

ADAA Statement on Sexual Violence and Trauma

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David Hoberman Terence M. Keane, PhD – ex officio Sexual violence occurs when someone is involved in a sexual activity without his or her consent, or if they are unable to consent due to being intoxicated, underage, or due to intense fear of negative consequences. This can include rape, or forced insertion of a penis or object into the vagina, anus, or mouth, but can also include unwelcome advances, touching or grabbing, and other forms of unwanted sexual activity. Unfortunately, sexual violence is more common than often thought, and can lead to a range of negative health and personal consequences. While not all sexual violence survivors need treatment, recognition and support from loved ones are important factors in reducing the risk of mental and physical health problems of survivors and can help reduce the likelihood of future victimization.

Who experiences and perpetrates sexual violence

In a recent national survey, nearly one fifth of women in the United States (19.3%) reported being raped in their lifetime, and slightly less than half (43.9%) of women reported experiencing another form of sexual violence. About 1.7% of men reported being raped in their lifetime and 23.4% of men reported non-rape sexual violence. There is no typical survivor; they

While perpetrators may experience sexual gratification, the underlying purpose of most forms of sexual violence is the *expression of power and dominance* over the person being assaulted.

-World Health Organization, World Report on Violence and Health

range widely in age, ethnicity, sexuality, and physical appearance. Many people assume that most sexual violence is committed by a stranger, but in reality most perpetrators are acquaintances, intimate partners, or family members.

Health consequences of sexual violence and treatment

Responses to sexual violence vary widely across individuals. Common mental health consequences include depression, anxiety, posttraumatic stress disorder (PTSD), and substance use problems. For the first few days and weeks after a sexual assault, it is common for survivors to experience intense or unpredictable

emotions, to feel more on edge or jumpy, or to feel numb or in disbelief. For many, these responses will decrease or disappear over a few weeks or months, but some will develop longer term problems, such as PTSD and major depressive disorder.

Fortunately, these conditions are highly treatable. For PTSD, a few types of treatment have been shown to be effective through research: Prolonged exposure therapy, cognitive processing therapy, and

PTSD Symptoms

- Intrusive and upsetting memories or nightmares
- Avoidance of reminders
- Negative changes in thinking and mood
- Hyperarousal (trouble sleeping, feeling on edge and jumpy)

Major Depressive Disorder Symptoms

- Prolonged low or sad mood and/or difficulty enjoying things
- Fatigue; sleep and eating difficulties
- feelings of guilt or worthlessness
- thoughts of death or suicide

eye movement desensitization and reprocessing (EMDR). These therapies lead to significant reductions in symptoms for most who complete them and their effects tend to be long term. For major depressive disorder, cognitive behavioral therapy (CBT) and interpersonal therapy (IPT) have both been shown to be effective, as have antidepressant medications.

How to support a survivor of sexual violence

Friends and loved ones can help support survivors of sexual violence by believing them and listening to them. Research shows that a friend or loved one who supports and does not judge or blame a survivor can contribute to their healing in both the short- and long-term. It is helpful to listen to a survivor if they want

to talk about their experience, but not to force the issue or push them to tell more details than they want to. It may be helpful for the survivor to seek immediate physical or mental health treatment or to seek legal or healthcare advocacy through community organizations such as a rape crisis center.

A common myth is that reports of sexual assaults are frequently made-up. Actually, research has shown that the vast majority of assault claims are true, and if anything, are underreported.

Alternatively, a survivor may wish to wait to seek help from a mental health professional at a later time. An experience of sexual violence can leave a survivor feeling powerless so it is important to allow a survivor to regain some control by making his or her own decisions about what type of help to seek and when. We recommend that you visit their website on Research-Supported Psychological Treatments (http://www.div12.org/psychological-treatments/), where you will find descriptions of various treatments for the range of psychological disorders and an evaluation of the evidence in their support. You can also use their search tool to find a therapist who specializes in the specific treatment for the specific problem. ADAA has a similar Find-A-Therapist search tool (https://anxietydepressionassoc.site-ym.com/?page=FATMain).