



# INTRODUCTION

## QUEEN'S BENCH FOUNDATION

The Queen's Bench Foundation, a San Francisco organization of women judges and lawyers, received a United States Department of Justice, Law Enforcement Assistance Administration grant in 1974 to study the problem of rape in San Francisco. Called the Rape Victimization Study, it represented the first research in California to focus on the impact of rape on victims, how they are handled by the health and criminal justice systems, and why many women do not report rape to the police. As a result of the Queen's Bench Foundation study, San Francisco now has a reliable information base for improving hospital, police, and court procedures for handling rape cases.

The Rape Victimization Study was published in two parts in 1975. Its circulation stimulated a demand that could not be met by the Queen's Bench Foundation budget. Therefore, this summary of the research and findings has been prepared in response to continuing requests for information regarding the study.

#### TWO PHASES OF PROJECT--1974-1975

## Phase I

Phase I of the Project was devoted to research (conducted between September, 1974 - January, 1975), which concentrated on four major areas:

- 1) psychological impact of rape and victim's treatment needs
- 2) health and criminal justice systems procedures for handling rape cases
- 3) community services available to victims
- 4) why women do not report to the police

In order to study the areas of concern, several research techniques were utilized: interviews, questionnaires, program evaluation, statistical analysis, and comparative assessment of rape related programs in other states. Data sources included: rape victims (both reporting and non-reporting), police (patrolmen and Sex Crimes investigators), district attorneys and defense attorneys, judges, jurors, physicians and nurses, psychiatrists, social workers, and staff in community agencies. Records maintained by the Department of Public Health, Police Department, and District Attorney's Office were analyzed, and these agencies' facilities, equipment, staffing, and procedures were evaluated. Rape related programs in other states were examined for the purpose of comparing approaches used elsewhere for possible application to San Francisco.

# Phase II

As a result of the research in Phase I,Queen's Bench Foundation made a series of recommendations to the San Francisco Police Department, Department of Public Health, and the District Attorney's Office, and to other public and private agencies. From January, 1975 to June, 1975, the Rape Victimization Study staff worked to facilitate implementation of those recommendations.

The findings indicated a great need for public education, and for sensitizing people who come into contact with rape victims. Staff spoke with various professional groups, community agency staffs, and high school students. A volunteer counselling service was established at Central Emergency Hospital, staffed by paraprofessionals who have been trained to respond to the immediate needs of victims treated at the public facility. The Queen's Bench Foundation staff developed "A Guide for Victims of Sexual Assault" which is now available to all victims at the hospital and Police Department. A referral directory of services for victims was distributed to public and private agencies responding to victims. Additional efforts made in conjunction with the Police Department, the District Attorney's Office and other agencies are contained in the summary.

# PROJECT 1975 - 1976

In November, 1975 the Queen's Bench Foundation received a second Law Enforcement Assistance Administration grant to continue its work. The present project, titled Project Rape Response, will concentrate on public education, development of community resources for victims and continued improvement in the health and criminal justice responses to victims. The research component will concentrate on the circumstances of rape and prevention/resistance techniques.

# SUMMARY OF RESEARCH AND FINDINGS THE RAPE VICTIMIZATION STUDY

# IMPACT OF RAPE ON VICTIMS

# Victim Interviews

Eighty female victims of rape were interviewed. The victims came from all segments of society (See Appendix for demographic data). Their ages ranged from 8 to 55; the largest percentage of women were raped between the ages of 18 and 24 (47.5%). Some of the victims experienced the rape many years prior to the interview.

The interviews showed that rape can be a devastating, debilitating experience for many women, and that it, in some way, affects almost all victims. Of the victims interviewed, 89% said the rape had "altered" their lives in a major way.

No "typical" response could be generalized from the data because the impact of rape varies as greatly as the individuality of the victim and the particular circumstances of her rape experience. However, a range of responses and patterns did emerge.

Immediate Response During the rape, most victims experienced fear for their lives and bodies (80%). "I would have done anything he wanted just so he would not kill me" was a common response, as well as, "I was so frightened I couldn't think or do anything else". The remaining group (20%) had three other immediate responses. Some women experienced anger and outrage at the attacker; in many cases, the rapes were committed by someone known to the victim ("familiar rape") and the response was generated by a feeling of betrayal by someone they considered a friend. Some women reported being extremely detached from what was happening to them. "I was on the outside watching this happen to someone else", and "it was like a bad dream" were common responses in this group. Others reported feeling totally helpless, repelled, regretful, or concerned about someone else's safety (a child or friend).

Shortly following the experience, most victims go through a stage of coping with the rape through denial, repression or displacement. Victims commonly reported, "I just wouldn't let myself think about it, I just put it out of my mind" or their anger was sometimes expressed as concern for other women, "I get so angry when someone else is violated".

Long Term Response Five major long term reactions to the rape experience were identified. In the largest group, 39% of the cases, the victims' fear persisted, severely affecting their whole concept of personal safety. They felt unable to protect themselves, moved frequently, were cautious about going out alone or after dark, were suspicious of all strangers, and avoided many situations in which they had previously been comfortable. For some women, this persistent fear verged on paranoia which severly restricted their daily functioning; for others, it meant an ever present consciousness of potential danger and need for caution.

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In 35% of the cases, victims reported a disturbance in their sexual and social relationships. Very few women were concerned with the sex act itself during the rape. With time, however, a number of women (14%) suffered disruption of their sexual identity and responsiveness; 4% reported that their relationships with their husband/male friend were altered in a major and negative way. Withdrawal from social relationships (both male and female) occurred in 16% of the sample: those women became isolated, distrustful, or felt they had nothing to share with others. (The above percentage is only for the first 55 victims interviewed.)

In 16% of the cases, women reported that their self-image had been affected in a major way; they lost confidence, thought of themselves as worthless, shamed, guilty, and helpless. In some cases, this diminished self-esteem, manifested itself in employment difficulties, depression, and general loss of control over their lives.

Another 10% responded that they had experienced "massive alteration" of their lives. Their self-image, sexual and social relationships, and sense of personal safety were all significantly altered.

The last 25 victims to be interviewed later in the study were asked if the rape had any positive impact. Nine of these victims responded that the experience had made them "stranged individuals, more street-wise and/or more aware.

Variables Influencing the Impact of Rape An attempt was made to correlate the impact of rape with other data. Women raped by strangers (89%) appeared to be most affected in their sense of personal safety, while women raped by someone known to them (11%) appeared to suffer a greater loss of self-esteem and disturbance of social relationships. Women who did not resist (45%) their attackers appeared to suffer more severe impact than those who did resist (55%). Moreover, the resisters were more likely to be able to share their experience and seek support of family, friends, or professionals. It appears that the women who suffered the most were those who were less likely to reach out for help. Rape victims who ventilated their feelings, and who received empathetic responses from people close to them (73%), were more likely to resume normal life patterns.

Social Pressures The fact that women respond to a rape experience with fear, anger or detachment while the rape is occurring, and with shame, guilt, and severe depression afterward, appears to indicate how social pressures distort the reality of the rape situation. Rape approaches a death experience: the victim fears for her life. It is only afterwards that the sexual aspect of the act becomes a critical issue. Victims not only felt shame in terms of what others might think, but it appears that they internalized this societal judgement and blamed themselves even when they intellectually recognized that they were not to blame. It is unlikely that these feelings are produced by any other crime; only in rape is the victim's personal and physical integrity so threatened.

# Interviews with Mental Health Professionals

<u>Psychiatrists and Psychologists</u> Thirty-seven of the 310 psychiatrists and psychologists contacted completed the questionnaire; 17 consented to be interviewed. These respondents reported seeing a total of 79 victims in treatment during 1974: 13 victims entered therapy as a direct result of the rape, 15 were patients when raped, and 3 came at the request of the court for purposes of psychiatric examination. The remaining majority (48) requested treatment for other problems and the rape experience (which occurred months or years earlier) emerged during the course of treatment. Most respondents reported that rape damaged the victim's self-esteem and caused paranoia, fear, guilt, shame and depression.

Social Workers Fifty-seven of the 790 social workers contacted responded to the questionnaire; 19 consented to be interviewed. Seventy-two victims were provided services by the respondents during 1973 and 1974; the services included counselling and referrals to other professionals (i.e., doctors, lawyers, therapists). Thirty-one of the 72 victims requested services for other problems and rape emerged as part of their personal histories. Respondents felt that an immediate response to victims in the weeks following the assault were critical to lessening the impact of rape.

# What Mental Health Professionals Say About Rape

"Rape creates in women a feeling of powerlessness. The overwhelming psychological and perhaps physical injury is very ego damaging. Boundaries have been invaded, the perimeters of the victim's being are injured. The risk to self-esteem is great."

> "I see rape as traumatic, disruptive, and life and psyche threatening. I question whether it can be handled with equanimity. It is so abnormal that some time and help are necessary. I have not met one women yet who has been able to shrug it off."

"In criminal rape, the reaction is similar to reaction to murderous assault and mugging: terror, paranoia, sleep disturbances, anger, anxiety, nightmares, and nagging helplessness are paramount."

> "In all these cases, the women will suffer long-term effects, may be borderline schizophrenics and have disturbed relationships with men. Rape is more severe than other traumas because it mixes sex and aggression, both basic, primitive instincts. Women have learned through role stereotyping that men will take care of them, protect them, etc., then they are attacked by this protective figure and the society which has cushioned them rejects them and blames them."

"Victims need a responsive, accepting listener, preferably connected with a facility that can act socially-legally, as well as psychologically."

> "Most women who suffer an attack lose a little of the world. It closes in on them and they walk around protected by a plexiglass shield out always wary, tuned to possible danger lurking. Women need a chance to talk about such incidents over and over again until they can work it out."

"In rape, there is a strong sense the victimization is justified. 'I deserve this because I am a woman or because I had bad thoughts.' Women must begin to realize the pathology is not in them. It is not their fault. then they can feel anger at the situation and whatever energy has gone into denial comes out with equal force. The woman can begin to think of herself as valuable, that something has violated her." "Individual counselling should come before any group therapy as the patient will need support before sharing with strangers."

"Short-term, crisis intervention type therapy is indicated for rape. It is as important as medical care."

> "More available therapeutic assistance and support should be automatically provided to every victim. Sensitive visiting nurses could provide follow-up services."

# DEPARTMENT OF PUBLIC HEALTH - CENTRAL EMERGENCY HOSPITAL

# Responsibility

Central Emergency Hospital is the medical facility which is responsible for providing free examination and treatment to rape victims in San Francisco. The police take all reporting victims there, and victims seeking medical care elsewhere are often referred to the facility. (Victims with life-threatening injuries are taken directly to San Francisco General Hospital.)

Central Emergency is one of four Emergency Medical Aid Stations which provide 24-hour care. Between July 1, 1973 and June 30, 1974, 161,010 patients were admitted and 374 rape victims were examined.

## Evaluation

An evaluation of the Department of Public Health Central Emergency Hospital revealed many problems at the outset of the Rape Victimization Study.

<u>Staff</u> Several victims interviewed in the early stages of the study reported that nurses treated them unsympathetically. At least half of the victims reported callous, indifferent, or coldly efficient responses from doctors. Project staff interviews with the medical personnel indicated that, while some doctors were extremely sensitive, others were suspicious, even hostile in their attitudes towards victims.

The medical staff includes a large number of doctors who are in practice elsewhere or who are residents in training. With such a large staff working on a rotating basis, consistent, quality medical service to victims is difficult to maintain.

Many concerned physicians felt hampered in providing sensitive treatment because of the medio-legal nature of the rape exam; they felt it was difficult to be conscientious about collecting specimens and caring for the patients emotional needs at the same time.

During the course of the study, the Public Health administration and concerned personnel worked closely with the Queen's Bench Foundation staff to help improve the quality of treatment and examination of victims. Many nurses and doctors became more aware of the trauma of rape; most victims interviewed towards the end of the project reported that they were treated with sensitivity. Facility Central Emergency was constructed in 1912. Like many older public buildings, the facility is drab and ill-equipped to meet modern needs. No areas were set aside to assure privacy for the victim to meet with friends, relatives or the police. There was no shower for use after the medical examination. Although the Administration agreed with recommendations to remedy these problems, it was difficult to bring about swift changes due to bureaucratic processes.

<u>Reporting Requirements</u> Prior to February, 1975, victims could not be examined at the facility unless the victim first reported to the police. Many victims, therefore, were denied medical care. Because the hospital is an important accessentry point for meeting the victim's physical and emotional needs, Queen's Bench Foundation supported efforts to change the requirement. Victims now receive treatment whether or not they report to the police. By state law the hospital is required to report that the crime occurred and the victim's name, address and extent of injuries; the victim is told she may be contacted by the police but her involvement is voluntary.

<u>Record Keeping</u> Medical evidence carefully collected and recorded can help the victim's case if it is brought to trial. Review of the records revealed that data were often incomplete. The sexual assault medical report was revised to encourage detailed and concise recording and discourage inappropriate comments.

<u>Protocol</u> An evaluation of the medical care provided at Central Emergency indicated some carelessness in examination procedures. The protocol was revised to insure a more thorough and sensitive approach to victims.

A victim entering the facility is informed of her rights regarding the new reporting requirement. A nurse enters all pertinent data in the rape log book and takes preliminary information for the medical report. All bodily injuries are treated. The findings of the pelvic examination are recorded and slides are prepared for evidence. Victims are given preventative medicine for venereal disease, and a reminder for a free follow-up check at the San Francisco V.D. Clinic The victim is informed of the risk of pregnancy and given diethystilbestrol (DES) if she wishes. The nurse checks to see if all forms are signed; all evidence is marked and released to the proper authorities. The victim is given a disposable douche kit and disposable underwear. (A shower is under construction) She is then introduced to a volunteer counselor if the counselor has not been present throughout the examination, and given a copy of "A Guide to Victims of Sexual Assault". Throughout this process, the medical staff is encouraged to give courteous and sensitive attention to the victim to help alleviate her anxiety. (Sedatives are available upon request)

Volunteer Counselling Program Prior to the Queen's Bench Foundation evaluation, a volunteer counselling program was in the planning stage at Central Emergency. The Administration decided to wait for the Queen's Bench Foundation preliminary evaluation before proceeding. Consequently, a training course for counselors was devised and conducted by Queen's Bench Foundation staff and Central Emergency personnel. The course covered six major areas: information about the problem of rape; the emotional impact of rape as it affects the victims, their families and friends; the role and functions of a volunteer counselor; the medical aspect of victims' assault-related injuries; resources and services available to victims; and law enforcement and legal procedures relevant to the prosecution of sex crimes.

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# POLICE DEPARTMENT AND WHY WOMEN DO NOT REPORT

# Responsibility

The San Francisco Police Department's Sex Crimes/Missing Persons Detail was established more than 40 years ago. It is staffed by officers from the Inspector's Bureau and is located at the Hall of Justice. It is responsible for investigating minor sex offenses (e.g., exposures and obscene phone calls), major sex offenses (rape and forcible sodomy) and missing person reports. Sex crimes which result in homicide are investigated by the Homicide Detail with the assistance of the Sex Crimes Detail.

The patrolman is the first officer to respond following the report of a sex crime. Upon receiving the patrolman's initial report, the Sex Crimes Detail inspectors assume responsibility for the full investigation of the case.

#### Evaluation

After some initial skepticism, the Sex Crimes Detail and Patrol Bureau cooperated with the Queen's Bench Foundation staff. Ten inspectors and 17 patrolmen who had responded to rape calls were interviewed, records were analyzed and victims were interviewed regarding the treatment they received after they reported a rape to the police.

Contrary to popular opinion and media portrayals, the San Francisco Police Department has generally responded to victims with sensitivity and support. However, the evaluation revealed that certain problems did exist.

Training: Patrolmen and Inspectors Many of the victims who reported the rape in San Francisco praised the inspectors. However, the patrolmen were found to be less sympathetic and responsive to victims. Prior to the summer of 1975, training in the area of sex crimes was insufficient and outdated. (Since that time efforts to improve the quality of training have been made at both the precinct and Academy levels.)

Two significant drawbacks were found in the Sex Crimes Detail. First, the selection of detectives is informal and there are no written guidelines. A policeman who is competent in one area may not be suited for the highly sensitive work required of an inspector of major sex offenses. Secondly, inspectors need assistance with followup once the initial investigation is over (such as informing the victim of the progress of her trial), and with making appropriate service referrals.

## Police Response

If a rape is reported during the day, the inspectors will be called immediately. However, if a rape is reported after 5:00 p.m., the patrolman will respond immediately and the inspectors will not be called unless the victim is severely injured, or the assailant broke into the victims' home. (Approximately 75% of rapes are reported between the hours of 6:00 p.m. and 6:00 a.m.) The lengthy interview with the victim and the investigation of the crime scene is normally postponed until the following day. This procedure has caused some problems. By not responding immediately the inspectors are not able to assist the victim with the immediate crisis or to establish good rapport which would be valuable for further investigation. A significant number of victims are hesitant to contact the inspectors the following day.

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<u>Facility</u> The facility at the Sex Crimes Detail office was found to lack privacy. The interview rooms are not soundproof and there is no waiting room As of June, renovations were in the planning stage.

Equipment Additional equipment was needed by the Detail. Among the equipment provided with the assistance of Queen's Bench Foundation funds were two unmarked police cars. These cars have helped to insure the victims' privacy.

Information Systems There is little information sharing about sex crimes between local police departments. Some coordinating mechanism would be most beneficial for investigating officers. In June, 1975, with the assistance of Queen's Bench Foundation staff, the Sex Crimes Detail sponsored a statewide conference on sex crimes. The purpose was to share information, continue education, and institute a system for ongoing communication between departments. It is expected a conference will be held annually in different locations throughout the state.

Another problem was lack of current information on rapists being released from prisons to the San Francisco area. Inspectors felt this was a serious handicap and following a series of recommendations to prison authorities, information is now being provided immediately prior to release.

<u>Male vs. Female Inspectors</u> There are 12 inspectors in the Sex Crimes Detail, two of whom are women. The Rape Victimization Study found no evidence that female inspectors are any more sensitive to victims than male inspectors. This was not a critical issue for those women who did report. However, several of the non-reporting victims interviewed felt they would have been more comfortable talking to a woman.

<u>Translators and Minorities</u> The Rape Victimization Study found that proportionately fewer foreign language speaking minorities report rape in San Francisco than in other major cities. It was recommended that the availability of translation services be publicized to minority groups in order to encourage reporting. The Sex Crimes Detail staff does not include any minority group members nor officers who speak a foreign language; however, there are police officers who speak foreign languages in other departments and who provide translation services whenever necessary.

#### Relationship with District Attorney

The relationship between the Police Department and the District Attorney's Office is generally amiable and cooperative. The District Attorneys routinely request more investigation. In some cases this may indicate that either the inspector or the patrolman has not done a thorough job.

The District Attorneys expect the inspectors to keep the victim informed about the investigation and case progress. However, the victim is not always well informed. There may be a lack of communication between the District Attorney's Office and the Police Department about the case. Also, there is some resistance on the part of the police to assume a responsibility they feel should be shared. The Assistant District Attorney drops charges on some cases which the police feel should be prosecuted. An inspector is then responsible for explaining to the victim the District Attorney's decision, which he has actively opposed. On these occasions some inspectors will refer the victims directly to the District Attorney for further explanation.

Why Women Fail to Report Rape to the Police In the period between January, 1974 and December, 1974 there were 470 reported rapes in the city of San Francisco. Most authorities agree that this number does not begin to reflect the number of rapes actually committed.

A major component of the Rape Victimization Study directed itself to understanding why so many women fail to report rape to the police. Fifty percent of the victims interviewed were non-reporters, and for most of them, the choice was not a major decision. Over half (51%) of the non-reporters stated that the thought of reporting "had never crossed my mind" and 42.4% stated they "only considered it". Only two indicated that they came close to reporting. When asked why they did not report, most indicated low expectations regarding police response: 39.4% anticipated unsympathetic treatment and discomforting procedures, while 12.1% felt it would be pointless, and an additional 9.1% felt they lacked sufficient evidence. The remaining women feared the embarrassment and shame of public exposure (21.1%) or feared reprisal by the rapist (6.1%). When the victims' general impressions of police, prior to their rape, were explored, the majority (65.5%) had negative impressions and expectations. Some, 18.2%, had no prior impressions. Since these reactions do not coincide with the Study's evaluation of the police department, the data indicates a strong need for community education and improved police public image.

# DISTRICT ATTORNEY'S OFFICE AND COURT PROCESSES

### Responsibility

In 1973, the San Francisco District Attorney's Office established a unique prosecution team to concentrate on sex crimes cases. Team members are responsible for a case from the rebooking through all the remaining court proceedings.

Evaluation The Project's main concern was to evaluate the District Attorney's Office response to victims and its handling of sex crime cases. Of the 43 cases received in the District Attorney's Office during the first four months of 1975, 20 cases were not rebooked and only one resulted in a guilty verdict by jury trial. This statistic reflects many complex problems within the District Attorney's Office and the courts.

The District Attorney's Office takes only those cases in which conviction is almost certain. Usually the victim is not involved in the decision making (e.g., plea bargaining) which occurs during the course of prosecution processes. The court process can be lengthy and distressing to the victim, yet she is rarely provided the support or information which would assuage the stress. Recommendations by Project staff ranged from requests to spend more time preparing the victim for trial to suggestions for changing laws. The District Attorney's Office did not agree with many of the recommendations. <u>Procedures to Trial</u> The Assistant District Attorney receives all pertinent documents to the case from the inspectors of the Sex Crimes Detail. Based on this information, the Assistant decides to dismiss the case or file a formal complaint. If a formal complaint is filed, a date is set for a preliminary hearing. Hearings are held in Municipal Court, and all parties to the case are present. The judge must decide if there is probable cause to believe that a crime has been committed and that the named defendant is the perpetrator. If the judge finds probable cause, an arraignment in Superior Court is scheduled. In some cases, the Assistant District Attorney may request that the case go directly to the Grand Jury instead of to a preliminary hearing. Since the Grand Jury Hearing only requires the presence of the victim and witnesses, it is a less threatening experience for her.

A pre-trial conference is ordered by the court prior to the arraignment in Superior Court. During this conference plea bargaining takes place in order to avoid trial. If the case goes to trial, a date is set.

Interviews with Assistant District Attorneys Four Assistant District Attorneys were interviewed by Project staff. They all agreed that police response was good, that most investigations were thorough, and that they relied on inspectors to transmit information to victims. They said that the cases most likely to assure conviction were those rapes committed by a stranger, where a woman sustained injury and where she reported the crime immediately to the police. Good medical evidence and other cooroborating evidence were considered important.

They felt that there is a more liberal attitude among jurors in San Francisco than elsewhere. They did not find the Cautionary Instruction a major handicap and were satisfied with the Robbins Rape Evidence Law (See Section on Legislation, Page 14).

They said that some victims were adament about prosecution but others were reluctant and feared reprisal by the rapist. When asked if they would encourage a friend or family member to report, they said they would but felt many women did not because of anticipated insensitive police response.

Interviews with Defense Attorneys The staff interviewed three private lawyers and three public defenders. The lawyers defined "real" rapes as those involving strangers and physical injuries to victims; familiar rapes were considered an emotional problem and they recommended referring such victims to counselling.

They felt the Cautionary Instruction was useful to the defense. They agreed that the Robbins Evidence Law made their cases more difficult and devoted a lot of time to uncovering the past sexual history of the victims.

When asked if they would recommend reporting, four felt unsure and two said they would if the rapist seemed dangerous or if the victim could emotionally withstand the stress of trial. The felt that the vast majority of women do not report because they will be considered "foolish" or "stupid". Interviews with Judges Five judges were interviewed; one was uncooperative and his responses are not included in the data. The four judges felt that all the rape cases brought before them were valid. They agreed that a victim's immediate response to the police was important. Three differentiated between stranger and familiar rape: familiar rapes were considered less serious and might be handled better by a counsellor. The fourth believed that rape is a vicious crime and familiarity does not negate the seriousness of it.

The judges strongly agreed that a trial is a difficult experience for the victim. One was particularly concerned about the treatment of victims during the preliminary hearing. He felt they were subjected to vicious attacks by the defense attorney, with little protection from the Assistant District Attorney. All preferred to see every case resolved at the pre-trial conference. Three judges felt the Cautionary Instruction prejudicial. All were satisfied with the Robbins Evidence Law; three said they would consider a victims' prior sexual history relevant in cases where consent was at issue and one said he would consider such evidence if the victim had been involved with the defendant.

They all felt that women feared to report because of a poor police image but they would encourage a friend or relative to report, emphasizing a pre-trial solution because of victim trauma.

Interviews with Jurors Eight jurors who served at rape trials during 1974 were interviewed. All of them were convinced that the victim was telling the truth. They were influenced by the immediacy of the victim's report to police, good medical evidence and sustained injuries. None could recall the Cautionary Instruction until it was read to them. They felt that the victim's past sexual history was irrelevant in the case of stranger rapes, although, two jurors did say that they were biased in a trial when the defense attorney brought out past experiences. In cases where the victim had previous sexual relations with the defendant, most jurors felt this information would be relevant.

Seven of the jurors said that the defendant did not look like their idea of a "rapist". They also wished they had heard more about his background.

Six would encourage a friend or relative to report despite knowing that prosecution would be a distressing experience for them.

Interviews with Victims Queen's Bench Foundation's staff interviewed 33 victims who reported to the San Francisco Police Department. All stated that they wanted to prosecute; arrests were made in 12 of the cases and the District Attorney decided to prosecute 4 of them. Four cases were stranger rapes and the victims had been threatened by a weapon or suffered injuries. The victims had reported to the police within a day and the assailants had been picked up within a week. These four cases resulted in conviction.

The court process itself, which involved one to three months, did not cause severe distress to the victims. However, the two who went through jury trial objected to the questioning by the defense as "degrading".

Statistical Data from the District Attorney's Records Collecting accurate data from the District Attorney's Office was extremely difficult. Police case files are not cross-referenced with the District Attorney's files, and the Sex Crimes Prosecution Team does not formally compile statistics.

The statistics cited here do not include all cases, but rather only those cases which could be identified and from which information could be abstracted.

Between January and November, 1974, 291 cases of rape were reported to the San Francisco Police Department and 111 arrests were made. Fourteen of these cases could not be cross-referenced with police records. Of the remaining 97 files the District Attorney's Office records indicated that 21.6% of the victims refused to prosecute. More than half did so because the suspect was known to the victim. A quarter feared family embarrassment or did not want to be restricted to the area for months. The Sex Crimes Prosecution Team dismissed charges in 47.4% of the cases. A sizable number were dismissed on the basis of reasonable doubt. Only one case was dropped because of false charges.

Among the 97 cases where arrests were made, rape convictions were obtained in in 11.5% of the cases. In relation to all of the reported rapes, this represents a conviction rate of 3.9%.

A large number of cases were dropped as a result of the victim's decision not to prosecute. Through a more responsive and sympathetic criminal justice system, this trend could be reversed. More thorough investigation by the police, with guidance from the Assistant District Attorney, might produce fewer cases of "reasonable doubt" and help increase the number of prosecutions.

## THE LAWS AND LEGISLATION

# Legal Definition of Rape

The Law California law (Section 261 of the Penal Code) defines rape as an act of sexual intercourse, accomplished with a female not the wife of the perpetrator, under any of the following circumstances: (1) where she is incapable, through lunacy or other unsoundness of mind, whether temporary or permanent, of giving legal consent; (2) where she resists, but her resistance is overcome by force or violence; (3) where she is prevented from resisting by threats of great and immediate bodily harm, accompanied by apparent power of execution, or by any intoxicating narcotic, or anesthetic substance, administered by or with the privity of the accused; (4) where she is at the time unconscious of the nature of the act, and this is known to the accused; (5) where she submits under the belief that the person committing the act is her husband, and this belief is induced by any artifice, pretense, or concealment practiced by the accused, with intent to induce such belief. Unlawful Sexual Intercourse occurs when the female is under the age of 18 years.

<u>Inadequacies in the Law</u> The present law does not acknowledge the variety of sexual offenses, it does not protect all citizens equally, and it does not reflect changing social mores. Many rapes involve sodomy, fellatio, cunnilingus and other sex acts. The law, however, strictly segregates rape from other sex crimes and has designated rape as the most serious. Wives are not protected from rape by their husbands, and men are not afforded the same protection from sexual abuse as women. The law still considers eighteen to be the legal age of consent, while many teenagers in today's society participate consensually in sexual activity.

The law does not deal adequately with varying degrees of force, violence or threat used in rape. Although it has allowed a separate category for rape with great bodily harm, there are no other classifications. In addition, "threat" means, specifically, threat of bodily harm to the victim and does not include threat of harm to other people or other threatening and coercive conditions.

Rape is considered the second most serious crime, outranked only by homicide, yet the law and the very nature of the crime has made convictions difficult to obtain. There are rarely witnesses to a rape and frequently, the victim sustains no injuries. In cases involving multiple defendants (one-third of all reported cases in San Francisco) or cases where the victim has been subjected to a number of sexual acts, the fact of her assault becomes secondary to her memory for precise details of who did what and how.

The crime of rape requires a thorough and exhaustive investigation and a tremendously skillful prosecution if there is to be any hope of increasing the number of convictions. But major reform in rape laws is essential.

## Changes in the Law and Procedures

Many bills have been proposed to reform the existing laws. While most of them have not been passed, two significant changes regarding trial procedures may have impact for the future.

Robbins Rape Evidence Law Robbins Rape Evidence Law went into effect January 1, 1975. Prior to its enactment, a victim's past sexual history was admissible in court. This evidence was prejudicial to the victim despite the fact that it may have had no bearing on the case. The victim's history is now inadmissible unless the defense convinces the judge, in chambers, that prior sexual history is relevant to the victim's credibility as a witness.

<u>Cautionary Instruction</u> In California, judges have been required to instruct the jury that rape is a charge "which is easily made and once made is difficult to defend against, even if the person accused is innocent. Therefore, the law requires that you examine with caution the testimony of the person alleged to have been raped". This cautionary instruction is prejudicial and not based in fact: rape is a charge which is extremely difficult to bring and prosecution data shows that it is easy to defend against.

The mandatory use of the instruction was challenged by Judge Armand Arabian of the Los Angeles County Superior Court. Judge Armand did not give the instruction in a case brought before him and the California Supreme Court has upheld his action.

## Redefining Rape

The Rape Victimization Study findings supported the urgent need for reforming rape laws. Consequently, the staff worked with a consulting attorney and feminist groups who were drafting a bill which would completely revise Section 261 of the Penal Code. The resulting draft "Sexual Assault Bill" is similar to legislation passed in Colorado, and seeks to redefine forcible sex crimes in terms of the conduct of the offender rather than of the victim, thereby eliminating lack of consent of the victim as the basic element of the offense. The bill would also eliminate rape as an offense separate from other sexual assaults and thus, include forcible sodomy, fellatio, cunnilingus and intrusion of foreign objects. The bill would eliminate the sex of the victim and offender from the definition and would make the marital relationship of victim to offender irrelevant. Finally, the bill would create four degrees of sexual assault, varying with the "seriousness" of the crime, as follows: the first degree punishes penetration or attempted penetration under a variety of threatening circumstances, or when the victim is under 12 years of age; the second degree punishes penetration or attempted penetration in less threatening types of situations; the third degree punishes sexual assault (i.e., without penetration) under threatening circumstances; and the fourth degree punishes sexual contact under less threatening circumstances. The crimes would be aggravated if serious bodily injury or extreme pain is inflicted on the victim, or when more than one offender is involved in the assault. The draft bill is being refined prior to identifying a sponsor.

The wide variety of circumstances in which rape occurs was given much consideration in designing the four degrees of sexual assault. The entire concept of establishing degrees was also seriously questioned. It was decided that, while the definitions for each degree could not possibly cover every situation, the bill will certainly address more circumstances than present law. By establishing degrees, the bill should promote increased prosecution and conviction. Much research and discussion also went into examining the possibility of eliminating sex entirely from sexual assault laws, and punishing all such crimes under an aggravated assault statute. Although some feminist groups originally favored this approach, it was concluded that there is a vast difference between sexual assault and other kinds of assault, which necessitates different treatment on the law. One of the major differences is that other assaults are judged in terms of severity of physical injury inflicted. Since the majority of rape victims do not suffer severe physical injury, assault laws might not pertain in many cases.

Some alternatives to criminal prosecution by the District Attorney's Office have been investigated. A victim can file a civil suit, thereby taking the case out of the criminal justice system; civil suits can be against the offender, or against another entity who should be held responsible for the assault (e.g., a negligent landlord or employer). Another option requiring further exploration is the possibility of the victim retaining a private attorney to criminally prosecute the case; the attorney would need to be approved (or appointed) by the District Attorney's Office. To implement this option, a pool of attorneys skilled in rape prosecutions and available to victims needs to be established.

## COMMUNITY SERVICES

#### Evaluation

The Rape Victimization Study revealed a need for community services responsive to victims, particularly crisis intervention, supportive counselling and psychiatric treatment. Lack of information is the predominant problem, both for victims who are not aware of existing services and for professionals who lack the knowledge and training which would enable them to respond appropriately. Over half the sample victims interviewed responded "yes" to the question: "Did you ever feel a need for professional services which you did not get?". The most frequently desired service was psychiatric or social service (68%). More in depth training should be provided to agency staffs, and more community agencies (potentially in contact with victims) should be involved. Staffs of various agencies have availed themselves of information regarding rape, and have participated in seminars to make themselves more responsive to victims. However, efforts to develop community resources for victims and to sensitize agency staffs have been only modestly successful. A wide variety of resources should be developed to accomodate victims' preferences for traditional agencies, more feminist-oriented services, or for more neighborhoodbased resources.

<u>Mental Health and Social Services</u> None of the community mental health or social service agencies were found to be particularly responsive to rape victims. Many directors or staff indicated interest in learning more about rape, but the majority stated that agency services provided to a victim would be no different than services provided to other patients or clients.

The Center for Special Problems (a part of the Community Mental Health system) has established a Rape Center Project, involving a core group of counsellors who are available to counsel rape victims. In addition, the Rape Center Project provides ongoing training to volunteer counsellors at Central Emergency. (Clearance from Community Mental Health Services assures that victims will receive services, regardless of financial status.)

Private psychiatrists, psychologists and social workers who responded to Queen's Bench Foundation questionnaires or who participated in interviews, showed a wide range of attitudes about rape and sensitivity to victims. Those who seemed especially prepared to serve victims were included in the Queen's Bench Foundation's <u>Victims of Sexual Assault Referral Directory</u>. In an attempt to reach other psychiatric professionals with information regarding rape and treatment needs of victims, Queen's Bench Foundation provided information to the Northern California Psychiatric Society, the American Psychiatric Association, and the National Association of Social Workers.

Medical Services The survey of San Francisco medical resources indicated that other than Central Emergency, few emergency rooms, clinics or other health centers knowingly see rape victims, nor are they particularly responsive to the needs of victims. Procedures for examination and treatment are the same for any patient. None of the V.D. or pregnancy clinics (and only a few emergency rooms) were sufficiently informed and equipped to collect legal-medical evidence; few offered counselling.

Several medical resources were found to be concerned about victims or were interested in learning more about rape in order to become more responsive. Each of these were provided a recommended protocol for examination and treatment of rape victims, in addition to other written materials. Queen's Bench Foundation staff met with the staff of Cathedral Hill Pregnancy Control Center and Planned Parenthood to provide additional information about the needs of victims and appropriate medical care. Housing The survey found several emergency housing facilities which would serve rape victims on a limited basis. Since then, Aquarius House has tried to make special arrangements for rape victims and has sought funds for a special program for victims. Queen's Bench Foundation offered a seminar on rape and victims' housing needs to the staffs of Aquarius House, Raphael House, Huckleberry House, Shilow, and the YWCA. Agency staff agreed that a variety of housing alternatives should be available to meet the victims' needs and preferences.

Legal Services The Woman's Litigation Unit of the San Francisco Neighborhood Legal Aid Foundation has become actively involved in the issue of rape and has helped to develop and support legislation reforming rape laws. This remains virtually the only agency equipped to provide victims legal information and limited assistance. However, a number of individual attorneys in private practice are interested in providing legal assistance to victims; this resource needs to be developed.

<u>Compensation for Victims of Violent Crimes</u> To qualify for Compensation for Victims of Violent Crime, the applicant must be a California resident who suffers financial loss as a direct result of physical injury sustained from a violent crime. The victim's financial loss must cause serious financial hardship and total loss must exceed \$100 or \_0% of the victim's net monthly income, whichever is less. The victim must not have, in any way, willingly participated in the commission of the crime or contributed to his/her own injuries. Finally, the victim must cooperate with the law enforcement agency in apprehension and prosecution of the assailant.

Between January 1, 1974 and March 8, 1975 (14 months) 171 rape victims applied for victim compensation. As of June, 1975,37 were granted compensation and 109 cases were pending completion of the claim investigation. Twenty-five cases were denied primarily because of the victim's inability to show financial hardship as a result of the crime. The amounts of money awarded ranged from \$32 to \$4,274; a total of \$23,943 has been paid to victims of rape. It takes eight to ten months for a victim to receive indemnification.

San Francisco Women Against Rape San Francisco Women Against Rape is the only community organization dealing exclusively with the problem of rape in San Francisco. Their volunteers receive numerous calls from victims and from organizations requesting educational presentations.

At present, San Francisco Women Against Rape has a post office box for correspondence and a hot line which is operative from 3:00 p.m. to 7:00 a.m. An answering service takes messages during the remaining hours.

# PUBLIC EDUCATION

# Actions Taken and Public Response

The Rape Victimization Study indicated a need for broad public education regarding the problem of rape, the role of public agencies in response to rape, and community services available to victims. Queen's Bench Foundation recommended that public education be implemented in collaboration with the San Francisco Police Department, Department of Public Health, District Attorney's Office and community women's groups. While each agency agreed to participate, Queen's Bench Foundation has been largely responsible for generating materials and scheduling speaking engagements. Educational Materials Public response to the Rape Victimization Study indicates that the information contained in the report met a real need within the community for information on rape. Written materials are clearly an important adjunct to any public education program or community efforts to implement change. Such materials are virtually unavailable because many programs across the country have not widely distributed their findings.

In addition to written materials, Queen's Bench Foundation has provided a halfhour video-tape in Spanish. Femedia III was contracted to develop a tape which focuses specifically on the problem of rape among Latinas and which is directed to the Latin community. It is not an English film translated into Spanish; rather, it was made with an awareness of the traditions, beliefs, values, taboos, and customs of the Latin culture; it is written, acted and directed by Latinas.

Consultation was also provided to other groups developing films or video tapes relating to rape. One film in particular should be especially useful to youthoriented programs. O.D.N. Productions, Inc. is developing a film which is directed to adolescents and young adults. It explores cultural attitudes about sex role stereotypes, distortions in perception and breakdowns in communications which result in rape. It is designed to help resolve some of the confusion experienced by teenagers as they cope with changing mores and patterns of male-female relationships.

Public Speaking After the distribution of the Rape Victimization Study preliminary report and recommendations, numerous groups asked for further information, and staff conducted numerous seminars on rape. The responses of the audiences revealed community misunderstandings about rape and confirmed the need for public information. Most of the adult groups focused their questions on police and court procedures and were particularly surprised to learn that the San Francisco Police Department handles sex crimes investigations with sensitivity and support. Legislation and prevention were major concerns within the community. At every presentation, audiences seemed to want specific guidance about what to do when attacked.

The Board of Education and the Superintendent of Schools instructed each San Francisco high school to schedule presentations for every Family Life Education class. Consequently, Queen's Bench Foundation met with 65 sophomore classes at 10 schools (8 in San Francisco). The Police Department and Department of Public Health participated in these presentations. Students were particularly interested in the circumstances of rape. They often seemed to have difficulty rejecting the myth that rapists are always strangers who lurk in dark alleys, viciously beat and rape their victims, as well as the myth that victims are promiscous women who "ask for it". Many of their questions indicated that they are grappling with confusion regarding sex roles/ expectations and their right to experiment sexually or to refuse when they choose.

In presentations made to classes of girls, there was much discussion and interaction with the speaker. To coed classes, the boys dominated the discussion and the girls asked virtually no questions. While there may be some advantage to coed discussions on rape, it seems that separate sessions should be offered to allow girls to discuss this sensitive subject without embarrassment and inhibitions.

# APPENDIX

NOTE: Some questions were asked of the last 25 victims interviewed. All these tables reflect interviews with 80 victims, except where noted otherwise, e.g., N = 25 or N = 40.

Age When Raped	Percentage of Total Number = 80
Under 18 18 - 24 25 - 34 35 and over	14 47.5 29 10
Race or Nationality	
White Black Latina, Oriental, Other	85 7.5 7.5
Religion	
Protestant Catholic Jewish None Other	41 24 10 20 5
Marital Status	
Single Married Divorced/Separated	64 15 21
Race of Rapist	
White Black Latino, Other	43 46 11
Multiple Attackers Involved Multiple Rapists Involved	27.5 14
Victims Raped Previously	23
Victims Threatened by Rapist	77.5
With weapon With physical force	36 41
Force Used by Rapist	92.5
Weapon Physical force alone	30 62
Victims Resisted	55

	Percentage of Total
Physical Injuries Suffered (N = 25)	55
Serious Injury Minor Injury	9 46
Reaction During the Rape	
Strong fear for life or body Strong fear for "sex" act Other	80 9 11
Reactions After the Rape	
Anger Fear Anxiety Helplessness Depression Shame Guilt Withdrawal (N = 25) Repression (N = 25)	43 62 66 76 59 40 37.5 64 44
Long Term Impact on Victim	89
Sense of safety Sexual/social relationships Self-image All areas	39 35 16 10
Victims Experiencing Positive Effects (N =	25) .36
What Helped Most in Coping with the Rape (N	1 = 25)
Support from friends Positive action (reporting to police) Nothing (unable to cope) Other/no answer	48 12 16 24
Response of Friends & Relatives	
Supportive Non-supportive	73 27
Location of Rape	
In San Francisco Elsewhere	54 46
Relationship with Rapist	
Stranger Familiar	89 11

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Percentage of Total

Victims Receiving Medical Care (N = 40)

Sympathetic response: nurses Sympathetic response: doctors Efficient/indifferent response Callous/non-believing response	79 50 22.5 27.5
Non-reporters Reporters Reason for Not Reporting (N = 40)	50 50
Expectations re: treatment Shame Not enough evidence Never thought of it Other	45 15 7.5 12.5 20
Reason for Reporting $(N = 40)$	
Protect self/others Punish offender No option Other	35 27.5 15 22.5
Police Response to Reporters (N = 40)	
Positive response Negative response	70 30
Victims Preferring Female Inspectors	10

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