

The Aftermath of

Sexual Assault

To many people, students and staff alike, the campus feels like home: it feels safe and comfortable, unlike other parts of town which possible feel alien by comparison. To those who live in residence or in the many apartment blocks adjacent to the University, it literally is home. But, like any community of its size and mix, it is not as safe as it seems, and where sexual assault is concerned, there is a definite, recognizable problem.



"There is no doubt the problem exists," says F.B. Cookson, Director of University Health Service, although he hastens to add that he doubts that the campus is "populated by many rapists."

Since September 1974 the number of cases of sexual assaults on females, determined from the records of University Health Service, has been between 20 and 25. But in all of these cases, Dr. Cookson points out, there was concern of a suspected or actual pregnancy as a result. To estimate the actual number of sexual assaults "it would be more reasonable to multiply that figure by ten," he feels. This is said in view of the numbers of assaults which do not result in pregnancy, and the emotional trauma associated with rape which discourages victims from seeking help they are not sure is there.

"Those 20 or 25 represent only the tip of the iceberg," suggests Dr. Cookson. In Edmonton, which has the highest per capita incidence of reported rape in Canada, even this may be an understatement.

And what of those instances of sexual assault which may be just as damaging emotionally but which fall outside the legal definition of rape: exposure, attempted rape, unwelcome homosexual encounters, verbal abuse? Apart from personal knowledge of these incidents, there is no store of information available which would assist any efforts at preventing them.

If sexual assault is a problem, the limited availability of facilities to provide help and understanding for assault victims represents an equally pressing problem. Student Help, a volunteer service under the aegis of the Students' Union is able to offer limited assistance, as is the University Health Service. The latter, with five senior nurses specially trained to deal with the emotional aftermath of sexual assaults and related problems, as well as its staff of physicians and the nurses in residence (who are part of the service), has what could amount to the nucleus of an excellent rape



crisis centre, but unfortunately the service is not available on a 24-hour basis. While more than willing to offer all the help possible from the Health Service, Dr. Cookson readily agrees that "the solution is not in the existing set-up on campus."

The problem of sexual assault is complex and not susceptible to such facile solutions as increased street lighting or restrictions on



residences. Neither the provision of immediate and long-term aid for victims nor preventive measures can be undertaken by the University without adequate information on the nature and extent of the problem.

For this reason, General Faculties Council, at its November 3 meeting, requested that the Academic Women's Association, which is understandably concerned in this area, conduct an investigation into the problem of sexual assault on campus and bring forward recommendations that might assist the University in dealing with the problem.

A committee struck by the AWA, after a survey of what is known about sexual assault on campus and services available to victims, has prepared several preliminary recommendations. These draft recommendations include such items as the provision of emergency telephones throughout the campus, foot patrols inside and outside buildings during the evening and weekend hours to act as deterrents to loiterers, and a "what to do if..." list which could be widely posted.

However, the group feels it cannot make its final recommendations without a more adequate information base. "Perhaps because of the embarrassment of the situation, perhaps because of a feeling of

hopelessness that anyone would ever want to listen sympathetically, much less help, most victims never report that they have been assaulted," says Jean Lauber, President of the Academic Women's Association and a member of the committee.

In an effort to obtain information about sexual assaults and related incidents that have occurred over the past several years on campus, the Association has set up an electronic secretary (telephone 432-3225) that will record cases on a 24-hour basis, initially for one month, beginning January 10. If the response warrants it, use of the electronic secretary will be extended to the end of term. The accompanying questions should act as a guide to callers.

"We want to hear not only from rape victims," Dr. Lauber emphasizes, "but from victims of all similar kinds of threaten-



ing or traumatic incidents, attempted sexual assault, exposure, verbal abuse, homosexual encounters, men as well as women."

"We also want to stress that this is a completely anonymous survey. No names will be asked and no names used," she stated. "We feel that the impersonality of a tape recording may reduce any feelings of timidity the callers may have and therefore give us a better sampling and more complete information than we might otherwise receive."

Those who would prefer to talk to a person rather than a tape recorder should simply leave information about how they may be contacted; others who prefer to communicate their information on paper may write TO Dr. Lauber in care of the Department of Zoology.

In case of emergency...

The AWA information line is *not* an emergency or rape crisis line. It is merely there to gather information which may ultimately prevent other sexual assaults from happening.

If there has been any physical injury, victims of sexual assaults should go or be taken immediately to the University Hospital Emergency unit.

University Health Service (telephone 439-4991, 8 a.m. to



10 p.m.), residence nurses, and Student Help (telephone 432-4357) are all prepared to give sympathetic assistance to assault victims.

What to do

The only way the Committee on Sexual Assault can obtain information about the kinds and extent of problems faced on campus is by hearing about *your* experiences. The survey is completely anonymous.

Please help us by dialing 432-3225 and giving as much information as you can, using these questions as a guide. Or, if you prefer to speak to a person rather than a tape recorder, please let us know how we can get in touch with you. If you would rather communicate in writing, please write to Jean Lauber, Dept. of Zoology.

What we would like to know:

- about yourself. Are you a student/academic staff/non-academic staff? Age?
- about what happened. When did the incident take place? (time of day, month, year). Where did it happen? Briefly, what happened? Did you know the assailant(s)? What was your immediate reaction? (fight back, scream, run, try to reason with the assailant) Was the incident connected with any other crime(s)? (robbery, armed assault, etc.) Were there any effects from the assault? (pregnancy; bruises or other injury; venereal disease; anxiety/depression; other). Did you seek help from - police/ Campus Security Force/ Student Help/ Student Counselling Services/ University Health Service/ other physician/ friends/ anyone else? What kind of assistance did you receive? Was it satisfactory?
- If you did not seek assistance, why not? Are there any measures which could have been taken by the University or others which you feel might have prevented this incident from happening or might have helped you?