Sexual Violence

A GLOBAL & LOCAL EPIDEMIC

SEXUAL VIOLENCE is any unwanted sexual attention, contact or activity. It violates a person's trust, autonomy, and sense of safety. It causes many survivors to suffer emotional, physical, financial, and social consequences. Stigma surround sexual violence often contributes to the trauma experienced by survivors, preventing many from seeking services or reporting the assault. Sexual violence occurs at both the individual and societal level in the context of rape culture, wherein it is connected to and influenced by other forms of oppressions, thus disproportionately affecting the most under-served and marginalized populations. Survivors and advocates in Massachusetts and around the globe are working tirelessly to provide life-saving services and to prevent sexual violence once and for all.

Helping Survivors

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In Massachusetts, 16 Department of Public Health (DPH) funded Rape Crisis Centers (RCCs) provide life-saving services to survivors. These programs offer free and confidential 24-hour crisis hotlines, prevention, education and training, individual and group counseling, and accompaniment for survivors in hospitals, police stations, courts, and more.

Hotlines

In FY17, RCC hotlines throughout the Commonwealth answered 13,330 calls: 8,416 calls from survivors and 4,914 from significant others and professionals. An additional 560 calls were answered by the statewide Spanish-language hotline.

Prevention Education & Training

In FY17, RCCs reached 21,961 individuals through 752 community education and professional training activities, reaching over 5,000 more people than in FY16.

National Snapshot

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In a CDC survey, 43.9% of women & 23.4% of men, reported experiencing sexual violence in their lifetime.

47% of transgender people reported experiencing sexual violence in their lifetime.

The Department of Justice estimates that only 23% of sexual assaults were reported to the police in 2016.

Based on FBI crime statistics, rape accounted for 1 in 10 violent crimes reported to law enforcement in 2014.

Among college students, 18% of females, 4% of males, and 21% of transgender and gender-queer people reporting being sexually assaulted while in school

Massachusetts Snapshot

In FY17, there were 2,100 incidents of sexual assault reported to Rape Crisis Centers in Massachusetts.

According to the 2017 Massachusetts State Health Assessment, 17% of women and 6% of men in the state reported ever experiencing sexual violence.

Currently, there is not sufficient data to determine rates of sexual violence in transgender and non-binary populations.

Counseling & Client Accompaniment

In FY17 RCCs provided 16,574 individual counseling, client accompaniment (medical, legal, police), and collateral service sessions (advocating for client when they aren't present). In these sessions, 2,287 survivors received individual counseling and 523 received legal accompaniment support.

SANE & Medical Accompaniment

The MA Sexual Assault Nurse Examiner (SANE) program is a nationally recognized forensic nursing care model for sexual assault patients. In FY17, the MA SANE program provided direct services to 1,963 patients, including 850 children and 1,113 adults and adolescents across the Commonwealth.

During the same year, medical advocates trained by RCCs gave support to 1,064 sexual assault survivors seeking medical help and evidence collection in hospitals in the aftermath of an assault, and an additional 56 survivors in other health care settings.

Jane Doe Inc.

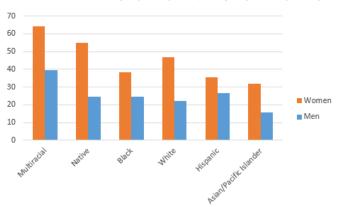
AT THE INTERSECTIONS

Understanding the multi-layered oppression of survivors of Sexual Violence

Sexual violence disproportionately affects the most marginalized members of our society. Jane Doe Inc. engages in many areas of policy to address the intersectional oppressions that impact the lives of all survivors and their families, and to ensure that cultural and identity specific resources are comprehensive and accessible to all communities.

PEOPLE OF COLOR

LIFETIME PREVALENCE OF NON-RAPE SEXUAL VIOLENCE



NATIVE AMERICANS

VIOLENCE AGAINST AMERICAN INDIANS AND ALASKAN NATIVES

Women & Men

Women lifetime sexual violence Women past year sexual violence Men lifetime sexual violence Men past year sexual violence

Among Native women who are survivors of rape or sexual assault, an average of 67% identify the offender as non-Native--a rate of interracial violence far higher than in other groups.

Native % White %

56.1	49.7
14.4	5.4
27.5	20.9
9.90	3.8

The federal government recognizes 562 Native American tribes, but only 5 out of over 17,000 rape crisis centers nationwide provide specific services to Native communities

ILLNESS & DISABILITY

People with intellectual disabilities experience rape or sexual assault more than people without disabilities

Female victims
of child sexual abuse
are 4x more likely to
abuse drugs & alcohol
and 3x more likely to
suffer psychological
disorders

Sexual Orientation & Gender Identity

Unknown Age

2%

LIFETIME PREVALENCE OF NON-RAPE
SEXUAL VIOLENCE

60

40

Sexual Assault Against Trans PoC (lifetime prevalence) Native: 65% Middle Eastern: 58%

Native: 65%
Middle Eastern: 58%
Black: 53%
Multiracial: 59%

10 Yrs or Younger

12%

11-17 Yrs

30%

18-24 Yrs 43%

10 Yrs or Younger

CHILDREN & YOUTH VICTIM AGE AT TIME OF FIRST RAPE

25+ Yrs

20%

FFMALE

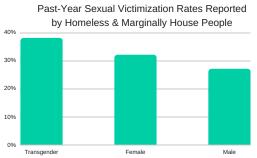
Between 2010 and 2016, 33,000 allegations of sexual abuse were lodged against Department of Homeland Security agencies, 40% against ICE

In 2011, 3.6% of inmates (over 80,600) reported sexual victimization in the past year; 39.1% of which

reported sexual victimization in the past year; 39.1% of which involved unwilling activity with staff.

HOMELESSNESS

11-17 Yrs



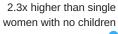
92% of homeless mothers experience sexual violence in their lifetimes

Socioeconomic Status



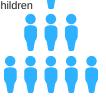
Women earning below \$7,500 per year experience sexual violence 6x more than women earning \$75,000+ per year

Single mothers experience sexual violence at a rate:



3.6x higher than married mothers

9.1x higher than married women with no children





Language used in this document reflects that of cited data sources