

SEXUAL ASSAULT INFORMATION PACKET

RESILIENCE
ADVOCATES FOR ENDING VIOLENCE™

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Sexual assault can happen to anyone, regardless of age, gender, race, sexual orientation or socioeconomic status. In this packet you will find information and resources you can use to learn more about rape and sexual assault. Remember, no one deserves to be sexually assaulted.



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Defining Sexual Assault

What is sexual assault?

A sexual assault includes any kind of unwanted sexual contact - contact that is physical, verbal, or gestures- that are done without the willing, able consent of both parties. Sexual assault is a broad term that encompasses everything on the continuum from unwanted sexual advances (sexual harassment) to rape.

For survivors of sexual assault there is no kind of sexual violence that is easier to deal with than another. All are shocking, hurtful, and life changing. Whether the victim was attacked by a stranger, manipulated by a trusted family member, or whether it was rape or sexual harassment, each individual suffers pain.

We believe sexual assault survivors deserve to be believed, to have their feelings validated, and to know that they are never to blame for another person's actions. The survivor is never responsible for the assault.

Pinpointing Responsibility

A pervasive and devastating myth about rape is that the victim is in some way responsible for the crime. We have often heard people say, "What were they doing out alone?" or "They shouldn't have been drinking" or "They shouldn't have been wearing those clothes".

The reality is that the perpetrator is responsible for the sexual assault. Sexual assault is not a natural consequence for going out alone, drinking, or wearing certain clothing. Survivors should be blamed no more than banks should be blamed for bank robberies because they intentionally keep a lot of money in their vaults.

The myth that most perpetrators are strangers to their victims keeps most survivors from recognizing the dangers closer to home. The sad truth is that most sexual assault victims (83%) are assaulted by someone they know and believe to be trustworthy. Forty percent of sexual assaults occur in the victims' homes where they believe themselves to be safe. Every person can be a potential victim regardless of age, appearance, race, gender, or socio-economic class.

Rape: Unwanted, completed vaginal, oral, anal, or object penetration by force or threat of force and without consent. This includes situations in which you are too intoxicated to give consent. A perpetrator of rape may be a stranger, an acquaintance, or even a friend or spouse.

Sexual Assault: Any sexual touching (i.e., kissing, fondling, groping) however slight, with any object, without effective consent.

Sexual Harassment: Unwanted and unwelcome sexual behavior (words or conduct) that offend, stigmatize or demean a person on the basis of gender.

Stalking: Being repeatedly followed, watched, phoned, written, e-mailed, or contacted in other ways that seem obsessive and make another person afraid or concerned for their safety.

Acquaintance Rape: A sexual assault by an individual known to the victim. Another term "date rape" is a sexual assault by an individual with whom the victim was 'dating' relationship and the sexual assault occurs in the context of this relationship. These types of rape are always coercive in nature.

Domestic Violence: Is a pattern of physical, emotional, verbal, and/or sexual abuse, which includes, but is not limited to; threats, intimidation, isolation, and/or financial control. It is used by one person as a means to harm and exert power and control over another person in the context of an intimate partner relationship.

Many people believe that sexual assault is only committed by men against women. The majority of sexual assaults are perpetrated by men, but the fact is that 1 out of 4 men have experience some form of sexual violence involving physical contact in their life time. Victimization can also include childhood sexual abuse. Because our society fails to see that men can be victims, men often have a difficult time accepting their on victimization and delay seeking help and support.

<https://www.cdc.gov/violenceprevention/pdf/SV-Factsheet.pdf> 2019

Anyone can be a perpetrator. They may be a stranger, an acquaintance, a lover, a partner, or a date. Most of the time, the perpetrator of the assault knows the victim.

Who can be a victim of sexual assault?

Anyone can be a victim of sexual assault regardless of age, gender, race, sexual orientation or socioeconomic status.

Although it is more common for women to be victims, approximately 1 out of 4 men have been sexually assaulted at some point in their lifetime.

44% of lesbian women, 61% of bisexual women, and 35% of heterosexual women experienced rape, physical violence, and/or stalking by an intimate partner in their lifetime. 26% of gay men, 37% of bisexual men, and 29% of heterosexual men experienced rape, physical violence, and/or stalking by an intimate partner at some point in their lifetime. 1 in 2 trans/non-binary individuals experience sexual assault at some point in their lifetime.

<https://www.nsvrc.org/about-sexual-assault>

What is Consent?

Consent is based on choice.

Consent is active not passive.

Consent is possible only when there is equal power.

Giving in because of fear is not consent.

Going along with something because of wanting to fit in with the group.

Being deceived or feeling bad is not consent.

If you cannot say "no" comfortably the "yes" has no meaning.

If you are unwilling to accept a "no", then "yes" has no meaning.

-source unknown

What is Consent?

Consent is an agreement that two people must make if they want engage in a sexual act. Legally speaking, for two people to have sex, they both have to agree to it; a voluntary, verbal positive affirmation that they both want to engage at this time. It includes positive cooperation and an exercise of free will. A current, or previous dating or marital relationships IS NOT sufficient to constitute consent. Consent is active, engaging, and unmistakable; consent and submission are not the same. Because someone may submit to a sex act does NOT mean that consent was given. If someone was sexually assaulted and did not fight during the assault, that does not mean the person gave consent.

All partners need to be fully conscious and aware.

The use of alcohol or other substances can interfere with someone's ability to make clear decisions about the level of intimacy they are comfortable with. The more intoxicated a person is, the less they are able to give conscious consent.

All partners have equal power in the relationship.

The decision to be sexually intimate must be without coercion. Both partners must have the option to choose to be intimate or not. Both partners should be free to change "yes" to "no" at any time. Factors such as body size, previous victimization, threats to "out" someone, and other fears can prevent an individual from freely consenting.

All partners clearly communicate their willingness and permission.

Willingness and permission must be communicated clearly and unambiguously. Consent is not the absence of the word "no."

All partners are positive and sincere in their desires.

It is important to be honest in communicating feelings about consent. If one person states their desires, the other person can make informed decisions about the encounter.

Keep these points in mind...

1. A "NO" answer means "NO".
2. Remember you or your partner can change "yes" to "no" at any time.
3. If someone is passed out or is highly intoxicated/disoriented/groggy and can't give their consent and you have sex with this person, you will be committing sexual assault.

What is Consent?

Consent cannot be given if:

- An individual is asleep
- An individual is intoxicated or drugged (on legal or illegal substances)
- An individual is unconscious
- An individual is not past the age of consent
- An individual is unable to communicate
- A person is threatened either verbally, in writing, or physically
- A person is physically forced to engage in an act
- A person is intimidated into engaging in an act
- A person is cognitively impaired

What can consent look like?

- Communicating when you change the type or degree of sexual activity with phrases like:
 - “Is this OK?”
- Explicitly agreeing to certain activities, either by saying “yes” or another affirmative statement, like “I’m open to trying.”
- Using physical cues to let the other person know you’re comfortable taking things to the next level

It does NOT look like this:

- Refusing to acknowledge “no”
- Assuming that wearing certain clothes, flirting, or kissing is an invitation for anything more
- Someone being under the legal age of consent, as defined by the state
- Someone being incapacitated because of drugs or alcohol
- Pressuring someone into sexual activity by using fear or intimidation
- Assuming you have permission to engage in a sexual act because you’ve done it in the past

How can it work in "normal" life?

When you’re engaging in sexual activity, consent is about communication. And it should happen every time. Giving consent for one activity, one time, does not mean giving consent for increased or recurring sexual contact. For example, agreeing to kiss someone doesn’t give that person permission to remove your clothes. Having sex with someone in the past doesn’t give that person permission to have sex with you again in the future.

Risk Reduction



Although sexual violence can never be prevented and is NEVER your fault, here are some suggestions to help you reduce your risk of being in a situation that results in a sexual assault.

- Listen to your partner- YES Means YES and NO means NO
- Have honest conversations about what you're okay with
 - Tell your partner what you like and don't like in relation to sexual intercourse
 - Communicate. Think about what you really want before you get into a sexual situation, and communicate clearly with your partner. If you think you are getting mixed messages, ask your date what they want.
- Use your voice- also as a bystander!
 - If you see someone in an uncomfortable situation, you have the power to intervene (whether it's safe to do so personally, or calling for help)
- A partner should not convince you to do anything, they should respect your choices.
 - Don't try to convince your partner to do something they're not comfortable with- That is coercion, and that is still not consensual.
- Safety plan if you're going on an outing with anyone- especially if substances are involved or it's someone new.
 - Do not mix sexual decisions with drugs and alcohol. A person cannot give consent if they are intoxicated.
 - If you don't feel comfortable in a situation, you have the power to leave
 - You don't owe any other person anything.
- Be cautious inviting someone into your home or going to someone else's home. 3 out of 5 sexual assaults occur in the victim's home, or the home of an acquaintance.
 - Let others know where you are and who you're with
- Avoid individuals who:
 - Don't listen to you
 - Ignore personal space boundaries
 - Make you feel guilty or accuse you of being "uptight" for resisting sexual advances
 - Express sexist attitudes and/or jokes
 - Act jealous or possessive
- Be assertive. Your opinions matter, and when you say "no", your date should stop.



What You May Be Feeling...



There is no standard response to sexual assault. You may experience a few, none, or all of the following:

What you may be feeling

What you can do

Shock and Numbness: Feelings of confusion, being easily overwhelmed, not knowing how to feel or what to do. You may react in a way that is similar to your reactions during other crisis in your life (for example with tears, irritability, nervous laughter, withdrawing).

Be aware that these are normal reactions to trauma. Each person handles crisis differently, so think of things that helped you get through crises in the past. Get help to sort out what you would like to do and how you may want to organize your time, thoughts, and decisions. Be compassionate toward yourself; give yourself time to heal.

Loss of Control: Feeling like your whole life has been turned upside down and that you will never have control of your life again. Your thoughts and feelings seem out of control.

Try to get as much control over your life as you possibly can, even over small things. Ask for information that may help you sort out your thoughts and feelings. Use outside resources, such as counselors and legal professionals. Ask how other people have handled similar situations. Try to make as many of your own decisions as possible. This may gradually help you regain a sense of control over your own life.

Fear: Fear that the assailant may return; fear for your general physical safety; fear of being alone; fear of other people or situations that may remind you of the assault.

If you want company, do not hesitate to ask people whom you trust to be with you day and night. You may want to make your physical environment feel more safe (making your home more secure, getting to know your neighbors better).

Guilt and self-blame: Feeling like you could have or should have done something to avoid or prevent the assault; doubts regarding your ability to make judgments.

No matter what the situation was, you did not ask to be hurt or violated. Blaming yourself is sometimes another way to feel control over the situation, thinking that if you avoid similar circumstances, it will not happen to you again.

Isolation: Feeling that this experience has set you apart from other people; feeling that other people can tell you have been sexually assaulted just by looking at you; not wanting to burden other people with your experience.

Recovering from an assault can be a very lonely experience. However, you are not alone in what you are feeling. You may find it reassuring to talk to others who have been assaulted, or to a counselor who has worked with other sexual assault survivors.

What you may be feeling

What you can do

Vulnerability, Distrust: Feeling that you are at the mercy of your own emotions or the actions of others; not knowing who to trust or how to trust yourself; feelings of suspicion and caution.

Trust your instincts about who you want to talk with about what happened to you. Try to talk with people whom you have found to be the most dependable in the past; select those who have been good listeners and non-judgmental. Feelings of general suspicion may subside as you begin to find people you can trust.

Sexual Fears: Feeling that you do not want to have sexual relations; wondering whether you will ever want to enjoy sexual relationships again; fears that being sexually intimate may remind you of the assault.

Try to tell your partner what your limits are. Let your partner know if the situation reminds you of the assault and brings up painful memories. Let your partner know that it is the situation, not them, that is bringing up the painful memories. You may feel more comfortable with gentle physical affection. Let your partner know what level of intimacy feels comfortable for you.

Anger: Feeling angry at the assailant. You may find yourself thinking about retaliation. You may be angry at the world that you no longer feel safe. If you are religious, you may feel angry that your faith did not prevent this..

Be accepting of your anger. Thoughts of being violent towards the assailant does not mean that you are a violent or bad person. You have the right to feel angry about the violation you have experienced. You may want to talk to people who understand what you're experiencing.

Disruption of Daily Activities: During the first few days or weeks after the assault you may feel preoccupied with intrusive thoughts about the assault. You may experience difficulty concentrating, nightmares, sleep disturbances, changes in appetite, 'startle reactions', phobias, general anxiety or depression. You may have memories of a prior crisis.

Although these are common reactions, they can be quite disturbing. Take things very slowly. Some people find it helpful to keep a notebook at hand to write down feelings, thoughts, ideas, or details of the assault; keeping the thoughts and feelings in one place may make them feel more manageable.

Contacting a sexual assault therapist can help you to begin sorting through your feelings and reactions to trauma. Some people feel like they want to move on and forget, however, trauma does not just go away. You can begin to take back control of your life and feelings.

Common Reactions to Traumatic Events

Healing is possible; however, it will take work. You may need the support of loved ones or the help of caring professionals.
Remember that others have gone through this and YOU ARE NOT ALONE.

Initial Crisis

For the first few days or weeks, the assault may seem unreal. You may feel numb or you may experience intense or heightened emotions. You might even have physical symptoms of shock; feeling weak, nauseated, moving slowly, nightmares or inability to sleep. There is nothing wrong or unusual about these kinds of reactions. Others may feel like they just want to move on and forget.

Outward Adjustment

This is a time when pressure to “get on with your life” might come from within or from others in your life. Many survivors may appear, on the outside, to have forgotten about the sexual assault or be satisfactorily “dealing with it” as they handle practical matters such as returning to school, work, or other normal routines. Sometimes, well intentioned family members, friends, or significant others encourage this. You may find yourself trying to block the experience out of your memory. This can be an important and self-protective coping mechanism for the short term.

Secondary Crisis

For many people, something happens in their life (a trigger) which may make their previous coping mechanisms ineffective, causing them to face the assault. Acknowledging the assault can be quite painful. What formerly seemed unreal or was denied, may become very real to you. Survivors of sexual assault describe feeling depressed and/or having flashbacks or obsessive thoughts about the assault. You might replay the assault, or parts of the assault, in your mind many times. You may also experience intense anger. Again, it is important to remember that these responses are completely normal.

Integration

You are changed by the assault, but have integrated the experience as one event among many life experiences. You may feel as though you have survived the assault and have dealt with the thoughts and emotions of the trauma. You may still spend time thinking about and talking about the assault, but find when triggers and flashbacks occur, the feelings surrounding the experience do not last long and become less intense over time.

Re-experiencing Symptoms

Following experiences of trauma, some individuals start to re-experience the trauma in the form of:

- Flashbacks
- Intrusive Thoughts
- Nightmares

There are often triggers for these types of re-experiencing. Triggers can take many different forms, such as:

- Images
- Sounds: like music, breathing, doors shutting, or footsteps.
- Emotions: feelings of distress, anger, danger or a lack of feelings (numbness).
- Physical: sensations such as pain or nausea
- Smells and Tastes

Flashbacks

The term “flashback” is used to describe a type of remembering where vivid memories of past trauma are recalled in a way that makes it seem as though the trauma is happening again now.

Nightmares

You may experience dreams about the bad things that have happened to you in the past. Nightmares can often be about fears and/or memories that are too distressing or painful to think about when you are awake. However, nightmares are not always an accurate idea of what happened in the past.

Intrusive Thoughts

These are intense thoughts or memories that come out of nowhere, particularly when a person's mind is not occupied. With this type of memory, there is always the sense that the trauma is being remembered, but without a feeling that the trauma is being re-lived.

Re-experiencing the trauma can:

- Be upsetting and painful
- Disturb your daily living by happening when you are not expecting them
- Vary in length; they can be short, lasting for only a few seconds, or take much longer
- Make it feel like you are back in the past, watching and feeling the events take place
- Make it feel like you are watching the events as they happen to you, as though you are watching a film where you are the main character

In response to these upsetting memories, individuals can start to experience some of the following as well:

- Difficulty breathing
- Feeling dizzy
- Tense muscles
- Heart beating quickly
- Feeling shaky
- Difficulty concentrating
- Sweating
- Being confused, scared or upset



Coping With Flashbacks



A flashback is when memories of past traumas feel as if they are taking place in the current moment. Many survivors of sexual violence experience these emotional returns to the trauma, believing themselves to be back at the scene of the attack or abuse.

Flashbacks can be triggered by many stimuli, such as sensory or emotional feelings. It can sometimes feel as though flashbacks come from nowhere, making it difficult to distinguish between past and present. They can often leave the survivor feeling anxious, scared, powerless, or any other emotions they felt at the time of their assault.

What Helps During a Flashback?

Here are some tips on what to do if you realize that you are in the middle of a flashback:

- Tell yourself that you are having a flashback and remind yourself that the actual event is over and you survived.
- Breathe.
 - Take slow, deep breaths by putting your hand on your stomach and taking deep enough breaths that your hand moves out with the inhalations and in with the exhalations. This is important because when we panic our body begins to take short, shallow breaths and the decrease in oxygen that accompanies this change increases our panicked state. So increasing the oxygen in our system can help us to get out of the anxious state we are in.
- Return to the Present.
 - Use your five senses to ground you to the present:
 - See: What's around you? Make a list of the items in the room; count the colors or pieces of furniture around you.
 - Smell: Breathe in the smell of lavender, or focus on the smells around you.
 - Hear: Listen to the noises around you, or turn on music.
 - Taste: Bite into an apple. Focus on the flavor and juicy sensation in your mouth.
 - Touch: A piece of ice, or hold a stone. What does it feel like?
 - Recognize what would make you feel safer.
 - Wrap yourself in a blanket; go into a room by yourself and close the door, whatever it takes to feel as if you are secure.
- Get the support of people you can trust. If you can, ask someone for help and support in this time of need.
- Take the time to recover. Let yourself have the time to get back to feeling comfortable and in the present. This may take a while and that is ok.
- Be good to yourself. Know that you are not crazy and you are not doing anything wrong-it takes time to heal.
- Reach out to a trauma therapist to learn healthy coping strategies and support for your healing.

Dealing with Nightmares

Nightmares can often be a way for individuals who have had difficult experiences to start to make sense of what happened to them. However, they can still be very frightening.

- If you have had a nightmare and have woken up, stay still in bed and lie quietly. Remind yourself that what you have just experienced was a nightmare, and that you are safe right now.
- Remind yourself to breathe calmly and slowly. Put your hand on the area above your belly button, and feel it go up and down as you take breaths in and out. Try counting to 5 as you breathe in through your nose, and again as you breathe out through your mouth.
- Some people find it helpful to stay in bed for 15-20 minutes using the techniques outlined above, as they find they can go back to sleep. If you do not fall back asleep, wait a while before you get up. Breaking up your sleep can sometimes make you feel more worried and can also become a habit, which impacts your sleep the following night. If after this time you still do not feel tired, get up.
- If you do get up, do something calming like making a warm drink or having a bath. Try to avoid having caffeine. Some people find it helpful to listen to relaxing music or read a magazine to distract themselves from thinking about their dream. Try to avoid watching TV or reading a book. If you do read, use a soft light.
- When you begin to feel tired again, go back to bed and lie calmly. Remind yourself that you are safe. It is helpful to breathe calmly and slowly to help you to go back to sleep.

How can I Help Someone Who was Sexually Assaulted

If your friend/family member has been sexually assaulted, you can expect them to be experiencing some combination of fear, anger, guilt, shame, mistrust, and disconnection. They may have experienced the fear of losing their life and as a result be afraid of everything around them. They may be angry at the perpetrator but also angry at themselves and at friends and family. As most assaults are perpetrated by someone the survivor knows, they certainly may be feeling a lack of trust for those around them and the extreme stress, anxiety, loss of sleep and feeling as though they have lost control makes many survivors feel as though they are disconnected from normal life.

You can help your friend. You can help them focus on their strengths and provide a place for them to vent their emotions, even anger. You can help them understand that they are NOT responsible for being assaulted. You can help them understand that it is normal to feel unstable under such difficult circumstances. Here is how you can help.

Be a good listener

Let them know that they can talk with you. Listen carefully and non-judgmentally. Make it clear that you care about their feelings. Don't ask for details. Give the opportunity for them to talk about their feelings, fears, and reactions as they choose. Keep their privacy. It is a survivor's decision when and whether to tell others about what happened (except for minors under 16, then you should tell a trusted adult about what has happened).

Believe them

Survivors need to know that you believe what happened. It is rare that people make up stories about sexual assault. If the perpetrator is someone you know, don't say "I can't believe they would do that".

Important things to communicate to the survivor:

"It's not your fault" "I'm glad you are safe now" "I'm sorry this happened to you"

Validate their feelings

If a survivor was drinking during the assault, assure them that they aren't to blame for what happened, If a survivor feels guilty because they didn't fight back, assure them that fear sometimes inhibits us. Tell them that they did the best they could to survive the situation and no one deserves to be sexually assaulted. Don't blame survivors for what happened by asking them things like why they were drinking, why they didn't fight back, what they were wearing, or by telling them what you would have done.

Don't tell them what to do. It is their decision whether to report or not. Encourage them to get competent, sensitive medical attention. Resilience: Advocates for Ending Violence has trained Sexual Assault Nurse Examiners.

Encourage them to talk with someone trained to help sexual assault victims. However, a survivor of sexual assault must be able to decide for themselves when and whether or not they want to receive counseling.

Seek professional help for yourself. Your feelings matter too. By talking through your feelings with a counselor, you will be better able to provide the continuing support they will need. Don't use the survivor to help you get through your own feelings. Resilience: Advocates for Ending Violence has experienced counselors to help a survivors family and close friends better understand the dynamics of sexual assault and victimization.

Be gentle, patient, and sensitive to their needs. Don't presume you know their needs. Ask before you reach out. Allow them the time to effectively cope with the trauma. Sexual violence is not something people 'just get over'.

Adults Abused as Children

Adult survivors of childhood sexual abuse are affected differently by the abuse, which can depend on a number of factors such as:

- The type of relationship with the abuser
- The duration and severity of the abuse
- The child's psychosocial development at the time of the abuse
- The level of support the child received after their disclosure

The crisis of an adult survivor can be very different to that of a recent victim/survivor. Adult survivors may live a majority of their life in crisis or some sort of turmoil and chaos (due to their abuse) and are finally, after years, able to identify that it was their abuse that may have caused such grief.

There are several behavior patterns that are seen with adult survivors in crisis:

- Depression, anxiety, hyper-vigilance, and fixation with control issues
- Fear and distrust of others around them
- Difficulty forming and sustaining healthy and/or stable intimate relationships and friendships
- Difficulty with sexual intimacy and sexuality
- Avoidance and dissociation because of fear of being re-victimized or making themselves unknowingly vulnerable to abuse
- Dependence on others
- Low self-esteem, self-degradation, self-blame, and many times a distorted body image, this may lead to an eating disorder or self-harming behaviors

Adult survivors of childhood sexual abuse can regain
control of their life and we are here to help!

LGBTQ+ Survivors of Sexual Assault

- Studies suggest that the amount of acquaintance rape and marital rape for Lesbian, Gay, Bisexual and Transgender people is as high as that for heterosexuals. Lesbian, Gay, Bisexual and Transgender survivors may fear seeking help for fear of being ridiculed and/or not feeling understood.
- Rates of some form of sexual violence were higher among lesbian women, gay men, and bisexual women and men compared to heterosexual women and men.
 - Approximately 1 in 8 lesbian women (13%), nearly half of bisexual women (46%), and 1 in 6 heterosexual women (17%) have been raped in their lifetime.
 - This translates to an estimated 214,000 lesbian women, 1.5 million bisexual women, and 19 million heterosexual women.
 - 4 in 10 gay men (40%), nearly half of bisexual men (47%), and 1 in 5 heterosexual men (21%) have experienced sexual violence other than rape in their lifetime. This translates into nearly 1.1 million gay men, 903,000 bisexual men, and 21.6 million heterosexual men.

Certain Considerations for LGBTQ+ Survivors:

- Coming Out:
 - Fear that the abuser or self-disclosure of the abuse will “out” them. This is difficult and may be dangerous
 - if people are not supportive or sensitive of LBGTIQ issues.
- Biphobic, Homophobic & Transphobic Responses
 - Others may minimize the experiences of LBGTIQ survivors or believe myths that they deserved or enjoyed the abuse. No one deserves or likes to be abused and abuse can happen to anyone.
- Self Doubt
 - Many survivors experience self-blame and doubt. LBGTIQ survivors may also question their gender identity or sexual orientation as a result of the abuse they have experienced.
- Common fears of LBGTIQ survivors of sexual assault:
 - Not being taken seriously or having their experience minimized.
 - Having their experience sensationalized.
 - Having to explain how the assault happened in more detail than necessary
 - Being blamed for the assault
 - Not being understood if S&M was involved
 - Being treated in a homo, trans or biphobic manner by police, hospital, or rape crisis centers
 - Mistakenly being perceived as the perpetrator.
 - Being "outed"
 - If the survivor's community is small, the fear of other's skepticism or people “taking sides” may cause the survivor to keep silent.
 - Gay/Bi/ male survivors may fear reporting due to the stereotype that they are promiscuous and therefore invited the sexual assault upon themselves.
 - Lesbian/bi women survivors may fear reporting because women are not typically viewed as perpetrators of sexual violence.

Sexual assault can and does happen among all populations. While, as a survivor, you may feel reluctant to discuss the assault out of fear of being judged or out of the belief that crisis lines aren't available or sensitive to LGBTQ+ survivors, WE ARE HERE TO LISTEN AND SUPPORT YOU.

Women can be sexually assaulted by their female partners or dates, and men can be assaulted by their male partners or dates. Survivors of same-sex sexual assault have to deal with the same issues as survivors of opposite-sex sexual assault, with the addition of concerns about homophobic responses from others or concerns about being “outed” through the process of reporting.

Resilience: Advocates for Ending Violence therapists are available to help in the process of recovery and coping after having been sexually assaulted.

**SAFE SPACE
FOR EVERYONE**

Unique Issues Facing Male Survivors

Male victims of sexual assault are an often forgotten population: unseen, neglected and underserved. Some of the stereotypes and myths that impact male victim's ability to face their sexual assault are:

- Men are immune to victimization
- Men should be able to fight off attacks
- Men shouldn't express emotion
- Male survivors are more likely to become sexual predators

These stereotypes and myths can then lead to:

- Loss of belief in their masculinity
- Exaggerated self-blame
- Feelings of shame, guilt, and anger
- Fear they can't protect their families
- Sexual difficulties
- Self-destructive behaviors

Male survivors may face certain barriers to seeking support or services, either from friends and family or from agencies and institutions. Male survivors can experience:

- Fear in seeking help because of judgment
- Response from others can be damaging or unsupportive
- He may keep silent because the perpetrator may have threatened the survivor or his family
- May resist reporting the sexual assault due to the need to repeat the story over and over again to police, to prosecutors, and in court
- He may blame himself for the attack because he was not able to fight off the aggressor

Male victims of sexual assault may experience a variety of outcomes, impacting their well-being. The psychological impact can be severe for men because they are socialized to believe they are immune to sexual assault and because society reactions can be more isolating and stigmatizing:

- Sense of self and concept of "reality" are disrupted
- Paranoia, obsessive fear of bodily harm, profound anxiety, depression, fearfulness, and identity confusion
- Withdrawal from interpersonal contact and a heightened sense of alienation
- Anger about the assault can lead to hostility
- Stress-induced psycho-physiological reactions Heterosexual men may experience "homosexual panic"-a fear that the assault will make him 'become homosexual'
- A gay man may feel he is being 'punished' for, or may develop self-loathing related to, his sexual orientation
- He may fear he was targeted as a member of the gay community, and he might withdraw from that community

Resilience: Advocates for Ending Violence is here for all survivors of sexual assault and childhood sexual abuse. Referrals can also be made as desired.

Resilience Services

All services are free and all contact is strictly confidential

Crisis Intervention

24 hour hotline staffed 365-days/year

Telephone or walk-in short-term individual advocacy services

Emergency Safe Shelter

Supportive, confidential, and safe environment that will support the survivor's decisions

Domestic Violence and Sexual Assault Services

Trauma-informed therapy services are available to survivors of sexual assault and/or childhood sexual abuse. Master's-level clinicians work with survivors to establish self-identified therapeutic goals to address the impact of sexual assault, and/or surviving childhood abuse.

Our highly trained **case management** team works individually with domestic and sexual violence survivors to meet their self-identified goals. Goals may include: meeting basic needs, planning for safety, increasing their understanding of the impact of domestic and/or sexual assault, or creating a healthy network of support.

Our **Sexual Assault Nurse Examiner (SANE)** program provides round-the-clock response to victims of a recent sexual assault who are age 13 and over. SANE nurses address the medical and emotional needs of assault victims who have experienced sexual assault within the last 120 hours. Specially trained sexual assault advocates are available for emotional support.

A **legal advocate** is also available to provide follow up legal advocacy and information that will allow survivors to make an informed decision about engaging in the legal process.

Weekly **support groups** provide emotional support and education to survivors of domestic and/or sexual violence.

Trauma-informed individual and group therapy services for children exposed to violence within their home.