



sexual trauma services of the midlands

Volunteer Voice

December 3, 2009

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December 2009

Sun	Mon	Tue	Wed	Thu	Fri	Sat
		1	2	3 Healthy Start Bash	4	5
6	7	8	9 DIVA Event	10	11	12
13	14	15 Survey Deadline	16	17	18	19
20	21	22	23	24 Holiday Pay!	25 Holiday Pay!	26
27	28 Holiday Pay!	29	30	31 Holiday Pay!	January 1 Holiday Pay!	

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- * Healthy Start Holiday Bash on Thursday, December 3. Celebrate the holidays and share the mission of STSM with families in the community!
- * Speaker's Bureau DIVA Event on Wednesday, December 9. Teach the ladies of DIVA about the mission of STSM and tell them why your volunteer work is so important.
- * Your opinion counts! Please complete our survey by December 15!
<http://www.surveymonkey.com/s/7SLD373>
- * Earn an extra \$175! Holiday Pay of \$35 per 24 hour shift is available for Christmas Eve, Christmas Day, the Monday after Christmas, New Year's Eve, New Year's Day.



Sexual Assault in the GLBTQ Community

Sarah Moran contributed this month's Ask An Advocate column. She is originally from Toledo, Ohio and moved to South Carolina in 2005 to attend USC. After finishing her undergrad in May 2009, Sarah entered graduate school and will receive a Master's in Social Work and a Master's in Public Health in 2012. Sarah volunteers because she cannot bear to think of someone experiencing assault without proper support and advocacy, and because she feels that being an advocate has and will continue to make her a better and more knowledgeable person and future social worker and educator!

Up to 30% of gay men, 57% of lesbians, and 70% of transgendered individuals have been sexually assaulted or abused in their lifetime. Despite this high rate of assault, lesbian, gay, bisexual and transgendered (LGBT) individuals have one of the lowest reporting rates of any subgroup. The unique situations of LGBT survivors may not be recognized by a system that is set up primarily around straight women who are assaulted by men, and hopefully this information will help you advocate for LGBT survivors.

Myths to be aware of:

That LGBT individuals frequently have sadomasochistic sex and that 'rapes' are these situations gotten 'out of control'—this perception is false, and even if true both gay and straight survivors who also participate in S&M deserve equal protection and advocacy

That men cannot or should not be raped by other men and that a woman cannot rape another woman—both are physically possible, though the form of the assault may be different from a heterosexual assault

That domestic violence is only present in opposite-sex relationships—all studies done on domestic violence in same-sex relationships have indicated high frequencies of violence

That all LGBT individuals routinely use drugs that encourage promiscuity, such as ecstasy and crystal meth—only a small minority do, and remember that we advocate just as strongly for survivors with histories of drug use as we do those without

That all LGBT individuals have STI's, including AIDS—while homosexuals have somewhat higher rates of STI's than heterosexuals, assuming that they do will likely be perceived as homophobia

Assaults by heterosexuals and members of the opposite sex

Many assaults on LGBT individuals occur *because* they are LGBT, and are committed by perpetrators of the opposite or same sex who identify as heterosexual. This is particularly true in the case of transgendered individuals, who are usually assaulted because they are transgender rather than because of their gender or sexuality. Hate crimes against gay men that are committed by straight men also often involve sexual assault. Furthermore, someone who has sex exclusively with members of the same sex and is assaulted by a member of the opposite sex may be particularly traumatized by the assault, and this may be exacerbated if medical personnel and law enforcement suspect—or even openly state—that the survivor was 'trying out' heterosexual sex and regretted it, rather than being assaulted. However, it is extremely rare for survivors to falsely report sexual assault, and this is equally true for LGBT survivors.

In some cases, LGBT individuals may have consensual sex with people of the opposite gender. If they disclose this while reporting a sexual assault by someone of the opposite gender, their sexual orientation may be called into question and this history can be used to question whether assault actually occurred. I saw this in a case where a self-identified lesbian was assaulted by a man she had met earlier that day. During the kit, she disclosed that she did occasionally have sex with men, the last time several months prior. The nurse, who had previously seemed sympathetic, questioned whether specific past male sexual partners could have been the actual perpetrator (rather than the man the survivor identified)—a question I have never heard asked of a heterosexual survivor who clearly identified her assailant.



Assaults by other LGBT individuals

Up to 65% of LGBT survivors were assaulted by a current or ex-partner. This makes safety planning incredibly important. When doing safety planning with a survivor in who was assaulted by a partner, be aware that they may not have access to the same resources as a heterosexual survivor. In SC, domestic violence statutes explicitly deny survivors the ability to get an order of protection from a same sex partner, although they may be able to get a restraining order against stalking or harassment. A gay or lesbian survivor may feel unwelcome or ineligible for an emergency shelter that caters primarily to heterosexuals, and transgendered individuals may be outright barred from shelters. Also be aware that child custody, ownership of property, and financial situations in LGBT relationships can be much more complicated than those of heterosexuals due to a lack of clearly defined legal norms. This means that it may be even more difficult for an LGBT survivor to escape an abusive partner.

LGBT survivors also may not have as extensive support systems as heterosexual survivors. They may not be able to discuss the assault with or receive support from friends and family members who are not aware of or do not accept their sexuality or lifestyle. There can also sometimes be a perception within the gay community that to report assault by another LGBT individual is a betrayal because it 'gives the community a bad name.' Like heterosexual survivors, LGBT survivors may lose support *because* they report. This is particularly true when they report an assault by a current or former partner who is prominent in the gay community.

Advocating for a LGBT survivor

There are several unique problems faced by LGBT survivors during the reporting process that you, as an advocate, should be aware of. First, many survivors are afraid to report the assault for fear of being "outed" during the investigation or by the perpetrator. As an advocate, you may need to discuss this with the survivor while reviewing the 'How to Talk to Friends and Family' section of the Handbook, and you may need to help them discuss these concerns with the police. If a survivor is particularly upset about this possibility, discuss anonymous kits with them.

Second, the process of the sexual assault kit may be particularly traumatic. Reasons include that some lesbians may be particularly traumatized by examination from a male doctor, that medical staff may be less familiar with how to conduct on an exam on a male survivor, or that the genitalia of a transgendered or transitioning individual may be different from 'normal.' Survivors of same-sex sexual assault, whether themselves straight or gay, may be questioned in greater detail about the 'mechanics' of their assault. As an advocate, you should empathize with the survivor's emotions, make sure that the survivor is aware of who will be conducting the exam and what it will involve well in advance, and try to make the survivor as comfortable as possible during the exam.

Third, many gay survivors expect to encounter homophobia from police or medical personnel, and may try to disguise their sexuality or fail to report as a result. If you feel that medical personnel or police are homophobic and that this is affecting the quality of services the survivor is receiving, you should support the survivor by showing that you do not view their lifestyle as deviant or disgusting. In serious cases, you may need to pull the homophobic individual or their supervisor aside to discuss the situation.



Is there something you're passionate about you would like to share with other volunteers? Email an article to Mary Dell and you can be featured in Ask An Advocate! If you don't have time to write an article, but have questions about a topic or would like to see something featured in the newsletter or as a Continuing Education event let Mary Dell know and we will try to schedule it!

November Call Totals

Total Hospital Calls: 17

Hospital Calls answered by volunteers: 15

Hospital Calls answered by staff: 2

Total Hotline Calls: 10

Hotline Calls answered by volunteers: 6

Hotline Calls answered by staff: 4

Updates and Other Important Information

- * You have 45 minutes to get to the hospital from the time you receive a call. Please be prepared, take your time, and be safe!
- * Don't forget to pack your copy of the bill in case you need to help a survivor get an anonymous kit.
- * If you need help finding shelter for a survivor please call the hotline and speak to a staff member.

Upcoming Dates to Remember:

Thursday, December 24: Paid Holiday! Office Closed!

Friday, December 25: Paid Holiday! Office Closed!

Monday, December 28: Paid Holiday! Office Closed!

Thursday, December 31: Paid Holiday!

Friday, January 1: Paid Holiday! Office Closed!

Friday, January 29: Speaker's Bureau Event at Allen University from 11:30am—1:30pm

Wednesday, January 13: CE Event

Saturday, February 6—Thursday, February 11: Winter Volunteer Advocate Training

You must attend at least one continuing education event and one anonymous kit training for this fiscal year! Attend early and attend often!