

ACTION STEPS: HEALTH CARE PROFESSIONALS

As a health care professional, your patients' health is your priority. You might be one of the first people a victim chooses to talk to about an experience of sexual violence. While your focus often is on treating a victim in the aftermath of sexual violence, you also are a critical part of primary prevention (preventing violence before it occurs).

What is sexual violence?

Sexual violence occurs when someone is forced or coerced into unwanted sexual activity without agreeing or consenting. Reasons someone might not be able to consent include:

- fear
- being underage
- having illness or disability
- incapacitation due to alcohol and other drugs

Consent initially can be given and later be withdrawn.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.

Sexual violence is never the victim's fault. It does not matter what the victim is wearing or doing, whether the victim has been drinking, or what type of relationship the victim has with the person who is sexually abusing them.

Sexual violence on campus

- One in five women will be a victim of completed or attempted sexual assault while in college. (Krebs, Lindquist, Warner, Fisher, & Martin, 2007)
- One in 16 men will be a victim of sexual assault during college. (Krebs et al., 2007)
- More than 90% of sexual assault victims on college campuses do not report the assault (Fisher et al., 2000)

SEXUAL VIOLENCE IMPACTS HEALTH

- Survivors of rape are more likely to report frequent headaches, chronic pain, difficulty sleeping, activity limitations, poor physical health, and poor mental health compared with people who have never been raped. (Black et al., 2011)
- In the year following a rape, the average level of health care use increases 18% more than pre-rape levels; during the second year, post-rape service use increases 56%. (Koss, Koss, & Woodruff, 1991)
- The chances that a woman will develop post-traumatic stress disorder (PTSD) after being raped are between 50% and 95%. (Heise, Ellsberg, & Gottemoeller, 1999)

TAKE ACTION: Educate

- Talk with your patients about sex in a way that focuses on individual choices along the continuum of sexual activity. Use these conversations to identify and normalize healthy sexuality (National Sexual Violence Resource Center [NSVRC], 2012) that respects gender, sexual orientation, and gender identity. (American College Health Association [ACHA], 2008).

- Reinforce the meaning of consent for your patients when discussing sexual health. Consent is a voluntary, sober, enthusiastic, mutual, and honest verbal agreement. It can't be coerced. The absence of a "no" doesn't mean "yes." Consent must be asked for during every step of the way. (ACHA, 2008).
- Provide patients with information about sexual violence and local resources, such as *Understanding healthy sexuality and consent*.
- Share your knowledge with other providers by presenting a training on sexual violence prevention.

Health care professionals play
a critical role in prevention.

TAKE ACTION: Integrate

- Build your practice's capacity to provide trauma-informed (Substance Abuse & Mental Health Services Administration [SAMHSA], 2012), survivor-centered care.
- Develop protocols (NSVRC, 2011) that ensure consistent, effective practices for providing care to patients who experience sexual violence. This should include screening patients for sexual violence at every opportunity.
- Enhance your services for early identification of risk factors for victimization or perpetration. Risk factors that increase one's risk of committing rape include using alcohol, lacking inhibitions to suppress associations between sex and aggression, having attitudes and beliefs that support sexual violence, associating with sexually-aggressive peers, and having

experienced abuse as a child (NSVRC, 2004; Tharp et al., 2013). Refer patients to local resources to address these risk factors.

TAKE ACTION: Be a role model

- Patients trust health care providers. Actively model respectful, equitable behavior in your interactions with colleagues and patients.
- Be an active bystander and intervene (NSVRC, 2013) when you witness inappropriate behavior. If patients or colleagues make sexist comments or joke about rape, speak up and explain why that is not acceptable behavior.

TAKE ACTION: Engage

- Talk with the Title IX Coordinator, campus women's center, or another partner to:
 - Find and attend a training on sexual violence prevention.
 - Become involved in campus sexual violence prevention and response efforts. The campus health system should have a robust presence at the table.
 - Get information and resources that you can give to patients.
- Build a strong referral program for sexual assault advocacy and services by partnering with local rape crisis centers.

Learn more

- **American Academy of Pediatrics**
Preventing Sexual Violence: An Educational Toolkit for Health Care Professionals
<http://www2.aap.org/pubserv/PSVpreview/pages/main.html>
- **Academy on Violence and Abuse**
Competencies Needed by Health Professionals for Addressing Exposure to Violence and Abuse in Patient Care:

<http://nsvrc.org/sites/default/files/CoreCompetenciesRevApril2011.pdf>

- **National Online Resource Center on Violence Against Women**

Screening for Sexual Violence: Gaps in Research and Recommendations for Change: http://www.vawnet.org/Assoc_Files_VAWnet/AR_ScreeningforSV.pdf

- **Pennsylvania Coalition Against Rape**
Health care issues and survivors of sexual violence: http://www.pcar.org/sites/default/files/resource-pdfs/tab_2010_fall_healthcareandsurvivors.pdf

- **National Sexual Violence Resource Center**
Assessing patients for sexual violence: A guide for health care providers: http://www.nsvrc.org/sites/default/files/Publications_NSVRC_Guides_Assessing-patients-for-sexual-violence.pdf

Resources

- **Clery Center For Security On Campus:** www.clerycenter.org
- **Know Your IX:** www.knowyourix.org
- **American College Health Association:** www.acha.org/topics/violence.cfm
- **National Sexual Violence Resource Center:** www.nsvrc.org
- **PreventConnect:** www.preventconnect.org
- **Not Alone:** www.notalone.gov

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