

**Sexual Assault Advocate/Counselor Training  
Pre-/Post-Assessment (Without Answers)**

1. Most rapes result in:
  - a. No physical injury.
  - b. Minor physical injury.
  - c. Severe genital injury.
  - d. Severe internal and genital injury.
  
2. If an advocate suspects that a victim is psychotic, one of the questions the advocate might ask first is:
  - a. "Were you sexually assaulted?"
  - b. "Do you know where you are right now?"
  - c. "Did you know your assailant?"
  - d. "Are you okay?"
  
3. Which of the following definitions *best* describes compassion fatigue?
  - a. The physical and mental stress that accompanies working with victims of crime.
  - b. The occasional feeling of depression that often comes from hearing about upsetting or very sad situations.
  - c. Chronic psychological distress that usually culminates in physical symptoms.
  - d. The enduring negative psychological consequence of exposure to the traumatic experiences of victims.
  
4. What should the advocate do if a victim appears to be avoiding thinking or talking about the sexual assault?
  - a. The advocate should help the victim understand that the process of facing their thoughts and fears is necessary.
  - b. The advocate should accept the victim's avoidance coping strategy until the victim is ready to talk about the assault, regardless of how long it takes.
  - c. The advocate should encourage the victim's avoidance coping strategy if that's what the family thinks is best.
  - d. All victims are different in how they cope; the advocate should let the victim deal with the assault however they choose.
  
5. Crisis intervention theory generally indicates that the crisis period for a rape victim is:
  - a. The first 24 hours after a sexual assault.
  - b. The first 36 hours after a sexual assault.
  - c. The first 72 hours after a sexual assault.
  - d. 1 week after a sexual assault.
  
6. The risk of a sexually transmitted disease as a result of a rape is:
  - a. Negligible.
  - b. Relatively low.
  - c. Relatively high.
  - d. Very high in the case of HIV.

7. One of the differences between vicarious traumatization and compassion fatigue is that vicarious traumatization:
  - a. Occurs more frequently in advocates who work primarily with sexual assault victims.
  - b. Can emerge suddenly.
  - c. Does not result in physical symptoms.
  - d. Does not have as severe an effect on the advocate.
  
8. Two of the primary components of Recovery Education and Skills Training (REST) are Crisis Intervention and Education; the other two are:
  - a. Immediate Counseling and Ongoing Support.
  - b. Counseling and Assessment.
  - c. Supportive Counseling and Skills Training.
  - d. Training and Long-Term Counseling.
  
9. Which part of the brain holds our thoughts and memories and helps us manage our emotions and reflect on our behavior?
  - a. The amygdala.
  - b. The hippocampus.
  - c. The brain stem.
  - d. The prefrontal cortex.
  
10. The advocate should make referrals to mental health professionals if the victim is:
  - a. Extremely angry with the assailant.
  - b. Able to return to work but remains sad for several days.
  - c. Unable to function socially for more than a few days following the assault.
  - d. Talking a great deal about the sexual assault.
  
11. One overriding tenet of advocacy in sexual assault is to:
  - a. Provide HIV and pregnancy referrals.
  - b. Interview the victim to determine the truth.
  - c. Listen to victims and believe their stories.
  - d. Contact law enforcement on behalf of the victim.
  
12. All of the following are usually members of a Sexual Assault Response Team (SART) *except*:
  - a. Law enforcement.
  - b. Rape crisis/sexual assault advocate.
  - c. Medical personnel.
  - d. The sexual assault victim's immediate relatives.
  
13. Victims of sexual assault who are most likely to seek medical care are:
  - a. Victims who have high levels of social support.
  - b. Victims of more severe or multiple crimes.
  - c. Victims who had support from sexual assault advocates.
  - d. Victims who had little psychological trauma.

14. All of the following are basic elements of a posttraumatic stress disorder *except*:
- Flashbacks or intrusive memories.
  - Avoidance and numbness.
  - Decreased arousal (low startle response).
  - Presence of symptoms for at least 1 month with significant distress.
15. The *primary* role of a Sexual Assault Nurse Examiner (SANE) is to:
- Complete a medical-forensic examination of rape victims.
  - Interview victims to provide suspect information to law enforcement.
  - Provide counseling to sexual assault victims.
  - Testify about the forensic evidence collected.
16. The brain circuitry that gives us the feeling of connection to other people is the:
- Satisfaction circuitry.
  - Seeking circuitry.
  - Embodiment circuitry.
  - Fear circuitry.
17. Assisting a rape victim through the criminal justice system might involve all of the following *except*:
- Providing victims with information during the medical-forensic exam.
  - Accompanying victims when they make a law enforcement statement.
  - Accompanying the victim to speak with the judge.
  - Supporting family members.
18. By middle school, how do most boys differ from girls?
- They are less aware and less empathetic than girls.
  - They are more vocal and responsive than girls.
  - They are more aware of their effects on others.
  - There is no significant difference between boys and girls at this age.
19. Using current techniques, GHB and Rohypnol can be identified up to how many hours after ingestion?
- 12 hours.
  - 24 hours.
  - 48 hours.
  - 72 hours.
20. All of the following are “red flags” that are common to drug-facilitated sexual assault *except*:
- The victim had only one or two drinks but appeared intoxicated very quickly.
  - The victim woke up 8 or more hours later with vaginal soreness but no memory of having had sex.
  - The victim remembers waking up briefly and seeing the assailant, then passing out again.
  - The victim is in his or her late 20s or early 30s.

21. How many people who experienced rape or sexual assault in 2015 were female?
- 1.2 per 1,000 people.
  - 1.8 per 1,000 people.
  - 2.2 per 1,000 people.
  - 2.5 per 1,000 people.
22. What percentage of female victims reported receiving victim services in 2015?
- 21 percent.
  - 47 percent.
  - 76 percent.
  - 80 percent.
23. What is the difference between sexual assault of a male and sexual assault of a female?
- Sexual assault is generally much more emotionally difficult for females.
  - Sexual assault is much more physically difficult for males because violence and injury is almost always involved.
  - Sexual assault harms males and females in ways that are similar and different but equally harmful.
  - In terms of both emotional and physical effects, sexual assault is very much the same for males as it is for females.
24. When a sexual assault victim calls a crisis hotline, the first things the advocate should do are identify the caller's immediate concerns and:
- Explain the services that can be offered.
  - Establish the victim's safety.
  - Address practical issues.
  - Encourage the victim to come in.
25. Which of the following statements is true of sexual assault?
- If a person goes to someone's room, house, or goes to a bar, he/she assumes the risk of sexual assault.
  - Victims provoke sexual assault when they dress provocatively.
  - Many states do not require a victim to resist in order to charge the offender with sexual assault.
  - Sexual assault can be avoided by avoiding dark alleys and other places where strangers might lurk.
26. Which of the following is a common myth about rape?
- Not all sexual assault victims report the crime immediately to the police.
  - Many rape survivors are not visibly injured.
  - Most sexual assaults are committed by strangers.
  - In many cases of sexual assault, a weapon is not involved.
27. Which of the following statements is true of men who are sexually assaulted?
- They are highly unlikely to report their victimization.
  - They report their victimization with about the same frequency as females.
  - They are slightly more likely than females to report their victimization.
  - They are highly likely to report their victimization.

28. A female student who was sexually assaulted at a fraternity party is afraid to attend a class she has with two of her attackers. Is this incident considered harassment under Title IX?
- No, Title IX only applies to discrimination.
  - No, Title IX only applies to equal access to athletic opportunities.
  - Yes, Title IX permits all students fair and equal access to education, and the assault has prevented her from attending class.
  - Yes, Title IX applies but only if the student files a formal grievance process.
29. Although time may vary depending on local policy, most medical-forensic exams are conducted within:
- 36 hours.
  - 24 to 48 hours.
  - 36, 48, or 72 hours.
  - 72, 96, or 120 hours.
30. Sexual assault has been identified as the most common cause of which of the following psychological issues in women?
- Posttraumatic stress disorder.
  - Depression.
  - Suicidal ideation.
  - Anxiety.
31. The most commonly used substance used to facilitate a sexual assault is:
- Alcohol.
  - Ecstasy.
  - Barbiturates.
  - Rohypnol.
32. One of the responsibilities of a Sexual Assault Nurse Examiner (SANE) is:
- Testifying to things the victim told the SANE during the medical exam.
  - Asking the victim to sign a release of all health-related information.
  - Obtaining information on the victim's previous sexual history.
  - Disclosing the limits of confidentiality after obtaining information from the victim.
33. Which of the following legislation requires a college campus' security department to maintain a public log of all crimes reported to them?
- Violence Against Women Act Amendments.
  - Campus SaVE.
  - The Clery Act.
  - Title IX.
34. All of the following are often effects of compassion fatigue *except*:
- Negative changes in how the world is viewed.
  - Disruptions in eating and sleeping habits.
  - Strengthening of faith or spirituality.
  - The inability to manage personal relationships.

35. The survival reflex that causes a victim to be unable to move or speak is called:
- a. Dissociation.
  - b. Tonic immobility.
  - c. Collapsed immobility.
  - d. Freeze reaction.