

Title IX: What Lies in the Wake of Sexual Assault

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Survivors

- Trauma vs crisis
 - Trauma – extreme versions of stressful events, with continual effects even after the event has passed. Memories of traumatic events linger, with continued arousal
 - Crisis – a threat to homeostasis, a disruption of coping and problem solving skills, which does not necessarily present as a life threatening experience
- Sexual assault is seen as a trauma



Survivors: processing trauma

- Processing of traumatic events is different from processing of ordinary or novel events
 - Trauma is first organized on a perceptual level, based on sensory components (smell, sound, feelings)
 - Day to day events are recorded with sensory and narrative together



Survivors: mental health after trauma

- Acute Stress Disorder (ASD):
 - Develops within one month of traumatic stressor, lasts from 2 days-4 weeks
 - Traumatic event is persistently re-experienced
- Posttraumatic Stress Disorder (PTSD):
 - Acute if symptoms last less than 3 months, chronic if more than 3, delayed onset if symptoms begin six months after the stressor
 - Traumatic event is persistently re-experienced in one or more ways: relieved through recurrent recollection of the event, distressing dreams, exposure to cues or reminders of the event, physical reactivity of the event
- Rape Trauma Syndrome (RTS)
 - Nursing diagnosis used by SANEs, historically was used before PTSD was created and defined by the DSM
 - Acute stage and long term processes of reorganization



Survivors: common reactions to traumatic events

- Physical:
 - GI: nausea, indigestion, stomach upset
 - Cardiovascular: flushing, palpitations, tachycardia, sweating palms, dry mouth, chills
 - Respiratory: shortness of breath, pressure/tightness around the chest
 - Neuromuscular: numbness and tingling of extremities, muscular tension, aches, vision disturbances, exhaustion/fatigue



Survivors: common reactions to traumatic events

- General:
 - Fear for personal safety, distrust of others
 - Anger or outrage
 - Helplessness, hopelessness, powerlessness
 - Sadness or grief
 - Denial, disbelief, or numbness
 - Guilt
- Cognitive:
 - Decreased attention span, poor concentration, calculation difficulties
 - Distortion to memories, distortion to time/orientation



Survivor Supporters

- Who are they?
 - Friends
 - Significant Others
 - Intimate Partners
 - Parents
 - Other Family
 - Staff
 - Faculty



Survivor Supporters Emotions

- Anger
- Guilt
- Denial
- Depression
- Needs for Justice
- Frustration
- Helplessness
- Confusion
- Betrayal
- Fear
- Burdened
- Anxiety



Survivor Supporters

- Women
 - Deepening of intimacy
 - Personal safety
 - All men are evil
- Men
 - All men are evil
 - Anger primary
 - MSO's
 - Sexual Dysfunction
 - Loss of relationship
 - Man as protector



Survivor Supporters

- All
 - Feelings of being able to or not able to help
 - Lack of skills to help
 - Confusion on definitions of assault
 - Not sure where to go for help
 - Burnout
 - Lingerin g guilt



Alleged Offenders and Offenders

- Due process rights
- Title IX Rights
- Remember they are also our students
- Stress of being charged
- Ignorance vs. Predator



Alleged Offenders and Offenders

- Does Texas A&M have alleged offenders and offenders in our campus/community?
- Who are they?
- What can we do as a community to prevent these assaults from happening?



All alleged offenders and offenders are male.

There is no “typical” alleged offender or offender.

They can:

- be male or female;
- come from any race or ethnic background;
- be wealthy or poor;
- do well in school or have learning disabilities and experience challenges in school; and/or
- have no history of any type of offense and pose little risk for re-offense, or can have a history of delinquent and/or sexual abuse behavior and require careful management.

TRUTH

MYTH



An offender is more likely
to assault a partner or
friend than a stranger.

85% of sexual assaults are perpetrated by
someone known to the victim.

TRUTH

Usually (70% of the time), it is in or near
the victim/survivor's place of residence.

MYTH



Most sexual assaults are reported and adjudicated.



On college campuses, although 25% of college women are sexually assaulted by the time they graduate, only 5% of campus sexual assaults (or 1 in 20) are reported



Bystander Intervention

Bystander intervention asks everyone in the community to take responsibility for stopping potentially violent situations from escalating.

[VIDEO...](#)



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