assault decreases the chance of a completed rape by about 80% (Marchbanks)⁵. Screaming, calling for help, threatening, running and hiding are effective ways of avoiding sexual assault. Forceful resistance also decreases the possibility of a completed sexual assault. Forceful resistance includes hitting, kicking, scratching and the use of weapons.

Active resistance is also the most effective avoidance strategy against acquaintance rape.

PASSIVE RESISTANCE

Passive resistance - crying and pleading - is extremely ineffective, and may even encourage an attacker. In cases of acquaintance rape, arguing has also been found to be ineffective (Levine-MacCombie)⁴. A study of convicted rapists found that "...lack of resistance became for (the rapist) consent. As long as the victim survived without major physical injury (in addition to the sexual assault), a rape had not taken place (in their eyes)." (Scully⁷, Ullman)⁸.

Women who respond passively to sexual assault suffer more psychological problems following the rape, such as guilt, depression and sexual disorders. Passive resistance has no effect on avoidance of physical injury.

WAYS OF PREVENTING A POTENTIAL ASSAULT

While there are no certain ways of preventing sexual assault, there are ways of assessing potentially dangerous situations. Self-defense experts recommend some of the following strategies for daily safety:

- Be aware of your surroundings.
- Keep physical space between you and any potential attacker, if possible. If someone comes into your space and you are uncomfortable, respond immediately by creating distance.
- Use assertive body language.
- Respond with verbal assertiveness if you are approached.
- Be prepared to respond if you sense a dangerous situation. Attempt to override your socially-trained passivity. Be willing to attract attention.
- Develop an awareness of your own physical strengths.
- *Follow your instincts.* Trust your own responses and assessments (Hopwood)².

FORCEFUL RESISTANCE STRATEGIES AND PHYSICAL INJURY

Forceful resistance includes kicking, hitting, use of weapons, and other techniques designed to injure an attacker. Any active resistance, including forceful resistance, is always more effective than passive resistance in preventing sexual assault. However, there is debate about whether forceful resistance increases the chances of serious physical injury beyond the sexual assault itself.

Statistics gathered by the U.S. Center for Disease Control show that women who used forceful methods of defense were injured at a rate three times higher than women who used other active methods of defense, such as running or screaming. However, this study did not assess whether the forceful defense began *after the violence had already escalated*, and whether the defense was a response to increased violent activity by the offender (Marchbanks⁵, Ullman)⁸.

Another study, which examined the circumstances surrounding women's sexual assault, found that 85% of the women who used physical force did so in response to the offender's initiated violence. The other 15% reacted to the offender's verbal aggression. The potential for physical injury was found to be no greater for women who used forceful defense than for those who used other active means of resistance (Ullman)⁸.

SELF-DEFENSE WEAPONS

If weapons are used as a means of resistance, it is necessary to know how to use them correctly and quickly. "It is not the object that will protect you as much as it is knowing how it may be

utilized, how to use it effectively, and any disadvantages it may have. Simply carrying a weapon, any weapon, and hoping it will ward off trouble is naive and dangerous."

Legally, self-defense with a weapon may be used when a potential victim believes the attacker has the ability, the intent and the opportunity to cause great bodily harm or death, and when the victim believes she cannot escape.

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NCASA GUIDELINES FOR CHOOSING A SELF-DEFENSE COURSE

These guidelines were prepared for the National Coalition Against Sexual Assault by the NCASA Self-Defense Ad-Hoc Committee.

Q: *What is self-defense?*

Self-defense is a set of techniques and skills that enable someone to escape, resist and survive violent attacks. A good self-defense course combines awareness, assertiveness and verbal confrontation skills with physical techniques.

Q: *Does self-defense work?*

Self-defense training can increase your options and help you to slow down, de-escalate, or interrupt an attack. Like any tool, the more you know about self-defense, the better able you will be to use it.

Q: *Is self-defense a guarantee of safety?*

There are no guarantees when it comes to self-protection. However, self-defense training can increase your options and help you to be prepared.

Q: *Is there a standard self-defense course?*

No. There are many formats for training. They may be as short as two hours, or as long as eight weeks or a semester. Whatever the length, the program should focus on maximizing options and presenting simple techniques. The program should demonstrate consideration for women's experiences.

Q: *Is there a course I should stay away from?*

Only you can decide. Find out the philosophy of the program and the background of the instructor. Observe a class session if you can, and talk with an instructor or a student. Consider these questions:

- Is the instructor knowledgeable?
- Does she/he respect your concerns?
- Is the class of a length of time to which you can commit?

You deserve to have all your questions answered before taking a class.

Q. *Should I choose a male or female instructor?*

A female instructor can serve as a role model and will have had experiences similar to yours. All-women classes can provide an atmosphere which makes it easier to discuss sensitive issues. On the other hand, some women feel having male partners with which to practice can be helpful.

The quality of a class depends on the knowledge, attitude and philosophy of the instructor. The instructor, male or female, should gear the training to the students' individual strengths and abilities. A climate of safety and trust must be established before learning can take place.

Q. *Must I train for years before I can learn to defend myself?*

A basic course can offer enough concepts and skills to help you develop strategies to build upon. Self-defense is not karate or martial arts training; it does not take years of study to perfect your skills. There are women who have successfully prevented an assault without having taken a class. Women often practice successful self-defense strategies without knowing it!

Q. *What does "realistic" mean when used in a course's advertising?*

Words like "most realistic," "best," and "guaranteed success" are advertising gimmicks. No program or instructor can replicate a "real" assault, since there are so many different scenarios. A real attack would require a fight that would be extremely dangerous to enact during training.

Responsible self-defense training requires control. Students should be able to control their own participation in the class and never feel forced to participate in a specific exercise.

Q. *How useful are mace and other devices as self-defense aids?*

These devices are useful only if you understand how to use them and have them ready to use at the time of the assault. None of them can be counted upon to work against all attackers.

Anything you use against an attacker can be taken away and used against you. While some of these devices have helped women escape, it is important to be aware of their limitations and liabilities.

Q. *How much should I pay for a course?*

Paying a lot of money for a course does not mean you will get better instruction. On the other hand, don't assume all programs are the same and go for the cheapest. Be an educated consumer. Shop just as you would for anything else you buy that is important to you.

Q. *Where can I find a self-defense class?*

Check with your local rape crisis center. Some centers provide self-protection classes, or can refer you to one.

YWCA's and community colleges sometimes offer classes. Others may be listed in the phone book. Some martial arts schools provide seminars and workshops. If you can't find a class in your community, try to organize one.

Q. *Is it possible I'm too old to take self-defense? What if I'm out of shape? What if I have disabilities?*

You don't have to be an athlete to learn how to defend yourself. A good program should adapt itself to every age and ability, and provide each student with the opportunity to learn. Some programs have specialized classes for specific groups.

Q. *How can I tell a good course from a bad one?*

A good course includes training in self-defense strategies, assertiveness, powerful communication skills, and easy-to-remember physical techniques. The instructor respects and responds to your fears and concerns. Instruction is based on the belief that women can act competently, decisively, and take action for their own protection. A good course is based on intelligence, not muscle. It offers tools that enable a woman to find her own strength and power.

These courses are out there. Good luck in your research. Taking a self-defense class is one of the most positive acts a woman can do for herself!

SECTION X

SEX OFFENDERS

SEX OFFENDERS

INTRODUCTION

CHARACTERISTICS OF SEX OFFENDERS

Offenders Who Sexually Assault Adults

Rapists almost always have negative views of women and believe in traditional sex roles. They believe rape myths, such as women want to be forced into having sex, women "ask for it," and that the only "real rape" is committed by a stranger. Rapists may engage in other criminal activity, and drink and use drugs to excess.

The FBI's National Center for the Analysis of Violent Crime uses the following means of categorizing sex offenders. These definitions were first developed by Nicholas Groth:

- Power-reassurance. An offender has doubts about his sexual adequacy and masculinity, and uses sexual assault as a means of verifying his manhood.
- Power-assertive. An offender regards sexual assault as an expression of virility, mastery and dominance.
- Anger-retaliatory. An offender uses sexual assault as an expression of hostility and rage.
- Anger-excitation. An offender gains pleasure and sexual excitement in response to a victim's suffering.

Offenders Who Sexually Abuse Children

There are two basic types of offenders who sexually abuse children: *pedophiles* and *rapists*. Pedophiles are sexually attracted to children. Child rapists have many of the same characteristics as offenders who sexually assault adults.

Pedophiles

In most cases of child sexual abuse, the offender is a pedophile. He verbally pressures the child to have sex by exploiting her or his need for attention, approval and affection. The offender is often emotionally attached to the child, and uses the child to give him the affirmation and affection he feels is lacking in his life. Physical force is usually not used. If the child objects or resists, the offender will usually stop and seek another victim.

Rapists

In forced situations - child rape - the offender uses verbal threats, physical action, and may even use a weapon. The offender is using sexuality as a means of expressing force and anger. Children make them feel stronger and more powerful. Objections by the child increase the force used by the offender.

Sexual abuse of children ranges from non-contact offenses such as masturbation in front of the children or child pornography, to fondling and kissing, to sexual penetration.

Adolescent Offenders

Adolescent sex offenders are usually from disturbed family backgrounds. Most sex offenders begin to commit sexual assaults and abuse in adolescence. Adolescent offenders usually abuse children their own age and younger.

STATISTICS

OFFENDERS WHO SEXUALLY ASSAULT ADULTS

80%-90% of offenders know the women they are sexually assaulting. (Koss, 1991)⁹

For rapists, the most common emotional experience prior to a sex offense is general anger (88%) and anger towards women (77%). (Prentky, 1991)¹³

In 20% of sexual assaults committed by a single offender, the offender is under the age of 21. In 62% of sexual assaults committed by multiple offenders, the offender is under 21. (Bureau of Justice Statistics, 1991)³

Rapists receive sentences that average four years in prison. 28% of offenders released from a maximum security psychiatric prison committed more sexual assaults upon release. (Rice, 1990)¹⁴

52% of convicted rapists will be arrested within three years of release. (Bureau of Justice Statistics, 1991)³

29% of men charged with sexual assault have an anti-social personality disorder. (Abel)¹¹

OFFENDERS WHO SEXUALLY ABUSE CHILDREN

Prevalence

In a survey, 21% of college men reported some sexual attraction to children, with 7% saying they would be likely to have sex with a child if they could not be detected or punished. (Briere and Runtz)¹

In a phone survey, 10% of adult men admitted sexually abusing a child. (Briere and Runtz)¹

Traits of Offenders

Offenders who molest children come nearly equally from all races, social classes and education levels. (Finklehor, 1984; Wyatt, 1985; Russell, 1986)⁷

Offenders are young when they begin molesting children. In one study, 82% of the men convicted of sexually abusing a child were under 30 at the time of the offense, and 8% were under the age of 13 at the time of their first offense. (Groth, 1979)⁶

Offenders usually do not have mental disabilities; 80% of offenders in one study were of normal intelligence, 7% had a developmental impairment, and 6% were of superior intelligence. (Groth, 1979)⁶

Most offenders who abuse children do not regularly consume drugs and alcohol. Thirty percent of offenders in one study regularly used alcohol to excess. (Groth, 1979)⁶

The vast majority of sex offenders are heterosexual, and many are involved in consenting adult relationships. In one study, 83% of the offenders were heterosexual, and 17% considered themselves bisexual. Some of these offenders abused both boys and girls. Heterosexual men who abused boys usually said they did so because they identified with the boy. (Groth, 1979)⁶

Incest

According to the Illinois Department of Children and Family Services, a natural parent was the sexual offender in 1 out of every 3 cases founded by that agency. Parents and stepparents accounted for more than half of the offenders in sexual abuse cases.

- 83.4% of the offenders were male.
- 30% of the offenders were between the ages of 30 and 40; 21% were under the age of 20.
- 63% of the offenders were white. (DCFS, 1991)⁸

81% of incest offenders in one prison sexually abused children ages 9-18. 90% of the victims were girls: 38% were daughters, and 30% were stepdaughters. Of the boy victims, 10% were stepsons and 4% were sons. (Owen, 1991)¹²

44% of incest offenders sexually abused children outside their families, as well as children inside their families. (Abel, 1983)¹¹

Female Offenders

Only 2% - 4% of reported child sex offenses are committed by women. However, this number may be low, since women are not traditionally viewed as offenders, even by victims, and because boys tend to underreport sexual abuse.

One-half to two-thirds of incarcerated female offenders committed the crime in conjunction with a man.

Almost all were acquainted with the children.

50% of female sexual offenders have a history of mental illness (as opposed to 9% of male offenders). (Russell, Matthews, McCarty)⁵

Number of Victims

Child molesters have ten times more victims than offenders who rape adults. Child molesters have an average of 76 victims; a rapist has an average of seven. (Abel)¹¹

ADOLESCENT OFFENDERS

Over 50% of boy victims and 15% of girl victims are sexually abused by adolescents. (Showers, 1983)¹¹

30% of sexual assaults of adults are committed by offenders under the age of 18. (Fehrenbach, 1986)²

The arrest rate for 13-14 year olds accused of sexual assault doubled between 1976-86. (FBI)

26% of adolescent sex offenders had been victims of or witnesses to sexual abuse in their families. This abuse includes such acts as incest, prostitution, and forced observation of sex between adults. (Awad, 1991)¹

Most adolescent sex offenders - 61% in one study - abuse more than one victim. (Awad, 1991)¹

One study of male adolescent sex offenders found that:

- 97% had never been hospitalized for a psychiatric disorder.
- 72% were never arrested for non-sexual crimes.
- 79% had been arrested for a prior sex offense.
- 63% were pedophiles.
- 18% were sexually abused as children. (Becker)¹¹

OFFENDERS WHO SEXUALLY HARASS

At the University

In one survey, 26% of male professors stated they had initiated a sexual encounter or relationship with a student. 11% said they had otherwise attempted to "stroke, caress or touch" female students. Only one believed he had sexually harassed a student. (Fitzgerald, 1987)⁴

In the Workplace

The National Merit Service Protection Board found that, in the federal workplace:

- 66% of the sexual harassers were married.
- 37% of the sexual harassers were supervisors.
- 43% of the victims were "sure" the offender had harassed other victims. Only 3% were sure he had not harassed other victims.⁴

Among men accused of "sexually bothering" someone, 82% believed they had been unjustly accused, 8% thought the charge was fair, and 10% were not sure.

Of those men who denied the charge, 48% said their motives had been misunderstood, 45% believed the accuser wanted to cause trouble, and 29% said they had done nothing wrong. (Fitzgerald, 1987)⁴

Only 7% of women academics reported dating a student, and even fewer engaged in sex with a student. (Fitzgerald, 1987)⁴

OFFENDERS ABUSED AS CHILDREN

One study found that 30% of child molesters reported being sexually abused as children. (Harmon, 1989). The Massachusetts Treatment Center, a maximum security institution for serious child molesters (with repeated or severe offenses), reported that 59% of the child molesters and 23% of the offenders who rape adults were sexually abused as children. (Knopp, 1984)⁷.

In one prison, 57% of incarcerated incest offenders were sexually abused as children. 14% were abused by at least one parent; 17% were sexually abused by a sibling; 9% were abused by another relative; and 17% were abused by someone outside the family. 37% cited a climate of violence in their childhood homes. (Owen, 1991)¹²

INTERVENTION

OFFENDER TREATMENT AND PUNISHMENT

Sex offender treatment is a relatively new area of counseling. Offenders are often referred to treatment by a court sentence that links treatment with probation.

Offenders who receive treatment are usually required to accept responsibility for the sexual assault or abuse prior to the beginning of treatment. Offenders who do not show guilt and an understanding of the negative effects of their crime are usually referred to prison.

Offenders who abuse children are seen as more positive candidates for successful treatment than violent rapists. Child sex abusers are usually less anti-social, more integrated into their communities, have stronger family support systems, and are more willing to change their behavior than are rapists.

ASSESSMENT

Assessment may determine whether a convicted offender goes to prison, receives inpatient treatment, receives community treatment, or receives no treatment. Assessment of sex offenders may include:

- using the penile plethysmograph, which measures penile response to stimuli (such as to children and violent acts). This is used to assess the offender's dangerousness and to urge offenders to admit their crimes.
- determining the extent to which offender is anti-social by assessing such factors as stable employment, his relationships in the community, and whether there is a history of physical violence.
- testing the offender's self-reporting of offenses by a polygraph examination.
- discovering whether the offender accepts responsibility for his actions and displays guilt and a willingness to reform.

PROBATION AND TREATMENT

Many offenders - particularly those who abuse children - are sentenced to probation with treatment. 80% of all child sex offenders are granted probation. Of these cases, 89% involve court-mandated treatment. (Smith, 1990)¹⁵

A study conducted in 1990 found that fewer than one-half of all probation departments have regulations or guidelines for working with sex offenders. Most probation officers believed caseloads were too high to adequately supervise sex offenders. Because of the lack of treatment facilities, most offenders received psychiatric counseling at public health departments. Fewer than one-quarter of probation officers surveyed thought there were enough "good" treatment programs for sex offenders. (Smith, 1990)¹⁵

TYPES OF TREATMENT

Prentky defines three main types of offender treatment. Behavior therapy is most common, though most programs use a combination of these types:

1. Insight-oriented and/or evocative. The offender is led to understand the causes and motivations of his actions, increasing empathy to victims and a sense of responsibility for his crimes. The offender learns new social and sexual skills.
2. Behavioral. Techniques are used to remedy deficits in social and interpersonal skills, to alter the offender's justification of his behavior, and to modify deviant arousal patterns. Aversion therapy is often used, which associates negative stimuli with the offender's sexually abusive activity.
3. Pharmacological. Drugs are used which are believed to reduce sexual arousal and fantasies. These include anti-androgens (such as depo-provera) and anti-depressants. The effectiveness of these drugs has not been proven, although there are signs that depo-provera can assist offenders who admit responsibility for their actions.

Post-treatment support, through the offender's family and continued therapy, is very important to treatment success.

EFFECTIVENESS OF TREATMENT

Recidivism rates have been collected for those going through treatment programs. These are unreliable, given the newness of treatment programs; however, the results hold some promise.

Because sex offender treatment is too new to be fully tested, there are no statistics that definitely affirm the long-term effectiveness of treatment. However, one study of child sex offenders found that 43% of the untreated offenders recommitted the offense, compared to 18% of the offenders who went through treatment. Of incest offenders, 22% of the untreated offenders recommitted a sex offense, compared to 8% of the treated offenders. (Marshall and Barbaree, 1988)¹⁰

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SECTION XI

SEXUAL ASSAULT OF ADULTS

SEXUAL ASSAULT OF ADULTS

INTRODUCTION

Sexual assault is non-consensual sexual contact. Women, men and children can be victimized by sexual assault. A rapist may be a stranger or an acquaintance of a victim.

The following fact sheet lists a range of information about sexual assault. Topics include: prevalence of sexual assault in the United States; victim information; psychological consequences of sexual assault; sexual assault and the criminal justice and health systems; differences between unfounded and false reports; and a bibliography.

STATISTICS

PREVALENCE IN THE U.S. - ANNUAL STATISTICS

FBI Statistics

The FBI found that 102,555 women in 1990 were victims of what it terms "forcible rape." This statistic includes only sexual assaults reported to police and which law enforcement officers considered legitimate complaints.

The FBI defines forcible rape as vaginal penetration by a penis. It does not include other forms of rape as defined under most state statutes, such as oral or anal sex and penetration by fingers or objects.¹²

National Crime Survey, U.S. Department of Justice, Bureau of Justice Statistics

The National Crime Survey found that 207,610 sexual assaults and attempted sexual assaults took place in 1991. This is an increase of 59% from 1990 statistics.

National Crime Survey data are gathered by the U.S. Census Bureau from a sample of 95,000 people in about 48,000 households. The survey findings have been criticized. The Census Bureau often uses male interviewers, and asks questions about sexual assault in the presence of other family members. The Department of Justice has stated that these findings are probably low.¹

National Victim Center Survey

The National Victim Center found that 683,000 adult women were sexually assaulted in 1990 -78 rapes per hour, 1.3 rapes per minute, 1,871 rapes per day.

These statistics were collected through telephone interviews with 4,000 women across the U.S. The interviewers were female. Sexual assault defined as forced vaginal, anal, and oral penetration with a penis, objects, or fingers.⁸

PREVALENCE IN ILLINOIS - ANNUAL STATISTICS

Reported to Law Enforcement

In 1991, 6,525 cases of criminal sexual assault were reported to Illinois law enforcement. In 1990, 6,399 cases were reported. There was a 2% increase in the number of sexual assaults reported from 1990 to 1991.⁵

Assisted by ICASA Centers

10,185 new victims and 3,509 new significant others received services from ICASA-funded rape crisis centers from July 1991 to June 1992. In the previous fiscal year (July 1990 to June 1991), 7,581 new victims and 2,723 new significant others received services at ICASA-funded centers.

PREVALENCE - GENERAL

Four separate groups of investigators found that 20% of all adult women are sexually assaulted in their lifetimes. (Koss, Russell, Wyatt, Kilpatrick)^{2,7,10}

American women are 8 times more likely to be sexually assaulted than European women and 26 times more likely than Japanese women.¹¹

AFRICAN AMERICAN VICTIMS

One in four African American women have experienced a completed rape after the age of 18. One in five Caucasian women are raped after the age of 18. (Wyatt, 1990)⁷

AGE OF VICTIM AT THE TIME OF SEXUAL ASSAULT

29% of all sexual assaults occurred when the victim was less than 11 years old; 32% between the ages of 11 and 17; 22% between the ages of 18 and 24; 7% between the ages of 25 and 29; and 6% when the victim was older than 29.⁸

INCOME OF VICTIMS

Almost half of all rape victims are in the lowest third of income distribution.¹

MALE VICTIMS

7.7% of men surveyed by the National Crime Survey reported being sexually assaulted.¹

One in six males is assaulted before the age of 18, almost always by other males. (Nielson, Sgroi)⁷

MARITAL STATUS OF VICTIMS

When incidences of marital rape are not counted, 85% of women who are raped are single.¹⁰

OFFENDER'S RELATIONSHIP TO THE VICTIM

About 80% of all victims know the offender.⁷

9% percent of victims are sexually assaulted by husbands or ex-husbands; 11% by fathers or stepfathers; 10% by boyfriends or ex-boyfriends; 16% by other relatives; and 29% by friends, neighbors and close acquaintances.⁸

PLACE AT WHICH SEXUAL ASSAULT OCCURRED

41% of sexual assaults occur in the victim's home, and 19% take place at or near a friend's home. 18% occur at night on the street.¹

65% of sexual assaults occur at night, especially between midnight and 6 a.m.¹

IMPACT ON THE VICTIM

POST-TRAUMATIC STRESS DISORDER

Victims of sexual assault often suffer from rape trauma syndrome, a type of post-traumatic stress disorder. Traumatic incidents, including military service and violent crime, may bring on post-traumatic stress disorder. PTSD includes a range of psychological distress: fear, emotional numbness, flashbacks, nightmares, obsessive thoughts, and anger. Post-traumatic stress reactions can occur months or years after an incident. Almost one-third (33%) of all rape victims developed PTSD after the assault.⁸

Sexual assault victims also suffer psychological reactions specifically related to sexual assault. Since rape is often perpetrated by an acquaintance, friend, or lover, it is a crime involving violation of trust. Victims may feel terrified of the offender and fear for their lives. Victims may also feel humiliation, shame, and self-blame. Because of their shame, and because they may fear how people will react, many victims keep the rape a secret.

DEPRESSION

As a result of the rape, victims are three times more likely than non-victims to experience a major depressive episode in their lives (30%).

SUICIDE

Thirty-three percent of rape victims have seriously considered suicide, and 13% actually attempted it. (The rate of attempted suicide is 13 times higher than that of non-victims.)⁸

SUBSTANCE ABUSE

The devastating effects of sexual assault lead many victims to turn to substance abuse as a way to ease their pain. Victims of sexual assault are 10 times more likely to abuse "hard" substances (such as cocaine or heroin) than non-victims, and are 14 times more likely to have problems stemming from alcohol abuse.

INTERVENTION

CRIMINAL JUSTICE SYSTEM

Arrest and Prosecution Rates - U.S.

In 1990, 30,802 individuals were arrested for rape (sexual assault involving penetration) in the U.S. This figure is 25% higher than in 1981. In 1990, 71,477 were arrested for sex offenses other than rape. This figure is 42% higher than in 1981.

In 1990, 15,562 individuals received felony convictions in the state courts in the U.S. 87% of these were sentenced to prison.

In 1990, in a sample of eight states, 88% of individuals arrested for felony sex offenses were prosecuted for sexual assault.

In 1988, in a sample of fourteen states, sexual assault cases were handled in the following ways:

- 11,103 cases were prosecuted: 3,900 for rape, 2,135 for "other," and 5,068 for "type unspecified;"
- 24% of these cases resulted in dismissals; 4% received acquittals; 5% received other non-convictions; and 67% were convicted.
- Of those cases resulting in convictions, 18% received sentences that did not involve incarceration. 82% were incarcerated; of these, 48% were sentenced to prison, and 34% sentenced to jail.²

Reporting Sexual Assault

Victims of sexual assault often do not report the crime, or they may delay reporting. Reasons include shame and fear resulting from the attack, and fear of going through the court system and/or being confronted by the media. 96% of rape crisis center staff believed victims would be less likely to report sexual assault to the police if they knew their names would be revealed by the news media.⁸

Only 16% of sexually assaulted women surveyed by the National Victim Center reported the crime to police. 25% of the women who reported the rape did not report until more than 24 hours after the rape occurred.⁸

MEDICAL TREATMENT

Number of Victims Seeking Medical Treatment

Only 17% of victims had a medical examination following sexual assault. Of these, only 60% were examined within 24 hours of the attack. In only two-thirds of cases did the victims tell the doctor they had been sexually assaulted.⁸

Information Victims Received During Medical Treatment

60% of victims were not advised of pregnancy testing or how to prevent pregnancy following a sexual assault (the "morning-after pill").

73% were not given information on HIV testing.

39% were not given information on sexually transmitted diseases.⁸

Sexual Assault Emergency Treatment Act (SASETA)

In Illinois, the Sexual Assault Emergency Treatment Act (SASETA) provides adult and child victims with guaranteed medical treatment. SASETA assures that:

- victims will be responded to immediately;
- examinations will take place in a private, closed room without the presence of police;
- tests, x-rays and treatment will be given;
- tests for sexually transmitted diseases and pregnancy will be administered;
- no victim will be billed by the hospital for emergency room services. Treatment and drugs are free.

The medical examination includes checking for injuries, pregnancy, sexually transmitted diseases, emotional welfare of the victim, and evidence collection.⁹

COUNSELING

Women and children who experience sexual violence can benefit from counseling.

In Illinois, sexual assault victims can receive hotline counseling, in-person counseling, and advocacy services at rape crisis centers that are members of the Illinois Coalition Against Sexual Assault (ICASA).

Staff and volunteers at ICASA rape crisis centers provide the following services:

- response to crisis calls;
- assistance to victims at the hospital;
- assistance with the police and State's Attorney at the victim's request;
- individual and group counseling;
- information on sexual assault.

ICASA rape crisis centers are located in all areas of the state. To receive further information about ICASA, call 217/753-4117, or write to the ICASA Administrative Office, 123 South Seventh Street, Suite 500, Springfield, Illinois 62701.

SPECIAL ISSUES

FALSE VS. UNFOUNDED REPORTS

Law enforcement officers may decide not to prosecute (or "unfound") a case of sexual assault for many reasons. The vast majority of these cases are not false, or made-up, reports.

The decision by police to unfound a case often depends upon the relationship between the victim and the offender, and the circumstances of the sexual assault. For instance, during one year in New York City 50% of the acquaintance rape cases were dismissed, compared to 33% of the cases involving strangers. In Austin, Texas, 70% of acquaintance rape cases were dismissed, compared to 40% of the stranger rapes.⁶

Another factor in the unounding of a case is the degree of force used by the offender and the level of resistance exhibited by the victim. Lack of medical corroboration may also lead a case to be unfounded.³

Studies have found that in only 1% - 2% of sexual assault cases do victims admit to deliberately filing a false rape report (Hursch and Selkin; Brownmiller; Peters).⁶

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SECTION XII

SEXUAL HARASSMENT

SEXUAL HARASSMENT

INTRODUCTION

Sexual harassment is unwanted sexual pressure that one person inflicts upon another. This pressure is verbal, physical, or can be in the form of insulting posters and other visual materials. Sexual harassment includes:

- subtle pressure for sexual activity;
- patting or pinching;
- deliberate brushing against another person's body;
- "friendly" arms around the shoulder;
- deliberate assaults or molestations;
- sexually explicit pornographic pictures posted in view of all employees;
- demanding sexual favors, accompanied by implied or overt threats concerning an individual's job, grades, letters of recommendation, etc.;
- explicit offers of money for sex.

Women usually have broader definitions of sexual harassment than do men, as well as less tolerant attitudes toward harassers.

STATISTICS

IN THE WORKPLACE

Each year 1% of women in the U.S. labor force are sexually harassed. (Klein, 1991)

In 1990, about 5,600 cases of sexual harassment were filed with the EEOC, up 27% since 1986.⁵

42% of the women and 15% of the men who worked for the federal government reported being the victims of sexual harassment over the previous two years. (U.S. Merit Systems Protection Board)⁶

In a survey of 9,000 clerical and professional women, 92% of the respondents experienced overt physical harassment, sexual remarks and leering, with the majority regarding this behavior as a serious problem at work; nearly 50% said they or someone they knew had quit or been fired because of sexual harassment; and 75% believed that if they complained to a supervisor, nothing would be done. (*Redbook*)⁵

IN THE MILITARY

Two out of three women in a survey of the military said they had been sexually harassed. (Women's Legal Defense Fund)⁶

IN UNIVERSITIES

Twenty-five to 30% of undergraduate students in one survey reported being the victim of at least one incident of sexual harassment at the university.⁷

Of female graduate students polled by the American Psychological Association, 12.7% reported being sexually harassed, 21% avoided classes for fear of being sexually harassed, 11% tried to report an incident of sexual harassment, and 3% dropped a course because of sexual harassment.⁶

IN HIGH SCHOOL

In a Minnesota survey of high school students, 80% were aware of sexual harassment in their schools; 75% were aware of sexual harassment between students; and 50% were aware of sexual harassment of students by faculty. Of Minnesota high school students who were sexually harassed, 30% were harassed by a teacher, 59% by a student, and 9% by an administrator. Harassment included remarks (73%), staring (59%), touching (59%), gestures (52%), propositions (7%), and other (9%).¹³

WHY SEXUAL HARASSMENT OCCURS

Power and status differences are almost always at the heart of sexual harassment. Harassers have a desire to exert control, humiliate, and achieve and maintain dominance. A belief that women are inferior and should be kept in a submissive role is usually part of a harasser's mentality.

IMPACT ON THE VICTIM

CAREER/JOB DISPLACEMENT AND DIFFICULTIES

Sexual harassment puts a person's job or academic career in jeopardy. A victim may be forced to leave a job or change a class or career choice. If she must stay near the offender, she may be re-victimized, or, at best, be forced to remain in a threatening situation. The practical and financial toll includes loss of job opportunities, lowered grades, and unplanned career changes. In one study of women who experienced harassment, more than 25% were fired or laid off and 25% resigned. (Working Women's Institute)⁵

PSYCHOLOGICAL EFFECTS

Physical and psychological symptoms resulting from the stress of harassment include insomnia, headache, muscle pain, stomach ailments, decreased concentration, diminished ambition, listlessness and depression. Victims may feel humiliated and alienated, helpless and vulnerable.

INTERVENTION

REPORTING SEXUAL HARASSMENT

Number of Victims Who Report to Supervisors and Others in Authority

90% of victims are unwilling to report sexual harassment. (Klein)⁶

1% - 7% of women who report sexual harassment in surveys file a formal complaint. (Women's Legal Defense Fund)⁶

One study of harassment in the workplace found that most victims ignored the harasser or responded to him verbally. Only 7.5% complained to their supervisors; 17% asked for a transfer; 2% sought legal help. (Loy and Stewart)⁵

69% of high school students who were sexually harassed responded by ignoring it.

Why Victims Hesitate to Report

In one survey, women did not report because:

- they believed nothing would be done (52%);
- they believed they would be ridiculed and the incident treated lightly (43%);

- they believed they would be blamed or suffer repercussions (30%). (Working Women's Institute)⁵

In one group, two-thirds of the victims who filed complaints said they were criticized or held up for ridicule in front of subordinates and clients, refused promotions, kept out of training programs, and denied letters of reference. (Working Women's Institute)⁵

FILING A COMPLAINT

If other options fail, you may want to file a complaint against the harasser. Become familiar with the grievance procedures at your workplace or school. Usually the grievance process consists of a written complaint, a hearing and a decision. Sometimes there is an appeal process for the harasser.

When the complaint is made, be sure to supply any written documentation.

BRINGING A CIVIL SUIT OR CRIMINAL CHARGES

If internal grievance processes fail, it is also possible to file a civil suit, and, in some cases, pursue criminal charges. In Illinois, a civil suit may be filed under either the Illinois Human Rights Act or the federal Equal Employment Opportunities Commission. Sexual harassment can be a criminal charge if it includes sexual conduct or penetration as defined under the Illinois Criminal Sexual Assault Act. It is also possible for a harasser to be charged criminally, while the employer is sued under civil law.¹

WHAT THE LAW SAYS ABOUT SEXUAL HARASSMENT

In the Workplace: Title VII Guidelines

In 1980, the Equal Employment Opportunity Commission (EEOC) issued guidelines on what constitutes sexual harassment under Title VII of the Civil Rights Act of 1964. Title VII prohibits employment discrimination on the basis of color, national origin, and sex; therefore, sexual harassment is job discrimination. These rules guide the courts in their rulings on sexual harassment in the workplace.

- Title VII prohibits sexual harassment of employees;
- Employers are responsible for the actions of their agents and supervisors;
- Employers are responsible for the actions of all employees if the employer knew or should have known about the sexual harassment.

Title VII guidelines do not actually say what actions constitute sexual harassment. Legally, most cases of sexual harassment pursued in court include at least one of the following characteristics:

- the behavior is unwanted by the victim, and/or repeated, and/or deliberate;
- there is some harm or negative outcome for the victim;
- a wide range of harassing behaviors is included; and
- the offender has more power than the victim.

Types of workplace harassment

Quid pro quo harassment is when a supervisor asks for sexual favors and the victim declines, resulting in her being fired, demoted, or retaliated against. Threat of these actions by the supervisor also constitutes quid pro quo harassment. The law also applies if a victim is denied a job because she rejected sexual advances.

An employer is liable for sexual harassment by a supervisor in its employ. The victim does not have to prove that the employer had knowledge of the harassment in cases of quid pro quo harassment.

Environmental harassment is a hostile work environment that interferes with a victim's work performance. Hostile work environment may be perpetrated by a supervisor, co-workers, or a non-employee (such as a customer). Environmental harassment includes verbal comments, displays of sexually explicit material and unwanted sexual contact. Seventy-five percent of all incidents of sexual harassment fall into the category of hostile work environment.

To be illegal, environmental harassment must be severe and pervasive; an isolated remark or event is not enough to constitute a case of sexual harassment. The incidents must be unwelcome. The court determines that incidents are unwelcome on the basis of "the record as a whole and...the totality of the circumstances, such as the nature of the sexual advances and the context in which the alleged incidents occurred."

Employers may be liable for a hostile work environment if they knew or should have known about the sexual harassment.³

In the Schools: Title IX Guidelines

Students are protected from sexual harassment by Title IX of the 1972 Education amendments, administered by the Office for Civil Rights (OCR). OCR defines sexual harassment as "verbal or physical conduct of a sexual nature, imposed on the basis of sex, by an employee or agent of a recipient of federal funds." Again, there are no specific guidelines for what actions constitute sexual harassment.

Title IX finds that professors and teachers who sexually harass students are restricting the students' academic advancement, which is a form of sex discrimination.³

COUNSELING

Author Vita Rabinowitz suggests the following advice for those who work with victims of sexual harassment:

- Acknowledge the victim's courage by telling her how difficult it is to report and discuss sexual harassment.
- Encourage her to talk about her feelings and perceptions, and validate them.
- Provide examples and statistics about the prevalence of harassment, so she will know she's not alone.
- Urge the victim to stop blaming herself.
- Assess the physical, emotional, and interpersonal toll of harassment. Illness and emotional distress should be noted so that further referrals can be made, if necessary.
- Give her the opportunity to ventilate her anger and resentment.
- Help her to validate her own feelings. She may discount her beliefs, and it is important to reinforce positive self-perceptions. Support groups with victims of harassment may help to build self-esteem.⁸

SPECIAL ISSUES

WHAT YOU CAN DO IF YOU ARE SEXUALLY HARASSED

If you are sexually harassed at school or in the workplace, it is wise to take action. The Project on the Status and Education of Women recommends that victims of sexual harassment take the following steps:

- Speak up at the time of the incident. Say no, clearly, firmly and without smiling.
- Know your rights. Many workplaces and most colleges and universities have policies prohibiting faculty and staff from sexually harassing students and employees. Find out the policies from a personnel representative or supervisor in the workplace, or the Dean of Students at the university.
- Keep records of incidents, noting the dates, places, times, witnesses, what the harasser said and how you responded. Keep any letters or notes received from the harasser.

- Tell someone, such as fellow students and co-workers. Find out if others have been harassed by this individual and if they will support you if you decide to take action.
- Identify an advocate such as a counselor who can give you emotional support and possibly provide help and information.
- Write a letter to the harasser. It should be polite and detailed and consist of three parts:
 - A factual account of what happened, including dates and description;
 - How you feel about the incident(s)
 - What the writer wants to have happen next. If you simply want the behavior to stop, state that.

The letter should be delivered in person or by registered mail.¹¹

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