Sexual Assault Center of East Tennessee



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Best Practices in Working with Sexual Assault Victims on a College Campus



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*This project is funded under an agreement with the State of Tennessee. The opinions, findings, conclusions or recommendations contained within this document are those of the author and do not necessarily reflect the views of the Department of Justice.

*This project was supported by Award No. <u>2013-WF-AX-0004</u> awarded by the Office on Violence Against Women.

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- Best practices in working with survivors of sexual violence
- O Implementing Start by Believing Campaign and a trauma informed approach
- Neurobiology in relation to trauma
- Best practices for working with students and providing a transparent explanation of services

Reporting Scenario? Flipping perspective – what's wrong with this call?

- If robbery was treated like rape video and/or 911 call scenario
- Use this to talk about biases and stereotypes

Start by Believing: Goals

- Enhance victim well-being
- Prepare individuals to respond to disclosures
- Change the investigative process
- Create more opportunities for reporting
- Increase reporting and help-seeking
- Increase community awareness and create community change

How Victims Respond

How Victims May Present

• There is no "normal" response or reaction!

- Each victim responds to the psychological impact of trauma differently
- Victims may appear calm, indifferent, submissive, angry, emotionally distraught, emotionally numb, or even uncooperative and hostile

Common Reactions to Trauma

O Anxiety

- Fear for personal safety of safety of loved ones
- Preoccupations with the stressful event
- Flashbacks in which the individual mentally re-experiences the event
- Physical symptoms: muscle aches, headaches, fatigue
- Disbelief at what has happened
- O Numbness
- Problems with concentration or memory
- A misperception of time
- Increased startle response
- Feelings of guilt and/or self-doubt related to the traumatic event

Trauma Response

• Fight, flight, or freeze response

• Freeze response often not considered – "paralyzed with fear"

• Response is automatic/instinctual – not consciously thought out

- Regardless of how prepared someone believes they are to respond to an assault or trauma, they cannot predict their response or reaction.
- O The speech center of the brain shuts down during fight, flight, or freeze response victims may not be able to say "no" or scream for help

Tonic Immobility

- Freezing = Alert and Immobile, but able to move
- Tonic Immobility = Paralysis, can't move or speak
- Caused by extreme fear, physical contact with perpetrator, restrain, perception of inescapability



Fear-Habit Paradox

- From normal, expected scenario to unexpected attack...
- Fear-based responses can be habitual behaviors appropriate to scenario that's just been left behind

Trauma & Memories

• There is evidence that trauma is stored in the part of the brain that processes emotions and sensations, but not language and speech

- Victims often experience difficulty recalling and articulating events
- Narratives of an assault may be disorganized and non-linear
- Victims may recall details of a traumatic event over time, rather than during the course of an interview
- Basic needs may also need to be met before a victim is able to think and remember – clearly

• Food, sleep, shower, sense of physical safety

How to Help Victims



What do you do if you or someone you know is a Victim of Sexual Assault?

- Get to a safe place.
- Call 911 or the Sexual Assault Centers crisis line at 865-522-7273
- Get medical attention. You do not have to report to the police to receive medical attention. Reporting to the police is your choice.
- Your body is a crime scene. If you choose to report do not take a shower, brush your teeth, comb your hair, etc.
- Remember- What happened to you is not your fault.

Services and Options for Students

- Transparency is the number one component here no matter what decision the victim makes, be honest with them.
- Explain reporting on campus vs. reporting to law enforcement and potential outcomes of both
- Explain therapeutic services what are the options on campus vs. utilizing a service provider

Contact Information

O Call 24/7 hotline

865-522-7273

or

• Call SACET office

865-558-9040

THANK YOU!!

Questions? Comments?

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