

# Module 9

## Recovery Education and Skills Training



**OVC**TTAC  
OFFICE FOR VICTIMS OF CRIME Training and Technical Assistance Center

# Learning Objective

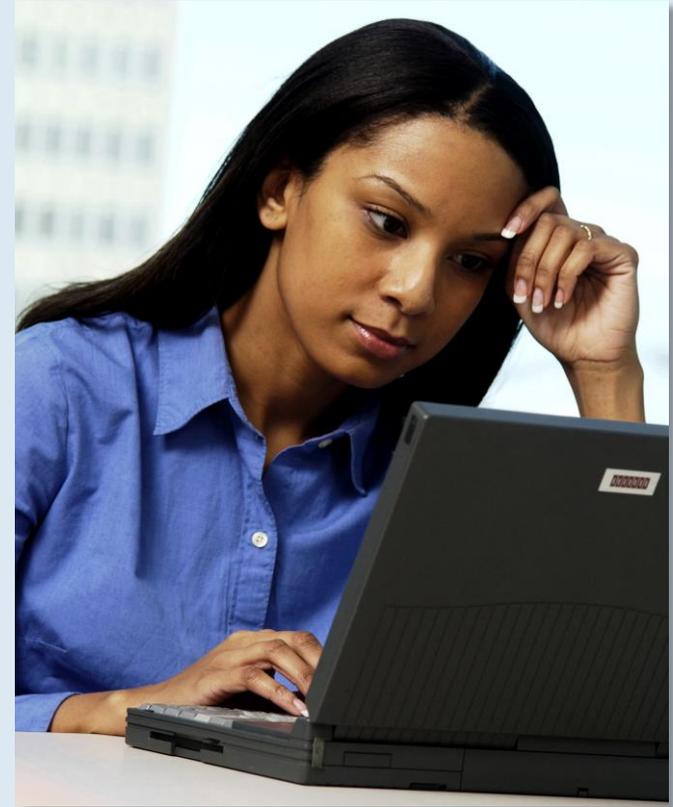
Use crisis intervention, education, and supportive counseling skills to assist sexual assault victims.



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# Recovery Education and Skills Training (REST)

- Crisis Intervention.
- Education.
- Supportive Counseling.
- Skills Training.



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# Crisis Intervention

- Emotional first aid designed to stop emotional bleeding.
- Management, not resolution.
- Phone or face-to-face.



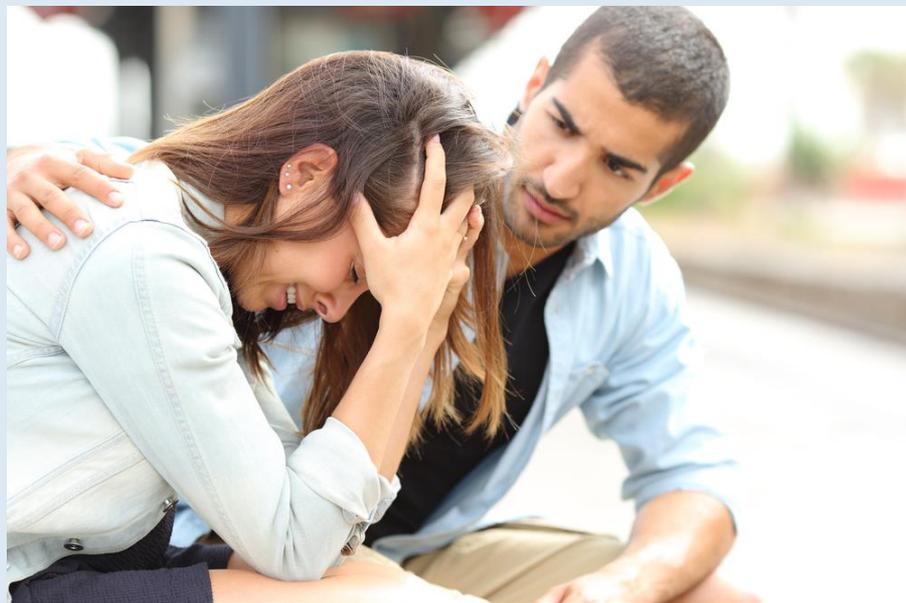
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## You Can:

- Support survivors in whatever way they need support.
- Normalize their reactions to the trauma.
- Help them prioritize and solve concerns.
- Ensure that they are treated respectfully.
- Support their significant other(s).
- Provide crisis education, referrals, and followup.

# When To Begin?

Crisis intervention should begin as soon as possible, preferably within the first few hours after the sexual assault.



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# Avoid Blame

- The victim may be especially sensitive to possible blame by others.
- Avoid blame or the appearance of blame.
- Victims who blame themselves become more depressed, with postrape adjustment worse than for victims who do not blame themselves.



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# Positive Statements

- “You were strong to call us/report this.”
- “You have a strong support system.”

Never promise something that you cannot guarantee (e.g., “You will get better.”).



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# Activity

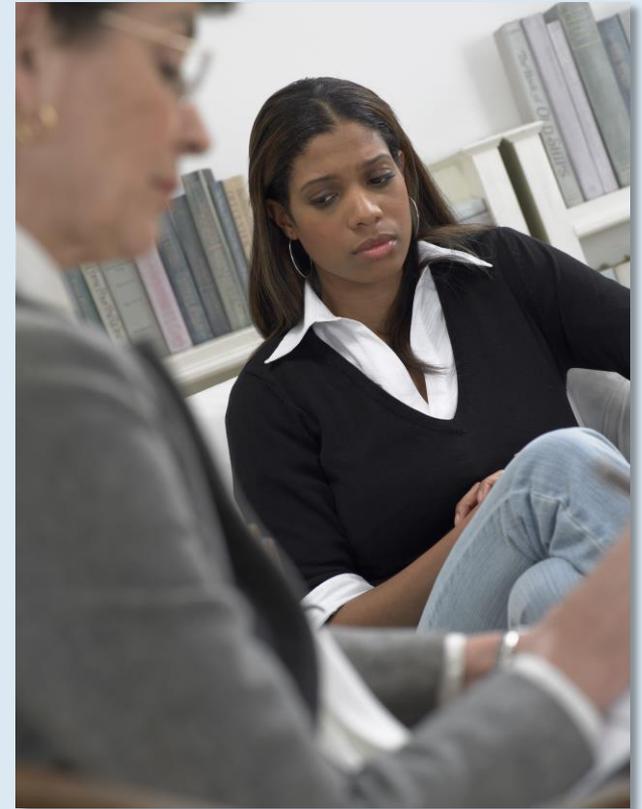


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## *Brainstorm: Initial Concerns During the Crisis Period*

# Crisis Issues

- Deciding to report to the police.
- Deciding on a medical exam.
- Concerns about the use of alcohol or drugs.
- Deciding if they are ready to label the forced sex “rape.”
- Fears for their immediate safety.
- Deciding whom to tell and how to tell them.
- Confidentiality issues.



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## Crisis Issues (continued)

- Deciding where to go after the exam.
- Fears of media involvement.
- Suicidal thoughts.
- Fear of contracting an STI, even HIV.
- Fear of becoming pregnant from the rape.
- Shame, self-blame, and embarrassment.



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# Supportive Relationships are Characterized by...



- Acceptance.
- Empathy.
- Support.

# Acceptance can be Conveyed...

## Nonverbally:

- Maintaining a calm facial expression.
- Nodding.
- Leaning in toward the victim.
- Touching the victim on the hand or shoulder.
- Maintaining an open stance.
- Maintaining eye contact.

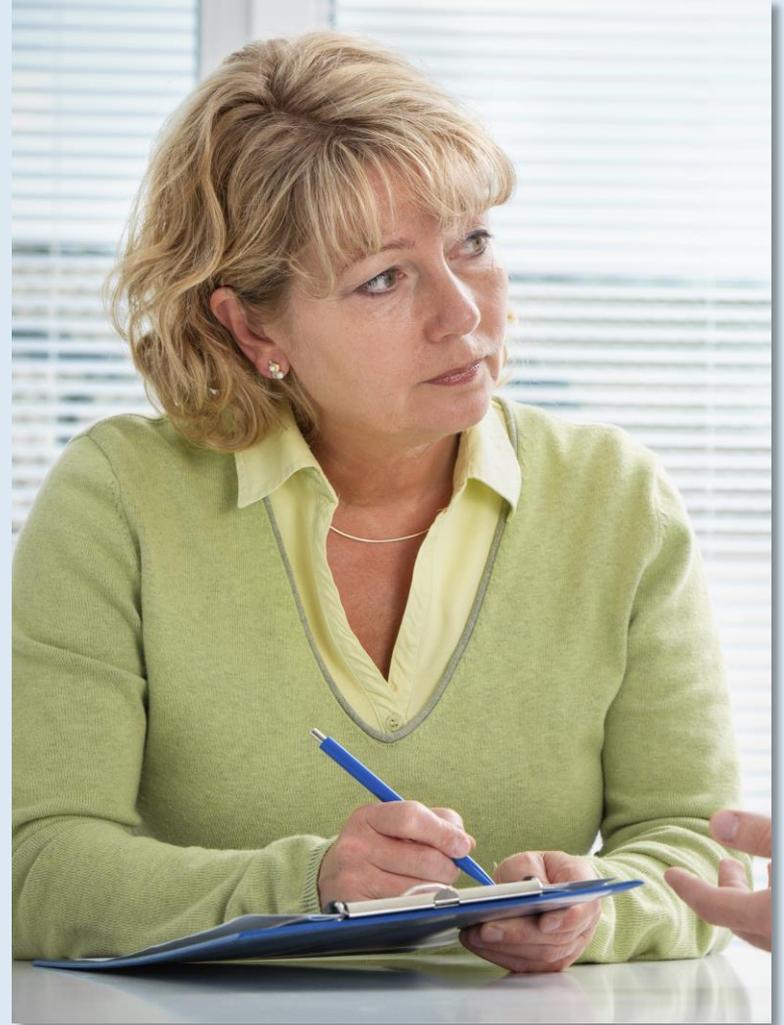


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# Acceptance can be Conveyed...

## Verbally:

- Restating what the victim has said.
- Using the victim's language.
- Allowing and encouraging the expression of feelings.

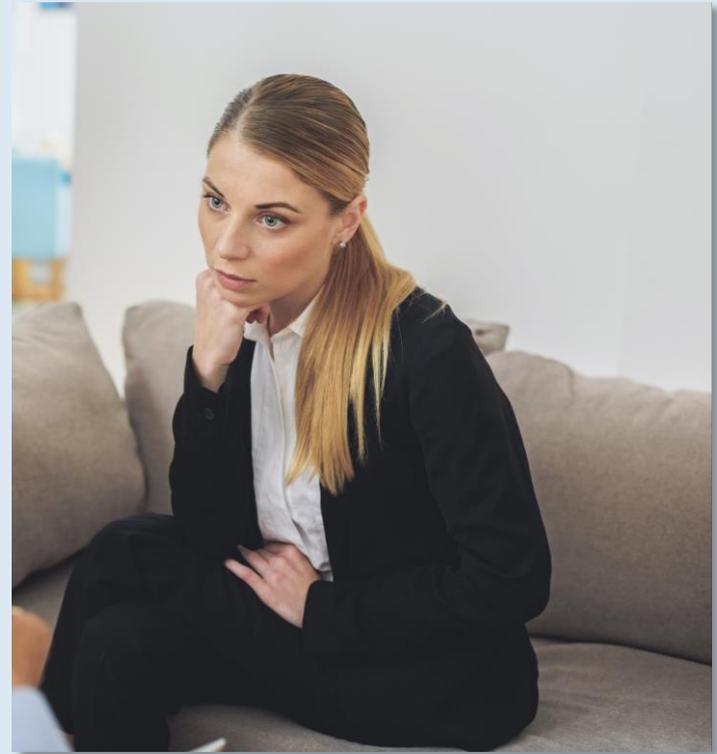


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# Acceptance can be Conveyed...

By what you do:

- Listening attentively.
- Taking the time to be with the victim and allowing them to proceed at their own pace.



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# Empathy can be Conveyed by...

- Letting the victim know that you want to understand the situation from the victim's point of view.
- Restating the feelings the victim is expressing in their own words.



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# Support can be Demonstrated by...

- Getting victims something to eat or drink.
- Reassuring victims that the rape was not their fault.
- Reassuring victims that whatever they did was “right” because they survived.



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# Support can be Demonstrated by...

Providing the victim with information and resources to take care of practical problems and immediate needs.



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# Destigmatizing Rape

- Promote a view of rape as a criminal act.
- Separate blame from vulnerability.



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# Normalizing the Victim's Response

- Provide information about what victims might feel.
- Talk about typical responses before they occur.
- Whatever they feel, they are not the first.



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# Recognizing Avoidance

- Identify avoidant coping strategies, such as not talking about the rape.
- Help victims understand why the painful process of facing their thoughts, fears, and anxieties is necessary.
- If ignored, memories come back.



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# Telling the Victim's Account

- Recounting the traumatic event in detail is important, as is your response.
- It's important to let the victim know that rape was a crime committed against them.



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# Supportive Counseling

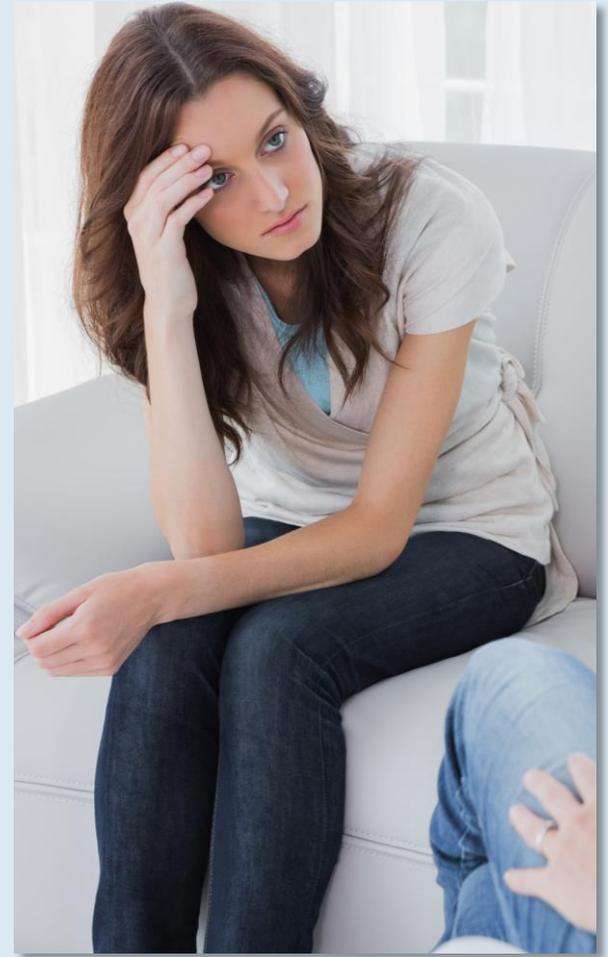
- Realize it is crisis specific.
- Respectfully listen to victims.
- Meet the victim's practical needs.
- Promising approaches.



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# Practical Concerns

- When clothing is kept as evidence, finding clothes for the victim to wear home after the evidentiary exam.
- Getting a shower/cleaning up after the rape exam.
- Explaining the police report process; what it involves and means.
- Obtaining an order for protection.



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## Practical Concerns (continued)

- Finding a safe place to stay.
- Changing the door locks.
- Notifying credit card offices/bank of any theft.
- Obtaining emergency funds for food and housing.
- Locating or arranging the pickup of the victim's children.
- Locating a pet or ensuring that it is fed.



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## Practical Concerns (continued)

- Providing or finding child care.
- Addressing court issues and concerns.
- Arranging transportation home and to appointments.
- Getting telephone/voicemail service.
- Making referrals to appropriate medical and other community agencies for followup services.
- Dealing with the media.
- Crime compensation funds paperwork for certain out-of-pocket expenses.

# Victim Needs To Know...

- They are not alone.
- When and who to call for help.



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# Explain Your Role



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Victims often form special bonds with the first people who respond to their needs.

# Activity



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## *Role Plays—Kendra and Laura* *Worksheet 9.1*

- In pairs, role play the Kendra scenario on the worksheet. The advocate should try to demonstrate acceptance, empathy, and support.
- Switch roles so each person plays both roles.
- Repeat with the Laura scenario.

# When To Refer Out

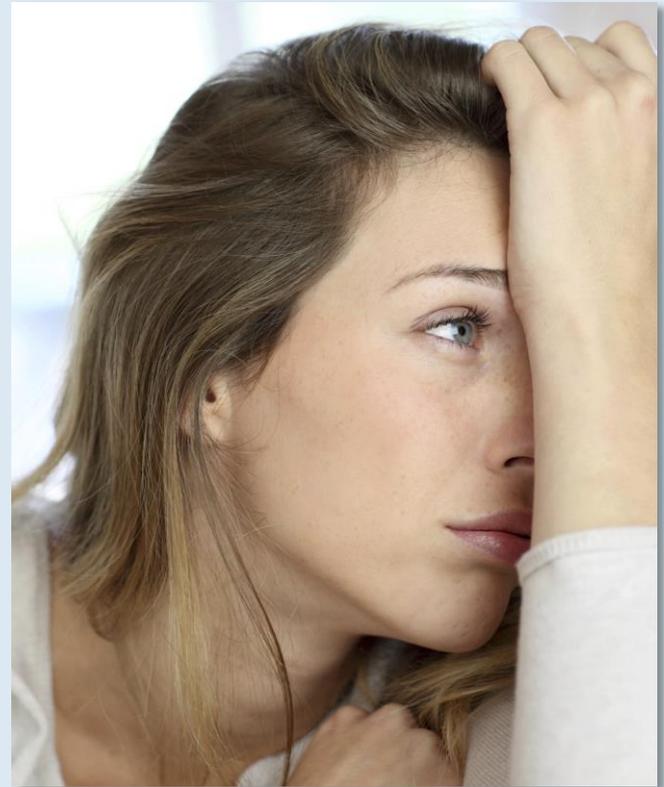
- Be aware of signs that the victim may need professional, indepth counseling.
- Referring survivors is a sign of strength, not weakness.



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# Referral Should be Made When a Victim is...

- Expressing desire to harm to themselves or others.
- Actively psychotic.
- Can't function in their occupational or social role for more than a few days.
- Exhibiting persistent phobias.
- Actively abusing substances.
- Interested in resolving long-term issues.



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# Suicide Risk

Criteria for suicide risk include:

S = Statement of suicidal intent.

L = Lethal.

A = Access.

P = Plan.

# Psychosis

- “What is your name?”
- “Do you know where you are right now?”
- “What time is it? What day of the week? What is today’s date?”



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# Concern About Substance Abuse

- Drugs/alcohol were involved in the sexual assault.
- Victim comes to a counseling session intoxicated.
- Victim reports additional substance use.
- The victim is concerned about their own substance use.
- The victim reports that friends or family are concerned about their own substance abuse.



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# When To Ask for Assistance

- Assault circumstances are too similar to your own.
- Personality clash with the victim or the victim's family.
- Victim's needs are beyond your ability level.
- Difficulty maintaining healthy boundaries.



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# Review of Learning Objective

Use crisis intervention, education, and supportive counseling skills to assist sexual assault victims.

# End of Module 9

## Questions? Comments?



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