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RAPE IN BRITISH COLUMBIA

A Report to The Ministry of
Attorney-General

by

Nancy Goldsberry

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Nancy Goldsberry

Victoria, B.C.
March, 1979

The views expressed in this report are those of the author and may not be shared by the Attorney-General, or officials of his Ministry.

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Chapter 1 - INTRODUCTION

The appointment of a researcher under contract to the Justice Development Commission, Ministry of the Attorney-General, was confirmed November 7, 1977. This appointment resulted from the perceived need on the part of the provincial government for information to better assess funding requests from the Coalition of British Columbia Rape Centres, an umbrella Society of Rape Relief organizations in the province.

The Ministry of the Attorney-General and the Ministry of Health provided the first provincial government grants to Vancouver Rape Relief in 1974. The Vancouver Rape Relief Centre had opened the previous year and was the first organization in western Canada designed specifically to meet the needs of persons who had been raped. In 1975, two new centres began operations in the cities of Kamloops and Victoria. In that year, the Ministry of Health recommended that these three centres submit a joint proposal for funding. The Coalition of British Columbia Rape Centres Society (CBCRC) was formed and submitted a 1976-77 proposal for funding to the Ministry of Health.

The Ministries of Health and Human Resources were involved in core funding of the CBCRC's member centres in 1976-77 and the

Ministry of the Attorney-General again became involved in funding the CBCRC in the 1977-78 fiscal year. The Justice Development Commission of the Attorney-General accepted the role of administrator of provincial funding to the CBCRC.

In order to facilitate the assessment of the CBCRC's continuing requests for provincial government support I was appointed to provide a report, the contents of which were to include the following:

- A. An assessment of the current operations of the Rape Centres within the Coalition of B.C. Rape Centres with special reference to the following:
 - 1) counselling,
 - 2) prevention - education,
 - 3) fiscal accounting procedures,
 - 4) statistical monitoring by individual centres,
 - 5) staff training, and
 - 6) volunteer training and co-ordination.
- B. An assessment of the role of the Coalition with respect to the individual centres and the areas of activity outlined in section A.
- C. Recommendations to effect the improved delivery and/or efficiency of services as related to sections A and B, when and if necessary.
- D. A description of alternate mechanisms of service delivery existing in other provinces and countries.
- E. A description of optional models of service delivery relating to this province with attention given to:
 - 1) population,
 - 2) regional disparities,
 - 3) existing services, and
 - 4) economics.

- F. A description of how these models might be implemented, who might implement them, and what they would cost.
- G. A documentation of potential alternate sources of funding.
- H. An analysis of the cost of non-government counselling services per client in comparison to services provided by government.

As will be evident in the report, it was impossible to adequately address all of these issues. This was due to a number of factors, not the least of which related to the lack of reliable and valid statistical information relating to the scope of the problems associated with rape. Despite the voluminous literature on the subject of rape, researchers and policy makers are only beginning to come to grips with the social, political and human issues which confront anyone trying to deal with a problem which affects the lives of tens of thousands in this province alone.

The design of an integrated, comprehensive delivery model for rape relief services and education in British Columbia is not at this time feasible. I believe that the nucleus for an organization to develop such a service exists in the many committed rape relief workers and women's groups throughout the province. For a number of reasons, I have rejected what could be called a "statutory agency delivery model", one relying on existing government social service, health or justice agencies. The effort necessary to the improvement and expansion of rape

relief services can be found only in those who are willing to make a strong personal commitment to the task. This personal commitment cannot be bought or legislated.

I also believe that it is incumbent upon governments at all levels to provide the resources to allow the freedom necessary for experimentation and program development. Excessive statutory or administrative constraints will only serve to dull the commitment. So long as those who are working in the area of rape relief are so severely restrained by excessive case-loads and the need to direct all additional energy to ensuring simple financial survival, no progress can be realistically expected toward significant model improvements. The workers need the breathing room and a sense of security to undertake the experimentation and self-criticism necessary.

Along with freedom comes responsibility. While this is a well-worn expression, it does point to a critical dilemma faced by rape relief workers wherever they must deal with government or private funding agencies. Experience in B.C. and elsewhere has clearly demonstrated the fineness of the line between co-optation and co-operation. The very nature of rape dictates that rape relief workers must confront the existing institutions which determine the patterns of social interaction giving rise to rape. Fears, ignorance, myths and misconceptions on the part of victims and service professions often result in the victims suffering further abuse at the hands of those very persons

and institutions to which they turned for help. Without the freedom to criticize and re-educate, there can be no hope of breaking out of the escalating cycle of service and financial demands.

Rape relief workers inevitably find themselves in the position of having to criticize the agency which guarantees their job survival. In accepting that agency's money, it is incumbent upon the workers to ensure that the criticism is constructive and options presented viable. I believe that where possible the workers also have a further responsibility to play an active role in redressing the administrative, procedural and attitudinal problems which they are confronting. When such a role involves the government, which is also the funder, it is essential that there exist a relationship of co-operation. If we are to avoid both confrontation and co-optation, the ground rules must be clearly specified.

I believe that a reaffirmation on the part of the government of its commitment to working toward solving the problem of rape is essential. Token gestures will constrain the commitment and create mistrust between those who fund and those who service the needs.

At the same time, rape relief workers must accept the legitimate demands of the government for accountability and some minimal agreed level of service performance. This is no more than is

asked other funded services agencies and I doubt that there is any serious opposition to it from the workers.

The major problem is one of how to proceed with service improvement and expansion. From the perspective of the government, the major issue undoubtedly relates to the ability of the CBCRC and its member societies to develop efficient and effective delivery models throughout the province. I believe that of concern is the willingness of those involved to consider models alternative to that adopted by the existing centres and to critically examine that existing model. From the perspective of the CBCRC, the major concerns relate to the need for independence and the existing constraints imposed by scarce resources and bureaucratic requirements.

Service improvement and expansion must be a joint endeavour. The CBCRC lacks the financial resources, and in some areas, the technical skills to go it alone. The government lacks the personal commitment to do it without the Coalition. One must be given the resources and the freedom, the other the input and accountability.

This report attempts to do two things. Firstly, to again argue that rape relief services are an appropriate priority for government funding. This argument has been made before and must continue to be made. It is the nature of rape that in ignoring it, its effects become worse. It is essential that we

continually re-examine our understanding of it, for when we recognize its nature, we are half-way to solving its problems.

The second intent of the report is to address the issues posed in the mandate of this report. These issues are evaluative, administrative and technical in nature. I have made some recommendations with respect to structure and a proposed delivery model for the unserved areas of the province. I doubt that either the government or the CBCRC will be completely satisfied with the recommendations. The government will not, because they don't represent a final solution to the question of how much money to give to whom. The Coalition will not, because they may involve more work and a structure with more specialization. They do, however, represent a concrete plan and a point of departure for discussion and further analysis.

I have said that this report can only begin to address the issues posed by the government. In the course of preparing the report I spoke with representatives of the government, medical personnel, police officers, counsellors, social workers and women's groups throughout the province. One indisputable conclusion that emerged from these interviews is that the subjective understanding of the meaning of "rape" is far from a shared understanding. That variation in definition so basically affects the behaviour of victims and helpers as to be one of the major contributing factors to the problems currently experienced by those people who define themselves as having been raped or sexually assaulted.

Chapter II - RAPE - A WORKING DEFINITION

Rape is a form of violence involving the personal humiliation of the victim. The act of rape is not simply an expression of sexual instinct. Rape is not practiced among the lower animals, but only among industrialized primates. Sexual intercourse if actually forced on an unwilling woman is a sadistic perversion that could as well be called 'intravaginal masturbation'.¹

It is important to view rape and rape justice within a historical context rather than as an isolated phenomenon since it is defined differently in various societies and at different historical periods. Rape flourishes in an atmosphere of sexism and exploitation for individual or collective gain.²

The definition of rape depends on one's perspective. Changes in law and community mores influence how each one of us sees rape.

A definition of rape as sexual penetration of a (woman's) vagina with a (man's) penis without the woman's consent, outside of marriage, is the concept codified in the Criminal Code of Canada.

Beyond this definition, there are subtle and not-so-subtle distinctions made, based on concepts that involve appropriate behaviour for women and men.

We will explore the varied and even conflicting definitions of rape. We will look at the widely varying assumptions held about who can be raped and who can rape.

Reams of literature are available on the subject of rape which analyze the characteristics of the "victim", the "offender", the modus operandi, and the social context of sexual assault.

Almost all data that supports theories about "who gets raped" comes from reported rapes. A woman, once having decided to report a rape, is at the lip of a funnel of events. As the case proceeds from police questioning through the legal system, other persons have the opportunity to validate or discredit her initial decision. Since only those cases which proceed through this channel are available for most studies, a biased view of the rape situation is given.

In the Vancouver area, in 1975 there were 153 reported rapes, leading to only 37 people being charged.³ In all of Canada for 1971 (the most recent year available for all of Canada), there were 1230 rapes reported. Five hundred forty-seven cases are listed as having been "cleared by charge". It seems that not more than 250 of these cases actually went to court.⁴ Sixty-five of these resulted in convictions.⁵

Of the 1230 reported rapes in 1971, not more than 20% went to trial. The conviction rate in those cases which did proceed to trial was 26%. The general conviction rate for all criminal offences was 86% in the same year.⁶

Only very limited information is available about women who define experiences as rape, but which are never even reported to the police. The highest estimation of the percentage of rapes reported

to the police is 40%,⁷ with other estimates ranging from a low of 4% to 30%.⁸ A 10% rate has been quoted by Crown attorneys in the judicial system and is the figure most often used by RCMP officers in B.C.

It is generally agreed by those who work in law enforcement, or who have done research in the area, that rape is one of the most under-reported of offences.⁹ Lorenne Clarke and Debra Lewis, in the first Canadian book on the subject, Rape, the Price of Coercive Sexuality, point out that, "...estimates of reporting rates go from a high of 40% to a low of 4%. This means that at least 2.5 rapes and as many as 25 rapes occur for every one that is reported."¹⁰

Why are so few rapes reported? Klemmack & Klemmack provide a possible answer: "In sum, current normative definitions of rape are inconsistent, both internally and in relation to legal codes." They go on to say, "Either society must change legal definitions to conform to perceptions, or people must be re-educated about the situation, a change that involves altering long-standing concepts about male-female interaction."¹¹

Who rapes who? There are a number of studies which find that men who are charged with rape differ little from other men on standard personality measures. Rapists, as well, often plan to rape.¹² Studies also indicate that 43%,¹³ 30%,¹⁴ or 50%¹⁵ of rapes involve more than one man and are, as Reynolds puts it, "true social acts in every sense of the word."¹⁶

McKellar says, "Rape is not an abnormality in our culture; it is only an extreme of the accepted mode of male behavior".¹⁷ Susan Griffin points out that it is our cultural definitions of female and male sexuality which support and encourage men to rape.¹⁸

Studies of convicted rapists support the theory that, "the man who rapes does so because he lacks a better means for making the point 'I am a man.'".¹⁹

The view that emerges from studies of rapists is that:

...rape is not so much a deviant act as an over-conforming act. Rape may be understood as an extreme acting out of qualities that are regarded as supermasculine in this and many other societies: aggression, force, power, strength, toughness, dominance, competitiveness. To win, to be superior, to be successful, to conquer, all demonstrate masculinity to those who subscribe to common cultural notions of masculinity, i.e., the 'masculine mystique'. And it would be surprising if these notions of masculinity did not find expression in men's sexual behavior. Indeed, sex may be the arena where these notions of masculinity are most intensely acted out, particularly by men who feel powerless in the rest of their lives, and men whose masculinity is threatened by their sense of powerlessness."²⁰

Rape is a function of our sexually coercive society. Who is named a rapist is a function of our economic structure. So it is that low-income, unattractive, non-white men are those who are most often convicted of rape offences.²¹

L. Clark, in her article, "Rape in Toronto: Psychosocial Perspectives on the Offender" argues:

Men who have other means whereby they can accomplish their objectives, who have strategies available to effect sexual coercion without having to resort to the use of threat of violence, will not be labelled rapists despite the fact that their motivation is no different from those who are so labelled. Some rapists are as 'normal' as most other men in society, and some rapists are no more 'abnormal' than many other men in society who are not labelled rapists. 'Normal' and 'abnormal' are defined within a framework of pervasive sexual coercion and within an economic system that provides the sexual commodities they want without having to commit or threaten violence.²²

Who can be a genuine rape victim is also defined by society's standards. Klemmack and Klemmack explain in "A Social Definition of Rape" that:

...women are often seen as legitimate objects of sexual aggression. Rape can be viewed as the logical extension of a cultural perspective that defines men as possessors of women. The dating system, in particular, places females in the position of sexual objects purchased by men. Women are groomed to compete for men who will shower them with attention and favors; men are socialized to expect sexual reward (or at least to try for that reward) for their attention to women. This perspective presents the woman as a legitimate object of victimization: if a man is unable to seduce a woman, and yet has provided her with certain attentions and gifts, then he has a right to expect sexual payment. Only the situation of rape by a total stranger escapes the influence of this reasoning. In any case, if a woman knows her attacker even slightly, she is likely to be perceived as a legitimate victim of a justified aggressor. This view corresponds with that of Weis and Borges (1973), who contend that the less her experience corresponds to the myth of rape as a brutal attack by a stranger, the more difficult it becomes for others, and for the woman herself, to call the incident rape.²³

It is not surprising, then, that in our society, many women do not see themselves as rape victims, especially if they were not

subjected to much violence or if the rapist was someone with whom they were acquainted. Out of Russell's study of 85 victims of rape, only those who were raped by strangers reported the rape to the police, with three exceptions.²⁴

Dr. Amir's Study of Forcible Rape in Philadelphia indicated that the vast majority of rape assailants had some relationship with the women prior to the rape.²⁵ In a study done in Vancouver, summer, 1977, 54% of those 343 studied were assaulted by someone in whom there was at least an acquaintance.²⁶ In a study done by Kirtpatrick & Kanin at Indiana University, sexual aggression is revealed as the normal male patterns in dating relationships:

Of a sample of 291 college women, fully 55.7 percent had had offensive experiences at some level of erotic intimacy (ranging from "necking and petting above waist" to "attempted intercourse with violence"). Another 20.9 percent were offended "by forceful attempts at sexual intercourse" and 6.2 percent by "aggressively forceful attempts at sexual intercourse in the course of which menacing threats or coercive infliction of physical pain were employed". It is interesting that seven out of ten most violent episodes involved girls in "regular dating, pinned or engaged relationships". Comparable figures for seniors at high school were obtained in a later study by one of the same authors.²⁷

To be sexually aggressive is to be masculine. Norman Mailer reflects the virility mystique exemplified in popular magazines for male audiences when he suggests: "...it's better to commit rape than masturbate".²⁸

Dr. Amir (in an interview with Liaison Magazine) was quoted as saying:

...man doesn't commit the act of rape because he wants to terrorize the woman. He wants to have sex...and he also wants to dominate her. But the domination is an expression of a much more basic phenomenon - women as property, because a woman is property of either a father or a husband.²⁹

Dr. Amir and many others have related the concept of rape to the concept of women as property. It is in the sense of women being property that Kate Millet writes "traditionally, rape has been viewed as an offense one man commits against another - abusing his woman." 30

Female sexuality has been a commodity to be bought and sold, and as Clark and Lewis put it:

...just as women were regarded and socialized to be the property of only one man, so men were socialized to regard individual women as the property of other men, at least until they themselves purchased the rights of access to one (or more) women who would be "theirs". From the outset, therefore, men were forced to regard women as a challenge, not only as the preferred outlets for their sexual desires, but as either potentially appropriable objects of exclusive ownership, or the valued property of someone else. Men were, of course, socialized to respect the property rights of other men, and the very notion of "property rights" in female sexuality gave rise to the possibility that other men could be cheated out of what was rightfully theirs. Thus, sexual intercourse with a woman who was not one's "own" offered endless possibilities for one-upmanship and revenge.

Fundamental to the concept of rape as revenge was acceptance of the premise that, in having sexual intercourse with a woman to whom one had no legal access, one was not violating her rights, but the rights of the man who owned her. Rape was a way of cheating or humiliating another man. From the belief that a woman did not own her sexual and reproductive capacities, it followed that a man did not do anything wrong to her in the act of forcible intercourse. This logic made it possible for men to view the apparently non-consenting woman as acting not in terms of her own desires but purely out of respect for her actual, or potential owner.

The "she said no but meant yes" syndrome so commonly heard from rapists and other normal men is rooted in the awareness that women sometimes do say "no" out

of fear or respect for the men who own them, rather than from a genuine desire not to have intercourse. Thus, a man who acts contrary to the express wishes of the victim can always rationalize his behaviour, and hers, by maintaining that she really did want sexual relations with him but knew that she would be violating some else's rights if she acted in accordance with her own real desires.³¹

In summation, we see that destroying some myths surrounding rape could remove some of the assumptions made about who gets raped, who rapes, and under what conditions. We will explore more of the who's and how's of rape in the rest of this paper, specific to the Province of B.C.

There is a "fine line" between what we distinguish as rape and as sexual intercourse, according to the relationship, or lack of, between two persons and the amount of violence used. We have created a continuum putting rape on one end and sexual intercourse on the other, and find that there are no longer two distinct categories.

In this report we will talk about all rapes. Rape will be defined as any sexual intimacy forced on one person by another. We will not limit ourselves to rapes that are under the Criminal Code, prosecutable. One, because rape is rarely prosecuted and two, women define as rape many instances of sexual assault that are not, under law, prosecutable. Rape laws were not designed to protect women from rape. We shall see why.

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Chapter III - SEXUAL ABUSE OF CHILDREN

To pretend that it didn't happen and not speak about it is dangerous¹

The popular villain is seen as the child molester hanging around playgrounds and candy stores. Actually nearly all children are sexually assaulted by someone they know²

Children are the most vulnerable human beings in our society. They live in a world where all adults are in a position of authority. Children who are sexually abused are powerless in two senses: one, to defend themselves against the adult rapists; two, to speak up in an adult world which ignores and covers up all but the most violent and sensational instances.

It is perhaps because we adults feel helpless to protect children from such abuse that we consistently refuse to admit the dimensions of the problem. The child who is a victim of sexual abuse is our strongest reminder that we are unable to protect the young against violence in our society.

It will remain impossible to protect child victims of sexual abuse unless we do recognize the magnitude of the situation. Because most of us are unfamiliar with sexual abuse of children some background is provided.

The sexually abused child is statistically more prevalent than the battered child³. Perhaps because the damage is less visible, fewer of the sexual abuse cases come to light.

In at least three-quarters of the sexual abuse cases the perpetrator is known to the child.⁴ The most frequently-named perpetrator in these instances is the father or step-father (75%), a male relative (18%) or a mother's boyfriend (7%).⁵ These are all persons who have easy access to the children whom they abuse and who would have some authority over the children.

In British Columbia, for the January to June period of 1978, there were 32 sex abuse cases reported to the Child Welfare Division of the Ministry of Human Resources. In 19 (59%) of these suspected cases there was a paternal relationship between the child and the suspected (ranging from natural and legal to common-law fathers) adult.⁶

As with rape, sexual abuse of children data available is scanty. As early as 1953, a Kinsey study indicated that between 20 and 24% of women were sexually molested as children. In a more recent study it was found that in only 6% of the cases were reports made to persons in authority.⁷ It was concluded from this study that between 20 and 25% of children reared in middle-class environments will experience a victimization in childhood and that the bulk of these will be minimal in character, such as exhibitional and genital touching.⁸

De Francis found, in his study of children who had been sexually abused, that girls were the victims in most cases (in a ratio of 10 to one)⁹. Offenders were predominantly male - 97%, ranging

in age from 17 to 68.¹⁰ Most children were involved in a sexual relationship with the offender for more than a year.¹¹

Other studies indicate some alarming connections between sexual abuse and resulting social problems faced by the youth in later years:

- 1) A drug treatment centre in New York found that 44% of the female drug-abuse clients had experienced incest as children. Other surveys have found that as many as 70% of youth drug addicts were sexually abused as children;¹²
- 2) Barbara Chisholm of the Canadian Council on Children and Youth indicates that as many as 50% of girls now in training schools may have been subjected to initial rape by their fathers;¹³
- 3) Several studies have found that up to 75% of adolescent prostitutes are incest victims;¹⁴
- 4) A study of Milwaukee teen-age alcoholics found that 70% were sexually abused by family members.¹⁵

Sexual abuse of children cuts across provincial, ethnic, economic and neighborhood boundaries. Jocelyn Dingham stresses that sexual abuse of children, "happens in the most outwardly conventional families. Families that are marginal, socially and economically, are more subject to exposure by social workers and the courts, while better-off families can hush things up." She goes on to say:

...just as physical abuse can range from the occasional too-hard slap to outright mayhem, sexual abuse can range from the seductive teasing of small children to outright incest. The amount of damage to the child also varies; rape of a three-year-old very often results in psychosis, while milder forms of abuse may lead to a woman who mistrusts men and never really enjoys sex.¹⁷

There are other factors which delineate sexual abuse of children from rape of teenage women or adults. Brutality is not common in child rape. This is in large part because children can be forced into sexual involvements by promises of gifts or orders much more easily than older persons. Burgess and Holmstrom say, "In this type of sexual situation, victims are pressured into sexual activities by a person who stands in a power position over them as through age, authority or some other way."¹⁸

Children who are sexually abused range in age from small infants to under 16. Abuse of a child by a family member generally begins when the child is young (6 to 10 years old)¹⁹ and may continue for some years. Sexual abuse cases within the family often involve the oldest daughter being abused. In 40% of the cases where there are other children, subsequent daughters are also abused.²⁰

Because sexual abuse of children within the family is so personal and because incest, in particular, is laden with taboos, the children experience some degree of emotional distress. Victims experience various degrees of emotional distress, depending on their age, emotional maturity and the circumstances surrounding the abuse.²¹

The child has been pledged to secrecy in most cases by the offender.²² The effects of the concealment are described by Burgess and Holmstrom: "In most situations the burden of the pressure to keep the secret is psychologically experienced as fear."²³

Victims describe these fears as: a fear of punishment by the offending adult, fear of the repercussions of telling outside persons (being disbelieved or blamed), fear of being rejected (sent away) and fear of being unable to put a description of the activity into words.²⁴

These fears are often justified by the reactions of those who discover or are told about the abuse. If the sexual activity is exposed either by a relative or an outsider to the family, there is often one or more of these reactions:

- 1) disbelief by adults,²⁵
- 2) blame of the child ("seductive child" myth),²⁶
- 3) family tensions and separations.²⁷

Children may feel even more helpless and dependent than women who have been raped. A child of young age may not understand about sex in the same way as an adult, but may well be very sensitive to the uproar of feelings of those older persons about her. It is true that, "child molestation is an offense where the emotions of the parents or guardians may be more complex and explosive than the psychological reactions of the victims".²⁸

It is important not to underestimate the reactions of either the child or the adults once the event(s) have been exposed. It is very clear, though, that the emotional reaction of the child will be influenced to a very large degree by the behavior on the part of the outside person(s) who receive the information.²⁹

Crisis intervention by a sensitive and understanding person can be effective at this point.³⁰ If the child has been the victim of a one-time event there will be the least emotional trauma if the parent(s) can respond in a supportive and matter-of-fact manner.

When the abuse has been long-term and involves family members, the problems will be more acute and complex. Extensive counselling will be necessary for family members. The mother will need help to resolve her guilt and confused feelings towards both the child and the male perpetrator.³¹ The child will need to be protected from the offender and be provided with therapeutic counselling immediately.³² The offender will need to take responsibility for his actions.³³

There are very few people, in British Columbia, in professional or non-professional capacities, prepared to deal with the sexually assaulted children or the children's parents.

One social worker who is willing told me that sexual assault of children that she sees is, "only the tip of the iceberg" and that there is "need for public education of a massive sort".³⁴

Sexual abuse of children is against the law, but very few offenders are brought before the courts. I believe that there are several reasons why these abuses are rarely prosecuted:

- 1) Cases are not brought to the attention of the authorities.³⁵ This is especially true if the sexual abuse involves members of the same

family (incest may be considered even more personal than other forms of sexual assault, laden with taboos and strong emotional impact);

- 2) Complaints before the police are withdrawn by an adult family member. Again, this is particularly true when the offender is a relative or friend;³⁶
- 3) If the cases do come before the prosecutor, the corroborative evidence is often lacking and charges are dropped or reduced (i.e., lack of victims' testimony or medical evidence).³⁷

Cases which are reported often go to a social worker or to the police. Because of the difficulties mentioned with prosecution and because incest is sometimes seen as a "family problem", police and social workers may work out an arrangement similar to the following:

- 1) social worker or police receive the report and exchange information;
- 2) social worker discusses the situation with the child;
- 3) social worker talks with each parent, separately; and
- 4) if the facts bear out the report, the social worker involves the family in a counselling situation, or, returns the case to the police for charges to be laid, if the offender is unwilling to either take positive steps or leave the home.³⁸

This same worker said that if anyone is to leave the home, it must be the "culprit" and not the child. She cautioned that often the family-counselling method does not work (due to resistance from the offender, usually) and that the legal route has to be taken, if possible at this stage of events.³⁹

Others would go even further: "People talk about preserving the family. Preserve the family? I think we should give the family some fresh air." ⁴⁰

If sexual abuse of children is to be dealt with in a humane and respectful-of-persons fashion, some program planning needs to take place in British Columbia. There are programs that claim to work elsewhere. In Santa Clara County, California, the Child Sexual Abuse Treatment Program (CSATP) was developed in 1971.⁴¹

The CSATP is one of the first family-oriented incest treatment programs in the world. Of the nearly 700 to go there for treatment, only two have had recurrences of incest.⁴² A large portion of the success is credited to the self-help elements of the program. Incestuous fathers and the victims' mothers participate in "Parents Unlimited", an organization similar in philosophy to the self-help elements of Alcoholics Anonymous. The victims take part in "Daughters Unlimited".⁴³ The CSATP works closely with the criminal justice system of California.

It seems clear from the evidence that dealing with sexual abuse of children will continue to be unsuccessful in B.C., and all of Canada, unless an alternative approach is taken. As H.

Giarretto says:

...the impact of the criminal justice system on incestuous families, particularly those in which the father is the offender, usually adds up to either rejection of the child victim's plea for help, if the evidence is not court-proof, or disruptive punishment of the entire family if the offender confesses.⁴⁴

The intent of the Criminal Code, which defines sexual abuse of children as a crime, is to punish violators of such crimes. It does not protect the child victim from the consequences of such crimes; it does, in effect, add further stress and tension to the child's life.

It is recommended that a child sexual abuse response unit be developed in British Columbia, which could prepare a protocol for dealing with sexual assault on children. Such a centre could identify and help others identify sexually abused children, abusive adults and services which could be utilized by various family members. Training programs for persons who will intervene in cases of sexual abuse of children and a resource library must be made available in the province and could be coordinated by such a unit.⁴⁵

It is recommended that such a unit be responsible to coordinate a unified approach in the province. To that end, in-depth information, methods and problems posed should be solicited from:

- 1) those ministries involved or potentially involved in procedures involving sexually abused children and their families; i.e., Human Resources, Education, Attorney-General and Health;
- 2) those persons and agencies directly involved in counselling sexually abused children; i.e., police personnel, health units, rape relief centres, social workers.

It is further recommended that the focus of mandatory reporting must be on getting help for the child who is the victim of the

abuse, rather than on punishing the offender. The obligation to co-operate with law enforcement must be clearly spelled out. The child must be supplied with an outside advocate who can act as a buffer between the family and the law, and who can act as an evaluator of the need for further services.

The abrasive effects of sexual abuse on children and their families are clear. The cost to our public purse has also been great; we have paid the social welfare cost because of our neglect. We need a strong approach or we will continue to pay the price for neglect of sexual assault on children.⁴⁶

III FOOTNOTES

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3. Vincent De Francis, Protecting the Child Victim of Sex Crimes Committed by Adults, (Colorado: The American Humane Assn., 1979), p. 216.
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21. Lucy Berliner, Guidelines for Interviewing Child Victims, (Seattle, Wash.: Sexual Assault Centre), p. 1.
22. Burgess and Holmstrom, *Ibid.*, p. 555.
23. *Ibid.*, pp. 555.
24. *Ibid.*, pp. 555-556.
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28. Training Key #224, International Assn. of the Chiefs of Police, reprinted in A Community Response to Rape, (LEAA, U.S. Dept. of Justice, March, 1977), p. 28.
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L. Berliner, Ibid., p. 1.
30. L. Berliner, op. cit., p. 3.
H. Giarretto, Ibid., p. 3.
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Sgori, Ibid., p. 21.
33. Giaretto, Ibid., pp. 5, 35.
34. Arlene Bishop, interviewed by N. Goldsberry (Nanaimo Human Resources North), Dec. 14, 1977.
35. De Francis, Ibid., pp. 186-187, (19% cases withdrawn).
36. Ibid., pp 189-191, (49% cases dismissed in this study).
37. A. Bishop, Ibid.
38. Ibid.
39. R. Shilts, Ibid., p. 13.
40. H. Giarretto, Ibid., pp. 3-5, pp. 34-35.
41. R. Shilts, Ibid., p. 13.
42. Ibid., p. 13.
43. H. Giarretto, Ibid., p. 34.
44. H. Klajner, Ibid., pp. 2-3.
45. De Francis, Ibid., pp. 8-14.
Berliner, Ibid., p. 4.
Sgori, Ibid., p. 44.

46. Additional useful resources available:

Physicians Sexual Assault Checklist, Queens Bench Foundation, 244 California St. - #210, San Francisco, Calif., U.S.A.

S. Sgori, Child Sexual Assault: Some Guidelines for Investigation and Assessment, Dept. of Children and Youth Services, Community Child Abuse and Neglect Demonstration Centre, Mt. Sinai Hospital, Hartford, Connecticut, U.S.A.

recommended is Guidelines for Interviewing Child Victims, footnote #21.

excellent checklist for parental/teacher guidance of children from Akron, Ohio Police Dept., (published in D. Russell, The Politics of Rape, (New York: Stein and Day, 1975), pp. 62-63.

Chapter IV - STATISTICS

RAPE -

WHO GETS RAPED?

WHO RAPES?

It is the fantasies of rape, or perhaps we should say the myths, that have formed our ideas of rape because they are all we ever hear about it.¹

The encounter between strangers most conforms to the public stereotype of "real rape". A majority of rapes that are reported to the police and which proceed to court are those involving complete strangers. Almost all statistical and research studies are gleaned from police statistics. The media covers such encounters in local newspapers and T.V. specials.

A woman who is attacked and sexually assaulted by a total stranger as she goes about her normal business can feel justified in reporting the rape to the police. It is much more difficult for the woman who is attacked by "someone she knows to accept that attack as rape (meaning she bears no feelings of responsibility or guilt for her part in the act).

Public health nurses, school counsellors, rape relief centres, social workers and crisis line personnel are all sources of information about those persons who do not report a sexual attack to the police. It takes a certain amount of initiative and assertiveness for a frightened and perhaps confused woman to report an attack to even those people seen as helpers. Even if we gather information from those informal helper sources, we must be aware that no one source has all the information on who and how many of us are attacked every day in B.C.

We will take a look at all the sources of information available to us and perhaps have at least a more factual picture of who gets raped. One cautionary fact we should all bear in mind is that it is not possible to characterize an "average" or "typical" rape victim or rapist. Statistics do have a way of generalizing information and leading us astray.

Two studies (A & B) done in Vancouver on large numbers of victims provide us with the following information.²

I	<u>A</u>		<u>B</u>	
Age	Under 15 years	13 %	Under 14	5 %
	15-24 years	56 %	14-24	67 %
	25 & over	31 %	25 & over	28 %

Women in both studies were of all ages, from pre-puberty to senior citizens, but most of the victims were young women. Consistent with the age distribution, most of the victims were single, working as students, and marginally employed or unemployed. In study A, 86% of cases involved white victims, study B, 83%.

II Occurrence of Attack

1. By Day

<u>A</u>		<u>B</u>	
Saturday	26 %	Saturday	20 %
Thursday	16 %	Thursday	16 %

2. By Month

<u>A</u>		<u>B</u>	
October	11 %	October	10 %
August	10 %	August	10 %
June	10 %	June	10 %
May	9 %	March	11 %

3. Hour of day

<u>A</u>		<u>B</u>	
4 p.m. - 12 p.m.	46 %	6 p.m. - 12 a.m.	35 %
12 p.m. - 8 a.m.	39 %	12 a.m. - 6 a.m.	50 %
8 a.m. - 4 p.m.	15 %	12 p.m. - 6 p.m.	9 %
		6 a.m. - 12 p.m.	6 %

No clear seasonal pattern emerges from these studies, although the warmer months have a slightly higher percentage of the total rapes for a year. Of greater significance are patterns of day and hour of occurrence, with Thursday and Saturday providing 42% (A) and 36%(B) of the totals. Rape is a night time crime with the peak hours of 10 p.m. to 2 a.m.

An increase in rapes occurring around the time of the full moon has also been noted. Police and hospital emergency units know that there tends to be a rise in the numbers of all violent crimes committed and traffic accidents concurrent with the full moon period.

4. Where

	<u>A</u>	<u>B</u>
victim's house	28 %	29 %
assailant's house	14 %	24 %
outdoors	21 %	16 %
vehicles	25 %	20 %
other residences	8 %	7 %

41% of the "vehicle rapes" in Study A occurred when the victim was hitchhiking, for 10% of the total; similarly, 10% of the rapes in Study B involved hitchhiking by the victim.

5. How	<u>A</u>	<u>B</u>
a)	1 assailant 83 % 2 or more assailants 17 %	1 assailant 74 % 2 or more assailants 26 %
b)	attacked by stranger(s) 47 % attacked by friend(s) or acquaintance(s) 53 %	attacked by stranger(s) 75 % attack by friend(s) or acquaintance(s) 25 %
c)	physical or verbal force used 94 %	physical force 80 % verbal force 58 %
d)	victim resisted 67 %	-----
e)	victim injured 63 %	victim injured 60 %
f)	forced into other acts besides legal "rape" 61 %	victim forced into other acts 67 %
g)	victim used intoxicants prior to assault 44 %	victim used intoxicants 35 %

Various other studies available³ present us with similar data, although in each of the studies (but one) the stranger-stranger rape is predominant. All sources available, but Study A, provide statistics gleaned from police records or convicted rapists' records, which limits data to certain types of rape. The authors of Study B note that the relationship or lack of between the rapist and the victim define the probability of police "founded" or "unfounded" classification.⁴

Rape Relief centres receive a high percentage of calls from women who know the rapist, which is consistent with the fact that victims who call a Rape Relief centre may be aware that a

centre will offer information and emotional support without even having to know the names of either the caller or her assailant. Therefore, it is not surprising that a higher percentage of acquaintance rapes would be documented in Study A, from Vancouver Rape Relief records.

A comparative study of Boston and Los Angeles, U.S.A., rape offenses reported to police provides us with an analysis of striking differences found in police classification rules for rape. The data is as follows:

Relationship of Offender to Victim

	<u>Los Angeles</u>	<u>Boston</u>
Stranger	56 %	91 %
Acquaintance	44 %	9 %

Several points are raised in the authors' discussion about this difference in police-reported rape. The Los Angeles police reports were far more detailed, "officers describe with some precision the victim's condition at the time she is being interviewed, and they probe for inconsistencies and contradictions in the complainant's version of events. The officialness of the Boston reports, on the contrary, carries the impression that the nature of the events has been, perhaps rather summarily, pressed into a preordained formula."⁵

As well, they discuss the idea that more permissive social and sexual climates contribute to a "rape environment" (Los Angeles in contrast to Boston).

It is suggested by the authors of this study that, contrary to common belief, an increase in sexual permissiveness in society will increase the incidence of rape. The so-called sexual revolution has diminished traditional and moral justifications for limiting sexual interactions to prescribed situations and individuals.

If it is true that male sexuality has been closely intertwined with the ability to seduce women, the traditional masculinity concepts may be threatened. Male expectations of sexual behavior in dating and other social situations will become stronger without the moral and social sanctions recognized traditionally.

In specific situations, a woman's "no" to a sexual advance can no longer be assumed to be justified on traditional grounds of restrictive church, parental or otherwise societal prohibitions. In this setting, the male may become hard-pressed to interpret rejection. Weis and Borges say, "the man may experience this as a rejection of himself as either a person or as a man, or both".⁶

The essentially hostile and aggressive components of the sexual encounter may become clear. Chappell, et al, conclude, "we would argue that forcible rape represents a response arising out of the chaos of a beleaguered self-image".⁷

Clark's and McDonald's findings, in Canada, seem consistent ... "for many rapists their sexual behavior, even with those with whom they have some continuing sexual relationship, is not markedly different from what it is in the rape situation. If they characteristically believe that a high degree of power through threat or use of force is necessary to demonstrate masculinity, then this element will be present in all their relationships and accounts for their beliefs about the lack of moral wrongdoing in what is in fact a rape situation."⁸

We have difficulty describing who the offender is. With very few instances, only those offenders who are convicted are available for study (who are, as the legal section points out, only a small percentage of the reported offenders and an unknown percentage of the total possible number of rapists.

We return briefly to the same data as we used in describing the victim of rape:

	<u>A</u> ⁹		<u>B</u> ¹⁰
Age: 16-25 years	42 %	15-24 years	44 %
26-35 years	38 %	25-34 years	40 %
36-45 years	15 %	35-44 years	12 %

As with the victims, the vast majority of rapists are young and white (A - 76%, B - 80%).

	<u>A</u>		<u>B</u>
Alcohol Use:			
Rapist drinking prior to attack	71 %	Rapist drinking	47 %

Alcohol has been suggested as a factor in the rape encounter. The B.C. studies used indicate that a significant percentage of both rapist (A;71%, B:47%) and rape victims (A:44%, B:35%) had been drinking prior to the attack. It is known that alcohol impairs judgment, inhibits self-control and enhances aggression. Those who have addressed the subject of rape and alcohol indicate that there is an important but not necessarily direct effect between alcohol and rape.¹¹

McDonald suggests that alcohol and criminal behavior, as far as the rapist is concerned, may have the same root cause in psychological conflict.¹² With such limiting factors as the percentage of actual rapes we have available for study (few victims report, fewer rapists are caught and convicted) the link between alcohol and rape is suggestive but not conclusive.

Other Canadian research provides us with some data on convicted rapists which we will generalize.¹³ Suspects arrested for rape are, on the whole, from the lower economic strata. As Clark and Lewis point out, though, "generally, suspects from lower social-economic groups are more likely to be perceived by a jury and officers of the court as the sort of men likely to have committed rape, and therefore they are more likely to be convicted and labelled as 'rapist'."¹⁴

Rapists tend to fall along a continuum. At one end of the continuum is the man who makes no attempt to disguise his behaviour, and who does not see it as wrong because he does not believe that his victim's wishes are of any relevance whatsoever. Rape is a meaningless concept to him, because he does not see women as self-determining individuals. At the other end of the continuum is the rapist who will try to avoid seeing his actions as rape. He recognizes that his victim has (at least theoretically) the right to refuse intercourse, and will therefore attempt to deny the coerciveness of the act and to characterize it, instead, as a "date" or a "seduction".¹⁵

Nicholas Groth¹⁶ defines rape as the sexual expression of needs that are not primarily sexual. Groth has identified three types of rape from cases assessed at a psychiatric clinic: anger rape, sadistic rape and power rape. Anger, power and sadism operated in all rapes according to this theory, to different degrees.

We summarize these classifications:

- 1) Anger rape. Offenders have often been subjected to violence themselves, by males. Sex is considered "dirty" and is used to defile something. Rape often involves degrading acts and more force than necessary, and is often an impulsive act. Victims are brutalized.

- 2) Sadistic rape. Rarest and most lethal (4/200 offenders interviewed). Aggression and sexuality fused. Resistance by a victim increases excitement and violence. Premeditation frequent. Victims brutalized and emotionally shattered.
- 3) Power rape. Most frequent type of rape, but least likely to be identified as rape. Sexuality is used as a means of gaining control. Offender suffers from feelings of inadequacy. Rape fantasized repeatedly. Offender displays compulsive behavior, repeating crime over and over. Anger is a reaction and not a motive. Victims not brutalized but are verbally intimidated, and experience powerlessness. Victim resistance most effective.

Groth maintains that anger, power and sadism operate in all rapes; it is their proportion that determines the actions of the rapist. For offenders, the ordinary stresses of living become extraordinary pressures because of their limited ability to cope.

Studies show no distinct psychological differences between rapists and other men, "...rather, that on the basis of external and internal stimulus, he (the rapist) has come to believe that he must do something in order to achieve something he must have".¹⁷

Many men believe that heterosexual conquest is a means to status and self-worth. Many women believe that submission is a means to status and self-worth. Coercion in normal sexual relationships is all too common. Very few of us wish to be rapists or victims, but until we are all frank with our individual use of sexuality as a power-wielding tool, we will continue to have rape in all its variations.

As there have been classifications of rapist-types, there are classifications of victim-types. Some years ago the term "victim-precipitation"¹⁸ was created and applied to persons who provoke violence against themselves. Menachem Amir applied the term to victims when he said, "Victim precipitation says, in effect, an unlawful act has been committed but had the victim behaved in a different fashion, the crime in question might have been avoided."¹⁹

A famous anecdote offers a pointed illustration of victim-blaming: "Twenty years ago, Zero Mostel used to do a sketch in which he impersonated a Dixiecrat Senator conducting an investigation of the origins of World War II. At the climax of the sketch, the senator boomed out, in an excruciating mixture of triumph and suspicion, 'What was Pearl Harbor doing in the Pacific?'"²⁰

As L. Clark says, "The application of victimology to rape paralleled the finding that the rapist is 'normal'. The next step is to say that women who complain of rape are actually more to blame and maybe unbalanced themselves."²¹

In addition, rape-precipitation is defined thus: "A woman's behavior, if passive, may be seen as worthy to suit action, and if active, may be taken as an actual promise of success to one's sexual intentions."²²

What woman can win in this situation? If she is passive, she provokes; if she is active, she provokes, according to this theory. The fallacy is..."it is not her behavior that precipitates rape at all, but the rapist's interpretation of her behavior...(victims') behavior is not classified as 'rape-precipitating' unless they are actually raped".²³

The theory behind victim-precipitation is often used to explain why women should not hitchhike. Women who get into the cars of strange men:

1. should know better, and
2. are "asking for it".

So it is that "The morals of the female hitchhiker are viewed by certain elements of society as similar to those of a tramp".²⁴

The authors of this study on hitchhike rape comment further, "the offenders are not responding to any abnormal pathology, but view their victims as persons to be sexually exploited in the same manner as prostitutes".²⁵

Another interesting and applicable study was done in Toronto during the 23 day Toronto Transit Strike of 1974, by Geller, to discover whether or not female sexual assault victims could be considered responsible for the offense against them.

The results of his study provided a demonstration that the "female victim is not responsible for the sexual offense committed against her. It appears that the opportunity to commit a sexual offense and the availability of a female victim are the...variables that determine the occurrence of a sexual offense."²⁶ During the TTC strike, sexual offenses against female hitchhikers increased by 8 times compared to the pre- and post-strike periods. Geller summarizes, "The present results disconfirm the theory that any conscious or unconscious motivation on the part of the female victim may have contributed to the offense."²⁷

This discussion is obviously beside the point for those of us who would insist emphatically that women should not hitchhike. In reality, it is clear that some men who pick up hitchhikers may have very different motives than the rider who wants to get from point A to point B. In reality, too, is the fact that in rural areas or for women who do not have private transportation, hitchhiking is a mode of transportation. In reality, women are raped while hitchhiking and police receive frequent enough complaints (approximately 10% of their total reports) to be concerned for the safety of the potential or practising hitchhiker.

We can be certain that hitchhikers are not "asking to be raped", and that they do not deserve such treatment. Police may find it difficult to be rigorous in tracking down the hitchhiker rapists. Even when the police are aware that there are men who are repeat rapists, victims may have a very limited description of the assailant because of the nature of the occurrence.

The myth that secretly women want to be raped is not supported. It has been shown that even using the standard of a "gesture" as victim precipitating behavior, only 4% of the offenses were in any form encouraged.²⁸ Gebhard, et al, noted interpretive behavior from rapists interviewed in prison: "The rapist... often looks upon grudging and reluctant cooperation as evidence of enthusiasm. Often we hear the plaint, 'It wasn't rape - she took her clothes off.'²⁹

Juries acquit on the basis of assumptions of risk on the part of the victim.³⁰ If the defendant and victim have been seen together previous to the assault, if there is drinking involved (as a bar is a casual meeting place), the jury will often acquit the defendant.

We cannot assume that women will not be raped if they "behave". Considering that nearly one-third of the rapes in both studies earlier in this section occurred in the woman's own home, we

can assume that rape can happen to any woman, even should she take every precaution to protect herself.

"Blaming the victim" can be an excuse for women who are "good people" to avoid the threatening reality in their lives. For men, it is difficult to realize that rapists have no special ugly characteristics. It is a rare man who will admit that he, too, given the right circumstances, could be a potential rapist.

It is often said that rape is a big city crime. If we use what is called a "rape rate" (per ever 100,000 people there are X number of police-reported rapes), in 1977, there were these rates for the following B.C. census divisions:

Vancouver	69
Nanaimo	105
Kamloops	74
Victoria ³¹	33

Most large U.S. cities (where rape rates have previously been calculated) have rape rates ranging between 30 and 60.³² Rape is relatively more frequent in rural than urban environments.³³

Rape by men on men and women on women are items of some speculation, not a few myths and very little information. In 1977, B.C. registered 143 indecent assaults on males, all by other males.³⁴ It is unknown who were the perpetrators and who were the victims.

It may well be that homosexuals, men in particular, are subjected to sexual attacks more than heterosexual men. If it is true, as Cohen et al indicate, in some cases "rape...is itself a defense against strong homosexual wishes",³⁵ then homosexual men would be "natural" targets for the rapists' externalized fears. In a former capacity as a rape relief worker, I have been invited to speak, along with police officers, at men's groups. Homosexual men have shared many stories of rape assaults upon themselves at these meetings. None of these attacks had been reported to the police.

The only information of any substance available on same-sex assaults are documented prison rapes.³⁶ Sexual assault of inmates by other inmates is a major problem in prisons and jails but documentation still remains scanty.

Until recently, sexual assault among male prisoners has been kept secret. Few men will complain, out of fear. With increasing media coverage and public awareness, "prison rape is generally seen today for what it is: an acting out of power roles within an all-male, authoritarian environment in which the younger, weaker inmate...is forced to play the role that in the outside world is assigned to women".³⁷

Finding no research documentation in Canada, we are forced to resort to U.S. findings. Alan J. Davis, Chief Assistant District Attorney in Philadelphia, found, in an investigation in 1968 on that city's prisons, that sexual assault was "epidemic".³⁸ Davis found that very few men were not involved in either being assaulted or being an assailant.

Incidents of guard rape also come to the surface from time to time in prisons³⁹ and mental hospitals.⁴⁰

Rape of women by women is also not unknown in women's prisons. Again, few women complain to authorities because they are afraid. In a study of a women's prison, Rose Gialambordo⁴¹ discovered that among women who are in prison for any length of time, there is a tendency for "nest-building" or "family-units" to form, rather than what seems to be the basic tyranny of the male-on-male rape found in the men's prisons.

In San Francisco, three separate projects have been formed to discover and deal with, in part, sexual assaults on homosexual persons. One of these projects, federally funded, The Centre for Homosexual Education, Evaluation and Research (CHEER) has as one of its projects:

1. researching the incidence of prison male-on-male rape;
2. screening and protocol for assigning inmates in San Francisco prisons;
3. protecting rights and confidentiality of assault victims in the prisons; and
4. crisis intervention for assaulted men.⁴²

Since this project is midstream, the results of the research aspects and the effects of direct counselling will not be known for some time.

When men or boys rape in gangs, the physical advantage over the woman (or man) is clearly evident. Far too little has been said about the numerical odds found in a surprisingly large number of rape assaults. Women were raped by more than one man in 17% of the Study A cases, 26% of Study B cases.⁴³ In other studies, the percentage of women victims who have more than one assailant was even higher (50%,⁴⁴ 30%⁴⁵ 43%⁴⁶. The latter figure accounted for 71% of the total number of offenders.)

Gang rapes often involve more violence and extra sexual humiliation than single-man rapes.⁴⁷ One would not logically think that more violence was necessary in a gang-rape situation. It certainly is no problem to intimidate and overpower the victim in a group-rape. But, as Susan Griffin points out, "Far from discouraging violence, the presence of other men may, in fact, encourage sadism, and even cause the behavior".⁴⁸

We relate one of Blanchard's stories, from his study of gang-rape, in 1959:

The leader of the male group...apparently precipitated and maintained the activity, despite misgivings, because of a need to fulfill the role that the other two men had assigned to him. 'I was scared when it began to happen', he says. 'I wanted to leave but I didn't want to say it to the other guys - you know - that I was scared.'⁴⁹

Susan Brownmiller says of gang-rape: "they are proof, too, of male bonding, to borrow a phrase made popular by Lionel Tiger,

proof of a desire to humiliate the victim beyond the act of rape through the process of anonymous mass assaults".⁵⁰ Psychiatrist Phyllis Chesler similarly relates:

Lower-ranking male members involved in group rapes are often "erotically" attracted to their leader....In fact, heterosexual gang-rape is a brutal and brutally clear expression of one major way in which the Oedipal dilemma is resolved (repressed and forbidden sexual longing for the mother, together with a reactive rage towards the father). Fathers and sons make a pact based on a commitment to use what they share - a penis - on (or against) bodies without penises; female bodies. In gang-rape the mutual contempt⁵¹ for the "other" kind of body creates a truce....

Further study of gang-rape would, I believe, elicit some valuable material about rape motives in general and could provide additional information with which to evaluate the assumption that rape is an act of violence done by men who visibly act out a general and "normal" male ambiguity towards women.⁵²

Young men in particular, just developing a sense of "masculine identity", may find it necessary to prove themselves in this violent sexual aggressiveness, with the rest of the gang as both protection and stimulation of hostile actions. That our culture not only accepts, but condones, such an attitude toward male sexuality is obvious from the common (and seemingly innocuous) tradition of "stag parties", and the well-used phrase, "every boy has to sow his wild oats".

It is striking that most rapists show no sign of remorse or awareness of guilt.⁵³ The documentation that we have provided leads us to the conclusion that these men believe that heterosexual conquest is an important, and probably necessary, way of gaining self-worth. It is true that rapists gain respect by fear and may actually believe that the victims like being raped.

As Lorene Clark and Debra Lewis point out, an ironic twist is that in a considerable number of cases the offender was unable, or only with difficulty, to achieve erection or obtain an orgasm.⁵⁴ Orgasm was not achieved in 21% of the studied cases, and only with difficulty in a further 10%. In 50% of the cases where the offender had difficulty with orgasm, the offender's problem began with an inability to achieve satisfactory erection. Unfortunately, it is often these situations where the offender forces the victim into more humiliating positions and she may be more seriously harmed physically.⁵⁵

This fact would certainly cast considerable doubt on another popular myth, that "men rape because they are driven by lust and passion".⁵⁶

Amir found that fully 82% of the rapes occurring in Philadelphia were planned or partially planned with regard to either the intent and/or the victim. Almost all group rapes (90%) in his study were found to be planned.⁵⁷ This evidence contradicts another popular myth that a man rapes because he is provoked by the victim's behavior.

Rape is occasionally associated with other crimes, particularly theft. In two Canadian studies virtually all cases of theft seem to come as an after-though of a rape and the amounts stolen were usually less than \$125.⁵⁸

In several U.S. studies the sparcity of information makes it difficult to determine which crime was the motivating factor for an offender.

In a recent study of older women who had been raped, a considerably higher percentage of rapes occurred in association with theft than for women under 50 (65% as compared to 3%).⁵⁹

Rape associated with murders are investigated in Study B by a special unit of the RCMP and as such have a special category of classification not contained in the data we have presented.

It is believed that victims of rape who are Native Indian report rape assaults to an even lesser degree than victims who are white.⁶⁰ Lewis and Clark concluded from their Vancouver study data that, "...a significant number of cases involving Native victims ultimately ended up with a (police) unfounded classification because the complainants themselves have not wanted to appear in court as witnesses or would not have been available as a witness if the case had gone to court".⁶¹ It was their belief that Native women were discouraged from proceeding with charges, rather than an outright police bias or police awareness that such cases could have a lesser success

rate at trial. What form this "discouragement" takes is not made clear in the Lewis and Clark discussion of the data implications.

It may be that, even more so than white women, Native women do not believe that treatment at the hands of the police and courts will benefit themselves as the victims of crime and that it is this belief that keeps the reporting rate low and filters out the cases which might ultimately go to court. How justified this belief is cannot at this time be documented but Lewis and Clark indicate that generally, "even when it is reported, greater pressures of both a direct and an indirect sort are experienced by the victim and discourage her from becoming a part of the public process through possible participation in a rape trial." ⁶²

A few examples will perhaps indicate the author's belief that Native Indian women experience rape as a fact of life at an even younger age than the "average" white victim. That victims are chosen by rapists for their vulnerability has been documented; further information is needed from Native Indian women to elucidate any patterns of inherent racism in the police and legal process that would affect the reporting and processing of rape complaints by Native Indian women.

- 1) In a letter from the Roberts Creek Women's Centre: "We feel there is a large problem of rape on the reserve, example: due to lack of transportation a native woman will hitchhike somewhere, young white men pick her up, assault/rape her. Because she feels frustration and fear with the white persons' legal system she never reports the incident."⁶³

- 2) Several cases of rape on young (11-17 years) Native Indian women reported to me by lawyers and Native Friendship Centres. None of these cases reported to the police. ⁶⁴
- 3) Two cases involving "street hassling" of young Native Indian women by the police of a B.C. town. Women forced into police cars and raped. Continued harrasment on the street after the incidents by the same police officers. No formal complaint in either case. ⁶⁴
- 4) Rape of a Native Indian woman on the reserve by a man who is a prominent official of a nearby town. No formal complaints. ⁶⁴
- 5) Social worker reported a 14 year old Native Indian woman told her of 11 attempted and completed rapes on her in two months. Young woman is now a prostitute and heroin addict. ⁶⁴

According to all our statistics, the street, the home and the automobile emerge as dangerous places for women. Being too young or too old to "attract" a rapist is not safe, either. Up to the end of November 1977, all the rapes in Quesnel, B.C. (15 reports) involved women between 10 and 16 years old. ⁶⁵ Ten percent of the women in each of the studies we earlier described in Vancouver were 40 years or over. ⁶⁶

The incidence of reported rapist admissions to our prisons has risen rapidly in the past few years (70% increase from 1972/73 to 1975/76.) ⁶⁷ In one year alone (1977/78) the over-all increases in reported rapes in this province was 10%. ⁵⁸

Those of us who find statistics dry and/or misleading in their generalizations of highly personal experiences might find rapist and three-times murderer Kenneth Paul Rogers' analysis of rape illuminating. He describes at length his own

personal indoctrination as a male in our society and equates such attributes as fear, guilt, sex, violence, ambiguity towards women with his manhood. If our society is not to continue to produce men who need to "mentally masterbate within a woman's organ",⁶⁹ then we must provide preventative education on the rape phenomena for men in this province and not limit our advice giving to women who are the potential victims of this aggression.

IV FOOTNOTES

1. A Medea and K. Thompson, Against Rape, New York: Farrar, Straus & Giroux, 1974, p.16.
2. Study A
Susanna Neufeld & Barbara Vit den Bogaard, Characteristics of Rape, Vancouver Rape Relief, Funded by Non-Medical Use of Drugs Directorate, 1977. A study of 403 cases, 1974-1977.

Study B

* Lorenne Clark & Debra Lewis, A Study of Rape in Canada: Phases "C" and "D", Report of the Donner Foundation of Canada, University of Toronto: Centre of Criminology, 1977. A study of 420 cases, 1970-1974.

(75% of all victims in Study A reported the assault to the police, including third-party reports anonymously turned in by The Rape Relief Centre. 32% of the cases reported had charges laid. In 35% of those "charged" cases, there were no court proceedings. In Study B, 100% were reported to the police, 18% of the reported cases had charges laid, in 72% of those cases there were court proceedings.) Vancouver Rape Relief calculates the following, in addition, for the 1970-1974 period:

Rape Relief	To Police	"Founded"	Arrested	Court	Con-victions
1502	387	175	82	56	27
	25%	40%	45%	72%	50%

resulting in 1.1% conviction-rate, considering all cases.

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6. K. Weis and S. Borges, "Victimology and Rape: The Case of the Legitimate Victim", Issues in Criminology, 8:2, p.109.
7. Chappell and Geis, op.cit., p.231.
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Clark and Lewis note that alcohol use prior to a rape occurrence (offender only, victim only, mutually) affects the probability of police Unfounded classification (op.cit.,p.5).

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 J. McDonald, op.cit.
 R.J. McCaldron, op.cit., pp.37-59.
 O.P. Gebhard, J. Gagnon, W. Pomeroy, C. Christenson, Sex Offenders: An Analysis of Types, New York, 1965.
 L. Clark and D. Lewis, Rape: The Price of Coercive Sexuality, Toronto: Canadian Women's Educational Press, 1977, pp. 95-106.
14. Clark and Lewis, Rape: The Price, op.cit., p.100.
15. Clark and Lewis, Ibid, p.101.
16. N. Groth, "Psychology of the Rapist: Theory and Case Material", Faces of Rape Conference, Philadelphia, Pa., Jan., 1978; reprinted in Canadian Rape Crisis Centres National Newsletter, April, 1978.
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Chapter V - MEDICAL TREATMENT OF RAPED PERSONS

There is one type of woman I would have a hard time believing was raped: a woman between 16 and 25 ... on the pill and no longer a virgin."¹

In Canada rape is a crime but rejection or hostility toward the victim is not."²

The discussion in this section will examine the medical involvement with raped persons to determine:

- 1) the extent to which medical procedures fulfill the legal requirements for documentation of sexual assault cases in B.C.;
- 2) the extent to which health care facilities provide for the needs of sexually assaulted persons in B.C.;
- 3) how factors of the treatment procedures affect the physical and emotional trauma of raped persons; and
- 4) the extent to which raped persons use medical facilities in B.C.

There is little documentation in B.C. of the numbers of raped persons who have sought medical or other assistance from hospitals or from physicians in their offices. No hospital that I am aware of in B.C. has a method to retrieve files on patients who claim rape, either in- or out-patient. There is also no central

recording index of the numbers of sexually assaulted persons seeking medical care from physicians in their offices after an assault. Because documentation of patients and their requirements is unavailable in a detailed manner, the discussion and subsequent recommendations will be based on the following sources of information:

- 1) interviews with individual physicians, and emergency room head nurses in selected B.C. hospitals;
- 2) written material prepared on procedures utilized in hospitals of Canada and the United States;
- 3) research studies in selected hospitals of Canada and the United States, including one recent study done in Vancouver; and
- 4) recommendations for change based on the documented experiences of physicians and emergency room nurses.

Most raped persons who seek immediate health care attend at a hospital or hospital clinic for medical care shortly after a rape.³ This is due to several factors:

- 1) the majority of rapes occur at night, and the only immediate care available is at a hospital emergency room;
- 2) not all doctors are familiar with the medico-legal procedures for rape examinations and are, as a result, reluctant to become involved in what could be a court case;⁴
- 3) women seek an anonymous source of medical care out of a wish to avoid embarrassing questions or difficult decisions; and
- 4) arrangements have often been made between particular hospitals and local policing units for the treatment of sexual assault victims and the collection of evidence.

Because of these factors, our discussion will deal in the main with hospital procedure and practice. Such discussion should as well be useful in many respects to physicians in their offices and to health professionals in other than emergency health care provision; i.e., public health nurses, psychiatrists, and free clinic personnel.

When a person is sexually attacked, that person is in need of immediate sympathetic and effective medical and psychological care. As Burgess and Holmstrom state, "rape is experienced by victims as a life-threatening situation and this triggers an acute stress reaction which requires them to go through a long-term reorganization process. As a crisis situation, it makes them hypersensitive to the attitudes of those people to whom they turn for help and assistance."⁵

The trauma that follows rape relates directly to the treatment received afterwards. According to Dr. T. Crenshaw, the initial medical attention provided by health care persons can decidedly affect the long-range effects of the sexual assault.⁶

Burgess and Holmstrom have categorized five types of crisis needs as expressed by the victims of sexual assault:

- 1) medical intervention - "I need a physician";
- 2) police intervention - "I need a policeman";
- 3) psychological intervention - "I need to talk to someone";

- 4) uncertain - "I'm not sure I want anything"; and
- 5) control - "I need control".⁷

Since, as Dr. Vitullo points out, "the role of the physician has been (a) diagnosis, and (b) treatment",⁸ it is understandable that physicians, as well as other medical personnel may be reluctant to become involved in fulfilling all the needs of the sexual assault victims.

It is true that physicians and all health care persons must exercise discretion in handling the responsibilities encompassed in dealing with such cases. It seems reasonable that if physicians, and indeed all medical personnel, have the necessary knowledge of procedures for ensuring proper documentation of medical findings and the understanding of the shock suffered by the victim of sexual assault, they will be better prepared to be involved in rape cases. Pragmatically, as Dr. Vitullo aptly mentions:

...an understanding of the traumatic shock suffered by the victim and an overt display of concern for the victim, coupled with a genuine interest in assisting her through this difficult period, should take initial priority. This is important in gaining her confidence and cooperation in order to obtain necessary data and conduct a thorough physical examination.⁹

It has been suggested, and documentation bears out the fact, that physicians and other hospital personnel are overly-concerned that rape cases that come to their attention will

require court testimony.¹⁰ Because hospital personnel focus their efforts on maintaining proper protocol, the rape victims may suffer further emotional trauma. The technical issues cloud medical personnel's perception of the woman. As Ransom and Howell say, "the investigative legal pressure to gather detailed physical evidence from the patient further complicates the need for immediate, sensitive and humanly supportive health care." ¹¹

Several examples will illuminate the trend towards emphasis on the technical aspects of medical treatment.

Nurses of several B.C. hospitals have told the researcher that directives specifically forbid them to talk with a woman awaiting a rape examination.¹² The reasoning behind such policy, as I understand it, is that should a nurse be the first to hear the rape "complaint" she would be legally bound to appear in court. A legal requirement specific to all rape cases is that the victim must tell her own story and not be asked if she has been raped (such a case would be thrown out of court because of the leading nature of the question). Further, it seems that an additional reasoning behind such directives is that staff time could be lost in possible court appearances.

The effect of this policy, written or verbal, on the rape victims is that of being shunned and even abandoned. Often, persons who have been sexually assaulted will wait at least

one hour prior to being seen by a physician.¹³ The long wait is due to another procedure which is universal in hospitals of B.C. Generally, it is policy to locate the woman's own doctor, if she has one, and request her or his attendance. The woman's own doctor will often decline to attend. The on-call doctor or pathologist will then be contacted to make the examination and prescribe treatment. This procedure takes time.

If, as we have indicated, a sexual assault victim is in a state of crisis, she is being done a great disservice by being isolated from human contact due to the self-protective measure of the hospital. Therapy has been aborted before it has had a chance to develop.

The only 24-hour services in much of B.C. are the police and the hospitals. Emergency room nurses are called upon to deal with distress calls (medical and otherwise) of all kinds. In 1977, staff from Victoria Rape Relief sponsored a workshop for professionals in the city of Port Alberni. Letters had been forwarded to all persons who might come in contact with persons who had been raped in Port Alberni. Four persons from the community attended the workshop and these four were all emergency room nurses. These women expressed the need to have not only accurate medical procedures on hand, but to have information on counselling techniques, what to expect from a rape victim, and what alternatives women had who came in or called the hospital.

The women voiced concern for the rape victim who came into the hospital on a busy night and could receive little, if any, care beyond the medical exam and tests.

Nurses are professionals in health care provision and most nurses are women. As such, they are in a unique position to provide the sympathetic treatment needed by raped persons. Without information and hospital support, nurses are unable to provide assistance and support for the raped persons.¹⁴

Another factor which affects those who would seek health care after a rape is the police-reporting policy of hospitals. Hospitals, at this time, can set policy as to whether or not a rape must be reported to the police, regardless of the patient's wishes.

Because women are unsure of local hospital policy, or if they know that the local hospital will call the police to attend, they may not go for medical help. There is no legal obligation for a woman to press charges. Thus, the effect of hospitals taking control of the situation may in fact deny the right of the injured person to needed health care.¹⁵

It seems that persons who provide medical care and sexual assault victims are both short-changed in yet another area. In some hospitals of B.C. there is a standard hospital procedure for rape exams along with the recommended "rape box" for collection and maintenance of evidence.¹⁶ In other hospitals, the medico-legal procedures are not clearly defined or are left up to the

local RCMP to provide. Again, as we have pointed out, if the woman has not first reported to the local police or does not wish to report the assault to the police, the medical procedures to follow are unclear.

It is obvious from the problem areas defined that hospitals in the province vary in their readiness to handle raped persons. The point being made is this: hospitals in B.C. vary dramatically in their ability to provide for the medico-legal needs of raped persons, the health care needs of raped persons, and the counselling needs of raped persons.

It should be incumbent on every hospital and, indeed, every health care resource and physician's office to obtain and make themselves familiar with the technical (legal), the medical, and the human needs of the raped persons who seek health care services.

It is the researcher's belief that were such information available routinely, many more health care persons would be prepared and willing to treat rape victims. No physician has directly told me that she or he is unwilling to treat rape victims, but testimonies of rape victims, RCMP officers and other researchers indicate this unwillingness on the part of some doctors. Further, it is my belief that if such information were routine knowledge, the exaggerated concern with the technical aspects of rape examinations would lessen, to the benefit of the counselling and health needs of the rape victims.

The subject of rape makes many of us uneasy. This discomfort and the lack of general knowledge about the needs of the rape victims may be covered up by a coldness, a harshness, and/or an authoritarian attitude towards the raped person.

A brief description of those needs and an indication of further and more elaborate resource materials will assist those who see rape victims.

The raped person is in crisis; her reactions to some extent are like those of any person in crisis. One important difference is that victims of rape often get blamed for the crime even by family members or friends. The social attitudes which place the blame on her will compound the crisis and the resolution of feelings.¹⁸

More specifically, during the period immediately after the assault, referred to as phase 1, the woman is suffering from shock and disbelief.¹⁹ These feelings will be expressed or controlled.²⁰ As Robinson points out, if her reactions are controlled, "she is likely to receive a colder reception from the people who deal with her, for the assumption is often made that if she is not upset, the rape must not have occurred."²¹

Most women will feel ashamed, dirty and guilty. Again, Robinson says, "she may be reacting not just to the rape but also to

the fact that her life was threatened - and, in fact, she may fear retaliation..."²² The victim will probably be physically and emotionally exhausted (most rapes occur in the evening and she may not finish with a medical exam until some time in the morning of the next day). She is concerned about what her close family members or friends will say, whether she is physically injured, or has V.D.

The woman needs:

- 1) a listener who will not ask leading questions or rush her, preferably someone who can stay with her through the medical exam;
- 2) physical comfort, especially during the waiting period before the medical exam; i.e., drink of water, kleenex, coffee, etc.;
- 3) information on medical procedures and other possible procedures; i.e., does she want or has she reported to the police, community "helping" facilities;
- 4) follow-up information on prescribed medical treatment; i.e., "morning-after pill" for possible pregnancy, penicillin for V.D. (preferably written instructions); and
- 5) a way home and some clothes to wear if hers have been torn during the assault or taken by the police for evidence.

The raped person also will need a short explanation of later feelings which may arise. After a few days, what is called phase 2 begins and the person's anxiety diminishes. The period is also called the denial period, as the woman will feel that "everything is back to normal". At some point the person will

probably become depressed and angry; i.e., "Why me?". During this period (phase 3), many feelings will surface and may last for days or weeks.²³

A great deal will depend on the patient's emotional well-being prior to the incident in terms of the feelings and length of time to return to "normal functioning". Old emotional troubles may arise and become attached to the rape crisis.²⁴ The violence of the assault itself, whether the attacker was someone she knew or a stranger, previous experiences in life, family or friends' support will all affect the person's functioning and resolution of the experience.

The acute phase is usually associated with physical symptoms such as gastrointestinal problems, muscular tension, sleeping pattern disturbances, and genito-urinary discomfort.²⁵

The long-term process includes "changes in life-style, such as changing residences, seeking family and social network support, dealing with repetitive nightmare and phobias" and breakups in male-female relationships.²⁶

If the woman who is in the emergency department is given some understanding that she may possibly get depressed and angry at a later time, the chances are she will be able to "work through" her feelings at that time and not think she is suddenly "going crazy". It may be helpful to give some facts about rape

(that people get raped who are young or old, married or single, that rape is a crime of violence and not of sex) so as to relieve the person's feelings of guilt and self-blame.

The important crisis-counselling factors are to let the person talk and to provide her with information to her questions so that she can begin to take control of her life again.

This general over-view skims the surface. Rape is a highly personal experience about which we must generalize. Particularly in cases involving teenage women the need for support is indicated. According to several researchers involved in counselling teens, the after-effects of the rape can be particularly damaging.²⁷ As we know from earlier documentation, the majority of rape victims are teenage women; they are also the most likely to be blamed for their own rapes. As Dr. Felice says:

In our society, the adolescent is struggling for sexual identity. She wants to be a grown-up woman in many ways and look sexy, yet if she looks attractive and well-groomed, she is accused of bringing on the rape. She just can't win.²⁸

It is clear from the information available that there is no one policy or practice in the medical treatment of rape victims in B.C. Until the health care available is upgraded and standardized, we are not likely to affect many of those persons who have a need and a right to health care.

To ensure proper procedures for the protection of the patient and the medical personnel and for the preservation of medical evidence, I would recommend that the Ministry of Health urge the adoption of a hospital protocol in B.C., which should include the following items as standard hospital procedure:

1. A standardized medico-legal exam form and written procedure to be prepared which is non-sex specific (applicable for female and male assault victims). Unless the patient objects, medical treatment to include an evidentiary exam, to leave police-reporting option open to the patient.
2. Use of one salaried physician in a large hospital to eliminate doctors' reluctance to appear in court due to the financial loss of a day's work. Alternately, physicians should be paid through the Medical Services Plan of B.C. for lost time in court.
3. Police to be called in only with the patient's full understanding and consent. Hospital policies to specify that treatment of raped persons must not differ according to whether or not charges are to be laid.
4. Sexual assault cases to receive priority treatment even if no severe physical trauma is evident.

5. Provide, if possible, for a female victim's preference for female doctors to perform examinations and treatment.²⁹
6. The victim to be asked if she/he wants a friend or counsellor in attendance.
7. Patients to be made aware of the necessary follow-up care (i.e., further V.D. preventative care) and informed of a source for follow-up counselling.
8. All procedures to be explained to the raped person prior to examination.
9. All rape victims to receive V.D. tests and pregnancy tests, if needed.
10. Any drugs administered to be carefully explained and instructions written down, to be taken home by the patient.
11. Medical personnel to ensure that the patient has a way to get home.

The development of effective treatment standards would be strengthened if the following programs were adopted in B.C. by the B.C. Health Association and B.C. Medication Association. The Ministry

of Health and Ministry of Human Resources should encourage and cooperate in the development of such programs.

1. Promotion of a community approach to reporting and treatment of rape to be effected by:
 - a. establishment of liaison between concerned agencies; perhaps local task forces composed of concerned legal, medical and social service agencies could be formed; and
 - b. a data bank of incidence and treatment information to be fed into it by all agencies or individuals who receive and treat rape victims.³⁰
2. Workshops to be organized for hospital personnel who deal with rape victims, to increase and expand the knowledge of the psychological trauma of a rape experience. These sessions to be mandatory for emergency department personnel. The sessions to include:
 - a. familiarity with hospital standardized protocol;
 - b. discussion of the most effective person-to-person contacts; and
 - c. discussion as to personal prejudices and concepts of sexuality which may affect the way a rape victim is treated.
3. Creation and distribution of a pamphlet to all medical agencies, Public Health Department personnel, and medical social workers to include:
 - a. myths and facts about rape;
 - b. medical procedures;
 - c. medical and emotional follow-up suggestions; and

- d. resource list of service agencies for support and counselling of rape victims.
4. A requirement that all medical and nursing school students receive special instruction and training regarding rape treatment protocol, emotional needs of victim, and follow-up procedures.^{31,32}

V FOOTNOTES

1. Male gynecologist.
2. E. Le Bourdais RN, "Rape Victims, The Unpopular Patients", Dimensions in Health Services, (March 1976), p. 14.
3. In a recent study of Vancouver, medical aid sought by raped women, the following statistics were gathered:

Table III

Place Medical Treatment Received

N = 226

	# of Cases	% Cases
Hospitals ¹	135	59.7
Clinics ²	33	14.6
Private Practitioners	42	18.6
Victorian Order of Nurses	1	0.5
Unknown	15	6.6
Total	226	100.0

1. Fifty-two of the cases were treated at V.G.H., 18 at Royal Columbian, 10 at Lions Gate Hospital and 5 at St. Pauls. The remainder were distributed amongst other hospitals in the Greater Vancouver area.
2. Pine Free Clinic treated the majority of cases in this category (23) and 4 were treated by the Women's Health Collective. The remaining 6 were treated by other clinics in the Greater Vancouver area.

Most of the victims reporting to Rape Relief were treated at hospitals. Of the 226 receiving treatment, 135 (59.7%) were taken to the emergency ward of a hospital (52 of these to Vancouver General Hospital and 18 to the Royal Columbian Hospital). Because of the fact that police usually take victims to hospitals and the fact that emergency wards may not treat the rape victim unless she is reporting to the police (except for other injuries requiring attention), it may be assumed that many of these were reported to the police.

Table IV

Length of Time after Assault that Treatment was
Received and Place of Treatment

<u>Place</u>	<u>Time</u>				<u>Total</u>
	<u>within 24 hrs.</u>	<u>24-48 hrs.</u>	<u>after 48 hrs.</u>	<u>unknown</u>	
Hospital	113	2	5	13	135
Clinic	6	7	19	1	33
Private Practitioner	4	4	33	1	42
V.O.N.				1	1
Unknown				15	15
Total	123	13	57	33	226

Known Pregnancies Resulting from Rape = 9
Suspect = 1

Joanne Ranson & Jane Howell, Social & Health Aspect of Rape: A Review of the Literature & Feasibility Study (Vancouver United Way, 1978), pp. 66-67. (As we see, most rape victims who went for immediate care in Vancouver went to a hospital.)

4. E. Robinson, M.D.; J. Oldham, M.D.; Z. Sniderman, M.S.W.; "Establishment of a Rape Crisis Centre", Canada's Mental Health, 1975, 23:5, p. 11.
L. McGuire, "Summary of Physician Survey Report", in Rape and Its Victims: A Report for Citizens, Health Facilities and Criminal Justice Agencies (LEAA: U.S. Dept. of Justice, 1975), p. 23.
C. Hayman, M.D. and C. Lanza, R.N., "Sex Assault on Women and Girls", D.C. Health Services Administration, 1969, p. 6.
5. A. Burgess and L. Holmstrom, "Accountability: A Right of the Rape Victim", JPN and Mental Health Services, May-June 1975, p. 15.
6. C. Volker, "The Rape Crisis", Emergency Product News, Sept. 1977, p. 47.
7. A. Burgess, R.N., D.N.Sc., and L. Holmstrom, Ph.D., "Crisis and Counselling Requests of Rape Victims", Nursing Research, 23:3, pp. 198-206.
G. Abarbanel, M.S.W., "Helping Victims of Rape", Social Work, 21:6, p. 478.

8. L. Vitullo, M.D., "Physical Evidence in Rape Cases", Journal of Police Science and Administration, 2:2, p. 160.
9. Ibid., p. 160.
10. See footnote number 4.
11. Ransom and Howell, op.cit., p. 49.
12. I am unaware of how many hospitals would have such written or unwritten policy. The fact that some hospitals do is indicative of the overriding concern with the technical aspects of the rape, to the detriment of the needs of the patient. I will not name the hospitals with such policy because local groups of concerned persons are negotiating to have such policy amended.
13. Ransom and Howell, op.cit., p. 72.
14. "Innovations in Nursing", Nursing '74, October, 1974, p. 11.
15. An anonymous (third-party) reporting system could be set up for victims who do not wish to report to the police, but who wish to make certain facts known about the assault.
16. D. Hunt, M.D., and Herb Parkin, M.D., "Medical and Medico-Legal Management of the Suspected Rape Victim", B.C. Mental Health Services, June, 1976, 18:6.
17. Le Bourdais, op.cit., p. 12 (a survey of victims seen by the Ottawa Rape Crisis Centre indicated that one-third felt intimidated by the behaviour of medical personnel).
18. S. Neufield and B. Uit den Bogaard, Characteristics of Rape, National Health and Welfare Protectorate, Non-Medical Use of Drugs Directorate (Project 1216-9-70), p. 40.
19. S. Fox, M.S.S.A., and Dr. Scherl, M.D. "Crisis Intervention with Victims of Rape", Social Work, 17:1, p. 37.
20. Burgess and Holmstrom, "Assessing Trauma in the Rape Victim", American Journal of Nursing, August, 1975, p. 1290.
21. E. Robinson, "Management of the Rape Victim", CMA Journal, Sept. 18, 1976, p. 520.
22. Ibid, p. 520.
23. Fox and Scherl, op.cit., pp. 40-41.
24. F. Zuspan, M.D., and C. Hayman, M.D., et al, "Alleged Rape: An Invitational Symposium", Journal of Reproductive Medicine, April 1974, 12:4, pp. 133-144.

25. Burgess and Holmstrom, "Assessing Trauma in the Rape Victim", American Journal of Nursing, August, 1975, p. 1288.
26. Ibid., p. 1288.
Neufield and Uit den Bogaard, op.cit., pp. 41-43.
27. H. Carswell, "Women Go Through Three-stage Syndrome Following Rape", Medical Post, Dec. 21, 1976, p. 2.
W. Krasner, L. Meyer, N. Correll, Victims of Rape, (Rockville, Maryland, USA: Mental Health Studies and Reports Branch, 1976), pp. 11-15.
28. Carswell, op.cit., p. 3
29. Ransom and Howell, op.cit., pp. 73, 75.
30. Rape Relief Centres have initiated such a data bank federally, as of January 1977, with a centralized data receiving centre.
31. Two nursing schools of Victoria have instigated such programs for second-year students in conjunction with Victoria Rape Relief.
32. RNABC Task Force on Rape, Proposals of March, 1977, in a letter to N. Goldsberry, June 1978.
L. Bourdais, op.cit., p. 14.
Rape and Its Victims..., op.cit., pp. 75-92.
E. Bassuk, M.D., R. Savitz, M.D., S. McCombie, M.S.W., S. Pell, R.N., "Organizing a Rape Crisis Program in a General Hospital", Journal of American Medical Women's Association, 1975, 30:12, pp. 486-490.
Vern Price, R.N., "Rape Victims - The Invisible Patients", The Canadian Nurse, April 1975, p. 31.
"Sexual Assault Investigative Procedures and Associated Training", Post Scripts Newsletter, 11:2 (May 1977), p. 8.
N. Gager and C. Schurr, Sexual Assault: Confronting Rape in America, (New York: Grosset and Dunlap, 1976) pp. 126-127.
D. Hunt and H. Parkin, op.cit., pp. 3-4.
Ransom and Howell, op.cit., pp. 74-75; Summary and Recommendations, March 1978, pp. 2-4.
S. McCombie, et al, "Development of a Medical Centre Rape Crisis Intervention Program", American Journal of Psychiatry, 133:4 (April 1976), pp. 418-421.
See also footnote 46, "Sexual Abuse of Children"
B. Woodling, M.D., J. Evans, Ph.D., M. Bradbury, J.D., Sexual Assault: Rape and Molestation, (County of Ventura Medical Research Foundation Clinical Obstetrics and Gynecology) 20:3 (Sept. 1977) pp. 522-529.

Chapter VI - POLICE AND THE VICTIM OF RAPE

The first two officers who arrived were really nice. They apologized for seeming gruff but explained they had to ask some questions and hoped it would be okay with me. The questions didn't bother me. But then the sergeant came and did dumb things. He held up my nightgown and said, "Is this all you were wearing?" Then he realized I had been in bed asleep when the guy broke in. It was a short nightgown and I almost felt I had to apologize for what I wore to bed. He also wanted to know why I hadn't defended myself, and I asked him, wouldn't he rather be raped than dead? He didn't answer that.

a victim

The local police department or RCMP division may be the first place that a sexually assaulted person calls after the occurrence. The response of the first police officer and subsequent reactions of the other police persons may determine:

- 1) whether charges are laid in the case;
- 2) the victim's adjustment to the experience; and
- 3) the consequent view of police behavior which will encourage or discourage further reporting of other sexual assaults.

For a victim of crime to report to police, that person must need something they can provide. A woman is most likely to report a crime of rape against herself if (1) she is more afraid of the rapist than of what people will think of her; and (2) she

believes the police are a haven.¹ When the raped person is deciding whether or not to report, her trust in the manner in which victims are treated has been discovered to be more important than any beliefs that the police officers will be efficient.²

Police are human and, like the rest of us, tend to be caught in the myths and social attitudes of society. Police are also bound in a special web of being responsible to enforce the laws of society. It has been argued by many people that the laws on sexual assault are unfair, ineffective and involve strict requirements of corroboration and credibility of the victim not required in other criminal offences. Police officers may find it difficult to separate the necessary and objective factors of the criminal assault which they must discover and their own subjective evaluation of the crime and its victim. As a police superintendent has said:

Rape is the only crime in which the victim is doubly violated, first by the attacker and then by society. It is the only crime in which social, religious and cultural core attitudes of society turn upon the victim. In rape, society tends to blame or accuse the women.³

The attitudes of police continue, for the most part unintentionally, to uphold women's fears of reporting physical attacks involving sexual elements.

In pointing up specific problem areas in the police involvement with the raped person, I would like to make it very clear that I am not "pointing a finger" of condemnation at the police in British Columbia. That has been done many times already by others, which is a problem in itself. The police are doing a job within the confines of the law and the boundaries of society's standards of acceptable behavior.

The concern in the author's mind is to create the conditions which will increase the reporting of sexual assaults, facilitate the communication between the officer and victim of sexual assault and help the investigation of the incident and potential apprehension of any offenders.

Municipal police and RCMP statistics for British Columbia show that of the sex offence complaints made in December, 1977, 27% were classified as "unfounded".⁴

"Unfounded" crimes have been defined in several ways"

- 1) according to the Uniform Crime Reporting Manual which is produced along with facts and figures in the Criminal Justice Monthly Report, "unfounded means that police investigation has established a crime did not happen or was not attempted";⁵
- 2) according to one RCMP officer whom I asked, "unfounded", in respect to rape, means (a) "a lying woman", "a woman whom the police can't do anything with - she withdraws charges, refuses to supply information, there are conflicting stories with the accused, other unsolved problems".⁶

It seems that for all purposes "unfounded" cases include those cases that the attending police officers decide are genuinely

"unfounded" and some other cases judged not to have a good likelihood of going to trial or resulting in a conviction.

The total "unfounded" rate for all crimes during this same period of December, 1977, was 11%, with a total "unfounded" rate of "crimes against persons" of 15%.⁷

In reality, rape is not a charge that is frequently falsely laid. A recent study showed that only 3.4% of rape complaints were truly "unfounded".⁸

In another study of rape reported to the Vancouver Municipal Police, 1970-74, "there was significant reason to believe that a rape had not occurred" in precisely 10% of the reported rapes during that period.⁹

The authors of this study go on to say, "the popular idea that false rape complaints are motivated by revenge on the part of the victims clearly does not hold true in the present data. First, almost three-fifths of the falsely reporting victims make their complaints against unknown assailants".¹⁰

Only 4% of the total number of reports were genuinely unfounded complaints against identifiable suspects. Further, in only 3.1% of the total did the genuinely unfounded victim maintain that she was raped by such a suspect. When the cases in which the victim requested that a charge not be pursued and where she left the area and was not available for a potential prosecution are removed, only 1% of the total number of reported rapes presented any danger for an innocent suspect. And these were generally cases where the

circumstances surrounding the alleged offense would be highly unlikely to lead to a charge (in fact, the police discontinued investigation for precisely that reason), much less a conviction at trial.

It is clear, then, that far fewer false rape complaints are made than is generally believed by the public, and in fact, than is often acceptable by many of those working within the criminal justice system. It is also clear that even those false complaints which do occur seldom present any real threat to an innocent suspect.¹¹

"Unfounded" statistics do not, as we see, differentiate between false accusations, victim non-cooperation, and unprosecutable rapes.

Police classification of "unfounded" rape does not necessarily mean that the officers do not believe a rape has occurred. As we see, police may use the "unfounded" classification to screen out the cases they believe will be difficult to prosecute:

- 1) medical or other corroborative evidence is not available;
- 2) complainant seems to be hiding something; i.e., she becomes hostile towards the police officer(s), contradicts herself verbally, seems hesitant, and retreats under questioning;
- 3) the victim's character may suggest that she will not make a "good" impression on a jury; or
- 4) the description of the attacker may be inadequate to trace the man.

I believe it is unfair to judge that the police made arbitrary decisions in "unfounding" problematic cases without further explanation. Obviously, there are problems with presenting B.C.-wide statistics; RCMP divisions and municipal police departments

vary within the province in the rates of classified "unfounded" rapes. In a study encompassing all of British Columbia, it is not possible to investigate each division separately. Divisional reports do vary widely; the range of the "unfounded" rate for RCMP divisions for the same period in 1977 was 13% to 100%.¹²

Too, if we can take the Vancouver municipal police statistics for 1970-74 as an example, the rate of "unfounded" reports has been declining over the past few years. Lewis and Clark point out that the rate of "unfounded" reports in Vancouver sharply declined during this period, indicating that "1974 marked a new era in police classification".¹³

The "unfounded" rate for 1974 in Vancouver city was 31.1%, compared with our figure for all of B.C. in December, 1977, of 27%.¹⁴

It would be fruitful to pursue this factor further for all of B.C. to see if, indeed, the system of police classification reflects a change in police policy. It could be pointed out that police do not operate in isolation from the needs of the legal system as a whole. It is important to keep in mind that police classifications reflect consultations between police and Crown prosecutors in some instances, and if not direct consultation, at least a prediction of the Crown's decision whether or not to pursue the case. "Thus if, for example, complaints involving victims who have been drinking fare badly in court,

which then leads Crowns not to want to prosecute other cases of this sort, which is then, in turn, reflected in police classification."¹⁵

The case can be made that the combination of a few precedent-setting decisions by judges in B.C. and a generally more open policy by Crown prosecutors is indicated. The subject of a more open atmosphere at the judicial levels will be further pursued in the section "Rape and the Legal Process". It must be pointed out that the responsibility for such changes lies in large part with the Crown and that police classification of problematic cases will not change dramatically until the Crown is prepared to address the issues.

The high rate of "unfounding" may indicate, as has been suggested, that our rape laws in Canada are overly-solicitous of the defendant and overly-suspicious of the rape victim. The "unfounded" rate would surely diminish if the rape laws in this country were designed to "facilitate rather than prevent the conviction of rapists".¹⁶

When a case has been classified "founded", "actual", or "authentic", what happens? Of the approximately 60-70% "actual" sex offenses complaints (total: 1653) reported to the police in 1977, 53% of these were cleared by "charge" or "otherwise", in that year.¹⁷

Nearly as many cases were cleared by "otherwise" (total: 391) as by "charge" (total: 489). An offence is cleared by "charge"

when "an information is laid against at least one person whose identity is established".¹⁸ "'Cleared otherwise' occur in certain situations when the police may not be able to clear the offense by charge even though they have identified the offender and have sufficient evidence to support the laying of an information."¹⁹

In B.C., for 1977, RCMP divisions reported sexual offenses "cleared by charge" range from a low of 17% to a high of 45%, with most detachments clearing approximately 30% of sexual offenses by "charge".²⁰ Total B.C. statistics for the province (RCMP and twelve municipal police forces) is 29% "cleared by charge" of founded rapes, for 1977.²¹

The rate of arrest is low, even for these "actual" or "founded" cases.

It is only a guess how many sexual assaults that occur are reported to the police. Estimates range from 4% to 40%, with the most common estimate 10%.²² The police filter out many more of these reports through the "unfounded" category.

If we assume that as many as 40% of the sexual assaults occurring in 1977 were reported to the police we have:

4132 sexual assaults
 (40%) 1653 to the police
 (29%) 489 cases "cleared by charge"²³

CONTINUED

1 OF 3

"...the police are forced to operate as an elaborate screening device, a highly selective filter, through which only the 'best' of even the founded cases proceed."²⁴

We can see that the police are forced to operate as the "bad guys" in dealing with sexually assaulted persons. Many police I have talked to over the years feel a deep resentment, anger and defensiveness with the role they are forced to play.

Victims may bear the brunt of this resentment and may not understand the binds of the police. The victims are caught up in their own fear and anger. The victim's concerns are:

- 1) to be rid of the fear (to be protected from a hostile person); and
- 2) that someone or society believe, in fact, she or he has been assaulted and hurt.

The trauma of rape may make a victim feel afraid, embarrassed and/or angry. A victim may even tell her story as she thinks it should sound, especially if she feels guilty about the type of initial contact she had with the offender, if she was drinking alcohol, or she was a victim of sodomy or other indecent assault. If the victim is young, she may not even have the words to express what happened.

Police investigation and the medical examination may take three to six hours of time. If, as is often the case, the woman was raped at night, she is often so tired and confused that she will say anything to close the interview.

If the police treat a victim's story with ridicule or give the victim a subtle message that the story is not believed, the complainant will refuse to talk, become angry at the investigator, or even adapt the story.

It is often true that the victim has to tell the full story at least four times, in a short duration of time, to authorities (initial police contact, medical examiner, detective or investigating officer, and written statement). The victim may feel that once is "more than enough", and that someone is trying to find "holes" in the story. Sexual assault victims are often quite paranoid even when they seem cool and detached, and may need to be reassured several times that the information she or he gives is in confidence and that the police will do everything they can to help once they are sure all the information is clear and details of the incident recorded. Police officers are aware that more details may come out on repetition of the story, but the victim may not understand the reasoning.

Many victims, because they are afraid, embarrassed, confused or angry, feel that an officer is getting "his jollies" out of the story. This seems to be particularly true if the victim is a female and the officer a male (which is usual). The officer does need all the details and the victim may not want to provide them. This victim can become a "hostile witness", unless the officer is very skilled in comforting or reassuring her at this point.

It is essential that the officer take the time to explain all the things that must be done. As a training officer says, "While the everyday terms and functions for dealing with a rape are second nature to an officer, they are new, complex and frightening to the victim".²⁵ A little extra time spent explaining procedures, especially at those points when the woman becomes withdrawn or angry will actually make the process easier for both parties. Respect for the woman's frame of mind will make her more relaxed so she can discuss the incident and further the investigation.

A major problem in some of the isolated areas of B.C. is that night RCMP calls are routed through an answering service, a radio phone in a police car, or through the nearest 24-hour RCMP division. Because of this fact, some initial calls are not responded to until the next morning and corroborative evidence may have been literally "washed away" or the woman may have blocked out aspects of the assault.

There does seem to be a reluctance, from a few officers, to accept the complaint at all. One woman, who had been raped, called the closest RCMP division and was told, "you are outside our jurisdiction".²⁶ The woman lived three miles from the division office. Several other women have told me, "I called but no one ever showed up".

One case a small-town crisis centre reported to me stated: a young woman was being sexually attacked by the stepfather and called police. The police told her that it was a "family matter" and that they would not come. She later stabbed herself and died.²⁷

I agree with officers who have indicated that such incidents are "isolated, probably explainable and not general police reaction to sexually-related complaints".²⁸ It is also true that enough incidents of this nature have been reported to me that it is not possible to ignore the elements in total. One of the problem areas for which no individual officer could be blamed is policy on police response to what is termed "family matters". It is beyond the scope of this report to deal at length with this issue; it has been indicated earlier in the report that violence of a sexual nature within family groups is a serious problem for which there is no easy solution.

Police are forced to be the "filtering system" for the prosecutor and the courts. For this process they receive only condemnation, and no rewards from society. Police have the time and interest to pursue only those cases which have at least a chance for reaching the courts. A great deal of investigative time and effort goes into each case and the police are justified in expending time on those cases which have a chance to at least reach the court, if not a conviction. As we will see, few cases

presently have a real chance for conviction. The police frustration with the legal system is valid.

In the meantime, RCMP and municipal police persons have to deal with investigation in both a rational and sensitive manner.

Training that is available to police personnel at the B.C. Police Academy (municipal police) and the E Division Training Headquarters (RCMP) includes some specific investigative skills pertaining to sexual assault.

At the B.C. Police Academy, where the twelve municipal police forces personnel are trained, basic information includes:

- 1) victim behavior, psychological reactions;
- 2) Criminal Code definitions (essential elements of force, fear and fraud);
- 3) discretion with the victim ("rape is an accusation easily made and difficult to prove");
- 4) aid to the victim;
- 5) collecting victim's statement;
- 6) identifying, collecting and preserving evidence.²⁹

The training program is particularly concerned with investigative technique, getting a statement from the victim, and looking for inconsistencies in the story. Lack of consent must be established (signs of physical struggle and questioning); medical evidence is obtained (hospital procedures, usually). Basically,

"if a police officer can deal with homicide investigation, he can deal with a rape investigation".³⁰ Officers are urged to use diplomacy, especially with a child.

Training for junior RCMP constables (1 1/2 - 4 year level) at E Division Training Headquarters includes aspects relating specifically to sexual assault:

- 1) legal requirements for various sex offenses;
- 2) victim psychology; and
- 3) film, "Someone Else's Crisis".³¹

More in-depth training is offered in two forms for investigative officers with five to ten years of service in the RCMP. Out-of-uniform investigators and in-uniform investigators receive, each, one-half day of rape investigation material through lecture and class participation:

IN-UNIFORM

- 1) who is the offender;
- 2) psychological reaction of victim;
- 3) interviewer's attitude and its consequence;
- 4) reluctance of victim to investigative questioning;
- 5) interview environment;
- 6) policewomen and interviews; and
- 7) professional police counselling.

OUT-OF-UNIFORM

(Psychological Factors in Rape Investigation)

- 1) general - myths & attitudes, crisis intervention;
- 2) victim - psychological reactions;
- 3) offender - psychological reactions;
- 4) investigator - attitudes, liaison, police procedures;
- 5) preparation for court.³²

It is excellent and important that officers receive specific training in techniques appropriate to dealing with victims of sexual assault. These techniques are of great value because the number of successful investigations will no doubt increase due to a greater victim cooperation and improved investigative techniques.

In a follow-up study of similar training programs being initiated in a city in the U.S., the trainers say, "It became evident that the techniques advocated were of great value to sex crimes investigators, simply because they worked! The number of successful investigations and arrests increased dramatically, due in great measure to increased complainant cooperation."³³

I am not suggesting that police officers need to become social workers in order to do a successful job in the area of rape assault. There are ways, though, that "police can use psychological knowledge both to benefit rape victims and at the same time to enhance their ability to apprehend offenders and close their cases satisfactorily."³⁴

To that aim, I offer some recommendations to strengthen the practical aspects of rape investigation:

1. A sexual assault training folder be compiled and distributed to all police-related persons who are not involved in a training or re-training program. This could perhaps be done under the auspices of the B.C. Police Commission.

One of the problems with rape investigation is that not all officers who will have to handle rape complaints will have access to the training programs previously described, in particular: inspectors, new police personnel, police telephone operators (who may be civilians), police personnel with long service records, military-based police. New police personnel, for instance, are often placed in isolated areas where there is little auxiliary support and as we have reported, rape occurs to at least the same degree in isolated and small towns as in large cities.

The material should be straightforward and applicable to day-to-day police work.

2. Women officers to be offered to the assault victim if possible, rather than the decision being left up to the RCMP division or municipal police station. This leaves the choice up to the victim.

The continuing discussion of whether or not a female officer³⁵ should be made available or assigned to a rape victim ignores the possibility that the choice could be left up to the victim. Two other points in favor of such a procedure are:

- a) providing a choice will, of itself, instill a sense of confidence in the police investigation, i.e., someone cares; and
- b) the act of rape takes choice away; providing a choice of officer will give the victim back the sense of controlling her (his) life once again.

I believe investigation will be made easier by such a procedure in all possible situations.

3. If women officers are unavailable or not desirous of rape investigation duty, use should be made of "victim advocates". These advocates to be available on-call (local rape relief staff, volunteers or other interested service volunteers) for the purpose of investigative procedures, if necessary, follow-up counselling and preparation for the courtroom experience. These "victim advocates" to receive training with regards to the police and the justice system as well as the necessary support for the raped person with family or social problems, to accompany the victim to the court proceedings, and to participate in rape education programs in the community. Police time will be freed for other duties and better community liaison and support will be built for the policing units of each community.³⁶

4. All cases should be dealt with as "founded" unless there is real evidence that the case is "unfounded". It is all too clear that "some police departments have used the "unfounded" category to dispense with difficult cases. Others have used this category to reduce the number of cases. And still others have used this label to cover inappropriate, prejudicial judgments by their officers.. All of these dangers can and should be countered with firm procedures to ensure the integrity of every unfounded report."³⁷

Several procedures could be instigated to ensure that the "unfounded" category is consistent:

- a) Victims should be told in an honest and humane way that the complaint has inconsistencies. Victims are not even told, sometimes, of the decision to not continue investigation.

They will, though, be able to ascertain that something is amiss, from the police attitude, and either turn the anger and frustration inward as guilt and self-blame, or direct the anger towards the police officer or department.³⁸

Most women are not aware of alternatives available; i.e., that she may go directly to the Crown prosecutor and discuss pursuing the case or that she may lay the matter before a local Justice of the Peace.

- b) Neither the investigative officer nor the unit should "unfound" a case; rather a recommendation should be forwarded to the chief or head of the division for a final decision.

These procedures would certainly reduce charges made that police insensitivity and prejudice discourage cases from reaching a possible conviction. I agree with Clark and Lewis, in their investigation of the cases reported to the Vancouver City Police, when they state:

...it will be singularly useless to encourage such investigation unless the courts are prepared to handle the cases which the police forward to them. The single most important change that must be made in the criminal justice system is the willingness of the Crowns to prosecute cases which are, from their perspective, 'problematic'³⁹

Police departments or RCMP division staff and Crown Counsels could meet to discuss such procedural changes. Such meetings could create opportunities to look at possible deficiencies in the department's investigation, possible mishandling by the Counsel, and create procedures to ensure the proper handling of future rape cases.

5. All police departments and RCMP divisions should provide resource materials and/or support services referrals for the rape complainants. A small handout would provide a confused and upset woman with further information when she is prepared to deal with the event in a more logical manner and make the job easier for the police person with whom she may have to continue contact. Information about alternate support services, crisis lines or rape relief centres could also be provided for her needs. Such resource sheets should be prepared in cooperation with the associated organizations. It is recommended

that such material be prepared under the auspices of the B.C. Police Commission or the Legal Services Commission of B.C.

Police officers are in a unique position. They are seen as being in a position of authority and knowledge. The police officer's response to a rape situation demonstrates his or her ability to handle a difficult situation in a competent manner. Competent police handling of sexual assault reports will lead to greater public cooperation and a greater sense of public security.⁴⁰

VI FOOTNOTES

1. R. Dukes & C. Mattley, "Predicting Rape Victim Reportage", Sociology and Social Research, 62:1, p. 81.
2. Ibid, p. 70.
3. R. Colville quoted in Rape, Victim as Criminal, by C. Schurr (KNOW, Inc., Pittsburgh, Pa. USA) p. 3.
4. B.C. Criminal Justice Monthly Report, December, 1977. In December there were 44 unfounded reports out of a total of 168 sexual assaults reports. The RCMP divisions classified 36 reports unfounded out of a total of 122 in that month for an unfounded rate of 30%.
5. Uniform Crime Report Descriptions, Criminal Justice Monthly Report Manual, 1975, p. 8.
L. Clark & D. Lewis, "Genuinely Unfounded Rape", Appendix A, A Study of Rape in Canada, Phases "C" & "D", (Toronto: University of Toronto).
C. LeGrand, Rape and Rape Laws, "Sexism in Society & Law", (California Law Review, May 1973, pp. 938-930).
6. His name will remain anonymous; other officers have given me very similar descriptions.
7. For all of Canada the rates are similar. In 1975, the most recent year available, "unfounded" rapes totalled 35%; all sex crimes 15%; all crimes against persons 7%. The only other categories with high "unfounded" rates were drug trafficking, with a 100% "unfounded" and kidnapping with 60% "unfounded". These two categories had less than 10 complaints each, so for statistical purposes are too small in numbers to be relevant. One other category, the Customs Act, had a 47% "unfounded" rate. (Crime & Traffic Enforcement Statistics 1975: Statistics Canada).
8. Rape, (Washington D.C., U.S. Government Printing Office, 1977) p. 9, documenting N.Y. Police Sex Squad Analysis Unit Statistics.
9. Clark & Lewis, op.cit., p. 201.
10. Ibid, pp. 202-203.
11. Ibid, pp. 202-203.

12. B.C. Criminal Justice Monthly Report, December, 1977.
(Monthly figures for some subdivisions [under 10 reports] statistically too low for reliability.)
13. Clark & Lewis, op.cit., p. 98.
14. Ibid, p. 196.
(Vancouver City "unfounded" rates: 1970 (50.7%), 1971 (57.3%), 1972 (57.4%), 1973 (51.7%), 1974 (31.1%).)
15. Clark & Lewis, op.cit., p. 97.
16. C. LeGrand, op.cit., p. 919.
17. B.C. Criminal Justice Monthly Report, December, 1977.
Comparable "cleared" figures for other recent years:
1976 (54%), 1975 (46%), 1974 (43%).
18. Uniform Crime Reports Description, op.cit., p. 9.
19. Ibid, p. 9.
20. R.G. McLeod, "E" Division Headquarters, to N.Goldsberry,
March 6, 1978.
"Cleared Otherwise" composed a range of 17-45% in various
divisions; the rest (unsolved, not anything) composed
22-53%.
Looking at legally defined "rape" alone, we find about the
same "cleared by charge" rate, ranging from 16-69% of
"founded" rapes for an average of 37% "cleared by charge".
21. B.C. Criminal Justice Monthly Report, December, 1977.
22. Rape: A Working Definition, p.10, supra.
23. Figures taken from Criminal Justice Monthly Report, December, 1977
24. L. Clark & D. Lewis, Rape: The Price of Coercive Sexuality,
(Toronto: Women's Press, 1977) p. 59.
25. J. Stratton, "Law Enforcement's Participation in Crisis
counselling for Rape Victims", Police Chief, March 1976,
p. 49.
26. The course remains anonymous due to the non-legal reporting
method, and to maintain confidentiality of individual persons
who do not wish to pursue the case.

27. This source also remains anonymous to protect the woman's family and the crisis line confidentiality. The family does not wish to have charges laid.
28. R.G. Latta, Staff Sergeant, Terrace Detachment, to N. Goldsberry, May 26, 1978.
29. John Maxwell & Robert Hannaford, B.C. Police Academy, with Nancy Goldsberry, about March 1, 1978.
30. R. Hannaford, Ibid.
31. Inspector M. Kelly, Victoria Headquarters "E" Division, with Nancy Goldsberry, about March 5, 1978.
32. Ron Poulter, NCI "E" Division Training - Vancouver, with Nancy Goldsberry, about March 20, 1978.
33. Mary Keefer & Henry O'Reilly, "Changing Perspectives in Sex Crimes Investigation", Sexual Assault, ed. by M. Walker & S. Brodsky (Toronto: Lexington Books, 1976) p. 164.
34. Morton Bard & Katherine Ellison, "Crisis Intervention & Investigation of Forcible Rape", The Police Chief, May, 1974, p. 68.
35. Chicago Police Star, Vol. 15, #9, November 1976, pp. 3-7. (A discussion of a successful project employing female officers in rape investigation.)
36. R. Hotston, "Victim Advocate Services: A Programmed Police Response for Crime Victims", The Canadian Police Chief, May, 1977, pp. 25-26.
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38. Victims of Rape, (Maryland, USA: Department of HEW, 1977). This study discusses that "individual police & detectives who become involved....their personalities and personal qualities, their competence...influenced both case outcome and personal adjustment" of the victim. p. 24.
39. Clark & Lewis, Phases "C" & "D", p. 118.

40. Some further resources available, not documented in previous footnotes:

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J. Heller and J. Graham, "The Trauma of Rape: A Training Program for Effective Investigation", The Police Chief, Sept. 1976, pp. 52-53.

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Chapter VII - RAPE AND THE LEGAL PROCESS

Most judges, lawyers and those experienced in the trial of rape cases would tell a female member of their household if she were raped that it would be much better not to complain about it because to the victim the trauma of a rape trial can be often more serious than the original assault.¹

Rape as a prosecutable crime is not a crime against the woman but against the man whose exclusive possession as a sexual object she is. That is why a man cannot be convicted of raping his own wife. In the rape statutes... it is very definitely provided that rape is the forcible penetration by a man of a woman "not his wife". Since his wife is a man's sexual possession already, he cannot be convicted of rape. He would have robbed himself.²

Most victims of sexual assault whose case is taken to court wish they had never reported the rape. How does it happen that a woman would be sorry to have reported a crime of which she was a victim?

Rape laws are largely based on traditional attitudes about social roles and sexual morals. The structure of the laws, enforcement and prosecution are all based on untested assumptions about the incidence of the crime, the motivation of the criminal, and the psychology of the victim. As a result, the laws do not effectively deter rape: police enforcement of complaints is inadequate, and judicial treatment of defendants is oversolicitous. Thus rape laws are not designed, nor do they function, to protect a woman's interest in physical integrity. Indeed, rather than protecting women, the rape laws might actually be

a disability for them, since they reinforce traditional attitudes about social and sexual roles. Although societal attitudes no doubt are responsible for the present construction of rape laws, it is also true that this construction serves to reinforce those attitudes.³

The failure of the criminal justice system to convict or punish rapists reinforces attitudes in our society that women are inferior people because crimes against them are not worth punishing.

Of the 298 charges laid in B.C. under the Criminal Code pertaining to sexual assault in 1973 (the most recent year available), 166 persons were convicted.⁴ This is a 56% conviction rate on those "sexual" offenses charged under various sections of the Criminal Code.⁵

The figures for sexual assault in B.C., for 1977, are computed:

4132 sexual assaults estimated, conservatively⁶

1653 to police (40% of sexual assaults estimated for period)⁷

489 cases cleared by charge (29% of reported; 12% of total)⁸

263 convictions (54% conviction on "good" cases; 6% of total)

As you remember, it is the role of the police to filter out and charge only those cases of sexual assault which have a good chance of conviction and yet we have a conviction rate of only 55% on the "good" cases.¹⁰

The general conviction rate for all indictable offences was 75% for 1973.¹¹ It seems clear that sexual assaults have a particularly low rate of conviction, even considering only the "good" cases.

Sentencing is also low. In the year 1973, of the 108 recorded convictions for sexual assaults in B.C.:

- 2 were suspended with no probation
- 11 received fines
- 35 were suspended with probation
- 22 received jail terms under 1 year
- 19 received jail terms from 1-2 years
- 11 received prison sentences from 2-5 years
- 7 received prison sentences from 5-10 years
- 1 received prison sentence from 10-14 years.¹²

These figures do not support the claim that rape is treated as a serious crime in our society. In fact, lengths of sentences for rape are comparable with sentences for robbery. This suggests that rape is considered to be no more serious than a robbery.¹³

I would also agree with Clark and Lewis who continue:

We are not advocating stiffer penalties for rape; we share the general skepticism about the effectiveness of the penal system, and have no reason to believe that prison either deters or rehabilitates rapists. Until the penal system is replaced with something else, however, it would appear to us that the penalties for rape ought to reflect our supposed moral judgments about the gravity of the crime. Otherwise, we should stop claiming that we condemn rape as a serious offense.¹⁴

The main question returns: who or what do rape laws protect? The answer is "...our laws have been evolved and are administered by men who have never been raped".¹⁵ An article in the 1952-53 Yale Law Journal explains further; rape law "is in turn bolstered by a masculine pride in the exclusive possession of a sexual object. The consent of a woman to sexual intercourse awards the man a privilege of bodily access, a personal 'prize' whose value is enhanced by sole ownership. An additional reason for the man's condemnation of rape may be found in the threat to his status from a decrease in the value of his sexual possession which would result from forcible violation."¹⁶

The legal impossibility of a man raping his wife is one example of the framework into which rape laws fit. There would be obvious difficulties in including husband-rape under the law as it now stands, as proof of rape lies in the areas of consent and physical evidence. Yet it is also obvious that the law was not designed to protect women, for even a woman who has a legal separation from her husband has no protection from sexual assault by him.

"Seduction of a woman, aged 16 and 17" and "sexual intercourse with a woman, aged 14 to 16" are Criminal Code sections which ostensibly protect young women from the "amorous" advances of male persons. The maximum penalties are five years and two years, respectively. Indecent assault of a female carries a maximum penalty of five years, and indecent assault of a male brings a

ten year penalty maximum. "Sexual intercourse with a woman under 14 years" carries a life imprisonment maximum penalty. Criminal rape (which presumably covers women 18 years and over) has a stiff maximum penalty of life imprisonment.¹⁷

Sexual attacks involving other than a vagina and penis carry a much lower penalty than that of criminal rape, leading us to believe that the value of a woman lies not in how she views the injury, but in the value of her vagina. Many women I have talked to have said that they felt even more humiliated (and can be more physically harmed) by being sodomized than by being raped, and yet the maximum for gross indecency is five years, compared to life maximum for rape. It is obvious that laws covering sexual assault do not, in fact, reflect the gravity of the crime to the victim.

The present rape laws of Canada are inherited from old English law and, as such, reflect the social and political atmosphere of those times. As Neil Brooks has written, "every offence in the Criminal Code embodies a judgment about the relative importance of certain values in our society and about the efficacy of the criminal sanction as a means of protecting those values".¹⁸

Historically, rape laws were designed to protect men of noble class from trespass of their women. The laws reflect the fact that women were legally the property of particular men, either the father, husband or lord. As J. Vance points out:

Ancient and medieval civilizations had severe laws protecting betrothed virgins, since these women were considered to be a form of currency for exchange between the father and the intended husband; hence the "bride price". The loss of a virgin resulted in the loss of her value to her father as a marriageable entity. In certain instances, the rapist was permitted to pay the bride price (50 pieces of silver) to the father and then wed the daughter. However, if the woman was betrothed, the rapist was put to death, the engagement was broken, and the woman was sold for a reduced amount to whoever would accept her.¹⁹

Rape laws still protect, not women, but their "owners". As the laws also make clear, women owned (married) by men cannot be legally raped by them.

It seems there are several assumptions embodied in rape laws:

- 1) it is normal for men to sexually coerce women into sexual intercourse;
- 2) only some men have the "right to coerce some women" and
- 3) women will use their limited power to "cry rape" as a means of getting back at men.

A famous statement encompassing this last assumption was that of Lord Chief Justice Sir Matthew Hale who said, in 1736, "Rape is an accusation easily made and hard to be proved and harder to be defended by the party accused tho never so innocent".²⁰ Rules of evidence in trials are designed, for the most part, to ensure innocent people are not convicted.²¹ The rules of evidence in rape trials have legitimized certain stereotypes and myths about women.²² Some of these assumptions are so well worn as to be

cliches: "you can't thread the eye of a moving needle", "women say no but mean yes", "hell hath no fury like a woman scorned".

Let us briefly note some of the special rules of evidence historically required in rape cases:

(1) evidentiary requirement - non-consent

assumption

a woman who has consented to sexual intercourse in the past would be the type to consent on the occasion in question; bad vs good women.

reality

"by itself the fact that a woman has consented to sexual intercourse in the past is not helpful in determining whether she consented on some subsequent occasion".²³

(2) evidentiary requirement - corroboration

assumption

a woman would lie to protect her reputation; she has a neurotic desire to call attention to herself, revenge motives, refuses to admit initial consent, fantasy; and/or juries naturally side with the woman "victim".

reality

there has been great exaggeration that women lay false complaints.²⁴ Ironically, many real victims of rape avoid reporting rapes out of fears of the legal process.

Existing evidence shows that juries view rape charges with extraordinary suspicion and are unlikely to convict without supporting evidence. The severe penalties accompanying a conviction for rape add additional evidence to refute the notion that no jury will favour the rape victim.²⁵

If and when a case of sexual assault reaches a courtroom, "it is often hard to tell who is on trial - the victim or the rapist".²⁶

Amendments to the Criminal Code on April 26, 1976 do not solve

the problem of prejudicial treatment of sexual assault victims. Many of the rules of the trial do not seem to apply to the preliminary trial which has often been called the "fishing expedition" because the Crown's prosecutor and the defence lawyer for the accused are each looking for weak spots should the case proceed to a higher court.

The amendments of 1976 have done nothing to rectify the fundamental difficulties of the law. Rules of evidence have been restated; questions about the moral integrity of the victim are still permitted and judges retain the option to caution the jury as to the risk of relying solely on the evidence of the witness.²⁷

The victim who alleges the attack took place is the primary witness. Her credibility is still the most important issue in rape trials. Even if questions as to her past sexual history are not allowed by the judge (whose discretion it still is to allow or disallow such questioning), "defense lawyers could easily undermine a victim's credibility through indirection and innuendo. While the main issue of a rape trial remains the victim's character, these abuses will continue".²⁸

"What is overlooked so often" at this point, too, "is that while counsel have a right to ask a question of a witness, it is the ultimate discretion of the trial judge to compel an answer".²⁹

(A witness is often not made aware, either by counsel or the trial judge, that she has the right to refuse to answer questions

about her private life.) It is the responsibility of the Crown Counsel and the judge to prevent evidence of an irrelevant nature, and abuse of a witness on the stand. Trial judges do not often exercise their power in these areas, particularly at the preliminary trial.

The victim is often totally unprepared for either the preliminary trial or the trial. Crown prosecutors are notoriously over-burdened with cases and have often spent only minutes preparing the woman(man) for the case.

Plea-bargaining prior to the preliminary or trial is common. Often, again, the victim is unaware of and rarely consulted as to charges in the Crown's case. I have on several occasions attended with a woman at the prosecutor's office where she was told, "this is my case, I'll do with it what seems best", or "don't worry your pretty little head about it".

The woman does care a great deal about the disposition of the case. She may well feel that her reputation is also "on the line". If the case is reduced in charge or if the accused is found "not guilty" of rape, it is the victim who has to live with the insinuations that she lied about what happened or the way the experience she defines as rape actually occurred.

Who of us would choose to put our lives "on the line" with the odds against us in the justice system?

There are many beliefs in our culture which blame the victim for being raped, which deny the possibility of rape, and which claim that the victim wanted and enjoyed being raped.

In addition to beliefs and attitudes relating specifically to rape, a number of other attitudes, such as sex role stereotyping, sexual conservatism, acceptance of interpersonal violence, and beliefs that sexual relationships between men and women are adversarial in nature (a 'battle of the sexes' philosophy), have been analyzed by both criminologists and feminists as feeding and supporting victim-blaming attitudes. These attitudes effectively support rape, because they do not oppose it in any way in the actions of victims, the general public and potential sexual assailants.³⁰

Until the rape laws are actually a deterrent of rape,³¹ only a very tiny fraction of rapes will be reported to the police and go on to court.

Any changes in the laws with respect to rape must:

- (1) increase reporting;
- (2) redefine sexual assault in such a manner as to prohibit the inherent sexism in the judicial process.

Changes in law with respect to sexual assault are currently under study by the Law Reform Commission of Canada.³² The changes in law, in principle, include:

- (1) The physically coerced use of another person's body for any purpose whatsoever is wrong in itself.
- (2) The use of a person's body for a sexual purpose, in physically coercive circumstances, is wrong regardless of who that person is, or of the "value" which that person is believed by others to have.

- (3) Such acts are wrong whether or not any harm was intended, or actually inflicted upon the victim. Sexual acts, no less than any others, always create a risk of harm; those who commit them are responsible for the creation of such risk and for any harm that occurs. Such risk is a clearly foreseeable consequence of physically coercive behavior, regardless of what is intended or of what in fact transpires.
- (4) The use or threat of physical force is sufficient to negate any presumption of consent to the act in question, sexual or otherwise. "Proof" of lack of consent is therefore unnecessary, and medical corroboration of the victim's resistance is therefore irrelevant.
- (5) It is irrelevant whether the act is perpetrated by a male or a female, on a male or a female.³³
- (6) The legal relationship existing between the offender and the victim prior to, at the time³⁴ of, or following the offense is also irrelevant.

The State of Michigan, U.S.A., drafted and enacted the first assault laws, in 1974, which organized "acts of genital violence into a matrix of degrees".³⁵ Jan Bendor, member of the Michigan Women's Task Force on Rape, says further:

Under the new statute, degrees of the crime articulate the seriousness of the offense, determined not just by whether there was penetration of the victim's body, but also by the lethality and amount of coercion used, the infliction of personal injury, and the age and incapacitation of the victim.

The new scheme permits a closer tailoring of the charge and associated prison sentence with the actual seriousness of the specific deed. Coercion and penetration resulting in physical injury or extreme psychological damage constitute first-degree "criminal sexual conduct".³⁶

A number of other states in the U.S. have enacted new sexual assault laws, using the pattern of the Michigan statute and refining the concept from judicial experience.³⁷

Justice Minister Basford introduced amendments to the present sexual assault laws of Canada in May of 1978. Basically, these proposals substitute the terms "indecent assault" and "aggravated indecent assault" for a number of the present categories. Victim and accused could be of either sex and the act is of sexual contact of any of several parts of the bodies.

One of the major flaws still existing in these proposed amendments is that of consent, which would continue to raise the murky issues of the victim's credibility and consent. As has been indicated, these issues have not been noticeably limited by the 1976 amendments, either, contrary to public opinion.

It has been argued convincingly that the presence of physical coercion (assault) should be presumed in cases of forcible sexual assault. As Lorene Clark writes:

The issue of consent could, of course, arise as the presumption as to non-consent would be a rebuttable one. But the onus will then be on the defense to prove there was consent, despite physical coercion, rather than on the victim to prove lack of consent. This would place sexual assault within the normal framework of law and forbid the special requirements existent in rape law, as in no other.³⁸

The proposed amendments still embody a caricature of society's attitudes towards women. Putting new names on old faces will

not necessarily convince the thousands of persons who are assaulted sexually in Canada each year to report such crimes. Trials might be even more difficult for the victim than they are now, due to the foggy concepts embodied in the law amendments, which may leave the victim of sexual assault powerless in the face of the court's discretion to allow evidence of victim conduct.

One of the interesting contradictions to the issue of consent has been the advice given to women, by many police officers and some women's groups, not to resist attack for the sake of physical safety. This lack of resistance could be still interpreted as consent under the new amendments.

Changes in the law, alone, obviously will not provide us with The Answer to the problems we have outlined. Legislative changes, in themselves, will not be effective unless police practices change and until prosecutors and judges take it upon themselves to study the reasoning behind the need for structural change. And no matter how diligent the prosecutor, the rate of convictions will not change until juries are prepared to convict on the particulars of the case alone.³⁹

Prosecutors must be diligent in preparing the sexual assault victim for court. Written information can easily be supplied to the witness to supplement even a short interview, covering:

- (a) in general, what to expect; and
- (b) the roles each person will play in the courtroom.

The initial police statement can be given to the witness too, to refresh the memory of an experience which is some months in the past. Even one-half hour of the counsel's time prior to the preliminary and/or trial will clear up questions and problems that could well arise in the courtroom later. In the courtroom, the same Crown attorney should represent the victim's interests by objecting to both irrelevant and prejudicial questions from the defense lawyer.⁴⁰

It has been suggested that, where possible, one counsel be appointed to take the case to both preliminary trial and trial. The victim's confidence and cooperation could be more evident; also the more familiar counsel is with the case, the better are the chances for obtaining a guilty verdict.⁴¹ One-to-one assignment could result in fewer oversights and misunderstandings on the part of over-burdened counsel. As it has been pointed out, preliminary case functions are sometimes handled by less experienced prosecutors and it is the proper performance in the early stages of a case that is crucial to its ultimate success.⁴² Research, investigation and drafting routine motions can be handled by assistants or law students, thus freeing a prosecutor's time.

It is further suggested that victims of sexual assault be consulted before a plea is taken to a lesser charge. The implications of plea-bargaining are often seen by victims as a fact that she is a "pawn of the system" or that she is not believed by counsel as to the circumstances of the assault.

Finally, it is the responsibility of counsel to encourage the police to bring all possible sexual assault cases to preliminary trial, even the "problematic" cases.

In a system which investigates rape seriously, which prosecutes diligently and negotiates pleas only to charges fairly made, and which sentences rapists appropriately, the victim has some chance of feeling that the justice has been done, that in fact a crime was committed upon her. In a system which treats her, additionally, with respect and sensitivity, she may even feel that it was worth it to pursue the criminal charge.⁴³

Our law does not, in fact, permit character assassination of victims of rape.⁴⁴ It is the trial judge who upholds these principles and it is the judge who may explain to the witness her rights during questioning. It cannot be said too strongly that we are not likely to see an increase in the initial reporting of rape until people know that they will receive what protections there are under the law. Basic human rights entitle the witness "to look to the trial judge for protection against all unwarranted attacks on their character, credibility, dignity and rights of privacy".⁴⁵

A witness in a sexual assault case has several other forms of redress not discussed previously in this section:

- (1) a right to seek legal counsel of her choice;
- (2) a right to file civil charges against her attacker(s);⁴⁶
- (3) a right to seek financial assistance from the Criminal Compensation Board of B.C. for physical, financial and psychological damage suffered as a result of the assault;⁴⁷ and
- (4) a victim-support person who can buffer the experience of the pre-trial and trial period for the witness, explain procedures and assist with other problems infringing on her life.

No one in our criminal justice system can legitimately view the responsibility for changes in rape law or courtroom protocol as resting with "someone else". Anyone who comes into contact with the victim of sexual assault has an important role to play in assuring justice under the law.

VII FOOTNOTESFOOTNOTES

1. Justice E.L. Haines, "The Character of the Rape Victim", Chitty's Law Journal, Vol. 23-2 (1975), p. 57.
2. A. Medea & K. Thompson, Against Rape, (New York: Farror, Straus & Giroux, 1974) p. 13.
3. Camille LeGrand, "Rape and Rape Laws: Sexism in Society & Law", California Law Review, May/1973, p. 919.
4. Statistics of Criminal and Other Offenses, 1973, (Ottawa, Statistics Canada, 1978), Table 11, p. 234-235. (31 of 298 charged were classified as assaults on males, resulting in 20 convictions, or a 65% conviction rate)
5. This conviction rate compares to the 51.2% found guilty in a 1970-73 study done in Ontario (B. Glueck, "Persons Convicted of Crimes Involving Sexual Aberrations", p. 2, quoted in Clark & Lewis, Rape, the Price of Coercive Sexuality (Toronto: Women's Educational Press, 1977, p. 56).
6. Figures taken from Criminal Justice Monthly Report, December, 1977, (40% is a conservative reporting estimate. Most sources indicate perhaps 10% of all sexual assaults are reported to police!)
7. Criminal Justice Monthly Report, December, 1977.
8. Ibid.
9. Clark and Lewis found similar percentages of convictions in Metro Toronto, 17 out of 104 reported, which is 40% of 260, or 7% (Op.cit., p. 47).
10. Statistics of Criminal and Other Offenses, 1973, p. 234-235.
11. Ibid., p. 12.
12. Ibid., p. 140-141 (Table 6B) and p. 96-97 (Table 6A).
13. Clark & Lewis, op.cit., p. 57.
14. Ibid.

15. Justice E.L. Haines, *op.cit.*, p.57.
16. Comment, Forcible & Statutory Rape: An Exploration of the Operation & Objectives of the Consent Standard, 62, Yale Law Journal 55, (1952) p. 72.
17. Martin's Annual Criminal Code. (Agincourt: Canada Law Book Limited).
18. Neil Brooks, "Rape and the Laws of Evidence", Chitty's Law Journal, 23:1 (1975), p. 3.
19. Joannie Vance, Rape and the Law: A Background Paper, March, 1978 (Montreal, Quebec) pp. 2-3.
20. I.M. Hale, The History of Pleas of the Crown, 1736, p. 635.
21. N. Brooks, *op.cit.*, p. 4.
22. It has been pointed out that "because women had no other source of power, men may have thought that the former might abuse this one recourse to justice which society allowed them". (J. Vance, *op.cit.*, p. 3.)
23. N. Brooks, *Ibid.*, p. 6.
24. *Ibid.*, pp. 7-9.
 "The Rape Corroboration Requirement: Repeal, Not Reform", Yale Law Journal, 81: 1365 (1972), pp. 1375-1384.
 L. Clark & D. Lewis, A Study of Rape in Canada: Phases "C" & "D", Appendix A, (University of Toronto: Centre of Criminology, 1977), pp. 201-203.
25. H. Kalven & H. Zeisel, The American Jury (Boston: Little, Brown, 1966).
26. "The Second Ordeal for Victims of Rape", Toronto Globe & Mail, June 25, 1974 editorial.
27. J. Vance, *op.cit.*, pp. 14-19.
 N. Brooks, *op.cit.*, pp. 5-7.
 "Amendment Could Hurt Rape Victim", Victoria Colonist, Feb. 15, 1978.

28. Clark & Lewis, op.cit., p. 51.
See also
Forcible Rape - A National Survey of the Response by Prosecutors, Battle Law & Justice Study Centre, The National Legal Data Centre, 1975. (92% of the prosecutors said victim credibility was the major difficulty in a rape trial. The other issues mentioned were corroboration problems and the severity of penalties.)
29. Justice Haines, op.cit., p. 59.
30. Martha Burt, "Attitudes Supportive of Rape in the American Culture", Testimony submitted to the U.S. House of Representatives Subcommittee Science & Technology, January 11, 1978, p. 3.
31. Martha Burt, op.cit., p. 1. ("Most evidence on the law as deterrent strongly suggests that little deterrence occurs unless the probability of capture and conviction is very high. Neither of these conditions is present in the case of rape.")
32. Rape - Position Paper, National Action Committee (1978).
"Rationalization of Sexual Offenses in the Criminal Code: Advisory Council on the Status of Women Recommendations" (Sept. 1976).
M. Rioux, "When Myths Masquerade as Reality: A Study of Rape", Advisory Council on the Status of Women Recommendations, (April, 1975).
Resolution, Rape. Canadian Federation of Business & Professional Women's Clubs (1977).
33. In the U.S., it was estimated by one investigation that about 1880 sexual assaults occurred within a Philadelphia prison during a 20-month period. (Alan J. Davis, "Sexual Assaults in the Philadelphia Prison System and Sheriffs' Vans", Transaction, December 1970, pp. 107-134.)
No similar studies have been conducted in Canada, but I have been told by police personnel and also by prisoners that the same degree of sexual violence occurs in Canadian prisons. In particular, sexual assault offenders in prison are, themselves, primary targets for sexual attacks in the prison system and are isolated for this reason from other prisoners in some penitentiaries.
34. L. Clark & D. Lewis, op.cit., p. 186.

35. Jan Bendor, "Justice After Rape", Sexual Assault, in M. Brodsky & S. Walker, (Toronto Lexington Books, 1976), p. 153.
K. Cobb & N. Schaur, "Michigan's Criminal Sexual Assault Law", Forcible Rape, ed. by Chappell, Geis & Geis (New York: Columbia University Press, 1977), pp. 170-186.
36. Jan Bendor, op.cit., p. 153.
37. See "The Rape Corroboration Requirement: Repeal, Not Reform", Yale Law Journal, 81:1365 (1972) for discussion of law reform, pp. k365-1391.
Ben-Horin, "Is Rape a Sex Offense?" The Nation, August 16, 1975, p. 134 ("a recent New York Times check of 25 states showed 15 had made law changes and 8 more were considering evidentiary changes").
38. Rape - Position Paper, National Action Committee, p. 14.
39. See S. Klemmack and D. Klemmack, "The Social Definition of Rape" in Sexual Assault, ed. by M. Walker and S. Brodsky (Toronto: D.C Health and Co, 1976), p. 135-147.
H. Kalven and H. Zeisel, op.cit.
C. Jones and E. Aronson, "Attribution of Fault to a Rape Victim as a Function of Respectability of the Victim", Journal of Personality and Social Psychology, 26: 415-419.
Forcible Rape: A National Survey of the Response by Prosecutors, (Seattle, Wash: Battelle Human Affairs Research, Law and Justice Study Centre, 1975), p. 79. (Prosecutors report that the major difficulty in obtaining convictions in judge and jury trials is the attitudes of the jury.)
N. Brooks, op.cit., pp. 7-10.
40. See Honourable Justice E.L. Haines, "Pity the Poor Witness". Chitty's Law Journal, 23:9, 1975.
41. Rape and Its Victims: A Report for Citizens, Health Facilities and Criminal Justice Agencies. (Washington D.C.: U.S. Dept. of Justice, 1975), p. 108.
42. Ibid., p. 109.

43. C. LeGrand, "Rape and Other Crimes Against Women", in Forgotten Victims, ed. by G. Nicholson, T. Condit and S. Greenbaum, California District Attorneys Assn., 1977, p. 161.
44. Justice Haines, op.cit., p. 58.
45. Justice Haines, op.cit., p. 292.
46. L. Duncan, "Rape Logic: Hit 'em where it hurts", Branching Out Magazine, Feb/March 1976, pp. 28-31.
47. See 6th Annual Report of the Criminal Injuries Compensation Act of B.C. (Victoria, B.C.: Ministry of the Attorney-General, 1978).

Chapter VIII - RAPE RELIEF CENTRES - A SURVEY

Rape Crisis Centres came into existence as an outgrowth of the feminist movement because there were no services that attended correctly to the needs of the victims...so women filled the void themselves by getting involved with the important issues such as prevention and public education.¹

A song in the movie Cabaret goes, "If you only knew what I know". If rapists knew, if we all knew what rape crisis centre workers know - the disruption in a women's life, the suffering caused by a sexual attack, it could make an impact on educating us and prevent some future rapes.

Awareness of rape has increased. More women seem willing to report the crime. The media has been prepared to explore the social problem of rape recently. We are now aware, most of us, that rape is a crime of violence and not of "passion".

We may not all be aware that there has been a change in the patterns of rape over the past few years. Demands for oral sex seem to have been rare in the past; now it is demanded almost as "standard procedure". There has been increasing use of weapons, physical brutality and humiliation tactics by rapists, especially in western Canada.

We don't know how many people in B.C. are sexually assaulted every year. We do know that sexual assault is far more common than most of us realize. Let us assume that there are ten times

as many sexual assaults as reported (which is the most common estimate used). Then, in B.C., with a population of approximately 2.5 million people, 15,000 persons would have been sexually assaulted in one year alone.²

We have looked at the moral climate that creates and fosters rape. There seems little hope for reducing the crime:

- as long as the laws, the police and the courts treat victims of rape with suspicion, as if they were somehow criminals;
- as long as violence and sex are interlocked in the minds of many, and exploited publicly as saleable items (example: a major store in Vancouver, in this last year, had window displays of women with spread legs draped over motorcycles, to sell clothing); and
- as long as a man who rapes knows he has at least a 93% chance of not being punished.

Any solution to rape will be complex and will involve a multifaceted approach. We have discussed, at some length, the underlying attitudes and misconceptions about rape, provided the most accurate information available on the subject, and evaluated our social institutions' treatment of rape victims in the light of such knowledge. Far too little knowledge specific to B.C. is

available, but rape patterns seem similar to the rest of Canada and, in many respects, to the rest of the western world. Needed changes in procedures and attitudes have been offered, many of which have been tried and found to be successful in other places. There are no easy or cheap solutions to solving rape crimes or rape mentality in our Province.

That rape has become an issue of social and political concern can be largely credited to the work of women's groups in communities all across B.C. and Canada. Women have tried in various ways to focus the attention of politicians, criminal justice systems, health and social service groups on rape as a systematic and symbolic restraint on women in our society.

The pressure of women's groups has been centered, in the main, upon:

- 1) offering direct services of support and information to victims of rape;
- 2) lobbying for changes in laws and the traditional procedures for dealing with rape victims;
- 3) raising the awareness socially and politically that rape is a common act of violence in our society, and the implications of such violence; and
- 4) creating measures to protect women from rape through awareness and self-protection.

The feminist movement of the late 1960's and 70's provided the first impetus for what has been called the "anti-rape movement". In the late 60's, groups of women in the U.S. initiated the first rape workshops and began to organize the concept of rape crisis lines. The first rape crisis centre opened in Washington, D.C. in 1972 and has been used as a prototype by citizens' groups in countries throughout the world. Operating currently are some three or four hundred such centres in the world, 35 of which are located in cities across Canada.

Initially, rape crisis centres were set up independent of official institutions and had a dual purpose - to provide information and support to rape victims and to pressure for changes in laws, procedures and attitudes which affected women who reported the crime.

Centres vary one from another greatly, philosophically, but three basic forms are noted:

- 1) self-supporting groups of feminists who concentrate on social services and/or education about rape; their relationship with established institutions varies according to the philosophy of the group;
- 2) groups of feminists who focus on both social and political aspects of rape and who work closely with established institutions; and

- 3) centres organized by persons who already work in hospitals, police departments and other established organizations; these groups often focus solely on helping rape victims.

There is considerable overlapping of function and interdependence between rape crisis centres and the established institutions represented in these three categories. Feminists have become more willing to work with male-dominated institutions; institutional people and groups have become more feminist in philosophy.

The first rape crisis centres in Canada opened in Toronto (1973) and Vancouver (1974) and, rather than being a response to the U.S. rape crisis centres, "they arose primarily out of the local needs expressed by different social organizations, especially those who consider themselves a part of the women's movement".³

From 1967 to 1973, there had been a 76% increase in the number of reported rapes in Metro Toronto⁴ and a group made up of university students and staff, the Community Psychiatric Team of Toronto General Hospital and women from Women's Place were the organizing collective for what they saw as a "necessary community service".⁵ According to Dr. Robinson, one of the initial organizers,⁶ the centre was available to women who wished or did not wish to report the incident to the police. A 24-hour crisis line, accompaniment service and information/referral were provided.⁷

In Vancouver, the Rape Relief Centre opened officially in 1974. Six months of planning and training programs had taken place by the initial organizers, many of whom were closely associated with the Vancouver Women's Health Collective. This centre has, from its beginning, been structured as a collective with the goals, policies and activities determined by consensus of the women who are volunteers and staff. The group has operated a crisis intervention centre with a 24-hour line, accompaniment service, information/referrals, and has had a strong focus on rape prevention. A considerable amount of staff time is spent in speaking about rape to school students, women's groups, community centres, professional organization and conferences. Rape has been addressed on two levels:

- 1) as a social issue, symptomatic of violence inherent in the present structure of society;
- 2) as a traumatic experience for the individual victim who then requires emotional support as well as the necessary medical and legal assistance requested.

The fact that individual rape victims suffer "secondary victimization"⁸ in their encounter with the police, courts and the hospitals has been noted. The Vancouver Rape Relief Centre, as do all rape crisis centres since organized in B.C., has as a primary objective "to offer a lay counselling service in which the key ingredient is emotional support by another woman who is prepared to act in a crisis as well as do extensive

follow-up and lend a helping hand wherever it is needed, whether it be protection during the pre-trial period, housing referral or emotional catharsis".⁹

This health function includes promoting a return to physical and emotional well-being according to the requests of each victim. Of importance are a non-judgmental attitude by the rape relief worker and the fostering of the sexually assaulted person's control over her own life. This last ingredient is capsulized by the following statement:

Women need to be helped to help themselves rather than submit their problems to an authority figure in the person of a police officer, social worker or chaplain. One reason rape is a traumatic event is because the victim loses control over her own body. The feelings of helplessness that result can be overcome in part by giving her the opportunity to regain control of herself, rather than having someone else take care of her.¹⁰

The sustenance given by the rape relief worker often is initially in the form of listening to the story of the event. A person would normally turn to family or close friends at the time of crisis. But often, because of the stigma attached to rape, the victim will either keep the rape experience to herself, or if she tells a family member or friend, their reaction may be that of shock and withdrawal of support.

If a woman victim has a boyfriend or husband, he may not even be told because she may fear his reaction. "Men often see rape

as consensual sex or seduction, and focus on the sexual component rather than the violence".¹¹ Separation or divorce are not at all uncommon.

Many women rape victims find it difficult to relate to men at all after the rape attack, "for a time, each man may be seen as a potential rapist or aggressor. As well as bringing on concerns about future relationships with men, the rape may trigger reflections on past relationships, and the woman will have to work through any resolved conflicts she may have in this area".¹²

Each person varies in her reaction to a rape assault, depending on:

- 1) her age and previous experiences;
- 2) the initial reaction of the first person contacted after the assault;
- 3) the length of assault (in an incest case, the experience could begin early in life and not be released for some years); and
- 4) support of family and friends.

That the consequences affect every area of the assaulted person's life cannot be denied. As Hunt and Parking point out in a recent B.C. Medical Journal article on rape:

Although the extent and type of psychological injury will vary with age, emotional maturity, previous sexual experience and the nature of

the assault, all victims need immediate and psychological support. An informed, understanding and non-threatening relationship must be established to allay initial fears of pregnancy, disease and reaction by family and friends. Mobilization of supportive relationships with specific directions for follow-up counselling are essential if psychological trauma is to be minimized.¹³

A person who receives assurance and information immediately may move quickly through the stages we have outlined in the medical section. A person who is not reassured may carry pain which will not be resolved and this may affect her or his reactions and relationships for years to come.

Rape relief centres receive calls from persons who have just been assaulted and from those who were sexually assaulted in the past. A seemingly innocuous event may set off a reaction similar to that of the initial shock in a woman who was assaulted 10 or 20 years in the past and who has perhaps never dealt with the impact of the rape. It is the policy of the centres to accept the caller's situation and provide whatever information and counselling is requested. The staff person or volunteer at the centre is to provide the assistance herself, if she is able, and/or to offer options for the caller to consider.

Rape crisis counselling may take one or more of these forms: crisis phone lines; individual, family and group meetings; some centres offer counselling for male victims of sexual assaults and may have male volunteers for this purpose; or support may be offered to male relatives or friends of rape victims by either female or male counsellors.

The health function of a rape crisis centre should be clearly recognized. Gary Martin relates the need for counselling programmes to B.C.:

Within B.C., there are no hospital-based counselling programmes and most Community Health Centres and government social work agencies do not have personnel trained in rape counselling. In light of this, Hunt and Parkin advocate the use of Rape Relief workers both in the hospital for crisis counselling and for long-term follow-up counselling. In that most rape victims do not require intensive, professional, psychiatric help, the use of trained lay-counsellors, with or without professional supervision appears to be the most efficient delivery model and is indeed the one which is increasingly being adopted in both Canada and the United States.¹⁴

A second function of rape crisis centres is para-legal, and includes:

- 1) accompaniment of victims through the criminal justice system;
- 2) monitoring of rape trials;
- 3) third party reporting of rape cases to the police for women who do not wish to pursue criminal charges; and
- 4) promoting change at the judicial level through review, discussion and reform lobbying of the law.

Rape crisis centres vary in emphasis on any of the components. For instance, not all centres monitor rape trials, or may monitor only certain kinds of trials.

Theoretically, there should be no need for case-by-case accompaniment of rape victims through the judicial process. It is the responsibility of the Crown to represent the interests of the victim of crime. As we have pointed out in the legal section, the Crown is overburdened with cases and often shares prevailing misconceptions about rape which affect courtroom manner.

Most persons have little or no experience with the law. Particularly vulnerable is the victim of crime who comes unprepared to court. Many assaulted women are shocked to find that rape is not legally a crime against them but against society. Rape victims desperately need the practical advice and emotional support provided by a rape relief counsellor if there is to be any increase in the number of criminal cases pursued by its victims and a reduction in what has been termed the "rape of the soul".¹⁵

There has been a fair amount of antagonism and skepticism towards the legal advocacy role played by rape relief counsellors. The fact is that it is quite impossible for the victims' interests to be represented through the aid of the counsellor unless there is consent and cooperation of the court personnel and prosecutor. Both the Crown and the counsellor have insights into law and its effects which can be of benefit to the rape victim in the legal process. It is important that exchange between prosecutors and rape counsellors take place on several

levels - from the informal talk over a cup of coffee to formal workshops and conferences which deal with the various roles played and strategies for changes needed. Confrontation will only serve to jeopardize the very interests of rape victims that the Crown and the rape relief centres are there to serve.

Rape relief counsellors stand on potentially dangerous ground offering legal information unless the representatives of the judicial process are prepared to provide standard information and local procedures to these workers. Surely the job of the Crown will be made easier if the witnessing rape victim is cognizant of her rights and duties. A satisfactory trial outcome is more likely if the victim has some confidence in the role she plays. It could be valuable, for instance, to test the hypothesis that fewer women would wish to withdraw from the legal process if they felt the justice was consistent with a fair and unbiased assessment of the issues.

The third function of rape relief centres is that of public education. One of the most significant developments on the whole issue of rape has been a growing body of evidence that refutes such widely-held beliefs as "nice girls don't get raped", or that rapists are slaving maniacs who drag women into dark alleys. Because there has been an acceptance of certain myths, because there is a good deal of ignorance about

human sexuality and the effects of sex role stereotyping in our society, situations often arise between men and women that are seen as rape by women, but not by men and often not by the legal system. As we have discussed, it is the social and political aspects of rape that have consequently confused our concepts of who can be raped and who can rape.

It is, in particular, our young people who are vulnerable to such concepts, and who in fact make up the largest population of both rape victims and rapists. Since so many problems surrounding rape concern attitudes, the educational function of rape relief centres is particularly vital. If rape relief services are not going to be required one day in the future, an emphasis on rape prevention which includes the social attitudes which perpetuate sexual attacks must be promoted.

It is not only the rape relief centres who must be encouraged in this area. As long as there is considerable resistance by school officials to allow rape education in the high schools, as long as funding authorities shrink from supporting rape education because of the revolutionary qualities of the concepts, rape relief centres will be discouraged in their efforts to educate the public.

Rape continues to be dangerous to us only as we deny its reality in social consequences and as a hidden expense in our public budgets.

Rape prevention programs conducted by rape relief centres have been lumped, by school officials, with sex education programs (which have their own problems of acceptance as a to-be-discussed topic) and rape prevention has been seen as a subject to be discussed by young women only (converse to the belief that if we tell young men, they might get ideas; it is the ideas already present that perpetuate the "problem").

Despite resistance and limited sponsorship, rape relief centres have developed inexpensive and effective mediums to reach the public. Information dissemination has been printed and distributed (pamphlets, booklets) and spoken and seen (films, videotapes, direct verbal presentations to audiences via T.V. radio and forums).

Rape relief centres vary in emphasis on these three major areas of function which we have described, depending on (a) the philosophy and interest of the individual centres; (b) local needs expressed to the centres; (c) pressure from institutions or agencies which affect the direction taken by individual centres; and (d) funding priorities of financial backers.

Not all rape relief centres operate as specialized rape crisis services. Particularly in smaller communities where the demand for services is not full-time, a rape counselling group may be attached to a crisis line, women's centre, YWCA or hospital.

Other areas of function which some centres have assumed are research, assertiveness training, physical and/or emotional self-defence programs, men's counselling groups, rape law reform and monitoring.

In British Columbia, there are currently five full-fledged rape relief centres, all of who are members of the Coalition of British Columbia Rape Centres Society (CBCRC). The centres are located in Kamloops, Victoria, Vancouver, Nanaimo and Terrace.

Each rape relief centre in the CBCRC operates as an independent Society in order to fulfill local needs in appropriate forms. Boards of Directors vary in philosophy and are composed of volunteers from diverse backgrounds.

The CBCRC is an umbrella Society, with its own Executive Board and Advisory Board. Policy and financial matters that affect the CBCRC's member Societies are decided by the Executive Board. The umbrella Society was formulated in 1977 for several reasons.

In the previous year, the provincial Ministry of Health had requested a body for financial accountability of provincial funds granted to rape relief and to provide a standard for funding requests coming to the Ministry from women's groups all over the province. The B.C. rape relief centres, all created within the previous three years, also saw a need for coalescing:

- 1) to stimulate communication between isolated groups doing similar work;
- 2) to develop some standardized procedures for information collection, research and dispersal; and
- 3) to dispense available funds in a cohesive fashion to groups in the province doing rape relief work.

Each individual centre has retained autonomy to maintain programs according to needs expressed within its group and by community groups and institutions with which the centre interacts. Local fund-raising can as well be carried out by each centre and is tied to the level of provincial funding received by that centre through the Coalition Society; local funding may be used as well for special projects or research undertaken.

The CBCRC is affiliated with the National Association of Rape Crisis Centres for informational exchange, the development of standardized procedures nationally, and for policy development on a national level. In April, 1978, the CBCRC hosted the Fourth National Conference of Canadian Rape Crisis Centres in Victoria. Law reform and sexual abuse of children were priority items of this conference.

The Coalition of B.C. Rape Centres received \$125,000 from the provincial Ministries of Health (\$75,000), Human Resources (\$25,000) and Attorney-General (\$25,000) in the fiscal year 1977-78. These grants paid 10 1/2 salaries and partially paid

for operational costs of four centres in B.C. Municipal grants from the City of Nanaimo (\$2,500) and the City of Vancouver (\$4,122) augmented the provincial operational grants in 1977. Approximately \$2,500 was received by the CBCRC from private donations and honorariums in that fiscal year.

Vancouver Rape Relief began operation as a centre in 1974, Kamloops and Victoria in 1975, Nanaimo in 1976. Terrace Northwest Women in Crisis is a new member of the CBCRC as of April, 1978. This group operates a volunteer-run crisis line for sexually assaulted persons through an answering service.

Previous funding from the Province of British Columbia, through the Ministries of Health, Human Resources and Attorney-General has been provided in these amounts to individual centres and to the CBCRC:

1. 1976/77 fiscal year, paid to the Coalition of B.C. Rape Centres

Ministry of Health	\$ 75,000
Ministry of Human Resources	18,339
Ministry of Attorney-General (Legal Services Commission)	1,700

2. 1975/76 fiscal year

Ministry of Health (to Vancouver Rape Relief)	60,000
Ministry of Health (to Kamloops Rape Relief)	7,500
Ministry of Attorney-General (to Vancouver Rape Relief)	12,000
Ministry of Attorney-General (to Kamloops Rape Relief)	3,000

3. 1974/75 fiscal year

Ministry of Attorney-General (to Vancouver Rape Relief)	\$ 9,000
Ministry of Health (to Vancouver Rape Relief)	20,000

Other sources of funding in the years 1974 to 1977 have been Company of Young Canadians (to Vancouver), Local Initiatives Program (to Nanaimo), Secretary of State (to Victoria), Opportunities for Youth (to Victoria), Solicitor General of Canada (CBCRC for northern training program), United Way (to Vancouver), Kroener Foundation (to CBCRC).

Other smaller grants and donations have been received from private donors and foundations. The majority of all of these grants were utilized for specific projects or the initial organization of the fledgling rape relief centres.¹⁶

Specific projects sponsored by the rape relief centres of B.C. beyond direct operation necessitated hiring additional short-term workers who were under the supervision of rape relief centres' staff. These projects, in the 1977/78 fiscal year, were:

- 1) Secretary of State translation grant for outreach program in ethnic communities (Vancouver, \$2,947);
- 2) Three Local Initiatives Programs grants for
 - a) publication of Breaking the Hold (produced for adult readers, Vancouver, approximately \$7,000);

- b) publication of Towards an Understanding of Rape (Produced for youth readers, Victoria, \$20,400); and
- c) initiating of Nanaimo Rape Relief (9200);
- 3) Non-Medical Use of Drugs Directorate grant for research into the causes and effects of rape on victims (Vancouver, \$4,120);
- 4) Youth Employment Programs grant for correspondence with British Columbia school boards to initiate wider distribution of Towards an Understanding of Rape (Victoria, \$4,746);
- 5) Solicitor General of Canada grant for training of community persons in the area of rape, north central B.C. (CBCRC, \$4,600);
- 6) Legal Services Commission for publication of pamphlets on rape (CBCRC, \$2,500);
- 7) Legal Services Commission for training of community persons in the area of rape, (Okanagan, \$320); and
- 8) Law Foundation of British Columbia for legal researcher and courtwork (Vancouver, \$12,832).

The centres have provided staff time to co-create This Film is about Rape, along with members of the RCMP of British Columbia and municipal police force personnel (funded by the B.C. Police Commission, Ministry of the Attorney-General, Vancouver Foundation and Woodward Foundation).

Three basic functions have been used to describe rape relief centres. Specific to the Province of British Columbia and to the CBCRC, these functions can be capsulized, bearing in mind that there is flexibility from region to region, community to community, depending on regional and community disparities.

Nearly all persons who contact the rape relief centres initially do so by phone. At night the twenty-four lines are operated through answering services. The phone calls can be "patched" through to the on-call worker's phone, a message taken to return a call or the worker located through a pager service. During the week-day, paid staff or volunteers answer phones in the offices. Two persons are available "on-call" to receive crisis or informational calls at all times. An experienced worker and a less experienced worker are often paired.

If a crisis call is received, the distressed person may wish someone to comfort her and answer questions she has. If the caller wishes the rape relief worker to attend at her house, accompany her to the hospital or police station, or meet her in a mutually arranged place, the worker will do so. The rape relief worker must always be very careful of her own safety when she responds to a distress call. If the situation requires, the worker will call another person to accompany her, and the police will be called if needed or requested.

Some crisis calls are referrals or requests for attendance at hospital, police department, psychiatric unit, or a private home. Rape relief personnel will attend or talk to the referred person only with her permission. Counselling or information

is often initially provided to the referring person, who may be able to provide continuing support to the friend, family member or client.

The CBCRC has approximately 500 documented initial crisis calls for this last year that became "Case A" reports. Case A reports were those which required more than one contact with the victim. Nanaimo Rape Relief, for instance, had follow-up 30 contacts with 340 "Case A" callers.

Each centre deals with many other callers requesting information on sexual assault, wife-battering, child abuse, and women's health problems. Victoria Rape Relief, over a period of the last year, reports they received an average of twenty phone calls a day. Most of these calls could be responded to in a matter of minutes or hours. The number of crisis or informational calls varies with the size of the city, and with public knowledge and credibility of the service.

Victoria Rape Relief received 104 initial crisis calls for the year 1977. Eighty-six of these 104 crisis calls became "Case A" and the continued contacts are documented as follows:

- 57 rapes
- 13 indecent assaults
- 9 child sexual assaults
- 4 attempted rapes
- 3 exhibitionists, "peeping toms"

Of these 86 continued contacts, 34 (39%) were reported to the police, of which 3 were third-party reports.¹⁷ Nine of the 34 went to court (26%), 3 persons were convicted of some form of sexual assault (9%).

Victoria Rape Relief had 35 "Case A" crisis calls for 1976. Crisis calls of this nature in 1977 represent a 300% increase over similar calls for 1976. This increase can be credited, I believe, to the fact that the Rape Relief centre was new in 1976, was not as well advertised, and did not yet have the credibility as a valuable service among either professional persons or in the "public eye".

Training for rape relief workers is extensive. As with most volunteer groups, anyone can apply, so the training program is structured to a weeding-out process.

Training programs are held in each centre several times a year and include: the issues and politics of rape; police, hospital and court procedures specific to sexual assault; psychological and physical reactions to rape; listening skills and counselling techniques, community information and referrals; the internal operation of the centre.

The training program consists, often, of two nights a week for six to eight weeks, with a weekend workshop at the end of this period. Hospital personnel, police and prosecutors are involved

in the appropriate sessions. All trainees are expected to read material in advance of sessions and participate in 48 to 54 hours of training.

At the completion of the training sessions, new volunteers are required to participate in bimonthly or monthly sessions, as are experienced workers. New information, cases and problems are shared at these meetings.

Training techniques include lectures, role-playing, counselling techniques, emotional and physical self-defence and a great deal of reinforced reading on the specific health and legal implications of rape.¹⁸

One major difficulty that any volunteer-based group faces is the continual turnover of volunteers. Rape crisis work is emotionally exhausting. Many hours are involved in training and the continual expansion of knowledge for each rape relief worker. Practical difficulties arise with regular volunteer shift work. Crisis line volunteers may not feel as committed as full-time workers and are often even more isolated from the day-to-day operations of the centre than are office volunteers contributing the same number of hours.

The volunteer turnover causes the trainers in any rape relief centre to do constant training, diverting resources from the centre's actual goals. B.C. rape centres have dealt with the investment made in training by several means:

- 1) incorporating volunteers into Boards of Directors, policy-making committees;
- 2) structuring regular sessions for exchange of information and airing of problems;
- 3) providing experienced "big sisters" for the new volunteers;
- 4) compiling regular newsletters of centre activities;
- 5) instigating more rigorous screening of potential volunteers for problem areas likely to arise; and
- 6) paying expenses incurred by volunteers who are on duty (babysitting, taxi chits).

Many of the problems we have mentioned have been dealt with in the practical and supportive ways by the older centres, but each new centre flounders with the stifling effects of little or no money with which to operate the service and a yet-untested and unadvertised service. It is an indication of many women's great dedication and zeal and no little skill that rape relief centres ever survive beyond the initial enthusiasm of a handful of women.

Speaking engagements and public education involve time of both staff and volunteers at each rape relief centre in B.C. As an example, Vancouver Rape Relief participated in 148 speaking engagements to community groups and schools in 1977, along with 10 radio and 6 television programs. The centre estimated that 3,600 persons attended at the 148 speaking engagements. A major focus of the educational programs of this sort are youth in high schools.

Rape prevention and education can be broken into several components:

- 1) prevention, individual and community;
- 2) attitudes, myths and information dissemination;
- 3) resistance, or alternatives in given situations; and
- 4) reporting, alternatives available.

Each of these types can be a separate program or be found in combination. The latter is more often true for public education programs sponsored by rape relief groups in B.C. Information to be provided must be geared to various audiences under several conditions in a manner appropriate to the audiences' requests. Rape relief centres send a speaker to meetings or school classes at the request of the group, normally.

In 1977, the Victoria School Board approved distribution of the booklet, Towards an Understanding of Rape, produced by the Victoria Rape Relief, to all grade 9 students and older.¹⁹

Small classes of young women and men (who meet in separate groups) spend a one-hour guidance session with the booklet, a teacher and a Rape Relief person. The District purchases all necessary copies of the booklet for distribution in the guidance session.

A few other school districts in B.C. have purchased large quantities of the booklet for all students; the majority of districts purchased a few library or guidance counselling copies.

It is vital that all young people have access to such facts as provided by the booklet, written especially for youth. Particularly important would be distribution of such information to youth who do not have access to a Rape Relief centre in their community. As is often the case, though, the concentration of such material tends to be localized in B.C. in only those communities who do have rape relief centres to take an active interest in rape education and prevention promotion.

For adults there is This Film is About Rape, co-created by members of the RCMP of B.C., municipal police for personnel and the CBCRC, in 1977-78. The film and program have received enthusiastic response in other parts of Canada and the United States but a mixed reaction in this province. The reaction in the province may be due, in part, to dogmatic approaches to rape from groups and individuals who oppose the film's contents.²⁰ The effectiveness of the film package would be difficult to measure at this time; attitudes are often slow to change and consequently difficult to measure.

Beyond these specific examples provided, other educational endeavours of individual rape relief centres or the CBCRC have been, of recent:

- 1) distribution of general information pamphlets (approximately 50,000 in 1977-78), posters, sticky-back cards for phone booths;
- 2) informational exchanges of specific nature with psychiatric and child-abuse teams, Crown counsels, municipal police or RCMP divisions, hospital personnel, social workers;

- 3) training programs on rape by invitation to interested persons in Terrace, Williams Lake, Prince George, Prince Rupert, Burns Lake, Vernon, Dawson Creek, Kelowna;
- 4) videotape, Rape is a Social Disease;
- 5) booklet for adult reading, Breaking the Hold, on individual and community responsibility for rape prevention; and.
- 6) training programs of emotional and physical self-defence for women.

The para-legal function of rape relief centres in B.C. differs little from the general functions described earlier and will not be elaborated. The workers at the centres do not encourage or discourage the reporting of sexual assault to the police, nor a woman's continued involvement in the legal process at any level. There has been heavy criticism of the rape relief centres' role in this respect. Some have criticized rape relief centres for encouraging all women to report rapes; others have criticized rape relief centres for not encouraging women to report rape events. Both of these criticisms are, I believe, basic misunderstandings. According to rape centre philosophies, the goal of self-determinism for victims cannot be lost in any trend to determine the victim's needs for her.

It would be useful to evaluate whether the presence of rape relief centres has encouraged greater police reporting of rape over the past several years as has been suggested by some in B.C.²² It could also be hypothesized that if a victim of sexual assault does become involved in the legal process, she is more likely to endure the months of waiting for the trial to occur

and be prepared for her appearance because of the emotional and informational support she receives from her Rape Relief counsellor.

Several points are clear. Centres who do have the best working relationship with police and prosecutors have been able to do so because a sympathetic person from within the institution has opened lines of communication. Rape Relief centres do not, for the most part, have the clout to force communications or reforms unless through the press or an elected official who intercedes on their behalf. As has been earlier indicated, there are not likely to be any major changes in police reporting or prosecution under existent laws. For example, the fact that police "unfound" many rapes and that prosecutors plea-bargain rape cases to lesser offences is an indication that the law is cumbersome in many ways.

Rape relief centres in B.C. have utilized court-monitoring as well as maintaining a lower profile and working on a one-to-one basis to effect good relationships with the police and prosecutors. The latter is a slow and painstaking process which will no doubt be reflected in the next few years by procedural changes within the police and legal systems. The Criminal Justice Section of the Victoria Bar Association has, in this last year, endorsed the concepts and principles of the local Rape Relief Centre.²³ No doubt other Bar Associations will follow suit, if they have not already done so, which will open the doors for more cooperative efforts and referrals between the law profession and the Rape Relief centres of British Columbia.

Limited research and demonstration projects have been sponsored by several of the British Columbia rape relief centres over the past years. All of the projects, to date, have been of short duration and have had specific focus, due in large part to the nature of available funding for this non-direct service function. Rape relief centres are in an ideal position to sponsor or cooperate with such research in Canada but are also disadvantaged because most grantors prefer to deal with professional credentials and tangible results. The wisest use of funds would provide the direct services as a primary and indisputable fact and encourage a framework in which information obtained in daily activities could underpin research efforts. As Lorene Clark and Debra Lewis say about rape research in Canada:

One of the major reasons for eliciting information of this type is that without it, we have no basis for advocating changes in purely local administration of justice. Until we understand not only the similarities, but also the differences, we cannot begin to pinpoint specific variables which account for differences in reporting rates, reporting populations, rates of apprehension, and conviction. To know what can work, we need to know what does and does not work.²⁴

We have described the operations of the rape relief centres operating within the Coalition of British Columbia Rape Centres at some length. In gathering the material for this report, it was necessary:

- 1) to discover needs for related services in other parts of the province, not serviced directly by member groups of the CBCRC; and
- 2) to record available community resources which do or could meet needs of rape victims and/or provide educational programs for the prevention of rape assaults.

We will briefly outline these discoveries:

- 1) In Kelowna, B.C., The Friends of Rape Victims functions at present with a roster of names available at the police station, the hospital and the crisis line. Training programs are being planned for professionals who come into contact with rape victims. Training material for the Friends of Rape Victims has been obtained from the CBCRC and several group training sessions have been held internally, one being sponsored by the Legal Services Commission of B.C.
- 2) Prince George has been operating a rape crisis line out of a building shared, in part, by the crisis line and The Women's Equal Rights Association. Seven cases of sexual assault had involved support and information from the group in their first few months of operation; in the summer of 1977 they received a call a week. Training sessions using CBCRC staff were held in Prince George in early 1977. The group has "been instrumental in getting the doctors and the local hospital to adopt a uniform rape procedure", and is also introducing rape workshops in the high schools.²⁵ They are still in need of assistance in developing a more intensive internal training program and are operating with no money. A Canada Works grant for a women's group provided some initial impetus for the rape crisis centre's organizing.
- 3) At the University of British Columbia, a feasibility study was done in 1975 under the auspices of the Dean of Women's office to discern the need for a Rape Crisis Centre in the UBC-Point Grey area. The response to its recommendations, to date, has been to increase the number of lamp standards on darker paths and provide a bus service.²⁶ "There is currently a sufficiently serious problem with at least one rapist in the area to warrant

posting of signs and warnings to students in the two public schools of the University Endowment Lands and the University Main Library."²⁷ A need for a broad educational program is expressed.

- 4) In 1977, in the Cowichan Valley, the Duncan RCMP reported at least 20 sexual assaults. The Cowichan Valley Status of Women report that the "only emergency services available on a 24-hour basis are the emergency department at the Cowichan District Hospital and the RCMP".²⁸ For emotional counselling and information, a rape victim could call the Nanaimo Rape Relief, who have received 5 or 6 calls in the last year from the Valley, or visit at Family Life, a volunteer counselling group (who have had several cases recently). Towards an Understanding of Rape is being distributed in the senior secondary schools.
- 5) Prince Rupert - Options for Women is preparing a feasibility study on battered women due to the high incidence of violence against women. The Prince Rupert Regional Hospital nursing staff are supportive of rape victims, according to the Options for Women. The hospital uses a standardized procedure in all rape cases. Sexual assault of young native women, by white males, which goes unreported for the most part, is of deep concern to these women. Native women are currently assisting in one case which is going to court and feel the need for more information.² A social worker indicates there are incest cases all the time; almost all are referred by the police.³⁰
- 6) In Nelson, B.C., the Women's Centre handles some sexual assault cases. The Community Resources Board and the Women's Centre are planning a day-long professional workshop on sexual assault.
- 7) The Vernon Hospital has a standard protocol for rape victims. According to women in the community, there is a lack of support and follow-up. At a recent day-long training session on rape which was attended by members of the crisis line, Native Friendship Centre and Direct Action for Women, these groups indicated they would be prepared to handle some sexual assault cases although they feel the need for more intensive training. They indicated that much more contact and support is needed between the agencies of that city.

- 8) Armstrong - An information-referral line is being proposed. Basic information is needed to deal with rape victims.
- 9) Courtenay, B.C. has a crisis line with a roster of rape relief volunteers who received training under a Solicitor General grant several years ago. They indicate there are a lot more prosecutions on rape cases than a few years ago.³¹
- A mental health worker said she knows of a number of women who have been violently attacked. She said, "There is misuse of power and sexuality in some marriages" and that there is "sadness and disappointment when a woman is abused by someone she loves. Legally, it is not rape, but it is a violent sexual assault."³² Women battered inside marriage is a noticeably large problem, according to several counsellors in the area. One said, "battered women are desparately low in self-esteem; they have to go back twenty years" to resolve those feelings. A transition house is needed, according to a Family Court Counsellor, with a support system for battered women. He knows of 20 cases of battered women in the last year.³³ A youth counselling group is aware that there is a good deal of sexual assault among youth, but the youth rarely speak of it to adults.
- 10) Powell River has an enormous number of battered wives. The Civil Liberties group is strong.³⁴
- 11) The crisis centre in Campbell River is aware of some sexual assault not reported. There were training programs held for a Rape Relief group in 1976, but this group has dissolved.
- 12) The B.C. Employees' Union, Women's Committee is very concerned about women on shift work and want some educational/preventative programs.³⁵
- 13) Tsiaku Women's Centre in Burns Lake is assisting women who are involved in rape trials. One woman told me that she knew of 5 rapes and 4 attempted rapes in an eight-mile stretch of road. Women agreed that rape is not just "big city 'bull-shit'". There is good support for women at the Smithers Law Centre.

- 14) In Mackenzie a family services worker told me "there is a fair amount of rape not reported, much wife battering and a great rise in child abuse.³⁶" Support services are needed for women with children who are isolated; and in bad mental health. There are a great deal of transient families and male alcohol problems. Women need to get out more often. A Canada Works grant for women/children's social service has expired.
- 15) Smithers Law Centre reports 8 cases of sexual assault in the last year (police have only one "unfounded" case).³⁷ The Native Friendship Centre is aware of a number of sexual assault cases involving young women not reported to the RCMP.³⁸ The Smithers Community Law Centre and Justice Council are requesting training workshops³⁹ on sexual assault be held in this community.
- 16) In Fraser Lake a long-term resident who acts as a local crisis counsellor knows of 9 rapes, only 1 of which was reported to the RCMP.⁴⁰ She works at a women's centre crisis line, which is a municipally sponsored Canada Works project.
- 17) In Houston, 4 or 5 cases of rape reported to the police; workshop group agreed that incest was "common".
- 18) Roberts Creek Interagency Council meeting concerned particularly with teenage violence and battered wives. There is a need for youth programs. Women's Centre has a drop-in one day a week and sees assaulted women, usually referring them on to Vancouver Rape Relief.
- 19) The Township of Richmond reports about 20 cases of sexual assault to the RCMP in 1977. According to the Richmond Women's Resource Group and the Township Social Planner, the Social Services Committee of the Township Council, a local Task Force of community agency people are working to establish a transition house/emergency shelter for women and children. There is a need for public transportation and better street lighting.⁴¹
- 20) Dawson Creek - Northern Lights College and the Women of the Peace co-sponsored and paid Rape Relief staff to conduct workshops on sexual assault in January 1978. Much "date-rape" reported by local high school women.

- 21) B.C. Teachers Federation has adopted a policy "that the BCTF develop programs to inform teachers about the issues of rape and sexual assault, particularly as they affect students" (January 7, 1978).⁴² The BCTF Status of Women Committee is also recommending that the following statement become policy, as well "that the BCTF strongly recommend that the Minister of Education in conjunction with BCTF immediately develop and implement programs to educate students about rape and sexual assault".⁴³
- 22) The Registered Nurses of British Columbia's Task Committee on Rape recommended (a) continued funding of rape relief educational and counselling functions, (b) in-service training on rape, and (c) that treatment of rape victims not be dependent on whether charges are to be laid.⁴⁴
- 23) In the first two days of this project, with an article in one paper, the author received four calls from victims who had not previously reported their cases to anyone. One woman said "the forcefulness of a man...11 years ago...still affects me today...my husband doesn't know..I feel numb".

A number of women's groups in the province offer information and counselling for sexual assault victims if requested; Prince George and Kelowna have advertised these specific services. It was continually reported to the researcher by representatives of social agencies and women's groups that training was desperately needed prior to offering and/or expanding either counselling or educational programs. It is the author's belief that the CBCRC would be prepared to provide such training and is the best vehicle for such provision, should appropriate financial support be ensured for training workshops.

The provision of crisis and support systems for rape victims, as we have documented, is a recent phenomena. The growth of anti-rape groups has been so rapid that documenting material is out of date before it is printed.

In general, the goals of rape crisis centres internationally, solicited by this researcher, are similar. The means to provide and advertise services varies, as does financial support. A few examples will suffice.

In Hong Kong the primary force was "a coordinating committee which is based on work done in this area by the Hong Kong Status of Women."⁴⁵ Family Planning funds a portion of the crisis line and donations are solicited by newspaper articles. The main problem in the locale is "under-reporting in the Chinese community because of the stigma of rape on the whole family".⁴⁶

In Oslo, Norway, the group began its work in March, 1976. "We found out that we would try to raise a centre for battered wives and rape victims."⁴⁷ The group began with five women and soon expanded to 80. A pilot project was created and 3,000 gummed labels were placed in telephone booths and public toilets for advertising the services. A telephone line was opened in 1977; "the women turned up rather quick, and in a short time we had discovered a need bigger than we had expected".⁴⁸ Counselling is done by women at the centre and through the Faculty of Law Studies in Oslo. The laws on rape in Norway, by statute, are not discriminatory, and only need to be "maintained in a proper way".⁴⁹

The only federal government to take an active role in supporting community rape groups has been the United States. The National Centre for the Prevention and Control of Rape was established on 1975 by the U.S. Congress.⁵⁰ New sexual assault laws have been enacted, since that time, in at least fifteen states.

The Des Moines Rape/Sexual Assault Care Center is a community model involving 70 sponsors from concern groups, medical and social services, the law enforcement and criminal justice personnel. It was opened in 1974 under a federal grant (LEAA) and has been named "Exemplary Project". The Center's activities include:

- 1) 24-hour telephone and personal contact service, including compassionate assistance to the victim during the medical examination and prosecutor's interview;
- 2) referral services to a wide network of community agencies that can give specialized help to the victim;
- 3) in-service training for medical and criminal justice professionals who deal with rape victims; and
- 4) public education to replace existing ignorance and misinformation with the facts about sex crimes.⁵¹

From the time the Center was created in October 1974, until its designation as an Exemplary Project in June 1976, police clearance rates for rape cases rose from 50% to 69%; even more significant changes were seen in the special prosecutor's office, where victims

showed an increasing willingness to press charges. Before the program began, charges were filed in only a third of cases where the offender was identified; that figure had jumped to three-fourths of those cases by June 1976.⁵²

An equally dramatic rise in conviction rates occurred: while only 40% of the cases tried in the preproject period resulted in conviction, the figure rose to 65% in the project's first year and to 82% in the second year.⁵³

There are three office staff and many volunteer workers; the total cost in 1976 "for a program serving over 100 victims a year in a community of about 30,000, less than \$35,000".⁵⁴

This budget did not include office space (provided free by a hospital), a special prosecutor's time (funded as a function of the District Attorney's Office). There has been an additional person hired to travel around the state helping other communities to develop rape crisis centres.

The centre feels its success is due to two "key features":

"One-on-One Approach". A single Victim Contact Worker stays in contact with the victim and is a liaison with the services she needs. One district attorney is responsible for all rape cases, from investigation to trial.

"Community Participation". A large, wide-ranging board with committees responsible for specific tasks.⁵⁵

Funding for Canadian rape crisis centres has been consistently difficult to obtain. The federal government has not until recently considered sexual assault a priority issue and has not been prepared to spend dollars in this area.

Three years ago a federal Health and Welfare demonstration grant was made to the Ottawa-Hull Rape Crisis Centre. This grant is now in its last year of demonstration and is being considered a great success.⁵⁶ The National Assister of Rape Centres is a component of that grant who has as her job:

- a. establishing a National Clearinghouse on Rape;
- b. coordinating and standardizing statistics nationally;
- c. coordinating a rape law reform campaign; and
- d. providing aid to new rape crisis centres.⁵⁷

Most rape crisis centres in Canada are funded by local YWCA's, federal make-work projects, municipal grants, foundation grants and, in the majority of cases, private donations.

Three provinces in Canada assist in funding Rape Relief Centres: Quebec, Saskatchewan and British Columbia. Ontario is giving provincial funding serious consideration. No governmental agencies or departments in Canada provide direct service to victims of sexual assault as a specialized service.

I would agree with Gary Martin, "In general, the structure of the direct delivery systems of the relevant social services departments of governments (Ministry of Health, Ministry of Human Resources) are not designed to respond to rape crisis situations or to provide the necessary extended counselling on a routine basis." 58

It is certainly true that specific workers for these departments - public health nurses, social workers - are involved with individual women who have been raped. If there is a rape relief service available, though, these governmental staff persons will often either refer a client who is a victim of rape assault to the rape relief centre or call a rape relief centre for specific help that she or he needs in counselling the client.

A point well made, expressed to me by rape relief workers, is that in our search for experts on rape, rape relief workers do not (and do not wish) to have a "corner on the market". At the present time, it may be the rape relief worker who has the greatest expertise, but it would be hoped that through their continuing education programs fewer referrals would be necessary. Skills could be in the hands of many more persons like public health nurses and social workers who have direct contact with persons who need information and emotional support. This can happen over the coming years if provisions are made for an expansion of informational exchange and financial support is provided for training sessions of professionals.

Lorenne Clark and Debra Lewis make another vital point on the issue of the independent and specialized role of rape relief workers:

They cannot perform a supportive service for all rape victims, or a critical para-legal and educational function if they are in any way controlled by those institutional structures. Thus, rape crisis centres must be funded in such a way that control does not, and cannot, pass from their hands into the hands of those who have a vested interest either in seeing rape cases dealt with in one way rather than another, or in protecting themselves from criticism. It is not an easy role to play, but it is at the moment an essential role; rape crisis centres cannot function as impartial 'om-buds-men' if their funding is dependent on the institutions they may have to criticize.⁵⁹

These authors emphasize that rape crisis centres must have good relations with agencies and departments, but that they cannot be part of any other institution if they are to "perform a useful supportive service to the victim".⁶⁰

A few principles seem to be agreed upon in favour of a counselling capability outside criminal justice agencies and hospitals.

These principles all refer to the potential users of the services who, in the end, are those to whom the services must be accountable. Briefly, women who do not wish to report a rape (the vast majority) are most apt to report an assault to a non-affiliated organization.⁶¹ A woman who does report a rape, as well, needs a counsellor who can proceed with her through all the stages of the case until she has no need of assistance.

Although the involvement of criminal justice agencies and other professions is indicated at certain points, of major importance is the non-threatening atmosphere and continuity over time contained in the rape centres' mandate.

Societies, by definition, are primarily composed of volunteers with commitment to specific concerns. In this instance, the concern is primarily for the victim of sexual assault and her needs. Accountability to the rape victim is of paramount importance because, as we have pointed out on several occasions, it is the lack of control effected by the rape that is the major problem experienced by assaulted persons. These persons may begin once again to exercise control over their own lives supported by the informational, advocacy and supportive assistance which the rape crisis centres volunteers may offer.

It is the author's intention to argue that funding for the rape centres must be free from political interference. Rape centres need to be freed from continual expenditures of their staff and volunteer resources to ensure the future of the organizations. In a sense, rape centres have been the victims of their own success as the demand for services has taxed the internal energies of the centres' workers and financial resources. The assurance and stability of a financial base are indicated if the rape relief centres in the province are to pursue the development of a structure which can offer continuity in their communities.

In order to be effective in either the short or long term, an investment in assured funding is required which will not be contingent upon governmental extravagances or political expedience. The government of British Columbia has set an example in Canada by recognizing the need for rape centres through its financial and moral support over the past few years. The continuing ability of these centres to publicize the services and benefits, maintain and evaluate methods of service provision is contingent on an acceptable level of financial stability.

I do not intend to beleaguer the argument that because governmental service agencies are not presently equipped to provide routine rape counselling that they couldn't be supplied with the necessary information and be prepared for such counselling. The provision and use of rape relief training materials and training workshops for the specialized counselling of sexually assaulted persons could ultimately be encouraged within these ministries. These ministries might wish to pursue such training on a limited basis under certain circumstances.

The distinction between statutory and non-statutory services to be provided by the Ministry of Human Resources would not put rape counselling into the to-be-provided category of statutory services under its present mandate.⁶² The Ministry of Health, through its Public Health Program could ostensibly provide rape crisis counselling and follow-up counselling, but it has been

indicated that provisions for routine handling of such cases have not been built into the delivery system.⁶³ Public Health nurses are referred cases in specific situations by rape relief centres where distances and other problems indicate these referrals on an ad hoc basis. But the lack of knowledge concerning legal procedures and the present structure of problem solving within business hours would limit the extent to which the Ministry's personnel could handle such cases routinely.

It is more to the point that those who have the best contact and are the most efficient should do the indicated work, should this provision be cost-efficient and of good quality. The final section of this brief will address such questions as the cost-efficiency of providing service through the CBCRC. Other questions to be addressed are:

- 1) the minimum requirements necessary for financial assistance of the present CBCRC Society;
- 2) the need for a financial accountability which will not tax either the rape relief workers or the government persons responsible for these financial allocations; and
- 3) the cost-efficiency of expansion of such benefits throughout the whole of the Province of British Columbia.

VIII FOOTNOTES

1. M. Amir, Interview with Liaison Magazine (Ottawa: Dept. of the Solicitor General), September 1977, p.14.
2. Statistics Canada, Criminal Justice Monthly Report, December 1977.
3. A. Noell, Toronto Rape Crisis Centre, quoted in R.Kasinsky, The Rise and Institutionalization of the Anti-Rape Movement in Canada, (Utah State University: Dept. of Sociology).
4. E. Robinson, "The Establishment of a Rape Crisis Centre", Canada's Mental Health, 23:5, p.10.
5. Ibid, p.10.
6. The Community Psychiatric Team acted to organize the centre and provide training programs for the first Toronto Rape Crisis Centre workers. Later they withdrew into a consulting capacity with responsibility for the hospital's part of the service.
7. E. Robinson, op. cit., p. 10, "The Establishment of a Rape Crisis Centre", Canada's Mental Health, 23.5, p. 10.
8. D. Amir and M. Amir, Rape Crisis Centres: Ideology, Organization and Delivery of Services (Some Theoretical, Methodical and Policy Considerations), (Ottawa: Solicitor General of Canada, 1977), p.10.
9. R. Kasinsky, op.cit., p. 19.
10. Prescriptive Package: Rape and Its Victims, (Washington, D.C.: U.S. Dept. of Justice, 1975), p.124.
11. B. Vit den Bogaard and B. Newfield, Characteristics of Rape, (Non-Medical Use of Drugs Directorate, and Rape Relief Vancouver, 1977), p.41.
12. Ibid, p.42.
13. D. Hunt, M.D. and H. Parkin, M.D., "Medical and Medico-Legal Management of the Suspected Rape", B.C. Medical Journal, 18(6), June 1976, p.177.

14. G. Martin, Briefing Paper on the 1977-78 funding application from the Coalition of British Columbia Rape Centres (Attorney-General, March 14, 1977), p. 27-28.
15. M. Amir, D. Amir, op.cit., p. 15.
16. For specific details of CBCRC projects or grants see: Coalition of B.C. Rape Centres 1978-79 Provincial Funding Application, Structure and Functions of the Coalition of B.C. Rape Centres, both available at 1947 Cook Street, Victoria, B.C.
17. Third-party reports, by arrangement between police and rape relief centres, file documentation of the event. All information about the event is supplied, but the victim's name.
18. See, for instance, J. Vance, Rape Crisis Training Manual for Volunteers, 197 (3826 rue Parc LaFonta Montreal, P.Q.).
19. Students under sixteen years of age may receive the booklet with parental approval.
20. Criticisms of the film have ranged from its being too political in content to its being not radical enough in content. The film's intention, as I understand it, was not to offer specific solutions to specific rape situations. A fair amount of homework must be done by all programmers and this background material and technical information is contained in the guide accompanying the film. The intent is to limit the programmers to knowledgeable persons in the police prevention units and rape relief fields so as to avoid potential use of scare tactics and/or pat answers being given on the complex problem of rape.
21. A discussion of up-to-date information pertaining to assertiveness training, emotional self-defence and physical self-defence for women is contained in Appendix B of this report.
22. In Portland, Oregon, the Victim Advocate Program has contributed to a quadrupling of rape reports in the area (from D. Ben-Horn, "Is Rape a Sex Crime", The Nation, Aug. 16, 1975, p.114).
23. S. Dunn, Barr., in interview with N. Goldsberry, August 23, 1978.
24. L. Clark and D. Lewis, Rape: The Price of Coercive Sexuality, (Toronto: The Women's Press, 1977), p. 196.

25. Marie Mitchell, Prince George Women's Collective, letter to Nancy Goldsberry, December 21, 1977.
26. Margaret Fulton, U.B.C. Dean of Women, letter to Nancy Goldsberry, December 15, 1977.
Also, see Brief on Rape and Related Problems of Safety, U.B.C., submitted by the U.B.C. Women's Committee to Student Services Review Committee, February 1978.
27. M. Fulton, op.cit., p.1
28. Joanne Whittlaker, Cowichan Valley Status of Women, letter to Nancy Goldsberry, February 13, 1978.
29. Cleo Reese, phone conversation with Nancy Goldsberry, Wednesday, March 15, 1978.
30. Joan Climenhaga, Supervisor - Human Resources - Prince Rupert, in interview with Nancy Goldsberry, Jan. 31, 1978.
31. J. Hicks, Coordinator, Courtenay Crisis Line, interview with N. Goldsberry, Jan. 20, 1978.
32. E. Eichler, Mental Health Unit, in a phone conversation with N. Goldsberry, Jan. 20, 1978.
33. B. Stevenson, Family Court Counsellor, in a phone conversation with N. Goldsberry, about Jan. 22, 1978.
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35. M. Headley, in a phone conversation with N. Goldsberry, Dec. 19, 1977.
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37. Lu Bristol, Smithers Law Centre, in a phone conversation with N. Goldsberry, about Nov. 30, 1977.
38. V. Napoleon, Assistant Coordinator, Friendship Centre, with Nancy Goldsberry, Feb.1, 1978.
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40. E. Pacholuk, with N. Goldsberry, Feb. 2, 1978.
41. N. Westaway, Richmond Women's Resource Centre in letter to N. Goldsberry, Jan. 24, 1978.
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42. P. Bray, Chairperson, Vancouver Elementary Teachers Association Status of Women, letter to N. Goldsberry, Jan. 25, 1978.
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52. Ibid, p.7.
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54. A Community Response to Rape: An Exemplary Project (U.S. Dept. of Justice: LEAA, 1976), p.12.
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56. J. Vance, National Assister of Rape Centres in Canada, phone interview, March 31, 1978. (The National Assister's position is particularly successful, according to the Health and Welfare Review Committee, and her budget has been doubled for 1978-79 over the preceding year.)
57. Second National Conference of Canadian Rape Crisis Centres (Ontario, 1976) policy statement.
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59. L.Clark and D. Lewis, op.cit., p.195.
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62. B.C. Dept. of Human Resources, Annual Report, 1976, Victoria: Queens Printer, Feb., 1976., as quoted in G. Martin, op. cit., p.29.
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Chapter IX - MODELS FOR BRITISH COLUMBIA

Rape makes no distinctions along political boundaries, and the co-operation of all government units will enhance the effectiveness of the services which the centre(s) can deliver.¹

I feel that by dealing with the subject of rape in the manner I have, that the recommendations herein could be presented. There is ample evidence that there will always be raped or persons otherwise assaulted sexually with us and that the numbers of these persons will increase over the next few years. The reasons for this increase are diverse, but the trend is clear and not abating, regardless of what we say philosophically.

There is no doubt that the whole area of rape has been woefully neglected and is still devalued in many quarters. Many victims of the crime have remained silent and isolated out of fear and ignorance. Even women's groups who, one would think, would be the natural source of grievance and action have, until the last few years, remained silent on the subject.

It is commendable that government, which is so often accused of being bureaucratic and callous to the needs of non-influential peoples, particularly women, in our society has taken on the role of studying the bare bones of a subject long shrouded in myths and notorious falsities.

There are no magic solutions or universal models contained within this brief, but it is believed that the recommendations can ease the "rape of the soul"² so often experienced by rape victims, increase the reporting and convictions of those responsible and provide effective programs for the lessening of these criminal assaults in our province.

We have defined the problems and provided the most up-to-date information used to measure the aspect studied. There are great quantities of written material on rape, much of which has been written in the last ten years and published in the U.S. Because it has been classified a priority problem by the federal government of that country, millions of dollars have been slated for research, rape crisis centres and demonstration projects in the area. In Canada, research and federal government funding of rape crisis centres has been limited to a few short-term or privately sponsored projects. As Gary Martin relates, this may be "due in part to a somewhat jaundiced public image of feminist and rape victims, and a natural reluctance to fund groups which often see opposition to some aspects of the status quo as the major aim".³

It is my contention that it is well to take into account previous and current research and demonstration models proposed and functioning in the U.S., but that the usefulness of these models is limited for us by the fact that there are few proven results, because of the newness of the programs. As well, what we need

are models appropriate to isolated, rural areas, and which take into account the programs already in existence in this province of Canada. It is because of these conditions that a new theory and model is being proposed which is an effort to integrate all aspects of the problem under my mandate.

In our consideration of models specific to the province, we have already indicated that statutory and non-statutory services under the provincial government jurisdiction are not equipped to provide the crisis or the counselling aspects of rape relief. It would also seem that, for the most part, other social agencies are not appropriate to provide most functions carried out by the rape relief centres. As has been noted, ad hoc and crisis counselling functions can be made available, with training programs, in some situations via other social services and crisis centres, but it is the accompaniment, advocacy and long-term contact so necessary in the rape situation that is of particular importance and would best be performed by a group specifically organized to provide such functions.

The educational and legal change efforts are, in the end result, what will change the direction of the rape phenomenon. These efforts are best performed by persons knowledgeable of these problems, who have both the skills and interest to pursue these difficult tasks. Again, the consideration that the rape

relief centres have been formally organized to carry out these functions makes the rape relief centres the appropriate organizations to organize and perform such tasks.

It is concluded that the several functions performed by the member societies of the Coalition of B.C. Rape Centres are needed, and do not duplicate existing governmental statutory and non-statutory services. What has not been determined are the following questions:

- 1) Is it appropriate or necessary for the provincial government to fund the CBCRC?
- 2) Is it appropriate or necessary for the Ministry of the Attorney-General to fund the CBCRC?
- 3) What are the views of service professionals as to the quality of rape relief services provided by the CBCRC?
- 4) What is the role of the CBCRC in ensuring quality control of rape relief services?
- 5) What is the role of the CBCRC in ensuring fiscal responsibility for rape relief services?
- 6) What are the current and optimal funding levels for the CBCRC?
- 7) What is the model that can best be used to expand such benefits throughout the whole of the Province of British Columbia? At what cost?

The cost of rape relief services, even direct crisis and long-term counselling, should not, and in most cases could not, be borne by the clients themselves. Such legislation as the Criminal Injuries Compensation Act have reflected, "the developing acceptance of the concept that those who suffer injury from crime should be compensated by society".⁴ This concept applies directly to the counselling and advocacy and some of the informational aspects of rape relief centres.

Private and corporate donations and project grants have always been a source of small income for rape relief centres but cannot be relied upon to supply a significant proportion of the cost of rape relief benefits. Even such non-profit groups as the United Way and service groups could potentially provide only a small portion of the cost due to the large demands from many valid groups for the limited money available for yearly distribution.

It appears that government public money, on the several levels, are appropriate and necessary sources of funding for rape relief services. As Gary Martin has surmised, "clearly, if the government wants to see the Rape Relief continue to operate, they are going to have to provide the bulk of the funding".⁵

Rape relief centres in B.C. have requested funding from municipal, provincial and federal governments. Municipal governments have responded with small operating grants in the \$2000 to \$5000 range

in a now established yearly pattern. To date, the federal government departments (Health and Welfare, Solicitor General, Secretary of State, Justice) have limited funding to projects of short duration and commitment (research grants, workshops, demonstration projects).

The federal funding proposal Social Services Financing Act (Bill 55) was introduced in the House of Commons on May 12, 1978.⁶ The proposed legislation would provide block funding to the provinces for the development and implementation of social services by the provinces themselves, or to be purchased by the provinces from private and voluntary agencies who deliver social services. Should this bill come into effect, substantially larger amounts of federal financing will be made available to the Province of British Columbia for the provision of social services than under present federal-provincial cost-sharing programs.

Although the determination of the kinds of services would be up to the province, it would be expected that the following might be included as they relate to rape relief functions:

- crisis intervention
- long-term counselling
- information and referral
- social integration
- advocacy
- family support programs

- community preventative services
- community development activities⁷

Whether or not this legislation comes into effect, it is the belief of this researcher that the federal government has a responsibility to provide the means for the operation of rape relief functions in Canada. The pattern of providing "seed money" through federal make-work programs and small grants has, in essences, been an ostentatious show of commitment. Voluntary agencies like rape relief centres have assumed support where none has been forthcoming. The provincial government has been influenced to respond to the public outcry raised when the benefits of social programs sponsored under these grants have been evident and the federal financial support is withdrawn.

It is important that the provincial government investigate and expedite avenues of federal-provincial cost-sharing of such agencies as rape relief centres. Meanwhile, the provincial government is encouraged to maintain its own moral and financial commitment to the fullest capacity possible.

The rape relief centres have, as well, a responsibility to take a greater role in obtaining a share of needed financial support from the federal government and the private sector. A certain naivety has been evident in the funding approaches used by rape relief centres in the past; i.e., funding has been solicited through moral suasion techniques rather than the business approach so necessary for large and long-term investment.

The creation in 1978 of a finance committee within the Coalition of B.C. Rape Centres Society is an encouraging development in this area.

As to the discussion of which provincial ministries should be responsible for the financial and operational accountability of the B.C. rape relief centres, it is my belief that it is in the interest of several ministries to cost-share the financial burden, with one ministry being responsible for primary contact and accountability. The Ministry of the Attorney-General, although their portion of the shared allocations has been small in the past, has been committed in the past two years to maintaining primary contact with the CBCRC. This Ministry has been for the past two years the government ministry party to the contract signed between the CBCRC Society and the Provincial Government of British Columbia. Although there is no particular rationale for this decision, to my knowledge, the very willingness to do so would encourage the continuation of such policy with the approval of the other ministries involved in funding of the CBCRC Society.

As to the role of the Ministry of the Attorney-General in this area of funding involvement, I quote Gary Martin in his 1977 assessment:

- i) Rape Relief provides for the emotional support of victims of crime and this Ministry has in the past expressed a commitment to the welfare of such victims. While this commitment has most often been in the form

of monetary compensations, emotional support and the minimization of the trauma experienced by victims may ultimately be of greater benefit.

- ii) Rape Relief, through its education role, seeks to prevent the occurrence of rape, both through attitude change and preventative education. The prevention of crime is obviously of concern to this Ministry.
- iii) The larger role of the promotion of law reform is also a continuing role of the Ministry.⁸

The Rape Relief para-legal functions of accompaniment, monitoring of rape trials and third-party reporting have been recognized as benefits by the victim, the police and the Crown.

There is sufficiently conclusive evidence that the Ministry of the Attorney-General and, in fact, no one provincial ministry, is prepared to offer in a direct manner the wide range of functions encompassed by the rape relief centres of the CBCRC Society. It can also be concluded that the Ministry of the Attorney-General benefits, as do the Ministries of Health and Human Resources, from the existence of this organization and should therefore be involved in funding the functions previously described.

It has been established that the provincial government, through these several ministries, will remain, at least over the next few years, an important source of funding for the rape relief centres of the CBCRC Society. The degree to which the several ministries should assume the financial burden, proportionately, is a question which needs to be discussed by the Ministry officials responsible for these jurisdictions of public money.

There has been only limited consultation between these Ministries presently involved in funding the CBCRC. Funding involvement and the responsibility for the CBCRC has lacked both definite form and limits, partly, I believe, because of the precedent-setting nature of tri-Ministry involvement in the funding of rape relief services in British Columbia. Contact between the representatives from the three Ministries has often occurred either by request of the CBCRC itself or because specific problems have arisen to necessitate inter-governmental liaison.

It is urged that those Ministries involved designate representatives who can meet at definite points throughout the fiscal period and who can develop appropriate and longer-range policy in regards to CBCRC funding and accountability suitable for each Ministry's guidelines. This development would be valuable in the longer-term, in that inter-Ministerial policy would be consistent with regards to the CBCRC and there would be less responsibility of a unilateral sort falling upon one or two individuals in the Attorney-General's Ministry and the CBCRC.

Attention has been directed to the issue of preventative education about rape, and it is suggested that it is appropriate to anticipate the effects of preventative education in our province. There is no simple formula available for such projections; nevertheless, we have not ignored the indicators that are available.

Public education programs on rape involve two distinct elements - prevention and post-crime. Much of the direct services offered by rape relief centres in the province concentrates on the post-crime effects on individual women clients. This method of rape relief is expensive over time as there will be no end of the clients requiring available services. Although such support functions are necessary at the present time and for some time to come, programs which focus on reducing the future costs of rape need to be considered if the hidden and obvious costs are not to continue to rise in substantial terms.

A repetitive quality is present in the standard rape education programs. Whorf (1940) and Korzybski (1948) have suggested that "we are captives of our language and thought patterns",⁹ to the degree that "we think much as a train runs, on fixed tracks with no opportunity for moving aside - indeed, even little awareness that we are so restricted".¹⁰ Indeed, the present rape prevention programs may or may not be actually preventative; there is no doubt that there are several exclusive and even conflicting theories currently being put forward to audiences in B.C. These conflicting ideas create confusion for the hearers, most of whom are women (a discussion of rape prevention models is encompassed within this brief as suggested reading - Appendix A).

Consistent programs of rape prevention will arise as logical extensions of knowledge on the subject. A good case in point has been the recent development of a unified police and rape

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relief approach to rape assault with the creation of This Film is About Rape program. This project arose as an alternative to the congestion of prevention programs being offered to the same audiences by police and rape relief persons in the province. It took some months of open discussion before the committee of police and rape relief personnel could discover agreed-upon principles and theories on which to base the actual program.

If it can be assumed that young persons between the ages of 14 and 24 are the most important to educate about rape,¹¹ students in schools form a natural audience for such educational programs. The Ministry of Education maintains no policy on rape education programs in B.C. at this time. As Associate Deputy Minister, R.J. Carter, points out "Presently the local school board has responsibility for making decisions regarding materials that are not provincially prescribed".¹² Rape education programs are included in this non-prescribed curriculum material.

The problem which emerges from this policy is that local school boards often have no criteria on which to base decisions on implementation, form or content of such programs. Because of the lack of such information or appropriate precedence, it is a courageous school board that will implement any program at all. It could be argued that it is inappropriate to put the cart (preventative education) before the horse (agreed-upon principles). For this reason, I recommend that the Ministry of

Education become further involved in the policy development of an expanded program of rape education for the school districts of B.C. It is proposed that the Ministry of Education adopt a framework of criteria and resources materials for local school boards to evaluate in their designing of local program solutions. It is further proposed that means and criteria for the funding of such programs and appropriate materials be included in the provincially distributed information. Support for such a development is apparent. The British Columbia Teachers' Federation adopted the following policy as recently as January, 1978:

That the British Columbia Teachers' Federation (B.C.T.F.) develop programs to inform teachers about the issues of rape and sexual assault, particularly as they affect students.¹³

Further, in April 1978, the B.C.T.F. at their annual General Meeting, adopted the following policy directed specifically to the Minister of Education, in his consideration of curriculum development:

That the Minister of Education, in conjunction with the B.C.T.F., immediately develop and implement programs to educate students about rape and sexual assault.¹⁴

Following up the first of its recommendations, the B.C.T.F. sponsored several internal symposiums for teachers to assist them in counselling students on the subject.

Although local school district needs and politics affect who would offer and who will receive rape prevention programs in the schools of the province, the following recommendations

could assist in creating guidelines for such curriculum development and teacher training:

- 1) That the Ministry of Education develop a rape prevention resource package aimed at high school students;
 - a) this package to be developed in conjunction with police, rape relief centres and counsellors who have expertise and experience in previous program planning;
 - b) that serious consideration be given to developing rape prevention programs aimed at both young men and women in the Province of B.C.;

- 2) That the Ministry of Education encourage, and, if necessary, develop in conjunction with the BCTF training materials and symposiums for counsellors and teachers who would utilize the resource materials;
 - a) this training to be developed with and utilize (if available) local police and rape relief centres.

- 3) That the Ministry of Education provide the means and criteria for funding of 1) and 2).

The question of quality of rape relief services in this province can be answered in two parts. One, support letters were solicited and received by the Coalition of B.C. Rape Centres Society in 1977-78 and total some 75 from institutional representatives, service professionals, churches and service organizations.¹⁵ This support comes from a broad sector of the communities in which rape relief centres work and indicates that the need for rape relief is apparent and that the quality of their work is recognized from these quarters.

It has been established that it takes at least a year for a rape relief centre to become established and utilized to a useful degree.¹⁶ Credentials are often synonymous with degrees of specific technical expertise. Rape relief centres are a new concept and workers are largely voluntary and self-trained. Therefore, community and agency recognition is often hesitant and earned only by active but low-key publicity campaigns and liaison with individuals in appropriate institutions and agencies. Word of mouth, as well as the printed word and referrals, provide the necessary confidence (of a different sort than the first) among women who might use the services. Again, knowledge of a rape relief centre's existence and the necessary confidence of its usefulness take at least a year to occur.¹⁷

The first draft of this report was sent out for critical comments to approximately 150 respected persons who have come into direct contact with member Societies of the CBCRC and rape victims in the Province.

This researcher has not, during the study period, encountered any direct negative response to B.C. rape centres. There have been and are a number of misconceptions about the need for and the depth of the rape problem in B.C. and the consequent functions which rape relief centres can or do perform in this respect. As far as can be ascertained, misconceptions about rape itself and rape relief centres in particular are in themselves a *raison d'etre* for the need and existence of rape relief groups in the province and do, as well, indicate the need for widespread appropriate publicity about the problem and possible solutions.

The present and projected role of the CBCRC in ensuring quality control for its member groups is contained in written policy. Who can be a member society is delineated in the CBCRC Society Constitution which specifies that all members must:

- a) promote support and information to persons who have been sexually assaulted;
- b) act as a liaison between sexually assaulted persons, community services and the legal system;
- c) be an educational force for progressive changes in attitudes, laws and in institutional procedures, and work for the prevention of rape; and
- d) cooperate and coordinate work with other groups in the community who deal with the problem of rape and its social implications.¹⁸

The need for each centre to operate as an autonomous unit allows the adoption and implementation of programs and seems to encourage relationships with other agencies and groups sensitive to local needs.

To ensure quality control and provide a standard of rape relief operation for member groups and applying groups, the CBCRC has ratified the following policy:

Member centres (must be Societies) must provide a 24-hour crisis line, answered by female persons trained by the Coalition. These women must provide information about the legal process, the medical procedures and police procedures which a victim of rape/sexual assault is likely to encounter. They must also provide counselling, act as the victim's advocate and be involved in public education work aimed at dispelling prevalent myths for rape/sexual assault prevention. Each centre must take an active leadership role within the community to change the attitudes which surround rape/sexual assault and focus on prevention. Each centre is responsible for creating an effective public education program which conforms to Coalition Constitution/Bylaws and policy and for carrying that program through. Each centre must agree with and abide by the goals and objectives of the Coalition. To become a member of the Coalition, a centre must submit a proposal for membership and it must be accepted by unanimous vote of the Executive Board.19

The rights and duties of member Societies is outlined; the rights and duties of the Coalition Society in respect to its member Societies or fledgling groups in the province is not specific to this same degree. How training programs can be supplied or consultation offered, for instance, is often left up to the discretion of the individuals or committees responsible for those areas or money available in the CBCRC general revenue. The emphasis on decentralizing the Coalition organization, the Coalition's newness as a functioning body and the struggles of each member Society (who are themselves new as organizations and expending energy in meeting local needs) has left all but the most persistent of fledgling rape relief groups in the province dependent on their own resources. It is hoped that the model proposed in the concluding section of this brief will be of value to the CBCRC in the continuing development of rape relief standards throughout the province and providing assistance to interested and fledgling rape relief groups in the province.

Fiscal responsibility for money received and disbursed by the CBCRC is non-problematic. A major stimulus for the creation of the CBCRC Society was precisely the fiscal responsibility for provincial government allocations. In the first year of the Coalition's operation and prior to its becoming a Society, the bookkeeping system was found to be in a dismal state. Dave Stock, an internal auditor from the Ministry of Human Resources, found that "While there was no evidence of wrongful expenditures, the books failed to reveal a complete set of financial transactions".²⁰ It was evident that for a reliable bookkeeping

system to be created and kept accurate, both the CBCRC and the local centres needed technical assistance from outside sources. A Vancouver based small companies groups created a CBCRC bookkeeping system and an internal bookkeeper was appointed by the Coalition. In 1977/78, the CBCRC requested an internal government audit and a financial statement of the books of the CBCRC was prepared and submitted in September of 1978 by the Comptroller-General's office of the Province of B.C.²¹

In July of 1978, with the assistance of a Victoria bank manager, a claim form was put into use as a form of accountability for each rape relief centre to the CBCRC. The claim form is submitted monthly, along with receipts for operating expenses, to the finance committee of the CBCRC, who are then to prepare the quarterly statements of expenses and submit the same to the three ministries who are supplying grants for the fiscal period. Salaries for all staff of the CBCRC are sent out directly from the bookkeeping headquarters in Victoria to each centre and a half-time bookkeeper is being paid in this office to fulfill appropriate duties.

A formal contract outlining both functions and fiscal accountability has been signed between the Justice Development Commission of the Ministry of the Attorney-General for the total provincial allocations to the CBCRC in both the 1977/78 and 1978/79 fiscal years. Budgets have been prepared by the CBCRC finance committee which delineate both maximum amounts to be spent on any one operation expense and by any one member Society.

The balance sheet for the CBCRC for the fiscal year April 1, 1977 to March 31, 1978 indicates revenue at \$135,435. and expenditures at \$130,900.²² A deficit of \$8,168. at the beginning of that year left a deficit of \$3,188. for the Society at the beginning of the 1978/79 fiscal period. No problems were noted in my examination of the comments forwarded to the CBCRC from the Comptroller-General's office although there were items of housekeeping which were recommended to the CBCRC and its member groups to maintain consistency in its financial business.

A central bank account holds funds for the basic staffing and operational expenses of the centres. Each centre may, in addition, fund-raise and spend money independent of the CBCRC. In a previous evaluation, Gary Martin pointed out that "from the point of view of the rape relief centres, this dual form of solicitation is ideal; what cannot be gotten from one level by the Coalition may be obtained from the other by the individual organizations".²³ This situation remains true to some degree but the limits of individual centre donation and grant solicitation became much more defined once the CBCRC became a formal body in 1977.

After the transition period from totally autonomous centre Societies to the CBCRC Society, it became apparent to the local fund-raisers that soliciting money as a provincial body was more effective and could result in larger grants to the general

operations account, thus effectively providing greater benefits to all centres. A central finance committee, composed of representatives from all the centres was created to solicit and make recommendations for the spending of non-earmarked money according to predetermined priorities. This committee is also made aware of local projects or grants received for specific research or capital costs.

It is my opinion that the power of the individual centre societies to fund-raise does not present the potential problem of "misallocation of scarce government resources"²⁴ that was apparent in the earlier evaluation of the rape centres. Federal funds for rape crisis centre functions will, if the Social Services Act comes into effect, be in the hands of the provincial government to be allocated according to the provincial priorities. Corporate and individual donations will no doubt remain only a small percentage of the CBCRC's total resources (in 1977/78, these donations were less than 4% of the CBCRC resources). Special grants for capital costs do not duplicate provincial government grants as there is no provision for necessary capital costs in the contracts between the Province of B.C. and the CBCRC. Project or research grants do not affect general operating expenses or staff requirements of any one centre. In addition, the internal controls of the CBCRC finance committee are at this time in effect and should limit the potential problems of any one centre having duplicate money for expenses otherwise covered by Ministry grants.

It is recommended that the finance committee be responsible to report to the provincial government contacts any major changes in the CBCRC's financial resources which would affect the total money available to the CBCRC in any one fiscal period. It is also recommended that yearly financial statements and/or audits of the CBCRC continue to be forwarded to the provincial government representatives, as well as maintaining the quarterly reports submitted by the CBCRC.²⁵

It has been indicated that the rape relief centres offer services that are otherwise unavailable in this province and the principle has been established that the functions performed by these centres can best be provided under the independent auspices of these community based voluntary groups. The questions of cost are of primary interest to the Ministry in its role as a funding source for these groups.

The task of interpreting and projecting the cost benefits of the rape relief centres cannot be isolated from such factors as:

- 1) a generally heightened awareness and sensitivity to the problems of rape victims,
- 2) an emerging awareness, generally, of the effects of the rape problem in our society, and
- 3) the fluctuating, but generally increasing, rates of reported rapes, arrests and convictions and the subsequent increasing cost for our policing and legal services.

Since it is impossible to quantify the individual impact of those and other variables, we have addressed as fully as possible the entire range of attitudinal and practical variables which characterize the problem.

The fact that the rape relief centres in this province have mobilized and coordinated a changing response to the problem of rape represents, in my opinion, an extremely economical approach. A crude calculation places the average cost of the direct services to the victims at \$277 for a recent period.²⁶ This calculation does not take into account either ongoing cases from any previous period, nor any of the more indirect effects of the rape relief programs such as the preventative capability for dealing with the rape victims.

In addition to the calculated cost, in tangible dollars, of rape relief services, volunteer hours for this same three-month period were 10,127²⁷ and must be valued in terms of dollars saved for unpaid work. The high level of involvement of trained nonpaid workers is calculated to have saved some \$30,381. in minimum wages for this three-month period, or a total of \$121,524. over a one-year period. This figure represents a substantial contribution in women hours which cannot go unrecognized.

It is evident that even with the contribution of volunteers, rape relief staff are overburdened with work. The Polk County, Iowa Rape/Sexual Assault Care Centre, an LEAA (Law Enforcement Assistance Agency) Exemplary Project, was organized to provide

maximum service at minimum cost. That centre has four full-time paid workers plus the needed time of a special prosecutor allocated to all rape cases, as well as a large community based volunteer component. This centre received approximately 100 crisis calls in 1975 in a city of 300,000.²⁸ If we can use this centre as an example, there was one staff per 25 calls for the year, or in another formula, one staff per 75,000 residents.

Vancouver Rape Relief received approximately 300 crisis calls in 1977 in a city of about 1,085,000.²⁹ Using this data in formula, there was one staff per 60 calls for the year, or in another formula, one staff per 215,000 residents.

Using the general guideline of the Exemplary Project, I calculate that Vancouver Rape Relief could reasonably use 12 to 14 staff at the centre. The same formula applied to the other B.C. centres provides the following data:

	<u>Population/staff</u> ³⁰	<u>Crisis Calls 1977/staff</u> ³¹
Nanaimo (Northern Island)	2.2	1.6
Victoria (Southern Island)	3.7	4
Kamloops (Kamloops Census Division)	1.2	1 ³²

That Vancouver Rape Relief, in particular, is understaffed is clearly indicated; the present staff number five, and 12 to 14 are suggested. If the formula is consistent, Nanaimo and Kamloops

are appropriate staffed. Victoria needs 1 1/2 to 2 more staff to accomplish their duties.

I do not believe that the information extrapolated from these two formulas should indicate the absolute requirements of these centres, but it is provided to substantiate rape relief's oft-heard contention that some of the centres are understaffed in their attempt to provide the best service at low cost. It would be desirable to offer a Canadian example from which to extrapolate a formula which could indicate staffing needs of the rape relief centres in this province. No such example is available.³³

I would propose that the Ministry provide a substantial increase in its funding to the CBCRC, the exact amount to be computed in conjunction with the other ministries concerned with funding of the CBCRC. An increase, in total, to 17 paid salaries from the present 10 1/2 salaries would be recommended, applying the two formulas that have been devised.

The member centres of the CBCRC are centralized in four of the more densely populated areas of British Columbia, with one fledgling centre in a more northern, less densely populated area. It is clear that these centres are needed and appropriately placed. It is also true that crisis line facilities, follow-up services and educational programs of a preventative nature must be accessible locally to be utilized. To best approach service

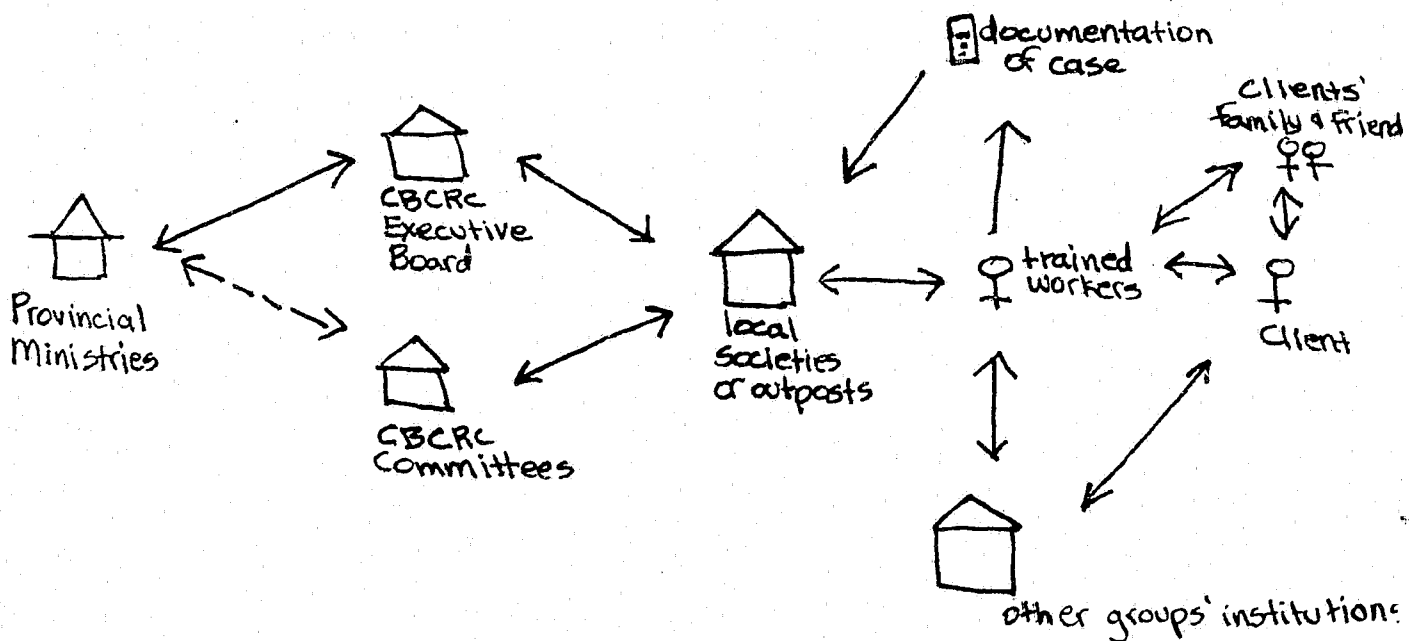
access for persons regardless of where they live in the province, the Country Doctor Model³⁴ is suggested as a concept. The Country Doctor Model best fulfills both the need for mass service and personal service, providing quality at the lowest cost.

Rape relief cannot be site-specific or time-specific if it is to be useful for those who would need it. As well, the need to localize information, inter-agency referrals, volunteer coordination and public education programs would recommend decentralization of rape relief services.

It is also my belief that the human potential to create appropriate structures using local resources must not be circumscribed in our efforts to define the rape problem and possible solutions. It may very well be, for instance, that a group of rape relief workers would work in conjunction with a local hospital in one instance. In another, the groups might be affiliated with a local women's centre; and yet in another share a Human Resources emergency line. All of these possibilities, and any other mix of services, need to remain open to be planned by local residents. As Delilah and Menachem Amir point out, if rape relief is to be utilized "by all rape victims, especially by those suspected to use it the least, while needing it the most, the Centre may be better off an independent of external politics and must be accessible and stable enough to provide continued care".³⁵

Any organizing group of rape relief workers will also have need of resources which can best be obtained from the materials and experience of other related groups. The CBCRC would be a natural coordinating body for such exchange. The CBCRC would also be an appropriate body to control the standards of quality operation and assume the fiscal responsibility for basic centre operations.

Visually, the concept that we are describing could be seen as:



Each of these functional levels can be further broken down into areas of need which can be met within the framework described:

<u>Ministry</u>	<u>CBCRC</u>	<u>Outpost</u>	<u>Client</u>
1) Financial accountability	1) Informational exchange	1) Informational exchange	1) Crisis intervention
2) Service stability	2) Financial stability	2) Agency/institutional liaison	2) Personal service
3) Documentation	3) Policy-making	3) Mass service	3) Advocacy
4) Evaluation	4) Data/research monitoring	4) Volunteer training and coordination	4) Education/prevention program
5) Cost-effective programs	5) Quality control 6) Development of training programs	5) Basic funding	

Needs and responsibilities have been discussed in some detail for all but the centre outposts. It is suggested that the basic criteria devised by the CBCRC for inclusion of new members continue to be utilized and that groups wishing to provide a full-time rape relief operation submit applications to the CBCRC.

It would be recommended that all volunteer based groups who fulfill the basic requirements for CBCRC membership be allocated a basic operational budget to cover such necessary expenses as telephone and answering service with a paging operation. It is further recommended that each rape relief outpost be responsible to hire a local coordinator who would be a primary contact with the CBCRC and whose responsibilities might include the following coordination activities:

- 1) crisis line and followup support services,
- 2) recruitment and training of volunteers,

- 3) public education programs,
- 4) resources and referral services,
- 5) centralizing and collecting statistics,
- 6) workshops for professional persons,
- 7) liaison with RCMP, Crown Counsel, hospital staff, Human Resources workers, Native groups, and
- 8) local fund-raising efforts.

No projection will be made as to the number or placement of rape relief outposts. If any services are to meet local needs, the vision and initiation must also arise locally. The initial commitment and practical solutions should come from women of a specific region or city.

It is vital to provide a route for any developing rape relief group who wishes to obtain the training, resource materials, necessary funding and experience. The route suggested is that of the CBCRC whose relationship to the new groups would correspond with its present functions in an expanded form.

The role of the CBCRC in this respect would be to:

- 1) ensure financial accountability (government) and financial stability (rape relief outposts);
- 2) maintain quality of service for its member groups;
- 3) provide training programs for member groups;
- 4) submit projected budgets to potential funding sources for its member groups;

- 5) provide the means to communicate for its member groups (transportation to CBCRC meetings, resource materials, telephones);
- 6) develop a means to document provincial statistics on rape;
- 7) provide liaison for its member groups with other provincial organizations and governments; and
- 8) create an evaluative procedure for rape relief for member Societies in the province.

A major problem that is contained in the suggested regionalization of rape relief services in the province is a simultaneous Ministry regionalization of funding for community based services. Unless rape relief is placed high on the Ministry's priority list for allocation of funds, rape relief outposts will continually find themselves battling for the few necessary dollars to initiate or to continue a service in the respective regions.

Regional disparities are significant. Advertising that brings response in Vancouver may be inappropriate in Kamloops, for instance. In smaller cities like Kamloops, it may take several years of activity with a focus on public education for high school students before the city's residents begin to seek out the service facilities in any numbers. In larger cities where the residents can use the centre and still feel an anonymity, crisis calls may immediately overwhelm the centre's workers.

The regional disparities indicate an important point. Because a Rape Relief outpost does not receive crisis calls in any numbers does not mean it is not being effective. This factor needs to be born in mind on two levels. One, funding cannot be based directly on the number of cases that any one centre receives, especially in the first few years of activity. Two, any evaluative procedures developed must take this process into consideration.

A constant insecurity of funding does detract from the actual functions that the rape relief group is to perform, absorbing much administrative time of the very persons who are committed to carrying on the primary functions. The very history of the member groups of the CBCRC indicates that much valuable time, both of the paid workers and Ministry staff, is lost in the battle for existence. It has been my understanding that the terms of reference for this report were to prepare and present the information so necessary for Ministry decisions which will affect future directions and funding for the services described. Evidence substantiates that rape relief groups fulfill a role which could become even more effective if funding was not a constant and nagging issue for the Rape Relief Societies.

The CBCRC has directed attention to the valid criticisms that have been obstacles to an unreserved endorsement by this Ministry. Practical procedures have been developed which signify the CBCRC's willingness to cooperate in important areas with the Ministry and which doubtless will benefit the difficult undertaking which the CBCRC has assumed. It is urged that the Ministry give the same

practical attention to the undertaking. Since the Ministry cannot carry on this task itself, the preservation and encouragement of the CBCRC becomes the relevant help that the Ministry can provide.

Wise spending of each dollar of public money is obviously of concern to the Ministry in a time of economic restraint. The CBCRC is only one of many worthy groups that seek Ministry dollars.

During a time when the spending of each public dollar must be carefully considered, a recommended increase in spending in this one area would be frivolous if it were not also clear that the indirect cost to the Ministry will be greater a few years down the road.

It is suggested that serious consideration be given by the Ministry to processing a longer-term contract with the CBCRC than one fiscal year. It was August 1, 1978, before this year's contract was signed between the Ministry and the CBCRC. The fiscal year began April 1, 1978. The very practical considerations of unpaid bills and lapsed staff salaries cannot help but put an edge to an already exhausting job.

It is recommended that a contract of three years would provide a reasonable period of commitment.³⁶ Three years would provide the stability of funding which would allow both the Ministry and the CBCRC to go about their respective business without wasting hours, money and causing unnecessary tension.

A good deal of thought and the expertise of the many people who contributed materials and criticisms has gone into this report. The Ministry has spent many thousands of dollars to allow me the

time to draw upon the experiences of those who are directly affected by the reality of rape in this Province.

Rape makes both men and women peculiarly uneasy. Even to be a woman and writing about rape is suspect. In the public and private mind the subject of rape has been better left shrouded in myth and confusion.

It is largely due to the attitudinal changes that have taken place in the last few years, alone, that a government Ministry commenced a serious examination of Rape in British Columbia. I hope that our labours will not have been in vain and that the findings and recommendations of this report will help to achieve the common goals.

IX FOOTNOTES

- 1) Recruitment letter excerpt, Rape/Sexual Assault Care Centre, A Community Response to Rape (Washington, DC, USA: Dept. of Justice, 1977) p. 11.
- 2) Supra, p. 137 (Chapter VIII, footnote 15).
- 3) G. Martin, Briefing Paper of the 1977-78 Application from the Coalition of British Columbia Rape Centres, March 1977, (Victoria: Min. of Attorney-General), p. 36.
- 4) First Annual Report of the Criminal Injuries Compensation Act of British Columbia, July 1, 1972 - December 31, 1972 (Vancouver, Mitchell Press Ltd., Feb. 28, 1973) p. 1.
- 5) G. Martin, op. cit., p. 70.
- 6) Monique Begin Introduces Bill for Block Funding of Social Services (Ottawa: Health and Welfare Canada Press Release, May 12, 1978).
- 7) The Proposed Social Services Financing Act (Ottawa, Health and Welfare Canada, 1978).
- 8) G. Martin, op cit., p. 76.
- 9) S. Brodsky, "Sex Assault: Perspective on Prevention and Assailants", in Sexual Assault ed. by M. Walker and S. Brodsky, (Toronto: D.C. Health and Co., 1976), p. 3.
- 10) S. Brodsky, Ibid., p. 3.
- 11) See pp. 33, Supra. (Chapter IV - 2nd page).
- 12) R.J. Carter, Associate Deputy Minister, Ministry of Education, in correspondence with N. Goldsberry, May 31, 1978.
- 13) P. Bray, Chair. of Van. Elem. School Teachers Association Status of Women Committee, in correspondence with N. Goldsberry, Jan. 25, 1978.
- 14) P. Roberts, Status of Women. BCTF, in interview with N. Goldsberry, October 6, 1978.
- 15) A list of support letters and/or the letters themselves may be obtained from the Victoria Rape Relief Centre, 1947 Cook Street, Victoria, B.C.

- 16) Rape and Its Victims: A Report for Citizens, Health Facilities, and Criminal Justice Agencies (Washington, DC, USA, Dept. of Justice, 1975) p. 142.
- 17) As an indicator of community confidence, new crisis calls for Vancouver Rape Relief, 1974-78, may be useful:
- | | | | | | | | |
|------|-----|--------|-----|-------|-------|------|------|
| 1974 | 112 | cases; | new | cases | every | 3.25 | days |
| 75 | 185 | " | " | " | " | 1.95 | " |
| 76 | 300 | " | " | " | " | 1.22 | " |
| 77 | 314 | " | " | " | " | " | " |
| 78 | 95 | " | " | " | " | 1.10 | " * |
- * (January 1 - April 15, 1978)
- 18) Coalition of B.C. Rape Centres Society Constitution/By Laws Nov., 1977, found at registered address of S. Dunn, Barr., 933 Johnson St., Victoria, p. 1.
- 19) Minutes of Annual General Meeting of the Coalition of British Columbia Rape Centres Society, July 7, 1978.
- 20) G. Martin, op. cit., quoting Report by D. N. Spock, "Coalition of British Columbia Rape Centres: Report of the Findings of the Evaluation Team", March 4, 1977.
- 21) Memorandum from R. C. Mott, Audit Manager, Victoria Audit Office of the Comptroller-General's Office to R. Hunnisett, CBCRC, File #1020694, August 30, 1978.
- 22) Ibid.
- 23) G. Martin, op. cit., p. 72.
- 24) G. Martin, op. cit., p. 73.
- 25) New Quarterly Reports for 1977-78 indicate all other current grants, special projects, honorariums, and donations made to the CBCRC (Quarterly Financial and Progress Reports, April 1 - June 30, 1978, submitted by L. Lakeman, Vancouver Rape Relief, October 5, 1978, pp. 6-7).
- 26) Ibid., pp. 1, 3.
- 27) Ibid., p. 5 (On call shifts are calculated by dividing the total hours on-call by two. The actual number of volunteer hours is considerably higher).
- 28) A Community Response to Rape, op. cit., p. 12.
- 29) Statistics Canada, 1976.
Vancouver Rape Relief Statistics, 1977.
- 30) Statistics Canada, 1976.

- 31) Calls received per centre in 1977.
- 32) Available statistics only for the last six months of 1977 multiplied by two. This figure may be low as Kamloops re-opened in 1977 after being closed for some months.
- 33) The only long term demonstration grant with an evaluative component is the Ottawa-Hull Centre, under a federal Health and Welfare Demonstration Grant. It involves research and national components which make comparison impossible.
- 34) Acknowledgement for this term goes to S. Crate of Vancouver.
- 35) D. Amir and M. Amir, Rape Crisis Centres: Ideology, Organization, and Delivery of Services (Some Theoretical, Methodological and Policy Considerations), Ottawa: Solicitor General Canada, 1977, p. 23.
- 36) The Health and Welfare funded demonstration Ottawa-Hull Rape Crisis Centre is in the last year of the three-year contract. These longer-term contracts are also true of USA-LEAA funded rape/sexual assault crisis centres.

Appendix A - Women Who Don't Get Raped

Every man I meet wants to protect me. Can't figure out what from.

Mae West¹

Once in a Cabinet, we had to deal with the fact that there had been an outbreak of assaults on women at night. Once minister...suggested a curfew; women should stay home after dark. I said 'But its the men who are attacking the women. If there's to be a curfew let the men stay at home, not the women.'

Golda Meir²

I have dealt primarily, in this brief, with the victims of rape and the attitudes surrounding rape which affect how others view this "victim". I have hypothesized and documented that all women and children and some men are "legitimate objects"³ of sexual aggression.

A considerable amount of space in this brief has been devoted to substantiating the concept that rape reveals more about the place of men and women in our society than any facts about who does what to whom under particular circumstances.⁴ It has only been within the last few years that sociologists and public agencies have begun to acknowledge what feminists have been saying for years -- that in order to solve the problem of rape we must first view rape within the historical and cultural framework of the society.

Some anthropological studies have been revealing in this area. Dr. Margaret Mead, in her study of the Arapesh people of New Guinea, found that rape is practically unknown. The Arapesh concept of human nature does not include the possibility of rape. The people's value nurturance models in both men and women and are essentially cooperative with no concept of private property.⁵ Among the Murio people of India there is also no sexual coercion; sexual activity between the young is, on the other hand, an accepted and formalized way of life for these people.⁶

A review of other literature shows that among the Mundurucu Indians of Central America, where the culture is strongly male

orientated, that gang rape is used to punish women who transgress their social roles.⁷ A review of materials indicates that a number of tribal groups use rape for precisely the reasons stressed by feminists in our culture -- to punish women and to enforce property rights.⁸

We have documented that rape is not exclusively the act of sick or sadistic men. Indeed, rape can be seen as "an extreme acting out of qualities that are regarded as super-masculine in this and many other societies: aggression, force, power, strength, toughness, dominance, competitiveness"/.⁹

Sexual behavior is one area where the notions of masculinity are acted out. It is my hypothesis that many men are raised to separate sexual desire from loving, caring feelings. Because of this learned schizophrenia, many men learn to regard women as sexual objects, rather than as human beings. One rapist who examined his feelings in an interview with Jack Fremont said "It was a difficult thing for me to admit that I was dealing with a human being when I was talking to a woman". After she requested that he not hurt her. "All of a sudden it came into my head, my God, this is a human being."¹⁰

The material on cultural views of rape and sexual behaviour supports the hypothesis that "if men were not taught to separate sexual feelings from feelings of warmth and caring, rape would be unthinkable, and fewer men would impose their sexuality on unwilling women in other less extreme ways, too."¹¹

Some rehabilitation programs in prisons which house convicted rapists have initiated practical models which are cause for thought in the development of:

- 1) new male models.
- 2) improved social and communication skills.
- 3) improved heterosexual-heterosocial skills.¹²

As has been noted, very few rapists (perhaps 7%)¹³ are actually convicted of rape in Canada and the resocialization programs in Canada are still experimental and few in number. I do not believe that prison sentences alone will rehabilitate rapists not to rape when they are released. If we are to have any hope for a real change in the Canadian male attitudes which perpetuate rapes we must develop programs which will affect greater numbers of males, particularly in their formative years.

As Golda Meir suggests, women cannot be totally responsible for the prevention of rapes. Nearly all sexual attacks on women, children and men are by men. I would agree with Lorene Clark who points out:

the old concept of 'real rape' and the concepts and attitudes which underlie it, lead to the belief that rape is an inevitable reality of human life a natural liability given the aggressivity, dominance, and uncontrollable or insatiable sexuality of the male. But rape is not a 'natural' fact; it is a social fact, a product of a particular kind of social relations, based on concepts of sexual inequality and the legitimacy of sexual coercion.¹⁴

It becomes clear that rape prevention programs have to be developed and provided for men as well as women. Again, only few rape re-education programs to date have been directed towards men as well as women. Briefly, we will note a few examples.

One small but positive step in the area of rape re-education in B.C. began in the Victoria School District in the fall of 1977. An agreement was made between Victoria Rape Relief, the Victoria School Board and local school counsellors to distribute the booklet, Towards An Understanding of Rape to all senior secondary students, grade nine and older.¹⁵

Along with the distribution of this booklet, high school family life counsellors and Rape Relief workers provide discussion periods with the young men and women (usually in separate groups) to answer questions and raise awareness of the implications of sexual assault in its several forms.

It is too soon to know the usefulness of such a program; other school districts are looking with interest at this plan for their own local schools.

It is evident that prevention programs have also to be initiated at the community level, in many cases. Two interesting examples of men taking the initiative in this area are the Men Organized Against Rape (Moar) in Philadelphia, Pa., and the Santa Cruz Men Against Rape whose foci are:

- 1) manning a hot line for male friends or family of rape victims
- 2) providing educational material on how male friends and family can support a raped person through the crisis period,
- 3) initiating training programs for other interested groups;
- 4) confronting rapists about their actions.¹⁶

A man from the Santa Cruz group says:

If a woman wants us to do a follow-up on a confrontation, we will. We wait a couple of weeks and then go to the guy's house. The guy usually admits that the incident took place but says, 'It wasn't rape'. We tell him,

'using force, doing something to a woman against her will is rape. It's up to you to stop, not to press the unfair advantage of size, strength or skill. Men are responsible for rape, not women'.¹⁷

The men's group in Santa Cruz works closely with the Women Against Rape group. The men's group has found in its counselling of male relatives or friends of a raped woman that:

Often, a man wants to take over the rape as his own problem. We tell him that the rape didn't happen to him and that the woman has to make her own decisions. The man has to realize that his role is to provide the woman with support and care that she needs, not to take charge.¹⁸

At this time, support groups for the relative and friends of rape victims are virtually non-existent in B.C. or elsewhere in Canada. Several Rape Relief Centres have made arrangements through personal contacts or male social workers to have an available support person for a male friend or relative of the victim.

There is, I believe, a need for a built-in support system for male friends and relatives of rape victims. Often, Rape Relief workers are seen as the woman's support system, only, by male relatives or friends. The male may, as well, feel uncomfortable sharing his concerns with a worker who is a woman. I would propose that men's groups be created as auxiliary to Rape Relief centres and that these men be involved in training specific to Rape Relief. This "auxiliary" could be a source or referral for the Rape Relief workers who have men desiring information and support when a woman friend or relative has been raped, a male has himself been attacked, and to assist in community education programs of a preventative nature.

It has been noted that rape may well be learned behavior, that definitions conducive to violence are learned and that our culture condones the use of physical aggression and violence under certain circumstances. That this aggressiveness, if not open violence, is nearly exclusive to men in our society has also been substantiated as the norm, and not the exception.¹⁹ It has also been hypothesized and documented that those who do rape may see themselves as lacking the very attributes to which they ascribe (heterosexual conquest, power, super-masculine qualities).²⁰ Rape may then be seen as the means to attain these qualities and not the end in itself.

Rooted in the same social structure that characterizes male sexuality as aggression is the process which molds and legitimizes the role of women as victims. In the process of learning female roles, young girls are taught to value sexual favours as an "item of exchange". Built into this role are the conflicting requirement of attractiveness and unavailability to men. Not surprisingly, many women give off ambiguous messages when faced with a sexually aggressive man.

While men are expected to initiate sexual overtures, women are seen as responsible for defining how far these overtures will go. Young women, particularly, with apparent sophistication, but limited skills, are left with an unsolvable conflict. If she refuses, she is a manhater, cold or a prick tease. If she plays along, further confusion sets in as she is open for further advances. Mutual misunderstanding and patterns of sex-specific role behaviour circumscribe the behaviour of the woman, as well

as of the man in these circumstances. Factors such as a personal relationship between the parties only serves to complicate thinking and actions.

As men are conditioned to be rapists, women are conditioned in our society to be rape victims.²¹ Symonds notes that even the word victim has unpleasant associations and that the word victim originally meant a beast selected for sacrifice, and is intimately tied up with the concept of the scapegoat. He says that the sacrifice of the victim or the exclusion of the scapegoat would symbolically make the rest of the community safe from harm. When the victim was a person it had, with few exceptions, to be someone young and very pure or someone very old or a stranger.²²

In relating this line of reasoning to that of women as rape victims, he says, "if you act good nothing bad will happen to you. Therefore, if something bad does happen to you, you weren't acting good. If you act right nothing will happen; something wrong happened, therefore you weren't acting right."²³ Societal blame of the rape victim for "allowing" the event to occur (and even the reaction of the rape victim herself) may well be understood in light of this theory. The truth of the matter is that even "good" women can be raped and may even be the most obvious victims since they are ill-prepared and consequently vulnerable to attack.

Women are inundated from all sides with the glorification of female vulnerability. As men are trained to the super-masculine, women are trained to the super-feminine. Contrary to what a few

authorities say about rape, feminine traits like submissiveness, passivity and weakness may make women more subject to rape.²⁴ This is not to say that strong and assertive women cannot be raped. In many cases, though, the rape victims seems to have been unduly intimidated by rapists because they are used to behaving submissively towards men, used to thinking of themselves as weak and of men as strong.

Women are given much advice to avoid being victims of rape. The usual approach is to instruct women in avoidance (don't dress in a certain manner, install dead-bolt locks, don't go out alone at night).

There are several problems with this self-protection approach. One, women may be given a false sense of security; these instructions cannot deal in any adequate sense with what are called acquaintance or date-rapes (which are the majority of rapes, by all indications).

Many women would agree with Susan Brownmiller who writes:

While the risk to one potential victim might be slightly diminished.....not only does the number of potential rapists remain constant, but the ultimate effect of rape upon the women's mental and emotional health has been accomplished even without the act. For to accept a special burden of self-protection is to reinforce the concept that women must live and move about in fear and can never expect to achieve the personal freedom, independence and self-assurance of men.²⁵

In no sense would I discourage every woman from taking all reasonable (and perhaps some unreasonable) precautions for safety. But I would argue that rape prevention of this nature can hardly be considered to be sufficient and may indeed be misleading.

The second approach to rape prevention for women is advice on what to do if attacked. Shirley Jones, in the film Lady Beware, summarized her advice in a simple formula: Security, Avoidance, Flee, Engage.

Women are told by some authorities to acquiesce to the rapist so as to save their lives, if not their physical well-being. Symonds calls this advice passive resistance and comments:

These patterns of resistance, which essentially are reluctant acts of submission, are wholly dependent on the rapist's sense of relatedness to the victim's need to inhibit his behaviour. While there have been reports of incidents in which these responses have worked, generally they fail to stop the rape, and instead of making the rapist feel guilty, they often make him angry. ²⁶

In a study done by Brodsky, rapists saw these submission techniques as the least effective and made such comments as, "these are things a rapist gets off on. He usually seeks domination and these things bring out domination", and that, "any pleading would only increase my urge". ²⁷

Again, in certain situations, a passive technique will work (particularly with aggressive, highly assaultive rapists) and I would not discourage women who feel this might be their only form of resistance. Any individual woman is the best judge of her own capabilities in a terrifying situation. In many situations of fear women freeze and the only avenue open is passive resistance.

Three major problems with this particular reaction are:

- 1) the resulting guilt, self-doubt and anger are more apparent in women who submitted to a rapists demands;
- 2) the law still places standards of "lack of consent" on rape and if the victim did not resist she is often seen as having consented; and
- 3) the statistical chances for not being raped using this resistance are low. 28

Other authorities recommend various psychological ploys to distract a potential rapist. This method of distraction may include initial passive resistance, fabrication of lies (my brother will be home any minute, I have V.D.), changes in behaviour to surprise or confuse the rapist.

A difficulty with this form of resistance is that it requires the chosen victim to keep or regain a cool head and be a good actress. This method may or may not work, depending on the woman's effectiveness at playing a chosen role and the rapist's desire to believe or disbelieve her story or actions. The very real danger is that the woman will not be believed and further anger the attacker. The second problem with this method is that many women find it difficult, if not impossible, to keep or regain a cool head unless they are mentally and emotionally practiced in facing frightening situations.

All of the various pieces of rape prevention advice are useful to one woman or another, but advice can be misleading and potentially dangerous if any one form of advice is believed to be The Answer: Each person must have information and put some thought and practice into safety measures that suit her own needs and feelings.

How do some women prevent themselves from being raped? A number of studies have been done which suggest that a woman's best strategy is to resist an attacker.²⁹ James Selkin and colleagues have designed studies to test hypotheses about differences in emotional response between rape victim and rape resisters during the assault or attempted assault and differences between victims and resisters on a standard personality test (CPI).³⁰ These behaviors and emotional responses have been compared with the tactics and needs of rapists. Selkin cautions that the concepts outlined are restricted to one-to-one stranger-to-stranger rapes.

Stranger-to-stranger rapes follow a clearly identifiable sequence which can be broken down into successive stages. We summarize the sequences as follows:

- 1) target selection
 - a. vulnerability of potential victim
 - i. physical environment (woman alone, easy access)
 - ii. her potential for self-defense and mental alertness
- 2) testing victim
 - a. can she be intimidated? Two approaches...
 - i. terrorization by weapons or threats.
 - ii. woman as helper (rapist requests directions, use of telephone)
- 3) intimidation
 - a. punishment for not cooperating with his request
 - b. reward for cooperating with his request
- 4) sexual transaction
 - a. "fantasy" acted out
 - b. rapist's needs in conflict
 - i. intimacy vs. concealment
 - ii. control vs. affection
 - iii. sexual gratification vs. contempt

- 5) finish
 - a. threat or apologize ³¹

Dr. Selkin points out that, "the intimidation stage of the rape event is the fulcrum on which is balanced the consequent events".³² He also makes it clear that, "intimidation is the rapist's stock in trade, a necessary precondition to rape",³³ and concludes:

My clinical experience in treating rapists and their victims, and my study of sexual offenders and their prey, suggests that a woman's best strategy is to resist, to refuse to allow her attacker to intimidate her.³⁴

From another study, Jerrold Effstein reports:

According to our research, in 100% of the cases in which the woman successfully repelled or escaped from the assault, there was one common element: resistance by the attacked woman; whether the making of noise or physical resistance or a combination of the two. No one that we could find got free by compliance with the attacker.³⁵

James Selkin and his colleagues, at the Violence Research Unit of the Denver General Hospital, tested victims and resisters and discovered that:

Resisters obtained higher scores on social presence and socio-ability variables, both related to smooth and effective functioning with other people in social situations. Resisters also earned high scores on communality, dominance scales, scores related to assertiveness, confidence and capability for appropriate behavior in group settings.³⁶

The researchers found that:

Victims saw themselves quite differently during the assault. They described themselves as emotionally paralyzed. Their reactions were submissive and subdued. Alternately they described themselves as more anxious and depressed. They obtained lower scores on traits of dominance and sociability indicating that they were less assertive and felt more awkward in their dealings with other people in a variety of social settings.³⁷

Resisters reacted to the potential rapist with anger, action and noise. Victims described themselves as frightened and immobilized.³⁸

The best time to react, if we utilize the target, selection, testing and intimidation scheme is at the point of testing or intimidation. Immediate reaction is important; playing along and then responding may be quite dangerous as the rapist's anger, rather than his fear, may be aroused.

Unless a woman is quite skilled in physical self-defense it is not likely that she would physically resist a person with a weapon.

Verbal resistance can be in several forms. Stanley Brodsky suggests the following, out of a study utilizing responses to pretaped video scenes of a potential rape scene:³⁹

If the rapist approaches with great verbal or suggested physical aggression or antagonism, then crying, signs of weaknesses, protests about body difficulties, and open exhibition of great personal distress may be useful. For these men there is a much lower success likelihood for active, verbal resistance. On the other hand, for the men who are highly tentative, relatively more polite, and who have preceded the actual rape threat with a number of preliminary conversations and tentative judgements about the woman, then the woman may be well advised to try active rejection and verbal or physical attack. These results are consistent with Selkin's report (1974) that explicit unavailability, communicated from potential victim⁴⁰ to assailant, is an effective rape prevention method.

Women may try several responses, until one works. The distraction of conversation itself may stall or dissuade the designing rapist. The tone and volume of voice, physical postures and amount of confidence given as subtle messages may also be

essential. If a woman is telling a lie, it is important to be convincing, as an obvious lie may bring anger, rather than sympathy from the rapist.

Obviously all of this information is not as meaningful as any one specific situation. Clearly, too, it is no use to suggest any particular action as a general statement to all women. Each person must evaluate her possible responses to potential rape situations by considering what response she usually makes to crisis situations.

We have discussed the concept of victimization and referred to the societal processes that before, during, and after a rape incident render a woman defenseless. It does seem, that in many cases, women become victims of rape assaults because they have been trained to act submissively. The fact that one man, Richard Speck, with one knife, was able to bind up eight nurses with bedsheets and then take them from the room one by one, strangle and slash them, lends credence to the idea that women are culturally conditioned to be exploited.

It follows that women must individually and collectively make every effort to eradicate the myths that perpetuate women's victimization. It appears that specific programs of assertiveness training, emotional and physical self-defense need to be offered in a wide variety of settings for women. Dr. James Selkin says,

The results do suggest that attitudinal shifts on the part of potential victims can be one significant approach to the task of reducing the incidence of rape. Indeed, a comprehensive approach to the problem of rape reduction may well require the development of organized efforts to train women to be rape resisters.⁴¹

One immediate remedy which I would suggest is an improvement in physical training for young women in high schools. These young women, as we have seen, are particularly vulnerable to rape attacks and need both a mental and physical presence of mind to deal with the present reality. It could be hypothesized and hoped that a generation of women who are stronger, more self-assured and assertive would be less vulnerable not only to rape, but to other kinds of abuse.⁴² Emotional and physical training might also alter the attitudes towards women that foster the feelings of some rapists that they can get away with such behavior towards women.

APPENDIX A FOOTNOTES

1. Mae West, quoted in Forcible Rape, ed. by Chappell, Getz & Getz, (New York Columbia University Press, 1977) p. 54.
2. Former Israeli Prime Minister Golda Meir, quoted in A. Medea & R. Thompson, Against Rape (N.Y.: Farror, Strauss & Giroux, 1974) p. 59.
3. S. Klemmeck & D. Klemmeck, "Social Definitions of Rape", in Sexual Assault, ed. by M. Walker & S. Brodsky (Toronto: D.C. Health, 1976) p. 136.
4. See Chapter 1, supra.
5. M. Mead, Sex & Temperament (1950), p. 104.
6. A. Rosenblum & Leah Jackson, The Natural Birth Control Book, Appendix A, Translation & reprint of article by G. Troeller & C. Deffarge in The German publication Stern (August 1972), (Boston: Tas Publications, 1974), p. 113.
7. R.F. Murphy, Social Structure & Sex Antagonism, vol. 15 (1959) pp. 89-98.
8. For review of some literature see:
S. Brownmiller, Against Our Will: Men, Women & Rape (New York: Bantam Books, 1976), p. 313-319;
Getz, "Forcible Rape - An Introduction" in Forcible Rape, op. cit., pp. 30-34.
9. D. Russell, Politics of Rape, The Victims Perspective (New York: Stern & Day, 1975) p. 260.
10. J. Fremont, quoted in D. Russell, Ibid., p. 264.
11. D. Russell, Ibid., p. 264.
12. See, for instance:
A Pacht, "The Rapist in Treatment: Professional Myths & Psychological Realities, in Sexual Assault, op. cit., pp. 91-98.
G. Akel, E. Blanchard & J. Becker, "Psychological Treatment of Rapists:", in Sexual Assault, op. cit., pp. 99-116.
"Hope for Inmates with Sexual Problems", Liaison, vol. 3, 2 (Ottawa: Solicitor General Canada) pp. 13-14.
Lisa Hobbs, "Rape Not a Sex Crime Claims Matsqui Inmate", Liaison vol. 3 - #11 (Ottawa: Solicitor General Canada) pp. 7-8.
Fort Stellacoom Hospital Treatment Program, Washington State Prisons, U.S.A.
13. Supra, Legal System, p. 2, (my p. 107).

14. L. Clark, "Rape in Toronto: Psychosocial Perspectives on the Offender", in Sexual Behavior Canada, Patterns & Problems, ed. by B. Schlesinger (University of Toronto Press, 1977) p. 192.
15. Initial investment for booklets paid for by Local Initiatives Program Grant with subsequent purchases to be made by the Victoria School District at bulk rates.
16. MOAR documented in Rape & Its Victims, A Report for Citizens, Health Facilities & Criminal Justice Agencies (Washington, DC: U.S. Dept. of Justice, 1975) p. 126.
Santa Cruz Men Against Rape documented in Kinesis (Vancouver Status of Women News, fall, 1977) p. 7.
17. Kinesis, Ibid. p. 7.
18. Ibid., p. 7.
19. Supra, p. 13 (Chapter I)
See, as well:
V. Rose, "Rape As a Social Problem: A By Product of the Feminist Movement: Social Problems, 25:1, pp. 78-79.
A. Dworkin, "The Rape Atrocity and the Boy Next Door" in Our Blood (New York: Harper & Row, 1976). (She notes that the Institute for Sex Research, in a study of rapists found that, ".....indeed, their heterosexual adjustment is qualitatively well above average." p. 34.
20. See for instance:
Lynn Curtis, "Rape, Race & Culture: Some Speculations in Search of a Theory," Sexual Assault, Ibid., pp. 122-123.
Lorene Clark & Debra Lewis, Rape, The Price of Coercive Sexuality, (Toronto: Women's Press, 1977), p. 130.
L. Clark, Rape in Toronto: Psychological Perspectives on the Offender, in Sexual Behavior in Canada, Patterns and Problems, ed. by Benjamin Schlesinger (University of Toronto Press, 1977), p. 186.
D. Chappell, R. Geis & G. Geis, Forcible Rape, "Introduction," (New York: Columbia University Press, 1977), pp. 26-30.
N. Gager & C. Schurr, Sexual Assault: Confronting Rape in America, (New York: Grosset & Dunlap, 1976), pp. 214-219.
21. See for instance:
C. Calvert, "Rape, What Do Women Really Want?", Mademoiselle, March, 1974.
M. Symonds, "The Rape Victims: Psychological Patterns of Response," The American Journal of Psychoanalysis, 36:1, pp. 27-34.
M. Symonds, "Victims of Violence: Psychological Effects & Aftereffects", The American Journal of Psychoanalysis. 35, pp. 20-23.

S, Klemmack & D. Klemmack, "The Social Definition of Rape", in Sexual Assault, op. cit., pp. 135-147.

A. Media & K. Thompson, especially Chapters 4 & 5.

S. Brownmiller, op. cit., p. 343.

S. Griffin, "Rape: The All-American Crime, in Forcible Rape, op. cit., p. 58-60.

D. Russell, "Rape & The Feminine Mystique", in The Politics of Rape, op. cit., pp. 266-275.

K. Weis & S. Borges, "Victimology & Rape: The Case of the Legitimate Victim", Issues in Criminology 8-#2, pp. 94.

22. M. Symonds, "Victims of Violence", op. cit. p. 21.
23. M. Symonds, op. cit., p. 21.
24. M. Symonds, "The Rape Victims....." op. cit., p. 32.
J. Selkin, Behavioral Analysis of Rape, op. cit., p. 5.
D. Russell, op. cit., p. 268.
25. S. Brownmiller, op. cit., p. 449.
26. M. Symonds, The Rape Victims: Psychological Patterns of Response, op. cit., p. 32.
27. S. Brodsky, "Prevention of Rape: Deterrence by the Potential Victim" in Sexual Assault, op. cit., p. 87.
28. M. Symonds, op. cit., p. 32.
Brownmiller, op. cit., p. 403.
Self Defense for Women (Palo Alto, Ca: National Press Books, 1972) p. 2.
29. Stanley Brodsky, "Prevention of Rape: Deterrence by the Potential Victim", in Sexual Assault op. cit., pp. 75-90.

Bay Area Women Against Rape, "Rape Prevention Tactics & Advice on What to Do If Your are Raped", in The Politics of Rape by D. Russell, (New York: Stein & Day, Publishers, 1975), p. 294-302.

Sue Lenaerts & Christine Muphey, "Why Women Need Self-Defense- A Theoretical Discussion", reprinted in National Rape Crisis Centres Newsletter, 1977.

D. Russell, Politics of Rape, op. cit., p. 276-293.

James Selkin, Protecting Personal Space: Victim and Resister Reactions to Assaultive Rape, (Denver General Hospital Violence Research Unit, 1976).

- J. Selkin, "Rape", Psychology Today, January 1975, pp. 10-76.
- J. Selkin, Behavior Analysis of Rape (Denver General Hospital).
- Joanne Ranson & Jane Howell, Social & Health of Rape: A Review of the Literature & Feasibility Study, (United Way: Vancouver, 1977), pp. 54-57. (Alcohol and alertness)
- S. McKinley, S. Graff, E. McCrate, Fighting Back: A Self-defense Handbook (Columbus, Ohio: War Against Rape, 1977).
- M. Symonds, The Rape Victim: Patterns of Response, op. cit.
30. J. Selkin, Protecting Personal Space: Victim & Resister Reactions to Assaultive Rape, op. cit., p. 5.
31. J. Selkin, Behavioral Analysis of Rape, op. cit., pp. 3-13.
32. J. Selkin, op. cit., p. 9.
33. J. Selkin, Rape, op. cit., p. 71.
34. Ibid., p. 71 (emphasis my own).
35. J. Effstein as quoted in D. Russell, Politics of Rape, op. cit., p. 285.
36. J. Selkin, Protecting Personal Space, op. cit., p. 10.
37. Ibid., p. 11.
38. Ibid., p. 10.
39. Responses were tallied from convicted rapists, rape crisis centre workers & staff members at a mental hospital where the rapists were held.
40. S. Brodsky, "Prevention of Rape: Deterrence by the Potential Victim" in Sexual Assault, op. cit., p. 88.
41. J. Selkin, Protecting Personal Space, op. cit., p. 12.
42. The limitations of this report exclude the investigation of other forms of assault specific to women. Wife-beating, for instance, is a subject of much concern in B.C. The similarities of the violence of rape outside of marriage, and physical & sexual violence inside the family unit needs further examination -- only briefly touched upon in this brief. For current material on wife-battering consult such recent material as:

Family Violence Proceedings from Symposium (Vancouver United Way, August 1977)

Wife Battering: A Review & Preliminary Enquiry Into

Local Incidence, Needs & Resources (United Way:
Vancouver, September 1976).

Del Martin, Battered Wives (San Francisco, Calif:
Glide Publications, 1976).

43. D. Russell, op. cit., p. 272.

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