## **Compassionate Practice to Prevent Sexual Violence** Mental Health Professionals

# FACT SHEET

We all can take steps to help make our communities safer, but sometimes we don't know how. As a mental health professional, you have a unique opportunity to equip your clients/patients with the skills and tools to create safer communities. This fact sheet provides some tips and information on how to be an ally in sexual violence prevention.

## What is sexual violence?

Sexual violence exists on a spectrum. It ranges from inappropriate comments to sexual harassment to sexual assault. Any form of sexual violence has a basis in imbalances of power, where the more powerful person commits harmful acts and behaviors against another person who has less power.

ATTITUDES & BELIEFS	VERBAL EXPRESSIONS	PHYSICAL EXPRESSIONS
Racism Sexism Ableism Xenophobia	Cat-calling Bragging	Sexual Assault Sexual Abuse
Homophobia Transphobia	Rape/Sexual Jokes	Non-consensual Sexual Touching

## What is prevention?

For a long time, efforts designed to tell children and adults how to protect themselves have been thought of as "prevention." Asking people to protect themselves by "just saying no" or staying away from certain activities is an *ineffective form of prevention called risk reduction*. This puts responsibility on the potential victim to avoid their own sexual assault instead of holding potential perpetrators accountable for their actions. Risk reduction also ignores the realities of how sexual violence occurs.

*Effective sexual violence primary prevention* focuses on shifting harmful social norms that uphold power imbalances and allow sexual violence to occur. Prevention aims to change existing harmful spaces rather than asking people to navigate them, with the ultimate goal of creating safer, more equitable communities. See the chart below for a better understanding of the differences between these two strategies.

Mental health professionals are in a prime role to directly help shape new and healthy social norms for their current clients and the next generation.

•	Places the responsibility on	
	everyone in the community	
	to eradicate the root causes	
	of sexual violence	

**Primary Prevention** 

- Educates on creating safe spaces
- Addresses multiple risk factors of sexual violence perpetration
- Focuses on changing the root causes of sexual violence
- Changes the social norms that allow sexual violence to happen
- Addresses all forms of sexual violence

#### **Risk Reduction**

- Places the responsibility on the potential victim to prevent violence against themselves
- Educates on navigating through existing harmful spaces
- Does not address risk factors of sexual violence perpetration
- Focuses on individual acts of sexual violence, but not the root causes
- Educates a potential victim on how to stop an attack in progress
- Focuses on some forms of sexual violence

# What prevents someone from committing sexual violence? What causes them to commit sexual violence?

The Centers for Disease Control and Prevention (CDC) have identified factors that may decrease (protective) or increase (risk) someone's likelihood of committing an act of sexual violence.

#### **Protective Factors**

- Emotional health and connectedness
- Empathy and concern for how one's actions affect others

### **Risk Factors**\*

- Coercive sexual fantasies
- Lack of empathy
- Adhering to strict, traditional gender role norms

\*Not all who identify with risk factors become perpetrators

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# What Can I Do?

Luckily, sexual violence is 100% preventable! When we start early, we can instill positive social norms in young people and adults—even clients and colleagues—to help create safer, more equitable spaces. Ultimately, we want to reduce the likelihood that someone may commit sexual violence and build a society that doesn't tolerate harmful power-based behaviors against others.

## "Let's unpack this"

Mental health professionals can have a unique role in supporting sexual violence prevention initiatives. Similar to sexual violence preventionists, counselors and therapists work to create safer spaces and support overall health and wellness. We strive to support clients without bias—but what can we do when a client/patient says or does something that contributes to harmful norms, which ultimately puts public health at risk?

## Try

- Unpack their biases. Mental health professionals tend to know how to "unpack" their clients'/patients' views in a non-confrontational way. This helps their client/patient get to the root cause of their conflict so that they can take steps towards healing.
- Having a tool to screen for past trauma during an initial evaluation could prove to be useful when deciding how to move forward with a treatment plan. Addressing underlying trauma can help in unpacking harmful norms by identifying where biases were created and reinforced.
- If a client/patient is venting about their ex-partner or another significant person in their lives and making sweeping generalizations about a group of people

   "Men only want one thing" or "Women just want to use me for my money", for example— take a moment to validate their frustrations. Then take a deep dive into deconstructing those thoughts and help them reframe their thinking.

#### Resources

#### **CDC- Adverse Childhood Experiences (ACEs)**

https://www.cdc.gov/violenceprevention/childabuseandneglect/acestu dy/index.html

#### NJCASA- Sexual Violence 101

https://njcasa.org/wp-content/uploads/2014/11/PRINT-READY-SV101.pdf

NJCASA- "What Do You Mean?": Sticks and Stones https://njcasa.org/news/what-do-you-mean-sticks-and-stones/

#### **CDC- Preventing Sexual Violence**

https://www.cdc.gov/features/sexualviolence/index.html

#### Sources:

CDC- Sexual Violence Risk & Protective Factors https://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html CDC- Sexual Violence Prevention https://www.cdc.gov/violenceprevention/sexualviolence/index.html

## "That's not cool"

No workplace is free from conflict, but if it's safe and we have the ability to do it, we can do our part in promoting safer, more inclusive work spaces. Power imbalances in our own work settings can contribute to an unsafe environment. Bearing that in mind, if someone who has power notices behaviors or policies that perpetuate stigmas or harmful tropes, they have the responsibility to make changes. They can promote norms that prevent violence, coercion, and exploitation within treatment settings. If a space meant for healing others isn't incorporating pro-social norms and behaviors into its practice or creating safe spaces for colleagues, how effective is that space in helping others? Part of the healing process is to ensure that clients/patients are not experiencing harm while seeking services. Employees administering care to clients/patients at that practice deserve to feel safe, too.

Try

Revising policies. It's commonplace for employers to have a dress code in their employee manuals. While it is certainly important that an agency maintains a professional image, policies that ban employees from wearing certain items of clothing —such as sleeveless tops and bottoms that exceed a certain height above the knee— often deem these garments as "distracting" or "too revealing", which can support attitudes of victim-blaming.

"Appropriate" attire may differ from person to person; their culture and personal experiences influence this view. Instead of regulating the measurements and types of clothing employees wear, create a gender neutral dress code with language that encompasses a wide scope of appropriate physical presentation. Your policy can include phrasing such as, "Employees must maintain a clean and neat appearance and dress according to the requirements of their positions. Consult your immediate supervisor if you have questions as to what constitutes appropriate attire."

