

# **Oxford College Counseling and Career Services and Student Health Services**

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## **Sexual Assault Response Guide**

For Oxford College Faculty and Staff

Oxford College of Emory University

Dear Community Member,

Attached you will find resources to assist you in responding to students' reports of sexual assault. In addition to utilizing the guidelines outlined in this document, we also make available to you copies of the Student Resource Guide. In the event that a student discloses to you his/her experience of sexual assault, we ask that you respond to the student attentively and supportively, utilizing the suggestions highlighted in this document. We also ask that you give to each student a copy of the Student Resource Guide for Sexual Assault, which clearly delineates for students the resources and options available on campus and outside of campus to help students feel safe, heal, and recover from their traumatic experience.

This packet includes:

- Conversational tools for talking with someone who has been sexually assaulted
- A guide to help you in the response and referral process
- A guide to the student's rights and options in getting medical care, academic advocacy, ongoing emotional support, and ensuring on-campus safety
- A list of contact information for relevant Campus Life departments
- A report form, which may be submitted anonymously

As an Oxford College community member, you have the support and resources of Counseling and Career Services to assist you with any student concerns. If you need help at any time during the Sexual Assault Response process, do not hesitate to contact Sandi Schein at 770-784-8394 or at [sschein@emory.edu](mailto:sschein@emory.edu).

Sincerely,  
Sandi Schein, Ph.D.  
Director, Counseling and Career Services

# Sexual Assault Response Guidelines

If you are in the position of learning about a sexual assault (or sexual harassment), please consider the following:

1. When you are first approached, patiently listen, giving the student ample time to tell her/his story.
2. You are not expected to be a professional counselor or therapist, but by using skills of attentive listening, you can express to the student genuine empathy and caring. Pages 6-9 of this document offers you information and suggestions to help you offer traumatized students a supportive and empathic response.
3. Those who present themselves to you as victims in these situations need to know that they have options and that, at Oxford, they have the right and power to decide how the incident of their assault is handled.
4. Although it is important to familiarize yourself with students' options, you can be most helpful in these difficult situations by referring students to the resources on campus best suited to confidentially and comprehensively address their needs and questions. It is always advisable to refer students who have been assaulted to the Counseling and Career Services. Other resources available to students include Student Health Services, and the Offices of the Chaplain, the Dean for Campus Life, and the Director of RES.

## I. Information Gathering

- Review issues of privacy protection and anonymous reporting obligation- assure the student that you will keep her identifying information confidential, yet according to the Clery Act, you will need to report to campus police the very nonspecific information that an assault occurred. Only those assaults occurring on the Oxford campus within two calendar years need to be reported.
- When and where did the assault occur?
- Was the assailant an acquaintance or unknown? If acquaintance, was it a fellow Oxford student or another member of the Oxford community?
- Does the student feel safe? Is s/he fearful s/he might see this person again? Are there any concerns about possible repercussions of disclosure?
- Who else has the student told?

## **II. Observation of Student's Emotional State**

- Observe the student's behavior, noting crying, fear, activity level
- Identify student's primary areas of concern (e.g., confidentiality, others' disbelief, health risks)

## **III. Responding to the Student**

- Affirm the student for making the decision to reach out to someone
- Reassure the student that there are many resources available
- Provide the student with the "Student Resource Guide for Sexual Assault" and review it together

## **IV. Enlist an Ally/Support Person**

- Is there anyone with whom the student would like to be right now?
- Encourage the student to identify a supportive friend to accompany her/him to any subsequent appointments
- Educate the resistant student about the importance of seeking support from others
- Educate the student about common feelings of self-blame, fear of being disbelieved, feelings of shame—the validation/support of a friend can be helpful in countering these feelings

## **V. Determine Appropriate Medical Referral**

- Was the assault within the past 72 hours? If so, the student has the option to obtain a medical exam for the purpose of evidence collection. The student does not have to decide about legal action at this time. But if there is even a remote possibility that the student would want to take legal action against his/her assailant, a medical exam is needed in order to pursue legal action.

If the student discloses to you that she/he has been raped, and the rape occurred within 72 hours, it is strongly advised that you recommend to the student that she/he seek medical attention immediately. If there is a remote chance that the student will press charges, a medical exam must occur within 72 hours of the rape. Even if the student is certain that she will not want to take any legal action against her/his assailant, medical attention is recommended to check for internal injuries and treat potential STDs and/or pregnancy. It is recommended that you refer the student to Hillandale Medical Center in Lithonia (2801 DeKalb Medical Parkway, Lithonia, GA 30058; 404-501-8000). For clarification regarding medical issues and protocol, or for immediate 24 hour access to a trained counselor, please contact the DeKalb Rape Crisis Center (phone number below). Counselors will provide immediate counsel to a victim of rape or assault, irrespective of the victim's residency or location of the crime.

- If the student does not wish to have evidence collected, follow-up care can be pursued free-of-charge at Student Health Services (*Note: the student will incur costs for laboratory tests and medications*)
- Review options and determine student's preferences for medical follow-up, contacting Emory Police Department at Oxford College, and/or change in residence, possible only if alternative on-campus housing is available (for more complete information regarding student options for medical treatment, changing residence, psychological care, academic advocacy, etc., please refer to the Student Resource Guide excerpted in the appendix of this document).

#### **VI. Consultation with Counseling and Career Services staff member.**

- Counselors can be reached during the day at (770) 784-8394. After hours, a counselor can be accessed by the RLC. To contact the RLC on duty, call Emory Police at Oxford (4-8377). Once you have made contact with the RLC, offer him/her the phone number where you can be reached and a counselor will return your call and provide you consultation as needed.
- With permission from the student, relay to the counselor the student's report, emotional state, ability to enlist an ally, and medical information.
- Provide resources so that the student can schedule a follow-up appointment with Counseling and Career Services staff.
- Complete the Sexual Assault Report form, included in this packet

## Supporting a Student Who Has Been Sexually Assaulted

- **The student may be worried about being disbelieved.** It is important to reassure the student that you do believe her/his disclosure of sexual assault. Women, in general, tend to respond with disbelief to the assault that has occurred in order to lessen their own feelings of vulnerability. Also, keep in mind that sexual assault can occur regardless of gender or sexual orientation.
- **The student may be worried that the assault was her/his fault and that s/he is to be blamed.** Try to help the student explain why s/he believes it is her/his fault; you may need to respond with understanding that s/he wishes there was something s/he could have done to prevent the assault. S/he may also be reassured to hear that no one ever deserves to be assaulted; however, this notion may provide the student little comfort, especially if s/he is using self-blame to regain feelings of control over personal safety.
- **The reported assailant may be someone you know.** Eighty to ninety percent of sexual assaults on a college campus are committed by acquaintances. If you know the person, you may struggle with your own feelings of disbelief that s/he could be capable of such behavior. However, false reports of sexual assault are very rare.
- **A friend may be immensely helpful in accompanying the student to her/his appointments.** Try to encourage the student to enlist the support of a trusted friend. You may want to suggest that the student ask this friend to accompany him/her to an Emergency Room visit or a next day appointment at Student Health Services. You may also suggest that the student, with the friend's assistance, schedule an appointment at the Counseling and Career Center.
- **Individuals' coping strategies can vary.** Some find talking about the assault helpful and others do not. You may want to let the student know that you are available to her/him should s/he want to talk more with you about the experience. If the student chooses not to further discuss the experience, please inform the student that you will be checking in with her/him within the next few days. Acknowledge to the student that this is undoubtedly a stressful time for her/him.

## Responding to a Traumatized Student

### Things to say:

- I am happy to just listen, or I can answer questions, or I can help you sort through some things. It's up to you.
- "Take your time."
- "Tell me about it." *or* "What happened?"
- "You are safe here."
- "When something painful happens, people shouldn't have to carry it alone."
- "You have a right to all of your feelings."
- "Maybe you made some mistakes. That's for you to decide. But you didn't ask to be violated."
- "Whatever you did to get through it was the right thing to do."
- "You have already survived."
- "What else is on your mind that you would like to say?"
- What does that mean to you?
- Let me see if I understand fully what the facts are and how you're feeling (then paraphrase what s/he's said).
- Let me summarize what you've said so far and you can tell me if I got it right.
- You've experienced something traumatic and you seem depressed. Have you discussed this with someone before? Do you ever think about talking to a counselor?
- It seems to me that you have several ideas about what would help.
- It sounds as though you're having trouble deciding whether or not to report the incident. What are your thoughts?
- "Thanks for coming in (*or* telling me *or* calling)."

**Things to do:**

- Open your posture: uncross arms, put hands in lap, uncross knees, keep legs close together, make eye contact without staring. Avoid talking across a desk.
- Give options, not advice. Explain advantages and disadvantages of each option.
- Focus on choices that must be made first. It can be overwhelming to consider the implications all at once: police intervention, medical care, whom to tell, work and school arrangements, psychotherapy, effects on personal relationships, support groups, changing the locks, where the perpetrator is now, what he or she might do next, etc., etc. Some things can wait. Immediate threats to health and safety come first.
- Give written information and referrals. The person may be too dazed to remember the conversation.
- Take care of yourself: meditate, exercise, journal, talk to supervisor (maintain confidentiality).

**Things not to do:**

- Do not suggest that the student have any future contact with the perpetrator. If possible, strategize about how to minimize contact. Mediation is not an option, since the two parties are not peers.
- Do not insist that the student utilize any particular option, such as police notification, no matter how strongly you think it would be the right thing to do.
- Do not threaten violence or other retaliation against the perpetrator.
- Do not touch the student without her/his permission.
- Don't let the conversation go on indefinitely. Work patiently toward determining the next steps.
- Do not offer shower, fresh clothes, or food (in case of oral assault or possible need for surgery) if the student is going to have a medical examination within the next few hours.
- Do not provide health care, even Advil or a Bandaid, unless you are a medical professional.
- Do not disclose your own history of being victimized. There is a time and place to speak out, but right now the focus is on the person you are assisting. When a person is in crisis, she or he often tries to take care of others, which deflects attention from the immediate problem.



**Common immediate reactions to trauma:**

*These reactions may seem illogical to others, but they have their own logic in protecting the person's body and psyche.*

- Guilt, often presented as ethical self-criticism (“I should have left with everyone else; I shouldn't have had that much to drink”); rather than as feeling (“I feel betrayed, embarrassed that I drank that much”).
- Dazed, shut- down look; staring at objects or body, lack of eye contact
- “Inward” posture (hold arms & legs close to body)
- Fluctuations in physical presentation such as posture, facial expression, eye contact
- Difficulty recalling events, changes in the story of the incident
- Displaced feelings (angry at friend, submissive toward health care provider)
- Protecting perpetrator (“I don't want to get my friend in trouble.” “I was beating on his chest and saying ‘no,’ but I guess he didn't hear me.”)
- Denial of impact of the event (“I'm fine”)
- Jumpy, easily startled