

Sexual Assault Information Packet



Advocacy & Education

REPORTING PARTY

Sexual Assault - Relationship Violence - Stalking

Sexual Misconduct Advocacy and Resource Team (SMART)

Adapted from and Used With Permission of
University of North Carolina at Pembroke

Office of Student Affairs

Revised Jan 2017.

Table of Contents

Information to Reader	1
What do I do if I have been sexually assaulted (raped) or experienced sexual violence?	4
Campus and Community Resources	10
Emotional Responses of Sexual Assault	13
Coping Skills for Survivors of Sexual Assault	17
Sexual Assault Information for Barton Students	19
Victim's Bill of Rights	21
Consent	22
Reporting Options for Sexual Assault Survivors	23
Kansas Laws for Rape and Sexual Assault	25
Important Medical Information	29
Chart of Student Conduct Process	31
Chart of Criminal Justice Process	32
Definition of Sexual Assault	33
Myths and Facts About Sexual Assault	35
National Statistics	39

Dear Reader,

This information packet was created for several reasons: First, we hope and believe that information and education will help survivors to reach a healthy recovery. Second, we hope that people concerned about a survivor can learn to be an excellent support person by understanding more about the issue affecting their loved one. And finally, we believe the information can be helpful to those reading it for educational purposes because it deals with an issue that is important to them.

If you are a survivor of violence, you may find some comfort in the following pages. You may also read some things that are upsetting. Please remember that campus Safety is operational 24 hours a day, 365 days a year and can be reached at 620-792-9217.

All of the statistics and facts in this packet are followed by their source. The information in this packet is updated on an annual basis, but please confirm any information contained herein if you are concerned about its source or its accuracy. This packet was created for informational purposes only and should not be taken as legal advice.

Readers will notice that the female pronoun “she” is used to refer to the survivor of violence in the following pages. This usage is reflective of statistics and our practice which have shown that on a college campus, the survivors of sexual assault, relationship violence and stalking are overwhelmingly female. We have therefore chosen to avoid the cumbersome use of he/she, him/her, and his/hers. This does not mean that males are not victimized by these crimes, they are, but not in nearly the numbers that females are. We welcome male survivors to access our services.

Readers will also notice that we limit our use of the word “victim” when talking about a survivor. It is important for survivors to feel empowered and in control of their lives; labeling a survivor as a victim may cause a survivor to feel disempowered, and helpless. The term survivor implies that a person has lived through something traumatic by their own inner strength and endurance.

We hope that all readers of this information packet find it helpful. We want to make sure you are provided with the best support possible.

Sincerely,
The SMART Committee

Information in this packet was adapted from University of Minnesota and University of NC Wilmington

What do I do if I have been sexually assaulted (raped) or experienced sexual violence?

Below are the recommended steps and support resources that are available to help you.

First, seek medical attention.

Immediately seek medical attention. Call and/or go to one of the hospitals listed below. If you have experienced sexual misconduct and/or sexual violence, the Title IX office strongly encourages you to seek medical treatment. If you have been sexually assaulted, seek medical treatment and a SANE forensic exam.

It is important to preserve physical evidence that may include tissue and fluid samples, evidence of violence, sheets, towels, clothing, etc. You may choose to avoid washing, bathing, urinating, etc., until after being examined at the hospital. Because evidence of a sexual assault can deteriorate quickly, you may choose to seek a medical exam as soon as possible. Evidence collection should be completed within 120 hours of an assault, but fluids, hair samples, and DNA can be collected for a long time thereafter. Even if you have washed, evidence can often still be obtained. After 120 hours, it may still be helpful to have medical attention, even if you are not trying to obtain evidence of an assault

A Sexual Assault Nurse Examiner (SANE) is a registered nurse who has received specialized training in forensic evidence collection and medical care of sexual assault victims. Along with the forensic exam, the SANE will provide medical care such as preventive medication for common sexually transmitted infections, disperse emergency contraception, as well as treat and document injuries.

Before going to the hospital it is important to preserve evidence when possible. Evidence can be preserved by the following: Do **not** shower/bathe, change or launder your clothing, or eat/drink/brush your teeth.

For the greatest emotional support, you can first call the Crisis Center in your area. They can either call the SANE nurse or tell you where to go and meet you there to be with you throughout the process.

Typically, police will be called to the hospital to take custody of the rape kit, but it is up to you whether you wish to speak with them or file a criminal complaint. Choose how to proceed. You have options, and are encouraged to contact the Crisis Center Advocate to discuss your options: 1) Do nothing until you are ready; 2) Pursue resolution by the College; and/or 3) Initiate criminal proceedings; and/or 4) Initiate a civil process against the perpetrator. You may pursue whatever combination of options is best for you. If you wish to have an incident investigated and resolved by the College, students and employees should contact the Title IX Coordinator's Office. College procedures will be explained. Those who wish incidents to be handled criminally should contact Campus Safety or local police where the assault occurred. A campus official is available to accompany students in making such reports, if desired.

STEP 2 - Contact a Sexual Assault Advocate

Those who have experienced sexual misconduct and/or sexual violence can benefit from the assistance of a trained advocate who can assist them in the aftermath of the incident. The following are entities that specialize in providing free-of-charge confidential services:

Great Bend Area:

Family Crisis Center
1924 Broadway Avenue
Great Bend, Kansas
(620) 792-1885 or (866) 792-1885 (24-hour helpline)
familycrisiscntr.org

Fort Riley:

Fort Riley Crisis Center
(800) 727-2785
SHARP 24/7 Hotline (785) 307-9338
SHARP(785) 239-2277 or (785) 239-3379

Family Advocacy Program Hotline (Fort Riley Victim Advocate)
24/7 Hotline - (785)307-1373

Grandview Plaza:

The Crisis Center <http://www.thecrisiscenterinc.org/services.html>
(785) 539-2785 Manhattan
(785) 762-8835 Junction City
(800) 727-2785 other areas

Fort Leavenworth:

Alliance Against Family Violence TEMPORARILY CLOSED
522 Kickapoo Street
Leavenworth, Kansas
(800) 644-1441
(913) 682-9131
(913) 682-9132
<http://www.aafv.net/main.html>

Closest centers are:

MOCSA -- Metropolitan Organization to Counter Sexual Assault
<http://mocsa.org>
Crisis Line: 816-531-0233 or 913-642-0233
3100 Broadway, Suite 400
Kansas City, MO 64111

Sexual Trauma & Abuse Care Center <http://stacarecenter.org>
708 West 9th Street, Suite 105
Lawrence, KS 66044
(Northeast corner of 9th & Mississippi Street)
Phone (24/7): 785-843-8985

Mattie Rhodes Center Family Support Services – Spanish speaking
<http://www.mattierhodes.org>
1740 Jefferson
Kansas City, MO 64108
Phone: 816-471-2536, 816-241-3780 (not a crisis line)
Fax: (816) 471-2521

Resources- State & National:

Kansas Coalition Against Sexual and Domestic Violence
(888) 363-2287
<http://www.kcsdv.org/>

RAINN (Rape, Abuse, & Incest National Network)
(800) 656-HOPE (4673)
<https://rainn.org>

- What are my rights if I have been sexually assaulted?

As a Barton student, you have some basic rights when it comes to being the survivor of a sexual assault which violates Barton Policies. The United States Congress enacted this Bill of rights in 1992. All colleges and universities participating in federal student aid programs are required to afford sexual assault survivors certain basic rights.

- Accuser and accused must have the same opportunity to have others present during the disciplinary process.
- Both parties shall be informed of the outcome of any disciplinary proceedings.
- Survivors shall be informed of their options to notify law enforcement.
- Both parties shall be notified of counseling services.
- Both parties shall be notified of options for changing academic, living situations and other accommodations.

You are also entitled to receive a copy of the **Sexual Assault Information Packet Reporting Party**. You may obtain this from the Title IX Coordinator, Campus Safety Office, Barton counselor or Barton college nurse.

Step Three – Report to and/or File a Complaint with Title IX Coordinator

The Title IX office recognizes that a student desiring to file a Title IX complaint and witnesses who are asked to participate in a Title IX investigation may be hesitant to engage in the investigation process for fear of being held responsible for violations of the University's Alcohol and Drug Policy. To eliminate this concern, a student who files a complaint with the Title IX office or witnesses who participate in a Title IX investigation will not be subjected to discipline under the Code of Student Rights and Responsibilities for personal consumption of alcohol and/or drugs.

Anyone who believes they experienced sexual misconduct and/or sexual violence (such as sexual assault, dating violence, domestic violence, or intimate partner violence), sexual exploitation or stalking may file a complaint with the Title IX office.

How Do I Make a Report?

Reports of discrimination, harassment, sexual misconduct and/or retaliation should be made to the Title IX Coordinator or deputy/deputies, promptly. Employees are required to report within 24 hours any possible Title IX violation. There is no time limitation for the reporting party to file a complaint but if the accused individual is no longer at Barton, the College probably can offer only resources. The College acts promptly on all reports, and every effort is made to preserve the privacy of reports.

Anonymous reports may also be filed online, using the reporting form. Reporting is addressed more specifically on p. 14, Section 8, Confidentiality and Reporting of Offenses under this Policy. Reports of discrimination

To initiate the filing of a complaint with the Title IX office, a complaint form may be completed and submitted online; printed, completed, and mailed to the Title IX office; or you may file a complaint in person at the Title IX office.

Online Complaint Form: https://docs.google.com/forms/d/e/1FAIpQLScad7OzvaesNk3xX-1xqFZouGUjseSP2XRFjfro1ffg_OPPPA/viewform

Anonymous reports may also be filed online, using the reporting form. Reporting is addressed more specifically in Policy 1132 on p. 14, Section 8, Confidentiality and Reporting of Offenses. https://docs.bartonccc.edu/policies/1132-Civil_Rights_Equity_Resolution.pdf

Reports of discrimination by the Title IX Coordinator should be reported to the College President, (620) 792-9301.

If possible, you should include the following information, to the extent known and available:

- Your name and contact information (address, telephone, e-mail);
- Name of person(s) directly responsible for the alleged sexual misconduct, sexual violence, or stalking;
- Date(s), time(s), and place(s) of the alleged behavior(s);
- A copy of any documents or other tangible items pertaining to the alleged behavior(s), including emails, text messages, social media communication, etc.;
- Names and contact information for any witnesses of the alleged behavior(s);
- Any other relevant information.

Upon receiving a complaint, the Title IX office will acknowledge receipt of the complaint and will request a meeting with you to inform you of your rights and support resources associated with the complaint investigation process.

Retaliation

Barton Community College prohibits retaliations against those who file a Title IX complaint and witnesses who participate in an investigation. If you believe you are experiencing retaliation in any form, please let our office know as soon as possible. The Title IX office will respond promptly to all allegations of retaliation.

STEP 4 - File a Criminal Complaint

The Title IX complaint investigation process is independent of any other complaint resolution process. You have the right to file a criminal complaint with the appropriate law enforcement authorities. You may pursue these options in addition to or instead of filing a complaint with the Title IX office. The Title IX office and or the local crisis center can assist you in making a report to law enforcement. **It is your choice.**

Great Bend:

- Campus Safety 620-792-9217, in Room 154 in the Technical Building
- Barton County Sheriff

Emergency	911
Non-emergency	(620) 793-1876
- Great Bend Police Department

Emergency	911
Non-emergency	620- 793-4120

Grandview Plaza:

- Geary County Sheriff

Emergency	911
-----------	-----

Non-emergency 785-238-2261

- Grandview Plaza Police Department
Emergency 911

- Non-emergency 785-762-4271

Ft. Riley:

- Fort Riley Police - (785)239-MPMP (6767)
- Local Police (on and off post) - 911

Ft. Leavenworth:

- MPs – 913-684-3322 or 913-684-2111
- SHARP – Sexual Assault Response Coordinator (SARC) - 913-683-1443 – 24/7 and the phone call is confidential
- Sharp Resource Center – 913-684-2810 or 913-674-2818
- <https://garrison.leavenworth.army.mil/index.php/my-fort/all-services/sharp-resource-center>

Resources for BARTON Students

Barton Campus Resources

Title IX Coordinator, Cheryl Brown	(620) 786-7441
Campus Safety Officers:	(620) 792-9217
Mental Health Counselor:	(620) 792-9295
Nurse's Office:	(620) 792-9233
Office of Student Affairs:	(620) 792-9226

Community Resources - - Barton County Campus in Great Bend

Great Bend Regional Hospital emergency and medical services
514 Cleveland Street <https://www.gbregional.com/>
Great Bend, Kansas
(620) 792-8833

Family Crisis Center <http://www.familycrisisctr.org/>
1924 Broadway Avenue
Great Bend, Kansas
(620) 792-1885 or (866) 792-1885

Heart of Kansas <https://www.heartofkansas.com/>
1905 19th Street
Great Bend, Kansas
620-792-5700

The Center for Counseling and Consultation <https://www.thecentergb.org/>
(620) 792-2544

DREAM, Inc. drug and alcohol abuse and addiction <http://dreamhays.com/>
Hays, Kansas
(785) 628-6655

Resources – Fort Riley

Janet Balk Ft. Riley, Title IX Representative
Academic Programs Building 211, P.O. Box 2463
Fort Riley, KS 66442-0463
(785) 784-6606 ex. 762
balkj@bartonccc.edu

Fort Riley Crisis Center
(800) 727-2785
SHARP 24/7 Hotline (785) 307-9338
SHARP Office (785) 239-2277 or (785) 239-3379

Resources – Grandview Plaza Campus in Junction City

Lindsay Holmes, Title IX Representative
Program Director
100 Continental Drive
Grandview Plaza, KS 66441
(866) 452-1108, Toll Free: (785) 238-8550 ext. 743
holmesl@bartonccc.edu

Pawnee Mental Health Services <https://www.pawnee.org/>
814 Caroline Avenue
Junction City, Kansas
(785) 762-5250

Family Care Centre of Junction City <https://familycarecenterjc.com/>
132 Eisenhower Drive
Junction City, Kansas
(785) 762-4210

Geary Community Hospital <http://gearycommunityhospital.org/>
1102 St. Mary's Road
Junction City, Kansas
(785) 238-4131

The Crisis Center <http://www.thecrisiscenterinc.org/>
(785) 539-2785 Manhattan
(785) 762-8835 Junction City
(800) 727-2785 other areas

Resources – Fort Leavenworth Campus

Erika Jenkins-Moss, Title IX Representative
Director of Learning Services
Fort Leavenworth, KS 66027
(785) 784-6606 ext. 772
MossE@bartonccc.edu

SARC 24/7 Hotline (913) 683-144

St. John Hospital <https://www.stjohnleavenworth.com/>
3500 S. 4th Street
Leavenworth, Kansas
(913) 680-6000

St. Luke's Cushing Hospital <https://www.saintlukeskc.org/locations/saint-lukes-cushing-hospital>
711 Marshall Street
Leavenworth, Kansas
(913) 684-1100

The Guidance Center <http://www.theguidance-ctr.org/>
500 Limit Street
Leavenworth, Kansas
(913) 682-5118

Alliance Against Family Violence
522 Kickapoo Street
Leavenworth, Kansas <http://www.aafv.net/main.html>
(800) 644-1441
Hotline (913) 675-7217, Business (913) 675-7220

Resources- State & National

Kansas Coalition Against Sexual and Domestic Violence
(888) 363-2287
<http://www.kcsdv.org/>

RAINN (Rape, Abuse, & Incest National Network)
(800) 656-HOPE (4673)
<https://rainn.org/>

Kansas Legal Services
www.kansaslegalservices.org
1-800-723-6953

Websites

Department of Education: Office for Civil Rights (OCR)
<https://www2.ed.gov/about/contacts/gen/index.html?src=ft>

The Title IX Office:
<https://bartonccc.edu/title-ix>

Common Feelings of Survivors of Sexual Assault

Emotional responses of survivors will vary from individual to individual. Sexual assault can be extremely traumatic and life-changing. It's important to remember that your responses are not crazy; they are normal reactions to a traumatic situation – sexual assault. Below are some common feelings survivors of sexual assault may experience but is not necessarily an exhaustive list of feelings experienced by survivors.

SHOCK AND NUMBNESS

This response may occur soon after a sexual assault. Survivors may experience feelings of disbelief or denial about what happened. Survivors may feel emotionally detached or drained, and at times may be unaware of what is happening around them. Other reactions to the emotional shock may include: crying uncontrollably, laughing nervously, withdrawing, or claiming to feel nothing or be “fine.” Survivors often may feel overwhelmed to the point of not knowing how to feel or what to do.

- **If you are a survivor, here are some tips that may help:** Recognize that these feelings are normal reactions after experiencing trauma. Reassure yourself that these feelings will diminish over time. If you want company, it may be helpful to surround yourself with supportive friends or family. You may also want to think about what has helped you through a previous crisis. For example, it may help to practice breathing exercises or meditation, go for a walk, listen to music, or talk with supportive friends and family.

DISRUPTION OF DAILY LIFE

After an assault, survivors may feel preoccupied with thoughts about the incident. It may be difficult for survivors to concentrate, attend class, or focus on school work. It can be very upsetting to have reminders of a sexual assault when trying to reclaim your normal life. Survivors may have nightmares, trouble sleeping, appetite changes, general anxiety, or depression. For the first few weeks or months after the assault, survivors may feel as though their life has been upset and may be wondering if it will ever be the same.

- **If you are a survivor, here are some tips that may help:** It is important to take care of yourself and take steps to reclaim your life. After experiencing any kind of crisis, it is important to take time to grieve, to adjust, and to reorganize your life. Recognize that you will be able to go on with your life. The mental health counseling and Psychological Services is here to help you if you find yourself struggling academically or if you think you might want some counseling to help you deal with the trauma.

LOSS OF CONTROL

Survivors may feel disoriented and overwhelmed. Survivors may also feel anxious, scared, or nervous and often have a difficult time concentrating. Often, survivors feel unsure about themselves, and may temporarily lack their usual

self-confidence. Decisions that were made routinely before now may feel monumental. Survivors may feel that because of the assault she will have to change their whole lifestyle to feel safe.

- **If you are a survivor, here are some tips that may help:** Try to make as many of your own decisions as possible. Even making small decisions can help you regain a sense of control. You may want to make some changes in your life such as re-arranging the furniture in your room or changing your routine by exercising in the morning instead of at night. Small changes can help you feel like you are taking back control. An advocate can provide information about all of your options and support you to make a decision that is best for you. It is important to trust your instincts about what is right for you.

FEAR

It is not uncommon for survivors to fear people and feel vulnerable even when going through the regular activities of life. She may be afraid to be alone, or afraid of being with lots of people. She may find herself not knowing who to trust. Survivors may have lost their sense of safety in their own environment, which makes them feel vulnerable and may fear that they will be assaulted again.

- **If you are a survivor, here are some tips that may help:** Make any changes in your life that you need in order to feel safe. If possible, you may want to change your locks, take a self-defense class, or stay with a family member or friend. Temporarily "not trusting" is a protective device that is an emotional coping skill. Most of these fears will go away or lessen over time. You will be able to trust when you have had a chance to heal and are feeling less vulnerable. If fear is getting in the way of your daily life, it may be helpful to speak to a mental health counselor. A counselor can assist you with safety planning and support in reclaiming your sense of security.

GUILT, SHAME, SELF-BLAME

Most survivors feel guilty and ashamed about the assault. Survivors often question that they somehow may have "provoked" or "asked for it," or that they shouldn't have trusted the assailant, or that they should have somehow prevented the assault. Some of these feelings are the result of society's myths about rape and sexuality. Survivors will often start to doubt their ability to make good judgments or trust their own instincts. Sometimes blaming oneself helps a survivor to feel less helpless.

- **If you are a survivor, here are some tips that may help:** It was not your fault. No one deserves to be sexually assaulted - tell yourself that many times a day. Being sexually assaulted does not make you a bad person; you did not choose to be sexually assaulted. Realize that guilt and self-blame are efforts to feel some control over the situation. Many survivors also experience blame from individuals they tell about the incident. These reactions are fueled by society's myths about sexual assault. It is important to surround yourself with supportive people. An advocate or a counselor will never blame you and are here to support you and your decisions. Education about the facts surrounding sexual assault may also be helpful in dispelling shame and self-blame.

ANGER

Survivors may have different reasons to feel angry. Anger is an appropriate, healthy response to sexual assault. It usually means that the survivor is healing and has begun to look at the assailant's responsibility for the assault. Survivors vary greatly in how readily they feel and express anger. It may be especially difficult to express anger if a survivor has been taught that being angry is never appropriate. Anger can be vented in safe and healthy ways, or can be internalized, where it may become sadness, pain, or depression. Please be careful to avoid unhealthy ways of coping with anger such as alcohol or drug use, cutting, or other self-destructive behavior.

- **If you are a survivor, here are some tips that may help:** Allow yourself to be angry. You have a right to feel angry. However, it is important to feel angry without hurting yourself or others. As part of your anger, you may find yourself more irritable at home, school, or work. Anger can be expressed physically without harming yourself or others. Some people find that physical activity (such as walking, running, biking, hitting pillows, etc.) can help release the physical tension that often accompanies anger. Writing in a journal, playing music, or singing out loud to music are also helpful and healthy ways to release anger. Reporting the sexual assault may be another way you choose to turn your anger into a positive action.

ISOLATION

Some rape survivors feel their experience sets them apart from others. Often times, survivors might feel differently or think that others can tell that they have been sexually assaulted just by looking at them. Some survivors do not want to bother anyone with their troubles, so they do not talk about the incident or their feelings. Survivors may withdraw or distance themselves from family and friends.

- **If you are a survivor, here are some tips that may help:** You are not alone in what you are feeling. Many people benefit by speaking with a mental health counselor or other survivors. Contact one of the mental health counseling services if you are interested in receiving free and confidential services on or off campus. Reading more about the topic can also be reassuring and validating. If you are feeling alone, call a trusted friend or family member. It can make all the difference to be with someone who cares about you.

ANXIETY, NIGHTMARES

Survivors may experience anxiety, flashbacks, and nightmares after an attack. This can begin shortly after the attack and continue for a long period of time. Nightmares may replay the assault or include dreams of being chased, attacked, etc. Survivors often fear that they are "losing it" and may feel that they should be "over it by now".

- **If you are a survivor, here are some tips that may help:** These responses, as scary as they are, are normal reactions to trauma. These physical reactions are ways your emotions respond to the fear you experience. It is important to be able to discuss your nightmares and fears, particularly how they are affecting your life.

Keeping a journal to write about your feelings, dreams, and worries can be a helpful tool in the recovery process.

TALKING ABOUT THE ATTACK VS. KEEPING THE SECRET

Some survivors may be compelled to tell others about the sexual assault, some feel it must be hidden from everyone or from certain people. Such risks are real, since some people may not be supportive or may not believe the survivor and blame her for what happened. It is extremely important in the recovery process for survivors to be able to talk about the assault, their feelings about it, and how it has changed their life.

- **If you are a survivor, here are some tips that may help:** It's important to talk about the assault with people you trust. The assault was NOT your fault. It doesn't matter what the circumstances were that led up to the assault – if you flirted with the person, if you chose to have sex with the person before, or if you were drinking. Rather, the focus needs to be on the behavior of the perpetrator. Often, people do not want to believe that sexual assault can happen to anyone, and may respond with disbelief. It's important to remember that these reactions, as painful and frustrating as she may be, do not change the fact that the sexual assault was NOT your fault. If you want to talk, Counseling and psychological services have professional mental health counselors with experience working with sexual assault survivors and are sensitive to their needs.

POST-TRAUMATIC STRESS DISORDER

Post-traumatic Stress Disorder, also known as PTSD, involves a pattern of symptoms survivors may experience after a sexual assault. Symptoms of PTSD include repeated thoughts of the assault; memories and nightmares; avoidance of thoughts, feelings, and situations related to the assault; and increased stimulation (e.g., difficulty sleeping and concentrating, jumpiness, irritability). One study that examined PTSD symptoms among women who were raped found that 94% of women experienced these symptoms during the two weeks immediately following the rape. Nine months later, about 30% of the women were still reporting this pattern of symptoms. The National Women's Study reported that almost 1/3 of all rape survivors develop PTSD sometime during their lives and 11% of rape survivors currently suffer from the disorder.⁴

- **If you are a survivor, here are some tips that may help:** Treatment for PTSD typically begins with a detailed evaluation and the development of a treatment plan that meets the unique needs of the survivor. PTSD-specific treatment is usually begun only after people have been safely removed from a crisis situation. The mental health counselor can assist you in finding resources to treat PTSD.

Adapted from the Sexual Violence Center of Hennepin County and "Coping with Sexual Assault" by Terri Spahr Nelson.

⁴Orsillo, Sue. U.S. Department of Veterans Affairs. National Center for PTSD Fact Sheet, available from http://www.ncptsd.va.gov/facts/specific/fs_female_sex_assault.html; Internet; accessed 3 July 2006.

Healthy vs. Unhealthy Coping Methods

Healthy coping methods are those that help to reduce anxiety, lessen other distressing reactions, and improve the situation in a way that does not harm you further and which improves things not only today, but tomorrow and in the future as well. **Healthy coping** methods can include:

- *Seek professional help such as mental health counseling services*
- *Muscle relaxing exercises*
- *Talking to another person for support*
- *Exercise in moderation, including walking, jogging, or swimming*
- *Taking a self-defense training or martial arts class*
- *Hot baths*
- *Distracting activities, including recreational or work activities such as: cooking, gardening, taking a walk, working out, going to the park, going out with friends, watching a movie, writing a letter, listening to music, cleaning, or doing arts and crafts.*
- *Stretching or yoga*
- *Breathing exercises –slow, deep breaths*
- *Meditation*
- *Journaling*

Unhealthy coping methods can make problems worse. They may reduce your anxiety immediately, but provide only short-term relief. Unhealthy coping skills may also cause additional problems. **Unhealthy coping** methods can include:

- *Continuing to avoid thinking about the assault*
- *Social isolation (keeping to yourself)*
- *Use of alcohol or drugs*
- *Binge eating (overeating)*
- *Avoiding counseling or other support services available*
- *Cutting or hurting oneself*
- *Aggressive or violent actions*

Ideas for Managing Memories of Sexual Assault

Here are some steps to help you actively stay in the present or the "here and now":

- *Keep your eyes open and actively look around you. Look around the room or area where you are. Turn the light on if it is off.*
- *Say a safety statement: "My name is (name). I am safe right now. I am in the present, not the past. I am at (location) and the date is (date)."*
- *Touch objects around you (a pen, your purse, a book, your clothing, your chair) and notice how they feel.*
- *Carry something in your pocket or purse (ring, a rock, any safe object) that you can touch whenever you have thoughts of the assault.*
- *Saying a coping statement: "I can cope right now. This feeling will pass."*
- *Think of people you care about (look at photographs of your best friend).*
- *Run cold water over your hands or splash water on your face.*
- *Jump up and down.*
- *Stretch.*
- *Eat something and notice how it tastes.*
- *Put your hand on your heart, feel it's beat, and breathe deeply for 20 seconds.*
- *Hug or make eye contact with your best friend or a calm person you trust for 20 seconds.*

Special Concerns for College Students

Are you in the same class as the person that assaulted you?

It is very scary and distracting for many survivors to attend class with an alleged perpetrator. Your academic career is important and we want you to feel safe attending class so that you may be successful both academically and in your healing process. If you need to make alternate arrangements in your class schedule, this can be done through the Office of Title IX. If the alleged perpetrator is a BARTON student and the assault occurred on campus, you also have the option of making a report to Campus Safety. Sexual assault is a violation of the Student Code of Conduct and Barton has the ability to discipline students who have violated the Student Code of Conduct. This is separate from the criminal process, but can result in serious consequences including expulsion or suspension.

Are your grades suffering because of the assault?

It will take some time to adjust after the assault and it is very common to have difficulties concentrating on studying or focusing on coursework. With your permission, The Office of Title IX can contact instructors on your behalf. Without disclosing any details, the Title IX Coordinator can explain that you are experiencing tremendous amounts of stress and need flexibility in meeting deadlines or request any other necessary accommodations. We also encourage students to communicate directly with their instructors in order to limit any possible misunderstandings about expectations and requirements.

There are a number of departments on campus that can support you in considering options that will allow you to successfully continue your academic career. Sometimes survivors decide that they need to reduce their course load or withdraw in order to be successful in the future and focus on the healing process. This is a big decision and we encourage you to speak with a mental health or advocate if you are considering these choices. If you think you need to receive an incomplete or need to withdraw from class, please contact the Title IX office.

Do you live in the same Residence Hall as the person that assaulted you?

You have the right to be safe in your home. If the alleged perpetrator lives in the same Residence Hall as you or you feel unsafe in your dorm room, please contact The Title IX Office. They can work with Housing and Residential Life to arrange for safe housing if you live on campus. If you live off campus and feel unsafe in your house, the Title IX Office may be able to assist you with finding shelter or other temporary housing.

Do you have concerns about the incident because you were drinking at the time?

No one deserves to be assaulted, no matter what the situation. BARTON has adopted the Amnesty and Good Samaritan policy where, Law enforcement will not issue tickets for underage drinking of a survivor or peers who come forward to Campus Safety, if there is a greater crime involved, such as sexual assault. For many reasons, survivors and peers may hesitate to come forward if she were under the influence of drugs or alcohol at the time of the assault. Many survivors worry about reporting because they may fear

getting in trouble for underage drinking, or may not remember everything or blame themselves for being intoxicated. Don't let this get in the way of reporting a sexual assault. If you report a sexual assault, you will not be sanctioned for underage drinking. Many accused use alcohol and other drugs to facilitate rape. The focus should be on the behavior of the accused, not the survivor. An individual who is physically incapacitated cannot legally consent to sexual contact. It is also important to make sure that you receive appropriate medical attention. No matter what you decide to do, remember that it was not your fault.

Are you worried about making a police report?

Making a police report after a sexual assault can be a very difficult decision for survivors. Uncertainty about reporting the assault is common, especially if you know the accused. Filing a police report is the first step in beginning the criminal justice process. SMART advocates or mental health counselors are here to assist you in making the best decision for yourself and supporting you throughout any process you choose to pursue. If you choose to make a report, an advocate or a mental health counselor can meet with you and go over in detail what the process will be like. If you choose to report the sexual assault, an advocate can be present with you while the report is taken at Campus Safety or law enforcement. For more information on police reporting and investigations, see the legal options section.

Are you concerned about telling your parents what happened?

If you tell your parents will it be more or less helpful to you? This is a very difficult question for survivors. Many people find it hard to disclose to their parents, but ultimately find parents' love and support helpful to their healing process. Some survivors may be concerned about hurting their parents or fear that their family may blame them for the attack. Only you can decide if and when to tell your family. A mental health counselor can help you process this decision and discuss the risks and benefits to disclosing to your family.

What if you have mutual friends or belong to the same groups as the accused?

This is a common situation since most assaults occur between acquaintances. People will likely take sides and you may find yourself distrusting friends. Surround yourself with people who support, respect, and believe you. Trust your instincts, and take steps to ensure your personal safety and well-being.

Do you worry about dating again?

Surviving a sexual assault involves having your control taken away from you and it may be difficult to regain trust. Go at your own pace. It may be helpful to start in larger social situations or go on double dates. At first, you may want to avoid situations where you feel isolated or lacking control. When you are ready to date, don't hesitate to be clear about your sexual limits.

Adapted from "Coping with Sexual Assault" by Terri Spahr Nelson

CAMPUS SEXUAL ASSAULT SURVIVOR BILL OF RIGHTS

As a student at Barton Community College, you have basic rights when it comes to being the survivor of a sexual assault on campus. The United States Congress enacted this *Bill of Rights* in 1992. Therefore, all colleges and universities participating in federal student aid programs are required to afford sexual assault survivors certain basic rights.

- Accuser and accused must have the same opportunity to have others present during the disciplinary process.
- Both parties shall be informed of the outcome of any disciplinary proceeding.
- Survivors shall be informed of their options to notify law enforcement.
- Survivors shall be notified of counseling services.
- Survivors shall be notified of options for changing academic and living situations.

Consent

Consent is defined as explicit approval and permission to engage in sexual activity demonstrated by clear actions, words, or writings. Informed consent is freely and voluntarily given, it is mutually understood by all parties involved. If coercion, intimidation, threats, and/or physical force are used, there is no consent. If a person is mentally or physically incapacitated or impaired so that the person could not understand the fact, nature, or extent of the sexual situation, there is no consent; this includes conditions due to alcohol or drug consumption, or being asleep or unconscious, or under the age of legal consent, or unable to give consent under current law. Silence does not constitute consent, and past consent of sexual activities does not imply ongoing future consent. Consent to some form of sexual activity cannot be automatically taken as consent to any other form of sexual activity. Consent can be withdrawn at any time and requires an outward demonstration through understandable words or actions. Consent is active, not passive. Silence, moving away, crying, being asleep, passed out, confined, emotionally manipulated, coerced, or intimidated is by this definition not consent.

Consent cannot be inferred from the absence of a “no”. Verbal communication, a clear “yes”, is the most reliable form of asking for and gauging consent, and individuals are thus urged to seek consent in verbal form. Talking with sexual partners about desires and limitation may seem awkward, but serves as the basis for positive sexual experiences shaped by mutual willingness and respect.

Reporting Options

- ❖ If you wish, you can call a friend, family member, a SMART advocate, or another trusted person to be with you for any of the following options.

THE OFFICE OF TITLE IX:

Contact The Office of Title IX at 620-786-7441 or refer to their website www.bartonccc.edu/smart and click on File a Report.

MAKING A POLICE REPORT: *(Not Anonymous or Confidential)*

Contact Campus Safety at 620-792-9217. When making the initial report, the officer will ask you for a description of the incident. The officer will also ask you about location of the incident, who was present, and other detailed information. Some questions an officer may ask will probably be difficult for you to answer, especially since it can be very emotional to talk about the assault. Keep in mind that the officer's duty is to be objective and gather as many facts as possible, they are not trying to blame you when they ask questions about the assault. It may be embarrassing to tell the officer details of the attack, but it is very important to provide as much information as possible to the police.

You can bring an advocate with you to campus safety during the reporting process to provide emotional support for you while the report is being taken.

MAKING AN ANONYMOUS REPORT: *(Anonymous but Not Confidential)*

By using this reporting option, you can provide Barton or law enforcement agencies with important information that may prevent other assaults or may alert police and others to specific high risk areas while maintaining your anonymity.

To make an anonymous report refer to BARTON Campus Safety's website at:

<http://bartonccc.edu/campussafety>

COUNSELING OFFICE OR STUDENT HEALTH SERVICES: *(Anonymous and Confidential)*

If medical attention is needed, you are encouraged to go to the medical facilities listed at the front of this packet if it's within 72 hours of the assault. You can also seek additional support services through the mental health services, also listed at the front of this packet.

If you do not want to pursue on- or off-campus charges:

You are still encouraged to seek medical attention by going to the nearest emergency room. Injuries may not be obvious at first. If you do not wish to report the sexual assault, ask that you be checked for injuries and Sexually Transmitted Diseases/ Infections (STD/STIs) and request preventative medications for STD/STIs and pregnancy. Medical facilities listed at the front of this packet can offer an STI exam and preventative medications. Student health services staff and mental health counselors do not need to make a legal report. They will be required to complete a Confidential Notification, in compliance with the federal Clery Act,

which advises Campus Police of an assault impacting a student on campus but does not include any survivor's names on their report.

Please know that emergency room hospital staff are required to automatically contact law enforcement if a rape kit is collected.

Kansas State Laws for Rape and Sexual Assault

Sexual assault laws in Kansas are defined in Kansas Statutes Annotated Chapter 21, Article 55.

Rape: K.S.A. 21-5503

Knowingly engaging in sexual intercourse with an individual who is overcome by force or fear, or an individual who is unconscious or physically powerless is a severity level 1 person felony in Kansas and carries up to 653 months in prison (54 years) if convicted.

Knowingly engaging in sexual intercourse when an individual is unable to give consent due to mental disease or defect or when an individual is unable to consent because of the effects of alcohol or drugs also constitutes a level 1 person felony which, again, can mean decades in prison.

Sexual intercourse with a child who is under the age of 14 also constitutes rape. If the offender is over the age of 18 while the victim is under the age of 14, the offense falls under the purview of what is commonly referred to as a "Jessica's Law" offense. Jessica's Law offenses are off-grid felonies in Kansas that carry harsh mandatory sentences.

Engaging in sexual intercourse with an individual whose consent is based upon a misrepresentation by the suspect that intercourse was a medical or therapeutic necessity is a severity level 2 person felony in Kansas.

Criminal Sodomy/Aggravated Criminal Sodomy: K.S.A. 21-5504

Criminal sodomy in Kansas includes anal or oral sexual penetration between individuals who are over the legal age of consent and members of the same sex. This sex crime law includes sodomy with a child who is over 14 years of age but less than 16 years of age; Or causing a child between the ages of 14 and 16 to engage in sodomy with any other person or animal.

Criminal sodomy based upon sexual contact with a child between the age of 14 and 16 is a severity level 3 person felony in Kansas and carries between 55 and 247 months in prison, depending upon the person's prior criminal history.

Aggravated criminal sodomy includes sodomy with a child under 14 years of age or causing a child under 14 to engage in sodomy with any person or animal. It also includes sodomy by force or fear, or sodomy without a victim's consent based upon mental disease or defect, the effect of alcohol or drugs, or sodomy when a person is unconscious or physically powerless. Each of these offenses is a level 1 person felony.

Sodomy with a child under 14 years of age when the offender is over the age of 18, is an off-grid felony, and falls within the purview of a Kansas Jessica's Law violation. More information on the aggravated sodomy laws in Kansas.

Sexual Battery/Aggravated Sexual Battery: K.S.A. 21-5505

Sexual battery is defined as the touching of a person over the age of 16 who is not the spouse of the offender when there is no consent. The touching must be committed with the intent to arouse or satisfy the sexual desires of the offender or another person.

Sexual battery in Kansas is a class A person misdemeanor and carries up to one year in jail and a \$2,500 fine if convicted.

Aggravated sexual battery is defined as the touching of an individual over the age of 16 who does not consent when that touching is committed with the intent to arouse or satisfy sexual desires of the offender; when the victim is overcome by force or fear; when the victim is unconscious or physically powerless, or when the victim is unable to give consent because of mental disease or defect or because of the effect of alcohol or drugs.

Kansas Aggravated sexual battery is a severity level 5 person felony carrying 31 and 136 months in prison.

Indecent Liberties with a Child/Aggravated Indecent Liberties with a Child: K.S.A. 21-5506

Under sexual assault law, indecent liberties with a child is defined in Kansas as the lewd fondling or touching of a child who is over the age of 14 but less than 16 when the fondling or touching is committed with the intent to arouse or satisfy the sexual desires of the child or the offender, or soliciting a child to engage in lewd fondling or touching of another person with the intent to arouse or satisfy sexual desires.

Indecent Liberties with a Child in Kansas may be a severity level 3 or severity level 4 person felony, depending upon the act itself.

Aggravated Indecent Liberties with a Child includes sexual intercourse with a child over the age of 14 but younger than 16; or engaging in lewd fondling or touching with a child over 14 but under 16 when the child does not consent.

Aggravated indecent liberties with a child is also defined as any lewd fondling or touching of a child under 14 years of age. When the offender is over 18, this sex crime is an off-grid person felony, and falls within the purview of a Kansas Jessica's Law.

When Aggravated Indecent Liberties is committed with a child over 14 years of age but under 16, the crime is a severity level three personal felony.

Unlawful Voluntary Sexual Relations: K.S.A. 21-5507

Unlawful voluntary sexual relations is defined in Kansas as engaging in voluntary sexual intercourse, voluntary sodomy or voluntary lewd fondling or touching with a child who is over 14 years of age but less than 16 years of age when the offender is less than 19 years of age and is less than four years older than the victim.

This crime also requires that the child and offender are members of the opposite sex and the only parties involved in the act. Unlawful intercourse constitutes a severity level 8 person felony. Sodomy constitutes a severity level 9 person felony and lewd fondling or touching constitutes level 10 person felony.

Indecent Solicitation of a Child/Aggravated Indecent Solicitation of a Child: K.S.A. 21-5508

An arrest for solicitation under this sex crime law is defined as enticing, inviting or persuading a child over 14 but less than 16 to commit or consent to an unlawful sexual act or persuading such a child to enter a vehicle, building, room or secluded place in order to perpetrate an unlawful sexual act upon or with the child. Indecent solicitation is a severity level 6 person felony.

Aggravated indecent solicitation is defined as above for a victim under the age of 14. Aggravated indecent solicitation constitutes a severity level 5 person felony.

Electronic Solicitation: K.S.A. 21-5509

Electronic solicitation is defined as utilizing electronic means such as telephone, internet, etc. in order to entice or solicit a child, or person whom the offender believes to be a child, to commit or submit to an unlawful sexual act. If the offender believes the person to be a child over 14 but less than 16, the crime constitutes a severity level 3 person felony. If the offender believes the person is a child under 14 years old, the act constitutes a severity level 1 person felony.

These Internet solicitation cases are frequently the result of undercover sting operations conducted online and in the field by law enforcement operatives. An electronic or Internet solicitation case relies heavily on technology to prove the intended solicitation, and will require a sex crime defense lawyer who is very familiar with the technologies and tactics used by the prosecution.

Sexual Exploitation of a Child: K.S.A. 21-5510

This sex crime is commonly referred to as Possession of Child Pornography in Kansas. It is defined as possessing any visual depiction of a child under the age of 18 who is shown

or heard engaging in sexually explicit conduct for the purpose of arousing or satisfying sexual desires of the offender or any other person.

A parent or guardian who has custody or control of a child and knowingly permits such child to engage in, or assist another to engage in sexually explicit conduct for the purpose of promoting a performance, or for the purpose of obtaining a visual depiction also constitutes sexual exploitation of a child.

Either of these two acts constitutes a severity level 5 person felony in Kansas.

Unlawful Sexual Relations: K.S.A. 21-5512

Unlawful sexual relations is defined as engaging in consensual sexual intercourse, lewd fondling or touching, or sodomy when the offender is in a position of power or influence, while the victim is particularly susceptible to this power, influence or manipulation.

Persons falling under this sex crime include teachers, police officers, correctional officers, employees and contractors of jails and prisons. Unlawful sexual relations may constitute a level 4 or 5 person felony, depending on the act and the role of the parties involved.

Lewd and Lascivious Behavior: K.S.A. 21-5513

Lewd and lascivious behavior is defined as publicly engaging in otherwise lawful sexual intercourse or sodomy with knowledge or reasonable anticipation that the participants are being viewed by others.

This sex crime also includes publicly exposing a sex organ or exposing a sex organ in the presence of a person who is not the spouse of the offender, and who has not consented thereto, with intent to arouse or gratify the sexual desires of the offender or another.

If committed in the presence of a person 16 years or older, this is a Class B nonperson misdemeanor. If committed in the presence of a person younger than 16, it is a severity level 9 person felony.

Other Kansas sexual offenses include prostitution, promotion of prostitution, incest, aggravated incest, and patronizing a prostitute

Medical Information & Options

Seeking medical attention will allow you to receive treatment for any physical injuries, sexually transmitted infections, or a possible pregnancy. At times, survivors may be unaware of internal injuries that require medical attention. It can also be reassuring to speak with a doctor or nurse about your medical concerns.

The medical facilities listed in the front of this packet are places to receive medical treatment after a sexual assault. An emergency room is a place that provides sexual assault evidence collection exams (also known as SARS, or Sexual Assault Resource Services).

MEDICAL/EVIDENCIARY EXAMS (SARS EXAMS)

SARS exams are performed by extensively trained Sexual Assault Nurse Examiners (SANE). These professionals are sensitive to the needs of survivors and specialize in collecting evidence for investigations and prosecutions. Even if you are unsure about reporting the crime, it is still helpful to go to the hospital for an exam. SARS exams can be performed up to 5 days after an assault, and evidence will be maintained for one year in case you decide to make a police report. You may withdraw consent at any time during the exam.

Medical exams are important...

- To document any injuries and to begin treatment of injuries.
- To prevent sexually transmitted diseases and to evaluate risk of pregnancy.
- To collect DNA evidence for possible prosecution if and when a suspect is caught. It is vital that evidence is collected as soon as possible, because it will be destroyed as time passes.
- If you feel you were drugged, please notify the medical professional so they can rule-out a drug and/or alcohol facilitated sexual assault.

If you are interested in getting a SARS exam...

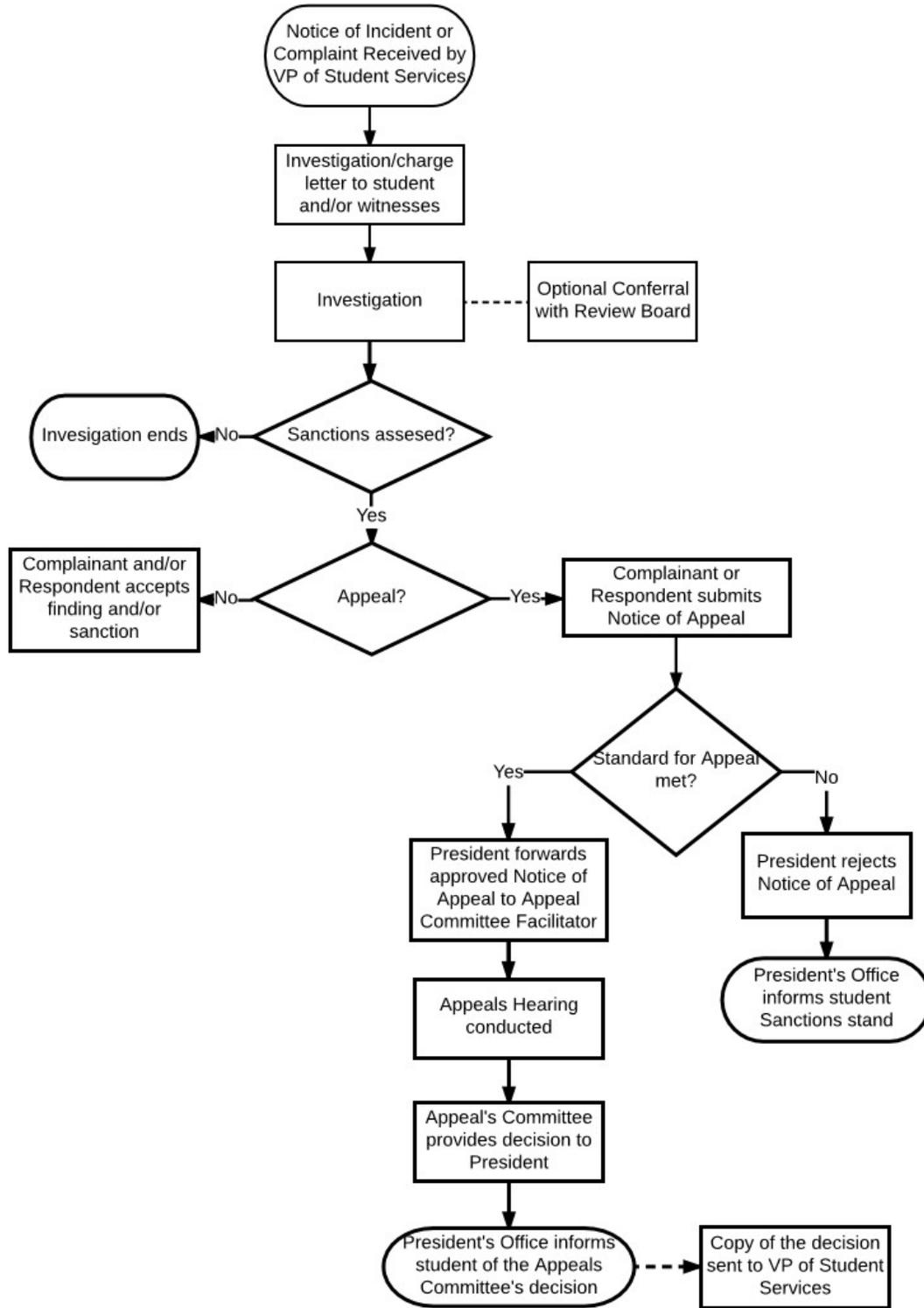
- As hard as it may feel not to clean up, doing so may destroy important evidence.
- You are encouraged not to shower, bathe, douche, wash hands, brush teeth, comb hair, or use the toilet before going to the ER. Try not to change or wash clothing.
- If you do any of the above things, but are still within the 5-day timeline, you can still go to the hospital for an exam.

- If you go home first, you may want to bring clean clothes with you to the hospital, because the clothing that you wore during the assault may be kept as evidence. However, if you go directly to the hospital, the advocate will provide you with clothing when you leave.
- Call one of the medical facilities listed in the front of this packet.

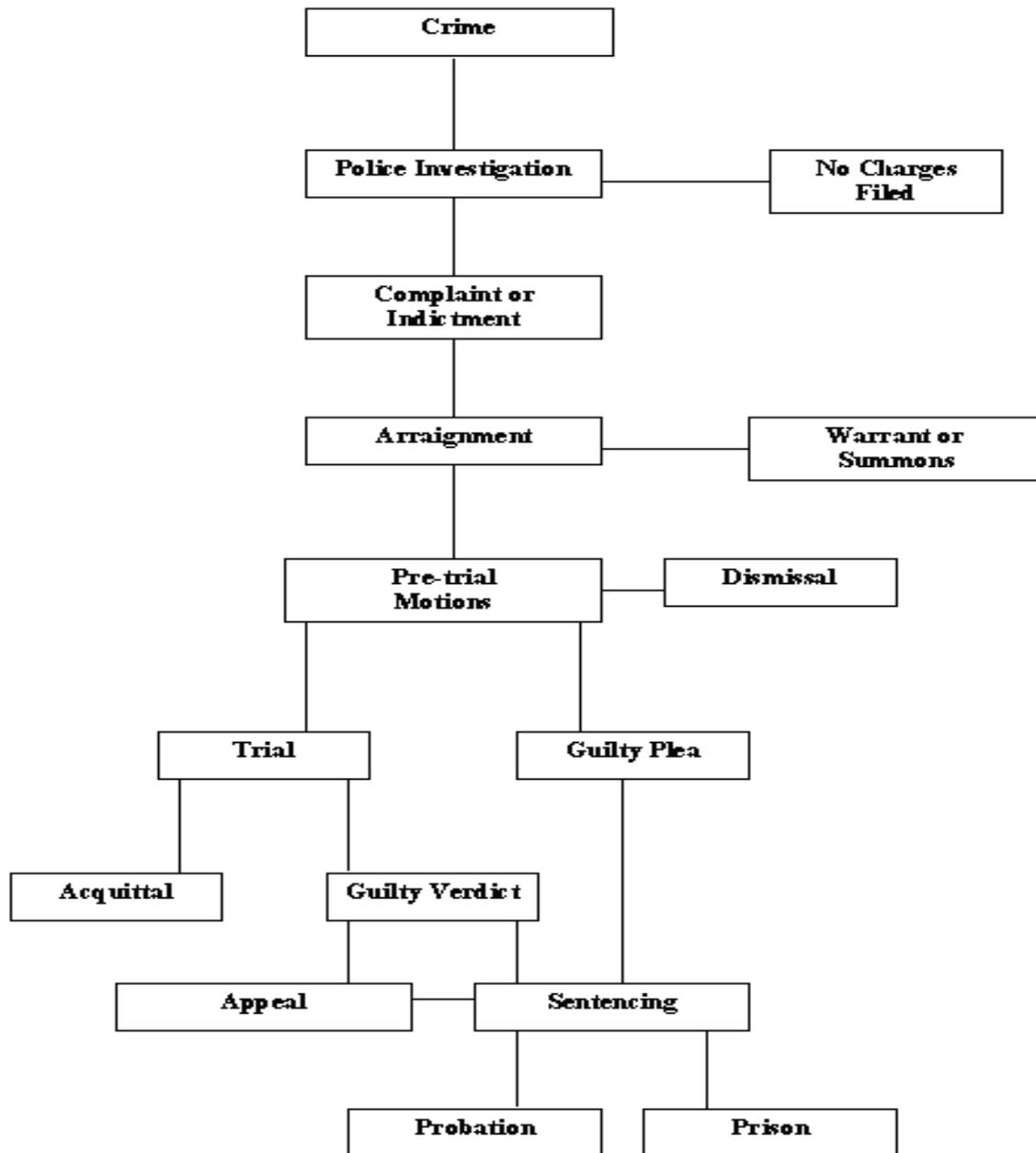
SARS Exam Costs

- **In Kansas, the county where the sexual assault occurred pays for the exam regardless of insurance coverage.** The SARS exam can be done at most Hospital Emergency Rooms. When a survivor agrees to a SARS exam, a waiver must be signed by the survivor to allow the collection of evidence.

BARTON STUDENT SEXUAL MISCONDUCT INVESTIGATION PROCESS



CRIMINAL JUSTICE PROCESS



What is Sexual Assault?

Sexual assault is the sexual exploitation, forcible penetration, or an act of sexual contact on the body of another person, male or female, without his or her consent, anal or vaginal penetration of another individual against that person's will and/or without that person's consent; any oral penetration of another individual by a sexual organ against that person's will and/or without that person's consent; or any insertion of another individual's genitals into one's mouth, anus, or vagina against that person's will and/or without that person's consent. Sexual assault may include any involuntary sexual act in which a person is threatened, coerced, or forced to engage in against his or her will or while temporarily or permanently incapacitated. Sexual assault may be committed by a stranger or by a person known by the victim, including persons who are married or in a dating relationship with the victim.

Acts defined as sexual assault include rape, date rape, acquaintance rape, and gang rape, but may also include sexual touching of another person against his or her will or without consent, and forcing an unwilling person to touch another person sexually.

Non-consensual sexual intercourse includes: vaginal or anal penetration by a penis, object, tongue or finger, and oral copulation (mouth to genital contact), no matter how slight the penetration or contact.

Sexual assault occurs when sexual acts are committed either without consent, by force, threat, or intimidation, or through the use of the victim's mental or physical helplessness or incapacitation, of which the assailant was aware or should have been reasonably aware.

According to the National Institute of Justice, 90% of college rape victims know their attacker.¹ The perpetrator may be the survivor's best friend, lover, partner, date, family member, neighbor, classmate, etc. Sexual assault is a criminal act that can be prosecuted under Kansas law, as well as under the Barton Community College Code of Conduct and Policy & Procedure 1132.

REPORTING

Sexual assault remains the most drastically underreported crime in the U.S. In college fewer than 5% of completed or attempted rapes were reported to the police. Reporting rates are low for a variety of reasons. A survivor may be uncertain whether what happened was actually rape, especially since force in

sex is widely accepted as “normal.” Rapes that are perpetrated by acquaintances are often trivialized as “not so bad” because it does not fit common social understandings of rape (i.e. many people assume that rape is only committed by strangers). A survivor may think that she will not be believed or even blamed by police, courts, and friends. This is a very legitimate fear for survivors due to a general lack of accountability for perpetrators. The majority of rapes are rarely successfully prosecuted because of the prevalence of rape myths and widespread misunderstanding about the reality of sexual assault.

¹ Fisher et al. *The Sexual Victimization of College Women*, National Institute of Justice, 2001.

² National Institute of Justice, 2004 (http://www.ojp.usdoj.gov/nij/vawprog/vaw_portfolio.pdf)

Myths and Facts about Sexual Assault

MYTH: The primary motive for rape is sexual.

FACT: The primary motives for rape are aggression and power, not sex. Rapists have a desire to dominate, humiliate and degrade their victims. Rape is not the result of “pent up” sexual desire, as many accused report that she does not enjoy the sex act *per se* during rape. In fact, most accused have access to a consensual sexual relationship with a wife or lover.

MYTH: Women are sexually assaulted because they “ask for it” in some way.

FACT: Attempts to shift the burden of blame from the accused to the victim by implying that “she asked for it” are common. There is nothing a person does to “deserve” a sexual assault – the way a woman dresses, her alcohol consumption, or her sexual history are used as excuses to justify the rapist’s behavior. By blaming the survivor, the attention is directed away from the accused, diminishing the accused’s responsibility for the attack. Blaming a woman for her rape because of how she acts or what she wears is like blaming a bank for being robbed because it “tempted” the thief with all that money.

MYTH: A woman can nearly always prevent an assault by resisting her attacker.

FACT: Every sexual assault is unique and the issue of resistance and submission should be evaluated individually. Resistance could deter an attack, or it could conceivably increase one’s chances of injury and perhaps result in death. The survivor needs to do whatever she feels comfortable doing to extricate herself from the situation. She should rely on her instincts, and whatever she does is correct for her. Even if she must submit, this does not imply consent, and in fact, may keep her alive.

MYTH: Many women falsely report rape as a means of revenge or to get attention.

FACT: Sexual assaults are very rarely falsely reported. The rate of “false reports” of rape (fabricated stories) is 2% to 3%, no different than other crimes. [Schafran, L.H. (1993). “Writing and reading about rape: A primer.” *St. John’s Law Review*, 66, 979-1045.] The general misconception of a high rate of false reports of sexual assaults may be confused with observations of low conviction rates of offenders. The much bigger issue is the low percentage of rapes that are reported to the police; less than 5% of rapes on college campuses are reported to law enforcement (*National Institute of Justice*, 2004).

MYTH: Rapists are easily identifiable by their physical appearance, actions, or words.

FACT: There is no standard mental or physical profile that defines a rapist. A rapist can be someone of any age, race, economic background, belief system, or culture. Although the stereotype of the deranged stranger rapist abounds in our society, stranger rapes only make up around 20% of all sexual assaults, and even then the stranger may not be a mentally disturbed person. The vast majority of rapes are committed by someone the survivor knows, someone she sees in day to day life.

MYTH: Most sexual assaults are interracial.

FACT: Most sexual assaults take place between members of the same race. White survivors tend to report African-American offenders more frequently than white offenders, and African-American survivors tend to underreport assaults in general, but especially if the offender is white. African-American offenders tend to be convicted in disproportionately higher numbers based on arrest rates. The myth that African-American men rape only white women may be perpetuated by the publicity given to those assaults fitting cultural and racial stereotypes.

MYTH: When a woman says “no,” she might really mean “yes.”

FACT: This myth is common in dating situations. When a person says “no,” that person’s partner must assume she means nothing other than “no.” If a person does not explicitly consent to an act of sex, in the form of a “yes” or similar phrasing, that person has not consented. Silence on a person’s behalf must be taken as a “no” rather than consent. Rape is not just a matter of miscommunication. However, communication is vital in sexual situations.

MYTH: Rape and sexual assault can only be perpetrated by men against women.

FACT: Although 90% of victims are female and 95% of rapists are male, men can also be assaulted by women. In addition, same-sex sexual assaults occur as well, regardless of sexual orientation.

Myths and Facts about Male Sexual Assault

MYTH: Only women can be raped.

FACT: Men can and are sexually assaulted every day.

MYTH: Men who rape other men are gay.

FACT: Rape is not about sexual preference or desire - it is an act of *power and control*. The motivation of the rapist is to humiliate and brutalize another person. A survey of convicted rapists found that at least half of these men did not care about the sex of their victims; they raped both men and women. Most male rapists are either heterosexual or suffer great confusion about their sexual identity.

MYTH: Men who rape other men are psychotic.

FACT: There is no evidence to support this belief. Rape is a reflection of a society that trains men to strive to dominate and control others and to avoid the open expression and acknowledgment of feelings.

MYTH: Survivors of male rape must be gay.

FACT: Both straight and gay men can be raped: most studies report that at least half (and more often the clear majority) of survivors are exclusively heterosexual.

MYTH: Rape is something that doesn't happen to "real men".

FACT: Rape is something that can and does happen to an entire spectrum of men, regardless of physical strength or fighting prowess. Reported survivors have included a boxer and a 6'2" man weighing 200 lbs. Being raped does not mean that the survivor is weak or a "wimp." Anyone can be overpowered or taken by surprise. Size and strength are often no match for weapons, overwhelming odds or surprise attacks.

MYTH: Male rape only happens in prison, and is due to the lack of sexually available women.

FACT: The rape of men in prisons is a classic example of men using rape as a means of experiencing themselves as powerful and in control. Male rape happens much more often in society at large than we realize, but the survivors rarely tell anyone. Many rape crisis centers report that as many as 10% of their callers are male survivors.

MYTH: A man cannot have an erection if frightened.

FACT: All studies so far have found that survivors commonly do report erections and even ejaculations during even the most vicious attacks. These are uncontrollable automatic physiological responses and do not mean the survivor enjoyed the experience.

MYTH: **Women don't rape men.**

FACT: Women can and do rape men, although this seems much less common than rape by men. Sexual assault of a man by one or more women is just as serious as any other type of violation of any other survivor.

MYTH: **Being raped reflects upon the survivor's manhood.**

FACT: It is important to remember that a survivor of rape, whether male or female, was not at fault or responsible. Recovering from rape demands that we realize and combat rape myths about both male and female survivors.

MYTH: **Men deal better with personal/physical crisis and attacks than women do, and will therefore get over a rape more quickly and without help.**

FACT: There is growing evidence that men heal from this type of experience with greater difficulty. Men characteristically deal with this sort of trauma by trying to ignore it. This reluctance to seek therapy or support hinders recovery, and many men remain traumatized by the crime for years.

MYTH: **There is nothing a man can do to help another man who has been victimized by rape.**

FACT: Like the women's movement, a movement among men toward supporting and helping one another will be a giant step in beginning to effectively address the needs of male survivors. Exposing and attacking the myths and disseminating the facts about male rape are steps in this direction.

**Information was taken from Crime Victim's Digest, April 1987*

National Sexual Assault Statistics

- An eight-year study indicated that when perpetrators of rape are current or former husbands or boyfriends, the crimes go unreported to the police 77 percent of the time. When the perpetrators are friends or acquaintances, the rapes go unreported 61 percent of the time; and when the perpetrators are strangers, the rapes go unreported 54 percent of the time (Bureau of Justice Statistics, 2002).
- Among college students nationwide, between 20% and 25% of women reported experiencing completed or attempted rape (Fisher, Cullen, and Turner 2000).⁵
- Approximately 1.9 million women are assaulted annually in the U.S.
National of Justice, 2000 (www.ncjrs.org/txtfiles/172837.txt)
- Approximately 1 million women and 371,000 men are stalked annually in the U.S.
National Institute of Justice, 2000 (www.ncjrs.org/pdffiles1/nij/183781.pdf)
- 6,293,743 of women surveyed have experienced rape and/or some form of physical assault during the past 12 months.
National Institute of Justice, 2000 (<http://www.ncjrs.gov/txtfiles1/nij/183781.txt>)
- Nearly one-fifth of women (17.6%) reported experiencing a completed or attempted rape at some time in their lives; one in 33 men (3%) reported experiencing a completed or attempted rape at some time in their lives.
National Violence Against Women Survey, 2000 (www.ncjrs.org/txtfiles/172837.txt)
- Women are more likely to be survivors of sexual violence than men: 78% of the survivors of rape and sexual assault are women and 22% are men (Tjaden and Thoennes 2000).
- Most perpetrators of sexual violence are men. Among acts of sexual violence committed against women since the age of 18, 100% of rapes, 92% of physical assaults, and 97% of stalking acts were perpetrated by men. Sexual violence against men is also mainly male violence: 70% of rapes, 86% of physical assaults, and 65% of stalking acts were perpetrated by men (Tjaden and Thoennes 2000).
- Among adults who report being raped, women experienced 2.9 rapes and men experienced 1.2 rapes in the previous year (Tjaden and Thoennes 2000).
- More than half of all rapes of women (54%) occur before age 18; 22% of these⁵ as rapes occur before age 12. For men, 75% of all rapes occur before age 18, and 48% occur before age 12 (Tjaden and Thoennes 2000).⁶

⁵ as taken from the Centers for Disease Control and Prevention <http://www.cdc.gov/ncipc/factsheets/svfacts.htm>)

⁶ as taken from the Centers for Disease Control and Prevention <http://www.cdc.gov/ncipc/factsheets/svfacts.htm>).