

Working with Survivors of Sexual Violence: A Trauma-Informed Approach

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Agenda:

1. Overview of Sexual Violence: Definitions and Figures
2. Power, Identity, and Sexual Violence
3. Trauma and Its Impacts on the Brain and Memory
4. Normal Trauma Responses
5. Trauma and Sexual Violence in Childhood
6. Shame, Guilt, and Blame After Sexual Violence
7. Implications for Working with Victims
8. Trauma-Informed Approaches



Defining Sexual Violence

Defined by the World Health Organization as:

Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using *coercion*, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.

WHO - World Report on Violence and Health

Defining Sexual Violence

Verbal – Sexual Harassment

- Prohibited in schools, public institutions and workplaces
- Includes: sexual jokes, comments, requests for sexual favours, leering, non-verbal sounds, showing of pornography, threats or promises in exchange for sexual acts, includes anything related to an individual's sexuality and gender.

Defining Sexual Violence

Physical - Sexual Assault - s. 273.1(1)

- All unwanted activity of a sexual nature, such as sexual grabbing, kissing, and fondling, as well as penetrative assault by a body part or object.

Defining Sexual Violence

Consent

Voluntary agreement to engage in sexual activity in question. *Person affirmatively communicated their consent, whether through words or conduct. Silence or passivity does not equal consent.*

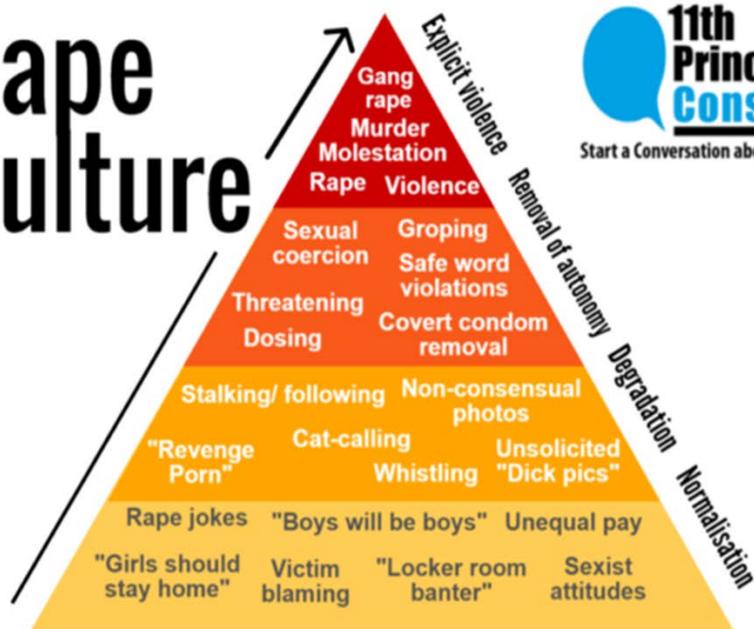
Consent must be clear, coherent, willing, and ongoing

May consent to one type of sexual activity, but not another (ex: may have consented to kissing and fondling, but not penetration).



Sexual violence involves a spectrum of behaviours that are linked to attitudes about sex, gender-roles, race, ability and sexual orientation.

Rape Culture



11th Principle: Consent!
Start a Conversation about Consent

These are not isolated incidents. The attitudes and actions on the bottom tiers reinforce and excuse those higher up. This is systematic.

If this is to change, the culture must change.

Start the conversation today.

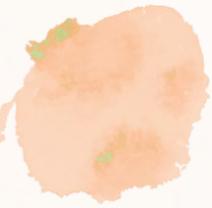
Sexual Violence in Canada-- Statistics



1 in 3 girls and
1 in 6 boys will
be assaulted
before 18
years of age



Most violence
occurs between
ages 12 and 34



In 80% of cases,
the perpetrator
is known to the
victim



+50% of women
will experience
some form of
sexual or
domestic assault
in their lifetime

(Statistics Canada. Self-reported sexual assault in
Canada, Conroy and Cotter. July 2017)

Violence Against Women in Saskatchewan

2nd highest in Canada

Saskatchewan self-reported rates of violence against women were double the national rate and second highest in the country

Northern Saskatchewan

Violence against women in northern Saskatchewan is the highest in Canada

(Statistics Canada. Self-reported sexual assault in Canada, Conroy and Cotter. July 2017)

A Note on Justice

THERE ARE 460,000 SEXUAL ASSAULTS
in Canada every year



Source: Johnson, "Limits of a Criminal Justice Response: Trends in Police and Court Processing of Sexual Assault," in Sheehy, *Sexual Assault in Canada: Law, Legal Practice and Women's Activism*, 2012.



Power and Sexual Violence

Although there may be sexual gratification as a result of a sexual violence, it is ultimately about an individual's effort - through coercion or force - to **exert power** over another individual.

A **power imbalance** (due to age; position of authority or trust; disability; status/privilege due to race, gender, tenuous employment or immigration status, socio-economics) increases a person's risk of sexual violence AND reduces access to support/justice.

People with marginalized identities face increased risks of exploitation and/or victimization, in large part because they **lack access to power**.

Intersectionality

Intersectionality refers to social categorizations, or parts of people's identities, such as race, class, gender, or sexual orientation that provide advantage and privilege or disadvantage and oppression.

These aspects of a person's identity can influence:

- How “believable” a victim/survivor is perceived to be
- How easily they can access help (physical location, access to transportation, literacy)
- Their level of trust in and past experiences navigating social systems

Sexual Violence Impacts Everyone, But Not Equally

People with Disabilities

80% of people with disabilities will experience sexual violence in their lifetime

LGBTQ2S+ Community

LGBTQ2S+ people are at elevated risk of sexual violence

Trans and Bisexual Women

Close to 50% of trans people and 60% of bisexual women will experience sexual violence in their lifetime

Indigenous Women

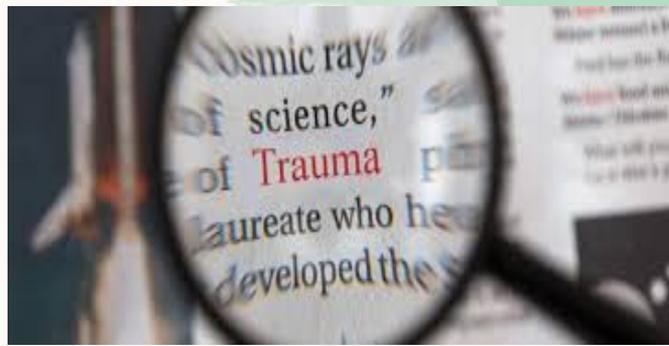
Indigenous women are sexually assaulted at 3X the rate of non-Indigenous women

Defining Trauma

Trauma is commonly defined as exposure to actual or threatened death, serious injury, or sexual violation in which intense fear, horror, or helplessness predominates.

Trauma can occur through one single event or multiple and repeated traumatic events. It can include not only direct exposure, but also witnessing these events.

Trauma in *Action*:



Post-assault, victims may:

Report feeling confused as to whether what happened was actually sexual abuse/assault

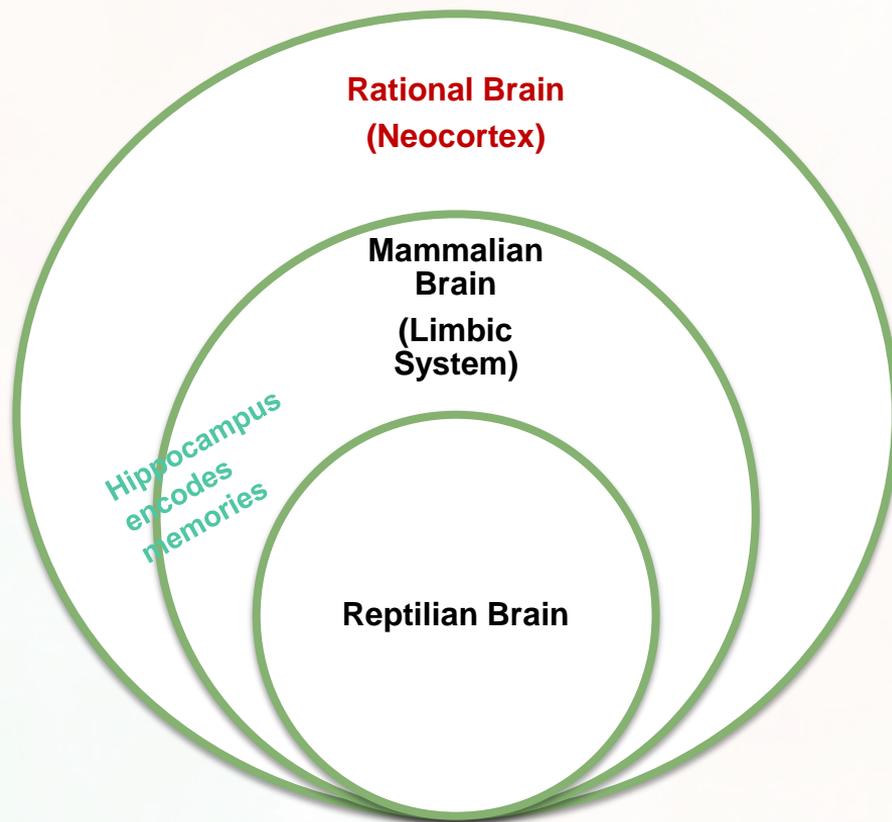
Act in a completely illogical way, perhaps getting a ride home with the perpetrator post-assault or returning home and act like nothing has happened (survival tactics)

Minimize what happened to them, finishing off a horrific story of abuse with "it could have been worse" or "it wasn't that bad"

Feel confused as to why they froze and were unable to fight back, move, or speak

Be filled with feelings of shame and guilt, worried that their actions are the reason for the assault

**Typical
Brain
Function**
*Driving
your Car*



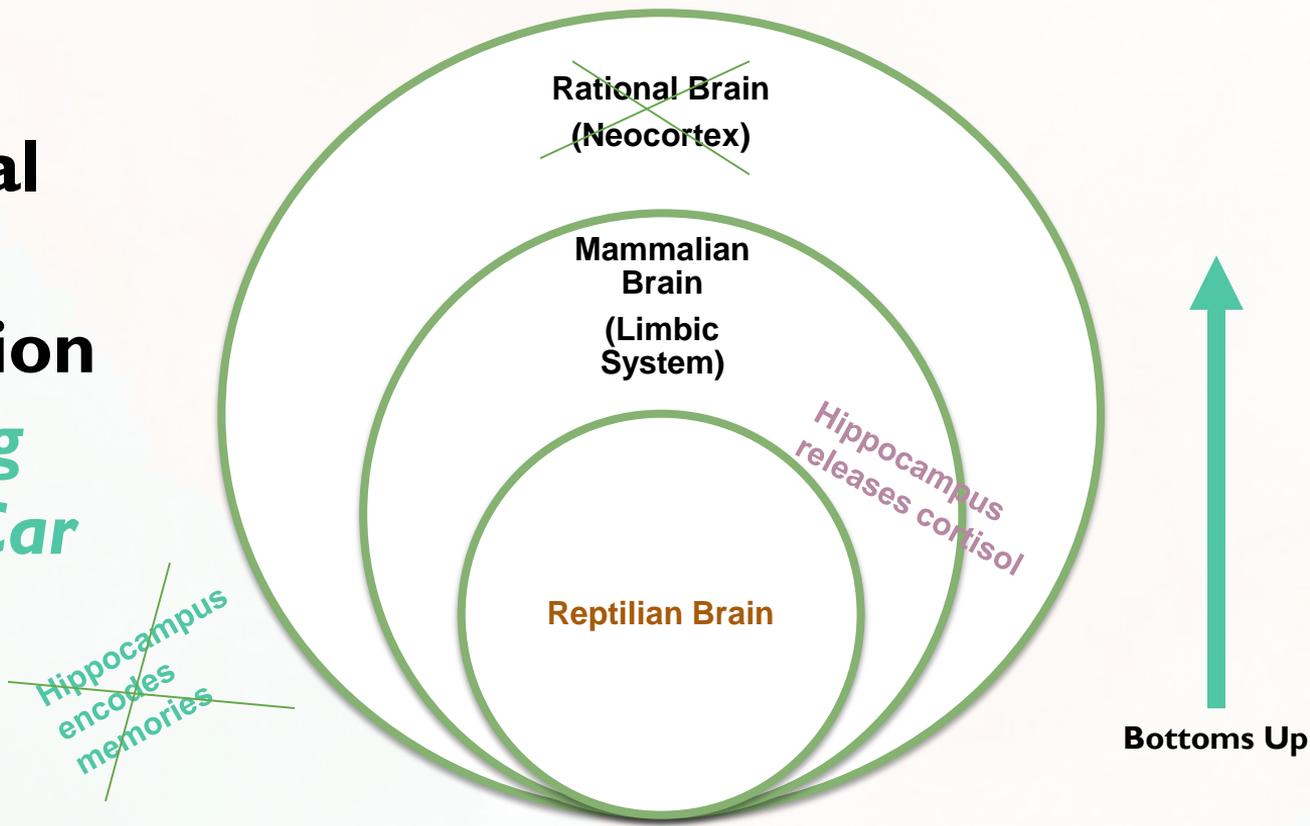
Top Down



The Triune Brain (Typical Function)

(Van der Kolk, B. A., 2014)

Typical Brain Function *Driving your Car*



The Triune Brain (Typical Function)

(Van der Kolk, B. A., 2014)

The Impact of Trauma on Memory

HUMANS HAVE FOUR TYPES OF MEMORY

EXPLICIT

- 1) SEMANTIC – FACTS
- 2) EPISODIC - EVENTS

IMPLICIT

- 3) PROCEDURAL – OPERATIONS
- 4) EMOTIONAL - FEELINGS

1) This is my bicycle.

2) One time I fell off my bicycle into Wascana Lake in front of someone I was trying to impress.

3) I can get on my bike and ride it without thinking about it.

4) Now when I see my bike in the garage I feel embarrassed.

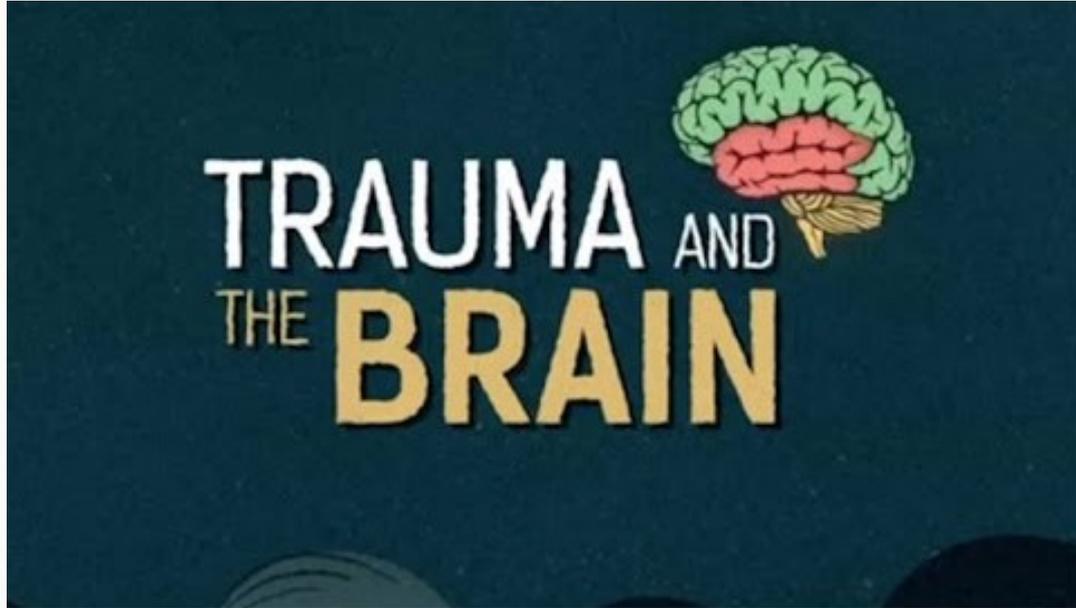
Accessing Sensory/Emotional Memories

WHAT CONSTITUTES AN
EMOTIONAL MEMORY?

WHAT ARE TRIGGERS?

- The role of the amygdala in emotional memories is key.
- Survivor was sexually assaulted face down on a sofa. The room was dim and she couldn't see the person who was assaulting her. But he wore cologne and kept grabbing her hair.
- *Which details could create a trigger?*

Brain and Trauma





The Stress Response: Fight, Flight, Freeze

Fight

- Attack
- Defend

Flight

- Run

Freeze

- Tonic Immobility (**physical safety**)
- Dissociation (**mental safety**)
- No resistance (conserve energy for flight when safe to do so)

Trauma Responses

EMOTIONAL

Restlessness
Irritability
Anxiety
Mood swings
Uncontrollable anger or rage
Exhaustion
Avoidance (dissociation)
Shame
Guilt

PHYSICAL

Elevated heart rate and breathing
Palpitations
Sweating
Muscle tension
Increased startle response
Nausea
Nightmares
Difficulty concentrating



Post-Assault: Triggers

A **trigger** is something that sets off a memory tape or flashback, transporting the person back to the event of the original trauma and causing the individual to experience overwhelming emotions, physical symptoms or thoughts.

The individual will react to this trigger with an emotional intensity similar to the time of the trauma, though the intensity typically diminishes with treatment or with time.



Life Implications

As a result of sexual violence, victims may:

- **Suffer the loss of friends, family, or employment**
- **Suffer such extreme PTSD that they cannot continue their studies**
- **Lose all sense of personal safety and limit their social interactions**
- **Self-medicate to the point of addiction**
- **Self-harm (cutting, burning, etc.)**

Understanding Childhood Trauma

- Children do not have the option to report, move away, or otherwise protect themselves – they depend on their caregivers for their survival.
- When trauma emanates from within the family, children frequently experience a crisis of loyalty and organize their behaviour to survive within their families.
- Being prevented from articulating what they observe and experience, traumatized children are likely to organize their behaviour around keeping the secret, deal with their helplessness with compliance or defiance, and accommodate in any way they can to entrapment in abusive or neglectful situations.

Understanding Childhood Trauma

- A child is faced with an exceptional complexity when the family environment itself is responsible for the victimization and the child-caregiver relationship becomes the source of trauma.
- The very people that a child is being attached to are also the people violating the child, and children are likely to suffer not only a disrupted attachment but a disruption to all of their developmental systems.
- We are physiologically designed to function best as an integrated whole; When many critical developmental competencies are severely disrupted, children become unable to process and/or integrate what is happening.

Impacts of Childhood Trauma

- Each age and stage carries its own critical developmental periods; if missed, can be very difficult to compensate.
- Depending on the age and stage of the onset of trauma, child's brain development, memory, narrative and verbal capacities, will be affected, as well as the child's opportunities for recovery.
- The consequences of traumatic event(s) are highly likely to derail child's healthy biological, emotional, cognitive and social development.
- Infants and toddlers are disproportionately at risk for maltreatment. Because these early years set the stage for all that follows, they hold the greatest danger for long-term damage, as well as great potential for successful intervention.
- They often times do not have a chance to develop coping skills, a sense of self, or a sense of self in relation to others.



Long Term Impacts of Childhood Sexual Assault:

- Beliefs
- Relational Issues
- PTSD
- “Functional” coping strategies in childhood that become dysfunctional in adulthood

RESILIENCY

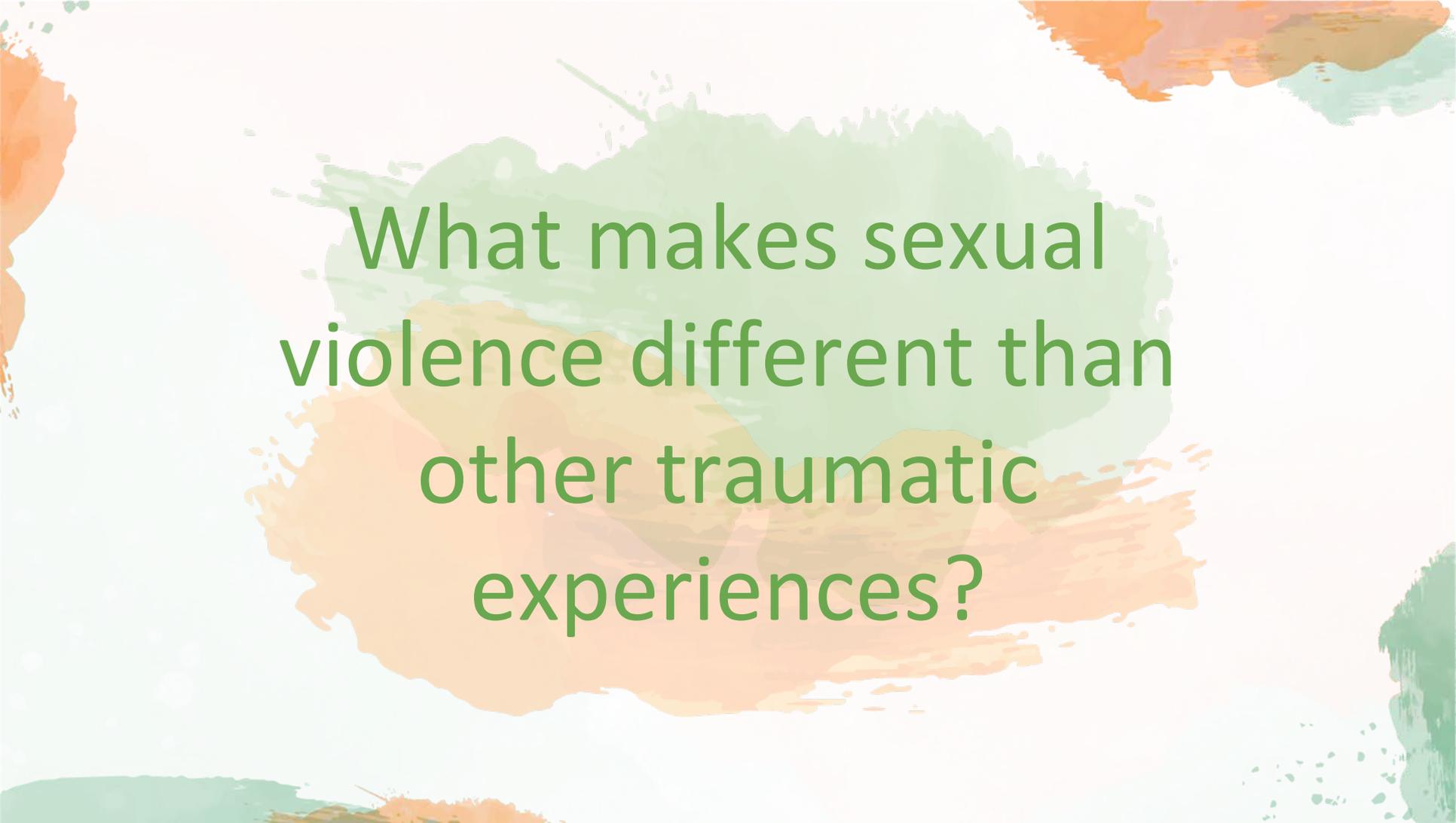
Children can heal from sexual abuse when:

- They are supported by those around them.
- They are listened to and their feelings are respected.
- They are reminded they are so much more than what happened to them.
- They get messages that they are loved.



Responding to Adults Who Have Been Sexually Abused as Children:

- “I believe you.”
- “It is **not** your fault.”
- “The individual who sexually assaulted you made a **choice to hurt you.**”
- “Your feelings are **normal.**”
- “**Thank you** for telling me.”

The background features several large, overlapping brushstrokes in shades of orange, green, and teal. The strokes are textured and layered, creating a vibrant, artistic backdrop for the text.

What makes sexual
violence different than
other traumatic
experiences?

Rape Myths

The social belief of personal responsibility of a victim for assault



Known Perpetrator

80% of the time the perpetrator is someone the victim knows



Type of Violence

It is a very intimate and violating type of violence



Shame around sex

the sexual violence is magnified by shame around sex



Shame, Guilt, and Blame

SHAME is a normal emotional response to sexual assault and a significant reason people do not report and/or disclose to others.

Often people will believe that they are somehow responsible for what happened or **BLAME** themselves. Certain **mythologies** within our culture reinforce this 'victim blaming' mentality. This often leads to a complexity of feelings such as shame, guilt, and confusion.

There are several reasons people do not report sexual assault: fear of not being believed, embarrassment/humiliation, fear and **mistrust of the justice system** or negative past experiences with the justice system, fear of consequences within their social circles and/or family for 'outing' the perpetrator, low conviction rates and a lengthy timeline.



Implications for Working with Victims

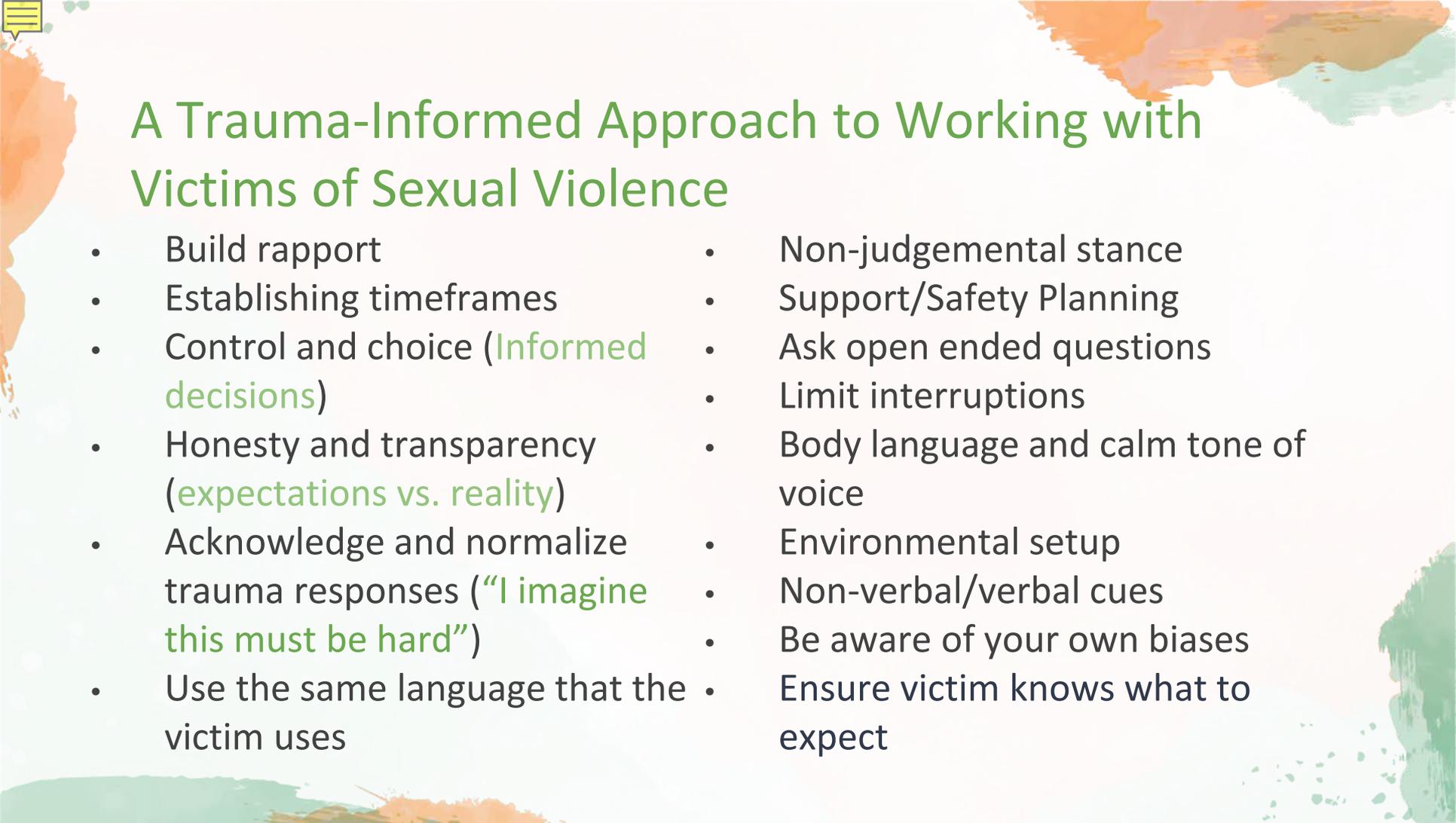
- Lack of trust in individuals, systems, and police
- Ambivalence about reporting or continuing a legal process
- Emotional responses to information or questions (triggers)
- Difficulty remembering or understanding new information (dates, processes, rights)
- Non-linear memories and timelines
- Co-occurring nature of the crime adds complexity

Trauma and Credibility

- Difficulty with chronological timelines
- May state or remember things out of order
- New information may be revealed in second or third conversations
- Trauma responses may create an impression of being uncooperative, sullen, “all over the map” or strangely easy going

All of these factors work together to create the impression that a victim is not credible

All of this is a normal part of processing, remembering, and reporting memories that were created during a traumatic experience. This is particularly true immediately after a sexual assault



A Trauma-Informed Approach to Working with Victims of Sexual Violence

- Build rapport
- Establishing timeframes
- Control and choice (**Informed decisions**)
- Honesty and transparency (**expectations vs. reality**)
- Acknowledge and normalize trauma responses (**“I imagine this must be hard”**)
- Use the same language that the victim uses
- Non-judgemental stance
- Support/Safety Planning
- Ask open ended questions
- Limit interruptions
- Body language and calm tone of voice
- Environmental setup
- Non-verbal/verbal cues
- Be aware of your own biases
- Ensure victim knows what to expect



A Trauma-Informed Approach, continued

Establish boundaries and context for the help they are seeking.

Before asking a question, determine if it's relevant to your work; a trauma-informed approach avoids having victims tell their story to multiple people, which causes retraumatization.

Victims may be hypersensitive to anything that sounds like disbelief, victim-blaming or a question of their credibility. Provide context for questions. ("I know this is sensitive, but I have to ask to find out...")

If a victim is becoming silent, emotional or uncooperative, consider a break, offering a drink of water, doing some breaths together or momentarily changing topics.

Takeaways



- **Empathy, compassion, and understanding can go a long way when working with a victim of sexual violence**
- **Remember the ways trauma impacts the brain and memory (bottom-up)**
- **Recognize the impact of trauma and how this affects a survivor's behavior when making an assessment of credibility**



“It is very tempting to take the side of the perpetrator. All the perpetrator asks is that the bystander do nothing. He appeals to the universal desire to see, hear, and speak no evil.

The victim, on the contrary, asks the bystander to share the burden of pain. The victim demands action, engagement, and remembering.”

Judith Herman, M.D.

**A note on
secondary
trauma:
take care
of yourself**



Self-Care for supporting those who have been sexually assaulted.

- Relaxation meditation
- Mindfulness
- Awareness/Education/Knowledge
- Counselling support and debriefing
- Personal support: social and family support
- Cultural supports

Thanks!

Do you have any questions?

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