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## **Doing the Work: Surfacing the Social Context of Sexual Violence in Therapeutic Settings**

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**Nicole Pietsch** is Coordinator of the Ontario Coalition of Rape Crisis Centres ([OCRCC](#)). The Coalition works toward the prevention and eradication of sexual assault. Its membership includes 25 sexual assault centres from across Ontario, offering counselling, information and support services to survivors of sexual violence, including childhood sexual abuse.

Since 1998, Nicole has assisted women and youth living with violence, including immigrant and refugee women and survivors of sexual violence. In recent years, Nicole has worked with youth and adult survivors of violence who are incarcerated, those living in an institutional setting, and Deaf youth. Nicole has a particular interest in the ways in which social constructs of sex, gender, age and race inform Canadian social policy, including law.

Nicole's written work has appeared in York University's Journal of the Association for Research on Mothering, the University of Toronto's Women's Health and Urban Life, and Canadian Woman Studies/les cahiers de la femme.

In 2013, her fiction *Sideshow of Merit*, addressing traumatic re-enactment and systemic cultural reproduction of sexual violence, was published under New Adult Fiction by [namelos press](#).

In 2014, her intersectional analysis of the "Slutwalk" movement, "*doing something*" about "COMING TOGETHER": *The Surfacing of Intersections of Race, Sex and Sexual Violence in Victim-Blaming in the SlutWalk Movement*, will appear in an edited collection by Demeter Press.

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“What shall I use as a diagnosis when I bill for this [therapy] session?...  
 ‘oppression, gender-based’...?”  
 ~ Marcia Hill<sup>1</sup>

As Hillary Clinton pointed out in 1995, “it is a violation of human rights when individual women are raped in their own communities”<sup>2</sup>. But how do we talk about this – that is, *sexual violence, as a systemic social problem* – with survivors in a therapeutic setting?

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Certainly, sexual violence is a crime: an act in violation of the Criminal Code of Canada<sup>3</sup>. When examined in a therapeutic setting – for example, counselling, therapy or peer support model – the impacts of sexual violence can also be understood via a trauma and mental health framework: an awareness of violence and abuse in women’s lives, critical for “understanding mental illness and for assisting women in recovering and maintaining wellness”<sup>4</sup>.

Yet, sexual violence cannot be divided from a broader context – one in which the victim-survivor, the violation itself (or threat of it), and the offender exist in a larger system of social norms, values and relations.

Consider, for example:

- a 2011 summary on police reported crime, which found that sexual crimes were by far the most common offence committed against girls<sup>5</sup>
- it is estimated that over 80% of women who are sexually assaulted do not report due to humiliation or fear of re-victimization in the legal process<sup>6</sup>
- girls are sexually assaulted by a family member at a rate close to 4 times that of boys; and that sexual assaults against children in families “overwhelmingly” (97%) involve a male relative<sup>7</sup>

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<sup>1</sup> Hill, Marcia. 2004. *Diary of A Country Therapist*. The Haworth Press Inc. NY: 81

<sup>2</sup> Clinton, Hillary Rodham. *Remarks For The United Nations Fourth World Conference On Women*. Beijing, China. September 5, 1995. Online: <http://www.un.org/esa/gopher-data/conf/fwcw/conf/gov/950905175653.txt>

<sup>3</sup> Sexual Assault Support Centre of Waterloo Region. *Criminal Code of Canada, Related to Sexual Assault*. Online: [http://www.sascwr.org/files/www/resources\\_pdfs/legal/CRIMINAL\\_CODE\\_OF\\_CANADA.pdf](http://www.sascwr.org/files/www/resources_pdfs/legal/CRIMINAL_CODE_OF_CANADA.pdf)

<sup>4</sup> Morrow, M. with the British Columbia Centre of Excellence for Women’s Health. *Violence and Trauma in the Lives of Women with Serious Mental Illness Often Overlooked*. Online. See <http://www.cwhn.ca/en/node/39512>; and <http://bcccewh.bc.ca/publications-resources/documents/TIP-Guide-May2013.pdf> for full study.

<sup>5</sup> Canadian Centre for Justice Statistics. Released on February 25, 2013. *Measuring violence against women: Statistical trends*. p. 15

<sup>6</sup> METRAC. *Sexual Assault Statistics Sheet*. Online: <http://www.metrac.org/resources/downloads/sexual.assault.statistics.sheet.pdf>

<sup>7</sup> Statistics Canada, as quoted in DeKeseredy, W. *Understanding Violence Against Women and Children: The Need for a Gendered Analysis*. Presented at: Critical Connections symposium, Ontario Association of Children’s Aid Societies, March 2010.

- that in addition, women and young women from marginalized racial, sexual and socioeconomic groups are more vulnerable to being targeted for sexual violence<sup>8</sup>.

Many prevailing societal attitudes justify, tolerate, normalize and minimize sexual violence against women and girls<sup>9</sup>. This phenomenon is popularly referred to as [rape culture](#)<sup>10</sup>.

Rape culture impacts groups of women differently as well, setting up young women, women of color, impoverished women, trans-identified women and other women as populations that are more likely to be targeted for sexual violence and to be disbelieved or blamed for the violation they experience.

Further exacerbating (and reproducing) rape-culture values is the reality that many legal systems in the world function to minimize or ignore acts of sexual violence. Timely examples of this global reality include the Democratic Republic of Congo, where sexual assault is regularly employed as a means of political and territory weaponry<sup>11</sup>; the history of sexual abuse of Aboriginal children in [residential schools](#) in Canada; and the apathy of politicians, police and judiciary towards rape victims in India, as evidenced by recent episodes of sexual violence in New Delhi, India<sup>12</sup>.

As women and children are targeted for acts of sexual violence more than men, this means that weak, inaccessible and inconsistent victimization laws impact women and children more as well<sup>13</sup>.

What are we, as support professionals, to say of these patterns when survivors come to us seeking support?

### **Understanding the Work: Defining the Social Context of Sexual Violence**

Community-based staff and volunteers working with survivors of sexual violence have noted that speaking of individual cases of sexual violence, mental health, and traumatic response *alone* “obscures the collective nature of traumatic experience, and

<sup>8</sup> Wolfe and Chiodo, CAMH, 2008, p. 3.

<sup>9</sup> World Health Organization. *Understanding and addressing violence against women*. Online: [http://apps.who.int/iris/bitstream/10665/77433/1/WHO\\_RHR\\_12.35\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/77433/1/WHO_RHR_12.35_eng.pdf)

<sup>10</sup> See also: Hermann, D. The Rape Culture. Printed in *Women: A Feminist Perspective* (ed. Jo Freeman). McGraw Hill, 1994. Retrieved 18 October 2011. Available online:

[http://homepage.smc.edu/delpiccolo\\_guido/Soc1/soc1readings/rape%20culture\\_final.pdf](http://homepage.smc.edu/delpiccolo_guido/Soc1/soc1readings/rape%20culture_final.pdf)

<sup>11</sup> McKenzie, D. UNICEF. *Even where fighting has ended, sexual violence scars children and women in DR Congo*. Online: [http://www.unicef.org/infobycountry/drcongo\\_35223.html](http://www.unicef.org/infobycountry/drcongo_35223.html)

<sup>12</sup> Mahapatra, D. The Times of India. *Government must ensure healthcare, rehab and justice for each rape victim*. Online: <http://timesofindia.indiatimes.com/india/Government-must-ensure-healthcare-rehab-and-justice-for-each-rape-victim/articleshow/17825599.cms>

<sup>13</sup> Ibid

depoliticizes women's experiences"<sup>14</sup> of violence. These experiences include women's unique vulnerability for targeted acts of sexual assault, harassment and abuse; our reactions to it; and the too-common womanhood (and girlhood) fear of the imminence of sexual violence. A systemic view of sexual violence takes note of these patterns, makes the links between social marginalization and victimization, and challenges these in active ways.

The ability to raise the issues of social context – such as the pervasiveness of [sexual and other offenses against women](#) and children; [low conviction rates](#)<sup>15</sup> for sexual assault in Canada; and [ways in which gender, race and age may inform a victim-survivor's experience of sexual violation](#) – strengthens our sense of *who and what contributes to the prevalence of sexual violence* in our communities. This takes the onus off of women, children and survivors of all walks of life.

The ability to raise the issue of social context can also enhance your capacity to support a survivor therapeutically. Talking about social and systemic contexts of sexual violence supports survivors of violence to:

- See the offender as responsible for his/her own actions *no matter what* preceded the sexual violence; and no matter how she may have responded to the violation
- See one's experiences as a part of larger *systemic problems*, inequality, and power and control – instead of something that she, the victim, was personally responsible for
- Recognize sad, angry or fearful feelings as a normal response to being violated, coerced or betrayed as opposed to mental health “symptoms”
- Confront and challenge external comments, rhetoric and social norms that blame survivors for another's actions
- Confront and challenge internal self-talk that blames oneself for the offender's actions
- Make sense of (normalize) anxieties and limited trust in others
- Make sense of (normalize) the fear of being targeted for future acts of violence
- Really recognize ways in which she has survived; and aimed to protect herself from violation

The ability to understand social contexts impacting sexual violence survivors can also support professionals in understanding a survivor's coping responses, her or his emotions, and empathize with victim-survivors' ambivalent feelings about engaging with systems meant to support victims of crime.

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<sup>14</sup> Bonisteel, M. and Linda Green. *Implications of the Shrinking Space for Feminist Anti-violence Advocacy*. Presented at the 2005 Canadian Social Welfare Policy Conference, Forging Social Futures, Fredericton, New Brunswick, Canada: 29

<sup>15</sup> See page 2 of: The Learning Network. *The Network Comes to Life*. “Few Sexual Assaults Lead to Court Convictions”. May 2012.

## Doing the Work: Surfacing the Social Context of Sexual Violence in Therapeutic Settings

As Hillary Clinton pointed out in 1995, “it is a violation of human rights when individual women are raped in their own communities”<sup>16</sup>. But how do we talk about this – that is, *sexual violence, as a systemic social problem* – with survivors within a counselling setting?

A systemic view of sexual violence takes note of social patterns of justifying, minimizing or normalizing sexual violence, and intentionally challenges them.

A counsellor or therapist can intentionally integrate a systemic understanding of sexual violence in the following ways:

1. Clearly naming sexual violence as violence:
  - *“Even if you had been drinking, you still had the right to say yes or no. If you did not consent, it’s sexual assault.”*
  - *“If you were a child and he was an adult, this was not a ‘sexual relationship’. It was sexual abuse.”*
2. Identifying victim-blaming myths and rhetoric in media stories of sexual violence, or other public discussion of sexual violence:
  - *“This columnist suggests that false-reporting of sexual assault is a common problem. In fact, we know that sexual assault is an under-reported crime, and for many reasons. What reasons can you think of that victims don’t report?”*
3. Identifying victim-blaming myths and rhetoric in counselling sessions:
  - *“Let’s go back a moment, to where you said you ‘started things’ by agreeing to get a ride home with him. I want to say that agreeing to a ride home is just a ride home: you didn’t start anything. What happened was not what you wanted, and it wasn’t your fault.”*
4. Identifying victim-blaming myths, rhetoric or thoughts in oneself -- or one’s personal reactions to the service-user/client. Work to recognize and question disapproving or interrogative responses to survivors’ stories in yourself. In addition, always consider integrating strategies to support yourself in doing this challenging work! For example:
  - Regular and as-needed debriefing with colleagues and supervisors
  - Use of supervision or case management support discussions
  - Awareness of self-care, vicarious trauma response, or defensiveness/resistance to service-users due to professional or personal fatigue

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<sup>16</sup> Clinton, Hillary Rodham. *Remarks For The United Nations Fourth World Conference On Women*. Beijing, China. September 5, 1995. Online: <http://www.un.org/esa/gopher-data/conf/fwcw/conf/gov/950905175653.txt>

- Planning for respite ☺ such as vacation periods, professional development, and connection with family, friends and colleagues outside of the workplace
5. Encouraging survivors to think critically about how women, girls and femininity are valued (or not valued), and how this impacts social norms about sexual assault:
    - *“Too often, “good” women and girls are expected to control their own sexuality, as well as the sexuality of others. But all women and girls have the right to be sexual when they choose to.”*
    - *“We often get the message that if women behave in the right way, they won’t get sexually assaulted. These messages are harmful to all women – they are additionally harmful to women who are sexually assaulted.”*
  6. Identifying stereotypes, oppressive stigma and myths about sexual violence in media stories, or in other public discussions:
    - *“This magazine story suggests that incest is only a problem in poor families. But we know that sexual abuse affects families from all classes.”*
  7. Naming forms of oppression that are present in service-user/clients’ personal stories (that is, in their lived experience):
    - *“It should not matter that you were a teenager and he was an adult. You still had the right to be believed when you told what happened. All of us have the right to be heard and believed.”*
  8. Identifying that women’s experiences of violence are different than men’s experiences of violence – and, where appropriate, sharing examples, anecdotes or statistics to help illustrate this.

In addition, professionals working with survivors of sexual violence can engage in individual acts of advocacy on behalf of (or in partnership with) service-users/clientele. Individual advocacy may include helping survivors to navigate the health or criminal justice systems, to share their story with others, or to access income or practical supports following an episode of sexual violence.

Professionals working with survivors of sexual violence can also get involved in systemic advocacy: for example, advocating for social policy or service provision that is more responsive to survivors’ needs, or supportive of women’s rights.

Remaining informed about and connected to systemic concerns that impact survivors is integral to being able to talk with survivors about the realities, barriers and successes they face. Here, therapist Marcia Hill comments on the convergence of therapeutic work with social action work:

“I do my small bit...speaking up when I can, political work here and there. But if the insurance companies really want to save money on psychotherapy, they

should put their considerable lobbying clout behind antidiscrimination laws for lesbians and gays and sexual harassment legislation and enforcement of the Americans with Disabilities Act...Until then, I am supporting outrage...and helping with tactics the hard way: one person at a time"<sup>17</sup>.

**Additional Resources on Integrating Social Context, Anti-violence/Anti-oppression Work and Therapeutic Work:**

- "Diary of A Country Therapist". Author: Marcia Hill
  - "Making Allies, Making Friends". Authors: H. Vasquez, M. Nell Myhand & Allan Creighton
  - "Making The Peace: A 15-Session Violence Prevention Curriculum for Young People." Authors: P. Kivel, Oakland Men's Project, Allan Creighton
  - Combat Poverty Agency. "Developing Facilitation Skills – A Handbook for Group Facilitators". New Edition 2008. Available online:  
[http://www.combatpoverty.ie/publications/DevelopingFacilitationSkills\\_2008.pdf](http://www.combatpoverty.ie/publications/DevelopingFacilitationSkills_2008.pdf)
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<sup>17</sup> Hill, Marcia. 2004. *Diary of A Country Therapist*. The Haworth Press Inc. NY: 82  
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