



IT'S TIME ... TO TALK ABOUT IT! CONNECT. RESPECT. PREVENT SEXUAL VIOLENCE.

## It's time ... to connect. Here are tips for health care professionals.

**H**ealth care providers play a vital role in responding to the needs of victims and survivors. This fact sheet provides information about sexual assault and how health care professionals can assist victims. Together we can build a community working to prevent sexual assault.

### What is sexual violence?

Sexual violence means that someone forces or manipulates someone else into unwanted sexual activity without their consent. Reasons someone might not consent include fear, age, illness, disability, and/or influence of alcohol or other drugs. Consent can be initially given and later withdrawn.

Sexual violence is a crime that comes in many forms, including forced intercourse, sexual contact or touching, sexual harassment, sexual exploitation, and exposure or voyeurism.

Keep in mind that sexual violence is never the victim's fault. Regardless of what she or he is wearing or doing, if either person was drinking or if there is a relationship between both people, sex without consent is rape.

### Sexual violence at a glance

- Rape is far more extensive than reported in official statistics, and the majority of rapists are never apprehended (Carr & VanDeusen, 2004).
- In the year following a rape, the average level of health care service use increases 18% over pre-rape levels; during the second year,

post-rape service use increases 56%. (Koss, Koss, & Woodruff, 1991).

- Rape, childhood sexual abuse, and domestic abuse are among the most common causes of Post Traumatic Stress Disorder (PTSD) in women. The chances that a woman will develop PTSD after being raped are between 50% and 95% (Heise, Ellsberg & Gottemoeller, 1999).
- Among college women, nine out of 10 victims of rape and sexual assault knew their offender (Fisher, Cullen, & Turner, 2000).

### Your role

As a health care professional, you may be one of the first people a victim chooses to talk to about his or her assault. It is important to take any reports of sexual violence seriously. Listen and always believe the victim. Using thorough and respectful screening, health care providers can help survivors obtain care for past instances of abuse.

Some ways you can help improve the response to and prevention of sexual violence in your community include:

- Place materials and information about



IT'S TIME ... TO TALK ABOUT IT! CONNECT. RESPECT. PREVENT SEXUAL VIOLENCE.

sexual violence and local resources for victims in the waiting area of your health center. Include materials about the prevention of sexual violence, which impacts everyone in the community.

- Add screening questions about sexual victimization, stalking, and domestic or dating violence to your health care center's intake forms and conduct an oral screening of your patients. Remind staff to review intake forms before interacting with patients. Staff should feel comfortable in addressing these topics with patients.

- Refer rape victims to appropriate providers for evidence collection (forensic exam kits) and specialized treatment, if the victim is seeking services that are not available within your health center. Contact your local rape crisis center to learn more about medical services for sexual assault victims.

- Ensure that victims have 24-hour access to treatment through community medical services (CALCASA, 2005).

- Become involved in coordinated community response efforts (like a local Sexual Assault Response Team).

- Incorporate messages about sexual violence prevention and resources for victims in other health education and outreach materials and efforts.

- Help sponsor or participate in sexual assault awareness and prevention events throughout the community.

## Resources

For more information, visit:

- **Centers for Disease Control and Prevention (CDC)** [www.cdc.gov](http://www.cdc.gov)

- **National Sexual Violence Resource Center (NSVRC)** [www.nsvrc.org](http://www.nsvrc.org)

- **Rape, Abuse and Incest National Network (RAINN)** [www.rainn.org](http://www.rainn.org)

## References

California Coalition Against Sexual Assault (CALCASA). (2005). *Campus violence prevention resource guides: Health center staff*. Sacramento, CA: California Coalition Against Sexual Assault.

Carr, J., & VanDeusen, K. (2004). Risk factors for male sexual aggression on college campuses. *Journal of Interpersonal Violence*, 19, 279-289. doi: 10.1023/B:JOFV.0000042078.55308.4d

Fisher, B., Cullen, I., & Turner, M. (2000). *National Institute of Justice research report: Sexual victimization of college women*. Retrieved from [www.ncjrs.gov/pdffiles1/nij/182369.pdf](http://www.ncjrs.gov/pdffiles1/nij/182369.pdf)

Heise, L., Ellsberg, M. & Gottemoeller, M. (1999). Ending Violence Against Women. *Population Reports* (Series L, No. 11). Retrieved from <http://www.k4health.org/system/files/L%2011.pdf>

Koss, M.P., Koss, P.G., & Woodruff, W.J. (1991). Deleterious effects of criminal victimization on women's health and medical utilization. *Archives of Internal Medicine*, 151, 342-347.