

RESPONDING TO DISCLOSURES OF SEXUAL VIOLENCE & MISCONDUCT

LISTEN

BELIEVE

EMPOWER

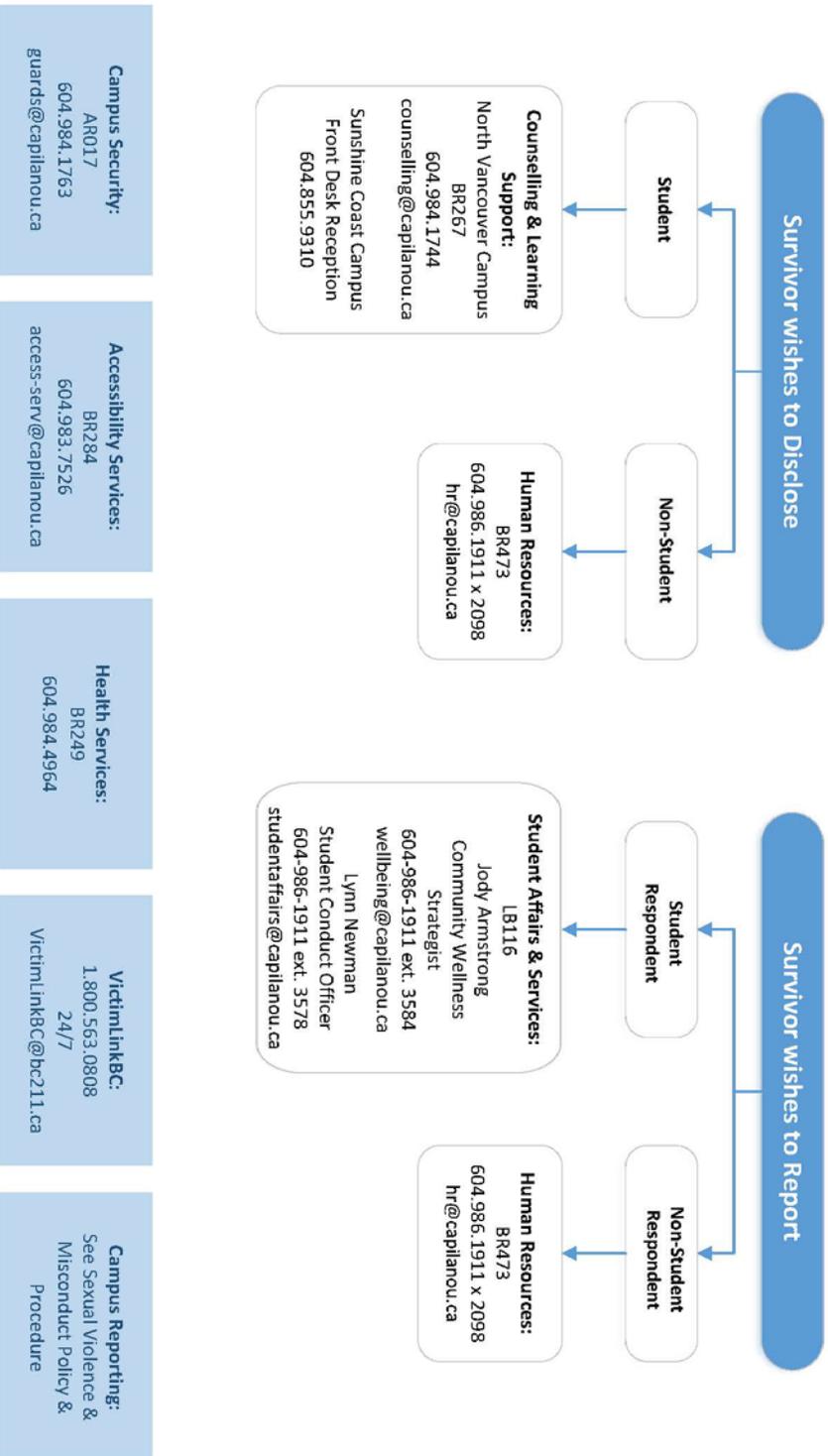
CONSENT EDUCATION

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CONSENT EDUCATION

Survivor Disclosure/Reporting Resources



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DEFINITIONS

“**Disclose**” or “**Disclosing**” means the sharing of information by a member of the University community regarding an incident of sexual violence and misconduct with a member of the University community in order to access support. A disclosure can be made without a formal report to the university, under section 7, and/or police.

“**Report**” or “**Reporting**” means a formal report of an incident of sexual violence and misconduct made by a Member of the University Community for the purpose of initiating some form of investigation or adjudication by the University. This is not the same as Disclosing, under section 6, which does not initiate a formal process. This is also not the same as making a report to police.

It is important to be able to make the distinction between **disclosing** and **reporting**. Essentially, disclosing means the sharing of information, while reporting refers to a formal process within the University to initiate further actions. It is **always the choice of the survivor** whether they want to pursue reporting or not.

3 STEPS WHEN RECEIVING A DISCLOSURE

When a student chooses to **disclose** their story of sexualized violence, try to follow these 3 steps:



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1. Listen

- ▶ Be patient; let them take their time to tell you what happened.
 - ▶ Sexual violence takes away a person's power and feelings of control. Allowing survivors to make their own decisions about their healing can help in regaining that sense of power again.
- ▶ Mirror their language by using the terms they use.
 - ▶ Victim → **survivor** Abuser → **perpetrator/rapist** Therapy → **counselling/help**
- ▶ Do not press for unnecessary information. You are not conducting an investigation.
 - ▶ **Avoid** asking if they were drinking or what they were wearing. Asking for unnecessary details, or focusing on the behaviour, appearance, and/or location of the survivor at the time of the assault is an avenue of victim blaming.

2. Believe

- ▶ Many survivors blame themselves or fear they will not be believed.
- ▶ Use reassuring dialogue such as "It's not your fault", "thank you for sharing this with me" or as simple as "I believe you".
 - ▶ Research shows the **first few responses** a survivor receives when they disclose, are critical to their healing. When a survivor feels believed, you have already helped them begin their healing.

3. Empower

- ▶ Ask them what they need. Don't assume you know what's best.
- ▶ Provide information where you can, and let them choose.
- ▶ Connect them with on-campus and community resources.
 - ▶ Help the survivor understand their options and where to find more information. Be respectful of a survivor's decisions, even if you may not agree with them.
- ▶ You may encourage them to seek support, but don't insist.
 - ▶ Use empowering language that reinforces that survivors can make their own decisions. For example, instead of saying, "You should go to the hospital," say, "Do you think you want to go to the hospital?"

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EMERGENCY SITUATIONS

If someone does approach you with an emergency situation, it is important to know the process.

- ▶ Are they or the campus in immediate danger? Do they need medical attention?

Call Campus Security: 604-984-1763.
Campus Security can arrange transportation to a hospital. Call 911 if a situation is in immediate need of an ambulance or law enforcement and then notify Campus Security as well.

COMMON PITFALLS

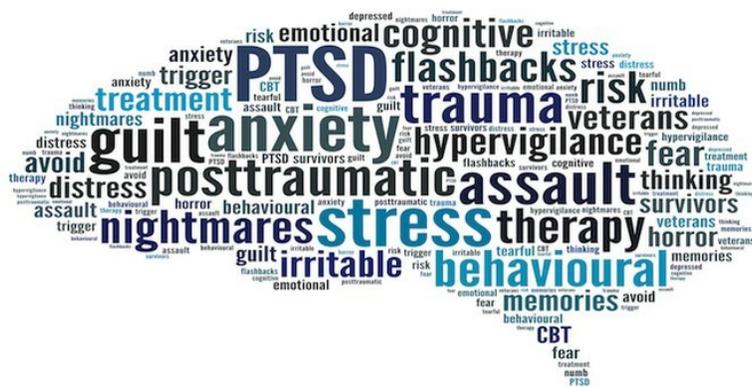
- ▶ A judgmental, shocked, or over reactive initial response.
 - ▶ Oh my gosh! That's horrible! ... As mentioned earlier, the first few reactions to someone's story can alter their healing.
- ▶ Disbelief, minimizing, or questioning the "truth" of a survivor's story or reactions.
 - ▶ Feelings of disbelief can often arise when the survivor seems calm or has no intentions of making a formal report, but everyone has a different way of reacting to trauma and each is okay. Some experience physical symptoms when dealing with trauma, some are very emotional, some seem extremely calm or may even laugh when telling their story as a way of coping.
 - ▶ **Remember that although a survivor may seem "fine", they still may not feel comfortable with physical contact, such as hugging or rubbing their back, gestures often used to comfort people. **
- ▶ Questioning why a survivor did not act in the ways society expects a sexual assault survivor to react.
 - ▶ "Why didn't you go to the police?" "Why didn't you fight back" ... The brain often reacts involuntary when we experience some forms of trauma. We hear about **Fight or Flight**, but there is also a **Freeze** aspect. For many who experience sexual assault, this is the reality. There are many reasons why someone may choose not to go to the police or not to fight back in a situation, but this does not delegitimize their experience.
- ▶ Focusing on your own emotional reaction or relation.
 - ▶ Sometimes when we don't know how to react, we redirect the conversation to be about ourselves "I had something similar happen". Try to focus on the individual and not yourself.
- ▶ Be empathetic instead of sympathetic.
 - ▶ **Avoid using "At least":**
 - At least* you didn't get pregnant;
 - At least* you were able to get away;
 - At least* it wasn't worse....

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TRAUMA AND THE BRAIN

One consideration often ignored in sexual assault trauma and disclosures, is that of the response of the brain. We have all heard of people retelling their stories with large gaps of missing information, the inability to recall details of the assault, or retelling the story a little different each time or in a sequence which doesn't make sense. This often leads to not being believed, or to more blame being placed on the victim. As critical human beings, we are taught to question the validity of a statement when it is missing important details, or when the story seems to contradict itself. After traumatic situations, however, this process can hinder the disclosure and healing process for the survivor. Better understanding the role of the brain in trauma response and how it impacts behaviour, memory, and the recall of the series of events, makes us better prepared to respond in a helping way when responding to a disclosure of sexual assault.

The following [video about trauma and the brain](https://www.youtube.com/watch?v=4-tcKYx24aA) explains the functioning of the brain in the example of a real situation. (<https://www.youtube.com/watch?v=4-tcKYx24aA>)



SEXUAL VIOLENCE & MISCONDUCT POLICY 101

The full [Sexual Violence and Misconduct Policy](#) can be accessed on the Capilano University public website. The following points are central to the roles and responsibilities of the **Peer Helper** position.

- ▶ Survivors should be treated with compassion, dignity and respect.
 - ▶ If the respondent (accused) is a student, a report can be made to the Office of Student Affairs.
 - ▶ If the respondent is any other member of the University community, a report is made to the Associate Vice President of Human Resources.
 - ▶ If the respondent is not a member of the University community, no formal action can be taken by the University, but such persons may still access counselling support. The complainant (survivor) may choose to go to law enforcement for reporting.
- ▶ When a survivor is seeking support or academic accommodation, refer them to Counselling Services.

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- ▶ Survivors can seek accommodation, referrals, information and support regardless of the details of the assault (time, place, nature of assault).
- ▶ Survivors do not need to prove that sexual violence occurred in order to access these services and accommodations. However, if accommodations are requested for medical reasons, credible medical information may need to be provided in support of that request.

The University can **impose temporary sanctions** on a respondent when the reported incident significantly disrupts the learning and working environment of the survivor. This can include, but is not limited to, **temporary removal from a program/class, no-contact orders, etc.**

Survivors have the **right to choose** what information is shared further. You must **receive consent** from the survivor before disclosing any confidential information to any third party **unless**:

- ▶ Minors are in need of protection.
- ▶ Survivors, family members or community members may be at risk of, or vulnerable to severe injury or mortality.
- ▶ Perpetrators may be at risk of committing severe injury or mortality.
- ▶ When a court order is in place requiring the release of records.

MAKING A REPORT TO LAW ENFORCEMENT

- ▶ There is no timeline for reporting a sexual assault. Survivors can come forward at any time, but the earlier the better.
- ▶ SANE kit – Sexual Assault Nurse Examination kit. This evidence must be collected within 7 days of the assault. (Vancouver General Hospital Emergency or UBC Hospital Urgent Care Centre)
- ▶ The survivor can report directly to police or RCMP, or provide a 3rd party report through a community agency such as Hollyburn Family Services or WAVAW.

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STEP BY STEP:

A) I was sexually assaulted.

1. Listen, Believe, Empower
2. Ask what the person needs from you
3. If they are looking for services or accommodation, provide them with information and refer to counselling
4. Ask if they wish to report it to the University – Follow Policy guidelines concerning who to report to
5. If they wish to report to law enforcement, they have options:
 - ▶ Make a direct report to police or RCMP
 - ▶ Make a 3rd party report through a community agency



B) My friend was sexually assaulted.

1. Listen, Believe, Empower, and inform them to do the same
2. Ask what they need from you
3. Provide information about on campus and community services
4. Suggest (do not insist) the friend take them to Counselling Services
5. Ask if their friend wishes to report and give information on options



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ON-CAMPUS RESOURCES

Policy and Procedures are available on the public CapU website:

www.capilanou.ca/SVM (and under Student Affairs)

Counselling Services

An appointment can be booked by visiting the [Counselling Services](#) office in Birch 267 or by calling 604.984.1744. Counsellors can help with a variety of issues including: addiction, anxiety, assertiveness skills, depression, eating disorders, grief and loss, goal setting and motivation, procrastination, relationship difficulties, self-esteem, self-harm, sexuality, stress management, and suicidal feelings.

Student Affairs

The [Student Affairs](#) office is located at the North Vancouver campus in Library 116.

An **online reporting** form is available to provide an alternative to face-to-face disclosure about an incident of sexual violence. The form can be used to provide information, guidance and support. Available online under Student Affairs.

The **Community Wellness Strategist** is available to provide information and education to students, staff, and faculty about the Sexual Violence and Misconduct Policy and Procedures, and what options are available on and off campus for those who have experienced sexual violence. When a formal report of sexual violence is made to the University, the Community Wellness Strategist also becomes involved. wellbeing@capilanou.ca

The [Student Conduct Officer](#) is available if you have witnessed or been a victim of disruptive or threatening behaviour by a student. Contacting Student Affairs does not automatically lead to a formal investigation, but you may contact the office for advice on difficult situations. The Student Conduct Officer may also be included in cases involving sexual violence and misconduct. studentaffairs@capilanou.ca

Conflict Resolution Advisor

When considering whether or not to make a complaint, the [Conflict Resolution Advisor](#) is available to assist by providing coaching, mediation, and alternative dispute resolution. The Advisor assists campus members to confidentially, informally, and effectively resolve difficult interpersonal situations ranging from interpersonal conflict to sexual/discriminatory harassment and bullying. All discussions are confidential.

Human Resources

The [Human Resources office](#) is located at the North Vancouver campus in Birch 473. You can contact a **Human Resources assistant** at 604.986.1911, local 3521 (faculty) or 604.986.1911, local 2098 (staff) to be put in touch with an advisor.

Campus Security

The [Campus Security office](#) is located at the North Vancouver campus in Arbutus 017. You can contact Campus Security by telephone at 604.984.1763 or by email at guards@capilanou.ca.

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COMMUNITY RESOURCES

Local Police Jurisdiction

Call 911

VictimLinkBC

Call 1.800.563.0808; Text 604-836-6381; Email

VictimLinkBC@bc211.ca

A 24/7 toll-free, confidential, multilingual telephone service available across B.C. It provides information and referral services to all victims of crime and immediate crisis support to victims of family and sexual violence.

Crisis Intervention and Suicide Prevention Centre of BC

1.800.661.3311 <https://crisiscentre.bc.ca>

Offering different crisis lines for more specialized services. See their website for more information. They also provide a chat service noon-1am online.

Sexual Assault Service

Vancouver General Hospital Emergency Department
604.875.2881 www.vch.ca

Women Against Violence Against Women (WAVAW)

604.255.6344 <http://www.wavaw.ca/>

A 24/7 crisis support service, support for SANE kit collection, 3rd party reporting. (Includes all trans,

non-binary, two-spirit, and intersex people, and others who are not cis-gendered men.)

SMART (Surrey Mobile Assault Response Team)

604.583.1295 – a 24/7 crisis support service.

Vancouver Rape Relief and Women's Shelter

604.872.8212 – a 24/7 crisis support service.

BC Society for Male Survivors of Sexual Abuse

604.682.6482

www.bc-malesurvivors.com/for-survivors

Family Services of the North Shore

604.988.5281 www.familyservices.bc.ca

Hollyburn Family Services

778.855.4566 Victim Support Services and 3rd party reporting.

Overnight Crisis Line

Crisis Centre in Vancouver
Toll Free: 1.866.661.3311

Lions Gate Hospital Emergency Department

604.988.3131

St. Paul's Hospital Emergency Department

604.806.8016