

# Expert Q & A



## The Mental Health Consequences of Sexual Assault

**Moderator:**  
Claudia Zaborsky

**Featured Hosts:**  
Jo Johnson  
Emily Dworkin, Ph.D.  
Nicole E. Allen, Ph.D.

April 17, 2019

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# Technical Overview

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- If you are experiencing any technical issues with the audio for this session, please let us know in the Chat box.
- As with all technology, we may experience a momentary lapse in the webinar session. In the event of a problem, please be patient and remain on the line. If the problem persists, please contact our technical specialist, Kaila Hough, by sending her a private chat or by emailing her at [khough@ovcttac.org](mailto:khough@ovcttac.org) for technical assistance.
- Today's session will be recorded and made available on the OVC TTAC Expert Q&A Past Sessions tab, along with a copy of the PowerPoint.



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# Featured Hosts

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**Jo Johnson**



**Emily Dworkin, Ph.D.**



**Nicole E. Allen, Ph.D.**



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# Q&A

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Why is this topic important for us to discuss today?



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# Why This Research is Important Now

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- Increasing number of teens and young adults
- Increasing focus on sexual assault
- Increasing number of survivors seeking services and reporting to police

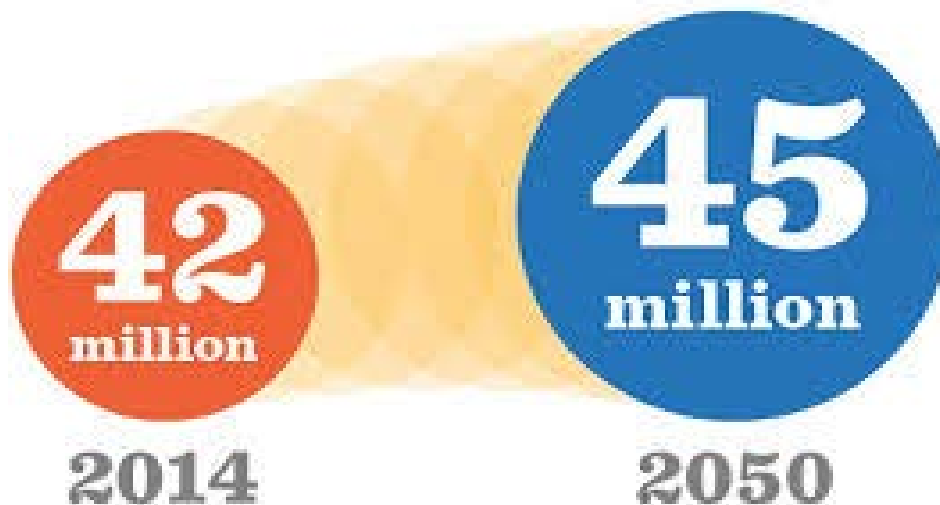
Disclaimer: This product was supported by cooperative agreement number 2016-VFGX-K016, awarded by the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this product are those of the contributors and do not necessarily represent the official position or policies of the U.S. Department of Justice.



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# Increasing Number of People in High-Risk Groups for Suicide and Sexual Assault

**The number of U.S. adolescents will continue to grow**



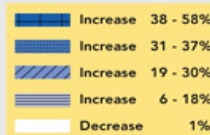
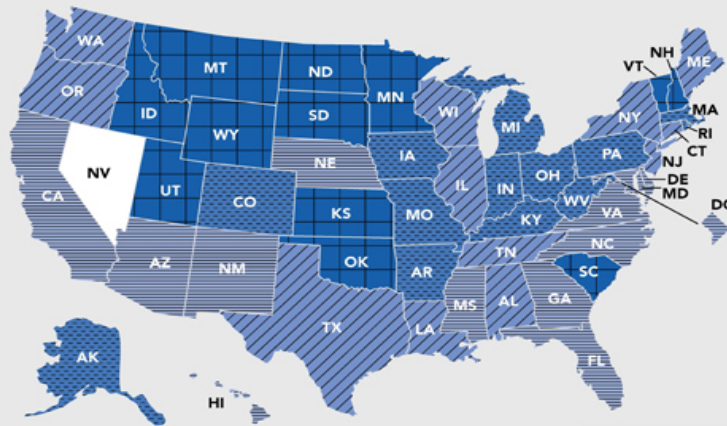
The Office of Adolescent Health, HHS, projects an increase in the number of adolescents, ages 11–17.



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# Increasing Suicide Rates

Suicide rates rose across the US from 1999 to 2016.



**Vitalsigns<sup>™</sup>**  
CDC  
<https://www.cdc.gov/vitalsigns/suicide>



- **Suicide rates increased in the United States**
  - 25% increase from 1999 to 2016
  - Ranging from a 1% decrease to a 58% increase in suicide
- **Calls to the National Suicide Prevention Lifeline doubled from 2014 to 2017.**
  - From 1M to 2M calls



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# Increasing Number of Survivors Seeking Services and Filing Police Reports

## Hotline Calls

- In 2017, RAINN's victim service programs helped a record 209,480 survivors and their loved ones.
- **In the first quarter of 2018, RAINN's programs helped 46% more people than in the prior year.**
- National Suicide Prevention Lifeline: **From 2014–2017, calls doubled—from 1 million to 2 million.**

## The FBI 2012–2016 Data

- **+12.4% in the volume and +9.2% in the rate of sexual assault** reported to law enforcement under the legacy definition = the carnal knowledge of a female forcibly and against her will.
- Much higher than the volume (+2.6%) and rates (-0.4%) for all violent crimes during this time period.
- **Second only to murder and non-negligent manslaughter for this time period.**



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# Q&A

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How did you structure this meta-analysis?

What did you find?



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# Q&A

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What is the percentage of people who suffer from PTSD following a sexual assault?



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# Q&A

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How does knowing the perpetrator affect a survivor of sexual assault in terms of mental illness?



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# Q&A

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How do mental health consequences differ between survivors who experienced an attack that left physical injuries and those that left no marks or bruising?



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# Q&A

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What differences in mental health problems are seen across diverse groups of survivors (e.g., survivors of color, trans/gender-diverse survivors, men)?



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# Q&A

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Why is sexual assault so harmful to mental health?



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# Q&A

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Do you think the shame that victims suffer from is based on real blame or perceived blame from others?



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# Q&A

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Do you see a correlation between substance abuse and a heightened risk of mental health problems for sexual assault survivors?



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# Q&A

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Does one recover completely from the trauma of sexual assault that occurred many years ago?



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# Q&A

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What modality of therapy is most beneficial for sexual assault victims?



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# Q&A

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What services are most effective for victims of sexual assault?



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# Q&A

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Have you seen any correlation between a victim getting services immediately (e.g., advocate being at SANE) and fewer mental health problems?



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# Q&A

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How can advocates and first responders assist with lowering the risk for mental health problems?



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What takes priority when working with a victim of sexual assault, listening or taking action to fix problems?



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What are the best trauma-soothing strategies advocates can use with clients?



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When talking to survivors, is it necessary to share your own trauma to make them feel comfortable in doing the same?



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# Q&A

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How do we encourage someone who has been the victim of sexual assault to seek services when they are afraid to report?



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# Resources

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## NSVRC's updated Sexual Assault Response Team Toolkit.

For more information on sexual assault and diverse communities:

- Men
- Teens
- Racial, cultural, and faith groups
- LGBTQ
- Persons with disabilities
- And more!

**SART TOOLKIT**  
Sexual Assault Response Team Toolkit



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# Next Month

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## Topic:

Law Enforcement Response: Approaching Your Work with a Trauma-Informed Lens

## Date:

Wednesday, May 29, at 2:00 p.m. eastern time

## Featured Host:

Marcus Bruning



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# Before You Leave...

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- Download a **certificate of attendance** for today's session from our Downloads pod, below the PowerPoint.
- For more **resources related to this topic**, please see the Additional Links pod on the right of the screen today, above the Chat box.



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# Thank You!

- If your question was not addressed in this session, you can email your question to our hosts:

**Jo Johnson:** [Jo.E.Johnson@usdoj.gov](mailto:Jo.E.Johnson@usdoj.gov)

**Emily Dworkin, Ph.D.:** [edworkin@uw.edu](mailto:edworkin@uw.edu)

**Nicole E. Allen, Ph.D.:** [allenne@illinois.edu](mailto:allenne@illinois.edu)

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