

SEXUAL ASSAULT OF THE DISABLED
HAPPENS
AND IS DAMAGING

Let's be vigilant

WHAT IS A SEXUAL ASSAULT?

Whether you are a victim, the loved one of a victim, or a resource person, understanding the issue of sexual assault is essential. Below is important information to help you.

A definition

“Sexual assault is an act that is sexual in nature, with or without physical contact, committed by an individual without the consent of the victim or in some cases through emotional manipulation or blackmail, especially when children are involved. It is an act that subjects another person to the perpetrator’s desires through an abuse of power and/or the use of force or coercion, accompanied by implied or explicit threats. Sexual assault is an attack on one’s basic rights, including the right to physical integrity and physical and psychological safety.”¹

¹ *Les orientations gouvernementales en matière d’agression sexuelle*, Government of Québec, 2001.

SIGNIFICANT STATISTICS

In 2008, Québec police statistics on sexual assault revealed that:

- ♦ **5,341** sexual offenses were registered by law enforcement
- ♦ **83%** of sexual assault victims were female
- ♦ **98%** of alleged offenders were male

Sexual assault is still a crime with a very low reporting rate to police.²

In 2004, according to Statistics Canada,

- ♦ People with disabilities aged 15 to 44 were victims of sexual assault twice as often as those without disabilities in the same age group. People with disabilities aged 45 and over were victims of sexual assault three times as often as those without disabilities in the same age group.
- ♦ People with mental health problems or intellectual disabilities posted a victimization rate (including violent crimes) four times higher than that of people with no mental health problems or intellectual disabilities. Disabled children are particularly at risk of being victims of sexual assault.
- ♦ People with disabilities were two to three times more likely to be subjected to the severest forms of conjugal violence, such as being sexually assaulted, beaten, hit, or threatened with a weapon.³

One study reveals that most women with intellectual disabilities have been victims of sexual assault at least once in their lives.⁴ According to another source, between 40% and 70% of them were assaulted before they turned 18.⁵

A PRIORITY

One intervention priority of the *À part entière : pour un véritable exercice du droit à l'égalité* (Full Participation: For a True Exercise of the Right to Equality) government policy adopted in June 2009 is to take action against all forms of exploitation, violence, and abuse with regard to the disabled. The policy acknowledges, among other things, the need to set up measures to prevent situations of violence—notably sexual violence—against the disabled and tailor interventions to their reality.⁶

**THE ACT
TO SECURE HANDICAPPED PERSONS
IN THE EXERCISE OF THEIR RIGHTS**
with a view to achieving social, school, and workplace integration defines a “handicapped person” as follows:⁷

“A person with a deficiency causing a significant and persistent disability, who is liable to encounter barriers in performing everyday activities.”

² 2008 Statistics on Sexual Assault in Québec, Ministère de la Sécurité publique, December 2009.

³ Statistics Canada, No. 85F0033M, 2009.

⁴ C. MERCIER, “La victimisation chez les personnes avec une déficience intellectuelle,” *The International Journal of Victimology*, JIDV10, 2005.

⁵ NATIONAL CLEARINGHOUSE ON FAMILY VIOLENCE, *Violence Against Women with Disabilities*, Government of Canada, 2009.

⁶ QUÉBEC, *À part entière : pour un véritable exercice du droit à l'égalité : Politique gouvernementale pour accroître la participation sociale des personnes handicapées (Full Participation: For a True Exercise of the Right to Equality: A Draft Policy to Increase Social Participation by Persons with Disabilities)*, Drummondville, Office des personnes handicapées du Québec, 2009.

⁷ Section 1g). *Act to secure handicapped persons in the exercise of their rights with a view to achieving social, school, and workplace integration*, R.S.Q., chapter E-20.1.



SEXUAL ASSAULT OF THE DISABLED, A TABOO

Whatever their age or disability, the disabled can be victims of any of the following forms of sexual assault: threat of sexual assault, exhibitionism, voyeurism, fondling and/or oral, vaginal, or anal penetration, etc. Sexual assault can occur in a relationship of trust or when the perpetrator is in a position of power or authority.⁸

In many cases a lack of knowledge about their sexuality, body, and rights as well as difficulty assessing the unacceptable nature of abuse and assault make the disabled more vulnerable. The extreme vulnerability and dependence of some increase their risk of being victims of violence by someone around them. Researches show that they are especially likely to be assaulted by someone around them—a loved one, neighbor, acquaintance, or caregiver.

MYTHS

AND DEEP-ROOTED PREJUDICES

Stereotypical views about the behavior of women and sexual assault are still prevalent in society. Prejudices against the disabled include the following:

- ♦ They cannot be sexually assaulted in a conjugal context.
- ♦ They are not sexually active.
- ♦ They cannot be sexually assaulted by those who are committed to caring for them.

⁸ Inspired by the guide *Violence sexuelle subie par les aînées : Briser le tabou pour mieux soutenir les femmes* (Sexual Abuse of Seniors: Breaking the Taboo to Better Assist Women), 2008, produced by Regroupement québécois des CALACS.

SERIOUS CONSEQUENCES⁹

The consequences of sexual assault affecting the victim's health and well-being are manifold. A disabled victim of sexual assault may display the following reactions:

- ♦ Feelings of **CONFUSION**
- ♦ Worry, ambivalence, mistrust, self-doubt, anger
- ♦ Anxiety, loss of appetite
- ♦ Low self-esteem
- ♦ Difficulty trusting others
- ♦ Withdrawal, feeling of **LONELINESS**, fear of rejection
- ♦ Isolation, fear of going out, change in recreational or social activities
- ♦ Flashbacks, nightmares, sleep disorders
- ♦ Memory loss, difficulty concentrating
- ♦ Consumption of **MEDICATION**, alcohol, or drugs
- ♦ Mental health problems, post-traumatic syndrome, depressed mood, loss of enjoyment of life, suicidal thoughts, suicide attempts, **SUICIDE**
- ♦ Physical health problems such as blood-borne and sexually transmitted infections
- ♦ Financial problems: cost of medication, hospitalization, moving, or job loss
- ♦ Behavioral problems
- ♦ Worsening of the person's disability

⁹ Inspired by the guide *Violence sexuelle subie par les aînées : Briser le tabou pour mieux soutenir les femmes* (Sexual Abuse of Seniors: Breaking the Taboo to Better Assist Women), 2008, produced by Regroupement québécois des CALACS.

¹⁰ *Information Guide for Sexual Assault Victims*, Table de concertation sur les agressions sexuelles de Montréal (a Montréal coordinating group on sexual assault), 2008.

COMING TO THE AID OF VICTIMS¹⁰

The support of family and friends plays an important role in the healing process of sexual assault victims. Below is the recommended approach to dealing with people who have been sexually assaulted.

Listen

Listen to what victims have to say without passing judgment. Let them express themselves in their own words, in their own way, at their own pace.

Believe

Believe what victims tell you. It's what they perceive happened to them. You should focus on what they say and experience.

Acknowledge

Acknowledge what victims say without minimizing or exaggerating the facts, emotions, or consequences.

Encourage their strength

Back up victims' positive steps forward by focusing on their strength and courage to talk about it.

Alleviate the guilt

Make victims understand that the sexual assault was in no way their fault. The perpetrators are entirely responsible for their actions.

Help them reclaim their autonomy

Help victims take back control of their life while you remain in the picture. Give them space to breathe and get back to their usual routine.

Validate their emotions

Help victims express what they feel by reassuring them that their reactions, emotions, and feelings of anger, resentment, guilt, and low self-esteem are normal. Everyone is entitled to respect for their integrity; sexual assault is unacceptable and criminal.

Aid and guide them

Let victims know you are available to talk to or guide them. It is important to tell them that there are also resources available to help them. Refer them to these resources, or get assistance yourself from these resources.

HELP, INFORMATION, AND REFERRALS

Whatever your age, condition, or gender and whether you are a victim of sexual assault, a loved one, or a resource person, you can obtain help and information at any time. A number of professionals in public, parapublic, and community networks are specially trained to provide you with support.

HELP, INFORMATION, REFERRALS

Referrals to all assistance and protection resources.
Toll free, available 24 hours a day,
seven days a week, anywhere in Quebec.

1-888-933-9007 or 514-933-9007

POLICE for immediate assistance

911

HEALTH AND SOCIAL SERVICES CENTER (CSSS)

www.msss.gouv.qc.ca

A CSSS consists of one or more CLSCs, residential and long term care centers (CHSLDs) and, in most cases, a hospital center. For contact information for the CSSS in your area, visit the website.

QUÉBEC GROUP OF SEXUAL ASSAULT SUPPORT CENTERS (RQCALACS)

1-877-717-5252

www.rqcalacs.qc.ca

RQCALACS is a coalition of CALACS that rallies individuals and groups to end sexual assault and fosters social and political change.

CRIME VICTIMS ASSISTANCE CENTER (CAVAC)

1-866-LE CAVAC (1-866-532-2822)

www.cavac.qc.ca

CAVAC provides free and confidential assistance and guidance services to anyone who has been the victim of a crime committed in Québec, their loved ones, and witnesses of a criminal act.

WEBSITE

www.SexualAssaults.gov.qc.ca

MINISTÈRE DE LA SANTÉ ET DES SERVICES SOCIAUX

www.msss.gouv.qc.ca

www.scf.gouv.qc.ca

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