YOU ARE NOT ALONE

Information for Survivors of Sexual Assault
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A publication of the Nebraska Coalition to End Sexual and Domestic Violence

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No one deserves to be sexually assaulted.

NO ONE.

If you are reading this book because you or someone you know was sexually assaulted, we are so sorry for that experience. This handbook is meant to give you information about sexual assault. You can read it as you need to. Due to the assault, you may feel like your life is out of control, and we realize the need for you to regain control. This book provides information for you to use to make choices about what you would like to do next. You may want your family and friends to read it to learn about what you are experiencing and offer support in ways that are helpful to you.

You are not alone.

If you would like to talk to someone about how you are feeling, what your options are, or to learn about services in your area, there are people you can talk to. Nebraska has a network of programs that provide free and confidential services and support to people who have experienced sexual or domestic violence. These programs have specially trained people called Victim Advocates who can provide emotional support, information, and referrals. Each program has a confidential 24-hour hotline; you do not need to give your name or any information about who you are if you don’t want to. To find the program in your area, see the list in the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673).
Understanding sexual violence

Sexual violence refers to behaviors of a sexual nature that are used to put down or embarrass another person, or to force, pressure, or trick another person into sexual activity. Sexual violence can range from words, gestures, or jokes, to threats, intimidation, or forced sexual contact. This includes forcing or pressuring someone to have unprotected sex or to engage in more sexual activity than they had wanted. Violating boundaries or not respecting safe words during sex-play can also be considered sexual violence. Sexual violence does not always include force and not all forms of sexual violence are against the law. However, all forms of sexual violence are harmful and should be taken seriously. No matter what kind of sexual violence it was, it is not okay and it is not your fault. Perpetrators do these things on purpose to feel powerful and to make another person feel helpless and humiliated.

Sexual violence can happen to anyone no matter who they are or what background they come from. The same is true of perpetrators. Perpetrators can come from any background, be of any race, nationality, ethnicity, gender or sexual orientation, live in any kind of neighborhood, and have any kind of job. Most of the time the perpetrator is someone the victim knows, such as a family member, intimate partner, or acquaintance. What is important to remember is that no matter how you know the perpetrator or what kind of relationship you have with that person, sexual violence is never okay and it’s not your fault.

If you have experienced sexual violence, you may have felt that your body, sexuality or sense of safety was violated. You may be feeling powerless and vulnerable. When someone uses sex as a weapon, it can feel like they attacked you at your core. People react to experiences of sexual violence in a lot of different ways. This book will talk about some of these in later sections (see The Effects of Sexual Violence section). What’s important to know now is that whatever you are feeling is normal and that it is possible to heal.

Nebraska’s coalition of sexual assault and domestic violence programs provide access to emotional support, safety, and shelter across the state. To speak with a crisis advocate, contact your local sexual assault/domestic violence program (see the Finding Services section of this book), visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network hotline at 1-800-656-HOPE (4673). Services are free and confidential.

Defining your experience

In this book, we use the terms sexual violence, sexual assault, or rape, to refer to behaviors of a sexual nature that are used to force, pressure, or trick another person into sexual activity. We refer to someone who uses these behaviors as a perpetrator, offender, or rapist. You may not want to use these words to describe what happened to you or you may find that other words fit better. That’s okay. You may still relate to many of the experiences described in this book. In time you will find your own way to talk about what happened to you. What’s important right now is the experience itself and how it is affecting you.

Any unwanted sexual contact can be experienced as intrusive and violating. It is common to think that acts which involve penetration are “the most serious,” but many people feel extremely violated by other types of physical contact, such as being fondled, rubbed up against, or kissed. There are also many other forms of sexual violence that involve no physical contact at all, such as leering, stalking, obscene phone calls, or having someone expose their body to you.

The type of sexual violence you experienced and the circumstances of sexual violence, such as how much force was used, do not determine how much fear and trauma the experience could cause. Trust your instincts. If you feel like you have been violated, you have.

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Reactions to sexual violence

There is no right or wrong way to react during or after a sexual assault. Everyone has their own way of surviving and coping. Some of the common reactions include:

- Feeling confused about what happened
- Feeling guilt, shame, or embarrassment
- Feeling like you’ve lost all control
- Feeling like people can tell that something happened just by looking at you
- Not knowing who you can trust
- Thinking or talking about the assault constantly
- Not wanting to think about it or talk about it at all
- Thinking about the assault when you’re trying not to
- Re-living the experience through nightmares and flashbacks
- Replaying the experience in your mind to figure out what could have stopped it
- Trying to forget and live life as if it never happened
- Not being able to concentrate
- Having difficulties at work or at school
- Not sleeping – or sleeping too much
- Not eating – or eating too much
- Starting or increasing use of alcohol or drugs
- Suicidal thoughts
- Feeling irritated
- Feeling angry
- Being easily startled or jittery
- Feeling nervousness or having anxiety attacks
- Depression
- Feeling isolated and different from everyone else
- Grieving

If you would like to speak to someone about what you are feeling, advocates from local sexual assault/domestic violence programs are available 24-hours per day. To find the sexual assault/domestic violence program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
I should have...

Replaying the incident and wondering what you could have done to stop the assault is normal. One of the scariest things about a sexual assault is that someone else had control over what happened to you. It can be a terrifying experience.

You may wonder why you made the decisions you did, or why you did or didn’t do a certain thing. Maybe you thought it was best to do what the perpetrator wanted. Maybe your voice or your body froze, or you were so shocked that it was nearly over by the time that you realized what was happening. Maybe you believed that struggling would have only made the perpetrator hurt you more. Maybe you tried to fight back and it didn’t work. Maybe you weren’t conscious to know what was happening. Survivors have experienced all these things and more. There is no right or wrong way to react to being sexually assaulted. Your reactions were completely normal and you did the best you could to survive.

Our brains and bodies are designed to help us survive. When we are faced with something terrifying or life-threatening, our bodies may react in ways we don’t understand. When we are scared, our bodies produce chemicals that can make it hard to think clearly or make logical decisions. What may seem like easy decisions looking back may not have seemed easy or clear at the time of the assault. This is normal. Your brain and body were focused on only one thing during the assault and that was to survive.

Sometimes our brain helps us get through terrifying experiences by shutting the body down. This is called a freeze response. When this happens, we aren’t able to move, even if we want to. Freezing is a normal biological response that helps us survive. Even if you froze, were scared, or didn’t feel like you could fight off the attack, it was not your fault.

It may be difficult to remember all the details about what happened. You may have a hard time putting events in order, or you may find that you remember images, feelings and sensations but have a hard time describing these in words. The same process that helps our brains and bodies survive when we’re scared also makes it difficult for us to immediately remember and talk about what happened. As time moves on and you are able to process what happened, your memories will start to make more sense.

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Why me?

You may be wondering why this happened to you – why would a person assault another person in this way? Why you? It is normal to want to find a reason for what has happened.

Sexual assault is not committed out of a sexual urge or need. Perpetrators use sexual assault as a way to gain power and control over another human being in the most personal way. They surprise their victims by catching them off guard, tricking them, taking advantage of normal behaviors, or lying. They assault people who may be vulnerable (because of age, disability, or impairment from alcohol and drugs) or who they think will not report them. Perpetrators of sexual assault choose to rape and this choice has nothing to do with anything you did or didn’t do.

You may be blaming yourself or feel like you somehow deserved what happened. No one deserves to be sexually assaulted. Questioning your own actions is normal. You may wonder about choices you made and how they made you more vulnerable. You may have heard in the past that there are things you can do to prevent being sexually assaulted. You may have even been doing some of these things before you were attacked and they were not effective. The truth is that only the perpetrator can ultimately prevent a sexual assault – and only then by not committing it. The things you may or may not have been doing to avoid a sexual assault were not flawed or wrong. Perpetrators make a choice and use their tactics intentionally. There is no way for you to prevent these things.

You are not to blame! You did not cause the assault to happen. If you could have avoided it, you would have. Place the blame for the assault where it belongs – with the person who assaulted you.

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Male survivors of sexual assault

Sexual violence can happen to anyone, regardless of sex or gender. If you are a male survivor of sexual assault, you have a right to the same validation, information, and support as female survivors.

This section will talk about some of the common feelings and concerns reported by male survivors. You may relate to some of these, or none at all. Remember, survivors have a wide range of feelings and reactions. There is no one right way to feel or respond.

Strength and Masculinity
Feelings of guilt, shame, isolation, and anger are common for all victims of sexual assault. In the United States, men and boys often get the message that they must be strong and able to protect themselves against any kind of attack. Sometimes this can make feelings of guilt, shame and isolation worse. It is important to remember that you were not assaulted because you were weak or not masculine enough. Perpetrators use trickery, coercion, or force. You may not have had the opportunity or ability to fight back, or you may have felt that fighting back would have made the situation worse. You may have experienced a freeze response that is common for people experiencing a traumatic event. None of these things makes you to blame for the assault. No one deserves to be sexually assaulted and the blame for the assault belongs with the rapist, not the survivor.

Sexuality and Sexual Identity
Many male survivors report that they questioned their sexuality or sexual identity because of the sexual violence they experienced. Perpetrators of sexual violence use sexual contact to manipulate, humiliate, and control others. It is normal to feel that your sexuality has been effected when you have been sexually violated. It is especially common for male survivors because most men and boys have received very strong messages about manhood, masculinity, and sex.

You may have received messages growing up that men are supposed to always want sex and be open to having sex at any time. If you experienced unwanted sexual contact as an adolescent or an adult, you may fear that there was something “wrong with you” for not wanting the contact. You may think that others won’t believe you or that they will question your sexual identity. In reality, most men aren’t open to having sex at any time, and no one should ever be forced, pressured, or tricked into sexual contact. Unwanted sexual experiences can feel very violating and may have long lasting effects.
It is also very common for male survivors to have questions about or feel confused about their sexual identity. If you are heterosexual and the assault was perpetrated by another male, you may wonder if there was something about you that attracted the perpetrator or led the perpetrator to believe you were gay. You may also worry that others will think you are gay and will judge you negatively for that. If you identify as gay or bisexual, you may believe your identity is to blame for the assault. You may resent your identity, believe that there is something wrong with you, or fear that others will believe you deserved it. If you have not disclosed your sexual orientation or gender identity to family, friends, or colleagues, you may fear that reporting an assault by a male perpetrator will out you as gay or bisexual. Regardless of your identity or the identity of the perpetrator, sexual attraction is not what motivates sexual assault. Sexual violence is committed out of the desire to control, humiliate, and harm. Likewise, you did nothing to deserve or cause the sexual violence and your sexual orientation is not defined by the assault.

If you wish to speak with an advocate, you may contact your local sexual assault/domestic violence program. Services are free and confidential and available to anyone regardless of gender. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673).
Survivors who identify as LGBTQ

If you identify as LGBTQ (lesbian, gay, bisexual, transgender, or queer), your sexual orientation or gender identity may be a core part of your identity. You may be blaming yourself for the assault or believe that there was something about you that “attracted” the perpetrator. If you were a victim of a hate crime, this may feel like an attack on your core being. You may begin to resent your identity, believing that if you were different, you would not have been assaulted. Know that NO ONE deserves to be sexually assaulted. You are not to blame and neither is your sexual orientation or gender identity. The only person responsible for the assault is the perpetrator.

Many crimes against people who identify as LGBTQ go unreported. You may be afraid that you will not be believed or that you will be blamed for the assault. If you have not disclosed your sexual orientation or gender identity to family, friends, or colleagues, you may fear that reporting the assault will “out” you to others. You may fear discrimination from helping professionals or may fear having other acts of violence committed against you. Certainly there is basis for these fears and they should be respected by anyone to whom you confide.

It is not always necessary to disclose your sexual orientation or gender identity when seeking services. However, there are times when your identity may be disclosed. For example, some healthcare providers may accidentally “out” trans-identified clients due to the way they label body parts on forms in the medical records. If you are working with medical personnel, you can ask that they not record the sex you were assigned at birth in your medical records. You could also ask that they place it in a note that cannot be seen by everyone to protect your identity and prevent potential discrimination in the future.

Many helping professionals now have specialized training about sexual violence and gender-based hate crimes. However, you may wish to have the help of an advocate or other safe person to ensure that you are supported throughout the process and that your rights are explained. Just having a friendly face can make the process easier and less frightening.

If you wish to speak with an advocate, you may contact your local sexual assault/domestic violence program. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673). Services are free and confidential and available to anyone regardless of sexual orientation or gender identity, and regardless of the sexual orientation or gender identity of the perpetrator.
Getting support

It is hard to talk about being sexually assaulted. It may be painful to relive the experience and scary to trust that other people will react in a supportive way. You may feel like you are the only one who has had these experiences or the only one who has ever reacted the way you did. Though you may feel like you are all alone, many other people have survived experiences similar to yours, even if no one has ever told you about them. Talking about the experience can reduce your feelings of isolation, shame, and self-blame.

You may have people you trust in your life to talk to, who can help you sort through your feelings, reactions, and choices. Be prepared that their reactions to your experience may not be what you expect or hope for. People can react in different ways; some may give you their full support, others may express blame. You get to decide who to seek support from and when. Options include friends, family, a counselor or therapist, or an advocate from a local sexual assault/domestic violence program. If you decide to talk to an advocate, counselor, or therapist, you may find that an outside perspective and someone who will listen to you and not judge you will help you feel better. While talking about such a personal and upsetting event with a stranger may be difficult, advocates and counselors are there specifically for you to have a safe person to talk to in a safe place.

Working With an Advocate

Victim advocates are individuals trained to support victims of crime. They can provide you with emotional support, information, and referrals to any services you need, such as counseling, medical care, or financial services. Advocates can also accompany you to medical appointments and legal proceedings if you wish. The advocate will not give you advice on what steps you should take, but will help you identify your options and weigh the pros and cons of each.

Victim advocates from Nebraska’s network of sexual assault/domestic violence programs have been specially trained in supporting people who have been sexually assaulted. They understand some of the emotions you’re experiencing and can help with things like safety planning, coping strategies, and grounding. They can also give you information about the criminal justice system and how it works within your community.
Your conversations with advocates from sexual assault/domestic violence programs are confidential, which means that they will not share the information with anyone else. Communication with an advocate from a sexual assault/domestic violence program is also considered “privileged” by law. This means that the advocate cannot legally share your information with anyone unless you give permission for them to do so. This privilege does not apply to advocates employed through criminal justice services, such as Victim/Witness Units.

There are some exceptions to confidentiality and privilege. Advocates are mandated reporters in cases of child or vulnerable adult abuse or neglect. That means that if an advocate learns about child abuse or neglect, or the abuse or neglect of a vulnerable adult, they are required by law to report this. If you are a minor, the advocate may need to share information with your parent or guardian. You can call the hotline and receive services anonymously if you’re concerned about others finding out about the assault.

**Working with a Counselor or Mental Health Therapist**

Counselors and mental health therapists can help you work through and cope with your feelings and emotional responses to the sexual assault. They can also help you cope with changes in how you feel about yourself and those around you. A counselor or therapist may help you identify and express your needs to others and learn how to get those needs met.

In counseling, what you say is confidential and private, with a few exceptions. Counselors are mandated reporters of child and vulnerable adult abuse and neglect and must make a report to law enforcement if you express intent to harm yourself or others.

Counseling may bring up memories or feelings that you don’t want to deal with right now, or it may feel more important to focus on other things. Not everyone wants or needs counseling to cope with the assault. You get to decide if counseling or mental health therapy is the right thing for you.

If you are interested in working with a mental health therapist, some local sexual assault/domestic violence programs have licensed therapists on staff and can offer mental health counseling for free or at a reduced rate. Programs without licensed therapists on staff can refer you to a therapist in your area who is knowledgeable about sexual assault.
Support Group

Many sexual assault/domestic violence programs offer groups for sexual assault survivors in addition to individual meetings. Going to a group may be uncomfortable at first, but groups have been helpful to many people who have been through experiences similar to yours. In a support group, you could get support from – and offer support to – other people who are grappling with similar experiences, reactions, and decisions. Sometimes hearing how other people are managing and seeking safety can give you ideas to try for yourself. It can also be helpful to be part of a group of people that understand some of what you are going through. Talking with others may help you realize that you are not alone, you are not going crazy, and that you will move on to better times in your life.

To find the sexual assault/domestic violence program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
Self-care

Experiencing sexual violence can have a lasting impact on you. Consider things that you can do to take care of yourself physically and emotionally. Think back to another time that has been very upsetting/overwhelming/traumatic. What kinds of things helped you through that time? Things that worked in the past can work for you now.

Self-care can include:
- Talking with friends and family
- Talking with an advocate from the local sexual assault/domestic violence program
- Creating a safety plan (see the Considering Your Safety section of this book for ideas)
- Attending a support group
- Seeing a counselor or therapist
- Preparing yourself by thinking about what may trigger memories of the assault, how you’ll react, and who you can call
- Journaling
- Expressing yourself through the arts (i.e. drawing, painting, music, dance)
- Spending time in nature
- Exercise
- Yoga
- Seeking medical care when needed and following doctor recommendations
- Maintaining a balanced diet and drinking plenty of water

When talking with friends and family, recognize that they may struggle with knowing how to best support you. A therapist or advocate can assist you with disclosing to friends and family. To find the sexual assault/domestic violence program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673).

Remember, you are resilient and can draw on your strengths and supportive people in your life to help you move forward from the assault. Being a survivor of sexual violence may be a part of you but it does not need to define you.
Considering your safety

Considering your safety now does not mean that the assault was your fault. The only one responsible for the perpetrator’s behavior is the perpetrator. Unfortunately, given the reality of sexual assault, it is also necessary for you to think about your own physical and emotional safety.

Many people who experience sexual violence have concerns about their safety and the safety of the people they care about. You may fear that the person who assaulted you will harm you again or you may have concerns about running into the perpetrator or being contacted by that person. You may be overwhelmed with difficult emotions and struggling to cope. It may be helpful for you to have a plan in place to help you protect yourself. You may also wish to include others in your plan to help you cope and stay safe. Considering your safety and asking for help does not make you weak. It is a strong and brave thing to do.

When creating a safety plan, it can be helpful to think about what you have tried before and what has and hasn’t worked in the past. Strategies others have found helpful include:

• Talk about your safety concerns with people you trust, such as friends, family members, roommates, boss, a professor, or counselor. Call 911 if you are in immediate danger.
• Address any injuries or other health concerns. See the Medical Care section of this book for more information about seeking medical attention after an assault.
• You may wish to file a report with law enforcement. See the Talking to Law Enforcement section of this book for more information. You may also wish to apply for a protection order. Your local sexual assault/domestic violence program can provide information and assistance.
• Decide if you feel safe at your current residence or if you wish to stay somewhere else, even temporarily. If you wish to stay at home, consider things like changing locks, moving your furniture around for an easy escape, or asking neighbors to look out for suspicious activity.
• Identify people in your support system whom you can contact when you are upset or need to talk. Let them know you may be leaning on them for support.
• Identify things that help you feel better when you feel sad, scared, angry, or overwhelmed. For ideas, see the Self-care section of this book.
• Choose a few places where you know you will be safe and plan how you can get there. Practice how to get out of your home or away from public places in case things get dangerous.
• Keep important things such as a cell phone and charger, wallet with driver’s license, money, credit cards, and medication with you at all times.
• Consider changes to your schedule and routine. Try new routes to school or work, visit different banks and ATMs, and change the times or places where you take breaks, eat meals, and exercise.
• Check places where you have online information, such as Twitter, Facebook, Snapchat, or Instagram. Adjust your privacy settings to limit who can see your information. Consider turning off GPS and location identifiers on your phone, tablet, or computer.
• If the perpetrator is contacting you, keep evidence of this by saving texts and voicemails and taking screenshots.
• If necessary, work with your school or employer to change email accounts and protect your privacy on online forums such as messenger applications, online class sites, and listservs.

Your safety and well-being are very important. Take threats seriously. If you feel unsafe, trust your instincts. Making a safety plan before you need it will help you to react quickly in case of an emergency. Advocates from your local sexual assault/domestic violence program can help you identify what strategies might work for you. To locate the program nearest you, see the Finding Services section of this book, go to www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673).
After an assault: medical care

It is important to get medical care after a sexual assault as soon as possible. You may have injuries you don’t know about or your injuries may be worse than you think. You may also be at risk for sexually transmitted infections (STIs) or unintended pregnancy. Healthcare providers can examine you for injuries and provide treatment for STIs. In some cases, you can also get medication that will prevent STIs or pregnancy. Keeping your body healthy is an important part of healing from the assault.

Where to Go
Where you go to receive care is up to you. You may choose to go to the hospital, a medical clinic, school health services, or your personal doctor. If you are receiving a forensic exam (discussed in the Evidence Collection section of this book), medical professionals can also provide other medical care at that time. If your injuries are severe or your doctor recommends treatment they cannot provide, they may advise you to go to the hospital for further care.

No matter where you go, you have a say in your own medical care. You have the right to refuse any exams, tests, or treatments that you do not feel comfortable with or do not wish to participate in.

Mandatory Reporting
If you are under 18, medical providers are required to report to law enforcement if you seek treatment related to sexual assault. If you are over 18, medical providers are only required to report if you have been seriously injured as a result of the sexual assault. Otherwise, it is up to you whether or not to make a report to law enforcement. For more information about talking to law enforcement, see the Talking to Law Enforcement section of this book.

Privacy and Confidentiality
Health information is considered private and confidential. You have a right to have it protected. Your healthcare provider can talk to you about your privacy before you get care.

Generally, if you are 18 years old or older, medical personnel cannot share information about you without your permission. There are some exceptions and your healthcare provider should tell you what they are. If you are under 18 years old, your parent or guardian must give consent for you to have most medical testing or treatment. However, in Nebraska, your parent/guardian does not need to give consent or be notified if you want to get testing or treatment for sexually transmitted infections.
If you are using health insurance to pay for your medical care, the healthcare provider will need to provide information about the treatment you received for billing purposes. Your healthcare provider can talk to you about what information is shared. If you get health insurance through your partner, spouse or parents, they may have access to any information provided to the insurance company.

If you are concerned about what is included in your permanent medical record, you can ask that medical personnel not include certain information unless absolutely necessary. You can also ask that they place necessary information in a note that cannot be seen by everyone who has access to the file.

**Sexually Transmitted Infections (STIs)**
It is possible to get infections such as chlamydia, gonorrhea, and herpes from unprotected sex or sexual assault. Symptoms of an STI may not show up for several weeks. Your healthcare provider will assess and treat for these infections if appropriate. After treatment, it is recommended that you have a follow-up appointment with your healthcare provider within 3 days.

**HIV**
HIV (Human Immunodeficiency Virus) is the virus that can lead to AIDS (Acquired Immunodeficiency Syndrome). It is possible to get HIV from a sexual assault. Unlike some other viruses, the body cannot get rid of HIV. That means once you have HIV, you have it for life. PEP (post-exposure prophylaxis) can reduce the chance of contracting HIV if you are exposed. PEP involves taking medications that keeps the virus from making copies of itself. These medications must be prescribed by a doctor. The sooner PEP starts, the more likely it is to work. PEP must start within 3 days (72 hrs) after possible exposure to be effective. If you believe you may have been exposed to HIV, talk to a healthcare provider as soon as possible.

**Emergency Contraception**
Emergency Contraception (EC) is a type of birth control that can help prevent pregnancy after a sexual assault. A common form of EC is “Plan B,” or the “morning after pill.” Depending on where you are in your cycle, Plan B could prevent or delay ovulation or prevent fertilization of an egg. It is also possible that Plan B prevents implantation of a fertilized egg in the uterus. In order to be most effective, the pills must be started within 3 days (72 hours). Plan B does not cause an abortion and does not affect the development of a fetus once it is implanted in the uterus. Plan B is available over the counter at most drugstores without a prescription or proof of age. Some hospitals, health clinics, or pharmacists with religious affiliations may not offer EC due to their religious beliefs. However, an advocate from the local sexual assault/domestic violence program can provide information to help to obtain this medication.
Payment
You or your insurance may be billed for any testing or treatment related to your medical care. Your healthcare provider can talk to you about payment options. Your local sexual assault/domestic violence program can also provide information about financial assistance options in your community.

Evidence Collection
If the sexual assault occurred within the past 5 days (120 hours) and you are considering telling the police about the assault, you can choose to have evidence collected. More information about evidence collection is provided in the Evidence Collection section of this book.

Advocate Support
Advocates from your local sexual assault/domestic violence program are available 24 hours a day to talk on the phone or meet you at the hospital, medical clinic, or police station. They can provide information and offer resources, support, and assistance. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
Long-term effects

Sexual violence can have long-lasting effects on victims and their families. Whatever the circumstances, sexual assault is a life-altering event that often changes the way we think about the world.

When you were being sexually assaulted, you had no control over your body or the situation. During the assault, you may have feared for your life. Fear, anger, and feelings of helplessness may take a long time to heal. It is common for victims to experience fears related to the assault for years.

If you have experienced previous sexual assaults or repeated assaults by the same perpetrator, the current assault may bring up feelings and memories related to past experiences. This is normal and can affect the way you cope and heal. If you feel isolated, or if others blamed you for the sexual assault, this can also impact the way you heal.

People who have been traumatized often alternate between feeling overwhelmed by and feeling relatively detached from the experience. This may seem unmanageable and consuming, but it is a natural and expected response. Be assured that for most people, the effects will become more manageable after time. However, emotional pain and feelings of being overwhelmed may come and go for a long time after the assault.

Some survivors may develop Post-Traumatic Stress Disorder (PTSD). PTSD is an anxiety disorder that may develop after exposure to a terrifying event or ordeal, such as war, natural disasters, domestic violence, or sexual assault. Other mental health issues may also occur, such as panic attacks or depression. In these instances, working with a therapist may be helpful.

One of the most common feelings that survivors experience is the loss of who they were and what life was like before the assault. You may experience a grieving process similar to when there is a death of a loved one. For example, you may mourn the loss of feeling safe in your own home and/or community or the loss of a relationship. You may also be feeling as though you have lost your sense of personal power and control and this loss can affect you for quite a while. It will be helpful for you to get as much support as possible.

For more information or to speak with a local crisis advocate, contact your local sexual assault/domestic violence program. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
“Will I ever heal?”

The long-term effects of a sexual assault are not always negative. In fact, some survivors have found that the assault changed their lives in ways they felt were positive. For instance, some people feel stronger and more prepared to handle a crisis because they were able to handle the sexual assault. Others feel safer and have more confidence in their decisions because they have learned to trust their “gut instinct” instead of questioning it. Some people feel that they have better friendships now than they did before the assault because they learned who their true friends were during their time of crisis.

After an assault you may think of your life in terms of “before the assault and after the assault.” As healing occurs, the assault will no longer be the defining moment in your life; rather it will be integrated into the landscape of your life experiences.

Everyone has their own way of coping with traumatic events. There is no set way to recover from an assault, nor is there a set amount of time. What is important for you to know is that many people who have experienced sexual violence have come through the experience and live full lives. You can too.

If you would like to speak to someone about what you are feeling, advocates from your local sexual assault/domestic violence program are available 24-hours per day. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
If drugs or alcohol were involved

If you were under the influence of alcohol or drugs when the sexual assault occurred, you may not remember it clearly and may feel confused about what happened. If you were drugged without your knowledge, you may be feeling even more violated, vulnerable, and confused. Even if you knew how much you were drinking or using. Even if you used drugs or alcohol willingly, the sexual assault was not your fault.

Drugs, Alcohol, & Consent
To give consent to sexual activity, you have to be able to think clearly about your decisions and be able to communicate your wants and needs. Since drugs and alcohol affect your ability to think, act, and communicate clearly, they affect your ability to give consent. In Nebraska, subjecting someone to sexual penetration or sexual contact without consent is a crime. An intoxicated person cannot legally give consent, regardless of whether the substance use was voluntary or involuntary.

Perpetrators will use drugs and alcohol to commit sexual assault by taking advantage of someone who is drunk or high or intentionally getting someone drunk or high. They may encourage alcohol or drug use, lie to a victim about how much alcohol is in a drink, or intentionally drug a victim in order to assault them. A perpetrator can use any drug to make it easier for them to sexually assault someone, but alcohol is by far the most common. Alcohol is involved in at least half of all sexual assaults in which the victim and perpetrator knew each other.¹

If you chose to use drugs or alcohol, you may believe you are responsible for what happened. Sexually assaulting someone who is intoxicated is illegal, even if that person used the substance voluntarily. Using drugs or alcohol is not the same thing as consenting to sex or “asking for” an assault. Intoxication makes it hard to give consent and perpetrators choose to take advantage of this. No matter what your actions were before the assault, you are not to blame.

It’s important to remember that anyone can turn down or stop sexual activity at any time. Even if you agreed to sex at first, you have the right to change your mind. It was the other person’s responsibility to stop. If they didn’t, it was sexual assault. Also, someone who is sleeping or unconscious cannot give consent. If you started having sex but then fell asleep or passed out, you stopped giving consent. If the other person did not stop, it was sexual assault.
**Illegal Drugs & Underage Drinking**

If you were assaulted after using illegal drugs, or if you were drinking underage before you were assaulted, you may fear you’ll be in trouble if you report the assault to law enforcement. While we can’t make promises that you won’t be charged for drug use or drinking underage, we can safely say that charging a sexual assault victim for substance use is not best practice. The issue of substance use should only be addressed in relationship to the assault you have experienced, the increased vulnerability it caused, and your inability to consent due to the substance. You can address these concerns with an advocate who may be able to give you more information about how law enforcement in your community handles these issues.

**Date Rape Drugs**

A “date rape drug” is actually any drug that a perpetrator uses to make it easier to sexually assault someone. This includes alcohol and drugs that victims have taken willingly. However, when people talk about “date rape drugs,” they usually mean drugs that are given to a victim without their knowledge. The most common drugs used for this purpose are Rohypnol (roofies), Gamma Hydroxybutyrate (GHB), and Ketamine (Special K, Liquid K). They have no taste or smell and act right away to make someone calm and tired. They can also make a person unconscious and usually cause memory loss.

Giving someone a drug without their knowledge is a crime. If the perpetrator drugged you, they could be charged for the drugging and the sexual assault. If you believe you may have been drugged and you choose to report to law enforcement, a forensic examiner can test to see if there are any drugs in your system. Unfortunately substances such as GHB and Rohypnol don’t stay in your system very long and may not be detected if too much time has passed.

**Getting Support**

Advocates from your local sexual assault/domestic violence program are available 24 hours a day to provide resources, information and support. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.

If the person who harmed you is an intimate partner

In many cases people are sexually assaulted by an intimate partner as part of an on-going pattern of control and abuse. Intimate partner sexual violence could happen in a dating relationship, when people are living together, or in a marriage. Sometimes this is confusing, especially if other parts of the relationship do not include violence.

It doesn’t matter if you had intimate contact or sex with your partner in the past. Past actions do not equal consent for future interactions. No one has the right to pressure or force you to do something you do not want to do. Sexual assault is against the law, regardless of the type of relationship.

Often this type of violence occurs throughout the relationship in a variety of ways. Some of these include:

• Accusing you of being unfaithful
• Touching you in ways you don’t want to be touched
• Withdrawing affection as a “punishment”
• Making derogatory comments about your body, your sexuality, your ability to be a good partner, etc.
• Forcing you to view pornographic material
• Making you feel like it is unsafe to refuse sex
• Pressuring you to have sex in order to have other needs met (i.e. paying rent, buying groceries)
• Forcing you to have sex
• Forcing you to have sex with others
• Forcing you to have sex or sexual contact in front of the children

Another common tactic is controlling access to reproductive health care and/or birth control options. This could include not allowing you to become pregnant, sabotaging birth control options (i.e. hiding pills, poking holes in condoms, not providing funds to purchase birth control), forcing you to get pregnant, forcing you to get an abortion, or forcing you to take birth control even though you want to become pregnant. Some survivors have also been denied access to annual exams and/or to prenatal services when pregnant.
Sometimes, even after an unhealthy relationship has ended, the abusive ex-partner will seek a way to re-establish control through sexual assault or sexual coercion. This may include withholding something you need like child support or not agreeing to leave the home unless you agree to have sex again. While there is no way to predict how your ex-partner will respond to the relationship ending, the best predictor of future behavior is examining past behavior. Any previous physical or sexual violence or threats thereof should be taken seriously when planning for your safety.

An advocate from your local sexual assault/domestic violence program can provide emotional support and information about options, including shelter. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
If you were abused as a child

You are not alone. National studies have found that about 1 in 3 girls and 1 in 6 boys will be sexually abused before the age of 17. However, many survivors do not disclose the assault for years due to confusing memories of the abuse, fear of not being believed, or due to an ongoing relationship with the perpetrator. The majority of child sexual assault is committed by someone known to the victim and trusted by them.

Sometimes people who were abused as children disclose and seek help as adults. This could be because new memories have surfaced, a new assault triggers memories, or because you are in a place in your life where it feels safe to confront those memories.

As a survivor of childhood abuse, you may experience a variety of emotions and effects linked to the abuse. Some of these include:
- Difficulty setting limits and boundaries
- Flashbacks and unexpected memories of the assault
- Anger – at the perpetrator, at family members, at yourself
- Grief over the loss of parts of your childhood or sense of innocence
- Feeling damaged by the abuse
- Feeling a sense that others know even without disclosure
- Feeling betrayed by the perpetrator and/or others that were in the home during the assault
- Difficulty trusting others
- Guilt or a sense of responsibility for what happened either because the perpetrator told you the abuse was your fault, or because you were special, or because you felt physical pleasure during the abuse
- Developing medical concerns, both physical and mental health

You may have developed a variety of coping skills. These may include healthy coping skills, such as talking with others or journaling. You may also have developed some unhealthy coping skills, such as drug or alcohol use, eating disorders, or self-harming behaviors such as cutting.

Child sexual abuse can have a long-term impact on you. Sometimes survivors experience more abuse later in life by the same perpetrator or by someone else. Building a strong support system can help mitigate the effects of the abuse.
An advocate from your local sexual assault/domestic violence program can provide emotional support and information about options. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673). Services are free and confidential.

Sexual assault on campus

Sexual assault on college campuses is, unfortunately, a common occurrence. National studies have found that 1 in 5 women and 1 in 16 men are sexually assaulted while in college.\(^1\)

It is common for survivors of sexual assault on campus to be unsure if what happened was rape. Many are worried that they did something to cause the assault, especially if alcohol and/or drugs were involved and they can’t remember everything about the incident. Others feel pressured by roommates, friends, and classmates to not report the incident.

Some survivors may choose to make a report to local law enforcement. Survivors of campus sexual assault may also report the assault to campus officials. Some students may choose to report the sexual assault to both local law enforcement and school officials, although you do not have to do so. You don’t have to report to anyone if you do not want to.

If you report the sexual assault to school officials, it is helpful to know about some federal requirements that the college/university must follow. There is federal legislation called the Clery Act, as well as Title IX, that mandate colleges and universities to investigate, respond to and report any sexual assaults that are disclosed by students to school personnel. If a student chooses to report to the school, the school is obligated to investigate. Most colleges and universities have a designated Title IX Coordinator. This person will be most familiar with the school’s policy and procedures regarding sexual assault. Schools are required to provide the contact information for the Title IX Coordinator. It may be on the school’s website and/or it could be included in the student handbook.

It is important to know that once a report is made, there are limits to the confidentiality the school can provide. Other departments as well as the perpetrator will most likely be given information about the report. You won’t be able to control decisions about how the information will be used and what will happen with the school’s investigation.

An exception to this is counselors employed by the school. They may not be considered mandatory reporters of sexual assault and may have the ability to keep the information confidential due to their role as a mental health professional. Disclosure to a counselor may not instigate the campus’ internal investigation process.
Your local sexual assault/domestic violence program can assist you in working with campus personnel and figuring out whether or not disclosure to a counselor would cause an investigation to occur. To find the sexual assault/domestic violence program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673).

Nebraska’s sexual assault laws

Nebraska law states that sexual assault occurs when a perpetrator subjects a victim to sexual penetration or sexual contact without the victim’s consent. When the law says without consent it means that:

- you were threatened or forced
- you verbally expressed lack of consent (example: saying “no”)
- you expressed lack of consent through conduct (example: pulling away or pushing the offender away)
- you were deceived or tricked into giving consent

Nebraska law also states that sexual assault occurs when the perpetrator knew or should have known that the victim was not mentally or physically able to give consent. Examples of this include:

- when you were asleep, passed out, or unconscious
- when the perpetrator knew or should have known that you were too drunk or high to consent
- when the perpetrator knew or should have known that you were unable to understand what was going on due to mental impairment or developmental disability
- when the perpetrator knew or should have known that you were unable to make your own decisions due to cognitive impairment or developmental disability
- if the perpetrator knew or should have known that you were underage

If you thought it would have been useless or dangerous to fight back or say “no,” this doesn’t mean that you wanted the contact or gave consent. Nebraska law states that a victim doesn’t need to resist if it would be useless or harmful to do so. Even if you didn’t fight back, and even if you didn’t say “no,” if you didn’t give consent, the perpetrator can still be arrested and charged with a crime.

In Nebraska, the age of consent for sexual intercourse is 16. Sexual penetration is considered sexual assault by Nebraska law when one person is 15 years old or younger and the other is 19 years old or older. It doesn’t matter if the younger person said they wanted sexual intercourse in this situation. Nebraska law considers anyone under 16 to be too young to consent and the older person could be charged with a crime.

There are three degrees of sexual assault included in Nebraska law. The degree of assault depends on the age of the victim, the age of the perpetrator, whether there was penetration or not, and whether the victim was injured.

The following chart defines the terms used in Nebraska law and shows the penalties for each degree of sexual assault.
Nebraska’s sexual assault offenses and penalties

Definitions

**Sexual Penetration:** Vaginal, oral or anal intercourse or any intrusion, however slight, of any part of the actor’s or victim’s body or any object manipulated by the actor into the genital area or anal openings of the victim. Sexual penetration does not require the emission of semen.

**Sexual Contact:** Intentional touching, either directly or through the clothing, of the victim’s or actor’s intimate parts (sexual organs, genital area, anal area, breasts, buttocks, inner thigh, groin) to sexually arouse or gratify either party.

**Serious Personal Injury:** Great bodily injury or disfigurement, extreme mental anguish or trauma, pregnancy, disease, or loss of impairment of a sexual or reproductive organ.

**Sexual penetration and contact are illegal regardless of age if:**
- The victim verbally or physically expressed a lack of consent
- Physical force or the threat of force or coercion is used
- The actor has a weapon
- The victim is mentally or physically incapable of resisting or appraising the nature of his or her conduct

Nebraska Statute §28-318
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<tr>
<th>1st Degree Sexual Assault</th>
<th>Penalty</th>
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<tr>
<td>Nebraska Statute §28-319</td>
<td>Class II Felony</td>
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<td>• First offense: 1-50 yrs</td>
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<td></td>
<td>• Second offense: minimum 25 years</td>
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<td>• Sexual Penetration and</td>
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<td>• Without consent of the victim</td>
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<td>• The actor knew or should have</td>
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<td>known that the victim was mentally</td>
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<td>or physically incapable of resisting</td>
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<td>conduct</td>
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<td>or</td>
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<td>• The actor is 19 yrs of age or older and</td>
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<td>the victim is 12-15 yrs old</td>
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<th>2nd Degree Sexual Assault</th>
<th>Penalty</th>
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<tr>
<td>Nebraska Statute §28-320</td>
<td>Class IIA Felony</td>
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<tr>
<td></td>
<td>• 0-4 yrs and</td>
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<td>2 yrs post-release supervision or</td>
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<td>• $25,000 fine or</td>
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<tr>
<td>• Sexual Contact and</td>
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<td>• Serious personal injury is caused to the</td>
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<td>victim and</td>
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<td>• Without consent of the victim</td>
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<td>• The actor knew or should have</td>
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<td>known that the victim was mentally</td>
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<td>or physically incapable of resisting</td>
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<td>or appraising the nature of his or her</td>
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<td>conduct</td>
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<th>3rd Degree Sexual Assault</th>
<th>Penalty</th>
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<tr>
<td>Nebraska Statute §28-320</td>
<td>Class I Misdemeanor</td>
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<td>• 0-6 mo or a fine up to $1,000 or</td>
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<td>• Sexual Contact and</td>
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<td>• No serious personal injury is caused to the</td>
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<td>victim and</td>
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Evidence collection

Having evidence collected increases the likelihood that the perpetrator will be charged and prosecuted for a crime. Evidence from a sexual assault can be collected from your body, clothes, and other personal belongings in a process called a forensic medical exam.

You may not want to even think about a forensic exam right now. That’s okay. It is your choice whether or not to have the exam. The process can also be overwhelming and you may have a lot of questions. We will try to answer the most common questions here. If you want to know more, want someone to talk to about the decision, or if you have any questions along the way, advocates from your local sexual assault/domestic violence program can give you information and talk to you about your options.

Where do I go for the exam?
Often the forensic exam is done at a hospital but it may also be done at a medical clinic or Child Advocacy Center, depending on your community. Not every hospital or medical clinic has staff trained to conduct a forensic exam. A law enforcement officer, medical provider, or advocate can tell you where you need to go to have evidence collected.

Can someone go with me?
The forensic exam can be a very difficult experience, both physically and emotionally. If you choose to have a forensic exam, it may be helpful to have someone with you for support, such as a family member, friend, or advocate from your local sexual assault/domestic violence program. Advocates from your local program can meet you at the hospital, clinic, or advocacy center and may be with you during the actual exam if you want. Be aware that if you invite someone other than an advocate into the exam room, they could be called as a witness if you decide to report the crime.

How soon do I need to have the exam?
Evidence will be lost or damaged over time, so the sooner the exam is done the better. Evidence can be collected within 5 days (120 hours) after an assault.

What kind of evidence are they looking for?
They are mostly looking for evidence of the perpetrator’s DNA. They will also document any injuries you have from the assault. Your DNA and DNA from any consensual sexual partners you’ve had recently may be tested to distinguish it from other DNA they find.
Preparing for the Exam
If you choose to have evidence collected immediately after the assault, it is best not to do anything that could damage evidence such as:

- Eat, drink, or smoke
- Change clothes
- Bathe or shower
- Use the restroom

It is normal to want to do these things after a sexual assault. Even if you have done these things, you can still have the forensic exam.

The forensic examiner will want to keep the clothes you were wearing during the assault as evidence. Many facilities have clothes available for you to change into, but you may want to bring your own set from home. If you have already changed clothes, put the clothes in a paper bag and bring them with you when you go for the exam.

How long is the exam?
The length of the exam varies but it is common for it to take several hours.

What is a rape kit?
Sometimes the term “rape kit” is used to refer to the sexual assault forensic exam. However, the term “rape kit” actually refers to the box that holds all the materials necessary for collecting and storing evidence during a forensic exam. The rape kit may also be called an “evidence collection kit” or just “the kit.”

Who conducts the exam?
While it is possible in Nebraska for any doctor or nurse to conduct the exam, it is best if evidence is collected by someone specially trained to conduct forensic examinations, such as a Sexual Assault Nurse Examiner (SANE) or Forensic Nurse Examiner (FNE).

What happens during the exam?
There are several parts to the forensic exam. You can stop, pause, or skip a step at any time during the process. If you want to skip one or more parts of the exam, you can still have the other parts done.

During the exam, you have the right to be informed about what is happening. It is okay to ask for more information or explanation about what is happening. Be honest with the examiner and let them know when you are uncomfortable or upset.
Immediate care – If you have injuries that need to be taken care of immediately, this will be done first.

History – You may be asked about your current medications, pre-existing conditions, and other questions related to your health history. You may also be asked about recent consensual sexual activity. These questions may seem very personal. They are asked so that investigators can rule out any DNA or other evidence that is not connected to the assault.

Details about the assault – The examiner will ask you what happened so they have an idea of what kind of evidence and injuries to look for. Let them know if you are sore or hurting anywhere.

Head-to-toe examination – The examiner will ask you to remove your clothing and place each piece into a separate paper bag. Next they will examine your body for external injuries. They may take photographs of any injuries from the assault such as bruises, scratches and tears. If there was vaginal penetration during the assault, the examiner may perform an internal examination by inserting a speculum into the vagina to look for injury. In the case of anal penetration, they will closely examine the anus to assess for injury.

Collecting samples – To collect other potential evidence, the examiner may:
- Pull approximately 20 strands of hair from several areas of your scalp
- Swab your mouth and gums for DNA between your teeth
- Comb through your pubic hair and collect any stray pieces of debris
- Swab under your fingernails
- Swab the inside of your vagina and/or anus
- Swab any other areas of your body where the perpetrator may have left body fluid, such as a bite mark or area of fluorescence from an ultraviolet light.

Do I have to pay for the exam?
Federal and state law requires that sexual assault victims must be able to get the exam without paying for it. In Nebraska, the exam is paid for by the state’s Sexual Assault Payment Program Cash Fund. This fund should pay for the examination and collection of evidence, the facility fee, and any lab fees for pregnancy testing, testing for sexually transmitted infections (STIs), and the collection and processing of evidence. These costs should not be billed to you or submitted to your insurance.

You or your insurance could be billed for expenses related to medical treatment, such as medications for injury or infection (e.g. painkiller, antibiotics), x-rays, MRIs, or a doctor’s fee that is billed separately from the hospital and not covered by the Sexual Assault Payment Program Cash Fund.
I don’t know if I want to report to law enforcement. Should I still have evidence collected?

Evidence can only be collected in the first 5 days after an assault happens. If you haven’t decided whether to report to law enforcement or need more time to think about it, you can still have evidence collected so it is available if you need it.

Can I make a report without giving my name?

If you want to have evidence collected, you have a little bit of control over how much information is provided to law enforcement. The medical provider conducting the forensic exam should tell you about the following three options:

Option 1: Full Report to Law Enforcement:
If you wish to make a full report, the medical provider will contact law enforcement and an officer will come to the medical facility to take your initial statement. Once the exam is completed, the evidence will be turned over to law enforcement and they will continue to investigate the case, including follow-up interviews. The evidence will be sent to the crime lab to be tested. Any DNA evidence found may be entered into a national database called CODIS, which will tell them whether that DNA has ever been linked to a crime before. It usually takes about 6 months for the evidence to be tested. Law enforcement will continue their investigation while waiting for evidence to be tested. Once the testing is complete, law enforcement should contact you to tell you what was found.

Option 2: Partial Report to Law Enforcement
If you choose to make a partial report, law enforcement will not come to take your statement. Once the exam is completed, the medical provider will contact law enforcement and tell them that there is evidence to be picked up. Law enforcement will be given your name and contact information and the evidence will be sent to the crime lab for testing. Any DNA evidence found may be entered into a national database called CODIS, which will tell them whether that DNA has ever been linked to a crime before. It usually takes about 6 months for the evidence to be tested. Once the testing is complete, law enforcement will contact you and tell you what was found. Law enforcement will not investigate your case unless you make a full report. You can choose to change a partial report into a full report at any time by contacting law enforcement and letting them know.

Option 3: Anonymous Report
If you choose this option, evidence will be collected, but law enforcement will not be given your name, contact information, or any information about what happened. After the evidence is collected, it will be sealed in the
evidence collection kit. The sealed kit will be given to law enforcement but it will not be opened or tested. Law enforcement will store the kit for 20 years or until you decide to make a full report, whichever comes first.

If I made a partial or anonymous report but want to turn it into a full report, what do I do?
All evidence collection kits are labeled with a number we call a “kit number.” The medical provider will put the “kit number” in your file. They should also give the number to you when you are done with the exam. To turn a partial or anonymous report into a full report, contact law enforcement, give them your name and kit number, and tell them that you want to “convert” your report into a full report. If you no longer have your kit number, you can call the medical provider, give them your name, and ask them to give you the number. If you do not know which law enforcement agency has your kit, the medical provider can tell you that as well.

What happens after the exam?
If you made a full report (see above), the evidence and photos will be given to law enforcement and used as part of their investigation. Unfortunately, having a forensic exam does not guarantee that your case will move forward. Remember that the evidence kit is only one part of the legal case. If your case goes forward, you will still need to speak with the prosecutor and possibly testify in court if the prosecutor requests.

Where can I get information and support?
An advocate from your local sexual assault/domestic violence program can help you through this process. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673).
Talking to law enforcement

You may want to contact local law enforcement to make a report about what happened. If you choose to make a report, a forensic exam can be done to collect evidence, usually within 5 days (120 hours) from the time of the assault. Forensic exams are discussed in detail in the previous section of this book. You can make a report to law enforcement any time, even if you do not want to have a forensic exam done, and even if it has been longer than 5 days since the assault occurred.

If you sought medical treatment for the assault at the hospital or medical facility, law enforcement may have been called. You still have the right to decide whether or not you want to speak to them. You also still have the right to medical treatment whether you talk to law enforcement or not.

Many people are hesitant to report the assault because they fear they won’t be believed or that they will be blamed for the assault, particularly if drugs or alcohol were involved or the person that harmed them is someone they know. If you decide to make a report, it is important to tell law enforcement what happened honestly and in your own words. Remember, there is nothing you did to cause the assault and you are not to blame for what happened.

The investigating officer will ask you to recount the assault in as much detail as you can remember. After your first official statement, investigators working on your case may need to talk to you several more times. If you are confused about details and the order of events, this is normal. A traumatic event makes it difficult to remember things as clearly as you normally do. Take your time and do your best. As things become clearer, let the investigators know what else you remember.

Making a statement to law enforcement can sometimes feel embarrassing, difficult, and scary. Advocates from your local sexual assault/domestic violence program are available 24 hours a day to meet you at the hospital, medical clinic, or law enforcement agency. They can provide information and offer resources, support, and assistance. To find the program nearest you, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
The criminal justice process

After a report to law enforcement is made, decisions about moving forward with a legal case are up to the criminal justice system. If law enforcement is able to make an arrest, it is common for a sexual assault case to take a year or more to move through the court system. If there is DNA evidence, this can take a long time to process. The investigators will probably be in touch with you frequently during the first month after the report is made. After that, they may make contact less often.

Arrest and Charges Filed
If an arrest is made, the case is presented to the prosecutor. The prosecutor will determine whether there is enough evidence to file charges and take the case to court.

Initial Arraignment
If the prosecutor files charges, the case will move to initial arraignment. The defendant (the person charged with the crime) is informed of the charges and possible penalties. If the defendant does not already have a defense attorney, one will be assigned. The judge may set bail for the defendant.

Plea Bargaining
Sometimes the defendant may be offered a reduced or lesser charge in exchange for a guilty plea. You have the right to be informed of any plea that is accepted.

Preliminary Hearing
The defendant has the right to waive the preliminary hearing. During a preliminary hearing, you and other witnesses may be asked to testify and will be asked specific questions by the defense attorney. The defendant will be present at the preliminary hearing. After the preliminary hearing, the case will either be dismissed or moved forward for trial.

Plea
The defendant will go before the court and enter a plea of guilty, not guilty, or no contest.

- Not Guilty: This means that the defendant is denying guilt to the charges. If the defendant enters this plea, the case will be set for trial.
- No contest: This means that the defendant is neither denying nor admitting guilt to the charges. If the defendant enters a plea of “no contest” then the judge will review the evidence. If the judge decides there is enough evidence for a conviction, a no contest plea is the same as a guilty plea.
- Pleads Guilty: There is no trial. The defendant will be convicted and sentenced.
Pre-sentence Investigation (PSI) & Victim Impact Statement
If the defendant is convicted, the judge may request a PSI. The PSI is completed to tell the judge more about the type and severity of the case. The judge may use this information to decide how severe the penalty should be. As the victim, you may be asked to complete a Victim Impact Statement to tell the court how you were affected by the crime. You have the option of answering the questions on the Victim Impact form or writing your own statement. It is important to know that all information from the PSI, including the Victim Impact Statement, may be available to the defendant. The victim’s friends and family can also provide Victim Impact Statements documenting the ways they have seen you/their loved one be affected.

Sentencing
The sentence refers to the penalties given to someone convicted of a crime. If the defendant pleads guilty or no contest, or is found guilty after a trial, the sentence will be announced in court. The sentence may include fines, jail or prison time, probation, or all of the above.

Appeal
If a defendant is found guilty at trial, they have the right to appeal the conviction to the Court of Appeals. The court will review the case and may dismiss the verdict if they believe there was an error in the way the case was handled. If no error is found, the verdict will be upheld. If the verdict is upheld by the Court of appeals, the defendant can appeal to the State Supreme Court. The original decision is not final until all appeals are heard, which could be several years later. During this time the defendant could possibly be released on an appeal bond until a final decision is reached.

Finding Information and Support
The criminal justice process can be lengthy, overwhelming, frustrating, and scary. You may seek assistance from victim advocates at the sexual assault/domestic violence program in your area, or the Victim/Witness Unit in the county where your case is being investigated. Advocates can explain the criminal justice process and help you prepare for all the possible outcomes. Advocates can also provide emotional support before, during, and after the process and accompany you to criminal justice proceedings.

For more information, or to find the sexual assault/domestic violence program in your area, see the Finding Services section of this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network at 1-800-656-HOPE (4673). Services are free and confidential.
Services provided by the network of sexual assault and domestic violence programs

Nebraska’s coalition of sexual assault and domestic violence programs provide access to safety, shelter, and advocacy services across the state. This section describes the core services provided by every program. To find the program nearest you, see the listings in this book, visit www.nebraskacoalition.org, or call the Rape, Abuse & Incest National Network (RAINN) at 1-800-656-HOPE (4673).

The network is designed to provide emergency services, information, and assistance to survivors of sexual assault, domestic violence, and stalking.

24-Hour Crisis Line
Every program offers a 24-hour hotline through which survivors can access confidential support, information, and access to services. There is also a statewide crisis line for Spanish-speaking survivors. This can be reached by calling 1-877-215-0167.

Emergency Shelter
Programs are available 24-hours a day to provide options and/or referrals for victims and survivors to find safe shelter away from violence.

Transportation
Programs offer transportation to shelter, court proceedings, medical services, or other community agencies whenever necessary.

Medical Advocacy and Referrals
Staff and volunteers are available upon request to accompany survivors to hospital emergency rooms and local medical offices for treatment of injuries or a rape exam.

Legal Advocacy and Referrals
Advocates can provide emotional support through court proceedings, referrals to local attorneys, and assistance with obtaining a domestic abuse protection order or a harassment order.

On-going Support
Individual support is always available for survivors of sexual assault, adult survivors of child sexual abuse and domestic violence. Group support is available in many communities. Some programs also offer groups specifically for teens and children.
Education and Prevention Programs
Prevention programs addressing child sexual abuse, sexual assault, domestic violence, sexual harassment, and other forms of gender-based violence are available for all age groups.
Nebraska’s sexual assault & domestic violence programs - Alphabetical listing

The Bridge
(Burt, Cuming, Dodge, Saunders, Washington)
Fremont, NE
888-721-4340

Bright Horizons
(Antelope, Boyd, Brown, Holt, Keya, Knox, Madison, Paha, Pierce, Stanton, and Rock)
Norfolk, NE
877-379-3798

Catholic Charities – The Shelter
(Domestic Violence Program)
(Douglas)
Omaha, NE
402-558-5700

Center for Survivors
(Boone, Butler, Colfax, Nance, Platte, Polk)
Columbus, NE
800-658-4482

The Crisis Center, Inc.
(Hall, Hamilton, Howard, Merrick)
Grand Island, NE
866-995-4422

Domestic Abuse/Sexual Assault Services (DASAS)
(Furnas, Hayes, Frontier, Hitchcock, Red Willow, Dundy, Chase)
McCook, NE
877-345-5534

DOVES
(Banner, Box, Butte, Cheyenne, Dawes, Kimball, Morrill, Scotts Bluff, Sheridan, Sioux)
Gering, NE
866-95-DOVES (36837)

Friendship Home (Domestic Violence Program)
(Lancaster)
Lincoln, NE
402-437-9302

Haven House Family Service Center
(Cedar, Dakota, Dixon, Thurston, Wayne)
Wayne, NE
800-440-4633

Healing Hearts and Families
(Blaine, Custer, Garfield, Greeley, Loup, Sherman, Valley, Wheeler)
Broken Bow, NE
800-942-4040

Heartland Family Service Domestic Abuse Program
(Sarpy, Cass)
Papillion, NE
402-292-5888 or 800-523-3666

Hope Crisis Center
(Fillmore, Gage, Jefferson, Saline, Seward, Thayer, York)
Fairbury, NE
877-388-4673
Parent-Child Center
(Dawson, Gosper)
Lexington, NE
English Crisis Line: 800-215-3040
Spanish Crisis Line: 866-351-9594

Project Response
(Johnson, Nemaha, Otoe, Pawnee, Richardson)
Auburn, NE
800-456-5764

Rape/Domestic Abuse Program
(Cherry, Hooker, Lincoln, Logan, McPherson, Thomas)
North Platte, NE
888-534-3495

The S.A.F.E. Center
(Buffalo, Franklin, Harlan, Kearney, Phelps)
Kearney, NE
877-237-2513

Sandhills Crisis Intervention Program (SCIP)
(Arthur, Deuel, Garden, Grant, Keith, Perkins)
Ogallala, NE
308-284-6055

Spouse Abuse/Sexual Assault (SASA) Crisis Center
(Adams, Clay, Nuckolls, Webster)
Hastings, NE
877-322-7272

Voices of Hope
(Lancaster)
Lincoln, NE
402-475-7273

Women’s Center for Advancement (WCA)
(Douglas)
Omaha, NE
402-345-7273
**Nebraska’s sexual assault & domestic violence programs - Service area map**

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Crisis Line Number</th>
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</thead>
<tbody>
<tr>
<td>1) DOVES, Gering</td>
<td>866-95-DOVES (36837)</td>
</tr>
<tr>
<td>2) Sandhills Crisis Intervention Program (SCIP), Ogallala</td>
<td>308-284-6055</td>
</tr>
<tr>
<td>3) Domestic Abuse/Sexual Assault Services (DASAS), McCook</td>
<td>877-345-5534</td>
</tr>
<tr>
<td>4) Rape/Domestic Abuse Program, North Platte</td>
<td>888-534-3495</td>
</tr>
<tr>
<td>5) Parent-Child Center, Lexington</td>
<td>800-215-3040</td>
</tr>
<tr>
<td>Or en español</td>
<td>866-351-9594</td>
</tr>
<tr>
<td>6) Healing Hearts and Families, Broken Bow</td>
<td>800-942-4040</td>
</tr>
<tr>
<td>7) The S.A.F.E. Center, Kearney</td>
<td>877-237-2513</td>
</tr>
<tr>
<td>8) Spouse Abuse/Sexual Assault Crisis Center (SASA), Hastings</td>
<td>877-322-7272</td>
</tr>
<tr>
<td>9) The Crisis Center, Grand Island</td>
<td>866-995-4422</td>
</tr>
<tr>
<td>10) Center for Survivors, Columbus</td>
<td>800-658-4482</td>
</tr>
<tr>
<td>11) Bright Horizons, Norfolk</td>
<td>877-379-3798</td>
</tr>
<tr>
<td>12) Haven House, Wayne</td>
<td>800-440-4633</td>
</tr>
<tr>
<td>13) The Bridge, Fremont</td>
<td>888-721-4340</td>
</tr>
<tr>
<td>14) Hope Crisis Center, Fairbury</td>
<td>877-388-4673</td>
</tr>
<tr>
<td>15) Voices of Hope, Lincoln</td>
<td>402-475-7273</td>
</tr>
<tr>
<td>16) Friendship Home, Lincoln</td>
<td>402-437-9302</td>
</tr>
<tr>
<td>17) Project Response, Auburn</td>
<td>800-456-5764</td>
</tr>
<tr>
<td>18) Heartland Family Service Program, Papillion</td>
<td>800-523-3666</td>
</tr>
<tr>
<td>19) Women’s Center for Advancement (WCA), Omaha</td>
<td>402-345-7273</td>
</tr>
<tr>
<td>20) Catholic Charities – The Shelter, Omaha</td>
<td>402-558-5700</td>
</tr>
</tbody>
</table>
Native American Tribes and sexual & domestic violence services

In addition to Nebraska’s coalition of sexual assault and domestic violence programs, there are four tribal entities in Nebraska that provide services to victims of sexual and domestic violence.

Omaha Tribe of Nebraska
Omaha Tribe of Nebraska Domestic Violence Program
P.O. Box 368, Macy, NE 68039
(402) 837-5391

Omaha Nation Coordinated Community Response Team - Rural Domestic Violence Program
312 Main Street, Walthill, NE 68067
(402) 846-5280 or (402) 922-3712 or (844) 299-9612 (toll free)

Ponca Tribe of Nebraska
Ponca Tribe of Nebraska Domestic Violence Program
1800 Syracuse Avenue, Norfolk, NE 68701
(402) 438-9222 – Lincoln area
(402) 371-8834 – Norfolk area
(402) 857-3391 – Niobrara area
(402) 734-5275 – Omaha area
(712) 258-0500 – Sioux City area

Santee Sioux Nation
Otokahe Teca Tipi (New Beginning House)
Rt. 2 Box 5254, Niobrara, NE 68760
(402) 857-2316

Winnebago Tribe of Nebraska
Domestic Violence Intervention / Family Preservation Program
P.O. Box 645, Winnebago, NE 68071
(402) 878-4308

There is also a national helpline that is available Monday through Friday from 9:00am - 5:00pm (Central Standard Time). Strong Hearts Native Helpline: 1-844-7NATIVE.
24 Hour Crisis Lines

Línea de Crisis en Nebraska (en español)
1-877-215-0167

Rape, Abuse & Incest National Network (for routing to local resources)
1-800-656-HOPE (4673)

National Domestic Violence Hotline
1-800-799-SAFE (7233)

National Teen Dating Abuse Helpline
1-866-331-9474
Additional hotlines

Abuse & Neglect Reporting
Nebraska’s Child Abuse Reporting Hotline – (800) 652-1999
Nebraska’s Vulnerable Adult Abuse Hotline – (800) 652-1999

Domestic & Sexual Violence
Abused Deaf Women’s Advocacy Services & National Hotline – (855) 812-1001 (video phone)
*Note this website offers online counseling through AIM (Deaf Hotline) and email (deafHelp@thehotline.org) (11am-7pm CT)
Línea de Crisis/Nebraska Spanish Helpline – (877) 215-0167
Department of Defense Safe Helpline – (877) 995-5247
National Domestic Violence Hotline – (800) 799-7233
Rape, Abuse & Incest National Network – (800) 656-HOPE (4673)
*For routing to local resources
National Teen Dating Abuse Helpline – (866) 331-9474

AIDS
National AIDS Hotline – (800) 232-4636 / TTY – (800) 243-7012
National STI Resource Center Hotline – (919) 361-8488
Women Alive – (800) 554-4876

Lesbian/Gay/Bi-sexual/Transgender
GLBT National Youth Talkline – (800) 246-PRIDE (7743)
Trans Lifeline – (877) 565-8860

Sexuality and Sexual Health
American Sexual Health Association – (919) 361-8488
Planned Parenthood National Hotline – (800)-230-PLAN (7526)
*For routing to local resources

Suicide & Mental Health
National Hopeline Network – (800) 442-HOPE (4673)
National Suicide Hotline - (800)-SUICIDE (784-2433)
National Mental Health Association Hotline – (800) 273-TALK (8255)

Youth
Girls & Boys Town National Hotline – (800) 448-3000 / (800) 448-1833 (TDD)
National Youth Crisis Hotline – (800) 442-HOPE (4673)
Free Online Crisis Chat Services
Crisis Chat – www.crisischat.org
DoD Safe Helpline – www.safehelpline.org
IMAlive – www.imalive.org
National Suicide Prevention Lifeline –
www.suicidepreventionlifeline.org/GetHelp/LifelineChat
National Teen Dating Abuse Helpline – www.lovisrespect.org
Websites for additional information

1 in 6: Support for Men and Those Who Care About them  
www.1in6.org

1 Blue String  
www.1bluestring.org

Abused Deaf Women’s Advocacy Services & National Hotline  
www.adwas.org

Adult Survivors of Childhood Abuse  
www.ascasupport.org

Arte Sana: Victim Advocacy SIN Fronteras  
www.arte-sana.com

Just Detention International  
www.justdetention.org

Male Survivor  
www.malesurvivor.org

National Center for Victims of Crime (NCVC)  
www.ncvc.org

National Domestic Violence Hotline  
www.ndvh.org

National Indigenous Women’s Resource Center  
www.niwrc.org

National Sexual Violence Resource Center  
www.nsvrc.org

Nebraska Coalition to End Sexual & Domestic Violence  
www.nebraskacoalition.org

Nebraska State Suicide Prevention Coalition  
www.suicideprevention.nebraska.edu
NO MORE: Together We Can End Domestic Violence & Sexual Assault
www.nomore.org

Northwest Network of Bisexual, Trans, Lesbian and Gay Survivors of Abuse
www.nwnetwork.org

Not Alone: Together Against Sexual Assault
www.notalone.gov

Rape, Abuse & Incest National Network (RAINN)
www.rainn.org

Teen Dating Abuse Helpline
*Note this website offers online counseling through chat and instant messaging.
www.loveisrespect.org

United States Department of Defense Sexual Assault Prevention and Response (SARO)
www.sapr.mil
**Glossary**

**Bystander**
Bystanders are individuals who observe or witness violence but are not directly involved. Bystanders have the choice to intervene. Doing nothing when violence happens encourages the violence to continue. Speaking up could discourage, prevent, or interrupt an incident. When bystanders stand up to stop sexual violence from happening, this is called bystander intervention.

**Coercion**
Coercion is a way of making someone do something against their will. There are many types of coercion. Pressuring, guilt-tripping, lying, manipulating, threatening, and using physical force are all forms of coercion.

**Consent**
Giving consent means agreeing to do something or giving permission for something to happen. Consensual sex requires respect, understanding, communication, and a conversation about each partner’s wants, needs, and level of comfort. Sex must always start with consent. Sex without consent is sexual assault.

**Fight or Flight Response**
The fight or flight response is one way the body responds to fear. It is the body’s way of getting ready to fight or run away when there is danger. Someone experiencing this may feel their heart beat faster, may feel warm in their face and hands, may start to breathe faster or feel tightness in their chest, and may feel their muscles get tense. The fight or flight response can happen any time anxiety is high or the brain senses danger.

**Forensic Exam**
A forensic exam is a special exam conducted by trained medical personnel for the purpose of collecting DNA and other evidence of sexual assault from the survivor’s body. For more information about the forensic exam, see Evidence Collection section of this book.

**Freeze Response**
The freeze response, also called tonic immobility, is one way the body responds to fear. It is the body’s way of going numb or “playing dead” in order to survive. Someone experiencing this may feel frozen, numb, stiff, or heavy, or be literally unable to move. The freeze response is reflexive, meaning that the body does it automatically. It is not possible for someone to force themselves out of it. While the freeze response is most common in life-threatening situations, it can happen any time anxiety is high or the brain senses danger.
Intimate Partner Relationship
An intimate partner relationship is one in which the individuals are dating, living together, married, or have a child in common. An intimate partner could be a boyfriend, girlfriend, husband, wife, or domestic partner.

Intimate Partner Sexual Violence
Intimate partner sexual violence refers to sexual violence that occurs in an intimate relationship.

Perpetrator/Offender
A perpetrator or offender of sexual violence is someone who engages or attempts to engage another person into unwanted sexual activity through force, coercion, or manipulation. The terms perpetrator and offender are used interchangeably throughout this book.

Rape Kit
A rape kit, also called an evidence collection kit, is a container that includes all the materials necessary for collecting and storing evidence during a forensic exam.

Sexual Assault Nurse Examiner (SANE)/Forensic Nurse Examiner (FNE)
A Sexual Assault Nurse Examiner or Forensic Nurse Examiner is a medical professional who has been specially trained to conduct a forensic exam.

Sexual Contact
Sexual contact is any touching of the intimate or private parts of the body, such as breasts, groin, buttocks, or genitals. Sexual contact includes touching over or under clothes. It can include kissing, petting, fondling, patting, squeezing, or caressing. For the definition of sexual contact under Nebraska Law, see the Nebraska’s Sexual Assault Laws section of this book.

Sexual Penetration
In general, sexual penetration occurs when a part of one person’s body penetrates, or enters, another person’s body. Vaginal intercourse, anal intercourse, fingering, and oral sex would all be considered sexual penetration. Sexual penetration also includes the insertion of an object into the vagina or anus. For the definition of sexual penetration under Nebraska Law, see the Nebraska’s Sexual Assault Laws section of this book.
Sexual Violence – Also referred to as sexual assault and rape

Sexual violence is an umbrella term that includes a wide range of victimizations. In this book, you will see the terms “sexual assault,” “sexual violence,” and “rape” used interchangeably. These terms all refer to behaviors of a sexual nature that perpetrators use to put down or embarrass another person, or to force, pressure, or trick another person into sexual activity. Sexual violence may or may not be illegal according to state or federal law. Behaviors can range from words, gestures, and jokes, to threats, intimidation, unwelcome sexual contact, or sexual penetration. Sexual violence may involve force or other forms of violence, such as slapping, hitting, or kicking. However, perpetrators often use more subtle forms of coercion, such as lying or manipulation. For the definition of sexual assault under Nebraska Law, see the Nebraska’s Sexual Assault Laws section of this book.

Stress Response

The stress response refers to the way the body physiologically responds to things that cause fear, anxiety, or distress. The fight or flight response and freeze response are both stress responses that can help someone survive. The stress response often includes increased heart rate, increased breathing rate, a decrease in digestive activity (don’t feel hungry), muscle tension, and the release of extra sugar in the blood for energy.

Survivor/Victim

There are several different views on the terms victim and survivor. While some individuals relate to the term “survivor,” others may refer to themselves as “victims” because the term shows that they were victimized by a violent crime and that the sexual violence was not their fault. Some individuals don’t feel that either term fits their experience or how they see themselves. No term can represent every individual who has experienced sexual violence. It is up to each individual to decide how to define, describe, or label their own experience. For the purposes of this book, we use the term survivor to refer to individuals who have experienced sexual violence because we wish to highlight the strength it takes to survive the assault, reach out for help, and begin to heal.

Victim Advocate

Victim advocates are professionals trained to support victims of crime. Advocates can offer information, emotional support, and referrals to services in your community. Victim advocates from a sexual assault/domestic violence program may also be referred to as “sexual assault advocates” or “domestic violence advocates” and have been specifically trained in supporting people who have been sexually assaulted. For information about working with an advocate, see the Finding Support section of this book.
Nebraska’s coalition of domestic violence and sexual assault programs provide access to safety and shelter across the state.

To locate the program nearest you, visit www.nebraskacoalition.org or view the listing at the back of this book.