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Help for the Rape Victim

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A Pennsylvania
Commission for Women
Resource Guide

Revised May, 1979

Commonwealth of Pennsylvania
Dick Thornburgh, Governor

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Help for the Rape Victim

U.S. Department of Justice
National Institute of Justice

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IN CASE OF RAPE . . .

1. Call the police. Tell them exactly what happened – no more, no less. Time is important.
2. Try to remember as many things about your attacker as possible. Write down details about the rapist and the rape circumstances.
3. Do not destroy evidence that may be helpful for prosecution. Do not clean up, bathe, douche, or change clothes.
4. Get medical help. The police can escort you to the nearest hospital. Take a change of clothes with you. Show the doctor any bruises or scratches.
5. The hospital should provide treatment for injuries and a complete gynecological examination. Evidence will be collected for the medical report; treatment for venereal disease and pregnancy should be made available.
6. Be sure to obtain a follow-up examination six weeks after the rape. Laboratory tests at this time will determine the occurrence of venereal disease and it can be treated immediately.
7. Know the steps involved in the prosecution process and your legal rights. This information can be obtained from your local rape crisis center.
8. Call a friend for support. Contact a rape crisis center in your community; they will accompany you to the hospital emergency room and advise you of your legal and medical rights. An advocate will be available to accompany you throughout each phase of the legal process, and will offer emotional support as you request it.

YOU DO NOT HAVE TO BE ALONE AFTER A RAPE.

CONTACT A LOCAL RAPE CRISIS CENTER FOR HELP.

For information in Pennsylvania, call the Pennsylvania Coalition Against Rape: 800-692-7445.

FOREWORD

If complaints and requests for information received by the Pennsylvania Commission for Women provide a barometer of women's concerns, then aid for the rape victim is a major issue. Rape victims suffer from the double trauma: the attack itself, and the lack of sympathetic treatment afterward.

What help does the rape victim need? Basically four things: information and emotional support; prompt, complete and sympathetic medical treatment; unbiased, sensitive treatment by police investigators; and reasonable protection from harassment if she (or he) decides to report the crime and serve as a witness.

Largely through the efforts of rape crisis centers in communities in Pennsylvania, support and aid for the rape victim is becoming more widely available. But much remains to be done, especially in communities which have no rape crisis center.

In 1975, the Pennsylvania Commission for Women published the first version of this booklet. It was researched and written by Rosalie Hydock.

This booklet has been updated and rewritten with the valuable assistance of Barbara Graham of the Pennsylvania Coalition Against Rape (PCAR). The Coalition and the Commission are glad to provide this resource to aid victims, to help interested individuals who deal with rape victims, such as police and medical personnel, and to make available this information to those wishing to start programs to aid rape victims. It may be reprinted by anyone.

The listing of rape crisis centers at the end of this resource guide provides the most complete information currently available.

NCJRS

JUL 9 1981

ACQUISITION

Greta R. Aul, Esquire
Acting Director
Pennsylvania Commission for Women

INTRODUCTION

Rape, an act of violence, has always been and still is, a crime that is surrounded by myths and misconceptions, half-truths that have little or no basis in reality. During the past five years, rape crisis centers throughout the Commonwealth have persisted in destroying those stereotypes in the minds of the general public, the professional community, and the victims. Services have been provided to over 13,000 sexual assault victims and educational programs have been presented to countless numbers of civic and social groups; schools and colleges; medical, law enforcement and legal personnel. The number of rape crisis centers and resources have tripled so that today over 90% of the rapes that are reported in Pennsylvania are in areas that have services available for the victim and the victim's personal support system of family and friends. Yet the incidence of rape continues to spiral and the conviction rate for the crime is still dismally low. The work must continue.

The Pennsylvania Coalition Against Rape, a statewide funded agency representing the rape crisis centers, exists to provide education, training, maintenance, consultation and referrals to professionals, state organizations, rape crisis centers, rape concern groups, and communities without centers. The experiences and expertise gathered over the past five years are the foundation on which the Coalition is built. The Pennsylvania Coalition Against Rape and the state's rape crisis centers are aware of the still remaining necessity to continue to build an efficient, effective, sensitive network for the victim and the community.

It has been the pleasure of the staff of the Pennsylvania Coalition Against Rape to update this booklet by incorporating into the original text what has been learned since the first printing. It is a reflection of the commitment shared by the Pennsylvania rape crisis centers to provide sensitive, quality care to victims of sexual assault.

Sandra K. Lambert
Executive Director
Pennsylvania Coalition Against Rape

THE RAPE VICTIM'S NEEDS

Rape is everybody's problem. But to many people, rape is a crime that happens to someone else, or in some other place; they never imagine that they, too, might be a victim of this violent crime.

The risk of rape is all too real. In Pennsylvania in 1977, 2,228 forcible rapes were reported to police departments, but the FBI estimates that only one rape in ten is reported, so the actual number of rapes committed was actually closer to 22,000. In addition, rape was the only violent crime in Pennsylvania to show an increase in both 1976 and 1977. Although the incidence of reported forcible rapes has risen dramatically, it is still the least reported of violent crimes against a person.

Why does the rape victim hesitate to report the incident? Why do so many victims feel they have to face the trauma of rape alone? Many victims fear that they will be mistreated by the police and/or the hospital staff. Some are afraid of being misunderstood. But most victims fear that they will be "blamed" for being raped. Because of the myths perpetuated about rape, many victims of the crime are made to feel guilty about something that was not their fault at all!

Not only is this undeserved, it is a rapist's best weapon. Rape is a violent crime that uses sex as a means to express that violence. Anyone who rapes and gets away with it is likely to repeat the crime and become more violent each time. Yet the victim understandably is often reluctant to provide data that can prevent other women from becoming victims.

Reaction of feeling "dirty" or "ruined" or "guilty" are all conditioned responses that contribute to the crisis state of the rape victim. Crisis produces a whole range of feelings and cannot be resolved until decisions are made towards action of some kind. The rape victim has two important needs during this phase: (1) access to factual information and practical resources; and (2) access to some one who can help her deal with her feelings about the rape.

Every rape victim should have immediate and thorough medical attention, not only for the treatment of injuries but also for the gathering of evidence. Although medical corroboration is not necessary for prosecution, it does strengthen a case. In addition to external injuries resulting from the use of force, the victim may also have serious internal injuries that require a gynecological exami-

nation for detection. Since rape exposes the victim to infection and unwanted pregnancy, the victim also needs laboratory tests and a follow-up examination and treatment within six weeks.

The rape victim should also be made aware of her right to prosecute her assailant and the procedures necessary to do this. The victim should know what to expect at each step of the legal process BEFORE she decides whether or not to press charges. The goal of police involvement in a rape case is the apprehension, identification and preparation for prosecution of the rapist. Most police departments try to reach this goal without causing additional trauma for the rape victim.

Significant changes during the last five years in the attitudes and procedures followed by the medical and legal community are serving to lessen the trauma victims may have experienced in the past.

In addition to accurate information, a rape victim needs the reassurance that she is a valuable human being. She needs the nonjudgmental empathetic support of someone who is calm and willing to listen. Immediately after the rape and for some time after, a victim needs someone who can help her to deal with her feelings towards herself and her assailant. She may need help to acknowledge these feelings and to deal with them in a constructive way. She also needs support in regaining the control of her life which was stripped away by an act of violence.

If a rape victim's emotional, medical and legal needs are met, the rape experience need not become a lifelong burden. The individual will find that she can integrate the rape and go on living a normal life.

HOW SUPPORT SERVICES HELP

Coordinated efforts by hospital, police, district attorneys, and rape crisis centers are necessary if the medical and legal rights of the victims are to be maintained. The process of gathering evidence begins with the victim's first contact with both hospital and police. If evidence is not acquired at this time, the chance for a successful prosecution and conviction of the rapist may be lessened. Each institution should develop a program that insures complete and sensitive handling of rape cases.

HOSPITAL TREATMENT OF RAPE VICTIMS

Procedures should be established so that emergency room personnel know where and by whom rape victims will be treated. If possible, a separate examination room apart from the emergency area should be used and a gynecologist should have all the necessary equipment ready to conduct these tests. A program for treatment of venereal disease and possible pregnancy should be established. Whether rape occurred is a legal matter and is NOT a medical diagnosis. Guidelines for the treatment of suspected victims of sexual assault are available from the Pennsylvania Medical Society and the Hospital Association of Pennsylvania.

POLICE INVOLVEMENT

Since the success of prosecution greatly depends on the evidence gathered by the local police department, it is important to establish a program for handling rape victims that includes these recommendations:

1. The number of investigators assigned to work rape cases should be increased and a separate division should be organized to handle sexual assaults.
2. Individuals assigned to work on rape cases should have previous investigative experience and should be sensitive to the needs of victims. Consideration should be given to having women available as part of the investigative team.
3. Training of police officers should include special instruction about rape and dealing with rape victims. Rape crisis centers are an important resource to police.
4. Police should transport the victim to and from the hospital for emergency treatment and collection of medical evidence. The victim should never be questioned in a corridor or other public area. Police should never be present during the medical examination.
5. Rape victims should be treated like human beings. Careful questioning and follow-up can determine the validity of the allegation. Degrading or irrelevant questions must be eliminated; rape should never be referred to as "sexual intercourse."
6. A female photographer should be present to take any necessary photographs and accurate records should be kept about the facts and disposition of all rape cases.

7. Excessive interviewing should be avoided. Take a description of the assailant and a brief account immediately. Further details can be secured when the victim is calmer. Further interviewing should not be done, unless absolutely necessary.

8. Protection for the victim should be provided when threats have been made.

THE COURT AND CORRECTION SYSTEM

Members of the Prosecutor's office can encourage victims to prosecute by handling rape cases in an unbiased, sensitive manner. The following recommendations ensure the legal rights of the victims and encourage prosecution.

1. The Prosecutor should meet with the victim before the trial, explain the proceedings to her, instruct her on the proper terminology to use, and how to reply to questioning.

2. One or more district attorneys should be assigned to work on all rape cases so that these staff members can develop expertise in handling sexual assault cases.

3. District attorneys should work with police and hospitals to familiarize them with court proceedings and the kinds of evidence required.

4. Laws dealing with the crime of rape need to be reviewed and updated.

5. State programs for treating convicted rapists should be reviewed. New programs should be developed incorporating recent findings about rapists.

HOW RAPE CRISIS CENTERS HELP

In the past five years, rape crisis centers have provided services for over 13,000 victims of sexual assault. Twenty-six centers are members of the Pennsylvania Coalition Against Rape, and an additional dozen programs are in some stage of development. Rape crisis centers have grown into valuable community resources providing not only sensitive quality care to victims but also much needed community and professional education. These centers have become part of a network that includes medical, law enforcement, and legal personnel, and

other community agencies. This network serves, collectively and individually, as an effective, sensitive support system for the victims of sexual assault.

The overall goal of the rape crisis centers is the lessening of the victim's trauma by providing accurate, unbiased information and emotional support. This goal is attained by:

- Obtaining prompt and complete medical care for the victim;
- Offering support during medical and legal procedures;
- Providing follow-up referrals to appropriate agencies;
- Educating the public about the occurrence of rape, the myths surrounding the crime and the victim and common sense defense techniques;
- Instituting changes in the legal system so that the victim has constitutional protection equal to the defendant's;
- Changing public attitudes towards rape and its victims;
- Educating and working cooperatively with all professionals who have contact with victims.

Rape crisis centers provide information and counseling services through a telephone hotline, and other staff and volunteer support services to the victim. They also attempt to coordinate and improve medical and legal services, and to stimulate public awareness of the problem.

The mainstay of each rape crisis center is the telephone hotline. Emergency phone service provides a convenient way for the public to contact the center and also allows the caller to remain anonymous if she so chooses. Some victims may call only once — to get specific information; others will call a number of times to get accompaniment, further information, and support. A victim's need for the services of the center depends to a large extent on the amount of support she receives from family and friends; no attempts are made to provide intensive counseling or instant therapy. If further counseling is indicated, the center will refer the caller to an appropriate individual or agency.

Some centers have advocates staffing the telephone 24 hours a day; others make use of local telephone answering services to contact the advocate on call. Smaller centers work on more limited schedules, but every center has developed a system so that every caller is assured of getting the help she needs.

Trained advocates also meet the rape victims at the hospital emergency

room, answer any questions regarding the medical procedures and remain with the victim during the hospital exam if requested. Legal information is provided with the assurance that an advocate will be available to accompany the victim through all legal proceedings should she decide to prosecute. The purpose for hospital and court accompaniment is to offer support during the frequently long waiting periods and to ensure that established procedures are followed.

Other major functions of the rape crisis center are to develop community awareness and to facilitate change toward better treatment of the rape victim. Rape crisis center advocates have been working with hospitals and police departments to establish consistent and humane procedures for dealing with rape cases. Recommendations for the court and corrections systems have been made in order to ensure rape victims of prosecutors who are sensitive to the victim's needs, who will work together with the police and hospitals to collect all necessary evidence, and who will encourage the victim to prosecute.

Rape crisis centers work with hospitals, police, and District Attorneys for the benefit of the rape victim. Advocates from the centers can provide the necessary personal support to the rape victim that makes it easier for medical and legal personnel to do their jobs.

Besides helping victims after a rape occurs, the centers also work through their Speakers' Committees to inform the public about preventive techniques and common sense defense tactics. These educational programs are designed not only to increase awareness about rape, but also to provide information about what to do if raped.

HOW TO START A RAPE CRISIS CENTER

Most of the centers in the state started with a core group of committed volunteers who strongly believed that it was time to stop talking about the problems of rape and to begin doing something about them. To construct an appropriate program they worked together with hospital administrators, local police departments and district attorneys, psychologists, the media -- in short, anyone who could help them to develop a practical and useful program. As local professional and community support grew, so did the number of individuals who wanted to help implement the program.

Center volunteer advocates are not necessarily professional counselors; they

are concerned people interested in helping other people during a time of stress. The most important qualification for advocates is a sense of human caring for others that manifests itself by active involvement in the work of the center.

STAFFING

Each crisis center depends on an active staff of volunteer advocates. Some also have a paid program staff. Each center does its own training and screening of volunteers. The purpose of training is to prepare the advocate to act in a para-professional capacity. An advocate must know how to deal with rape victims, be able to communicate with and respond to the verbal and non-verbal cues of the victim, know how and when to refer, and understand her own needs and limitations.

TRAINING PROGRAMS COVER:

- Myths and misconceptions
- Medical and emergency room procedures
- Evidence gathering and court procedures
- The police interview
- Crisis and trauma
- Crisis intervention techniques
- Counseling and listening skills

Trainers are drawn from local hospital, medical, legal and mental health agencies, as well as from the staff and volunteer core of the center.

Psychologists, counselors, and center personnel also assist in screening those individuals from training who appear to be less suited for actual counseling of rape victims. These volunteers are encouraged to share their talents by working with other committees that do not work in direct contact with victims.

There are many volunteers who prefer not to work as counselors and there are many other areas of activity that require volunteer involvement. Most centers depend on committees or task forces to provide the services of the center. The committees most commonly needed are:

- Volunteer recruiting, scheduling and training
- Legal and police involvement
- General information and research

- Referral
- Publicity
- Funding
- Medical procedures
- Public education/speakers
- Public relations/advertising

FUNDING

Many centers start without funding; others have raised money from private foundations, local businesses and speaking or membership fees. Federal funding is available through the Law Enforcement Assistance Administration (L.E.A.A.), a program of the Pennsylvania Commission on Crime and Delinquency, P.O. Box 1167, Federal Square Station, Harrisburg, Pa. 17120. All applications must be processed through regional offices which make the final recommendation for funding. Community support for such funding applications is required. It may also be useful to explore funding possibilities of agencies such as the Department of Community Affairs, CETA, community mental health/retardation agencies, United Ways and Title XX of the Social Security Act.

Some private foundations are willing to contribute funds for a specific project such as public relations or education. Before contacting any funding agencies, develop a written proposal explaining your program, and the expenses that will be incurred.

ELEVEN GUIDELINES FOR SUCCESSFUL CENTERS

1. **CONTACT THE PENNSYLVANIA COALITION AGAINST RAPE (PCAR).** The Coalition can provide technical assistance in the early stages of development and serve as a resource as the program grows. It has available the expertise, experiences and knowledge of other centers throughout the state.

2. **STUDY WHAT OTHER CENTERS HAVE DONE.** Visit a nearby center to see how they have organized their services (see RESOURCE LIST for the center nearest you). Many of these centers print valuable material on how to organize a rape crisis center. Two excellent publications are:

"Prescriptive Package: Rape and Its Victims — A Report for Citizens, Health Facilities and Criminal Justice Agencies." Center for Women

Policy Studies, U.S. Government Printing Office, Washington, D.C. 20402. Catalog No. J 1.8/3 : R18, \$4.10.

"Sexual Assault: A Statewide Problem." Minnesota Program for Victims of Sexual Assault, 430 Metro Square Building, St. Paul, Minnesota 55101. A procedural manual for law enforcement, medical, human services and legal personnel.

3. **AGREE ON MAJOR GOALS.** Too many rape centers try to get underway before taking time to clearly define what their collective goals are and how to implement these ideas. Establish bylaws that outline how decisions will be made and how change can be incorporated within the organization.

4. **MAKE THE SYSTEM WORK FOR YOU.** Much more can be accomplished if you assure existing institutions that your existence does not threaten theirs. Prepare a written program explaining how your center can extend current services before arranging meetings at hospitals, police and DA's.

5. **DEVELOP A LOCAL SUPPORT BASE.** Be sure you contact lawyers, doctors, teachers, psychologists, mental health agencies during the formative stages. Solicit their help in forming your programs, but also include nonprofessional community members and community leaders.

6. **GET CONSULTANTS WHO AGREE WITH YOUR GOALS.** A psychiatrist who believes that all women really "enjoy" rape may not be the best consultant for your training program. A representative of the Coalition would be a sensitive resource. Be sure everyone is working toward the same ends.

7. **WORK WITH THE DISTRICT ATTORNEY, MAYOR, POLICE, HOSPITAL ADMINISTRATORS, MEDICAL SOCIETY, BAR ASSOCIATION, AND ANYONE ELSE WHO IS INVOLVED IN THE PROBLEM.**

8. **INCORPORATE AS SOON AS POSSIBLE.** It is important that you file for nonprofit corporate and tax-exempt status. Incorporation ensures that no single individual can be held liable in the event of a lawsuit; being tax-exempt makes you eligible to receive funds from private foundations. Consult an attorney in an advisory capacity to make sure paperwork and legal questions are handled correctly.

9. **KEEP RECORDS AND COMPLETE FILES; MAINTAIN CONFIDEN-**

TIALITY. Be sure that all call forms, follow-up records, log books, are ready for use during training sessions. Records are vital to support grant requests of state or federal funds. Many centers cross index their files to limit the information that can be subpoenaed.

10. USE FUNDS WISELY. Rent, telephone, advertising all take a large chunk out of the budget. Get local people to provide in-kind services. Get written agreements on leasing arrangements and support services (especially if sharing facilities). Be sure both parties know what to expect.

11. PUBLICIZE YOUR EFFORTS. But be sure the center is not identified with just one individual. Maximize the use of the press, radio and television. Use these sources to present your program to the public. Feature programs rather than individuals in your publicity.

RESOURCE LIST

Pennsylvania Coalition Against Rape
P.O. Box 64
Harrisburg, PA 17108
(800) 692-7445

Services:

- Education programs to state organizations;
- Training for medical, law enforcement and social service personnel;
- Technical assistance to rape concern groups and rape crisis centers;
- Resource for communities without a rape crisis center;
- Clearinghouse of materials and information on rape issues.

The following resources provide:

- A hotline;
- Accompaniment to hospitals, law enforcement agencies and court proceedings;
- Continued emotional support and counseling;
- Referral services;
- Community and professional education;
- Information on all aspects of rape.

Resources for Victims of Sexual Assault:

Beaver County Assistance for Victims of Violence
305 Sharon Grange Road
Aliquippa, PA 15001
(412) 375-9409

Rape Crisis Council of Lehigh Valley
P.O. Box 1445
Allentown, PA 18105
(215) 437-6611

Care of the Sexually Assaulted Committee
Altoona Hospital
Howard Avenue & Seventh Street
Altoona, PA 16603
(814) 946-2151

Center on Rape and Assault
P.O. Box 604
Butler, Pa. 16001
(412) 282-1400

Women In Need
P.O. Box 25
Chambersburg, PA 17201
(717) 264-4444

Clearfield Jefferson Community Mental Health Center
102 Hospital Avenue
DuBois, PA 15801
(800) 262-0707

Rape Crisis Service of Monroe County Planned Parenthood
162 East Brown Street
East Stroudsburg, PA 18301
(717) 421-4000

Erie County Rape Crisis Center
356 East 11th Street
Erie, PA 16503
(814) 456-1001

Women's Services of Westmoreland County
Bank & Trust Building
Greensburg, PA 15601
(412) 836-1122

Harrisburg Area Rape Crisis Center
P.O. Box 38
Harrisburg, PA 17108
(717) 238-7273

Indiana Council Against Rape Everywhere
Indiana University of Pennsylvania
Box 1657
Indiana, PA 15705
(412) 357-2855

Rape Aid & Prevention
P.O. Box 5113
Lancaster, PA 17601
(717) 392-7358

Women Organized Against Rape in Bucks County
P.O. Box 793
Langhorne, PA 19047
(215) 752-3596

Crawford County Rape Crisis Center
751 Liberty Street
Meadville Hospital
Meadville, PA 16335
(814) 724-2732

Women Against Rape of Delaware County
Box 211
Media, PA 19063
(215) 566-4342

Alle-Kiski Council for Human Services
730 Church Street
New Kensington, PA 15068
(412) 339-7010

Women Against Rape of Montgomery County
P.O. Box 1179
Norristown, PA 19401
(215) 277-5200

Venango County Rape Crisis Center
Room 11, Seneca Building
Oil City, PA 16301
(814) 677-7273

Center for Rape Concern
112 South 16th Street
Philadelphia, PA 19107
(215) 568-6627

Women Organized Against Rape in Philadelphia
1220 Sanson Street
Philadelphia, PA 19107
(215) 922-3434

Center for Victims of Violent Crimes
406 Jones Law Building Annex
311 Ross Street
Pittsburgh, PA 15219
(412) 355-5764

Pittsburgh Action Against Rape
211 South Oakland Avenue
Pittsburgh, PA 15213
(412) 765-2731

People Against Rape
P.O. Box 885
Reading, PA 19603
(215) 372-7273

Beaver County Women's Center
175 West Washington Street
Rochester, PA 15074
(412) 775-0131

Rape Crisis Program of Women's Resource Center
312-315A Bank Towers Building
Spruce Street & Wyoming Avenue
Scranton, PA 18503
(717) 346-4671

Rape Crisis Center of Mercer County
76C Jefferson Avenue
Sharon, PA 16146
(412) 528-2110

Rape Crisis Center of State College
108 West Beaver Street
State College, PA 16801
(814) 234-5050

Elk County Rape Crisis Group
316 West Theresa Road
St. Mary's, PA 15887
(814) 773-7777

YWCA Rape Crisis Center
201 North Franklin Street
Titusville, PA 16354
(814) 827-9777

Rape Counseling & Information Service
62 East Church Street
Uniontown, PA 15401
(412) 437-3737

Sexual Assault Aide Center
YWCA
207 Second Avenue
Warren, PA 16365
(814) 723-1030

Rape Crisis Council of Chester County
18 West Miner Street
West Chester, PA 19380
(215) 692-7273

Women Organized Against Rape
P.O. Box 1684
Wilkes-Barre, PA 18703
(717) 829-1341

Williamsport Area Rape Network
1014 Baldwin Street
Williamsport, PA 17701
(717) 328-8400

Wise Options for Women
c/o YWCA
815 West Fourth Street
Williamsport, PA 17701
(717) 322-4714

Rape Crisis Center of York
P.O. Box 892
York, PA 17405
(717) 845-3656