You are not alone ...

A Survivor’s Guide for Clark University

If you have been hurt, threatened or intimidated by anyone, even a loved one, or know someone who has been the victim of sexual violence, this resource may help you decide what to do and who to talk to.

There are free, confidential resources available on and off campus.

You are not alone ...

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Introduction

This Survivor’s Guide is designed to help you whether you are a victim of a sexual assault or know someone who has been assaulted.

Rape and sexual assault pose significant health risks for college students. In a recent national survey, 1 out of 6 women reported being a victim or attempted rape. Approximately 30 percent of these women were between the ages of 18 and 24 when they were sexually assaulted. Most college students who are raped are victimized by someone they know. These assaults are called “acquaintance rapes.”

Coping with the impact of rape can be especially difficult for a college student. The effects of rape trauma often interfere with a student’s ability to fulfill academic responsibilities and to participate in the social activities that are an integral part of campus life.

College students who are raped (male and female) must deal with making important decisions, such as whether to seek medical treatment, notify campus officials, file a police report, contact their parents, and/or seek out help from campus or community resources. In addition, most victims have concerns about their personal privacy and safety, as well as how to deal with the reactions of family members and friends.

Certain sections of this guide may be more helpful to you than others. The guide is intended to be a comprehensive resource for members of the Clark community seeking help and information about sexual violence.

You will find that the different sections are designed to be helpful at different stages of the healing process. Some sections are addressed specifically to a victim of sexual assault while other sections are written for the friends of survivors. Most of the information herein applies to any victim of sexual violence, although there are specific references to both male and female survivors when necessary and appropriate.

Please keep this Survivor Guide in a safe and accessible place.
A Definition of Rape, Sexual Assault and Related Terms

**Rape / Sexual Assault**

Although the legal definition of rape varies from state to state, rape is generally defined as forced or nonconsensual sexual contact.

Rape and/or sexual assault is forced, manipulated, or coerced sexual contact by a stranger, friend or acquaintance. It is an act of aggression and power combined with some form of sex. A person is forced into sexual contact through verbal coercion, threats, physical restraint, and/or physical violence. Consent is not given.

Rape is also a legal term that is defined in Massachusetts by three elements:

- Penetration of ANY orifice by ANY object,
- Force or threat of force, or
- Sexual contact against the will of the victim.

Consent cannot be given (legally) if a person is impaired, intoxicated, drugged, underage, mentally challenged, unconscious, or asleep.

Rape and sexual assault are about power and dominance; they are not about sex and certainly not about feelings of love and/or affection. Rape is a hate crime based on gender, power and control.

**Stranger Rape**

When a person is raped by an unknown attacker it is considered a “stranger rape”. Stranger rapes, contrary to media coverage, are rare and account for only 25% of all reported sexual assaults. Most victims know their attackers.

**Acquaintance Rape / Date Rape**

When a person knows his/her attacker (partner, family member, doctor, neighbor, co-worker, etc.) it is considered an “acquaintance rape”. Because of the personal connection to the perpetrator, the survivor may not classify what has happened as rape. Acquaintance rapes account for more than 75% of all reported rapes.
Sexism

Sexism is the system of attitudes, assumptions, actions and institutions that treat women as inferior and make women vulnerable to violence, disrespect and discrimination. Sexism is intensified and compounded by other systematic imbalances of power because of class, race, age, sexual orientation and physical/mental ability. In a sexist world, men have more political, economic and social power than women.

Coercion

Coercion is the use of emotional manipulation to persuade someone to something they may not want to do – like being sexual or performing certain sexual acts. Examples of some coercive statements include: “If you love me you would have sex with me.”, “If you don’t have sex with me I will find someone who will.”, and “I’m not sure I can be with someone who doesn’t want to have sex with me.” Coercive statements are often part of many campus acquaintance rapes. Being coerced into having sex or performing sexual acts is not consenting to having sex and is considered rape/sexual assault.

Consent

Consent is clear permission between intimate partners that what they are doing is okay and safe. To consent to something – like being sexual – means you confidently agree to do it based on your own free will without any influence or pressure. You cannot legally consent if you are drinking or under the influence of drugs as your ability to consent has been impaired.

Sexual Abuse

Sexual abuse is a term generally used to refer to inappropriate sexual conduct on a child.

Sexual Harassment

Different from sexual assault, sexual harassment is any unwanted sexual advance, comment, attention, gesture or behavior. Sexual harassment can be verbal, non-verbal or physical. Often, sexual harassment includes pressure by supervisors on his/her employees to reciprocate sexual advances in order to protect or advance in a job.
**Survivor**

This term – used throughout this document – is used in place of “victim” to describe someone who has survived sexual abuse or assault. The term “survivor” honors and empowers the strength of an individual to heal.

**Battering**

Battering is a series of verbal, physical or psychological tactics that one person uses to gain control over another person, often a partner or ex-partner. Battering can occur in intimate relationships (partner violence) and within a family (domestic violence).

**Domestic Violence**

Domestic violence is verbal, physical, psychological or sexual violence within the fluid concept of “family”. Such violence can occur between domestic partners, parents and children, siblings, or extended family members.

**Heterosexism**

Heterosexism is the systematic, day-to-day, institutional mistreatment of gay, lesbian, transsexual and bisexual people by a heterosexually dominated culture. At its core, heterosexism assumes that heterosexual relationships represent the norm and are, therefore, implicitly superior to gay, lesbian, transsexual or bisexual relationships. Out of heterosexism stems homophobia which is the fear and/or hatred of gays, lesbians, transsexuals and bisexuals because of their sexual orientations.

**Stalking**

According to Massachusetts General Law, stalking occurs when someone “willfully and repeatedly follows and harasses another person and who makes a threat with the intent to place a person in fear” for their personal wellbeing. A person can stalk someone by following, calling, instant messaging, writing, emailing another person.
If You Are a Victim of Sexual Assault

- Make sure that you are **SAFE** from additional harm. Call someone you trust: a friend, an RA, a family member, University Police (ext. 7575), Health Services (ext. 7467), Counseling Services (ext. 7678), the Rape Crisis Hotline (800-870-5905) or the Dean of Students Office (ext. 7423).

- If your plan is to go to the hospital, try to preserve all physical evidence. Try not to wash, go to the bathroom, or change your clothing. If you change your clothing, put all clothing you were wearing at the time of the assault in a paper bag. This will preserve important evidence.

- Please be aware that University Police can and will provide a safe, supportive escort to a nearby hospital.

- It is important to seek medical attention as soon as possible to make sure that you are physically okay, to help prevent and/or treat sexually transmitted infections and pregnancy, and to collect evidence should you choose to take legal action now or in the future. Medical attention is vital, as you may have sustained injuries of which you are unaware.

- If you do not wish to report to the police or go to the hospital, please contact Health Services (ext. 7467), Counseling Services (ext. 7678), the Rape Crisis Hotline (800-870-5905), or the Dean of Students Office (ext. 7423) for support, guidance, and assistance. Please remember that you are not alone.

- Never forget that THIS WAS NOT YOUR FAULT. There are people at Clark University and in the Worcester community (see page 22) who will believe you and help you heal.

- All the phone numbers that you need can be found on page 22 of this Survivor Guide.

- You are in control. Ask for help. Tell others what you need and what you don’t need.
If Someone You Know Has Been Sexually Assaulted

◆ Let her/him make decisions. Offer to help make phone calls, but do not take over. Your friend has just been violated and needs to regain control of her/his life. Helping her/him make decisions is part of that process.

◆ Do not touch the survivor without first asking permission. Physical contact may or may not be appropriate. Ask, “Would you like a hug?” Do not assume that physical contact will be comforting or welcome. Try to ensure that everything you do is comforting.

◆ Don’t blame the survivor for anything. Avoid asking things like, “Were you drinking?” or “Why did you go home with that person?” Focus instead on making the person feel safe and loved.

◆ Try to deal with your own reactions and emotions later. It is natural for you to feel angry, helpless, confused, or hurt. Try instead to focus on attending to your friend’s feelings. Once the survivor’s immediate needs are met and s/he is safe, you should consider seeking help from a counselor to talk about the incident and your own self-care.

◆ Listen and validate everything that your friend is telling you. Do not pass judgment on what you are hearing.

◆ Do not try to minimize what has happened. While it may be true that “things will be okay” eventually, your friend has experienced a traumatic event and needs support, patience, and validation. Healing takes time.

◆ Encourage the survivor to seek help as soon as possible. Use this guide to help understand what resources are available. Help them access that support. Ask your friend what s/he needs from you in terms of help and companionship.
Understanding the Scope of Sexual Violence

- Every two minutes, somewhere in America, someone is sexually assaulted (U.S. Department of Justice, 2004).

- One out of every six American women have been the victim of an attempted or completed rape in their lifetime (Centers for Disease Control and Prevention, 1998).

- In 2002, seven out of every eight rape victims were women (National Crime Victimization Survey [NCVS], 2002).

- In 2002, one out of every eight rape victims was male (NCVS, 2002).

- Women of color are about 10% more likely to be attacked than white women (NCVS, 2000).

- The United States has the world’s highest rape rate of all countries that publish such statistics. The U.S. rape rate is 4 times higher than Germany’s, 13 times higher than England’s, and 20 times higher than Japan’s (U.S. Department of Justice).

- One out of every four rapes takes place in a public place or parking garage (U.S. Department of Justice).

- In incidents of campus sexual assaults, alcohol is involved in over 90% of campus rapes (U.S. Department of Justice).

- Overall, rape has the highest annual victim cost of ANY crime, yet laws and successful criminal prosecutions remain inconsistent and confounding (U.S. Department of Justice, 2004).

- Today, more than 95% of all reported incidents of sexual assault and rape are committed by men (U.S. Bureau of Statistics, 2004). This does not mean that all men rape, but it does stress the importance of involving men in gender education and training.
You Are Not To Blame

It is common for victims of sexual violence to feel like the incident was somehow their fault. It is important to remember that you are not to blame for what happened to you, even if;

- Your attacker was a friend, family member, partner, lover, or spouse. You did not ask to be raped.
- You have previous sexual experience with the person who attacked and/or raped you.
- You were drinking or using drugs.
- You “froze”, did not or could not say “no”, or were unable to physically harm your attacker.
- You were dressed in clothing that others felt was seductive or revealing.
- Your attacker or anyone tells you that you are to blame for what happened.
- You willingly decided to be alone and/or intimate with your attacker. You NEVER asked to be raped.
How Can I Expect To Feel?

Sexual assault is a traumatic event that can have tremendous emotional consequences. As in all crises, people tend to cope in very different ways. It is important that you feel safe and that you understand all the campus and community resources that are available to you. You are not alone. There are people who can and want to help you.

Though each person is unique, the following list summarizes the range of emotions you might expect to feel in the days, weeks or months after a sexual assault. This list is included not as a mechanism to tell you what to feel, but rather to help you understand that what you’re feeling is absolutely reasonable.

Please be open and honest with friends, parents, counselors, etc. about your emotions so they can provide the support that you need.

- **Emotional Shock.** “I feel so numb.”, “I can’t believe this happened to me.”
- **Shame.** “I feel so dirty.”, “I can’t let anyone see me like this.”
- **Disbelief.** “Maybe nothing happened.”, “Am I over-reacting?”, “Why me?”
- **Powerlessness.** “There’s nothing I can do.”, “I give up.”
- **Embarrassment.** “What will people think?”, “What do people know?”
- **Fear.** “What if I’m pregnant?”, “What if my attacker sees me again?”, “I have nightmares every night.”, “I can’t be alone.”
- **Depression.** “I don’t want to do anything.”, “How will I survive?”, “When will I feel okay again?”
- **Guilt.** “This is all my fault.”, “If only I had ...”
- **Confused.** “I don’t know what my schedule is.”, “I can’t remember anything anymore.”
- **Memories.** “I keep having flashbacks.”, “I see my attackers face everywhere.”
- **Paranoia.** “My attacker is after me.”, “I can’t trust anyone.”, “Everyone knows I’ve been raped.”
- **Denial.** “Nothing happened.”, “It wasn’t rape.”
- **Anxiety.** “I can’t eat or sleep.”, “I can’t breathe.”, “I feel overwhelmed by everything.”, “Who can I trust?”
- **Anger.** “I want to hurt myself.”, “I want to hurt the person who raped me.”
- **Physical Stress.** “My stomach hurts.”, “I have a migraine.”
- **Sadness.** “Will I ever be happy again?”

It is important to remember that the above emotions are normal and, for many, just temporary reactions to an abnormal event. With help and support, the fear and confusion will lessen with time, but the trauma may continue to disrupt your life for a significant amount of time.
No matter how much difficulty you are having trying to cope with your emotions, it is important to remember that you are not “crazy” or “mentally ill”. The recovery process may actually help you develop new coping mechanisms and recognize strengths that you never knew you had before.

Talking about the assault often helps you feel better and take back control of your life, but it may be very hard to do, especially at first. You may feel VERY strongly that the best approach for you is to forget that anything happened, to just move on with your life. This is common and can last for months. Unfortunately, many victims of sexual assault who choose to “move on” eventually reach a point in their lives when they feel the need to address the complex emotions that follow a sexual assault. Please strongly consider talking to a therapist, social worker, counselor, hotline volunteer and/or rape crisis counselor. Talk with someone who can help you regain some control in your life.

Deciding to talk with someone may take some time. That’s okay. In the meantime, here are some ways that you can TAKE CARE OF YOURSELF:

- Surround yourself with compassionate, supportive people who will validate your emotions and act as a resource.
- Try to remember that you are safe. The rape is over. If you fear for your safety, please talk with a member of law enforcement (off-campus) or campus police (on-campus).
- Try writing or keeping a journal as a way of expressing your emotions and collecting your thoughts.
- Allow yourself more time to relax, exercise, and indulge in activities that bring you peace and satisfaction.
- Concentrate on eating a well-balanced diet and getting enough sleep. In addition, stay away from caffeine, nicotine, and alcohol.
- Use recommended stress-reduction techniques like yoga, jogging, aerobics, massage therapy, prayer and/or meditation.
- Give yourself permission to talk about the assault, if you want to, with those whom you love and trust. Talking about the assault can help you heal and take control of your life.
Seeking Medical Attention

It is highly recommended that you have a thorough medical examination as soon as possible after a sexual assault, even if you do not have any apparent injuries. You may be in shock, and you may have internal injuries of which you are not yet aware. You should also take this opportunity to discuss with a health care provider the risks of sexually transmitted infections (STI’s) and pregnancy. Fast medical intervention provides you with some options that may improve your short and long-term physical health and wellbeing.

Clark University is fortunate to have an amazing Health Services Office located at 501 Park Avenue. If you are more comfortable seeking initial medical attention at Health Services during their posted hours, please do so. They can also be very helpful in deciding how best to proceed. All information about your visit will be kept confidential.

A medical examination is also critical to document and collect any physical evidence of the assault. Certain evidence will disappear as time passes, and for this reason, you should seek medical attention as soon as possible.

The University Police can assist you with transportation to and from the hospital. If you are hurt or alone, please call “911” or campus police (x7575) to receive immediate medical attention.

It is important to remember that it is always YOUR decision about whether you will pursue the assault with the police and file a criminal complaint and/or file a report with the Dean of Students Office. Seeking medical attention is about YOUR health. A nurse or doctor will collect evidence in the event that you someday decide to press charges. Evidence – once collected – can be kept until you make a decision.

Please feel free to bring a loved one, friend, family member or rape crisis counselor with you to the hospital or Health Services. It is important to feel safe and to have someone who can provide support.

Sexual Assault Examinations

The doctor or Sexual Assault Nurse Examiner (SANE) will most likely begin the exam by asking general health related questions. If you are female, you will be asked about your menstrual history and your
current use of contraception. You may also be asked specific questions about the assault so that medical professionals can determine how best to help you. The information is not meant to be intrusive, but rather to help them conduct a thorough physical evaluation. For females, this usually means a pelvic exam. The doctor or SANE nurse will look for injuries or signs of force. If you have visible physical injuries (bruising, cuts, etc.) you may be asked to consent to having photographs taken. Photographing injuries may be uncomfortable, but it is important to preserve evidence that will disappear over time.

In addition to checking your body for injuries and treating those injuries as appropriate, the doctor or SANE nurse can collect other forms of evidence. Depending on the types of sexual contact that may have occurred, the examination may include taking samples from the vagina, rectum, and/or mouth to test for sperm cells and semen. Other evidence may be collected from under fingernails, on clothing and underwear, and from other areas of your body that may have come in contact with your assailant.

You may also be asked to take pregnancy and/or other tests to determine the presence of transmittable infections (blood and/or urine tests). These tests will determine what type of treatment you may need.

After the examination is completed, the doctor or SANE nurse will document the findings in a medical record. This written record can later be subpoenaed to assist in the legal process.

The Risk of STI’s from a Sexual Assault

The risk of contracting an STI as a result of sexual assault depends on a number of factors, including the nature of sexual contact, the number of assailants, and whether the assailant(s) was/were infected with an STI at the time of the assault.

A number of STI’s can be contracted during sexual contact, including hepatitis B, gonorrhea, herpes, chlamydia, syphilis, HPV (genital warts), and vaginitis. Immediate and effective treatment options are available for some of these infections.

Most medical providers will offer sexual assault victims two choices for addressing the risks of STI’s. The victim may choose to reduce her/his risk of contracting an STI by taking preventative medication(s)
immediately. This may or may not prove to be necessary. The victim may also elect to wait and see if s/he tests positive for an STI before taking medication. Whatever your decision, you should be reexamined and tested within a specific period of time to ensure that you have not contracted an STI. Discuss with your doctor or SANE nurse when you should be retested.

The probability of contracting HIV (the virus that causes AIDS) through sexual assault is very low. For the victim to be at risk, the assailant would have had to be infected with the virus. You should discuss with your doctor or SANE nurse ways to cope with the unlikely event of contracting HIV as a result of sexual assault and when to be tested.

A criminal court judge can often order a sexual assault suspect to be tested for HIV and other communicable diseases in order to inform the victim of those results. We suggest that you consult with a rape crisis center, law enforcement professional, or an attorney regarding how best to proceed.

The Risk of Pregnancy Resulting from a Sexual Assault

Your individual risk of becoming pregnant as a result of a sexual assault depends on many factors, including your menstrual cycle, your use of contraceptives, your fertility, the fertility of the assailant, and whether the assailant ejaculated in or around your vagina. A doctor or SANE nurse will help you evaluate your personal risk of pregnancy while at the hospital. They will also review your options.

If you are at risk for pregnancy, a medical care provider will detail the various options available to you. If you choose to seek immediate treatment (emergency contraception), please be aware that this option is most effective within the first 72 hours following the assault. Emergency contraception is not an abortifacient (i.e. it does not cause an abortion). Emergency contraception prevents pregnancy by stopping ovulation, fertilization, or implantation of a fertilized egg. It is safe and effective.

You may also decide to wait and see if you become pregnant. If you do become pregnant as a result of the assault, a health care provider can discuss your options with you at that time.

Some information taken from the University of Virginia’s Handbook for Survivors (2004)
Reporting a Sexual Assault

Reporting a sexual assault is a choice that only you can make. Should you decide to report your assault to the University Police and/or the Dean of Students Office, please understand that your confidentiality will be protected every step of the way. Filing a report with the university or filing criminal charges are ways that a survivor can regain control of his/her life while holding their assailant accountable for his/her actions. The decision to report belongs to the survivor.

Dean of Students Office

Seeking the support and counsel of the Dean of Students is a highly recommended, confidential option to all victims of sexual assault. A Dean is on-call 24-hours a day, seven days a week to respond to emergencies like this and can be summoned to campus by contacting a member of the RLH staff.

Your story and identity will be kept absolutely confidential. The Dean of Students will counsel you on your options and assist you in your efforts to be safe. The Dean of Students will also explain the judicial and criminal processes to you so that you are aware of all the options available to you.

Consulting the Dean of Students does not mean you have officially reported an assault. The Dean of Students will honor your confidentiality and assist you in making a decision and getting help. The decision to file charges criminally or through the University Judicial Board belongs to you.

Please consult Synergy for a complete explanation of the judicial process.

University Police

When a sexual assault is reported, EVERY effort is made to provide support and appropriate treatment to the victim. Taking into consideration the victim’s wishes, a report can be made to the Worcester Police, who can assign specially trained officers from the sexual assault unit to support the victim and investigate the criminal complaint. The University Police will keep all information confidential and work with the victim to provide any assistance and support that s/he needs in order to feel safe.
Male Survivors of Sexual Assault

There are many people who actually believe that men cannot be sexually assaulted. This is, of course, absolute myth. Men can be and are raped everyday across the world. Heterosexual men are as likely to be victims of sexual assault as are gay and bisexual men. Aside from the occasional and distasteful “prison” joke or reference, male rape is hardly ever discussed. This societal need to deny the existence of male sexual assault might be rooted in the false presumption that men cannot be victimized. “Real men” would not allow themselves to be raped. Unfortunately, men are victims of sexual assault and child molestation and this socialized view of tough masculinity only adds to the emotional trauma faced by male victims.

For most men, the idea of being a victim of anything is hard to comprehend. Many men are raised to believe that they can and should physically protect themselves from any attack on their person or property. Men are supposed to risk their lives to protect themselves from danger. Anything else would be “unmanly”. When men are raped, they are also emasculated. These views of “manliness” and “masculinity” are deeply ingrained in our culture and can lead male victims to experience profound levels of shame, guilt, and inadequacy. Also, men are less likely to seek help because of the fear that people will expose them as weak or emasculated.

Despite these myths and gender issues, more men than ever are coming forward to ask for help. Men can be victims and should feel comfortable seeking out the resources available on campus and in the community.
Alcohol & Rape: What If I Had Been Drinking?

Over 96% of campus sexual assaults experienced by college students occur in situations involving alcohol by the victim, the assailant, or both.

Often, victims who had been drinking and/or using drugs at the time of an assault have intense feelings of self-blame. They are also more likely to encounter blaming responses from other people who may feel like the victim is somehow culpable because of his/her decision to drink.

A victim is NEVER responsible for a sexual assault.

Here are four easy ways to reduce your risk of sexual violence if you are choosing to drink alcohol;

1. Plan Ahead.
   - Determine your limit. How much will you drink and how long will you stay?
   - Know who you will be with and make a pact to leave together.
   - Know how you will get back to your home and ensure that a sober person will be your responsible escort.
   - Have a back-up plan if something goes wrong.

2. Only party with people who respect and support your choices.
   - Avoid parties hosted or attended by strangers.
   - Make sure you always surround yourself with friends who have your best interests in mind.
   - Avoid partying or drinking in places that are new to you (other colleges, off-campus apartments, etc.)

3. Drink slowly and carefully and NEVER with the purpose of getting drunk.
   - Eat before, during and after you drink.
   - Drink non-carbonated, non-alcoholic beverages throughout the night.

4. Avoid ...
• High-risk behavior
• Playing drinking games
• Drinking from common sources (kegs, punch bowls, etc.)
• Accepting a drink you have not poured yourself
• Leaving a drink unattended
• Partying in an environment where other people are urging you to drink

Even if the person who assaulted you was drinking, he/she is still responsible for his/her behavior. Being drunk is not an excuse for committing ANY criminal acts, including sexual assaults.
Myths and Realities

Myth: **Rape is a crime committed by strangers jumping out of bushes out of dark alleys.**

REALITY: More than 75% of all reported rapes are committed by acquaintances. The media tends to disproportionately cover stranger rapes that happen in your area thus giving the false impression that stranger rapes are more common.

Myth: **Only women can be sexually assaulted.**

REALITY: Although the majority of rape victims are women and women are ten times more likely than men to be assaulted, many men are victims of rape, sexual abuse and sexual violence.

Myth: **Victims of rape often ask to be raped by the way they were acting or the way they were dressed.**

REALITY: Nobody asks to be raped. Nobody. The way a person behaves is their choice. The way someone dresses, talks or behaves is never justification for being sexually assaulted.

Myth: **People who rape are psychopaths.**

REALITY: The majority of rapists are actually not mentally ill nor do they have a violent criminal past.

Myth: **The only way a rapist can force a person to perform sexual acts is by using physical violence or a weapon.**

REALITY: A weapon or physical assault is not necessary for a sexual assault to occur. Body weight, psychological pressure, threat of violence, fear, drugs or alcohol are some examples of how someone can take advantage of a person without using a weapon.

Myth: **People who don’t fight back have not been raped.**

REALITY: There are many reasons why a person might not fight back during a sexual assault: drugs or alcohol, size differential, fear of retribution, paralysis are common reasons why someone might not be able to fight back.
MYTH: A person who pays for dinner or buys someone drinks or gifts is entitled to sex.

REALITY: No one is entitled to having sex with another person. A person must always have the consent of his/her partner before engaging in or proceeding with any sexual contact.

Myth: When a man becomes sexually aroused he has to have sex.

REALITY: Men are not biologically predestined to have uncontrollable sexual urges. Most men can and should be expected to handle their sexual urges.

Myth: If a perpetrator is intoxicated at the time of an assault, s/he cannot be held accountable or accused of rape.

REALITY: A person is responsible for his/her actions no matter how intoxicated s/he is at the time of the assault. Being drunk is not an excuse for taking advantage of someone sexually.
Who Can Help Me? Phone Numbers and Resources

**Campus Resources**

- Counseling Services  793-7678
- Dean of Students     793-7423
- Health Services      793-7467
- University Police    793-7575
- Wellness Outreach Coordinator   421-3724

**Community Resources**

- Rape Crisis Hotline   1-800-870-5905
- Rape Crisis Center of Central Mass  799-5700
- Violence Recovery Program (GLBT) 617-927-6250
- UMass Emergency Mental Health 856-3562
- The National Sexual Assault Hotline 1-800-656-HOPE

**SANE (Sexual Assault Nurse Examiner)**

- St. Vincent’s Medical Center ER  363-6025
- UMass Emergency Room           334-3511
- Memorial Emergency Room        334-6481

**Internet Resources**

- Rape Abuse & Incest National Network (RAINN) [www.rainn.org](http://www.rainn.org)
- Rape Crisis Center of Central Mass [www.rapecrisiscenter.org](http://www.rapecrisiscenter.org)
- Mass. Coalition Against Sexual Violence [www.janedoe.org](http://www.janedoe.org)
- Men Can Stop Rape [www.mencanstoprape.org](http://www.mencanstoprape.org)