Adapted from the Survivor’s Handbook by the Center for Women and Families (Louisville, KY)
To the Survivor,

It is estimated that 200,000 people are sexually assaulted in detention each year. You are not alone.

The purpose of this booklet is to help you and your loved ones heal after experiencing a sexual assault. Even if you aren’t up to reading any or all of it right away, please hold onto this because information that might not seem relevant today, you may want or need tomorrow.

No matter what, you are not to blame for what happened to you. No one deserves to be sexually assaulted. The perpetrator alone is responsible for his or her actions. During a trauma, our bodies go on autopilot and we often do not make conscious choices about how to respond. Whether or not you were able to fight back in the moment, you are not to blame for the sexual assault. If you’ve been through an assault, it means you did what you needed to do to survive.

You may be experiencing any number of the reactions you will read about in this book. Or you may feel very little at all—you may feel numb. These reactions are all normal and, in most cases, temporary. Symptoms may be worse when reminded of the assault or on the anniversary date of the assault.

Your view of the world may have changed. Your relationships could be affected. Your faith may be challenged. Remember that you experienced a tremendous loss and a period of grief is normal. Healing takes time, and there is no single “right way” to heal.

Please know that there are people willing to listen when you are ready.

Yours,

Staff at your regional rape crisis program

*Find your local rape crisis program on page 11
Was I sexually assaulted?

What if I didn’t resist physically? Just because you didn’t resist physically doesn’t mean it wasn’t sexual assault. In fact, many victims make the conscious decision that physical resistance would cause the perpetrator to become more violent. Lack of consent can be expressed (saying “no”) or it can be implied from the circumstances (for example, if you were under the age of consent, if you were temporarily incapacitated, or if you were afraid to say no because the perpetrator threatened to harm you or a loved one). If you are under the care and supervision of corrections, it is also not possible for you to consent to sexual contact with staff.

What if I used to date or I’m currently with the person who assaulted me? Sexual assault can occur when the perpetrator and the victim have a pre-existing relationship (sometimes called “date rape” or “acquaintance rape”) or even when the perpetrator is a victim’s spouse. It does not matter whether the other person is an ex- lover or a complete stranger, and it doesn’t matter if you’ve had sex in the past.

What if my body had a sexual response? Our bodies are built to respond to touch. While it doesn’t always happen, experiencing a sexual response during an assault is the body’s natural physiological reaction. It is not an indication that you “asked for” or enjoyed the assault.

What if the person gave me gifts or special favors? If you did not want to enter into a sexual relationship with someone else, or if you felt forced, it was not consensual. Oftentimes predators will purposefully make you feel like you owe them something to coerce you into sexual activity. Accepting gifts or favors does not mean you consent to sexual activity.

Medical Care

Medical care may be necessary after a sexual assault to address injuries, prevent disease and/or pregnancy and to collect evidence.

SEXUAL ASSAULT EXAM

• If you give your consent for an exam following a sexual assault, a trained SANE (Sexual Assault Nurse Examiner) or an ER doctor will administer it.

• The examination process may last 2-6 hours.

• The collection of forensic evidence is best performed within 4 days of the assault. After this time, most DNA evidence is gone, but other portions of the exam may still be performed.

• Your clothing, shoes and accessories may be collected as evidence and you will NOT get these items back.

• You have the right to have an advocate be present throughout the exam.
THE EXAM ENTAILS:

• An interview regarding details of assault

• A complete head to toe examination to identify visible injuries
  » Collection of forensic evidence
  » Photographing injuries
  » Detailed genital exam to identify injuries and collect evidence
  » Offering medications to treat common sexually transmitted infections
  » Offering HIV preventive medications if you qualify
  » Offering Plan B (to prevent pregnancy) if the assault happened within the last 5 days

Remember: You have the right to feel safe and to refuse any or all parts of the exam.

FOLLOW-UP CARE

• Please read discharge follow-up instructions provided by the hospital or SANE Clinic. This will detail your medication regimen and specify any additional medical care required including blood tests, testing for sexually transmitted infections, further medication, etc.

It happened to me...where do I go from here?

• Be honest with yourself about your feelings and thoughts

• Honor your survival and try not to punish yourself with “If only I had...”

• Talk to people you trust

• Take care of yourself as much as possible- get rest, avoid excessive use of alcohol or drugs, and make sure to eat

• Ask for help from family, friends, staff, or a trusted individual

Remember, you do not have to go through this alone. There are trained counselors available by phone 24/7.
Common Reactions

These are some physical, mental, emotional and social reactions common to survivors of sexual violence.

If you identify with some or many of these reactions, you might find counseling helpful.

**YOUR BODY.** After a trauma, your body may have reactions such as: Nausea • Headaches • Sleep difficulty • Changes in menstrual cycle • Fatigue • Change in sexual desire • Exaggerated startle response • High levels of stress

**YOUR THOUGHTS.** After a trauma, you may have difficulty concentrating and making decisions. You may experience: Flashbacks • Memory loss • Nightmares • Racing thoughts • Self-blame • Confusion • Thoughts of hurting yourself or someone else

**YOUR EMOTIONS.** Experiencing a trauma is likely to bring a wide range of emotional responses including: Depression • Guilt • Shame • Anger • Sadness • Irritability • Grief • Fear • Anxiety • Mood swings • Numbness • Emptiness • Feeling out of control

**YOUR SOCIAL INTERACTIONS.** Trauma can bring about changes in how you interact with those around you including: Isolation from friends and family • Avoiding places and people • Fear of being alone • Change in sexual behavior • Loss of interest in things you used to enjoy

**LGBTQ Survivors of Sexual Violence**

Survivors who identify as Lesbian, Gay, Bisexual, Transgender, Questioning, or Queer may experience similar feelings, thoughts, and reactions as heterosexual/straight/cisgender people. However, unique experiences may include:

- Increased isolation from friends and family.
- Fear of being “outed”
- Internalized homophobia or transphobia, which may increase self-blame
- Stereotypes of LGBTQ survivors as hyper-sexual or deviant
- LGBTQ individuals are 10x more likely to be assaulted in detention
- Sexual assault may be used as a hate crime against LGBTQ individuals
Male Survivors of Sexual Violence

2.78 million men in the United States have been sexually assaulted. Men who survive sexual violence may experience similar feelings, thoughts, and reactions as other survivors. However, unique experiences may include:

- Doubts about masculinity
- Fears of being seen as weak or vulnerable by other inmates
- Guilt and shame for involuntary bodily responses during sexual assault
- Risk of retaliation from other inmates or staff
- Questioning of sexual orientation
- Fears that others will scrutinize or judge sexuality
- Belief that friends and family cannot understand what you are going through

There are trained advocates ready and willing to listen to your story whenever you are ready.

Triggers

A trigger is something that sets off a memory of, or flashback to, an event. Triggers come in many forms and may be sounds, smells, sights, or anything else that an individual may associate with an assault. Triggers are different for everybody. It is important to learn to recognize them and plan for how to handle them when they come up. The next sections on self-care and safety planning are designed to give you some tools for remaining in the moment and coping with physical and emotional dangers that may arise.

Self-Care

The process of healing from trauma can be different for each person. Sometimes, you may experience flashbacks or dreams about the assault. It is also completely normal to go through times of feeling numb. Coping skills are tools that you can use in times where you feel out of control or unable to stop intrusive thoughts resulting from the trauma. These techniques can also be used to relax in general during stressful times. Only you know best what will make you feel and stay safe, both emotionally and physically.

Deep Breathing

- Take deep breaths.
- Breathe in for 5 seconds, then breathe out for 5 seconds. Focus only on your breath.
- Repeat as needed.
Grounding

Grounding is a way to stay present and connected to the world around you. This can be helpful when you are experiencing a flashback. Again, only do what you feel comfortable and safe doing.

- Splash cool water on your face.
- Keep familiar objects around, like a favorite picture or some other token. Feel or look at each item. Notice the texture, smell, or other details. Think about where you are at the time and what those objects mean to you.
- If comfortable, stand in a public place. Listen to the noises around you. Talk, if you would find it helpful.
- Get up, and walk around. Take your time, and notice each step.
- If you can, step outside and get some fresh air. Feel the sun or wind. Take in the temperature.

Other Activities

- Exercise
- Find a program in your facility that interests you and that you find calming.
- Write letters to family and friends

SAFETY PLANNING

Sexual assault affects a person’s emotional and physical safety, so establishing a safety plan helps to identify ways to increase your security. Safety plans are most effective when created with an advocate, friend or family member who has some knowledge regarding sexual violence. A typical safety plan addresses:

EMOTIONAL SAFETY. Brainstorming ways to get through some of the emotionally difficult times.

- What can you do to take care of yourself?
- Who can you reach out to when you are upset?

PHYSICAL SAFETY. Coming up with ways to increase feelings of safety, such as identifying safe people and places in which you can get help.

- Where do you feel safest? Which places might it be best to avoid?
- Who do you trust to help you in emergencies?

MEMORIES OF THE ASSAULT. Planning for what to do when memories of the assault affect your day-to-day living.

- What has calmed you in the past?
SAFETY IF THERE IS STILL CONTACT WITH THE PERPETRATOR(S). Developing ways to ensure safety when you have to or choose to have contact with the offender.

- Where might you see them?
- Where can you go if you feel you are in danger?

LEGAL SAFETY. Thinking of ways to increase your sense of safety and control throughout the criminal justice system process (if applicable).

Counseling

The Kentucky Association of Sexual Assault Programs (KASAP) has signed an agreement with the Department of Corrections that makes available the following services after a sexual assault, in accordance with Prison Rape Elimination Act (PREA) Standards:

- Confidential Crisis Line
- Hospital accompaniment for forensic exam
- Up to 3 counseling sessions, by phone or in person*

*To access these sessions, you must speak with your case worker or the facility’s PREA Compliance Manager.

The rape crisis center in your area is _________________________________.

The hotline number for the center is _________________________________.

Basic Rights of Incarcerated Survivors of Sexual Abuse

(Source: PREA Standards)

- To be treated with respect and dignity
- To choose whether or not to report the assault. If you do choose to report, you have the right to choose through which channels or to whom you feel comfortable reporting. (§115.51)
- To receive appropriate medical or mental health care regardless of whether or not you disclose the name of your perpetrator or participate in an investigation. (§115.83(g))
- To make related healthcare decisions for yourself based on informed consent. (§115.83)
- To have reasonable access to community advocates for support and services provided for in the previously mentioned MOUs (§115.53)
CAN I STILL GET SERVICES FROM RAPE CRISIS ADVOCATES IF I DON’T FILE A POLICE REPORT?

Yes. KASAP member programs provide services to sexual assault survivors regardless of their choice to file a police report or seek medical attention.

Additional Resources

Just Detention International (JDI)

• Hope for Healing: Information for Survivors of Sexual Assault in Detention Therapeutic Guide:
  » http://www.justdetention.org/pdf/HopeforHealingweb.pdf
  » Also available in Spanish on the JDI website

Kentucky Association of Sexual Assault Programs (KASAP)

• KASAP is the coalition for the 13 rape crisis centers in Kentucky:
  » P.O. Box 4028
    Frankfort, KY 40604
  » Phone Number - (502) 226-2704
  » Toll Free Number - (866) 375-2727
  » TDD: KY Relay Service will relay the call: 711 or (800) 648-6057
  » www.kasap.org

Books

• I Will Survive: The African American Guide to Healing from Sexual Assault and Abuse- Lori S. Robinson

• The Rape Recovery Handbook: Step-by-Step Help for Survivors of Sexual Assault- Aprodite Matsakis

• House of Healing: A Prisoners Guide to Inner Power and Freedom- Robin Casarjian

References

Just Detention International (JDI)

Bureau of Justice Statistics (BJS)
This project was supported by Grant Number VAWA-2014-KASAP-00426 awarded through the Kentucky Justice and Public Safety Cabinet by the Office on Violence Against Women, U.S. Department of Justice.

SERVICES PROVIDED ARE FUNDED EITHER IN PART OR COMPLETELY BY STATE AND FEDERAL FUNDS