

KEY MESSAGES ON SEXUAL ASSAULT

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This document was written specifically for UNHCR personnel and includes references to UNHCR protocols.

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We acknowledge that the advice and views represented in this document may not be appropriate for every individual, or for every cultural context. Please exercise caution and seek appropriate counsel prior to reporting assaults, in order to ensure the health and safety of the survivor.

We acknowledge the intensely personal nature of these decisions, and affirm the rights of survivors to best determine their own path to recovery.

Key Messages on Sexual Assault: WEM 2013

Understand how you perceive the world and your place within it. Are you generally trusting of others? Do you assume that you are immune to assault because you have a good rapport with the local community? Do you believe that you can tell if a person is a rapist just by looking at him/her? Do you assume a person is at fault when s/he is sexually assaulted/raped? Do you assume a victim of rape likely provoked or seduced the rapist? Do you assume that how a person dresses is a sign of how s/he wish to be treated, including whether or not they may be asking for sexual aggression? How you understand the world, your role within it, and sexual assault/rape will influence how you respond to such an incident in the aftermath and long-term. It's important to understand any assumptions you may have about the world and your place within it, including your views on sexual assault/rape.

It's also important to understand your surroundings and to have a plan of action in place (including relevant telephone numbers) in the event that you or someone you know becomes the victim of a sexual assault/rape.

If You are the Victim of a Sexual Assault / Rape

Suggestions

- Do not assume that you will recognize a rapist just by looking at the person. A rapist may be someone you know. A rapist may be friendly, may seem "normal", may appear non-threatening, and may also have a spouse and children. A rapist could also be your supervisor or your colleague.
- Each situation, each perpetrator, and each victim is different and will handle a situation of sexual assault differently.
- There is not a "right way" to respond.
- Listen to, and trust, your instincts. Even in the days and hours before you are assaulted, you may have premonitions. Listen to those premonitions. You are likely sensing something from the environment around you.
- If you sense that someone you know is aggressive or somehow malevolent, do not assume you are wrong, mean or somehow inappropriate in your thinking. Trust your gut.
- A situation of sexual assault/rape is often life-threatening. You will need to take measures to save your life. This could mean "allowing" sexual touching to prevent rape, or it could mean "allowing" rape to prevent murder. Each person will need to assess the situation and respond accordingly, in a way that will help save her/his life. You are not to blame for what happens. You are taking life-saving measures.
- You may assume that you will be able to fight back. Fighting will likely elevate an already tense situation and may even lead to your death.

- Carrying a weapon or using things that are at your disposal as weapons will likely aggravate your attacker/s. Understand that you may be putting yourself at greater risk by using them. Assess the situation and, again, trust your instincts.
- Negotiation may be critical. Try to humanize yourself in the eyes of the attacker. It may be helpful to talk about his family/friends/the women in his life. It may be helpful to make light jokes or to try to “befriend” the attacker/s. Try to manipulate your way onto the side of the attacker/s.
- It may be helpful to say that you work for the United Nations or that you hold a particular nationality, the government of which will seek the attacker/s out afterwards and that, for that reason, it is in the best interests of the attacker/s not to cause you harm. In this case, making yourself sound “important” may trigger some sense of fear/worry in the attacker/s.
- Offer your valuables, access to your bank account, whatever might convince the attacker/s that your belongings and finances would be more beneficial to them than proceeding with the sexual assault/rape.
- You may be able to take some of these steps, and they may help you. But, generally, the situation is entirely out of your control. It may be best to try to adhere to the rules set out by the attacker/s. Listen to your instincts to save your own life.

First Steps Post-Assault

- Ensure your safety first. Go to a location where you believe you will be assured safety. If possible, contact a friend/colleague who may assist you. Insist that the person you contact comes to your aid in your safe location and accompanies you to various appointments (medical, police, security, etc.) so you are not alone. Do not feel obligated to divulge the details of the incident to that person – even if it’s a family member or a close friend. What you share is entirely your choice.
- Celebrate your survival, and thank yourself for saving yourself. You did it and, unless there was anyone else near/with you to support and assist you, you likely did it alone. That is an incredible feat.
- Ensure the PEP Kit (anti-retrovirals, Plan B, other precautionary treatments) is administered as quickly as possible (ideally 2-24 hours) and no later than 72 hours after the incident to avoid risks of pregnancy, Hepatitis, HIV, etc.
- Ensure that a thorough investigation is conducted of the incident and that the perpetrators are identified, where possible. Insist that UNDSS and UNHCR Field Security staff are actively involved. Do not rely on local police. And, do not rely on UN staff to conduct these investigations without your constant prodding. Insist, insist, insist. Contact supervisors, if necessary and if you are comfortable doing so, to ensure appropriate action is taken on your behalf.
- Ensure forensic evidence is taken at the hospital for investigation and accountability purposes.

First 72 Hours Post-Assault

- Start the PEP Kit (anti-retrovirals, Plan B, other necessary treatments) to counteract pregnancy, Hepatitis, HIV, etc., if you have not done so already.
- Start counseling – by phone or in person – as quickly as possible.
- If you know anyone who has undergone a similar experience, you may find it beneficial to speak with this person to help you to feel understood and to remember that you are not alone.
- If a staff person is not presented to you, contact HQ to understand how to access counseling, complete Appendix D claims, understand your evacuation, medical leave and work reassignment options, seek career advice, understand entitlements, and seek prompt and appropriate follow-up)

Issues that May Arise

- You may find that some people – including colleagues, family and friends – will be uncomfortable with you. They may not know how to respond. Some may even respond inappropriately. Remember that you are not alone and that you are not to blame. If possible, reach out to close friends who you know you can trust and who you trust will understand and support you (including other survivors of sexual assault/rape), to help you to feel less alone and more understood.
- Your colleagues – including those meant to support you – may take on a distanced role, seemingly protecting the office more than you. Remind them of your needs, if you are comfortable doing so, and contact appropriate supervisors and others you trust to ensure the office adequately supports you. Start documenting now any mistreatment or inappropriate response.
- You may experience extreme emotions (sadness, anger, rage) or even an extreme state of calmness. Try to pay close attention to the physical and emotional responses you are experiencing and be sympathetic to yourself. What you are experiencing is entirely normal.

Initial Weeks/Months Post-Assault

- Anti-retrovirals must be continued at the same time daily for 28 days.
- Follow up to ensure accountability for any inaction from staff members who should have taken specific actions (e.g. HOO, Security, Staff Counselor, PEP Kit Custodian, etc.).
- Be understanding with yourself. You may experience extreme emotions and even feel “crazy”. You are not crazy, and your emotions are not abnormal. You confronted a horrific experience, and you took the right steps to ensure your survival. Be understanding of yourself and listen to the signs that your body and mind will give you (through nightmares, flashbacks, hallucinations, tremors, fears, compulsive behaviors, nervousness, anxiety, excessive sweating, etc.). These signs are reminders that the experience is deep within you and that you need to give yourself extra care.
- Ensure continuous counseling. Do not assume that, because you feel “fine”, you are fine. Communicate openly with a counselor about the experiences you are having and how best to address them in order to minimize the long-

term effects. Note that staff survivors who have delayed their counseling often express regret because they “thought” they were fine only to realize – often years later – that they were still holding onto the traumatic memory subconsciously. And, by then, it is far more challenging to combat the lingering emotions and depression that has set in.

- Pay extra attention to your health and well-being (exercising regularly, practicing yoga and meditation, writing in a journal, reading, eating healthy and trying to avoid refined sugars which may exacerbate some of the emotions you are feeling – including highs and lows).

How You May Feel

- alone
- isolated
- dirty
- distasteful
- slutty
- at fault / to blame
- guilty
- as a provoker
- unworthy
- shame
- disempowered
- crazy
- out of control
- extremely depressed
- on an emotional rollercoaster
- suicidal

Issues Sexual Assault/Rape May Surface for You

- memories and self-criticism for every sexual experience you’ve ever had
- relationship and sexual challenges (difficulty maintaining a relationship, difficulty trusting the opposite sex, inability to be intimate or to feel at ease sexually, anger and blame toward men – including those you love, etc.)
- shame for your role as a woman
- frustration, even rage, with your position as a woman in a man’s world
- self-blame
- self-hate
- regret that you survived
- overwhelming fear of men
- discomfort around male colleagues, including your supervisor, and thus great difficulty working and functioning as you may have previously functioned in your work environment
- lost trust in men, in people in general, and in the world
- true sense of rage toward your attacker/s
- true sense of rage toward all men

- true sense of rage toward those who did not respond appropriately in the aftermath and/or long-term of your assault/rape
- extreme range of emotions (sadness, depression, anger, rage), which may continue to surface whenever you think back to the incident and to how you felt treated by others following the incident – even years later.

Remember

- You are not alone.
- You are not responsible.
- You are not to blame.
- You are not dirty.
- You are not unworthy.
- You did not consent. You were forced through the use of power (physical or emotional, with or without a weapon). You saved your life.
- The perpetrator is dealing with internal issues (anger, power, control). The perpetrator is the one responsible and to blame.
- The experience of sexual assault/rape is life-altering. Do not expect your life to “return to normal”, but also strive not to let the perpetrators continue to control your life. It is normal that you will remain affected and that your personal and professional lives will forever be influenced by your experience. But, strive to regain a sense of empowerment, as much as possible. It may help to communicate about your experiences with close friends/family (especially those of the same gender and/or who have had similar experiences). It may also help to join support and advocacy groups in order for you to help influence how others respond to and address sexual assault/rape and to help support others who have had similar experiences.

Responding to a Victim of Sexual Assault/Rape

First Steps Post-Assault

- Ensure the victim is taken to a safe location.
- Help the victim to feel safe and to find a sense of calm – to the extent possible.
- Ensure a police investigation is conducted and forensic evidence is collected at the hospital.
- Ensure that someone accompanies the victim to the hospital and to the police station, where possible.
- If the victim is a woman, it is best that she be assisted by another woman.
- Most victims will prefer having someone help them who is from the same/a similar culture and linguistic background.
- Ensure accountability – where possible – of the perpetrators.
- Help the person to remember that s/he is not to blame.
- Help the person to feel supported and not alone.
- Seek permission from the person to be contacted by a counselor. Then, ensure the counselor contacts the person. Do **not** put the onus on the affected staff person. The responsibility to check on the staff person is with the counselor, not the staff person. The affected staff person will not feel comfortable calling a stranger and saying “I was raped” or “I was sexually assaulted”. The victim is in the survival stage, processing the incident and may even be grieving. The victim needs to be and to feel supported.

First 72 Hours

- Ensure the victim is taken to the hospital and forensic evidence is collected, if this has not been done already.
- Ensure the PEP Kit (anti-retrovirals, Plan B, other precautionary treatments) is administered as quickly as possible (ideally 2-24 hours) and no later than 72 hours after the incident to avoid risks of pregnancy, Hepatitis, and HIV.
- Ensure an appropriately trained staff person is available to help guide the staff member through the bureaucracy (accessing counseling, helping complete Appendix D claims, referring for appropriate career advice including an appropriate reassignment, explaining entitlements, ensuring relevant staff are informed for prompt and appropriate follow-up).
- Ensure the affected staff person is informed of every action taken/not taken on her/his behalf (security, police, investigations, reporting, medical services, staff welfare, legal affairs, etc.).

Issues that May Arise

- You will likely feel uncomfortable responding to a victim of sexual assault/rape and be uncertain of how you should respond. This should not be an excuse to ignore the person or to leave the person alone. Ensure

- continuous** support and monitoring. Unsupportive/negative responses are known to prolong the recovery process. Be supportive!
- You may feel the need to protect the office (e.g. if the response was inadequate or mistakes were made), but remember that the victim needs to feel and be supported. Avoid taking the “managerial”/“bureaucratic” approach, choosing to defend the office rather than support the victim as a human being.
 - The victim may exhibit extreme emotions (sadness, anger, rage) or even an extreme state of calm. If the person exhibits extreme emotions, recognize that they are not directed at you. If the person exhibits extreme calm, recognize that this does **not** mean that s/he is okay. S/he is merely in survival mode.
 - You may need to corroborate the details of the victim’s story with witnesses. However, you should not express doubt or second-guess the survivor.

Initial Weeks/Months

- Anti-retrovirals must be continued at the same time daily for 28 days.
- Follow-up support should not be limited to the initial minutes/hours. Maintain contact to ensure the person feels supported and to be aware of any signs/symptoms of PTSD or potential suicide.
- Ensure accountability for any inaction from staff members who should have taken specific actions (e.g. HOO, Security, Staff Counselor, PEP Kit Custodian, etc.).

First Year

- While you may tend to forget the incident that affected a colleague, your colleague is still living it everyday. It is important to continue showing support in the long-term.
- Traumatic symptoms may arise belatedly – after 6 months or even years later. It’s important to help the affected staff person monitor these symptoms, and it’s likewise important to monitor for any signs of depression or suicidal tendencies. Continue supporting the person.
- Ensure that appropriate measures are taken to support the affected staff person: medical leave, counseling, an appropriate work placement (i.e. not conflict zones, not a remote/isolated location, not a location with a high incidence of sexual assault), guidance in future career choices, and – where possible/necessary – continued follow up with any legal action.

Key Things to Avoid

- Do not assume that sexual assault/rape is not common or that it is unlikely that it happened to someone you know. It is extremely prevalent in all corners of the world.
- Do not question the validity of the victim’s story.
- Do not accuse the victim (of having seduced the perpetrator, of having “wanted” to be raped, of having consented or alluded to consent, of “asking for it”).

- Do not blame the victim (even suggesting that the person may have been wearing inappropriate clothing, been drinking/drunk, been out to late, been naïve to be staying alone, etc.).
- Do not blame the victim for “accepting” forced touching or any sexual act (including rape), when s/he was forced to “accept” through a situation of power or force (with or without a weapon).
- Do not assume that – if the person knew her/his attacker – s/he allowed the incident to happen or provoked the perpetrator in some way. Force is force.
- Do not judge or even allude to potential judgments.
- Do not use the word “should”, as this alludes to an underlying judgment.
- Do not withdraw from the person, or keep a distance – emotionally or physically – from the person.
- Do not leave the person alone/isolated.
- Do not allow the person to feel “dirty”, as if there is now something wrong with her/him, as if the person is “tainted”.
- Do not behave in a hostile/aggressive way with the affected person.
- Do not tell the person to “forget” what happened or to “get over it”.
- Do not encourage the person to keep quiet about what happened or to keep it a secret.
- Do not oblige the person to write or share her/his story with anyone until s/he is ready. (A police report and appropriate medical investigations and care will be necessary immediately. But, no one else needs to know the story – not even the office administration or other. Allow the person to decide.)

Other Considerations

- We should not overlook men as victims of SGBV (including male local staff who may not have been the victims of sexual assault but may have been forced to rape in war).
- It’s important to include men and women together in the dialogue on sexual assault and rape.
- It’s essential that we each understand the power differences deeply embedded in our cultures that largely determine how we perceive ourselves and how we understand men from women. It is helpful to become conscious of how we speak about men and women, how we judge women by their appearance, by their body size, by their sex lives, and by their relationship to men and how these judgments differ for men. Example: A woman with multiple sexual partners is typically viewed as a slut, while a man is just a man or his sex life is simply not up for debate. A woman is generally expected to maintain her figure. The pressures on men are less so. These are some ways in which we set a clear distinction between men and women. Only when we become aware of these differences – even within UN offices – and committed to reformulate our speech and views will we be able to truly confront the issues of sexual assault and rape.

Helpful Resources

http://www.democracynow.org/2013/2/19/brave_miss_world_raped_before_winning

<http://www.linordocumentary.com>

<http://www.equalitynow.org>

<http://www.journeywoman.com>

<http://www.rolereboot.org/culture-and-politics/details/2012-12-a-letter-to-the-guy-who-harrassed-me-outside-the-bar/>

<http://www.draw-the-line.ca>