



a **vision** to end
sexual
assault

The **CALCASA** Strategic Forum Report

The Strategic Forum Report was prepared by the California Coalition Against Sexual Assault (CALCASA), an organization that provides leadership, vision and resources to rape crisis centers, individuals and other entities committed to ending sexual violence. CALCASA, which was founded in 1980, is the only statewide organization in California whose sole purpose is to promote public policy, advocacy, training and technical assistance on the issue of sexual assault.

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CALCASA Strategic Forum

California Coalition Against Sexual Assault

March 2001

preface

An estimated 302,100 women
and 92,700 men are forcibly raped
each year in the United States.¹

Sexual assault is a problem of sweeping proportions in California and across the nation.

The American Medical Association has called sexual assault the “silent, violent epidemic.”² For the individual victim, rape and other forms of sexual violence are the degradation of the soul. For society as a whole, however, rape is the degradation of the human race. Sexual assault contributes to the deterioration of community well-being and impacts everyone. This traumatic crime, all too often accepted in American culture, affects women, men, children, families, economic progress, and our national pride.

Sexual assault exists as a continuum of violence that includes the exploitation of women and girls; sexual harassment; molestation; incest; rape of children; and rape by dates, acquaintances, spouses, significant others, and strangers. Sexual violence permeates our society; it can be found in our families and our marriages, throughout the media and the workplace, on school yards and college campuses, and in collective attitudes that blame the victim and excuse the perpetrator. Sexual assault has demonstrated links to other forms of violence such as gang violence, domestic violence and violence related to drug and alcohol use. Rape occurs routinely in prison life and remains a despicable, yet universal, aspect of war.

Sexual violence represents the ultimate wielding of power and control. It constitutes a violation of a sacred place that is the intimate, soulful core of the self. So long as sexual violence exists and little girls grow up in fear, rape will continue to limit the freedom of women and profoundly divide women and men. Putting an end to rape will mean the beginning of the end for all forms of oppression.

We, the members of the CALCASA Strategic Forum Working Group, have pledged ourselves and our respective organizations to the task of eradicating sexual assault in California. With that goal in mind, we have thoughtfully and passionately developed this report to expose the insidiousness of sexual violence, raise public awareness of critical issues, and change community consciousness about this ongoing problem. While great strides have been made in the past three decades toward supporting victims, much remains to be done. The recommendations and strategies contained in the report are designed as a framework for action to be used by those individuals and agencies with the resources and the initiative to bring about dramatic change.

Sexual violence differs from all other crimes in that it hurts individuals at the most intimate, personal level. We must expand public awareness concerning sexual assault and its effect on self-worth; academic and job performance; and the ability to live a happy, productive life. We want every Californian to understand the true impact of rape. Moreover, we must ask ourselves what we as individuals and as a community can do to stop sexual assault. Those of us who work as professionals in the field of sexual violence need to enhance the linkages between our organizations and the public at large. We must speak out for victims from all segments of society with a stronger voice so that we will be heard, thus making it safer for survivors to speak out for themselves.

In submitting this report, the members of the Strategic Forum Working Group appeal to policymakers, elected officials, community leaders, and individuals — all of whom have a stake in addressing this serious problem. Together we can, ultimately, put an end to sexual violence in our society once and for all.

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introduction

The public safety and public health costs of violence against women are high [\$110,000 per victim of rape]³ and the impact on society too great ... not to act.⁴

For the purpose of this report, sexual violence/sexual assault is defined as an act of violence in which sex is used as a weapon. Sexual violence ranges from verbal harassment to sexual assault or abuse to rape to sexual homicide. At its most basic level, sexual assault constitutes any form of nonconsensual sexual activity, which encompasses all unwanted sexual acts from intimidation to touching to penetration. At a more complex level, it is the use of violence involving sex; the overtones of sex; or the instincts, drives or behaviors associated with sex, the sexes or sexual organs.

The Problem

Some 30 years ago, women began to speak out about their personal experiences of rape and sexual assault. During the past three decades, great progress has been made in California toward supporting sexual assault victim/survivors. Rape crisis programs have been established in every county to offer crisis intervention and support. Legislative changes have been made that have increased the efficacy of the criminal justice and medical community response to sexual violence.

However, in California and across the country, women are still being raped. According to the FBI Crime Index, there were 9,443 reported forcible rapes in California in 1999.⁵ This number is undoubtedly low, as evidenced by the national figures compiled by the Bureau of Justice Statistics, which estimates that only 28 percent of rapes and sexual assaults are ever reported.⁶ The extent of the incidence of rape represented by these numbers is unacceptable. Obviously, there is work to be done.

The Vision

The anti-sexual assault movement began in the 1970s as political activism by small groups of women who were active in the women's liberation movement. Over time, the movement evolved into a coordinated effort against sexual violence by committed individuals

from a variety of backgrounds. In 1999, the California Coalition Against Sexual Assault (CALCASA), believing the time was right to build on this trend toward a multidisciplinary approach, decided to spearhead a collaborative, strategic visioning process for sexual assault prevention and intervention. With funding from the California Office of Criminal Justice Planning, CALCASA organized the Strategic Forum, a year-long project that would bring together leaders from the sexual assault field and related disciplines to identify key issues and develop a strategic plan to address sexual violence within the state.

The CALCASA Strategic Forum would provide a truly historic opportunity to advocate for expanded services to survivors of sexual assault, greater public awareness of sexual violence and its ramifications, and increased funding for more effective prevention efforts. Working together, forum participants would lay the foundation for the implementation of strategic vision recommendations and strategies, thus creating a stronger movement toward ending sexual violence in California.

The Partners

To develop such a substantive strategic plan CALCASA called upon four principal groups to serve as partners in the Strategic Forum process:

- **Rape crisis centers and rape prevention programs**, whose staff and volunteers are on the front lines in providing support and advocacy to sexual assault victim/survivors in many communities across California.
- **Criminal justice agencies**, including district attorneys' offices, law enforcement units, victim/witness assistance centers, and probation departments, whose staff respond on a daily basis to the crime of sexual violence.
- **Multidisciplinary stakeholders** from organizations and agencies in fields outside rape crisis and criminal justice who are primary partners in sexual assault prevention and intervention, including medical providers, public policy experts, funders, business and community leaders, academicians, and other violence prevention advocates.
- **The Strategic Forum Working Group**, comprised of professionals representing a variety of sexual assault-related organizations

throughout California, including rape crisis centers, victim/witness assistance centers, law enforcement agencies, district attorneys' offices, probation departments, tribal health centers, disability rights advocacy groups, the Office of Criminal Justice Planning, and CALCASA. Working Group members were selected for their expertise in the area of sexual assault, longevity in their field, familiarity with rape crisis centers, cultural and ethnic diversity, ability to commit a significant amount of time to the project, and willingness to transcend individual interests to create a unified vision.

The Process

The CALCASA Strategic Forum was designed so as to solicit input and feedback from various constituencies throughout the strategic visioning process; indeed, this interactive exchange of ideas was considered crucial to the project's success. In January 2000, CALCASA launched the Strategic Forum by distributing a survey called "Every Voice Counts" to nearly 650 Californians, including rape crisis center staff; law enforcement and probation officers; educators; district attorneys; victim/witness assistance center representatives; and community, media and business leaders. The purpose of the survey was to gather ideas on: (1) what constituents felt had been accomplished in sexual assault prevention and intervention; (2) which critical issues should now take priority; (3) what partnerships could potentially strengthen the prevention and intervention movement; and (4) what beliefs might be incorporated into a shared inspiration and purpose for this collective work.

The multidisciplinary Working Group, which would be the driving force behind the Strategic Forum, was charged with an ambitious task: to develop a vision and blueprint for ending sexual assault in California. Beginning in March 2000 and using the survey results as a starting place, Working Group members met monthly in Sacramento for day-long sessions to identify core issues and to draft recommendations and strategies aimed at bringing about significant change over the next three to five years. Information was shared with stakeholders throughout the process.

In September 2000, CALCASA hosted a roundtable meeting for representatives from rape crisis programs and multidisciplinary stakeholders. Attendees provided important feedback on an initial draft of the issues, recommendations and strategies presented by the Working Group. They made suggestions for potential partners, which included the media, the criminal justice system, state government agencies, schools, and community and sports

organizations. The Working Group then reconvened for three additional meetings to finalize its recommendations in preparation for the publication of the Strategic Forum Report in early 2001.

The Purpose

The Strategic Forum Report represents the culmination of CALCASA's year-long strategic visioning process, which seeks to foster better understanding of the impact of sexual violence and encourage further collaboration to end sexual assault in California. The report is designed to capture the attention of policymakers, government agencies, service providers, community organizations, and individuals by:

- Presenting key issues and challenges related to sexual assault prevention and intervention
- Proposing recommendations that reflect innovative solutions and practical alternatives to address these issues
- Providing specific strategies and potential community partners to implement the recommendations

The fundamental purpose of the Strategic Forum Report is to energize Californians to move forward in sexual assault prevention and intervention by: (1) increasing the capacity of service providers and the criminal justice system to help victim/survivors and hold perpetrators accountable, using a multidisciplinary approach; and (2) changing the social norm so as to make sexual violence unacceptable.

The Issues

- Change Public Perceptions of Rape and Sexual Violence
- Ensure Multidisciplinary Services to Facilitate Healing From Sexual Violence
- Overcome Barriers to Prevention, Intervention and Treatment for Underserved Populations
- Involve Men and Boys in Prevention of Rape and Sexual Violence
- Ensure Responsive, Effective Criminal Justice Practices
- Promote Sexual Assault Prevention Education

historical perspective

In order that we stop being victims, we ourselves must take up the struggle against rape. Individually and collectively we can break the silence and make it no longer a taboo subject, or something shameful that weighs us down.⁷

There have been victims of rape since time began. For centuries, the issue of rape has been shrouded in silence, myth and misconception. Rape and other forms of sexual violence — especially violence against women — have been commonly accepted, if not publicly acknowledged, throughout civilization. Countless examples confirm the historical pervasiveness of sexual assault in all parts of the world and in nearly every society, including “rape as the theft of one man’s property by another, rape as a spoil of war, epidemic rape of slave women in the antebellum South, [and] rape of ‘gal-boys’ in prison.”⁸ A recent report from the Johns Hopkins School of Public Health and Gender Equity reveals that worldwide “at least one woman in every three has been beaten, coerced into sex, or otherwise abused in her lifetime.”⁹

Rape and sexual violence have been traditionally condoned by male-dominated societies whose lack of conscience regarding these crimes reflected conventional attitudes about gender, sex and the “proper” relationship between men and women. In America, confronting rape on a public scale and bringing about substantive social change took the impact of two waves of political feminism, one that developed in the mid-19th century, eventually bringing women the right to vote, and a second born of the civil rights movement in the 1960s.¹⁰

The Anti-Sexual Assault Movement

Sexual assault was not considered a social problem until the 1970s. In the early 20th century, sexual violence in America had often been excused on grounds of environmental stress, poor education or mental incompetency. During the 1940s and 1950s, rape was frequently dismissed by assigning a mental disorder to the victim (e.g., failure

to accept her femininity).¹¹ The liberating atmosphere of the 1960s generated change in many quarters, but especially for women and eventually for the issue of rape. Fashioned from the feminist movement and grounded in small groups of women who would create the first rape crisis centers, the anti-sexual assault movement began as a grassroots effort of those who had experienced rape offering support to other victims. The demand for women's rights provided the mantra for championing the rights of sexual assault victims and the need to hold perpetrators — and indeed, society — accountable.

However, early organizers of the movement faced a serious uphill battle. They would need to break the silence regarding rape, change deeply ingrained myths and misconceptions about sexual violence, and reform the existing rape laws. Breaking the silence entailed the slow, painstaking process of getting the public to acknowledge that there even was a problem, which proved particularly challenging because of the reluctance of rape victims to talk about their experiences and the ages-old social stigma cast upon any woman who had been raped and came forward. Dealing with the issue of shame on the part of victims was a major emphasis of the anti-sexual assault movement and continues to be at the forefront of its concerns.

Changing the myths about sexual assault meant changing long-standing public sentiment that tacitly condoned sexual violence and accepted the idea that rape was something men just did, especially under special circumstances like war. Leaders of the movement had to discredit commonly held beliefs that rape was primarily perpetrated by strangers (the man jumping out from a dark alley or behind a parked car), happened at random, or was the result of uncontrollable sexual urges. Other myths — that rape only happened to women who were “asking for it” by their conduct or provocative dress, for example — also had to be dispelled.

In the 1980s, rape became the theme for many books and movies, among them “The Accused,” a riveting film starring Jody Foster and Kelly McGillis. This type of media attention helped bring the issue of sexual assault into the public forum and provoked discussion and debate. However, obtaining public buy-in to a new reality based on recognition that the majority of rapes (75 percent¹²) are committed by someone the victim knows and that rape is “an act of power and control, not a biological need for sexual gratification,”¹³ proved difficult, even two decades later.



Many misconceptions lingered, including the assumption that rape still occurred infrequently. Until the 1980s, little scientific evidence existed to substantiate the pervasiveness of sexual violence in our society. This was due in part to the hesitation of many women to report being raped because of personal and societal barriers. Then, studies conducted between 1979 and 1990 resulted in rape prevalence estimates as high as 25 percent of the female population.¹⁴ While experts in the sexual assault prevention field did not believe these studies reflected the actual number of victims and considered these statistics to be low, the figures gave credibility to the high incidence of sexual assault. This information became available as new attitudes about the worth and dignity of women emerged, recognizing women as individuals who could successfully control their own economic and emotional destinies without relying on men. At the same time, another public misconception — that only certain types of men would commit rape — began to unravel. Slowly, society was learning that “not only ... [was] the experience of rape common, but it ... [was] perpetrated by common men.”¹⁵

But changing the court of public opinion was not enough. The movement had to bring about change in every court of law. Prior to the 1970s, rape victims were not only victimized at the time of the assault, but all too often were re-victimized by the criminal justice system when they attempted to prosecute their assailants. Established rape laws required a victim to produce three kinds of proof in order to obtain a sexual assault conviction: corroborating evidence, the fact that she had resisted her attacker, and proof of her past sexual innocence (i.e., she could not have a “sexual” history).

A pivotal point in the struggle to reform the rape laws of this country came with the publication of Susan Brownmiller’s landmark book, *Against Our Will: Men, Women and Rape* in 1975. Brownmiller jarred the national consciousness by pointing out that rape was the only violent crime in which victims were expected to resist. Her insights profoundly changed the definition of rape when she wrote: “Rape is not a crime of irrational, impulsive, uncontrollable lust, but is a deliberate, hostile, violent act of degradation and possession on the part of the would-be conqueror, designed to intimidate and inspire fear.”¹⁶

Organizers sought to reform the antiquated rape laws in three significant ways: (1) to make a woman’s previous sexual history inadmissible in a rape trial; (2) to reduce the requirement for witness testimony to prove guilt; and (3) to redefine rape as a crime of violence rather than a sexual act. Traditionally, rape laws had safeguarded

the rights of the accused perpetrator. Now, the movement had to shift the criminal justice focus to protect the victim as well — no easy task.

An important part of this effort was dispelling the myth that the criminal justice system as an institution did not care about victims. In this spirit, new laws began to be enacted that allowed for vertical prosecution of sexual assault cases, whereby the same prosecutor who initially took the case worked with the victim throughout the entire criminal justice process. This relationship provided continuity for the victim and meant she only had to explain what had happened to her once. The prosecutor's control over the court calendar would also help to move the case through the system at a more efficient pace. In addition, the development of new forensic tools for gathering evidence and their admissibility in court, along with the creation of sexual assault response teams (SARTs), enhanced the ability of the criminal justice system to prosecute cases and provide better support to victims.

Reformers also called for training of law enforcement officers, prosecutors and judges to encourage them to respect rape victims and take their accusations seriously. This was particularly true for victims of marital rape, which historically had not been considered a crime. Revising the marital rape laws meant challenging widespread, traditional attitudes that wives were property and that women should provide sex for their husbands regardless of their own desires. Only in the last decade did all states move to make marital rape a crime, although 32 states still protect husbands from being charged in certain circumstances.¹⁷

Major Milestones

The anti-sexual assault movement owes many of its accomplishments to the network of rape crisis centers whose workers became trailblazers and whose facilities were for many years the only places where victims could turn. During the past three decades, rape crisis center staff and volunteers became experts in the sexual assault field as they pushed for legislative and community support for victims and an end to sexual violence. As victim advocates, they used three kinds of social change activities to advance those objectives: (1) participation in public demonstrations to increase public awareness of sexual assault; (2) political lobbying efforts to promote legislation that protected women from sexual assault; and (3) primary prevention programs aimed at eliminating sexual assault from society.¹⁸

Professionals in the criminal justice field also worked to bring about positive change. In the late 1980s, a new wave of prosecutors, many

with backgrounds in victim advocacy, began to fight for more victim-centered legislation such as vertical prosecution. The focus of law enforcement training also shifted to reflect a new sensitivity toward victims.

In addition, major political and legislative events, publications and national studies brought controversial sexual assault issues to the attention of the public and stimulated debate and further action. There have been many milestones along the way, including the following:

1971 — The first rape crisis centers (Bay Area Women Against Rape in Oakland, California and DC Rape Crisis Center in Washington, D.C.) were established. ~ Susan Griffin's book, *Rape: An All-American Crime*, argued that the fear of rape was an everyday part of women's lives.

1974 — Sixty-one rape crisis centers had been established in 27 states, and 39 states were pursuing anti-rape projects. ~ The first victim witness assistance center in the nation opened in California at the Alameda County District Attorney's Office.

1975 — Susan Brownmiller published her landmark book, *Against Our Will: Men, Women and Rape*, condemning rape as a "conscious process of intimidation by which all men keep all women in a state of fear."¹⁹

1976 — The Queens Bench Foundation Study described the five steps a perpetrator follows when committing a rape. This research helped support the efficacy of self-defense training for women.

1977 — The National Coalition Against Sexual Assault (NCASA) was formed by rape crisis centers to create a national voice and opportunities for training and networking. ~ The Women of Color Institute was established to be held in conjunction with every NCASA conference. ~ Rape prevention programs were established at each University of California campus.

1978 — The National Center for the Prevention and Control of Rape was created to support research and develop/assess sexual assault prevention programs. ~ The first rape case against a husband currently living with his wife was brought to trial. ~ The first national feminist conference on pornography and "Take Back the Night" march were held in San Francisco.

1979 — At least one rape crisis center could now be found in every state. ~ The term “marital rape” first appeared in influential books by Diana Russell and Lenore Walker.

1980 — In May, the California Coalition Against Sexual Assault (CALCASA) was founded by the rape crisis centers in California. ~ In October, the California Office of Criminal Justice Planning, Sexual Assault Branch, first received funding to begin supporting rape crisis centers.

1982 — The term “date rape” was introduced in a *Ms. Magazine* article concerning studies of sexual violence on college campuses. ~ Mary P. Koss and Cheryl J. Oros published the *Sexual Experiences Survey: A Research Instrument Investigating Sexual Aggression and Victimization*, the first study to develop a survey capable of reflecting hidden cases of rape and documenting a dimensional view of sexual aggression/sexual victimization.

1984 — The federal Victims of Crime Act authorized state grant funds to compensate crime victims, including sexual assault victims, and also funded community-based programs to provide crisis intervention and counseling for crime victims. ~ The California District Attorneys Association created a committee of prosecutors to address the prosecution of sexual assault cases. ~ The Child Abuse Prevention Training Act, sponsored by California Assemblywoman Maxine Waters, allocated \$10 million for child abuse prevention and intervention services.

1986 — Sexual Assault Awareness Week was established in California to recognize survivors of sexual assault.

1987 — All 50 states had by now enacted rape law reforms. Specialized sex crimes units were made part of police and prosecutors’ offices. ~ The first national study on rape among college students was published, sparking development of prevention education programs nationwide.

1990 — The first significant study on the prevalence of sexual assault of gays and lesbians was published in *Psychological Reports*, focusing on gay and lesbian university students.

1992 — *Rape in America*, the first nationally representative survey of the prevalence of rape, revealed that 14 percent of American women had been raped. ~ The American Medical Association formally

acknowledged the extent and medical relevance of male violence against women and published practice guidelines.

1993 — In a historic resolution, the United Nations proclaimed that rape violated the basic human rights that must be accorded to every citizen of the world.

1994 — CALCASA sponsored the first Color of Violence Conference. ~ The Violence Against Women Act (VAWA) was enacted as the first federal legislation to directly address gender-based crimes. Its landmark provisions intensified federal penalties for rape, contained funding for rape crisis centers, increased the number of police and prosecutors focusing on violence against women, and created college rape prevention programs.

1995 — A national study by the U.S. Centers for Disease Control and Prevention showed an estimated 15 percent rape rate among college women who had been raped since the age of 15. This information underscored the need for prevention efforts at this level.

1997 — California Assemblywoman Kerry Mazzoni sponsored a bill creating Sexual Assault Awareness Month, to be observed in April. This replaced Sexual Assault Awareness Week, which had been established in 1986.

1998 — The U.S. Department of Justice released a report that indicated 18 percent of women have been raped at some time in their lives and that more than half of those victims (54 percent) were under 18 when they experienced their first rape. The report confirmed earlier studies that asserted the majority of rape victims were children and adolescents and reinforced the need for prevention and intervention programs for youth.

2000 — The U.S. Centers for Disease Control and Prevention created the National Sexual Violence Resource Center and the National Sexual Violence Research Center. ~ VAWA II was passed by the U.S. Congress. ~ The Urban Institute released an evaluation of VAWA funding, citing that rape crisis services received less funds than other VAWA programs.

Toward the Future

While much has been accomplished by the anti-sexual assault movement, much remains to be done. In many ways, the silence, myths and misconceptions surrounding rape still exist. The recent focus on domestic violence has made it easier to talk about violence

against women, but there is a genuine need to differentiate sexual violence from domestic violence. Sexual assault currently receives less attention and less public money than domestic violence, and most states do not give sexual assault programs the same priority consideration as those for domestic violence.²⁰

Clearly, there have been significant, positive changes in how victims of rape are treated by law enforcement, the medical community, and the public at large after an assault. However, despite the fact that more than 1,300 sexual assault programs exist across the country, and program funding has expanded, “the availability of services has lagged far behind the pressing needs that [victims] ... face.”²¹ A greater understanding is needed of the immediate and long-term effects of rape (physical, emotional, economical) on victims such as post traumatic stress. Victim services must be increased and must more appropriately meet the needs of an ever-expanding constituency of victims, many of whom have been acutely underserved in the past. This will require new collaboration and sharing of ideas and strategies by rape crisis centers and other community-based programs along with advocates and experts from the medical, social services, business, and education fields as well as government and criminal justice.

As recognition of the need for a more multidisciplinary approach to ending sexual assault grows, the role of rape crisis centers will dramatically expand. Over the years, rape crisis centers have been the catalysts whose vigorous efforts prompted involvement in the anti-sexual assault movement by other stakeholders and forced other agencies and the public to take action in response to sexual violence. This victim advocacy role is giving way to leadership responsibility, as other organizations look to rape crisis centers for expert information and coordination of programs and resources, and as we apply more of those resources to prevent sexual violence from occurring in the first place.

Like all social concerns, the anti-sexual assault movement must respond to new trends, including degendering the issue of rape, involving more men in the movement, and the constant problem of securing adequate financial support. And, the ultimate goal of the movement — bringing an end to sexual assault — still presents serious challenges and a long road ahead. While we can be proud of the movement’s successes to date, there is more than enough work for all who wish to participate in the continuing struggle to end sexual assault.

six key issues

for ending sexual assault

To dream of a world without rape is to dream of indeed a radically different world.²²

The Working Group was charged with developing a blueprint for ending sexual assault — to envision a California without rape. In light of the many complex issues surrounding sexual violence, Working Group members had to first determine which were of most significance for the Strategic Forum Report. They began their deliberations by analyzing the results of the CALCASA “Every Voice Counts” survey, in which rape crisis center staff, along with other multidisciplinary stakeholders, had voiced their opinions on the anti-sexual assault movement and emerging critical issues. The survey revealed several major focus areas for the next few years, among them the need to: (1) increase and improve rape crisis intervention and other services to victims, especially in specific populations; (2) expand training programs for professionals in law enforcement and the judicial, medical, social work, education, and faith communities; and (3) secure adequate prevention and intervention program funding.

After reviewing this data, the Working Group decided to concentrate on six key issues that members felt were crucial to addressing the problem of sexual assault and achieving those objectives. In drafting their recommendations and strategies, Working Group members recognized the need to incorporate the following truths:

- Sexual assault is highly underreported and undertreated. Like an iceberg that conceals most of its deadly mass under water, nearly 75 percent of sexual assaults go unreported. We must change the prevailing attitudes surrounding sexual violence that promote feelings of shame in victims and encourage victims to come forward. *Changing the public perceptions of rape and sexual violence is an essential step.*
- Victim needs are not always being met. A foundation of services and protection has been established upon which we need to build a stronger structure. We must support and sustain those who have been wounded by sexual violence and help these victim/survivors to heal through effective, compassionate services that respect their dignity. *Ensuring multidisciplinary services to facilitate healing from sexual violence is a fundamental requirement.*

- Physical, cultural and linguistic obstacles exist for many victims who seek help. If we are to provide adequate, meaningful services, we must take into account the diversity and special requirements of the populations who need assistance. *Overcoming barriers to prevention, intervention and treatment for underserved populations will be necessary to provide better access to appropriate services for all.*
- Sexual assault does not occur in a vacuum that includes only women and girls. If we are to successfully change attitudes and behaviors, we must make men and boys an integral part of both prevention and treatment programs. *Involving men and boys in the prevention of rape and sexual violence is critical to the success of the anti-sexual assault movement.*
- Too often, victims of sexual assault feel re-victimized by the criminal justice system. While recent changes have made the legal process more sensitive to victims' needs, we must not be complacent where victim rights and safety — and offender accountability — are concerned. *Ensuring responsive, effective criminal justice practices must be a priority.*
- Prevention of sexual assault is essential. To eliminate sexual violence, we must apply effective prevention strategies. Better programs, policies and procedures must be developed to educate both children and adults and encourage new attitudes. *Promoting sexual assault prevention education is key to ending sexual violence.*

After much discussion, the Working Group concluded that these six issues provided the Strategic Forum with common ground and were the most compelling in terms of making a difference for victim/survivors and society. While individual opinions differed as to the exact definition of sexual violence, service need priorities of victim/survivors, and philosophical beliefs about how to affect change, the Working Group arrived at a shared vision based on the issues, recommendations and strategies that follow. Working Group members gave careful consideration to each of the six issues and intentionally did not assign them a priority order. In presenting the issues on an equal plane, the Working Group endorsed the idea that all of these areas of concern must be addressed if services to sexual assault survivors are to be improved and progress is to continue toward ending sexual violence in California.

issue:

Change Public Perceptions of Rape and Sexual Violence

By breaking the silence, I am reclaiming that which was stolen, and reframing that which was horrible and unspeakable.²³

In order to stop sexual violence, there must be a shift in the public perception surrounding rape and sexual assault. This issue presents a dual challenge: first, to change public opinion about the stigma of rape; and second, in the larger context, to shift the social norm that condones violence against women.

Many people in our society do not want to talk about rape, even though it can happen anywhere, any time, to anyone. Many myths about rape still prevail. Some in our communities think rape only happens to other people, or only to certain types of women. Too often, they blame the victim for teasing, for wearing suggestive clothing, or for meaning “yes” even though she said “no.” It should come as no surprise that three out of every four victims of rape do not report the crime to the police. We must educate the public about the facts: Any woman can be raped, and most rapes are committed by someone the victim knows. Men rape women to exert power and control. The rapist is the criminal, not the victim.

Men who rape women come from all races, ethnicities and social classes. But they share a common negative, demeaning attitude toward women that enables them to justify their violent behavior. Correspondingly, many aspects of our culture — music, television and movies, video games, pornographic literature — openly condone violence against women. Negative opinions about women (for example, that they are inferior to men or should be treated as sexual objects) still prevail in some circles. The National Advisory Council on Violence Against Women holds that commonly accepted attitudes and beliefs about traditional gender roles and masculinity “give rise to men’s abusive behavior toward women.”²⁴ Societal tolerance of these attitudes, coupled with a general indifference toward violence, allows this kind of behavior to continue.

The safety and well-being of women and girls in California is paramount. However, the focus must shift from what women can do to protect themselves (using the buddy system, staying in lighted areas at night, carrying mace, etc.) to the broader goal of preventing and ending sexual assault. Communities must recognize sexual assault as a serious public health threat that causes physical as well as devastating emotional

and psychological damage. And, while we fight to lift the stigma associated with being raped, we must advocate for cultural values that support equal relationships, respect for women, and healthy sexuality.

Social marketing can help engineer this behavioral change. The anti-sexual assault movement must model its efforts after other successful public crusades that inspired new attitudes such as the campaigns to stop smoking and eliminate drinking while driving. Engaging influential community and cultural institutions as partners in this process will make a significant difference. The media should be at the forefront in communicating the message that sexual violence is unacceptable. The faith community and the schools have unique opportunities to encourage this shift in behavior, especially for children and young adults. Businesses, advertisers and entertainment agencies can use their widespread influence to promote positive attitudes toward women and girls and the inappropriateness of violence in relationships. In turn, we as consumers must encourage corporate responsibility by refusing to buy products or patronize merchants who devalue women or perpetuate sexual violence.

Legislation remains a powerful ally against sexual assault, through continued adoption of new laws that protect women's safety and hold perpetrators accountable. In that spirit, a serious legislative commitment to ending sexual violence must produce a national victim's bill of rights. Recent horrors in Bangladesh and Bosnia have raised the world consciousness about sexual violence. Rape is now being prosecuted as a war crime, a huge step in continuing the effort to consider sexual assault as a human rights issue. We must address the many forms of sexual violence worldwide, including rape as a part of cultural ritual; genocidal rape; sexual trafficking of men, women and children; sexual torture and slavery; and prostitution. Changing the perception of rape at an international level will lend added credibility to the problem.

Recent studies have shown that many victims of sexual assault "feel isolated and alone."²⁵ Promoting new public attitudes toward rape and sexual violence also means letting victims know there is somewhere to turn. In order to put an end to sexual violence, we must improve community responses to victims, expand victim support systems, and strengthen sanctions against perpetrators. Moreover, there must be public acceptance of the ideas that rape is not too painful to talk about and that victims are not to blame. Society must acknowledge the potential long-term, cascading effects of rape on victims and the need to provide effective, compassionate services. Victims must be encouraged to come forward, not only to prosecute their perpetrators, but to help themselves and take back their lives.

Until we change public perceptions about rape and sexual violence, there can be no true progress in putting a stop to these crimes. Changing attitudes is prerequisite to changing behavior.

recommendations:

Change Public Perceptions of Rape and Sexual Violence

Recommendation 1: Present sexual violence as a human rights issue.

Strategies:

1. Support U.S. government endorsement of the United Nations Convention on the Elimination of All Forms of Discrimination Against Women.
2. Develop a set of resolutions based on the tenets of the Declaration of Independence, International Declaration of Human Rights, and U.S. Constitution.
3. Request and secure mandates from the United Nations, President of the United States, and Governor of California declaring sexual violence a human rights issue.
4. Promote awareness of the California Victim's Bill of Rights.
5. Support passage of the National Victim's Bill of Rights.
6. Partner with community leaders to promote recognition of sexual assault as a human rights issue at the local level.
7. Work to elevate the status of women to be equal to that of men.
8. Encourage local governments to make a policy statement opposing sexual assault.

Recommendation 2: Market sexual violence prevention and awareness campaigns.

Strategies:

1. Conduct market research to better understand which prevention messages and delivery strategies are most effective.
2. Develop culturally appropriate media campaigns (i.e., responsive to local needs and suitable for all ages) that promote:
 - Discussion of myths and facts about sexual violence
 - Elimination of shame surrounding victims of sexual violence
 - Positive social norms (e.g., healthy relationships and respectful social interactions)
 - Understanding of the social, cultural and financial impact of sexual violence
 - Awareness of the consequences of sexual violence for perpetrators
3. Launch multimedia campaigns that include a recognizable slogan and are based on market research regarding effective delivery strategies.

4. Urge the faith community to challenge messages, images and products that demean women and promote sexual violence.
5. Encourage victims of sexual assault to speak at public forums to increase public awareness; identify and partner with high-profile spokeswomen and spokesmen to deliver sexual violence prevention messages.
6. Develop a public education campaign to raise awareness about the prevalence and effects of sexual violence as portrayed in the media.
7. Persuade private foundations to make the elimination of sexual violence a funding priority.
8. Evaluate the effectiveness of public awareness campaigns.
9. Petition the U.S. Surgeon General to declare trauma related to rape and sexual violence a national health issue.

Recommendation 3: Challenge the media, corporations and advertisers to eliminate programs or products that contribute to social norms perpetuating sexual violence.

Strategies:

1. Call for media and corporate responsibility to produce messages, images and products that portray men and women in nonviolent, positive terms.
2. Challenge advertising strategies and philosophies that exploit and objectify women's bodies to sell products.
3. Mobilize consumers to take action in response to companies that promote sexual violence (e.g., boycotting their products).
4. Develop and deliver media training programs on accurate reporting of sexual assault, with a focus on nonstranger (acquaintance) rape.
5. Confront the sources of incorrect or inappropriate media reporting of sexual violence; develop a statewide media advisory group.
6. Improve the response of rape crisis centers and other agencies to media inquiries/coverage of issues and incidents involving sexual violence (e.g., provide crisis communication skills training and "action alerts" on how to respond to the media).
7. Publicly acknowledge the media and companies that do not perpetuate sexual violence against women.

issue:

Ensure Multidisciplinary Services to Facilitate Healing from Sexual Violence

A coordinated community response to ... sexual assault is a complex set of interagency relationships, interlocking behaviors, and the commitment of many people. It does not happen in a day, or even in a few months, and it is difficult to maintain without steady attention and support.²⁶

Studies have shown that the most significant way to reduce the effects of sexual assault trauma is to intervene as soon as possible and help the victim regain self-esteem and control of her life. This healing process is also critical to restoring relationships between survivors of sexual assault and their spouses, children, families, and friends.

Historically, however, essential services for victims of sexual violence have been limited and underfunded. For decades, the support system consisted of rape crisis centers where women volunteered to help other women, with little or no public resources and virtually no moral support outside the small nucleus of the anti-sexual assault movement. As public opinion toward sexual violence began to change in the 1970s and 1980s, early attempts at coordination of services focused on integrating the efforts of rape crisis centers and the criminal justice system. More recently, public awareness has increased regarding the complexity and impact of sexual assault. Forward-thinking communities have begun to recognize the need for comprehensive, coordinated services that include not only victim service providers and law enforcement, but reflect a much broader support constituency comprised of medical providers, the faith community, business, social service agencies, and other community-based programs.

This holistic attitude was reinforced by the 1994 Violence Against Women Act (VAWA), which tied federal funding eligibility to requirements that nonprofit, nongovernmental victim service agencies collaborate with the criminal justice system to develop coordinated responses to violence against women. But despite the evidence that the goals of VAWA — namely, to further the well-being of women and hold perpetrators accountable — are best attained through a coordinated, multidisciplinary community response, this approach remains widely underutilized and underfunded. Many victims still cannot obtain appropriate, comprehensive services. Many populations of victims have been forgotten or ignored:

the disabled, the elderly, immigrants, Native Americans, and many minorities and underserved communities of color. Victims not only need coordinated services to address a wide range of problems and concerns, but they must know what services are available and how to access them.

To provide this level of service, the organizational capacity of rape crisis centers and prevention programs must be strengthened. What began as volunteer work is now a credible vocation with increasing demands for talented, trained professionals. In addition, cross-training is essential for all agency personnel who provide services to victim/survivors to facilitate comprehensive, coordinated provision of care. Collaborative partnerships between rape crisis centers, social service and government agencies, and other community-based programs must be encouraged to ensure widespread support and access to a broad range of effective, culturally competent services. This will require significant increases in funding for sexual assault programs and new procedures regarding use of existing funds such as those made available by the California Victims of Violent Crime Act, so more victims will have access to support services.

Creating this kind of coordinated community response requires a dual focus. We must support those who have been victimized — and their families — while we intensify our efforts to stop sexual assault. For until we put an end to sexual violence, there will continue to be a stream of victims needing immediate services. Even if we could stop rape today, we would still need to respond to victims who have never received treatment or those who may need assistance resolving the trauma, reinforcement of their self-esteem, and/or other support services. Research has shown that many victims require additional help in the aftermath of a sexual assault at critical points in their lives — five years, 10 years, 20 years after the incident; the trauma does not just go away. Thus, we must envision and develop a future continuum of care even as we work to ensure that victims' needs are taken care of today.

Providing services to victims of sexual violence goes to the heart of the anti-sexual assault movement. How society responds to those who have suffered the trauma of a sexual assault and the type of care we provide are paramount to the healing process. Ensuring comprehensive services for victims also strengthens the overall effort to end sexual assault. Working with survivors provides service professionals with critical information and insight that they can use as part of ongoing prevention efforts to educate others about the experience of sexual assault. Intervention thus becomes a form of prevention, whereby we can lessen the vulnerability of victims to future assault and shift the societal norm that condones sexual violence.

This issue addresses our concern and care for victims and thus our very motivation in undertaking the Strategic Forum project. We believe that rape degrades the human soul and that the trauma of sexual violence can often lead to many other social problems such as alcoholism, homelessness, substance abuse, prostitution, and poverty. Society has an obligation to respond to the pain and lessen the impact of sexual assault. Only by providing coordinated, multidisciplinary services can we facilitate this kind of healing and empower survivors of sexual violence to reclaim their lives.

recommendations:

Ensure Multidisciplinary Services to Facilitate Healing from Sexual Violence

Recommendation 1: Develop comprehensive, coordinated services for victims.

Strategies:

1. Assess needs and provide appropriate services to facilitate healing of all victim/survivors (e.g., cultural and linguistic needs, special needs of people with disabilities).
2. Establish culturally competent service delivery standards.
3. Fund, expand and increase the number of sexual assault response teams (SARTs) throughout the state.
4. Encourage victim support services at crime scenes when and where appropriate.
5. Expand the capacity of rape crisis centers to link with other service providers (e.g., domestic violence programs; victim witness assistance centers; and drug and alcohol treatment, mental health, and child abuse treatment services).
6. Increase funding for rape crisis centers to provide sexual assault victim advocacy within the criminal justice system and in conjunction with local SART efforts.
7. Enable rape crisis centers to access Victims of Crime Act funds in order to assist greater numbers of sexual assault victims.
8. Build and enhance cooperative relationships between victim witness assistance centers and rape crisis centers.
9. Provide services to secondary victims (e.g., family members and partners).

Recommendation 2: Provide professional training in order to strengthen comprehensive, coordinated care for victims.

Strategies:

1. Educate and provide cross-training for professionals who provide services to victims.
2. Create multidisciplinary training teams with representation from such groups as rape crisis centers, victim witness assistance centers, law enforcement, courts and probation, corrections and parole, prosecution, medical providers, mental health professionals, disability advocacy organizations, and victim/survivors.
3. Provide support services for professionals and volunteers who work with victim/survivors.

Recommendation 3: Build the professional and organizational capacity of rape crisis centers.

Strategies:

1. Fund rape crisis centers to access ongoing, comprehensive organizational training and development.
2. Upgrade the technological capacity of rape crisis centers (e.g., phones, voice mail, computers, email, Internet access, and fax machines).
3. Recruit and retain qualified employees with competitive salary and benefit packages.
4. Provide support and opportunities for leadership development for all rape crisis center personnel, with a special focus on underrepresented populations.
5. Encourage recognition to honor those who work in the sexual assault field.

Recommendation 4: Promote awareness to all Californians of the range and availability of sexual assault services.

Strategies:

1. Create and provide “maps” of community services for sexual assault victims and their families to help them access available services.
2. Increase public and victim awareness of the different kinds of services available to sexual assault victims to meet specific needs, depending on the type of sexual violence they have experienced.
3. Encourage service providers to work with local community groups on ways to promote information about available services in their communities.

Recommendation 5: Build collaborations to address sexual violence.

Strategies:

1. Build alliances with other anti-violence movements, including domestic violence and youth violence.
2. Initiate public/private partnerships to generate funding, in-kind services, expertise, and resources.
3. Encourage government agencies to increase resources for community-based services (e.g., contracts with rape crisis centers).
4. Develop operational protocols and training programs for SARTs.
5. Establish sexual violence prevention coordinating councils that represent the diversity of local communities.
6. Fund research and develop evaluation criteria to assess the effectiveness of collaborative models.
7. Invite leaders from the faith, education, business, and social service communities as well as elected and appointed officials and members of the California Board of Control to join local collaborative efforts.
8. Support policy decisions by the California Board of Control that enable more victims of sexual assault to be eligible to receive funds.

issue:

Overcome Barriers to Prevention, Intervention and Treatment for Underserved Populations

Few [victim service] programs tailor their services for certain populations, despite the fact that some, or many, of their clients belong to this population ... Using culturally specific or problem-specific strategies is crucial ... ²⁷

Despite the fact that sexual assault affects people from every socioeconomic and ethnic background, lack of funding has left certain populations notably underserved with regard to prevention, intervention and treatment. It is imperative that services be made available to all victim/survivors, not just those in the mainstream of society. Significant barriers to support services exist in many communities. In an atmosphere where the social stigma of rape already makes it difficult for victims to come forward, these obstacles present additional impediments that not only discourage victims from seeking help, but often make accessing services impossible.

Underserved populations include communities of color, faith and ethnicity; immigrants and undocumented residents; Native Americans; and members of the Lesbian, Gay, Bisexual, and Transgendered (LGBT) communities. Other groups with special needs that also encounter barriers to prevention, intervention and treatment services include the elderly, people with disabilities, and individuals with mental illness or substance abuse disorders.

Studies have shown that the most common barriers reported are inadequacy of available services, norms or beliefs that inhibit victims' ability to access services, and insufficient means to access services. Specifically, barriers to obtaining services include: communication and language, lack of culturally appropriate services, geographic isolation from services, inadequate transportation, prejudice, cultural differences, social tolerance of violence in families, fear of the "system," and poverty.²⁸

Some barriers are particularly harmful because perpetrators use them to reinforce their power over victims. The underserved are often much more vulnerable, as evidenced by immigrant women who have

been raped, but may not seek assistance for fear of deportation. Many populations are fearful of authority or uncomfortable requesting services at large, impersonal agencies. Other individuals from underserved communities maintain that the system will not believe them or take them seriously, as when authorities assume that people with disabilities could not possibly be rape victims because they are somehow “undesirable.” People with severe disabilities face significant communication and attitudinal barriers to obtaining help following a sexual assault. Lesbians, gays, bisexuals, and transgendered individuals, who have been particularly marginalized, are frequently reluctant to prosecute their perpetrators because disclosure could lead to embarrassment, job loss or social isolation.

While women have traditionally been blamed for their own rapes, they have been even further discredited if they were women of color. Too often, victims from communities of color have not reported the crime because they were not encouraged by their own communities and did not feel supported by the agencies and authorities they perceived to be mostly white.

Threads of inclusiveness that have been woven into the sexual assault field must be strengthened into the overall fabric of service response to better reflect cultural and community-specific needs. There is a general lack of quality resources for victims of sexual violence, and even less funding is available for those with special service requirements. Sexual assault prevention, intervention and treatment contain fundamental social services that must be made available to every victim. It is unconscionable that some segments of the population do not have access to competent, comprehensive services. We must work to ensure that all sexual assault survivors who choose to seek services can do so in dignity and comfort.

In order to effectively respond to all victims of sexual assault, we need to tailor prevention, intervention and treatment services to specific populations, ensure the placement of appropriate services in historically underserved communities, and increase awareness of these services by marketing their availability to those who need them. We must also make sure that service providers represent the cultural diversity of the communities they serve. In addressing this issue, we must recognize that some conventional models of intervention and support are not appropriate for all populations and must be modified to meet local community needs. The diversity of California as a state requires that services reflect and adapt to many different populations. A “one size fits all” approach will not work.

recommendations:

Overcome Barriers to Prevention, Intervention and Treatment for Underserved Populations

Recommendation 1: Increase access to comprehensive, appropriate, community-based services for underserved populations, including communities of color, faith and ethnicity as well as immigrants, undocumented residents and Native Americans.

Strategies:

1. Provide interpreters and/or language services for non-English speaking victims.
2. Translate all awareness and training materials into multiple languages and ensure cultural accuracy.
3. Conduct community outreach to educate underserved populations about sexual violence and available services.
4. Develop standards for cultural competence and infuse them into services, curricula and staff training.
5. Create opportunities to include members of underserved communities in planning and service delivery.
6. Encourage the recruitment and professional development of members of communities of color and other underserved populations to work with victims and serve on agency boards.
7. Establish partnerships between rape crisis centers and other local service organizations that serve communities of color and other underserved populations.
8. Conduct research to better understand the general service and support needs of communities of color and other underserved populations.

Recommendation 2: Increase access to comprehensive, appropriate, community-based services for members of the Lesbian, Gay, Bisexual, and Transgendered (LGBT) population.

Strategies:

1. Conduct research to better understand the general service and support needs of LGBT victims.
2. Respond to the service and support needs of LGBT victims, including those who live in suburban and rural areas.
3. Educate LGBT groups about the availability of services specific to their needs.
4. Develop prevention and treatment programs and materials that focus on the unique needs of transgendered people.
5. Provide training within service organizations to promote a supportive environment for LGBT professionals and volunteers.
6. Actively recruit within LGBT communities for LGBT participation as rape crisis center board members, staff and volunteers as well as representation on sexual violence community advisory councils.
7. Establish partnerships between rape crisis centers and other service organizations that serve LGBT communities.

Recommendation 3: Increase access to comprehensive, appropriate services for people with disabilities, including those with severe disabilities.

Strategies:

1. Conduct research to better understand the general service and support needs of victims with disabilities.
2. Create prevention, intervention and treatment programs to meet the diverse needs of people with disabilities; deliver services in a variety of settings to ensure access and safety.
3. Inform people with disabilities and their families about the availability of services.
4. Develop and enforce standards for conducting an investigation of sexual violence against people with disabilities.
5. Involve advocacy groups for people with disabilities in the planning of services and service delivery.
6. Train professional service providers to work sensitively and appropriately with people with disabilities.
7. Advocate for comprehensive accountability on the part of agencies that serve victims with developmental disabilities, including board and care facilities, law enforcement, SARTs, rape crisis centers, and regional service centers.
8. Educate judges and criminal justice officials about the unique nature of sexual violence against people with disabilities.
9. Build partnerships between rape crisis centers and other service organizations that serve disabled communities.
10. Incorporate appropriate expert testimony in the prosecution of cases involving victims and/or witnesses with disabilities.
11. Advocate for full compliance with and full funding of the Americans with Disabilities Act (ADA).

Recommendation 4: Secure funds to support increased access to comprehensive, appropriate services for victims from all underserved populations.

Strategies:

1. Use resources such as Community Development Block Grants to support sexual assault services for underserved populations.
2. Solicit support from the corporate community to forge public/private partnerships.
3. Promote research to better understand the service needs of underserved communities.

Recommendation 5: Foster positive attitudes and behaviors to eliminate prejudice that creates barriers to services for underserved victims.

Strategies:

1. Increase public awareness about the prevalence of sexual violence against members of underserved populations, especially people with disabilities.
2. Promote dialogue between government agencies and other organizations charged with providing services to victims and underserved populations.
3. Recruit representatives from underserved populations to work with service agencies and include them in service decisions; encourage their participation on community advisory boards.
4. Develop and implement standards of cultural competence for all service providers.

issue:

Involve Men and Boys in Prevention of Rape and Sexual Violence

Masculinity ... [has become] identified with dominance, aggression and lack of emotion ... History suggests that it is possible to encourage a different kind of masculinity, a nonviolent masculinity.²⁹

The subject of involving men and boys in the prevention of rape and sexual violence is significant because this issue addresses a serious gap in the work that has been done over the past three decades to end sexual violence. The anti-sexual assault movement was born out of the feminist movement at a time when no one spoke out about rape. It was women who first talked about sexual violence, and it was women who were there for each other in time of crisis. The only male role in the process was that of the perpetrator. Slowly, however, the necessity and legitimacy of involving men in the movement in a more positive capacity began to evolve.

While most sexual violence against women is still committed by men, many in the field agree that we must stop limiting our focus to blaming men for sexual assault and more fully enlist men and boys in prevention efforts. Indeed, there is a new and growing openness among those who work in rape crisis centers to bring men into the movement and consider them as prevention partners. Not only do many women believe that men must take responsibility for sexual assault and become involved in finding solutions, but many men also recognize the problem and want to get involved.

Part of this new approach includes education — developing healthy attitudes toward women, sex and relationships among men and boys at an early age. We must encourage men to acknowledge and take the problem of rape seriously, and we must implement effective programs to assess and provide treatment for those males — especially young men and boys — who show an inclination toward violence.

In order to change the social norm and make sexual violence unacceptable, we need to change male thinking and behavior. In our culture, masculinity comes from socially constructed behaviors

that are commonly believed to be appropriate and accepted for men: to be masculine, not feminine (and not homosexual); to be a “big wheel” by competing and winning in business, sports or war; to be a “sturdy oak” and not show feelings; or to be aggressive, either as a risk taker or fighter. Too often in our society, men prove their masculinity through sexual violence. Thus, we must teach men new ways to be masculine.³⁰

Bringing this transformation about may not be as difficult as once perceived, since traditionally held beliefs about what it means to be a man are changing. Many forward-thinking men in this country are now comfortable adopting a new sensitivity wherein it is permissible to recognize and display feelings. Other men have taken on roles as caregivers and partners in family responsibilities, as single parents, and as pioneers in jobs that were once dominated by women such as nurses and flight attendants. Because the role of men in society has changed significantly and continues to shift, involving men in the anti-sexual assault movement will also help to change societal attitudes toward ending sexual violence. We must encourage men to not only partner with women in the development and implementation of sexual assault prevention programs, but to initiate and expand programs created by men for men. Experts point out “there is no doubt that the education of males ... will be better achieved with the inclusion of male educators.”³¹ In addition, some research indicates that prevention activities and workshops are most effective when conducted in an all-male format, because men are more likely to talk more openly and hold each other accountable when women are not present.³²

It is clear that we must involve men and boys as meaningful partners in our efforts to prevent sexual violence. Men can help move the message forward. Where traditionally there have been only women’s voices, we must have men’s voices among those demanding prevention and an end to sexual assault. History teaches us that no societal issue has applied only to one gender, and women cannot eradicate sexual violence alone. While the majority of sexual assault victims are women, rape also impacts the vast majority of men who are not rapists. Husbands, partners, fathers, brothers, and male friends must deal with the cruel reality of rape and its aftermath. And men who have themselves been assaulted face the stigma of coming forward. What we do to change public perception of rape for women must likewise apply to male victims.

Involving men and boys in sexual assault prevention not only makes common sense, but gives greater strength and credibility to the anti-sexual assault movement. Ending sexual violence will take the concerted effort of both women and men.

recommendations:

Involve Men and Boys in Prevention of Rape and Sexual Violence

Recommendation 1: Increase male involvement in sexual violence prevention.

Strategies:

1. Enlist active participation of well-recognized males (e.g., athletes, elected officials, entertainers, businessmen) in sexual violence prevention efforts.
2. Conduct outreach to traditionally male civic and fraternal organizations (e.g., Elks, university fraternities) to obtain support and encourage men to speak out against sexual assault.
3. Recognize and encourage effective sexual violence awareness programs created by men and aimed at men.
4. Partner men and women in the delivery of prevention programming and treatment.

Recommendation 2: Develop and implement sexual violence prevention programs for men and boys.

Strategies:

1. Develop gender- and age-appropriate sexual assault prevention curricula for men and boys.
2. Use effective peer education and peer discussion group models.
3. Partner with the leadership of youth organizations to deliver sexual violence prevention programs to boys.
4. Include sexual violence prevention training for males in leadership roles in youth organizations (e.g., athletic coaches, scout leaders, youth ministers, band directors).
5. Incorporate sexual assault prevention messages into sports programs, school clubs and community programs serving boys.
6. Develop sexual assault prevention programs for men and boys who are in juvenile and adult detention, correctional or transitional facilities, or on probation or parole.

Recommendation 3: Develop assessment tools and intervention treatment programs for boys who exhibit sexually violent risk factors or have been sexually assaulted.

Strategies:

1. Partner with the American Association of Sex Offender Treatment Providers, Center for Sex Offender Management, and other professionals to develop and validate diagnostic assessment tools.
2. Identify, develop and validate effective sexual assault intervention and treatment models.
3. Develop and fund interventions and treatment for juveniles identified as sex offenders.
4. Establish a comprehensive resource database of intervention treatment programs and make this information available to parents, legal guardians, schools, the criminal justice system, mental health agencies, and community-based organizations.

issue:

Ensure Responsive, Effective Criminal Justice Practices

The exact prevalence of rape and sexual assault is difficult to determine because this crime is so underreported. In fact, many experts believe that rape is the most underreported violent crime in the United States.³³

In the aftermath of a sexual assault, where does the victim turn? If she chooses to officially report the incident, she will come into contact with the criminal justice system, which should provide an objective, legal process by which she can seek redress for the crime. Historically, however, victims have felt hesitant about coming forward out of fear that the criminal justice system will neither respect them nor protect them.

The criminal justice system has a legal and moral obligation to respond to victims of sexual assault on behalf of society. That response must be both fair and rigorous. The National Advisory Council on Violence Against Women recently proclaimed, "All violent crimes against women ... must be taken seriously and responded to as threats to the safety of the entire community."³⁴ The criminal justice system plays a dual role in providing services to victims: (1) to ensure victim safety; and (2) to prosecute and hold perpetrators accountable. First and foremost, the system must be effective in keeping the victim safe, or the perpetrator will assume that he can commit or repeat the crime. Simply put, violent behavior must have consequences.

During the past three decades, significant changes have been made in the criminal justice system, which traditionally safeguarded the rights of suspected perpetrators and did not always extend equal protection to sexual assault victims. Criminal justice agencies can take a leadership role in this effort, as evidenced by California district attorneys who, working as strong advocates to advance the legal status of victims, have been at the forefront of legislative change. We need to build upon the positive platform created by recent enhancements of the handling of rape cases. These include such things as specialized sex crime units and the enactment of new rape laws, including vertical prosecution and elimination of witness testimony to prove guilt, all of which shifted the focus to include protection of victims' rights.

To have the system function optimally, we must encourage all criminal justice professionals, including police officers, judges, prosecutors, and those who work in prisons as well as parole agencies and probation departments, to improve the response to victims. Appropriate, compassionate action by the first responder to a rape report lays a foundation upon which successful prosecution and victim recovery can be based. Adopting a victim-centered philosophy will ensure that victims are the top priority. We must avoid making women feel as though they are being re-victimized by the very system that should protect them. Treating victims with dignity and respect will alleviate their misgivings about reporting the crime and their fear of being blamed for causing the assault.

Victim-centered services must also ensure that women who have been raped have access to a rape crisis sexual assault victim advocate at each stage of the criminal justice process and that advocates have sufficient basic legal knowledge. We must also promote better coordination between victim/witness consultants and rape crisis staff in responding to victim needs. In addition, we must expand training programs for criminal justice professionals to improve their skills and knowledge about sexual assault and their ability to work effectively and compassionately with victims. Initiating new, more effective programs to monitor convicted sex offenders will increase the system's capacity to hold perpetrators accountable and provide victims with peace of mind. The ability of crime labs to utilize new forensic resources and technology must also be increased. These enhancements will require more funding for law enforcement, probation departments and parole agencies — a financial commitment to victim safety and well-being.

Part of the healing process from sexual violence can be found in prosecution. Victims are entitled to have the system work for them, and they should not have to question whether they will receive help. Victims must believe that justice will be served, for then they will be more likely to come forward and better able to get on with their lives. Above all, victims must be assured that they will not be re-victimized by the system. Insisting on a victim-centered philosophy connects this issue to other key Strategic Forum priorities, including providing improved victim services, changing public perception about rape, and overcoming barriers to services for many victims.

Promoting victim involvement in the criminal justice process is crucial to helping prosecutors, judges, and probation and parole officers hold perpetrators accountable for sexual assault and to preventing subsequent sexual violence and even murder. Having victims become a viable part of the system will go a long way toward safeguarding lives and strengthening our efforts to end sexual violence. An effective, responsive criminal justice system can play a central role in “building ... consensus that violence against women will not be tolerated.”³⁵

recommendations:

Ensure Responsive, Effective Criminal Justice Practices

Recommendation 1: Support adoption of a victim-centered philosophy throughout the criminal justice process.

Strategies:

1. Propose and enact legislation that promotes victim safety such as emergency funds for relocation.
2. Propose and enact legislation protecting sexual assault victims in the workplace when they participate in the criminal justice process, including all court proceedings, preparation for proceedings, and participation in other court events such as obtaining protective orders.
3. Enforce the law (California Penal Code, section 679.04) that victims have the right to victim advocacy during all stages of the criminal justice process, including contact with law enforcement and both the prosecution and defense attorney or their representatives, and during all court proceedings.
4. Safeguard the sexual assault victim/counselor privilege (California Evidence Code, section 1035.4), including confidential communication and documentation, to ensure its protection under all circumstances and at all stages of the criminal justice process.
5. Work to ensure that all victims of sexual assault are informed of their rights as a crime victim as set forth in the Victim's Bill of Rights.
6. Enact a statewide policy to provide emergency housing for sexual assault victims.
7. Advocate for legislative amendments to increase mandated training for all peace officers responding to and investigating sexual assault cases.
8. Fund vertical prosecution of all sexual assault cases.
9. Encourage victim/witness assistance centers, rape crisis centers and other victim advocacy groups and organizations to establish protocols regarding victim advocate involvement and presence within the criminal justice system.
10. Expedite payments to mental health professionals and other service providers by the California Board of Control through their Victim Compensation Fund, thus encouraging more therapists and counselors to provide services to sexual assault victims.
11. Encourage law enforcement agencies, including probation and parole, to coordinate victim support services with victim advocacy groups.
12. Explore new and adequate sources of funding for sexual assault evidentiary exams.

Recommendation 2: Improve the criminal justice system's capacity to identify and prosecute sex offenders.

Strategies:

1. Explore and incorporate emerging technologies that could assist in the prosecution of sexual violence cases.
2. Increase funding to law enforcement agencies that are now mandated to analyze sexual assault kits within two years of the commission of crimes.
3. Secure additional funding for crime lab and forensic resources, thereby increasing the capacity of crime labs to conduct forensic testing, including that of drug-facilitated rape.
4. Increase the availability and use of forensic tools in the prosecution of sexual violence cases.
5. Encourage combination and regionalization of crime labs and crime lab services to more efficiently and effectively utilize their expertise and resources.
6. Provide specialized DNA training for law enforcement and professionals.
7. Utilize culturally competent expert testimony to dispel myths and misconceptions about the crime of sexual assault and sexual assault victims.
8. Develop a database of expert witnesses competent in areas that include medical issues, rape trauma syndrome, forensic evidence, and underserved populations.
9. Employ managerial strategies to recruit and retain dedicated and highly trained individuals for sex crimes units.

Recommendation 3: Enhance training for all professionals working in the criminal justice system.

Strategies:

1. Advocate that the California Judicial Council and Administrative Offices of the Court require and provide training about sexual harassment, elimination of bias (including sexual orientation and gender bias), and sexual violence to judges and other court personnel.
2. Coordinate multidisciplinary training programs through representative agencies.
3. Develop, enhance, maintain, and implement a multidisciplinary process to create training curricula.

4. Develop protocols and provide training for coordinated responses to sexual assault on Indian reservations and territories in cooperation with tribal police, law enforcement and prosecution professionals.
5. Secure adequate funding to enable criminal justice and tribal professionals to attend training.
6. Encourage law schools to develop and implement curricula about sexual assault, including DNA and other forms of forensic evidence.
7. Require training for victim advocates who are participating in the criminal justice process, including basic rules of evidence, discovery, confidentiality, and advocacy conduct in the courtroom.

Recommendation 4: Improve procedures to monitor and improve offender accountability.

Strategies:

1. Mandate and fund probation departments and parole agencies to develop specialized protocols and risk-assessment procedures for sex offenders to determine appropriate levels of offender supervision.
2. Mandate that courts be notified when sex offenders commit substantial new violations of their condition of probation or parole.
3. Develop specialized probation and parole units that carry smaller caseloads in order to provide appropriate supervision levels to all convicted sex offenders.
4. Identify and validate treatment programs for sex offenders.
5. Conduct a comprehensive analysis of existing legislation on sexual assault to strengthen current laws and determine needs for additional legislation.
6. Enact legislation that establishes a California Sex Offender Management Board.

Recommendation 5: Decrease the number of sexual assaults by and against people who are incarcerated in prison or in jail.

Strategies:

1. Conduct research to discover the extent to which sexual assault incidents take place in prison and the circumstances under which they occur.
2. Collaborate with prison management to develop policies and procedures modeled on the current SART response to provide up-to-date forensic examinations, support from local sexual assault victim counselors, and reporting mechanisms that will not further risk the safety of incarcerated victims.
3. Develop and implement training programs for prison personnel designed to help change the culture of violence in prisons that contributes to sexual assault.
4. Increase public and service provider awareness of the intervention and treatment service needs of this population.

issue:

Promote Sexual Assault Prevention Education

To end sexual violence, we must invest in prevention education programs as part of a multifaceted approach designed to inform and effect change.³⁶

The anti-sexual assault movement initially focused on addressing the immediate needs of victims. As services expanded to include prevention, it became apparent that although the majority of perpetrators were men, most of the male population refused to acknowledge the depth of the problem of rape or become involved in efforts to end sexual assault. Thus, early attempts at prevention programming concentrated on risk reduction strategies and self-defense workshops for women, placing the burden on women to affect behavioral change.

We must now do more than simply put a band-aid on the problem of sexual assault. Both the movement and the public are now positioned to invest more energy into a broader application of prevention strategies directed at both men and women — strategies targeted at children, youth and adults in all educational settings, through the schools and community-based programs. Sexual assault prevention education is the key to changing attitudes and changing behavior. The issue of prevention education goes to the heart of preventing sexual violence in our society.

Directing sexual assault prevention education toward youth is especially critical, since young people make up the largest percentage of victims and a large percentage of perpetrators. Fifty percent of victims are females between the ages of 16 and 19, while 80 percent are females under age 30. Nearly one-fifth of all juvenile sex offenders are males under the age of 18, and nearly 60 percent of perpetrators are males under age 30.³⁷ Reaching out to this audience will prove challenging, given the influence of negative media messages, lack of positive relationship models, and general public indifference to violence (especially violence against women). Changing generations-old cultural attitudes toward women, sex and masculinity that condone male aggressiveness and female passivity and put women at risk will not be easy. But it must be done.

Sexual assault prevention education will succeed by using a multifaceted approach to address prevention needs on several levels. First, primary prevention programs and policies must be designed and delivered to stop sexual violence from ever occurring. Secondary prevention programs should be used to identify those individuals who have a higher risk potential for violent behavior so that intervention steps can be taken before

an incident occurs. Third, tertiary prevention, intervention and education programs need to be made available for victims and perpetrators where violence has already occurred to prevent further violence.

Our schools and communities have important roles to play in providing prevention education. Public and private kindergarten, elementary, and secondary schools can be prime facilitators. However, because all young people are not enrolled in school, there is a pressing need for community programs sponsored by faith organizations, youth agencies and sports organizations. Reaching young men and women at our colleges and universities is particularly critical, since the majority of these students fall into the most vulnerable age brackets for victims and perpetrators. Prevention programs must address the serious problem of sexual assault on campus, especially drug- and alcohol-facilitated rape. Rape crisis centers should partner with other community-based organizations to help them incorporate prevention education into programs for a broad range of audiences, including families, seniors, people with disabilities, incarcerated youth and adults, immigrants, the homeless, and many other underserved segments of the population.

The Kaiser Family Foundation recently published results from its *Sex Education in America: A View From Inside the Nation's Classrooms* survey, which revealed that 97 percent of parents in this country want sexual assault prevention included as part of the sex education curriculum. However, only 59 percent of students reported receiving this information at their school.³⁸ We must recognize the need for prevention education and take advantage of this shift in attitude and new openness to sexual assault prevention programming. We must actively involve teachers, administrators, parents, and students in this enterprise.

In 1984, the California Legislature allocated \$10 million for primary prevention activities under the Child Assault Prevention Program, to be administered through the Office on Child Abuse Prevention (OCAP). In 1989, funding for these programs was abruptly cut from the state budget. These sexual assault prevention programs were found to be effective and need to be reinstated. This will mean generating new funds as well as conducting research on effective practices to replicate successful programs. Similarly, in 1977, California law enforcement-administrated funds were allocated to all University of California campuses to establish rape prevention programs. This funding ended in 1980, and no new funds have been allocated.

In addition to our intervention work with victims, it is imperative that we identify individuals who are potential candidates for becoming perpetrators and provide them with early intervention services. The analogy may be drawn that equates sexual assault prevention to immunizing school children early in life against childhood diseases. Inoculation to prevent illness is much more cost effective than having to pay for treatment after the fact. With disease, we know that the earlier we intervene, the better, and that keeping children from becoming ill in the first place is the most desirable goal. The same holds true for sexual violence. Prevention education provides the most effective method by which to change public attitudes about rape and sexual assault, and, ultimately, change behaviors that will stop sexual violence from happening at all.

recommendations:

Promote Sexual Assault Prevention Education

Recommendation 1: Develop a comprehensive approach to sexual assault prevention education.

Strategies:

1. Clarify the role of primary, secondary and tertiary prevention programs as they relate to sexual violence.
2. Evaluate sexual assault prevention programs to identify effective practices.
3. Fund a statewide collaborative to develop research-based standards.
4. Adopt standards to guide the development of effective sexual assault prevention programs.
5. Adapt effective practices for prevention programs to meet local community needs.
6. Train mandated reporters on their reporting obligations.

Recommendation 2: Incorporate prevention education into pre-kindergarten through 12th grade curricula in all educational settings.

Strategies:

1. Restore funding for the pre-kindergarten through 12th grade implementation of effective child sexual abuse prevention programs (e.g., Child Abuse Prevention Program, Child Sexual Abuse Prevention Program).
2. Advocate for schools to develop or expand policies and procedures that promote sexual assault prevention and intervention.
3. Encourage schools to collaborate and/or contract with rape crisis centers and law enforcement to deliver culturally competent sexual assault awareness and prevention workshops to faculty, staff and students.

Recommendation 3: Incorporate prevention education into community-based programs.

Strategies:

1. Increase partnerships between rape crisis centers, community- and faith-based programs, law enforcement, civic groups, and cultural/community centers that serve children to promote the inclusion of sexual assault prevention education in their programs.

2. Advocate for mandated prevention education as a component of state and locally funded after-school programs and programs such as Healthy Start.
3. Promote family-oriented sexual assault prevention programs.
4. Increase the resource capacity of rape crisis centers to provide a broad range of community services for sexual assault prevention (e.g., innovative prevention, self-defense, risk-reduction, and men's sexual violence awareness programs).
5. Bolster the capacity of rape crisis centers to partner with systems that provide services to high-risk and underserved populations, including:
 - Incarcerated youth and adults
 - Foster families and group-home residents
 - Mental health clients and patients
 - Substance-abuse clients and patients
 - Physically, cognitively and/or developmentally disabled individuals
 - Senior citizens and residents of residential care facilities
 - Homeless individuals and families
 - Documented and undocumented immigrants
 - Children and youth not currently enrolled in traditional schools

Recommendation 4: Incorporate primary prevention into post-secondary orientation programming.

Strategies:

1. Require sexual violence prevention training as part of post-secondary orientation programming for men and women.
2. Secure funding for post-secondary sexual assault prevention programs mandated by existing educational code requirements.
3. Hold educational institutions accountable for providing sexual assault prevention programs and establishing procedures to assist sexual assault victims, as required by law.
4. Increase the capacity of rape crisis centers to work in partnership with existing education programs on campuses.
5. Invite and support the inclusion of institutions of higher learning as active participants on community coordinating councils that address sexual assault.

endnotes

1. *2000 Sexual Assault Awareness Month: Rape and Sexual Assault Statistics Compilation*, Oakland, California: California Coalition Against Sexual Assault, April 2000, p. 18, citing Patricia Tjaden and Nancy Thoennes, *Prevalence, Incident, and Consequences of Violence Against Women: Findings From the National Violence Against Women Survey*, Washington, D.C.: National Institute of Justice, U.S. Department of Justice, November 1998, p. 4.
2. Lonnie R. Bristow, M.D., *American Medical Association's Guidelines of Sexual Assault*, Washington, D.C.: American Medical Association, November 1995.
3. *Victim Costs and Consequences: A New Look*, Washington, D.C.: National Institute of Justice, U.S. Department of Justice, January 1996, p. 23.
4. *Ending Violence Against Women — An Agenda for the Nation*, Washington, D.C.: National Advisory Council on Violence Against Women, October 2000.
5. *FBI Crime Index, Table 1, Reported Crimes and Crime Rates by Category and Crime, Criminal Justice Profile — 1999*, Sacramento: Criminal Justice Statistics Center, Division of Criminal Justice Information Services, California Department of Justice, 1999.
6. Callie Marie Rennison, Ph.D., *Criminal Victimization in the United States, 1999: Changes 1998-1999 With Trends 1993-1999*, NCJ-182734, Washington, D.C.: Office of Justice Programs, Bureau of Justice Statistics, U.S. Department of Justice, August 2000.
7. Susan Griffin, *Rape: The Politics of Consciousness*, San Francisco: Harper and Row, 1979, p. 93, citing Diana E.H. Russell and Nicole Van de Ven, eds., *The Proceedings of the International Tribunal on Crimes Against Women*, 1976.
8. Sheila Tobias, *Faces of Feminism: An Activist's Reflections on the Women's Movement*, Boulder, Colorado: Westview Press, 1997, p. 113.
9. *2000 Sexual Assault Awareness Month: Rape and Sexual Assault Statistics Compilation*, Oakland, California: California Coalition Against Sexual Assault, April 2000, p. 18, citing *Population Reports: Ending Violence Against Women*, Population Information Program, Center for Communication Programs, Johns Hopkins School of Public Health and Gender Equity, 2000.
10. Mary P. Koss, *Preface to Support for Survivors: Training for Sexual Assault Counselors*, Oakland: California Coalition Against Sexual Assault, 1999, p. xix.
11. Ibid.
12. Sauda Burch and Vanessa Thompson, "Rape and Sexual Assault," *Support for Survivors: Training for Sexual Assault Counselors*, Oakland: California Coalition Against Sexual Assault, 1999, p. 49, citing D.G. Kilpatrick, C.N. Edwards and A. Seymour, *Rape in America: A Report to the Nation*, Arlington, Virginia: National Victim Center, 1992.
13. Ibid, p. 48.
14. Ibid, p. 48, citing Mary P. Koss, "Defending Date Rape," *Journal of Interpersonal Violence*, 7, No. 1, 1992, 122-125.
15. Ibid, p. 59.
16. Sheila Tobias, *Faces of Feminism: An Activist's Reflections on the Women's Movement*, Boulder, Colorado: Westview Press, 1997, p. 113, citing Susan Brownmiller, *Against Our Will: Men, Women and Rape*, New York: Simon and Schuster, 1975.
17. State Law Chart, Berkeley, California: National Clearinghouse on Marital and Date Rape, June 1998.
18. Rebecca Campbell, Charlene K. Baker and Terri L. Mazurek, "Remaining Radical? Organizational Predictors of Rape Crisis Centers' Social Change Initiatives," *American Journal of Community Psychology*, 26, No. 3, 1998, p. 457.

19. Mary P. Koss, *Preface to Support for Survivors: Training for Sexual Assault Counselors*, Oakland: California Coalition Against Sexual Assault, 1999, p. xix, citing Susan Brownmiller, *Against Our Will: Men, Women and Rape*, New York: Simon and Schuster, 1975.
20. *2000 Report: Evaluation of the STOP Formula Grants to Combat Violence Against Women*, Washington, D.C.: The Urban Institute, March 2000, p.75.
21. *Ending Violence Against Women — An Agenda for the Nation*, Washington, D.C.: National Advisory Council on Violence Against Women, October 2000.
22. Susan Griffin, *Rape: The Politics of Consciousness*, San Francisco: Harper and Row, 1979, p. 27.
23. J. Gold and S. Villari, eds., *Just Sex*, Lanham, Maryland: Rowman & Littlefield Publishers, Inc., 2000, p. 73.
24. *Ending Violence Against Women — An Agenda for the Nation*, Washington, D.C.: National Advisory Council on Violence Against Women, October 2000.
25. Ibid.
26. *2000 Report: Evaluation of the STOP Formula Grants to Combat Violence Against Women*, Washington, D.C.: The Urban Institute, March 2000, p. 28.
27. Ibid, p. 61, 69.
28. Ibid, p. 62.
29. Gillian Greensite, "Rape Culture," *Support for Survivors: Training for Sexual Assault Counselors*, Oakland: California Coalition Against Sexual Assault, 1999, p. 19.
30. Luoluo Hong, Ph.D., M.P.H., "Toward a Transformed Approach to Prevention: Breaking the Link Between Masculinity and Violence," *Journal of American College Health*, 48, No. 6, May 2000, 269-79.
31. Gillian Greensite, "Rape Culture" and "Rape Myths," *Support for Survivors: Training for Sexual Assault Counselors*, Oakland: California Coalition Against Sexual Assault, 1999, p. 26.
32. Alan D. Berkowitz, Ph.D., "Fostering Men's Responsibility for Preventing Sexual Assault," Paul A. Schewe, ed., *Preventing Intimate Partner Violence: Developmentally Appropriate Interventions Across the Lifespan*, Washington, D.C.: American Psychological Association, 2000.
33. *2000 Sexual Assault Awareness Month: Rape and Sexual Assault Statistics Compilation*, Oakland, California: California Coalition Against Sexual Assault, April 2000, p. 21, citing D.G. Kilpatrick, C.N. Edmunds, and A. Seymour, *Rape in America: A Report to the Nation*, Arlington, Virginia: National Victim Center, 1992.
34. *Ending Violence Against Women — An Agenda for the Nation*, Washington, D.C.: National Advisory Council on Violence Against Women, October 2000.
35. Ibid.
36. Ibid.
37. Lawrence A. Greenfield, *Sex Offenses and Offenders — An Analysis of Data on Rape and Sexual Assault*, NCJ 163392, Washington D.C.: Office of Justice Programs, Bureau of Justice Statistics, U.S. Department of Justice, February 1997, pp. 10-11.
38. Kaiser Family Foundation, *Sex Education in America: A View From Inside the Nation's Classrooms*, survey report based on a series of national surveys of public secondary school students and their parents, September 26, 2000.

key partners:

call to action

We must stop sexual assault in California.

It is time to bring an end to sexual violence. To do so, we must work together. Successfully implementing the recommendations and strategies to address the six key issues on sexual assault outlined in this report will necessitate collaborative effort on the part of many organizations, agencies and individuals from a wide variety of disciplines.

The Working Group, in concert with all of the multidisciplinary stakeholders in the CALCASA Strategic Forum, believes that initiating these action steps will require the proactive involvement and participation of key partners, including the Governor, the Attorney General, state and local legislators, city and county elected officials, tribal governments, rape crisis centers, the media, advocacy groups, community-based organizations, law enforcement, criminal justice agencies (district attorneys' offices, probation departments and parole agencies, the courts), victim/witness organizations, state and county government agencies, elementary and secondary schools, colleges and universities, youth groups, parent-teacher associations, medical providers, mental health professionals, philanthropic organizations, the entertainment industry, youth and professional sports teams, business and industry, the faith community, and you, the reader.

Reading this document is a first step toward action. We ask that you now take these ideas and work with others in your community. Use this Strategic Forum Report as a blueprint — a starting place from which to begin the important task ahead. We will not solve the problem of sexual assault in California overnight, but we can make powerful strides if we are united in this common purpose.

glossary of terms

Communities of Color

Groups experiencing systematic discriminatory treatment vis-à-vis other groups in a society. Group members share a common history or myths that often include victimization by other groups and set them apart from others in ways that contribute to their separate treatment and status.

Culture

System of shared beliefs, values, customs that the members of a society or a group use to shape and influence perception and behavior. The elements of the system are often invoked in concrete practices that inform the surrounding institutions (family, work, religion, and leisure). This system is used by group members to cope with their environment and with one another, and is transmitted from generation to generation through conscious and unconscious means.

Diversity

Recognition of the differences among us within our communities: differences of race, ethnicity, gender, age, ability, disability, sexual orientation, religious or political beliefs, and status in society. We acknowledge these differences as we strive for inclusiveness in providing information about and access to services for all with dignity and respect.

Healing

Process of recovery from a trauma.

Intervention

Individual, organization or system that modifies or intercedes in the circumstances resulting from a sexual assault in order to safeguard, protect and/or assist in the healing of the victim/survivor.

Perpetrator

Person who has committed an illegal act. A perpetrator carries out or performs a crime. He or she is responsible for a crime and indifferent to the rights of the victim(s).

Risk Reduction

Process of reducing risk factors by learning safety techniques and identifying intervention strategies that can be used to avoid being the victim of a crime.

Sexual Assault Prevention

A three-tiered process whereby specific actions are taken to prevent or reduce the occurrence of sexual violence and minimize trauma that may have resulted from previous sexual violence. The primary level of prevention aims at stopping sexual assault before it occurs. Secondary prevention refers to risk-reduction approaches that provide information and education to help individuals avoid becoming victims of sexual violence or become aware of the need to seek assistance to resolve previous trauma. Tertiary prevention involves strategies (e.g. crisis intervention, counseling) to resolve sexual assault-related trauma so as to limit ongoing trauma and/or potential harm to others.

Sexual Assault Response Team (SART)

An interagency sexual assault intervention model based on a team approach. Partners in this model include public and private agencies dedicated to designing and implementing a comprehensive, sensitive and coordinated system of intervention and care. A SART generally includes representatives from the local rape crisis center, hospital, district attorney's office, and law enforcement agencies as well as medical personnel specifically trained to conduct rape exams.

Sexual Violence/Sexual Assault

An act of violence in which sex is used as a weapon. Sexual violence ranges from verbal harassment to sexual assault or abuse to rape to sexual homicide. At its most basic level, sexual assault constitutes any form of nonconsensual sexual activity, which encompasses all unwanted sexual acts from intimidation to touching to penetration. At a more complex level, it is the use of violence involving sex; the overtones of sex; or the instincts, drives or behaviors associated with sex, the sexes or sexual organs.

Social Marketing

A social change strategy that combines commercial marketing techniques with more standard applied social science approaches

to change public behavior. The ultimate goal of a social marketing program is to influence public awareness/attitudes and bring about a positive behavioral change for individuals or society. Social marketing benefits the audience, not the marketer. Classic examples include sober driver, smoking, and safe sex/AIDS prevention campaigns. Media advocacy is an important element in social marketing (i.e., rather than just reporting on an issue, the media become advocates for the issue, often helping to create or shape the news).

Social Norm

A rule or standard of behavior shared by members of a social group. Social norms may be internalized (i.e., incorporated within the individual, thereby producing conformity without external rewards or punishments), or may be enforced by society through positive or negative sanctions. The social unit sharing particular norms may be small (e.g., a clique of friends) or may include all adult members of the society. Norms are more specific than values or ideals: honesty is a general value, but the rules defining honest behavior in a particular situation are norms.

Vertical Prosecution

Method of handling a case whereby a single prosecutor or prosecution unit is responsible for conducting the case from start to finish, including the sentencing phase.

Victim, Survivor, Victim/Survivor

Terms used interchangeably by people who have experienced sexual assault and by the professionals who interact with them. “Victim” is often associated with the early trauma following a rape or sexual assault and emphasizes the fact that a crime has been committed. The terms “survivor” and “victim/survivor” emerged as part of the sexual assault victim’s rights movement to describe individuals who have experienced sexual violence, but no longer want any association with the perpetrator or the stigma of being viewed as remaining under the rapist’s influence and control. In other words, the victim is now dealing with the trauma of the crime, which has been put into a perspective that allows the survivor to go on with life without the extensive, negative disruption created by the assault.

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strategic forum

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appendix

strategic forum survey 2000: every voice counts!

In January 2000, CALCASA kicked off the Strategic Forum by asking over 600 Californians to share their ideas about sexual assault in California. The information and feedback gained from this survey was used to guide the year-long effort of the Working Group. This Final Document brings the process full circle and identifies not just the problems, but defines specific solutions. For your review only, below is a copy of last year's survey that was used to initiate the Strategic Forum process.

1. What do you think are the FIVE most important accomplishments in addressing sexual violence over the last 30 years? (check only five)

- Rape crisis intervention services
- Hospital accompaniment and court advocacy services
- Community and school prevention education programs
- Medical protocol for evidence collection
- Offering self defense training
- Focusing on gender, race, and class issues
- Legitimizing rape trauma syndrome
- Increasing awareness that rape is violence not sex
- Securing funds to increase sexual assault programs
- Developing anonymous victim reporting procedures
- Passing laws that don't blame victims
- Establishing fairer standards to judge facts in court
- Ensuring stricter punishment for offenders
- Developing multidisciplinary responses (e.g. SART)
- Training law enforcement, judicial, medical, social work, and clerical professionals
- Passing of the federal Violence Against Women Act
- Using DNA technology for perpetrator identification
- Creating of criminal justice sex crimes units
- Adopting vertical prosecution strategies
- Ensuring victim anonymity in the media
- Improving criminal justice system response, including stronger prosecution and improved prosecutor training
- Improving forensic tools (e.g. colposcope, toluidine blue dye, research in pattern of injury, etc.)
- Other

2. What do you think are the FIVE most critical issues for sexual violence prevention and intervention efforts during the next few years? (check only five)

- Strengthening and expanding services to victims
- Securing adequate funding
- Training law enforcement, judicial, medical, social work, rape crisis, and clerical professionals
- Strengthening the professional and organizational capacity of rape crisis centers
- Involving men in rape prevention efforts
- Collaborating among local service providers
- Validating effective prevention and intervention programs for children and youth
- Collaborating among statewide violence prevention organizations
- Enforcing existing legal sanctions against offenders
- Focusing on primary prevention
- Establishing standards for treating sex offenders
- Marketing prevention and intervention messages
- Highlighting sexual assault as a human rights issue
- Mobilizing communities to prevent sexual assault
- Increasing teen outreach awareness programs
- Increasing stalking threat management requirements
- Supporting underrepresented groups in leadership roles
- Increasing prosecution and conviction rates
- Applying DNA technology to sexual assault cases
- Enhancing sentencing requirements
- Developing multidisciplinary alliances for prevention and service provision
- Cultivating expert testimony skills
- Ensuring services for specific populations (e.g., non-English speakers, women of color, disabled women, men, children and youth, same sex partners, institutionalized individuals, significant others, military, immigrants)
- Other

3. Which of the following do you think are key partners to move sexual violence efforts forward? (check all that apply)

- Media
- Business and industry
- Schools (K-12)
- Rape crisis centers
- Local police departments
- Colleges and universities
- Advocacy organizations
- Medical services
- Mental health services
- Other community-based organizations
- Criminal justice agencies (district attorneys, courts, probation, etc.)
- Non-governmental funders
- Elected officials
- State governmental agencies
(please specify)
- Other

4. Do you think those working against sexual violence have a unified purpose and vision?

- Yes
- No

(If yes, please describe. If no, what is your own vision?)

5. I am primarily a:

- Rape crisis center professional
- Victim/witness representative
- Board of Directors member
- Educator
- Government professional
- Policy advocate
- Medical, social service, clerical professional
- Prosecutor
- Law enforcement officer
- Other

6. I have worked in the field of sexual assault:

- Less than 2 years
- 2 to 5 years
- 6-10 years
- More than 10 years

7. The community I work in is primarily:

- Urban
- Suburban
- Rural
- Tribal

8. The community I work in is primarily:

- Upper income
- Middle income
- Lower income
- Mixed income

9. Other comments? (please use additional page if necessary)





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