

The Utah Commission on Criminal and Juvenile Justice (CCJJ), located within the Governor's Office, promotes broad philosophical agreement about the objectives of the criminal and juvenile justice system in Utah. To accomplish this goal, the Commission includes a wide and diverse membership of organizations involved with justice issues in Utah. Much of the coordination is done by the disbursement of Federal grant money, which CCJJ administers. As an active party in coordinating criminal and juvenile justice issues in Utah, CCJJ continues to play a strong role in developing policy recommendations.

The CCJJ Research and Data Unit conducts and coordinates research on pertinent criminal justice issues and serves as the Statistical Analysis Center for the state of Utah.

Rape In Utah: A Survey of Utah Women About Their Experience With Sexual Violence was developed and conducted by the CCJJ Research and Data Unit; Mike Haddon and Julie Christenson.

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## Introduction

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The Utah Commission on Criminal and Juvenile Justice (CCJJ), in conjunction with the Office of Crime Victim Reparations, developed and administered a survey of Utah women about their experience with sexual violence. Results from this survey provide a better understanding of the extent to which sexually related violence occurs in our state, the impact it has upon victims, and the effectiveness of those who respond to those who have been violated. The results can be used in policy development and program improvement to better address the needs of those who have become, or may become, victims of sexual violence.

### Background

Unfortunately, sexual violence occurs in our society with much more regularity than many recognize. Sadly, its impacts can be very severe on victims and their families. Sexual violence often leaves in its wake both physical and psychological impacts for those who are victimized. Physical impacts may include chronic pelvic pain, gastrointestinal disorders, back pain, and facial pain. In up to a third of the cases, the victim may contract a sexually transmitted disease, including HIV. One study estimates over 32,000 pregnancies per year are the result of sexual violence. Psychological impacts include symptoms similar to Post-traumatic Stress Disorder (PTSD), such as emotional detachment, sleep disturbances, and flashbacks. Immediate reactions may include shock, disbelief, fear, anxiety, or withdrawal. Victims are also at an increased risk of experiencing depression and may be more likely to attempt or commit suicide (<http://www.cdc.gov/ncipc/factsheets/svfacts.htm>).

As heinous as these impacts are, many Utahns would be surprised how common these crimes are. Of the violent crimes that occur in Utah, rape is the only one in which Utah's rate is above the nation's average. In fact, when considering other types of violent crime,

such as murder, robbery, or aggravated assault, Utah's rate is historically half to three times lower than the nation's average. Yet it is difficult to discover how pervasive sexual crimes are in our society. When examining data from Utah's Crime Victimization Survey, we find that only about 20% of those who were raped during the prior year went on to report it to law enforcement officers. About the same proportion of those who were sexually assaulted in other ways during the prior year reported the crime to law enforcement officers ("Shedding Light 2002 Utah Crime Victimization Survey", Utah Commission on Criminal and Juvenile Justice, p. 12, 2003).

One may wonder why an attack of such a personal nature that leaves behind such significant impacts on its victims goes unreported. Part of the answer is due to the fact that in most cases, these are very personal attacks. In a 2005 study of sex offenders and their victims, it was found that in about 93% of the cases involving violent sex offenses, the victim and the perpetrator knew each other prior to the attack ("Sexual Violence In Utah", Utah Commission on Criminal and Juvenile Justice, p. 30, 2005). Most commonly, the victim and perpetrator were acquaintances, and in one-quarter of the cases, the perpetrator was a family member. In all likelihood, this circumstance tends to aggravate the

impact on the victim rather than mitigate the impact. It induces feelings of betrayal or alienation. It induces feeling of guilt and shame. These psychological impacts engendered by knowing the perpetrator are added to the already complex mix of psychological and physical impacts on the victim.

This survey was conducted for several purposes. First, the survey assists in quantifying the extent of sexual violence, in its many forms, that occurs in Utah. It accomplishes this by asking respondents about their experience with various forms of sexual violence during the prior year, as well as during their entire lifetime. Second, the survey assesses the impact sexual violence has on its victims. Finally, the survey documents the steps victims of sexual violence take after victimization, the services utilized after victimization, and the effectiveness of those services utilized.

## Methods

The study was conducted as a telephone survey of Utah women who were 18 years of age or older. The survey instrument was a modified version of an instrument used in a study in the state of Washington in 2001. ("Sexual Assault Experiences and Perceptions of Community Response to Sexual Assault: A Survey of Washington State Women", Lucy Berliner & David Fine, Harborview Center for Sexual Assault and Traumatic Stress, November 2001). The Washington survey instrument adopted sexual assault screening questions from two of the most prominent national surveys that address this topic area: The National Women's Study (NWS) and the National Violence Against Women Survey (NVAWS). After discussing the administration of the Washington Survey with its Principal Investigator, several modifications were made to the survey instrument. Other changes were made to the instrument to more efficiently address issues such as depression and Posttraumatic Stress Disorder (PTSD). Additionally, the survey was modified to better address issues most relevant to the state of Utah.

The survey interview was structured to begin with a series of questions that would indicate a possible diagnosis of depression or PTSD. These questions were structured such that the least common symptoms were addressed first, and, if the respondent did not report these symptoms, further questions about depression and PTSD were avoided. This allowed for a shorter survey interview in many instances. The survey then asked respondents about their patterns of drug and/or alcohol use, and whether the respondent had ever experienced a traumatic event, such as seeing a person seriously injured or violently killed.

Next, the survey moved on to the sexual violence screening questions. Similar to the Washington study, the questions used in this survey regarding specific details of the sexual assault were adopted from the two national studies previously mentioned. Respondents were asked if they had experienced rape, forced oral sex, forced anal sex, object rape, sexual battery or attempts of any of these various sexual assaults. During the interview, respondents were asked if they had ever been forced to engage in sexual intercourse with a current or past husband against their will. Respondents were asked if they were ever forced into sexual intercourse when they could not give consent, either because they were under the influence of drugs and/or alcohol or because the perpetrator had drugged them without their knowledge. Finally, respondents were asked if they ever had any form of sexual intercourse or were sexually molested before turning 16 years of age and the actor was four or more years older. For each question, the respondent was asked how old they were when this first occurred. With the exception of the questions surrounding child sexual abuse, respondents were also asked whether a sexual assault had occurred during the previous year.

Respondents answering affirmatively to any of the sexual assault screening questions were then queried about their worst sexual assault experience, their first sexual assault experience, and, where appropriate, the sexual assault experience that occurred during the prior

year. Within the context of each of these sexual assault experiences, respondents were asked a series of questions about the perpetrator, the circumstances involved in the assault, concerns raised after the assault, and the actions taken by the respondent following the assault. Respondents who reported any form of sexual assault were also asked a series of questions about the impacts the assault has had on their lives, both in terms of their capabilities and in terms of their perceptions of themselves.

The survey concludes by asking all respondents about their knowledge of services available for victims of sexual assault, or if they know where to seek assistance if they become victims of sexual assault. The survey then asks a series of demographic questions of the respondents.

## Procedure

As stated previously, the survey was administered as a random telephone survey. The survey questions were transferred into a Computer Assisted Telephone Interview (CATI) structure. The survey questions were also translated into Spanish and transferred into the CATI system. A contract was established with a firm who had the capability of administering the survey according to the parameters established by CCJJ. Only females aged 18 or older were allowed to participate in the survey. The firm administering the survey empanelled a group of female interviewers who were provided a private location to speak with the respondents. The Utah Coalition Against Sexual Assault (UCASA) provided sensitivity training to the panel of interviewers before survey administration began. The training focused on how to appropriately respond to those who might appear to be in crisis, how to re-direct respondents who get into lengthy discussions beyond the scope of the survey, and how to appropriately elicit responses from participants who may not be eager to disclose this type of information.

## Summary of Findings

- Rape is the only category of violent crime in which Utah's rate exceeds the nation's average.
- Of all respondents, 12.7% reported being raped during their lifetime.
- Survey findings indicate that nearly one in three Utah women will experience some form of sexual violence during their lives.
- Child molestation was the most common form of sexual violence reported, followed closely by rape.
- Very few incidences of sexual assault were reported as having occurred during the prior year.
- More than half of the women (51.2%) who reported being sexually assaulted in any manner were victimized by only one individual.
- Almost ninety percent of victims, 86.2%, experienced their first sexual assault before their 18th birthday.
- There was a fairly even split between those who reported their sexual assault was a single event by a single perpetrator (49.6%), and those who reported there were multiple events by a single perpetrator (48.5%).
- Those who were first victimized as an adult were more likely to say they were victimized only once and by a single person.
- Twenty-two respondents (1.8%) reported someone had sexual intercourse with them after they had been given drugs and/or alcohol either without their knowledge or against their will at some point during their lives.

➤ More frequently, victims reported being unable to agree to having sex or say no to having sex as a result of drinking too much or taking drugs rather than by having drugs or alcohol administered to them without their knowledge.

➤ Overall, no relationship was found between race or income with regards to sexual victimization.

➤ Those reporting as victims of rape and child rape specifically, tended to have less education than those who were not victims of these crimes.

➤ Across all categories of sexual violence, women who were married or widowed were less likely to report sexual victimization when compared to women who were single, divorced, or separated.

➤ Of sexual assault victims, 96.6% were attacked by a male, 2.6% by a female, and just 0.8% were attacked by both a male and female offender.

➤ Only 33 respondents, or 8.6%, were attacked by a stranger.

➤ Most commonly, the attacker was someone the respondent knew, who was not an intimate partner or family member.

➤ Weapon use was very uncommon during reported sexual assaults.

➤ Most victims (76.7%) reported no physical injury as a result of the attack, however, nearly one-third (30.1%) said they believed at the time of the attack that themselves or someone close to them would be seriously injured or killed.

➤ Most victims were not very concerned about getting sexually transmitted diseases or getting pregnant.

➤ Many victims were concerned about their family or friends finding out about the attack.

➤ A mere 8.2% of sexual assault victims sought medical attention following their attack.

➤ Only 9.8% of respondents who were sexually assaulted reported the attack to the police.

➤ Just 2.9% of victims contacted a rape crisis line about their sexual assault, and approximately one-third (30.3%) have sought counseling regarding the event.

➤ About one-quarter (24.3%) of the perpetrators were reportedly under the influence of alcohol at the time of the attack, and only 2.3% were reportedly under the influence of drugs.

➤ It was found that sexual assault victims were more likely to have experienced other forms of traumatic events as well, such as being beaten or seeing someone violently injured or killed.

➤ Women who have been sexually victimized were much more likely to meet the diagnostic criteria for Posttraumatic Stress Disorder (PTSD) and depression.

➤ Women with a history of sexual assault were less likely to rate their health as being excellent to very good, and more likely to rate their health as being poor.

➤ Women who have been victims of both sexual and non-sexual violence were the most common group to score negatively on several measures of health and mental health.

➤ Suffering multiple sexual assaults is likely to compound the negative life impacts experienced by victims of a single sexual assault.

➤ Sexual assault victims were more likely than non-sexual assault victims to believe that community response to violence has improved.

➤ The majority of all respondents were aware of services in their communities for victims, including rape crisis centers.

## Utah's Sexual Assault Prevalence

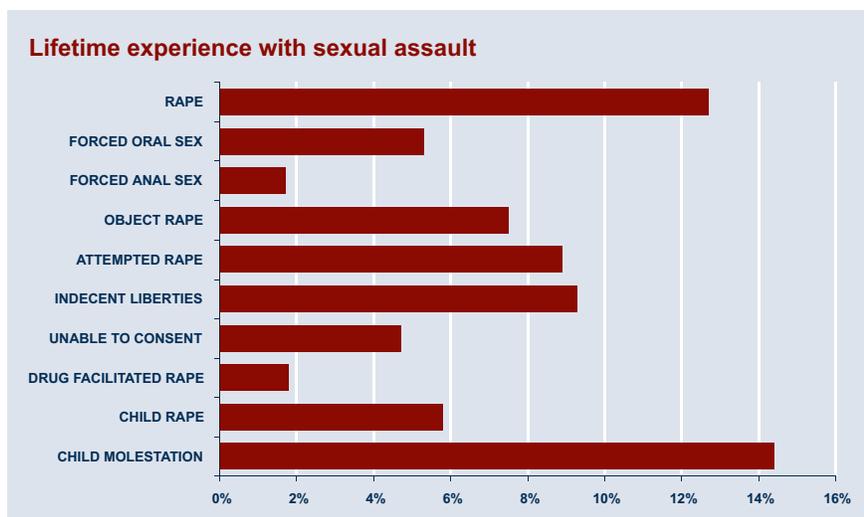
In part, this survey was commissioned to investigate published estimates from a national study that indicated one in five women in Utah will be raped during their lifetime. This 20% figure only addressed female victims, and spoke directly towards rape, or forced sexual intercourse, not any other form of sexual assault. The one in five figure was estimated for Utah using a mixture of findings from a national survey and demographic characteristics of Utah's population. ("One in Five, Rape In Utah: A Report to the State", Kenneth J. Ruggiero, Ph.D. & Dean G. Kilpatrick, Ph.D., May 15, 2003. National Violence Against Women Prevention Research Center)

According to the findings of this study, 12.7% of the respondents reported that they had been raped during their lifetime. This translates to approximately one in eight women in Utah will be raped sometime during their lifetime. Although this is a lower ratio than is reported in the national estimate, the figure is still compelling. The survey asked respondents about their experience with a variety of forms of sexual violence in addition to rape. Of the total sample, 391 respondents (31.7%) reported being the victim of some form of sexual violence. This figure would indicate that nearly one in three women in Utah will experience some form of sexual violence during their lifetime.

Of all forms of sexual violence, child molestation was the most common form reported as occurring during the respondent's lifetime. Child molestation occurred if the victim was under 16 years of age and someone four or more years older touched the victim's breasts, buttocks, or genital area without using force or threat. Looking at survey respondents, this had hap-

pened with 14.4% of the respondents. Rape, which was reported by 12.7% of the respondents, was a close second to child molestation.

Briefly examining other forms of sexual violence reported by survey respondents, 9.3% reported someone had touched their breasts, buttocks, or genital area by using force or threat (indecent liberties); 8.9% reported someone had attempted to make them engage in any form of sexual intercourse against their will (attempted rape); 7.5% reported someone had put fingers or objects in their vagina or anus against their will (object rape); 5.8% when under 16 years of age, had someone four



### Classification of Sexual Assaults

- RAPE** *Forced sexual penetration (vaginal, oral, anal, digital, object)*
- ATTEMPTED RAPE** *Uncompleted attempt at forced penetration*
- INDECENT LIBERTIES** *Forced sexual contact with breasts, buttock, or genital area*
- NONCONSENTING SEX** *Unwanted sex while under the influence of alcohol or drugs and when unable to give or withhold consent*
- CHILD RAPE** *Non-forced sexual penetration when less than 16 years with a person four or more years older*
- CHILD MOLESTATION** *Non-forced sexual touching of breasts, buttocks, or genital area when less than 16 years by a person four or more years older*

remaining 13.6% had been sexually victimized by four or more individuals during their lifetime.

When asked how many times the respondent had been sexually victimized, only 38.4% of those

years of age or older engage in sexual intercourse with them without using force or threat (child rape); 5.3% had been forced into oral sex; 4.7% had been forced into sexual intercourse when they had drunk too much alcohol or taken drugs and could not agree to have sex or say no to having sex (unable to consent); 1.8% had sexual intercourse when they had been given drugs or alcohol either without their knowledge or against their will (drug facilitated rape); and 1.7% were forced to have anal sex. For the remainder of the report, the crimes of sexual violence will be classified as depicted in the chart above.

who were victims reported it had happened only once. On average, the victims of sexual violence in this study were assaulted 5.6 times during their lifetime. One survey respondent reported being sexually assaulted 97 times during her lifetime. Taking into account that respondents were typically assaulted by one to three individuals during their lifetime, the findings indicate these perpetrators commonly sexually assault their victims on more than one occasion. In fact, the one individual who reported being sexually victimized 97 times also reported she had been sexually victimized by only one individual.

As expected, the reported incidence of sexual assaults, of any type, during the prior year was extremely low. In the year prior to administering this survey, six respondents were victims of rape, five were victims of indecent liberties, two were victims of attempted rape, and two were victims of non-consenting sex.

### Victims of Sexual Violence Are Often Victimized Many Times by One Individual

Specifically examining individuals who reported a sexual victimization of any type, 51.2% reported that during their lifetime they had been victimized by only one individual. Nearly one-fifth (19.9%) had been sexually victimized by two individuals, and 15.3% had been victimized by three individuals during their lifetimes. The

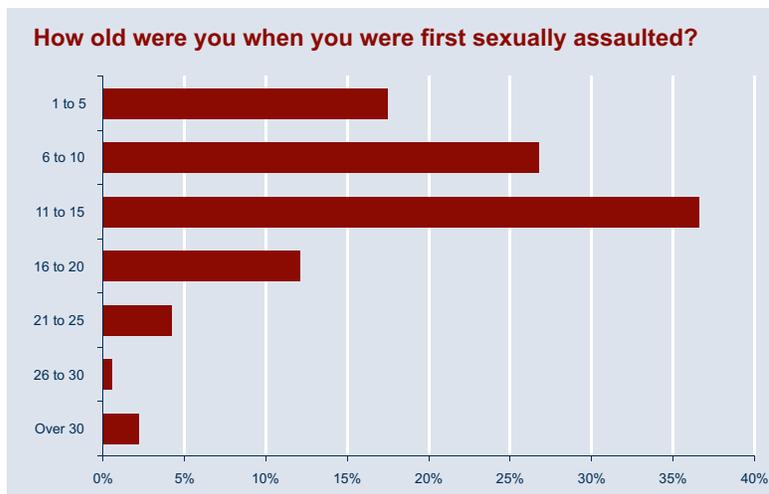
#### Respondents sexually assaulted last year

	NUMBER	%
<b>RAPE</b>	5	0.4%
<b>FORCED ORAL SEX</b>	2	0.2%
<b>FORCED ANAL SEX</b>	1	0.0%
<b>OBJECT RAPE</b>	4	0.3%
<b>ATTEMPTED RAPE</b>	2	0.2%
<b>INDECENT LIBERTIES</b>	5	0.4%
<b>UNABLE TO CONSENT</b>	2	0.2%
<b>DRUG FACILITATED RAPE</b>	0	0.0%

## Most Survey Respondents Who Experienced an Assault Were Sexually Assaulted As a Child

Of the respondents who reported some form of sexual assault during their lifetime, 86.2% reported their first victimization occurred before turning 18 years of age. Alternatively, only 13.8% of those assaulted during their lifetime reported their first sexual assault occurred after turning 18 years of age. In fact, nearly half of this group, 44.2% reported their first sexual assault as occurring by the age of 10, and 80.8% reported their first sexual assault as occurring by the age of 15.

With few exceptions, the average age of first victimization among the types of sexual violence was under 18 years of age. As expected, victims of child rape and child molestation were among those with the lowest average age with these victims, on average, being 11.7 years of age at first offense. Victims of object rape were an average of 11.4 years of age when they were first assaulted. Victims of rape were an average of 14.4 years of age. Only 20 respondents were forced into anal sex, but these were the oldest victims at an average of 21.1 years of age at first assault. Respondents who reported being forced into sexual



intercourse while under the influence of drugs and/or alcohol were an average of 19.1 years of age at first assault, and those sexually assaulted after being administered drugs and/or alcohol without their knowledge were an average of 19.0 years of age at first assault. The oldest age reported by any respondent for their first sexual assault was 50 years of age, while the youngest reported was under one year of age.

## Individual Sexual Assault Events Rarely Involve Multiple Perpetrators

There was a nearly even split between respondents who reported their sexual assault experience was a single event by a single perpetrator (49.6%), and those who reported their sexual victimization involved multiple events (48.5%). Only 2.0% of respondents reported

they had experienced a single sexual assault involving multiple perpetrators. Examining respondents who reported they had been sexually assaulted multiple times during their lifetime, 54.9% reported the assaults were perpetrated by the same individual, while the remaining

### Age information by type of sexual assault

	NUMBER	AVERAGE	MINIMUM AGE	MAXIMUM AGE
<b>RAPE</b>	152	14.4	0	47
<b>FORCED ORAL SEX</b>	63	13.3	2	45
<b>FORCED ANAL SEX</b>	20	21.1	4	45
<b>OBJECT RAPE</b>	85	11.4	2	45
<b>ATTEMPTED RAPE</b>	107	12.2	2	47
<b>INDECENT LIBERTIES</b>	113	13.3	2	50
<b>UNABLE TO CONSENT</b>	57	19.1	12	47
<b>DRUG FACILITATED RAPE</b>	22	19.0	1	45
<b>CHILD RAPE</b>	69	11.7	3	16
<b>CHILD MOLESTATION</b>	56	11.7	3	16

### Respondents assaulted by single or multiple assailants

	1st ASSAULT AS CHILD		1st ASSAULT AS ADULT		TOTAL	
	NUMBER	%	NUMBER	%	NUMBER	%
<b>SINGLE EVENT BY 1 PERSON</b>	139	46.3%	34	69.4%	173	49.6%
<b>SINGLE EVENT BY 2 OR MORE</b>	5	1.7%	2	4.1%	7	2.0%
<b>MULTIPLE EVENTS BY SINGLE PERSON</b>	84	28.0%	8	16.3%	92	26.4%
<b>MULTIPLE EVENTS BY MULTIPLE PEOPLE</b>	72	24.0%	5	10.2%	77	22.1%

45.1% reported being sexually assaulted over time by different people.

Survey respondents who reported their first sexual assault occurred as an adult were more likely to report being assaulted only once and by a single person. Nearly 70% of those first assaulted as adults reported their lifetime experience as a single assault by one person, while only 46.3% of those victimized as a child reported similarly. About one-quarter (26.5%) of those first assaulted as an adult reported multiple victimizations, while twice that proportion (52.0%) of those assaulted as a child reported multiple victimizations.

### Drug and Alcohol Facilitated Rape Does Occur in Utah

Rape occurs in Utah anytime an individual does not give consent to engage in sexual intercourse, or if the individual is unable to consent to sexual intercourse. The latter occurs in several forms. In some instances, the individual has had too much to drink or is under the influence of drugs. If an attacker takes advantage of this situation and engages in sexual intercourse when the victim is unable to consent, this constitutes rape in Utah. Another situation that is very similar is when the victim is purposefully administered drugs and/or alcohol without her knowledge and then is engaged in sexual intercourse without her consent, and sometimes without her knowledge. This is also rape in Utah. Several “date rape drugs”, such as GHB (gamma hydroxybutyric acid), Rohypnol (flunitrazepam), and Ketamine (ketamine hydrochloride), can be administered into a victim’s food or drink without her knowledge. The victim is then rendered into a semi-conscious state where

the perpetrator can take advantage, often without the victim remembering anything that has occurred.

Twenty-two women, 1.8% of the total respondents, reported someone had sexual intercourse with them after they had been given drugs and/or alcohol either without their knowledge or against their will sometime during their life. The average age of these victims was 19, and the majority occurred at, or after, the victim turned 16 years of age. More common were victims who reported having sexual intercourse after drinking too much or having taken drugs and were unable either to agree to have sex or to say no to having sex. In this instance, 58 women (4.7% of the total respondents) reported this occurred sometime during their lifetime. Again, the average age of these victims was a little older than other sexual assault victims at 19.1 years of age, and most experienced this form of sexual assault after turning 16 years of age.

### Spousal Rape Often Not Recognized As Rape

Eighty-six (7.0%) respondents noted that sometime during their lifetime, a current or past husband had made or tried to make them have any kind of sexual intercourse against their will. However, it is interesting to note that only 47 (54.7%) of these 86 respondents reported being raped (either vaginally, orally, anally, or with an object) anytime during their lifetime. Only 19 (22.1% of the 86) reported being raped by a husband or ex-husband. Nearly all of those victimized by spouses apparently did not consider the forced sexual intercourse by a husband or ex-husband as a rape.

## Victim Characteristics and Sexual Assault

A variety of demographic information was collected from survey respondents. Analysis was conducted to determine to what extent, if any, demographic characteristics were associated with sexual victimization. In some instances, finding no association between sexual assault and a victim's characteristics is also quite telling.

Within the context of the survey instrument, respondent race was categorized as Native American, Asian, black, Pacific Islander, white or other. When examining race and sexual victimization of any variety, no relationship was discovered. However, it is important to recognize that there are few racial minority citizens in Utah, and, thus few racial minority respondents. With such a small number of racial minority respondents, discovering statistically significant differences among racial groups is very difficult.

When examining ethnic origin, in terms of Hispanic or not Hispanic, the only significant difference that appeared was with the offense of rape of a child. In the case of rape of a child, 11.6% of Hispanic respondents were victims of this type of offense, while 5.4% of the non-Hispanic respondents were victims of this type of offense. This puts Hispanic children at a slightly higher risk of becoming a victim of child rape.

### Income Level Was Not Associated With Sexual Victimization

No relationship was found when examining respondent income level. In fact, a nearly even proportion of victims in each income level reported being the victim of various types of sexual violence. For example when examining those reporting any form of sexual violence in their lifetime, 33.7% with an income under \$15,000 were victims; 34.0% with an income between \$15,000 and \$34,999 were victims; 36.1% with an income between \$35,000 and \$74,999 were victims; and 31.0% with an income \$75,000 or more were victims. In Utah, it appears sexual violence transcends all income levels.

#### Type of sexual assault by race and ethnicity

	WHITE		BLACK		ASIAN		PACIFIC ISLANDER		NATIVE AMERICAN	
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
RAPE	191	16.8%	2	33.3%	2	22.2%	2	40.0%	0	0.0%
ATTEMPTED RAPE	104	9.2%	1	16.7%	1	11.1%	1	20.0%	1	50.0%
INDECENT LIBERTIES	108	9.5%	1	16.7%	0	0.0%	0	0.0%	0	0.0%
NONCONSENSUAL SEX	60	5.3%	1	16.7%	0	0.0%	1	20.0%	0	0.0%
CHILD RAPE	64	5.6%	1	16.7%	0	0.0%	0	0.0%	0	0.0%
CHILD MOLESTATION	164	14.4%	2	33.3%	1	11.1%	1	20.0%	1	50.0%
	HISPANIC		NOT HISPANIC							
	NUMBER	%	NUMBER	%						
RAPE	14	16.3%	192	17.0%						
ATTEMPTED RAPE	6	7.0%	104	9.2%						
INDECENT LIBERTIES	11	12.8%	103	9.1%						
NONCONSENSUAL SEX	3	3.5%	61	5.4%						
CHILD RAPE	10	11.6%	61	5.4%						
CHILD MOLESTATION	11	12.8%	165	14.6%						

### Respondents With Less Education Were More Likely to Report Being Raped During Their Lifetime

Other demographic variables are less clear. For example, a relationship was discovered between education level and rape/child rape victimization. When examining rape specifically, those reporting this type of victimization had less education than those not reporting rape victimization. Approximately 10% of respondents with either a college degree or postgraduate degree reported being raped sometime during their lifetime compared to approximately 20% of those with only a high school diploma. In fact, one-quarter of those without a high school diploma reported being raped sometime during their lifetime.

Similarly, those who reported being raped as a child also had less education. Nearly 20% of those without a high school diploma reported being the victim of child rape compared to approximately 3% of those with a college degree. The reason these findings are not abundantly clear is that, although a relationship exists, it is difficult to determine cause and effect. The trauma experienced as a victim of rape or rape as a child may have impacted the individual's life in a way that impeded that individual from pursuing more education. Conversely, an individual without an advanced education may be more likely to find herself in an environment where a sexual attack could occur. Therefore, it is difficult to say whether education level itself is a risk factor for sexual assault.

### Sexual Assault Is Associated With Marital Status

A statistically significant relationship was discovered between all forms of sexual violence and marital status. In every instance, those who are married or widowed were less likely to report sexual victimization when compared to those who are single, divorced or separated. Interestingly, respondents who were divorced or separated were the most likely to report some form of sexual victimization during their lifetime. Again, it would be misleading to suggest from these findings that marital status is a risk factor for sexual violence. Individuals who have experienced sexual violence may have a difficult time maintaining a cohesive relationship which could lead to divorce. Divorced individuals may have even experienced sexual violence by their spouse. Similarly, women who have been sexually violated either as a child or as an adult may not desire to or may have difficulty establishing healthy relationships that could lead to marriage. Cause and effect are difficult to determine from these survey results. However, further study in these areas could be insightful.

**Educational attainment and marital status of those sexually assaulted**

EDUCATION	RAPE		ATTEMPTED RAPE		INDECENT LIBERTIES		NONCONSENSUAL SEX		CHILD RAPE		CHILD MOLESTATION		ANY SEXUAL ASSAULT	
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
NONE TO SOME HIGH SCHOOL	19	25.0%	10	13.2%	10	13.2%	5	6.6%	14	18.4%	14	18.4%	29	38.2%
HIGH SCHOOL/EQUIVALENT	44	16.2%	17	6.3%	24	8.9%	18	6.6%	22	8.1%	35	12.9%	79	29.3%
SOME COLLEGE	108	20.8%	53	10.2%	54	10.4%	32	6.2%	25	4.8%	86	16.5%	192	37.4%
4 YEAR COLLEGE DEGREE	26	9.9%	18	6.9%	18	6.9%	7	2.7%	8	3.1%	27	10.3%	59	22.5%
POSTGRADUATE	9	10.2%	12	13.6%	8	9.1%	2	2.3%	3	3.4%	15	17.0%	29	33.3%

MARITAL STATUS	RAPE		ATTEMPTED RAPE		INDECENT LIBERTIES		NONCONSENSUAL SEX		CHILD RAPE		CHILD MOLESTATION		ANY SEXUAL ASSAULT	
	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%	NUMBER	%
SINGLE/NEVER MARRIED	20	23.0%	10	11.5%	17	19.5%	7	8.0%	9	10.3%	20	23.0%	38	44.2%
MARRIED	150	15.9%	77	8.2%	82	8.7%	43	4.6%	50	5.3%	124	13.1%	280	29.8%
DIVORCED/SEPARATED	31	33.0%	19	20.2%	13	13.8%	14	14.9%	11	11.7%	23	24.5%	55	59.1%
WIDOWED	5	5.4%	3	3.2%	2	2.2%	0	0.0%	2	2.2%	9	9.7%	16	17.4%

## Sexual Violence Victim Experience

Those survey respondents who reported some form of sexual victimization during their lifetimes were asked a variety of questions about the victimization itself, their concerns after the incident, and about whom they consulted with personally and professionally after the incident. This information sheds valuable light on what victims of sexual violence experience as a result of the assault.

### Most Report Victimization at the Hands of a Male They Know

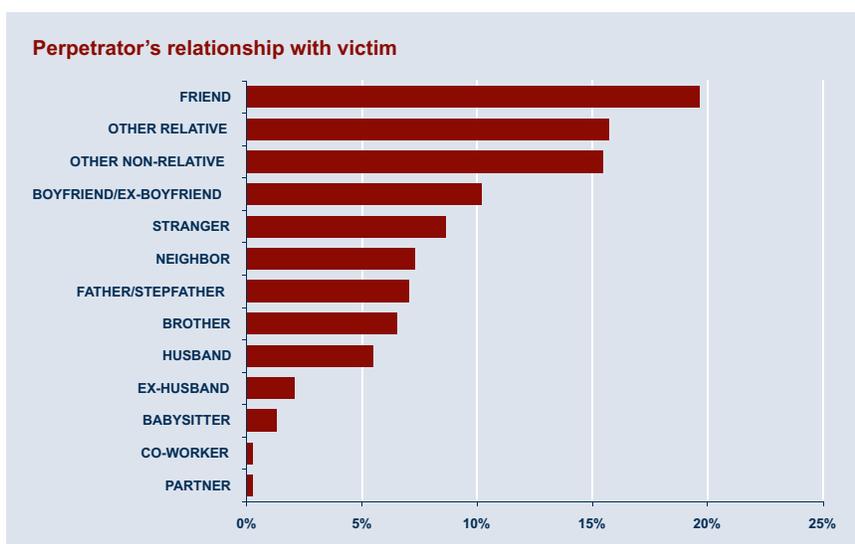
When asked the gender of the perpetrator, 96.6% experienced a sexual assault by a male. Only 2.6%, 10 respondents, reported being assaulted by another female, and 0.8%, or 3 respondents, reported being assaulted both by a male and a female perpetrator.

Only 33 respondents (8.6% of those victimized) reported they were assaulted by a stranger. Most commonly, respondents were assaulted by a friend (19.6%) or a relative not specified (15.7%). Excluding husbands, nearly one-third (29.3%) reported being assaulted by a family member such as a father, brother, or other relative. Intimate partners, such as boyfriends, husbands, ex-husbands, and other partners, were the attackers in 18.1% of the assaults described by respondents. However, most commonly, the attacker was someone the respondent knew, who was not an intimate partner or family member. Combined, friends, neighbors, babysitters, co-workers, and other non-relatives accounted for 44.0% of the sexual assaults reported in the survey.

### Although Weapon Use Is Not Common, Victims Are Commonly Threatened or Feel Threatened

Weapons were seldom used during the reported sexual assaults. In only 9 cases (2.4%) was a gun involved in the assault, and in only 6 cases (1.6%) was a knife involved in the assault. Ten respondents (2.6%) reported some other type of weapon was used during the assault, but 93.4% of those reporting being sexual assaulted noted no weapon had been involved.

In nearly one-quarter of the cases, 23.2%, the perpetrator threatened to harm or kill either the victim or someone close to the victim during the assault. Whether threatened or not, nearly one-third, 30.1%, of respon-



dents did report that they believed themselves or someone close to them would be seriously harmed or killed during the course of the sexual assault.

In most cases, it appears the harm was only implied or threatened. Most victims, 76.7%, reported that no physical injury to themselves occurred as a result of the assault. Of those reporting an injury, 19.0% reported suffering a minor injury, while 4.2% reported suffering a serious injury. Adult victims were more likely to report an injury (35.8%) than those victimized as a child (21.5%). Approximately one-third of rape (36.0%), attempted rape (33.3%), and indecent liberties (37.5%) victims reported some resulting injury from the attack. It was less common for victims of child rape and child molestation to report a physical injury, 29.4% and 16.0% respectively.

### Victims Were Not Very Concerned About Getting a Sexually Transmitted Disease

The survey asked those who reported being sexually assaulted if they were concerned about acquiring a sexually transmitted disease, getting HIV/AIDS, or getting pregnant as a result of the assault. Interestingly, none of these issues were of paramount concern to those survey respondents reporting victimization. In fact, 80.6% reported not being really concerned about getting AIDS or HIV, and 75.1% reported they were not really concerned about getting some other form of sexually transmitted disease. There are several plausible explanations for this lack of concern. First, as reported, many of these sexual attacks occurred when the respondents were relatively young. At a young age, the respondents may not have fully understood what had happened to them, let alone known the potential consequences of these assaults in terms of contracting some form of disease. It is likely respondents victimized at a young age may not have known sexually transmitted

### Sexual assault victim physical concerns

	NUMBER	%
<b>Concerned about getting AIDS/HIV?</b>		
<b>EXTREMELY</b>	44	11.9%
<b>SOMEWHAT</b>	18	4.9%
<b>A LITTLE</b>	10	2.7%
<b>NOT REALLY</b>	299	80.6%
<b>Concerned about getting other STD?</b>		
<b>EXTREMELY</b>	53	14.1%
<b>SOMEWHAT</b>	30	8.0%
<b>A LITTLE</b>	11	2.9%
<b>NOT REALLY</b>	283	75.1%
<b>Concerned about getting pregnant?</b>		
<b>EXTREMELY</b>	78	21.0%
<b>SOMEWHAT</b>	19	5.1%
<b>A LITTLE</b>	8	2.2%
<b>NOT REALLY</b>	267	71.8%

diseases, including AIDS/HIV, even existed at the time they were assaulted.

In addition, most of the respondents knew their attacker either intimately or relatively well. As such, they may have been in a position where they were confident the attacker was not carrying a sexually transmitted disease. This may have kept this concern from coming to the forefront, among all of the other concerns that were likely generated from such an attack.

Nearly three-quarters of respondents, 71.8%, also noted they were not really concerned about getting pregnant as a result of the attack. Although only a few types of sexual assaults included in this study were capable of rendering the respondent pregnant, this question was analyzed among all types of sexual assault. As stated previously, many of the respondents were victimized at a relatively young age. At a young age, some of the respondents may have had a general idea of how pregnancy occurs, but without a complete understanding, it is plausible this concern may have surfaced even when the sexual contact that occurred could not have resulted in a pregnancy. In fact, many

victims may have been too young to become pregnant even in cases of rape, but the concern still could have surfaced. Over one-quarter, 26.1%, of respondents were either extremely or somewhat concerned about getting pregnant as a result of the assault.

### Victims Are Concerned About People Knowing They Were Assaulted

One of the largest concerns reported by victims of sexual assault was about family or others knowing the assault had occurred. Over half, 52.5%, of respondents who were assaulted were extremely concerned about their family finding out about the assault. An additional 15.5% reported at least being somewhat concerned their family would learn of the assault. Just over one-quarter, 26.0%, reported they weren't really concerned about family members finding out about the sexual assault. Similarly, 65.1% of respondents reported they were either extremely or somewhat concerned

about people outside of their family discovering they had been sexually assaulted. Most survey respondents who had been sexually assaulted were not concerned about their name being made public by the media. In fact, 56.8% of respondents said this was not really a concern. However, a relatively large proportion, 37.1%, did report they were extremely concerned about media attention.

This is an interesting finding. Family and friends are often the victim's closest support structure, yet most victims reported a fear of this important support structure discovering the sexual victimization. One reason for this may be found in the survey responses. Nearly two-thirds of respondents who had been sexually assaulted (62.5%) were either extremely concerned or somewhat concerned that people would think the assault was either their own fault or that they were somehow responsible.

### Few Utah Victims of Sexual Assault Seek Services

Very few respondents who reported being sexually assaulted sought medical attention. A meager 8.2% of survey respondents reported seeing a doctor or going to a medical center as a result of the attack. It is important to understand victims of sexual assault may go to a medical facility not only to address injury that was sustained as a result of the attack, but also to collect evidence of the attack that could later be used to prosecute the perpetrator. As reported previously, victims of sexual assault are often concerned about others discovering the assault had occurred and, therefore, may not be interested in evidence collection for a

#### Sexual assault victim discovery concerns

	NUMBER	%
<b>Concerned about family knowing?</b>		
<b>EXTREMELY</b>	190	52.5%
<b>SOMEWHAT</b>	56	15.5%
<b>A LITTLE</b>	22	6.1%
<b>NOT REALLY</b>	94	26.0%
<b>Concerned about other people knowing?</b>		
<b>EXTREMELY</b>	177	48.2%
<b>SOMEWHAT</b>	62	16.9%
<b>A LITTLE</b>	18	4.9%
<b>NOT REALLY</b>	110	30.0%
<b>Concerned about name made public by media?</b>		
<b>EXTREMELY</b>	134	37.1%
<b>SOMEWHAT</b>	16	4.4%
<b>A LITTLE</b>	6	1.7%
<b>NOT REALLY</b>	205	56.8%
<b>Concerned people think it was your fault?</b>		
<b>EXTREMELY</b>	176	47.8%
<b>SOMEWHAT</b>	54	14.7%
<b>A LITTLE</b>	21	5.7%
<b>NOT REALLY</b>	117	31.8%

prosecution that would almost certainly make the assault more widely known.

If evidence of a sexual assault is to be gathered, it needs to be gathered quite soon after the assault occurs. Evidence such as pubic hair, semen, or micro-trauma to the body can be lost within days, if not hours, after the attack. Over half (51.7%) of the respondents who sought medication attention do so long after evidence could reliably be collected. In these instances, the respondent was most likely seeking medical attention for lingering medical issues that resulted from the attack. About one-third (34.5%) of respondents who sought medical attention did so within 24 hours of the attack.

The survey did not ask respondents if evidence of the attack was collected, or if the respondent was only seeking medical attention for injuries sustained during the attack. Most respondents who sought medical attention, 70.0%, noted the doctor was aware they had been sexually assaulted. Just over half, 53.3%, of these reported the medical center did provide them with information about sexually transmitted diseases, while the remaining 46.7% reported they received no such information. A very small 2.4% of those sexually assaulted reported actually getting a sexually transmitted disease as a result of the assault.

Only about one-third (30.3%) of respondents reporting victimization have talked with a counselor about the incident. Those who sought counseling reported being quite satisfied with the services provided. In fact, 80.5% of those who sought counseling services as a result of the attack reported they were either very satisfied or satisfied with the services provided. However, this is within the context that only one-third sought counseling services. It is interesting to note that a comparatively large percentage, 40.7% of respondents who were sexually assaulted, reported that they had forgotten some or all of what happened to them during the attack.

Very few respondents, 2.9%, contacted a sexual assault or rape crisis line. Of the 11 respondents who contacted a crisis line, 90.0% did report they were either very satisfied or satisfied with the service provided.

### Respondents Report Very Little Alcohol or Drug Involvement in the Assault

According to survey respondents who were sexually assaulted, the perpetrator was not commonly under the influence of drugs or alcohol during the attack.

Approximately one-quarter (24.3%) of respondents sexually assaulted reported the attacker was under the influence of alcohol. In 2.6% of the instances, the attacker was reportedly under the influence of drugs, and in 5.6% of the instances, the attacker was under the influence of both drugs and alcohol. However, in over two-thirds of the cases, 67.5%, the respondent reported the attacker was not under the influence of either drugs or alcohol.

When asked if the respondent was under the influence of drugs or alco-

<b>Alcohol &amp; drug use during sexual assaults</b>		
	<b>NUMBER</b>	<b>%</b>
<b>Was perpetrator under the influence of drugs/alcohol?</b>		
<b>ALCOHOL</b>	74	24.3%
<b>DRUGS</b>	8	2.6%
<b>BOTH ALCOHOL/DRUGS</b>	17	5.6%
<b>NEITHER</b>	206	67.5%
<b>Were you using drugs or alcohol?</b>		
<b>ALCOHOL</b>	37	9.9%
<b>DRUGS</b>	5	1.3%
<b>BOTH ALCOHOL/DRUGS</b>	5	1.3%
<b>NEITHER</b>	326	87.4%

hol at the time of the attack, 87.4% reported they were not under the influence of either. Very few respondents reported they were under the influence of alcohol (9.9%) at the time of the attack, and an even smaller proportion (1.3%) reported they were under the influence of drugs at the time of the attack.

## Impacts of Sexual Violence on Victims

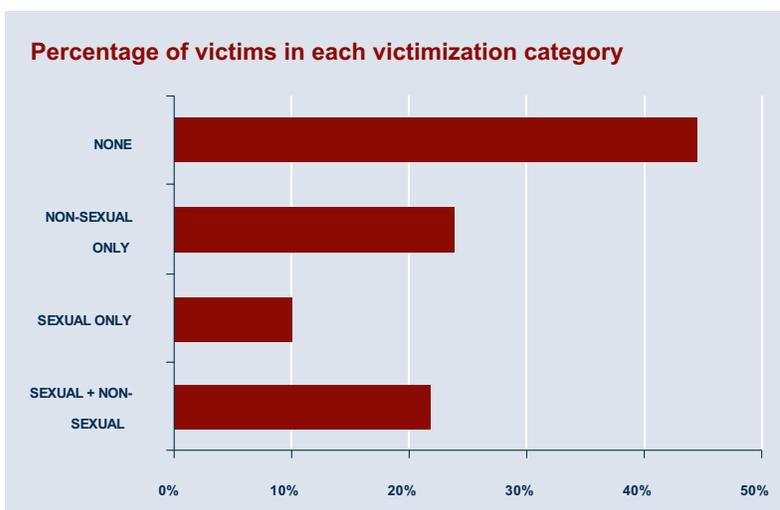
In addition to sexual victimization, the survey also questioned respondents about other types of traumatic events they may have experienced during their lifetime. This allowed for comparisons to be drawn between non-victims, victims of non-sexual violence, victims of sexual violence, and victims of both. Issues related to health and mental health were examined, including Posttraumatic Stress Disorder (PTSD) and depression. In addition, impacts on perceptions of community and daily activities were assessed. Lastly, respondents were asked about services in their communities and recommendations they would make to victims of sexual assault.

### Sexual Assault Victims Are More Likely to Experience Other Types of Traumatic Events As Well

Along with sexual assault experiences, survey respondents were questioned regarding other types of traumatic events they may have witnessed or experienced during their lifetime. Other types of traumatic events included seeing someone violently injured or killed, being stalked, being beaten or hurt badly enough to see a doctor, or having a friend or family member that was killed. Close to one-half of all respondents, 45.5% had experienced one or more of these events.

When both sexual and non-sexual victimization experiences are considered together, we find that more than half of all women interviewed (55.5%) had experienced some type of traumatic event during their lives. Interestingly, women who had suffered some type of sexual assault during their lives were significantly more likely to have experienced a non-sexual victimization event as well. Slightly over two-thirds of sexual assault victims, 68.5%, also experi-

enced a non-sexual traumatic event, compared to about half as many (34.8%) of those who had never been sexually assaulted. The Washington State Survey found, similarly, that sexual assault victims were more likely to have experienced all of the other types of traumatic events when compared to non-victims (“Sexual Assault Experiences and Perceptions of Community Response to Sexual Assault: A Survey of Washington State Women”, Lucy Berliner & David Fine, Harborview Center for Sexual Assault and Traumatic Stress, November 2001).



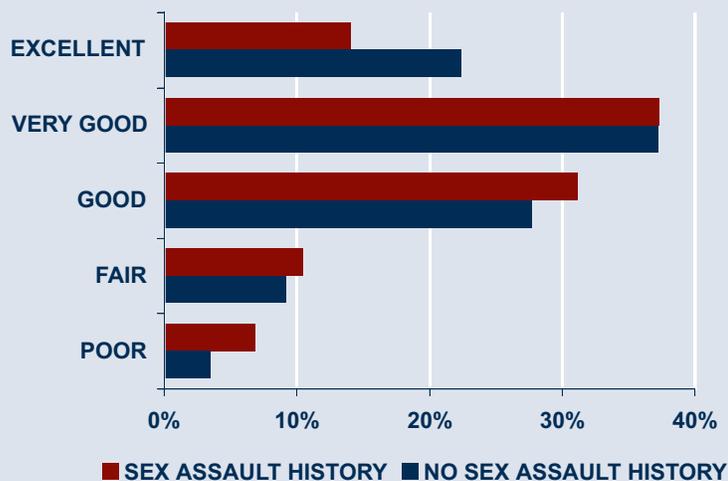
### Victims of Sexual Assault Rate Their Overall Health as Less Positive Than Non-Victims of Sexual Assault

Long after a traumatic event is over, victims are often left experiencing the impact on their lives. Some of the most widely studied effects of rape and sexual assault are Posttraumatic Stress Disorder (PTSD), depression, drug and alcohol use, and negative overall health status. According to the National Center for PTSD, Posttraumatic Stress Disorder involves a pattern of symptoms that some individuals develop after experiencing a traumatic event such as sexual assault. Symptoms of PTSD include repeated thoughts of the assault; memories and nightmares; avoidance of thoughts, feelings, and situations related to the assault; and increased arousal (e.g., difficulty sleeping and concentrating, jumpiness, irritability). ([http://www.ncptsd.va.gov/facts/specific/fs\\_female\\_sex\\_assault.html](http://www.ncptsd.va.gov/facts/specific/fs_female_sex_assault.html).) Living with these types of symptoms can dramatically reduce an individual's ability to cope with life in a healthy manner.

The findings from the National Women's Study confirm the mental health impacts of rape. It found that rape victims were 6.2 times more likely to develop PTSD than women who had never been victims of crime (31% vs. 5%). Additionally, rape victims were three times more likely to have ever had a Major Depressive Episode (30% vs. 10%), and 3.5 times more likely to be currently experiencing a Major Depressive Episode (21% vs. 6%). Further, rape victims had higher rates than non-victims of drug and alcohol consumption, and a greater likelihood of having drug and alcohol-related problems (<http://www.nvaw.org/research/mentalimpact.shtml>).

This survey found that of all women who had been sexually victimized, nearly four times as many had met diagnostic criteria for PTSD at some point in their lives when compared to non-sexual assault victims, 39.1% vs. 10.9%. Sexual assault victims were more than twice as likely to have met diagnostic criteria for a Major Depressive Episode, 55.0% vs. 24.6%.

**Overall health rating by sexual assault history**



Those with a history of sexual assault were less likely to rate their overall health as excellent to very good (51.4% vs. 59.5%), and more likely to rate themselves as being in poor health (6.9% vs. 3.6%). Victims were also more likely to report drinking two to three times per week or more, 8.4% compared to 4.8%. In addition, victims of sexual assault were more than five times as likely to consume more than four drinks at a time, 13.8% vs. only 2.5% for those with no history of sexual assault. Consuming five or more drinks in one sitting is widely agreed upon as a marker for problem drinking, or binge drinking. Two percent (2.1%) of women with a sexual victimization experience reported using drugs in the previous 30 days, while none of the women without a sexual victimization history responded likewise.

**Overall health measures by sexual assault history**

	<b>SEX ASSLT HISTORY</b>	<b>NO SEX ASSLT HISTORY</b>
<b>PTSD</b>	39.1%	10.9%
<b>DEPRESSION</b>	55.0%	24.6%
<b>ALCOHOL CONSUMPTION</b>		
Never	64.5%	80.3%
Once a month or less	17.4%	9.8%
2-4 times a month	9.7%	5.1%
2-3 times a week	5.1%	3.3%
4 or more times a week	3.3%	1.6%
<b>ALCOHOL QUANTITY</b>		
Four or less at a time	30.4%	18.9%
Five or more at a time	4.9%	0.5%
<b>DRUG USE IN PAST 30 DAYS</b>	2.1%	0.0%

**Victims of Sexual Trauma Are More Likely Than Victims of Non-Sexual Trauma to Suffer Negative Health & Mental Health Impacts**

Survey respondents were broken down into four mutually exclusive categories and analyzed in terms of mental health and life impacts. The four categories included: non-victims, victims of non-sexual traumatic experiences only, victims of sexual assaults only, and victims of both sexual and non-sexual traumatic experiences.

Women with no victimization history of any type had the lowest rates of posttraumatic stress and depression, followed by those with non-sexual victimizations. The next highest rates were seen with those who had histories of sexual trauma only, and lastly, women who had both sexual and non-sexual traumas had the highest rates of depression and PTSD.

Looking at overall health ratings, we find a similar, but

slightly different pattern. Just 2.6% of non-victims rated their health as being poor, followed by 4.1% of sexual assault only victims, 5.5% of victims of non-sexual trauma, and 8.2% of victims of both. Victims of non-sexual traumatic experiences were the least likely to drink 2 to 3 or more times per week (2.4%), while those with both types of victimizations were the most likely (8.6%). A dramatic difference was seen between non-victims and victims of both types of violence, with regards to binge drinking. Only 1.1% of non-victims reported drinking more than four drinks at one sitting, compared to 15.0% of victims experiencing both sexual and non-sexual trauma. Eight percent of women with a sexual assault history alone reported this type of drinking. Drug use was extremely uncommon, with only sexual assault victims (0.8%) and those experiencing both types of victimizations (2.6%) reporting any drug use at all.

The statistics described here represent a troublesome situation. This study found that women who are sexual-

**Overall health measures by total victimization history**

	<b>NON-VICTIMS</b>	<b>NON-SEXUAL ONLY</b>	<b>SEXUAL ASSAULT ONLY</b>	<b>SEXUAL + NON-SEXUAL</b>
<b>PTSD</b>	7.2%	17.7%	23.5%	46.0%
<b>DEPRESSION</b>	20.1%	32.4%	43.9%	60.1%
<b>ALCOHOL CONSUMPTION</b>				
Never	83.0%	75.7%	78.9%	57.8%
Once a month or less	7.3%	14.4%	9.8%	20.9%
2-4 times a month	3.7%	7.5%	3.3%	12.7%
2-3 times a week	4.0%	1.7%	4.1%	5.6%
4 or more times a week	2.0%	0.7%	4.1%	3.0%
<b>ALCOHOL QUANTITY</b>				
Four or less at a time	98.9%	95.7%	92.0%	85.0%
Five or more at a time	1.1%	4.3%	8.0%	15.0%
<b>DRUG USE IN THE PAST 30 DAYS</b>	0.0%	0.0%	0.8%	2.6%

ly victimized are at an increased risk of being victimized non-sexually. From this section, we learn that victims with a combination of sexual and non-sexual traumatic events are experiencing negative life impacts at higher rates than those with sexual assault histories alone. This highlights the importance of sexual victimization as a risk factor for subsequent victimization experiences, which may tend to compound the negative health and mental health impacts on the victim.

### Suffering Multiple Sexual Assaults is Likely to Damage Trust Even Further

It is important to recognize that many victims will continue experiencing reactions to a sexual assault long after the assault itself is over. One of the most common long-term effects of sexual victimization is a loss of trust in other people

(<http://www.cdc.gov/ncipc/factsheets/svfacts.htm>).

Although the percentages were very high for both groups, women who reported multiple sexual assaults during their lifetime were significantly more likely to say that their level of trust has been negatively impacted when compared to those who reported only one sexual assault, 92.4% vs. 75.3%. When asked about other impacts of sexual victimization on daily functioning and attitudes, it was found that women experiencing multiple sexual assaults were much more likely to affirm that it had impacted how they feel about themselves (85.4%) when compared to those who experienced a single sexual assault (62.2%). More than half of both groups reported changing their daily activities as a result of the victimization, 52.1% of those with one sexual assault, and 61.6% of those with multiple assaults. In addition, nearly twenty percent (19.8%) of those who were victimized multiple times moved in response to the

assaults. Slightly fewer of those with one assault, 16.9%, changed where they lived.

When victims of sexual assault only were compared to victims of both sexual and non-sexual traumas, several significant differences emerged. The greatest degree of difference was seen with time taken off from childcare. Just two percent (1.9%) of those with a sexual assault only responded as having taken time off from childcare compared to 15.2% of those with both types of victimization. Those who had experienced both types of traumatic experiences were also more likely to report that it had negatively impacted their trust, 86.7% vs. 72.4%. In addition, these respondents were significantly more likely to have changed their daily activities, 59.8% compared to 33.0%. Although it did not quite reach the level of significance, 71.7% of victims of both sexual and non-sexual trauma reported an impact on how they feel about themselves, compared with 61.3% of victims of sexual assault only. Additionally, nearly twice as many women with both sexual and non-sexual victimization changed where they lived, 17.3% vs. 9.4%.

#### Impact of victimization by number of sexual assaults

	ONE SEXUAL ASSAULT	MULTIPLE SEXUAL ASSAULTS
Did you have to take time off from work?	13.0%	5.4%
Did you have to take time off from childcare?	6.6%	13.0%
Did you have to take time off from school?	15.6%	12.3%
Did it impact your trust?	75.3%	92.4%
Did it impact how you feel about yourself?	62.2%	85.4%
Did you change your daily activities?	52.1%	61.6%
Did you change where you lived?	16.9%	19.8%

#### By type of victimization

	NON- SEXUAL ONLY	SEXUAL + NON- SEXUAL
Did you have to take time off from work?	4.7%	9.3%
Did you have to take time off from childcare?	1.9%	15.2%
Did you have to take time off from school?	8.5%	14.1%
Did it impact your trust?	72.4%	86.7%
Did it impact how you feel about yourself?	61.3%	71.7%
Did you change your daily activities?	33.0%	59.8%
Did you change where you lived?	9.4%	17.3%

## Victims Suffering From PTSD & Depression Are Likely to Experience Greater Disruptions In Their Daily Activities

Some of the most striking differences in life impact of sexual victimization were uncovered when victims who met diagnostic criteria for PTSD or depression at some point in their lives were compared with victims who did not meet these criteria. Across every measure of life impact examined, those who met the criteria for posttraumatic stress scored significantly more negatively than those who did not. The same differences were seen between groups when looking at women who met the criteria for depression versus women who did not, in all but two categories: impact on trust and changing where they lived.

Looking at respondents who scored positively for PTSD, nearly five times as many of these women had to take time off from school (24.3% vs. 5.2%), more than four times as many took time off from childcare (21.0% vs. 4.7%), and more than three times as many took time off from work (13.1% vs. 3.8%). Many more women who scored as having PTSD reported that they changed their daily activities as a result of their victimization, and a higher percentage even moved. Additionally, respondents with posttraumatic stress were much more likely to experience negative consequences as far as their trust and feelings about themselves.

Of women who scored positively for depression, almost six times as many took time away from childcare compared to women who were not depressed, 17.9% vs. 3.1% respectively. Approximately three times as many had to take time off from school (18.1% vs. 5.6%), as well as work (11.3% vs. 3.8%). Further, significantly more of the women who have experienced depression

### Impact of victimization by PTSD

	NO PTSD	PTSD
Did you have to take time off from work?	3.8%	13.1%
Did you have to take time off from childcare?	4.7%	21.0%
Did you have to take time off from school?	5.2%	24.3%
Did it impact your trust?	74.6%	93.4%
Did it impact how you feel about yourself?	58.2%	83.8%
Did you change your daily activities?	39.1%	69.9%
Did you change where you lived?	11.4%	19.6%

### By depression

	NOT DEPRESSED	DEPRESSED
Did you have to take time off from work?	3.8%	11.3%
Did you have to take time off from childcare?	3.1%	17.9%
Did you have to take time off from school?	5.6%	18.1%
Did it impact your trust?	78.6%	85.6%
Did it impact how you feel about yourself?	53.1%	81.6%
Did you change your daily activities?	45.8%	56.6%
Did you change where you lived?	11.2%	18.0%

reported a negative impact on their feelings about themselves, and said that they had changed their daily activities as a result of the sexual crimes committed against them.

## Sexual Assault Victims Are More Likely to Believe That Community Response to Violence Has Improved

The women surveyed were asked about their knowledge of community services and perceptions of their community's response to violence. More than half of all respondents were aware that services are available to victims in their community (61.9%), while one-third (34.0%) said they did not know. Women with a sexual assault history were significantly less likely to say they didn't know if services were available (28.9%) when compared to women without a history of sexual assault (36.4%).

Looking at responses across all categories of victimization, respondents' awareness of services increased according to their level of victimization. Those without sexual or non-sexual victimization experiences were the most likely to report not knowing if services are available (39.0%), followed by victims of non-sexual crime

only (31.3%) and sexual assault only (33.9%). Lastly, victims of both sexual and non-sexual crime were least likely to be unaware of services (26.6%).

Women were also asked if their community has a rape crisis center. Overall, there was a fairly even divide between respondents who said yes, 51.4%, and respondents who said they did not know, 43.7%. As one might expect, sexual assault victims were significantly more likely than non-sexual assault victims to be aware of a rape crisis center, 57.0% vs. 48.8%.

When responses were broken down across all victimization categories, we see the same pattern emerge as before. Non-victims were the least likely to know about a rape crisis center in their community (45.9%), while victims of both types of crime were the most likely (57.1%).

Interestingly, when respondents were questioned about their community’s response to violence, sexual assault victims were significantly more likely than non-sexual assault victims to believe that community response has improved compared to how it was in the past. Eighty percent (79.5%) of sexual assault victims reported that community response is better now than in the past,

compared to 56.9% of non-sexual assault victims. Conversely, twice as many non-sexual assault victims reported community response has remained the same or gotten worse when compared to victims, 43.1% vs. 20.5%.

When all categories are considered, we find that victims of sexual assault only are more likely than other groups to respond that community response to violence is better now than in the past (79.5%). Whereas, victims of non-sexual traumatic experiences were the least likely to report that community response has improved (47.8%), even less so than non-victims of either type of violence (56.4%).

These responses form an interesting anomaly. One possibility is that sexual assault victims are in fact being influenced by sexual assault awareness efforts. These victims may be paying special attention to publicity being aimed at this issue, and feel like society is more sympathetic now than it was at the time they were victimized. Keep in mind that many of the women were sexually assaulted when they were children and adolescents, and increasingly, media and public attention is being focused on issues surrounding sexual violence. Curiously, victims of non-sexual crimes appear to have

a more negative outlook of community response than either sexual assault victims or non-victims. Perhaps this is because they are experiencing a bitter response one might normally expect after being victimized, while at the same time, they are not as affected by efforts targeted at increasing sexual violence awareness.

<b>Awareness of services &amp; view of community response</b>				
	<b>NON-VICTIMS</b>	<b>NON-SEXUAL ONLY</b>	<b>SEXUAL ASSAULT ONLY</b>	<b>SEXUAL + NON-SEXUAL</b>
<b>Does your community have services for victims?</b>				
YES	58.2%	63.2%	62.8%	67.8%
NO	2.8%	5.5%	3.3%	5.6%
DON'T KNOW	39.0%	31.3%	33.9%	26.6%
<b>Does your community have a rape crisis center?</b>				
YES	45.9%	54.1%	56.6%	57.1%
NO	4.8%	6.2%	4.1%	4.1%
DON'T KNOW	49.3%	39.7%	39.3%	38.7%
<b>Is your community's response to violence?</b>				
BETTER	56.4%	47.8%	79.5%	66.8%
WORSE	2.0%	4.8%	0.0%	3.4%
ABOUT THE SAME	41.6%	47.4%	20.5%	29.8%

## Victims of Sexual Assault Are More Likely to Recommend Not Reporting to Police

The survey asked respondents what they would recommend in the case of someone close to them being raped or sexually assaulted. The women were asked to respond “yes” or “no” to a specific set of recommendations, and were also given the opportunity to offer their own recommendations. Women most frequently said they would recommend visiting a doctor or hospital (96.5%), followed by reporting to police (95.4%). Also common were recommendations to get counseling (95.3%), talk to a partner (88.0%), take safety precautions (87.3%), and take legal action (84.9%). More than half of all respondents also said they would recommend talking to friends and relatives, 77.9% and 77.1% respectively. Fewer respondents said they would recommend changing lifestyles (37.1%), moving (14.5%), or keeping to oneself (4.4%).

There appears to be a substantial disconnect between the advice women would give to someone close to them, and what they are actually doing themselves following a sexual assault. Less than five percent of all respondents said they would not recommend reporting

to police, and yet, as you will learn in the next section, reporting is quite uncommon.

When respondents were divided into those who had and had not experienced a sexual assault, two main differences arose. Sexual assault victims were significantly more likely to say that they would not recommend reporting to police, 6.6% compared to 3.4% of non-sexual assault victims. In addition, non-victims were significantly more likely to recommend changing lifestyles, 41.4% vs. 28.4%.

This last statistic underscores a pervasive mentality in our society. Too often, sexual assault victims are blamed in some way for the crimes that have been committed against them. Victims may be blamed for the clothes they were wearing, or for being at a particular location, or because they had consumed alcohol. In order to curb this type of violence, and minimize the painful effects on its victims, it is imperative that our society recognizes victims are not at fault. Victims of vehicle burglary are not blamed for leaving their car unlocked, and victims of sexual violence deserve no less. Potential victims should always exercise caution in their choices of peers, activities, and environments. However, once a sexual assault has occurred, it should not be considered the victim’s fault. Regardless of the situation involved, the message needs to be clear that this type of violence will not be tolerated in our communities.

### What would you recommend if someone close to you was raped or sexually assaulted?

	NON-SEX ASSAULT VICTIM	SEX ASSAULT VICTIM
Report to police	96.6%	93.4%
Go to doctor/hospital	96.5%	96.9%
Get counseling	95.7%	95.7%
Take safety precautions	88.2%	86.4%
Keep to self	4.3%	4.6%
Talk to partner	88.4%	87.7%
Talk to friends	77.2%	80.3%
Talk to relatives	78.9%	74.2%
Change lifestyles	41.4%	28.4%
Move	14.7%	14.6%
Take legal action	86.4%	82.6%

## Justice System, Reporting, and Sexual Assault

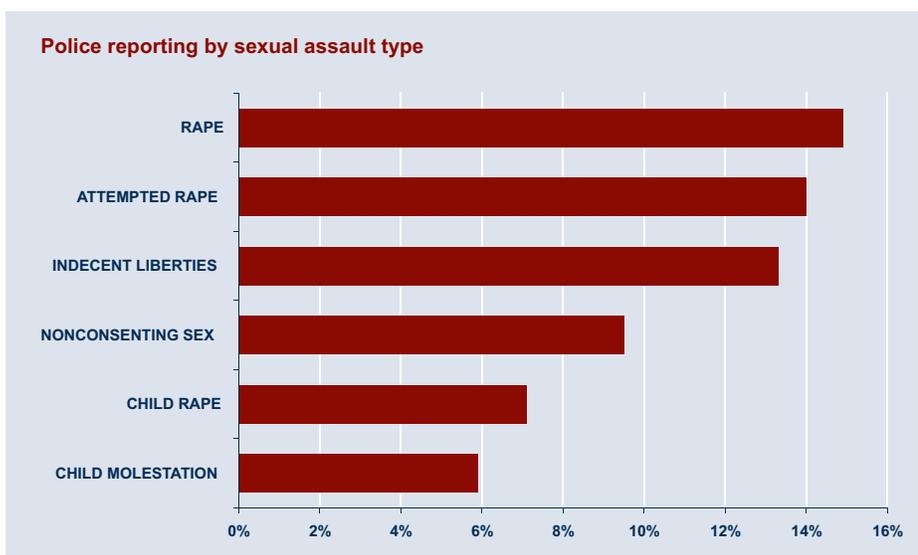
Reporting a sexual assault to police is a very personal decision. Most respondents reported being assaulted by someone they knew well. In many cases, this was a family member. Most respondents were more fearful of others finding out about the assault than they were about sexually transmitted diseases or pregnancy. Within this context, sexual assaults are experiences victims, in many cases, want to keep undisclosed. Once an assault is reported to police, an investigation will begin that will draw attention to the attack. Although this may not be “public” attention, it may be sufficient attention to dissuade victims from reporting.

For these reasons, and likely many others, most respondents in this survey decided not to report the assault to the police. In fact, only 9.8% of respondents who were assaulted reported the attack to the police. Nearly half of those who contacted police, 48.6%, did so within 24 hours of the attack. One-quarter, 24.3%, of those reporting an assault to police did so after more than a year had passed.

Another factor that may influence the victim’s decision to report is how they are treated by the police officers who are involved in the case. Almost two-thirds (62.5%) of those respondents reporting an assault to police said they were either dissatisfied or very dissatisfied with the police. Most of these reported in the category of very dissatisfied. There is little question that the experience a victim of sexual assault has with police when reporting will become known by others and will have an impact on their decision to report

were they to become victims themselves. Only nine (22.5% of those reporting to police) noted they had a victim advocate to assist them through the criminal justice process. However, taking all of this into account, 83.8% of those who reported the assault to the police responded they definitely would report a similar incident in the future.

When asked why a sexual assault was not reported to the police, over one-quarter (28.9%) reported they were simply too young to understand what had occurred. Nearly one-quarter, 21.4% reported the incident was



too embarrassing to report to law enforcement. Looking at the remaining reasons noted for not reporting the assault, 16.8% felt the offense was too minor, 11.9% feared the offender, 10.5% felt they wouldn't be believed, and 10.5% believed the police wouldn't do anything.

Of those who reported the sexual assault to police, only 37.1% reported that charges were filed against the perpetrator. When asked why charges were not filed, some victims were told the assault had occurred too long ago; some were told there was not enough evidence to proceed; and some victims simply decided they didn't want the case to proceed. A total of eleven respondents reported that the attacker was eventually found guilty of the assault. When asked if the respondent would suggest others pursue a criminal justice action if they were sexually assaulted, 77.5% reported they definitely would.

It is important to put these numbers into context. A total of 391 survey respondents reported at least one sexual assault had occurred during their lifetime. A total of 11 individuals were eventually found guilty of some form of sexual assault. According to the responses in this sur-

vey, for every 36 sexual assaults that occur, one person will be convicted of the assault. Of a total of 391 respondents sexually assaulted, 37 reported the assault to the police. According to the responses in this survey, for every 11 sexual assaults that occur, one is reported to the police. These figures must be tempered by the complexities involved in deciding when, if, and to whom victims of sexual assault report their attacks. Reporting is not an easy decision, and because it is the victim who will bear the consequences that come with reporting, it a personal decision she must make.

### Victims Reporting to Police Are More Likely to Seek Services

Of the various types of sexual assault, those who are victims of rape, attempted rape, and indecent liberties were the most likely to report the offense to police. Still, only about 14% of these victims reported to law enforcement. Respondents who were victims of child rape and child molestation were the least likely to have reported the incident to police, 7.1% and 5.9% respectively. These figures are not surprising; as many of these victims noted they were simply too young to understand what had happened to them. Only 9.5% of victims of non-consenting sex reported to police. Most of these were victims who had been drinking when the assault occurred and may have felt some level of personal accountability for the assault.

Respondents who reported the assault to police were more likely to seek assistance when compared to those who did not report. Nearly half (44.4%) who reported the assault to police sought medical assistance compared to only 4.5% of those who did not report. Similarly, over two-thirds (67.6%) who reported the assault to police sought counseling services, compared to only 26.4% of those not reporting. Nearly one-quarter (22.9%) who reported the assault to police sought assistance from a rape crisis

#### Police reporting compared with other sexual assault experiences

	NOT REPORTED TO POLICE	REPORTED TO POLICE
<b>Sought Medical Assistance</b>		
NO	95.5%	55.6%
YES	4.5%	44.4%
<b>Sought Counseling</b>		
NO	73.6%	32.4%
YES	26.4%	67.6%
<b>Used Crisis Line</b>		
NO	99.0%	77.1%
YES	1.0%	22.9%
<b>Injured During Assault</b>		
NO	78.6%	56.8%
YES	21.4%	43.2%

line, while only 1.0% of those not reporting did similarly.

It is important to note that many factors play a role in decisions to seek assistance and to report assaults to police. For example, respondents reporting some form of injury were three times more likely to seek medical assistance

compared to those reporting no injury as a result of the assault, 18.8% versus 5.7%. Similarly, those respondents who were older when they experienced their assaults were more likely to report to police than those who were quite young when assaulted. Only 9.6% of those assaulted when less than nine years of age reported an assault to police, while 19.0% of those 21 and over reported the assault to police.

### Victim’s Experiences Differ by Age

When examining victim’s experiences and concerns associated with the sexual assault by age categories, several differences emerge. Those who were assaulted under the age of 18 were more likely to be assaulted by a family member than those who were 18 and older, 29.6% versus 18.8%. Those over 18 were more likely to be assaulted by a stranger (14.5%) when compared to those under 18 years of age (5.6%). The stranger assault phenomenon is even more pronounced when examining more discrete age groups. Only 2.3% of those five or under were assaulted by a stranger; 4.8% of those between six and ten were assaulted by a stranger, while 28.6% of those between 31 and 40 were assaulted by a stranger. Only 9.3% of those assaulted between the ages of 18 and 22 were attacked by family

## Relationships, threats, and weapons

### Victim and Offender Relationship

	FAMILY	OTHERWISE KNOWN	STRANGER
<b>UNDER 18</b>	29.6%	64.8%	5.6%
<b>18 AND OVER</b>	18.8%	66.7%	14.5%

### Victim Threat

	THREAT	PERCEIVED THREAT
<b>UNDER 18</b>	22.2%	28.1%
<b>18 AND OVER</b>	27.1%	40.7%

### Weapon Use During Assault

	GUN	KNIFE	OTHER WEAPON	NO WEAPON
<b>UNDER 18</b>	1.6%	1.9%	1.9%	94.6%
<b>18 AND OVER</b>	6.7%	0.0%	6.7%	86.7%

members. Most of this group, 76.7%, was attacked by someone otherwise known to the victim.

Approximately the same proportion of those victims over and under 18 years of age were actually threatened during the course of the attack. Examining actual threats, 22.2% of those under 18 were threatened during the assault, and 27.1% of those 18 and older were threatened during the assault. However, victims under 18 years of age were less likely to perceive a threat (meaning the attacker didn’t actually voice a specific threat) to their own life or someone else’s life during the course of the attack when compared to those 18 and older, 28.1% versus 40.7%. Those over 18 were also more likely to have a weapon involved during the assault. In 94.6% of the assaults on those under 18, no weapon was involved compared to 86.7% for those 18 and older.

Respondents victimized when they were 18 and older were more likely to report being concerned about the physical consequences of the attack. These respondents were more likely to report being concerned about getting AIDS/HIV or some other form of sexually transmitted disease as a result of the assault. Examining survey responses, 25.4% of respondents assaulted when 18 or older were concerned about getting

AIDS/HIV and 37.3% were concerned about getting some other sexually transmitted disease. For those who were assaulted when under 18 years of age, 14.8% were concerned about getting AIDS/HIV and 19.4% were concerned about getting some other sexually transmitted disease. The group most likely to report concern over getting a sexually transmitted disease was those respondents assaulted when in between 23 to 30 years of age, where 54.5% voiced this concern. Those 18 and older were also twice as likely to be concerned about getting pregnant as a result of the attack, 41.7% for those 18 and old versus 23.3% for those under 18. Nearly half, 48.7%, of those victimized between 18 and 22 years of age voiced a pregnancy concern.

Younger respondents who were sexually assaulted were more concerned about others finding out about the assault. When asked if they were concerned about family members finding out about the sexual assault, 70.7% of respondents assaulted when under 18 voiced this concern compared to 53.4% of those 18 and older. Similarly, when asked if they were concerned about others outside of family finding out about the assault, 66.2% of those under 18 voiced this concern compared to 59.3% of those 18 and older. Respondents who were assaulted when between 11 and 17 years of age were most likely to voice concern about family (74.2%) or others (69.5%) discovering the attack. Younger victims also more commonly reported concern that people would believe the assault was their fault. For victims under 18, 65.2% reported a concern that people would believe the assault was their own fault compared to 49.2% of those assaulted when 18 or older.

## Demographics

When examining the characteristics of the survey respondent population with the Utah population some differences and similarities were discovered. All comparisons with Utah’s general population focus on females who are 18 or older, similar to the group surveyed. All references to “Utah’s population” in the paragraphs that follow includes only females 18 and older in Utah’s population.

The survey respondents were generally older than Utah’s demographic would indicate for this group. Only 2.5% of respondents were between 18 and 20 years of age, while 9.6% of Utah’s population is in this same age range. Similarly, 4.9% of respondents were between 21 and 24 years of age compared to 11.5% of

Utah’s population. However, the majority of survey respondents and the majority of Utah’s population fell between 25 and 55 years of age.

Nearly the same proportion of respondents and Utah population were white, 94.5% and 94.1% respectively.

### Demographics: Age, Race, and Ethnicity

<i>FEMALE AGE</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
18 TO 20	30	2.5%	73,361	9.6%
21 TO 24	60	4.9%	87,692	11.5%
25 TO 34	270	22.1%	157,479	20.6%
35 TO 44	215	17.6%	147,960	19.3%
45 TO 54	203	16.6%	118,762	15.5%
55 TO 64	169	13.8%	72,988	9.5%
65 TO 74	158	12.9%	53,832	7.0%
75 TO 84	104	8.5%	38,588	5.0%
85 TO 100	14	1.1%	14,574	1.9%
TOTAL	1,223		765,236	

<i>FEMALE RACE</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
WHITE	1,136	94.5%	701,686	94.1%
BLACK	6	0.5%	5,260	0.7%
ASIAN	9	0.7%	9,507	1.3%
PACIFIC ISLANDER	5	0.4%	17,954	2.4%
AMERICAN INDIAN	2	0.2%	4,847	0.7%
OTHER	44	3.7%	6,128	0.8%
TOTAL	1,202		745,382	

<i>FEMALE ETHNICITY</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
HISPANIC	86	7.1%	64,698	8.0%
NOT HISPANIC	1,132	92.9%	745,382	92.0%
TOTAL	1,218		810,080	

Asians, Pacific Islanders, and Native Americans were somewhat underrepresented among survey respondents. There was a good match in terms of ethnicity with 7.1% of respondents being of Hispanic origin and 8.0% of Utah population being of Hispanic origin.

There were no outstanding differences in terms of reported income of survey respondents when compared to the similar Utah population. However, when evaluating marital status, there were some outstanding differences. Only 7.1% of survey respondents reported being single/never married compared to 20.0% of Utah’s demographic. Over three-quarters of respondents (77.5%) were married, while 61.6% of Utah’s

comparable demographic were married. These differences are likely tied to some of the age differences reported previously. As our survey respondents were typically older than the general population, they were also more likely to be married than single.

Finally, the survey respondents tended to be more educated than most females who are 18 or older in Utah’s population. Only 6.2% of survey respondents had no high school diploma compared to 12.9% in Utah’s population. Conversely, 28.8% of survey respondents had an undergraduate or graduate degree from college compared to 19.1% in Utah’s general population.

### Demographics: Income, Marital Status, and Education

<i>INCOME</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
LESS THAN \$10,000	47	4.8%	41,959	6.0%
\$10,000 TO \$14,999	58	5.9%	33,952	4.8%
\$15,000 TO \$24,999	108	11.0%	83,121	11.8%
\$25,000 TO \$34,999	152	15.4%	93,119	13.3%
\$35,000 TO \$49,999	171	17.4%	133,421	19.0%
\$50,000 TO \$74,999	214	21.7%	158,405	22.6%
\$75,000 TO \$99,999	132	13.4%	79,659	11.3%
\$100,000 TO \$149,999	65	6.6%	52,641	7.5%
\$150,000 TO \$199,999	16	1.6%	12,924	1.8%
\$200,000 OR MORE	21	2.1%	12,732	1.8%
<b>TOTAL</b>	<b>984</b>		<b>701,933</b>	

<i>FEMALE MARITAL STATUS</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
MARRIED	944	77.5%	461,818	61.6%
SINGLE	87	7.1%	149,814	20.0%
DIVORCED	78	6.4%	73,024	9.7%
WIDOWED	93	7.6%	54,216	7.2%
SEPARATED	16	1.3%	11,333	1.5%
<b>TOTAL</b>	<b>1,218</b>		<b>750,205</b>	

<i>FEMALE EDUCATION</i>	SURVEY SAMPLE		UTAH POPULATION	
	NUMBER	%	NUMBER	%
LESS THAN 9TH GRADE	17	1.4%	20,980	2.7%
9TH TO 12TH, NO DIPLOMA	59	4.8%	77,538	10.1%
HIGH SCHOOL GRADUATE/EQUIVALENT	271	22.3%	204,396	26.7%
SOME COLLEGE, NO DEGREE	341	28.0%	251,399	32.8%
ASSOCIATE DEGREE	179	14.7%	66,204	8.6%
BACHELOR’S DEGREE	262	21.5%	111,853	14.6%
GRADUATE OR PROFESSIONAL DEGREE	88	7.2%	34,177	4.5%
	<b>1,217</b>		<b>766,547</b>	