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PROTECTING PERSONAL SPACE: VICTIM AND RESISTER

REACTIONS TO ASSAULTIVE RAPE AND RAPE ATTEMPTS ^{1,2}

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In her epic account of rape in America, Susan Brownmiller recently wrote "Women are trained to be rape victims" (Brownmiller, 1975, p. 309). In a far ranging discussion she criticizes psychoanalysts whose descriptions of rape fantasies in female patients have diverted attention from the stark brutality of forcible rape, and she goes on to conclude that "Any female may become a victim of rape."

Brownmiller observed that little is known about resistance to rape by potential victims, and identified a need for further study of this point.

Our examinations of hundreds of police offense rape reports and thousands of visiting nurse accounts of their interviews with rape victims have left little doubt that intimidation of the victim is the focal issue in whether or not a rape occurs. In the majority of stranger-to-stranger forcible rapes, the assailant uses some combination of verbal threats and weapons in order to force his victim to permit him illicit sexual contact. The most common form of verbal threat is threatening the victim's life. "If you don't do exactly what I tell you to do, I will kill you." The victim may also be threatened with physical harm, or someone close to her, a baby perhaps, will be threatened as well. Weapons are frequently employed to reinforce the assailant's words. In the Queens Bench Foundation study (1975) of a sample of volunteer subjects who identified themselves as rape victims, 14% reported that their assailants had guns, and 19% stated that their attackers had knives.

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²The work reported herein was performed during 1973-76 while the author was Director of the Violence Research Unit, Department of Psychiatry, Denver General Hospital. The work was supported by a LEAA grant, 75-DF-08, Rape Prevention Program. Dr. Carolyn Hursch was research director from 3/73 to 3/75 and helped recruit the subjects. She was also in charge of data analysis during this period and constructed the check list items reported on page 3. However, the content of the paper, and the conclusions reported are the sole responsibility of the author.

The Violence Research Unit at Denver General Hospital studied police offense reports in Denver in 1973, (Annual Report, 1973) and found that of 177 rape victims 21% reported that the assailant had a gun, and 31% noted that he possessed a knife. Altogether, 59% of the assailants were reported in possession of some kind of weapon.

Given that the behavior of rapists is aimed at intimidating potential victims, and given that diverse social and cultural forces facilitate a submissive response from the victim, there remains still a number of women who are victims of rape attempts and who successfully resist these attempts. As a reward for their heroism, these rape resisters may well be spared the psychological trauma experienced by many rape victims. Burgess and Holmstrom (1974) fail to mention rape resisters in their volume on "Rape: Victims of Crisis" and the Queens Bench Foundation study (1975) noted that "All four victims (studied) of attempted rape felt they suffered no lasting psychological effects....."

Collection of data about rape resistance is a task fraught with administrative and methodological problems. Enlistment of victims and resisters who have identified themselves by making official complaints, i.e. police offense reports, is difficult because police and legal authorities object to having these women contacted for anything other than legal or medical purposes. Any interaction with victims which is anxiety provoking for them might influence their later testimony, or might even influence them not to testify at all. Thus, interviewing for research purposes with police identified victims has often not been permitted. Because of these administrative problems around locating and testing formally identified cases, researchers interested in sex assaults are largely reduced to the study of volunteer subjects. Comparisons of population characteristics of volunteer subjects with "official" victim and resisters have yet to be done and both of these groups surely differ from a "true" population of rape victims and resisters, most of whom have no contact whatever with police or social service agencies. Thus the unique characteristics of these volunteer samples are unknown.

Therefore, results of studies with volunteers, self-identified rape victims and resisters, presented herein must be interpreted in the light of these sampling problems. Our conclusions need to be seen as suggestive for the entire victim population, rather than as definitive.

Available data suggest that rape resisters feel differently and react differently during a rape attempt than rape victims.

Thirty-two victims and twenty-three resisters were interviewed at the Violence Research Unit at Denver General Hospital from 1973-76. They were asked, in check list fashion, about emotions experienced

during the sex assault.

Victims were significantly more likely to feel:

- * frightened
- * insulted
- * startled
- * terrified
- * panicked
- * desperate
- * shocked
- * frozen
- * humiliated

* χ^2 based on 2x3 table for victims/resisters, and 'Yes', 'No', and 'Unsure' categories were significant at .01 level for these emotions.

No differences between groups were found for:

- angry
- disgusted
- furious

The emotions which characterized victim reactions are seen as predisposing to feeling rather than action. Panic, shock, fear, startle, and frozen are states of mind not usually associated with active response. Rather, they suggest withdrawal, absorption of trauma, and removal of self from the field of battle.

Most of these same subjects took the California Psychological Inventory. This test was administered to a sample of 20 self-identified volunteer rape victims and 16 self-identified volunteer rape resisters.

Rape resisters scored significantly higher on:

- * dominance
- ** sociability
- ** social presence
- * communality

- * Significant at .05 level, 2-tailed test.
- ** Significant at .01 level, 2-tailed test.

These results were interpreted to suggest that rape resisters are more adept in social situations, more expressive of their thoughts and feelings, and possess greater qualities of leadership than rape victims.

Note that in addition to previously identified cautions about generalizing from these results, we do not wish to infer that CPI score differences definitively show the existence of pre-existing

or permanent trait differences between resisters and victims. Time between testing and the attack was not controlled in this study, and the interval between the attack and the test administration ranged from between a few weeks to several years. Thus the differences found between groups may or may not have existed prior to the time of the sexual assault.

As part of the same test battery, the Cornell Medical Index was administered to a sample of 29 self-identified rape victims and 20 self-identified rape resisters. Victims scored significantly higher on:

- * fear and inadequacy
- * depression
- * nervousness and anxiety
- * neurocirculatory symptoms
- * startle reaction
- * sensitivity and suspiciousness

* 2-tailed t-test between groups significant at .05 level.

Time interval between assault and testing was not controlled for these subjects, and ranged from weeks to years. Nevertheless, these findings are seen as suggesting that rape victims sustain greater psychological damage in the form of emotional distress and behavioral symptoms of such distress, than do rape resisters.

The reader should be aware that only victim variables are examined in this presentation. Attacker variables such as use of a weapon, use of physical force, etc., and situational variables such as whether the subject was alone or asleep when attacked are not incorporated in these results. Definitive findings would require samples in which these major variables in victim response were controlled.

DISCUSSION:

The results presented herein are suggestive rather than definitive. Important sampling problems, and the near impossibility of obtaining pre-assault test scores for groups of victims and resisters require us to interpret these findings very cautiously.

Within this context, the results suggest that rape victims feel differently during the assault than rape resisters. They can be described as emotionally immobilized, in great stress, and unable to react behaviorally in an organized coherent fashion.

Further, the results suggest that victims are not as socially adept as resisters, that they are less dominant and less capable of relating to others in social situations. Finally, emotional reactions after the assault were found to be profoundly different for victim and resister groups. Victims were significantly more depressed, fearful, and anxious.

In a follow-up analysis of the California Psychological Inventory scores with an enlarged sample, Javorek and Lyon (1976) compared the factor structure of victims and resisters CPI scores to the factor structure of CPI scores of normative groups of females such as housewives and high school students. No differences were found between victim factor structures and those of the normative groups.

INTERPRETATION AND IMPLICATIONS:

Our findings raise serious questions about social mores as they are taught to contemporary American women. They suggest that large numbers of American women are easily intimidated, that they are not prepared to respond actively to threats of bodily harm, and that they are readily terrified and emotionally paralyzed by threatening males.

We teach our girls American ideals, bicentennial hoopla, and home economics. But girls who live in large cities may have much greater need to know how to protect their personal space, how to resist threats of intimidation, and how to use authorities and institutions for help in coping with threat. Literary lights may never shine in the absence of street lights, and possession of a good karate chop may be a pre-condition for safe attendance at a gymnastics or ballet class. Life in a big city is dangerous, and our socializing and educating institutions need to recognize and respond to this urgent fact of American life.

Following assault, victims react with guilt, shame and fear. Few are aware of how many others have been in the same predicament. We suspect also, that many victims have great difficulty in testing the reality of their experience. This anxiety about identifying the realities of the victim experience leads to fears for one's sanity, withdrawal, and other borderline phenomena.

Thus education about victimology, and a social attitude which looks at victimization as a risk of urban living rather than as a sign of weakness or guilt needs to be developed and supported in society.

The cost of preparing our youth to adjust to the social code of a nineteenth century agricultural society in twentieth century America has long since proven to be unconscionable.

That extensive additional research required to substantiate or contradict these assertions is evident from the body of the paper. Rape may be seen as a possible outcome of a series of events involving an assailant, a victim, and an environment. Variation from each of these three sources contributes to the outcome of the assault. Variables from all three sources need to be compared in order to determine how significantly each one contributes to the outcome of the attack. The completion of this effort along

with subsequent cross-validation is an essential pre-condition to the development of realistic rape prevention programs.

We have drawn far reaching conclusions from suggestive evidence, but after years of observing steadily increasing rates of sexual assault, and the mayhem wrought in the lives of innocent victims by these crimes, can we not start moving toward improved strategies for crime prevention in our cities.

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