

MCWVC

Montgomery County Women's Center

24-HOUR HOTLINE (936) 441-7273



All About Sexual Assault

ALL ABOUT SEXUAL ASSAULT

One in three women and one in six men will be sexually assaulted in their lifetime.

Sexual violence is a public health epidemic in the United States and in Montgomery County, impacting our family members, neighbors and friends. The term “sexual violence” encompasses all abusive and coercive acts of violence in which sex/sexuality is used as a weapon to harm, humiliate, control, exploit, and/or intimidate. It impacts individuals of all ages and demographic boundaries. Sexual violence is a traumatic crime that affects survivors physically, mentally, emotionally, behaviorally, and spiritually. It also impacts families, communities, and systems.

Sexual assault in any form is often a devastating crime. Assailants can be strangers, acquaintances, friends, or family members. Assailants commit sexual assault by way of violence, threats, coercion, manipulation, pressure, or tricks. Whatever the circumstances, no one asks or deserves to be sexually assaulted.

If you are a survivor of sexual assault, a family member or a friend, free, confidential help is available by calling the Montgomery County Women’s Center Hotline 24 hours a day, 7 days a week at (936) 441-7273.

What is Sexual Assault?

Sexual assault is any forced, coerced, unwanted sexual contact.*

While there are specific legal definitions of rape and sexual assault in the Texas Penal Code, sexual violence is best understood as a broader continuum of unwanted non-mutual sexual activities that range from subtle to extremely violent. Sexual assault can include, but is not limited to, rape, sexual threats and intimidation, incest, sexual assault by intimate partners, child sexual abuse, human sexual trafficking, sexual harassment, street harassment and other forms of unwelcome, coerced, or non-consensual activity. The term sexual abuse is also often used to describe the wide range of activities that constitute sexual assault.

What is rape culture?

It is a complex of beliefs that encourages male sexual aggression and supports violence against women. It occurs in a society where violence is seen as sexy and sexuality as violent. In a rape culture women perceive a continuum of threatened violence that ranges from sexual remarks to sexual touching to rape itself. A rape culture condones physical and emotional terrorism against women as the norm. In a rape culture both men and women assume that sexual violence is a fact of life, inevitable as death or taxes. This violence, however, is neither biologically nor divinely ordained. Much of what we accept as inevitable is in fact the expression of values and attitudes that can change.

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What is rape?

Rape is a form of sexual assault, but not all sexual assault is rape. The term rape is often used as a legal definition to specifically include sexual penetration without consent. For its Uniform Crime Reports, the FBI defines rape as “penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.” Texas legally defines rape as

Intentionally or knowingly causing any of the following:

- Penetration of the anus or sexual organ of another person by any means without that person’s consent;
- Penetration of the mouth of another person by the sexual organ of the actor without that person’s consent; or
- The sexual organ of another person, without that person’s consent, to contact or penetrate the mouth, anus, or sexual organ of another person including the actor.

What is force?

Force doesn’t always refer to physical pressure. Perpetrators may use emotional coercion, psychological force, or manipulation to coerce a victim into non-consensual sex. Some perpetrators will use threats to force a victim to comply, such as threatening to hurt the victim or their family or other intimidation tactics.

Understanding Consent

Consent is an agreement between two people, given through words or actions, that they are both clearly and enthusiastically willing to engage in sexual activity. Silence or lack of resistance does not count as consent. Some people aren’t able to give consent, such as individuals who are drunk, sleeping or unconscious, and some people with intellectual disabilities. Consent involves active communication, and knowing that one person always has the right to withdraw consent. This means that someone can consent to one activity (kissing) but not consent to another (sex). Consent, like sex, should be about respecting each other to make their own decisions about their body.

How does consent work?

Getting consent can be simple: it’s all about communication. You can talk about boundaries before engaging in sexual activity, but you should also regularly check in with a simple, “Is this okay?” to ensure everyone involved is comfortable with what is going on.

When you’re engaging in sexual activity, consent is about communication. And it should happen every time for every type of activity. Consenting to one activity, one time, does not mean someone gives consent for other activities or for the same activity on other occasions. For example, agreeing to kiss someone doesn’t give that person permission to remove your clothes. Having sex with someone in the past doesn’t give that person permission to have sex with you again in the future. It’s important to discuss boundaries and expectations with your partner prior to engaging in any sexual behavior.

You can change your mind at any time.

You can withdraw consent at any point if you feel uncomfortable. One way to do this is to clearly communicate to your partner that you are no longer comfortable with this activity and wish to stop. Withdrawing consent can sometimes be challenging or difficult to do verbally, so non-verbal cues can also be used to convey this. The best way to ensure that all parties are comfortable with any sexual activity is to talk about it, check in periodically, and make sure everyone involved consents before escalating or changing activities.

What is enthusiastic consent?

Enthusiastic consent is a newer model for understanding consent that focuses on a positive expression of consent. Simply put, enthusiastic consent means looking for the presence of a “yes” rather than the absence of a “no.” Enthusiastic consent can be expressed verbally or through nonverbal cues, such as positive body language like smiling, maintaining eye contact, and nodding. These cues alone do not necessarily represent consent, but they are additional details that may reflect consent. It is necessary, however, to still seek verbal confirmation. The important part of consent, enthusiastic or otherwise, is checking in with your partner regularly to make sure that they are still on the same page.

Enthusiastic consent can look like this:

- Asking permission before you change the type or degree of sexual activity with phrases like “Is this OK?”
- Confirming that there is reciprocal interest before initiating any physical touch
- Letting your partner know that you can stop at any time
- Periodically checking in with your partner, such as asking “Is this still okay?”
- Providing positive feedback when you’re comfortable with an activity
- Explicitly agreeing to certain activities, either by saying “yes” or another affirmative statement, like “I’m open to trying.”
- Using physical cues to let the other person know you’re comfortable taking things to the next level (see note below)

Note: Physiological responses like an erection, lubrication, arousal, or orgasm are involuntary, meaning your body might react one way even when you are not consenting to the activity. Sometimes perpetrators will use the fact that these physiological responses occur to maintain secrecy or minimize a survivor's experience by using phrases such as, “You know you liked it.” In no way does a physiological response mean that you consented to what happened. If you have been sexually abused or assaulted, it is not your fault.

Consent does NOT look like this:

- Refusing to acknowledge “no”
- A partner who is disengaged, nonresponsive, or visibly upset
- Assuming that wearing certain clothes, flirting, or kissing is an invitation for anything more
- Someone being under the legal age of consent, as defined by the state
- Someone being incapacitated because of drugs or alcohol
- Pressuring someone into sexual activity by using fear or intimidation
- Assuming you have permission to engage in a sexual act because you’ve done it in the past

How do I Know if I Have Consent?

Consent must be informed (the person being acted upon knows what is happening) and mutual (both parties have input and both want to participate in a given sexual act.)

Communication is important. Consent is not implied; talk to your partner about what is comfortable for him or her every step of the way. Pay attention to both verbal and non-verbal communication – the absence of a “no” does not imply consent, nor does a prior sexual relationship. A person who is mentally or physically incapacitated by drugs or alcohol cannot give consent.

Reporting to Law Enforcement

The decision to report to law enforcement is entirely yours. Some survivors say that reporting and seeking justice helped them recover and regain a sense of control over their lives. Understanding how to report and learning more about the experience can take away some of the unknowns and help you feel more prepared.

How do I report sexual assault?

You have several options for reporting sexual assault:

- Call 911. If you are in immediate danger, dial 911. Help will come to you, wherever you are.
- Contact the local police department. Call the direct line of your local police station or visit the station in person. If you are on a college campus you may also be able to contact campus-based law enforcement.
- Visit a medical center. If you are being treated for injuries resulting from sexual assault, tell a medical professional that you wish to report the crime. You can also choose to have a sexual assault forensic exam. To find an appropriate local health facility that is prepared to care for survivors, call our 24- Hour Sexual Assault Crisis Hotline (936) 441-7273.

What are some common concerns about reporting?

If you have questions or concerns about reporting, you're not alone. The list below may have answers to some common questions that are on your mind.

- The perpetrator got scared away or stopped before finishing the assault. Attempted rape is a serious crime and can be reported. Reports of attempted rape and other assault are taken seriously.
- I know the person who hurt me. About 2/3 of victims know the perpetrator. It can be unnerving to be violated by someone you know. Regardless of who the perpetrator is, sexual assault is against the law.
- I've been intimate with the perpetrator in the past or am currently in a relationship with the perpetrator. Sexual assault can occur within a relationship. Giving someone consent in the past does not give them consent for any act in the future. If you did not consent, they acted against the law—and you can report it.
- I have no physical injuries, and I'm worried there's not enough proof. Most sexual assaults do not result in external physical injuries. It's important to receive medical attention to check for internal injuries. You can also choose to have a sexual assault forensic exam to check for DNA evidence that may not be visible on the surface.
- I'm worried law enforcement won't believe me. There has been great investment in police training on this topic. While there are occasional exceptions, most law enforcement officers are understanding and on your side. If you do encounter someone who isn't taking your case seriously, ask for their supervisor, and let your local sexual assault service provider know.
- I don't want to get in trouble. Sometimes minors are afraid of being disciplined, either by the law or by their parents, because they were doing something they shouldn't have when the abuse occurred. For example, a teen might have been consuming alcohol, or a child might have been breaking a house rule. It's important to remember that sexual assault is a crime—no matter the circumstances. Nothing you did caused this to happen.

Effects of Sexual Assault

Sexual violence can have psychological, emotional, and physical effects on a survivor. These effects aren't always easy to deal with, but, with the right help and support they can be managed. Learning more can help you find the best form of care to begin the healing process.

Short-Term (Acute) Effects

Immediately following an incident (days to weeks), many survivors report feeling:

- Shame: Survivors thinking they are bad, wrong, dirty, or permanently flawed.
- Guilt: Survivors feeling that the abuse was their fault. It is very difficult for survivors to place the blame on the offender. Often the abuser was a person close to them that they want to protect. Or it may be that by placing the blame on the offender they then feel an utter helplessness in the abuse.
- Denial: Survivors saying, "It wasn't that bad." "It only happened once." "I am fine, I don't need anything."

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- **Minimizing:** Survivors thinking that their abuse was not as bad as someone else's. Minimizing the assault is a coping strategy. Sexual assault counselors should validate the impact of the abuse and that it is appropriate that the survivor is upset, traumatized, or hurting from it.
- **Boundaries:** Survivors can be unfamiliar with boundaries, not knowing when or how to set them or that they have a right to do so. Many survivors need support developing and practicing boundaries.
- **Trust:** Sexual assault is a betrayal of trust. Most survivors find it difficult to trust other people as well as themselves and their own perceptions. On the other hand, they may place an inappropriate level of trust in everyone.
- **Safety:** Often survivors have an unrealistic sense of safety, assess unsafe situations as safe, and perceive safe situations as dangerous. It is important to check whether a survivor is now in a safe environment by asking specific questions: "Is anyone hurting you or asking you to do things you do not want to do?"
- **Isolation:** This is a big issue for adult survivors. Many feel they do not deserve support, that they are tainted, and that others will not want to be their friends or lovers. Often, survivors from marginalized communities do not want to expose their experiences for fear of bringing further judgment and attack on their community. Many survivors have been shunned from their families and/or communities.
- **Amnesia:** A survivor may not remember what happened. In the long-term, if it happened before the development of language, the survivor may not have a verbal memory.
- **Dissociation:** A survivor may have dissociated during the sexual assault incident(s). They may describe "floating up out of their body" or "looking over their own shoulder" during the abuse. Dissociation can happen even when the survivor is not being assaulted/abused; an event or memory can bring up emotions which trigger dissociation.
- **Anesthesia:** The body is where the sexual abuse took place and many survivors feel betrayed by their bodies in various ways. They may have tried to numb/dissociate from their bodies in order not to experience the feelings brought on by the abuse.
- **Physical:** Survivors may have somatic (body) complaints, eating disturbances, anxiety, difficulty concentrating, and physical symptoms related to areas on their body affected by assault.
- **Emotional:** Survivors may be very expressive (anger, sadness), disoriented (disbelief, denial), or controlled (distant, calm).
- **Cognitive:** Survivors may be unable to block out thoughts of the assault, or alternately forget entire parts of it. They may constantly think about things they should have done differently; emotion and intellect may be conflicted. Nightmares are common. Survivors may also have thoughts of being in a similar situation and "mastering" the traumatic event.
- Other related issues that may emerge are eating disorders, sexual difficulties, physical changes, substance abuse, self-harm, suicidality, anger, and mood disorders such as depression and post-traumatic stress.

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Long- Term Effects

Long- term reactions include healthy and unhealthy coping mechanisms, which may be beneficial (social support) or counterproductive (self-harm, substance abuse, eating disorders). Immediate reactions may persist and change the survivor's lifestyle. This adjustment stage (months or years) may include:

- continuing anxiety
- poor health
- sense of helplessness
- persistent fear
- depression
- mood swings
- sleep disturbances
- flashbacks
- dissociation
- panic attacks
- phobias
- relationship difficulties
- withdrawal/isolation
- paranoia
- localized pain

These are normal reactions to a traumatic incident. If we look at these reactions through a "trauma lens" then the reactions make sense but are no longer useful to the healing process. Some survivors may be diagnosed by a mental health professional as having Acute Stress Disorder or Post Traumatic Stress Disorder.

Have you been sexually assaulted?

If You Have Been Sexually Assaulted...

- PLEASE KNOW THIS IS NOT YOUR FAULT.
- Find a safe place.
- Tell someone who will help and/or support you.
- Seek medical care as soon as possible.
- If you are an adult, remember it's your choice whether or not to report it to the police.
- Give yourself the time you need to heal.
- Please know that you can seek help at any time.

Sexual Assault Exams Are Available Without Police Involvement**

What?

- A confidential non-report sexual assault examination is conducted by a medical professional.
- A non-report sexual assault examination refers to the same examination provided to survivors who wish to report; however, there is no law requiring medical professionals to report adult sexual assault.

Who and When?

- Any survivor of sexual assault who is at least 18 years of age, consents to an examination and who arrives at a medical facility within 96 hours.

Why?

- Survivors often need time to prepare themselves before reporting since criminal investigations and reporting are often invasive and exhausting; however, forensic evidence collection is extremely important in sexual assault cases.
- Evidence collection supports a survivor in the criminal justice system.

How?

- The Texas Department of Public Safety will store any evidence collected from a non-report sexual assault examination for up to two years.
- The sexual assault examination has two parts: medical and forensic.
- The Texas Code of Criminal Procedure Section 56.065 requires the Texas Department of Public Safety to pay for the forensic portion of the medical examination and for the evidence collection kit; however, if a survivor arrives after the 96- hour window and requests a forensic examination, they are financially responsible.
- Survivors may also receive medical treatment that is unrelated to evidence collection (e.g. medication, stitches). Those costs that are purely medical will be billed to the survivor. In contrast, survivors who DO report to law enforcement are eligible for reimbursement for the medical portions of the exam through the Crime Victims' Compensation program.