

# Sexual Assault Prevention and Response



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## OVERVIEW

Each center provides a sexual assault prevention and response program that includes prevention activities, a response plan, counseling, treatment, and follow-up care. Additionally, centers work closely with local law enforcement when sexual assaults occur.

This technical assistance guide (TAG) provides guidance for preventing and responding to sexual assaults.

### Sexual Assault Policy

Job Corps policy [PRH 5: 5.1, R39 Sexual Assault Prevention and Response](#) requires that each center must:

- Establish a program for sexual assault prevention, counseling, treatment, and follow-up care.
- Develop a team response to sexual assault and involve center staff and outside resources.
- Report sexual assaults:
  - To law enforcement authorities as required by state and local law
  - As significant incidents (see [PRH-5: 5.4 Significant Incidents](#)) in the SIR System

In addition, sexual assault of a criminal nature is classified as a level 1 infraction, resulting in the student's separation from Job Corps if the student is found guilty [[Exhibit 2-1 Infraction Levels Definitions and Appropriate Center Actions](#)].

### State Laws

Laws governing sexual assault vary from state to state. A resource of state laws, including those regarding confidentiality, is available from [RAINN](#) (Rape, Abuse & Incest National Network).

## SEXUAL ASSAULT PREVENTION

This section provides suggestions for strategies to prevent sexual assault including establishing a sexual assault response team (SART), educating students and staff, and increasing prevention/risk reduction efforts.

### Sexual Assault Response Team (SART)

Each center should formally establish a SART, which is inclusive of both *prevention* and *response* activities, and identify member roles and responsibilities. It is suggested that the team leader/coordinator be a full-time center employee (e.g., Family Planning Coordinator, Career Counselor). Team members may include Health and Wellness Director (HWD)/nurse, Center Mental Health Consultant (CMHC), counseling staff, safety and security staff, residential living, and facilities management.

The following are suggested roles for SART members:

Title	Description
<b>SART Coordinator</b>	<ul style="list-style-type: none"> <li>• Provides overall direction/responsibility for the SART</li> <li>• Develops community resources for victims (referrals for therapy, counseling)</li> <li>• Provides information on the SART during Introduction to Center Living/Orientation</li> <li>• Acts as center liaison with local rape crisis center</li> <li>• Refers students to the local rape crisis center for specialized services</li> <li>• Develops centerwide prevention strategies—posters, brochures, awareness day, speakers, etc.</li> <li>• Acts as main contact person</li> <li>• Trains or coordinates training for staff members</li> <li>• Evaluates SART effectiveness</li> </ul>
<b>HWD/Nurse/ Physician/NP/PA</b>	<ul style="list-style-type: none"> <li>• Assists with medical interventions, if applicable</li> <li>• Provides HIV/STI counseling</li> <li>• Assists with Significant Incident Reporting System (SIRS) reporting</li> </ul>
<b>CMHC</b>	<ul style="list-style-type: none"> <li>• Provides <i>short-term</i> therapy, if needed</li> <li>• Provides follow-up support when the student returns after receiving community services</li> </ul>
<b>Counseling Staff</b>	<ul style="list-style-type: none"> <li>• Provides support for the victim</li> <li>• Assists in training the residential advisors on how to respond to reports, supportive roles, etc.</li> <li>• Monitors victim's progress</li> </ul>
<b>Safety and Security Staff</b>	<ul style="list-style-type: none"> <li>• Form relationships with local police</li> <li>• Create a safe environment on center</li> </ul>
<b>Residential Living</b>	<ul style="list-style-type: none"> <li>• Deliver trainings in dormitories</li> <li>• Be alert for suspicious activities</li> </ul>
<b>Facilities Management</b>	<ul style="list-style-type: none"> <li>• Identify potentially unsafe areas on center; add additional lighting or fencing to improve safety</li> </ul>

## Student Education

The SART is responsible for coordinating student education on how students can reduce their risk for sexual assault. In this section, student education and skill building are discussed.

### Prevention and Education Settings

- **Orientation**—During Introduction to Center Living, students should be given introductory information about the SART and the sexual assault prevention program, including where to go for help when they (1) feel they are being sexually harassed, (2) are worried about the possibility of sexual assault, (3) are raped or sexually assaulted, or (4) have difficulty coping with a rape or sexual assault.
  - **Wellness Education** ([PRH-3: 3.4, R21 Required Instruction for Health and Well-Being](#))—Points for discussion include defining sexual assault, examining situations that put one at risk for sexual assault, and learning skills to avoid or escape such situations. Speakers and video presentations may supplement the sessions.
- **TEAP Education Classes**—The TEAP Specialist should provide information to all students regarding the connection between alcohol and drug use and sexual assault.
- **Dormitory Discussion Groups**—Small group discussions, generally held in the dormitory, may be another means of teaching students about sexual assault risk reduction. Outside speakers, residential advisors, or peer group leaders who have been trained in this subject might lead these discussions. Students might practice sexual assault risk-reduction skills through role-play.

## Staff Training (PRH-5: 5.1, R12 Staff Training Plan)

Each Job Corps center is required to provide 5 hours of training per year on health and mental health issues related to adolescents. This training should include sexual assault prevention and response, behavior management system, zero-tolerance (ZT) policy, sexual harassment and related social skills training, intervention techniques, and safety issues. In addition, all new center employees are required to participate in an orientation program within their first 90 days on center that covers the above topics.

All staff should be encouraged to (1) integrate the information they learn about sexual assault awareness into their respective departments when appropriate, and (2) look for possible ways to disseminate this information during academic and vocational instruction.

## Centerwide Prevention Efforts

Centers can proactively work toward reducing the risk of sexual assaults through the following actions:

- The ZT policy for violence should be clearly explained to students and staff and administered consistently and fairly.
- Encourage students (victims or bystanders) to report sexual assault-related incidents.

- Provide information to students regarding high-risk areas both on and off center.
- Conduct an environmental risk assessment by simply walking through the center and identifying past incident locations and high-risk areas. Once these locations are identified, increase lighting or decrease landscaping to make it safer.
- Educate students throughout their stay in Job Corps.
- Seek out local community resources to strengthen the sexual assault prevention program, especially support services for victims and prevention speakers.
- Consider developing a sexual assault prevention and response peer team composed of positive peer leaders on center.
- Distribute prevention materials to students.
- Consider participating in "[National Sexual Assault Awareness Month](#)" and/or "[Take Back the Night](#)"

Sexual assault prevention factsheets and brochures are located on the [Violence Prevention](#) webpage.

### **Physical Safety Measures**

The SART should work with center security and residential living staff to ensure that the center environment does not facilitate sexual assaults. The center grounds and buildings should be well lit. Doors to empty rooms and buildings should be locked. Students should be encouraged to walk with a partner on center after dark. "Off-limits" areas should be clearly marked. Consider installing cameras in hard to monitor areas, with respect to student privacy. Living quarters should be secured. A consultation or walk-through inspection by police may be helpful.

In addition, measures to prevent sexual assault should be employed during off-center trips. Students should be encouraged to stay in groups of two or more. Regular contact with local police and rape crisis centers should be maintained to keep abreast of areas in the community that are considered high risk for sexual assault. Students should be alerted about these areas.

## RESPONSE TO A SEXUAL ASSAULT REPORT

In the event that a student reports a sexually assault or rape, the SART is responsible for providing and arranging crisis intervention and treatment services. Once staff is made aware that an assault or rape is reported, services must begin immediately.

Members of the SART should be familiar with the medical and legal issues involved in proper management of sexual assault reports. They are encouraged to review these with their local police department and emergency medical care facility.

### Initial Response

If a student reports a sexual assault to a staff member, the staff member should comfort the victim and determine if a medical emergency exists in collaboration with health and wellness staff. If there is a medical emergency, he or she should follow the emergency procedures set forth in the centers' standard/center operating procedure. After emergency procedures are followed, or if an emergency does not exist, the staff member should immediately contact the SART Coordinator.

The SART Coordinator or designee should further comfort the victim, conduct a brief interview (or arrange for an interview with the local rape crisis center or emergency room), and arrange the appropriate medical, mental health, and legal services. The SART Coordinator or designee should also support the victim as he or she talks with family, police, and medical staff.

### Interviewing the Victim

The purpose of the interview by a SART member is to determine the appropriate, immediate course of action. Due to the delicate nature of the interview, it is important that the interviewer be trained in crisis intervention. The interviewer should be a SART member; however, if a SART member is not immediately available, another Job Corps staff member (e.g., a counselor or a nurse) can conduct the interview. If the center does not have staff experienced in this process, the SART Coordinator should arrange for the interview to be conducted off center by a counselor from the police department or local rape crisis center.

The interview should be conducted in a comfortable setting that will provide a private, relaxed, and supportive environment. In communicating with the student, be patient and understanding. Use nonjudgmental comments; do not interrogate; and probe only for essential information. The interview should clarify who, what, where, and when, including:

- Is the perpetrator known to the victim?
- Is he/she a fellow student?
- What type of assault took place?
- Was a weapon displayed?
- Did an exchange of body fluids occur?
- Did this occur on or off center?
- How long ago did the assault occur?
- Did the victim bathe, shower, douche or change clothing?
- Is the female victim using any method of birth control?

Answers to these questions will determine the immediate need for medical evaluation and security measures.

Legal authorities should conduct more detailed interviewing regarding the assault. Staff should not decide for themselves the veracity of the report or whether or not a crime has been committed. This is for the police to ascertain.

### **Safety and Security/Law Enforcement Response**

All sexual assaults must be reported to the police. If the alleged perpetrator is a student, he or she should be detained for questioning by the police.

If the assault occurred on center, the security staff should safeguard the scene, preserve any evidence that may still be available (depending upon the length of time since the assault) until the police can examine it.

### **Medical Care of the Assault Victim**

Victims are encouraged to obtain a medical examination as soon as possible following the assault. Examinations are important for the prevention of Sexually Transmitted Diseases (STDs) and pregnancy, and for the collection of evidence. Ideally, examinations should be conducted within 6 hours of the incident. Victims should not bathe, shower, douche or change clothing before their examination.

### **Initial Evaluation**

Medical assessment and care of the sexual assault victim is usually best carried out in the local hospital emergency room. Emergency room personnel are likely to be the most experienced examiners in the community. In addition to knowing how to approach the sexual assault victim, they will be familiar with the legal aspects of collecting specimens, custody of evidence, and documentation.

The victim must give written consent for the medical evaluation of sexual assault. In most states, this is true even if the victim is a minor. This is to prevent any delay in the victim obtaining prompt and appropriate medical care. The center's SART should be familiar with their state statutes regarding consent.

The SART Coordinator should ensure that the examining physician receives information obtained during the interview with the student, including the location of possible injuries, sources of infection, and possibility of pregnancy. Clothing worn at the time of the assault should be brought to the examination.

### **Prevention of Sexually Transmitted Diseases (STDs) Following Sexual Assault**

Following the medical examination, the student will likely be treated with prophylactic antibiotic therapy for common bacterial STDs. In addition, depending upon the circumstances, prophylactic antiviral therapy may be initiated to reduce the risk of HIV infection.

See [CDCs 2015 STD Treatment Guidelines](#) for additional guidance.



## **Pregnancy Prevention Following Sexual Assault**

The risk of pregnancy following a sexual assault can be significantly reduced using emergency contraception. Emergency contraception is most effective if used within the first 24 hours after the assault and diminishes in efficacy as time progresses. Its usefulness beyond 72–120 hours (depending on brand) after the assault is unclear.

All center staff should be familiar with emergency contraception. Since a student may report a sexual assault to any staff member, all staff must understand the importance of a prompt referral to maximize the efficacy of emergency contraception. When there may be some delay in getting a female sexual assault victim to an emergency room for evaluation, emergency contraception should be administered on center.

## **Follow Up**

Arrangements should be made at the time of the initial physical examination for subsequent medical follow up. Generally, this will be about 2 to 3 weeks after the initial examination. At the follow-up visit, test results can be discussed with the victim and, if indicated, a repeat pregnancy test can be given to female victims.

Centers should follow the most recent [CDC guidelines regarding HIV after potential HIV exposure](#).

## **MENTAL HEALTH CARE OF THE ASSAULT VICTIM**

Victims of sexual assault should be referred by the SART for short-term mental health care. Mental health professionals who are trained and experienced in working with sexual assault victims should be utilized. This may be the CMHC or an off-center agency. Center counselors, residential advisors, and/or other appropriate staff should also provide support to help the victim cope with the trauma and readjust to center life.

The counselor should also help the student find additional support from significant others and from his or her social networks, on and off center. This may include friends, family, Job Corps staff, and community resource persons.

If the student does not respond to short-term mental health intervention, the student may be medically separated and referred for care with appropriate forms submitted to OWCP, if applicable. Always contact the Safety Team Leader with the National Office for OWCP guidance.

## REPORTING

All sexual assaults or alleged sexual assaults involving students while enrolled in Job Corps, whether occurring on or off center, must be reported to the Center Director, the student's family (in cases where the student is a minor) and, without exception, to the police. In addition, the Center Director must report sexual assault or alleged sexual assault as a significant incident to the Regional and National Offices of Job Corps via the Significant Incident Reporting System (SIRS).

The SART Coordinator should ensure that a CA-1 form is completed, electronically submitted in ECOMP system, and a copy placed in the alleged victim's health record. If there is a resulting mental health or medical problem, the CA-1 forms should be forwarded to the appropriate OWCP District Office at the time of the student's separation from Job Corps. Always contact the Safety Team Leader with the National Office for OWCP guidance.

Information on state and local laws regarding sexual assault evidence and prosecution may be obtained from the local police department. Centers shall provide students involved (alleged victim and alleged perpetrator) with information about the availability of legal assistance within the community at no cost to Job Corps [[PRH-6: 6.5, R7 Access to Legal Services](#)].