

Chapter 9

THE IMPACT OF SEXUAL VIOLENCE



Understanding Factors that Influence Trauma¹

As we learned in the previous section, sexual violence can include many things. We use this as an umbrella term to describe any sexual act that is imposed on another person without their consent. We sometimes interchange this term with “sexual trauma,” especially when focusing on the traumatic impact of the experience of sexual violence.

“Sexual trauma” can be described as a one-time event or an ongoing experience and does not have to be physically violent. When we say “trauma,” the reference can be specific to the incident itself, as well as in reference to one’s response to the act of sexual violence. Most important to note is that the traumatic effects of sexual violence are not limited to the event itself, but often felt for a long period after.

Survivors’ experiences of sexual trauma are shaped by a variety of factors related to their lived experience, the traumatic event/s, and the support they receive in the aftermath. Sometimes these are referred to as pre- (before), peri- (during), and post- (after) trauma factors. A closer look at these factors helps us see that no two survivors’ experiences are alike, because everyone has different factors that influence our experience of life, our resources, and challenges.

Some pre- (before) trauma factors include:

- Identities we hold and how they influence our interactions with the world.
- Past experiences of trauma (prior sexual victimization, experiencing oppression, family violence, historical trauma, intergenerational trauma).
- Pre-existing support and resources.
- Resilience and coping skills.

Some peri- (during) trauma factors include:

- The type of trauma.
- The duration.
- The severity.
- The location.

Some post- (after) trauma factors include:

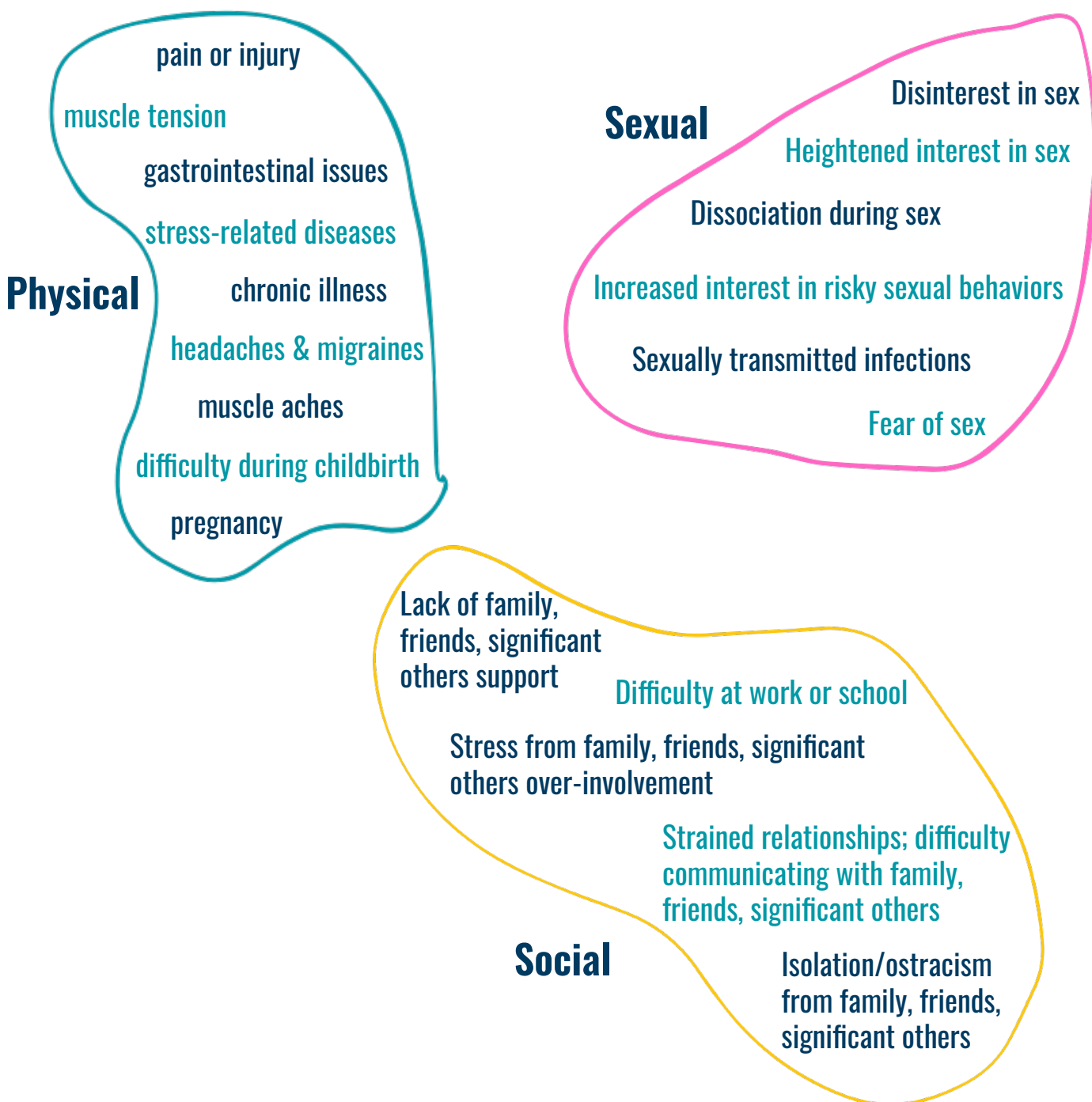
- Others’ responses to disclosure.
- Extent of support from family and friends.
- Access to healing and supportive resources.
- Experience with systems.



Impacts of Sexual Violence²

Sexual violence impacts a person's whole being and its effects can be longstanding. It may be easier to understand the impact of sexual violence by looking at the different aspects of a person that are impacted. In dominant Western culture, we commonly reference overlapping physical, emotional, sexual, social, and spiritual aspects of a person's being. However, our concepts of our bodies and selves are intimately tied to our cultural beliefs. People may use different language and systems of meaning to describe the impacts of sexual violence in their lives that may or may not correspond to the impacts listed below.

For our purposes, these divisions are more to help with learning than to suggest rigid categories of impact. Regardless of culture, each person is different and may or may not experience any combination of these impacts, for different durations, and at different stages in healing. Use this information to get a big picture understanding of the impact of sexual violence.



Psychological

Hypervigilance Overwhelm
Humiliation Feeling unsafe in one's own body
Self-doubt Dissociation Anxiety
Nervousness Shame Death by suicide
Self-injury Attempted suicide Denial
Dependence on drugs or alcohol Self-blame
Low self-esteem Shock Fear
Difficulty trusting others
Emotional fluctuations
Difficulty trusting self
Distorted body image
Eating disorders
Confusion

Questioning beliefs or faith

Feeling disconnected to faith/belief system

Lack of support from spiritual community or faith leaders

Feeling disconnected to self/others

Pressure to forgive or mediate with person who committed sexual violence

Feeling angry at or betrayed by a deity or higher power

Shifted worldview

Spiritual

Isolation/ostracism from faith community





CONSIDERATIONS FOR ADVOCATES



It may be helpful for advocates to help survivors assess their support networks and determine the people they feel most comfortable with. Advocates can also support survivors as they identify people to turn to when they are in crisis or just need to talk. If the survivor does not have a reliable support system, they may choose to rely more heavily on helpline services for support.



Some survivors find it reassuring to discover that the impact of sexual violence on their life is not only emotional, but also neurobiological. Because of the impacts of trauma and resulting needs for safety, many survivors will reveal different details of the experience to different people at different times. This behavior can be confusing to people in the survivor's life, including advocates, law enforcement, and concerned others. Recognizing that trauma affects the brain can help concerned others understand why survivors may "change their story" or recount aspects of the violence in ways that may seem pieced together or jumbled.³

- Ask questions about any matter that affects their life.
- Not feel guilty.
- Enjoy sexuality.
- File a report with law enforcement, or not.

It is important that survivors of sexual violence know that what they are going through is understandable and that healing is possible. Each survivor will be affected differently by their trauma and each will find an individual path for their process of healing.⁴

Survivors also have their own unique internal and external resources that can support their healing. Survivors' resources are part of their pre-, peri-, and post-trauma factors. An advocate's work is to help bring awareness to survivors' resources so they can use them and continue to build new resources as they heal.⁵

Anniversary Reactions

An anniversary reaction involves increased or recurrent symptoms. These can take place days or sometimes weeks before and/or after the specific date or season the sexual violence occurred. The timing can be unpredictable and frightening for survivors. Survivors may be surprised if they experience impacts they thought had passed and were gone. It may be comforting to talk with a survivor that this may be an anniversary reaction, that it will likely pass, and that support is available whenever they need it.

Healing from Sexual Violence

Sexual violence involves a violation of the personal rights of the survivor. In addition to legal rights, survivors also have other rights such as the right to:

- Be scared and to say, "I'm afraid."
- Be angry at the offender or at someone they love, who may sometimes be the same person.
- Not be angry.
- Cry and grieve.
- Be relaxed, playful, and frivolous.
- Hold boundaries if they're not ready, or something is uncomfortable, unsafe, or violates personal values.
- Self-respect, change, and grow.
- Be taken seriously and treated with dignity and respect.
- Make decisions based on personal feelings, judgments, or any other reason.
- All of their feelings.
- Be listened to.

External resources may include:

- Supportive family, friends, significant others.
- Being believed.
- Financial means to access support that costs money (for example, therapy, wellness care, legal resources).
- Supportive spiritual or faith community.
- Being part of a community or culture that supports survivors.
- Geographical access to supportive care.
- Access to information that helps them understand it wasn't their fault.
- Supportive interactions with systems/agencies (advocacy program, healthcare, etc.).

Internal resources may include:

- Strong sense of self-worth and self-esteem.
- A felt sense of connection to others.
- Coping skills.
- Resilience or belief that they will get through this.
- Spirituality or faith.
- Practices or rituals that support wellbeing.
- Having experienced something difficult before and knowledge that they were able to get through it.
- Trust of self and others.
- Knowledge about sexual violence and supports; awareness it wasn't their fault.
- Having access to language and concepts to describe how they feel and what they need.



Mental Health & Substance Use

Survivors of sexual violence may need support and services specifically related to their overall mental health. This section provides more information about individuals who may have mental health or substance use challenges. It is not intended to be a comprehensive overview, but rather provides general information to assist advocates in supporting survivors who may experience challenges, or signs and symptoms related to mental health or substance use. Advocates often speak with survivors about mental health and substance use.

Survivors may have pre-existing mental health or substance use challenges, and sexual violence victimization may cause symptoms to develop or worsen. Advocates should respectfully note that mental health professionals can assist survivors regarding mental health and substance use challenges. It is not an advocate's role to diagnose anyone or presume to know about a survivor's experience based on their disclosed diagnosis or signs they may be exhibiting. This is outside the scope and skill of an advocate's role. Survivors or concerned others needing a higher level of assistance or information should be referred to a treatment provider in their area.

Overall good health starts with taking care of both physical and mental health needs. The social stigma and fear of mental illness have limited the available social supports for those with mental health needs. Stigma has also limited our societal understanding and how to get quality health care when needed. The goal of advocacy services is to meet individuals where they are, underscore the importance of overall good health, and discuss how to achieve it even in difficult.

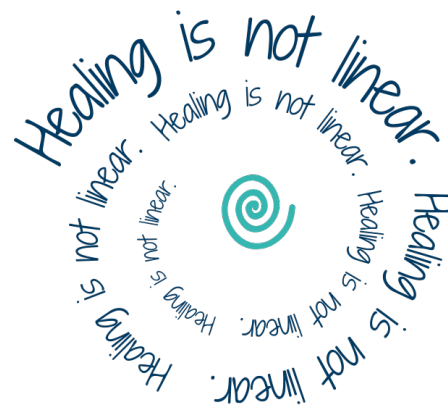
Like anyone seeking mental health or substance use services, survivors of sexual assault may have a hard time getting their needs met. They may consult professionals who do not take their symptoms seriously, or who misinterpret their symptoms, which can lead to misdiagnosis and mistreatment. Survivors are empowered when they are supported in their search to gain a better understanding of the available services within the community, and seek a second opinion if they disagree with a treatment provider. Survivors need to know that they are truly in control of their treatment

and decide whom they see and if they agree with the treatment offered.

What is Mental Health?

Some positive mental health characteristics include:

- **Ability to enjoy life:** Planning for the future and learning from the past, while living in the present moment help to create a healthy outlook on life.
- **Resilience:** Having tools and supports which strengthen the ability to bounce back from adversity.
- **Balance:** Creating appropriate time for various roles and responsibilities while practicing self care.
- **Flexibility:** Having a range of emotions and the ability to express those feelings safely.
- **Self-awareness:** Becoming conscious of one's capability and contributions to the world.
- Other concepts include the ability to form **healthy relationships with others, self-esteem, and healthy sexuality.**⁶



A mental health diagnosis is a description of symptoms that an individual may suffer from, and is used to determine treatment interventions that have proven to be successful in reducing symptoms. A particular diagnosis does not explain why some individuals may suffer from some symptoms stemming from a traumatic event, and others do not. Diagnoses can change based on the individual's presentation, or how effective the individual is in describing the symptoms.

Diagnoses provide a common language to use in understanding symptoms and behaviors, but should never become a label for a person. In general, diagnosis has been viewed as observing what is not working well for the individual, rather than what is working well. Treatment providers ought to focus on the strengths of individuals and seek to use the diagnosis as a point of reference in the starting or changing of a treatment regimen.



CONSIDERATIONS FOR ADVOCATES



Advocates must remain focused on the person and not the diagnosis that a caller may or may not share.



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Advocates often speak with survivors about mental health and substance use. Many survivors present signs they may be struggling with symptoms. Survivors may have pre-existing mental health or substance use challenges, and sexual violence victimization may cause symptoms to develop or worsen.

Here is a helpful chart outlining a range of reactions to sexual violence. It was created by the folks at VALORUS:⁷

Immediate Acute Reactions	Shock and disbelief, tearfulness, sobbing, confusion, fears for personal safety, anxiety, hyperventilating, and fears about family and significant others' reactions.	Numb, detached, appears to be in a "daze," unable to recall or only partially able to recall events and/or unable to recall events sequentially.	Outward calm and collectedness; suppressing feelings in order to remain in control regarding the out-of-control situation, or due to immediate profound anger.
Subsequent Acute Reactions	Fears, "jumpiness," irritability, flashbacks, nightmares, panic/anxiety attacks, preoccupation with the assault and persistent re-experiencing of the trauma, distress upon exposure to reminders of the trauma, and self-blame.	Isolation/avoidance of situations that arouse recollections of the trauma (e.g., reluctance to participate in interviews with law enforcement or healthcare providers); unexpected reactions to people resembling the offender, and to similar places and things, etc.	Insomnia, problems with concentration, exaggerated startle response, decreased appetite, weight loss, headaches, stomachaches, anger suicidal thoughts, substance use, depression, shame, guilt, irritability and low tolerance for issues surfacing in relationships.
Long-Term Reactions	Depression, anxiety, mood swings, shame, humiliation and guilt, anger, suicidal thoughts, decreased self-esteem, feelings of worthlessness, and inability to trust. Persistent avoidance of people or situations associated with the trauma, and hyper-vigilance.	Weight loss, headaches, stomachaches, and continuing medical problems. Social isolation and lack of interest in participating in activities; feeling detached or estranged from others; a sense of a foreshortened future; loss of self confidence.	Persistent re-experiencing the trauma (recurrent, intrusive thoughts and distressing dreams, acting or feeling as if the sexual assault is happening again, and extreme distress when exposed to something that resembles or is symbolic of the traumatic event. Loss of interest in sexual activity; in some instances engaging in high-risk sexual behavior.



Endnotes

- ¹ Used with permission from and thanks to: National Sexual Violence Resource Center. (n.d.) *Foundations of advocacy training manual*. Retrieved from: <https://www.nsvrc.org/foundations-advocacy-training-manual>.
- ² Ibid.
- ³ van der Kolk, B.A., McFarlane, A.C., & Weisaeth, L. (2006). *Traumatic stress: The effects of overwhelming experience on mind, body and society*. New York: The Guilford Press.
- ⁴ National Sexual Violence Resource Center, (n.d.).
- ⁵ Ibid.
- ⁶ Holmes, 2009.
- ⁷ Valor. (2021). *Valor's support for survivors: Training for sexual assault counselors/advocates*. Retrieved from: <https://www.valor.us/publications/valor-support-for-survivors-in-english/>

