

Onslow Victims Center



"We are here for you"

24/7 Crisis Line 910-347-4000



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Sexual Assault

Support Services

- Allow yourself enough time to heal.
- No one should have to go through this alone.
- Follow your feelings about the people that you trust with your emotions.
- We encourage you to talk with a trained professional on issues of sexual assault and rape about your feelings and experiences.

What is Sexual Assault?

Sexual assault happens when there is sexual contact against your will. It may be called a variety of names including rape, incest, molestation, sexual violence, marital rape, date rape or others. Sexual assault can happen to anyone, at anytime, anywhere. It is not your fault.

Sexual Assault is a Crime

Perpetrators of sexual assault can be anyone: an acquaintance, date, relative, stranger, friend, or spouse. Sexual assault is a crime of power, not lust, done to hurt and humiliate another.

Your Options: What to do if you have been sexually assaulted

You have taken the first step in your journey in healing. You have already taken the first step to begin your recovery by choosing to come to a place where there are people to help you. If you have any questions at any time, someone is available to answer your questions.

Making decisions after a sexual assault can be overwhelming and confusing. In addition to making decisions about whether or not you wish to disclose the assault, you may also be struggling with medical and legal decisions. You have a right to have someone of your own choosing always remain with you during the law enforcement interview and the medical exam. If you are 18 years of age or older and are not sure you want to report to law enforcement, a nurse or clinician can discuss the option of collecting an anonymous sexual assault evidence kit.

Medical Treatment: What to Expect

Once you arrive to the emergency department, you will be taken back to a private exam room. The emergency department will register you and contact the Forensic Nurse and an OVC advocate to respond. An emergency department physician will assess you for injuries that may require treatment and medically clear you prior to the evidence collection exam. You do not have to share all the details of the sexual assault at this time. To provide support for you through this difficult time, a sexual assault advocate can stay with you through the medical exam if you so desire. This person can also explain the options and next steps that are available to you. You can decline this individual at any time during your emergency room stay.

Sexual Assault Laws

Sexual assault and rape are against the law in North Carolina. Victims of rape and sexual assault have the right to take legal action to end the abuse. Attorney General Jackson works to hold perpetrators of sexual violence responsible for the crimes they commit and provide some measure of justice for survivors. Talking to the police officer or sheriff does not mean that your case will automatically be prosecuted or go to trial. It is your choice to talk with the officer to make a report.

Sexual battery and sexual assault, along with sexual molestation and rape are each defined differently in a court of law.

There are many different charges of sexual assault in North Carolina's laws against sex crimes and sexually motivated assault. Sexual assault crimes in NC are felony charges and have life-altering consequences if found guilty.

First-degree forcible rape: The non-consensual anal and vaginal penetration committed by force or coercion, and the accused uses, threatens to use, or shows they are in possession of a dangerous or deadly weapon or inflicts physical injury upon the victim.

Second-degree forcible rape: the non-consensual anal and vaginal penetration against a disabled person who is unable to consent, is physically helpless, or physically incapacitated.

Child rape: the vaginal or anal penetration of a child aged 13 or under by an adult aged 18 or over.

first-degree statutory rape: when a victim under the age of 13 is penetrated by a person 4 or more years older.

Statutory rape of someone 15 or younger: the victim is between ages 12 and 15 and the assailant is 6 years or older than the victim.

Law Enforcement Investigation

Law enforcement may respond to the emergency department to speak with you for additional details regarding your assault. You have the choice to speak with them or not and may defer to a later date. Should you choose to speak with law enforcement at a later date, the time and place of the interview will depend upon your physical and emotional status at the time. It also can vary per each police department and their policies about follow-up interviews. An OWC advocate can be available to accompany you should you wish to have additional support.

To gather information to investigate, you will be asked questions about the assault, and some may be invasive. If at any time you feel uncomfortable as to why a certain question is being asked, you have a right to ask why this question is being asked. Remember: you have a right to have someone of your choosing (friend, advocate etc.) with you during the police interview in the hospital and to continue having someone with you as the investigation progresses.

Exam and Evidence Collection Process

The Forensic Nurse (Sexual Assault Nurse Examiner-SANE) is a specially trained Registered Nurse that will provide a comprehensive medical forensic exam that is twofold:

- To assess for any physical injuries and ensure you receive the appropriate medical care
- To collect any physical or photographic evidence of sexual assault, in case you decide to report to law enforcement

The forensic nurse will ask you some difficult and perhaps painful questions. These questions may include:

- Have you had sexual activity in the last five days?
- Do you know the person who raped or sexually assaulted you?
- Can you tell me what happened in detail?
- Have you ever had voluntary sex with this person?
- Had you been using any drugs or alcohol?
- Are you currently using any birth control?

None of these questions are meant to imply that the sexual assault was your fault. You are not to blame for this assault. These questions help document the circumstances and events surrounding the assault. They also help determine the best medical care for you. With your consent, after the paperwork is completed, a doctor, emergency room nurse or sexual assault nurse examiner will begin the evidence collection and medical exam, which will include:

- Asking you to undress. Your clothes will be kept as part of the evidence collection. Please let your nurse know if you need clothing to wear home and they would be happy to assist you in this matter
- Checking for injuries. Depending upon your injuries, X-rays or photographs may need to be taken
- Taking a head-to-toe exam that will include specimen swabs from all different parts of your body, and with your consent, may include swabs of the vaginal/anal/penile area.
- Offering you medicine to prevent infection for various Sexually Transmitted Infections and screening for Emergency Contraception pills
- Drawing blood
- Providing you information about Sexually Transmitted Infections (STI) testing (HIV/AIDS, syphilis), counselors and support services

Remember: The choice to undergo and part of these processes and procedures is entirely up to you. **You can change your mind at any time.** Please don't hesitate to reach out if you have any questions or need clarification.

Emergency Room Visit

Who will pay for this?

Neither you nor your health insurance should be billed for any costs associated with this sexual assault evidence collection exam or antibiotics. However, if you sustained injuries because of the assault, you or your health insurance may be charged for their treatment. If your health insurance does not cover this, you may be eligible for a refund through the Victims of Crime Compensation Program. The Victims of Crime Compensation Program may also be able to cover other out-of-pocket costs linked to your assault.

If you are billed for this exam or if you would like more information about crime compensation, please call North Carolina Department of Public Safety 919-710-8885.

Follow-up Medical Care

Not all injuries show up right away, so do not be surprised if you discover additional bruising over the next day or two. If this happens, call the police officer who is handling your case. They may want to take additional pictures. You did not receive any testing for sexually transmitted infections (STI) during your sexual assault exam. The doctor or nurse may advise you to be checked for STIs (Hepatitis B, Herpes, and HIV/AIDS) two to three weeks after the sexual assault exam. The second checkup will involve a blood test and another examination. You can make appointments for these tests with your personal physician, local city or county health department, STI clinic, women's health center, hospital or neighborhood health clinic.

Please refer to the discharge information provided by the hospital for more details about STI testing and treatment.

- For women: At the hospital or clinic, you may have been given a base line pregnancy test to determine if you were pregnant at the time of the assault. However, if you are concerned about issues related to possible pregnancy, contact your healthcare provider. A urine pregnancy test is recommended three weeks after your assault.
- During your ED visit you were screened to see if Emergency Contraception was a safe option for you.

Emergency Contraception is not 100 percent effective. If you have not had a period within three weeks after your sexual assault exam, call your healthcare provider. If you do not have a healthcare provider, you can make an appointment with your local city or county health department, women's health center or neighborhood health clinic.

Sexually Transmitted Infections (STI)

It is impossible to tell right away after a sexual assault if you have been infected with any STI. Tests for STI need to be done at a later date to get reliable results. A checkup is recommended two to three weeks after your sexual assault exam. Some of the diseases that you should be tested for include chlamydia, gonorrhea, HIV (AIDS virus) and syphilis. These diseases may show very few symptoms and require blood tests to determine if you have any. Other infections should be tested for only if symptoms develop. Even if you took medicine to prevent STIs and see no sign of infection, consider seeing your healthcare provider for a follow-up exam.

Chlamydia, Gonorrhea, Syphilis

Testing for chlamydia, gonorrhea and syphilis can all be done at the same time during the follow-up exam. All three of these common STIs are fairly easy to cure with antibiotics. You may not experience any signs of infection, so it is still advisable that you get a follow-up exam if possible.

- **Woman Identifying Survivor:** If you notice you have any of these signs — chronic itching, vaginal discharge, abdominal pain, bleeding between periods, heavier bleeding for a long time, fever — call your healthcare provider.
- **Man Identifying Survivor:** If you notice you have any of these signs — discharge from your penis, burning or itching sensation during urination, frequency in urination, a painless lesion (sore) — call your healthcare provider.

Genital Herpes and Genital Warts

Tests for genital herpes and genital warts can be done when signs appear. Genital herpes may show signs soon after the assault, but genital warts may take as long as three months to appear. In both men and women, genital herpes starts out looking like a pimple or blister and turns into painful sores. Genital warts are slow growing and painless tissue. Some strains do not have any visible signs. If you notice any of these signs, seek medical attention. It is important for women to have an annual pap smear to detect genital warts.

Hepatitis B

Hepatitis B is an STI that is often not tested for. It may take up to six months or longer for signs to appear. Signs may include nausea, weight loss, headache, fever, dark urine, feeling sick or run down, abdominal pain or cramping (without a menstrual period) and yellowing skin and eyes. Talk to your healthcare provider about testing for Hepatitis B.

HIV/AIDS

AIDS is caused by a virus called HIV. You may want to have an initial test for HIV antibodies. The test detects if you have been exposed to HIV. According to the Centers for Disease Control and Prevention (CDC), most people with HIV develop antibodies against the virus within three months after infection. CDC studies indicate that it is

highly unlikely that it would take longer than six months for HIV antibodies to be detectable during tests. If your initial test is negative, it should be repeated two more times — three months and six months after the assault. If a follow-up test is positive, this can help you prove that you may have been exposed to HIV as a result of the assault.

- Anonymous vs. Confidential Testing: There are two ways to test for HIV. You have a right to choose which way is right for you.
- Anonymous testing means your name is not linked to your blood sample. People who choose the anonymous test are given a number code to bring back or are asked to call at a specific time to get the test result.
- Confidential testing means your name is linked to your blood sample. The test results are protected to a certain extent by state laws, agency policies and staff commitment to confidentiality. The test results may become part of your permanent medical record.

Until you know you are HIV negative, you should take protective measures, such as not having sexual intercourse, wearing a male or female condom, and not donating blood, semen and body organs. Services: Alliance of Aids Services-Carolina, (919) 834-2437 or infor@aas-c.org

Drug-Facilitated Sexual Assault

There are a number of ways in which the use of alcohol or drugs influence incidences of sexual assault. The drug most often used in sexual assaults is alcohol, which the survivor may have chosen to drink.

This information is provided to assist you in planning regarding whether or not to provide blood and urine samples that can be used to test for drugs that you may have taken or been given. If tested, the results will be used to identify drugs that you did not know you were ingesting, used by an offender for the purpose of committing a sexual assault. Before consenting to this testing, you should receive the following:

- Explanation of the types of drugs that will be detected by the test
- Information about the likelihood of detecting drugs given the circumstances of your case. For example, a negative test result does not necessarily mean that no drugs were used, because there are a number of factors that make detection of these drugs difficult.
- Opportunity to discuss the effect that a positive or a negative test result may have on the investigation and prosecution of your case.
- Opportunity to discuss concerns you may have about other drugs you may have taken which could also be detected by the test.
- Opportunity to ask other questions and discuss concerns related to the test; explanation of how you will be notified of the test results.

Because of the techniques used to conduct these tests, results related to prescription drugs you may be taking for medical reasons or any illegal drugs you may have taken voluntarily, even if unrelated to the assault, may show up. All drugs detected by the test will be reported to the law enforcement agency conducting the investigation and subsequently will be available to both the prosecution and the defense in the event of a criminal case. If you have further questions or want to know more about these details, please reach out to your SANE Nurse or LE.

Drugs used by offenders to facilitate rape can be very difficult to detect. Reasons for this include the speed with which the drug leaves the body and the fact that, for multiple reasons, the test may not have been done within the ideal timeframe. Because of these difficulties in detecting the drug, there is a high probability that even if a drug was used, the test may come back negative. This can be emotionally difficult to hear. It is important to keep in mind that this does not negate the crime that has happened, only that the physical evidence to corroborate the crime may have already disappeared.

Some survivors of drug facilitated sexual assault experience:

- Confusion
- Decreased heartbeat or blood pressure
- Dizziness or drowsiness
- Impaired judgment or memory
- Lack of muscle control
- Loss of consciousness
- Nausea
- Reduced inhibition

Because this testing could reveal any substance, the nurse or detective will ask about all drugs recently ingested. It is important to know that there are some eligibility requirements to receive compensation through the victims of crime compensation fund. Please read the fine print or ask your Advocate.

Sexual Intimacy Concerns

Adapted from *Coping with Sexual Assault* by Sugati Publications

It is common and natural to have varied reactions to sexual intimacy after a sexual assault has occurred. Common reactions may include wondering if sex will ever be desired or enjoyable again, wondering if you are still attractive to your partner, or no longer being attracted to your partner. Sex may become a coping mechanism used to numb out pain or forget about the assault, or it may be the last thing on your mind. Another common reaction is being afraid that having sex again may be a trigger of the sexual assault.

What might help:

- Trust that you know what is best for you.
- Go at your own pace.
- Be clear with your partner about your wants, needs and limitations.
- Communicate with your partner anything they should know to make the experience enjoyable for you.
- Let your partner know if they are doing anything that is triggering the assault.

Effects of Sexual Assault on Family or Friends

Adapted from *A Guide for Friends and Family of Survivors* by Pennsylvania Coalition Against Rape

Sexual violence affects many people including the survivor, and co-survivors (their loved ones, family members, and friends). If someone you care about has been sexually assaulted, you may be feeling some of the same feelings your loved one is experiencing.

You may also experience:

Impatience at your loved one's long recovery journey

Guilt that you did not prevent the assault

Fear over the realization that you are also vulnerable

A strong desire for revenge

A desire to "fix it" and move on

It is just as important for you to deal with your own reactions and feelings as it is for the survivor. To fully support your loved one, you must work through your own response to the assault. Often *co-survivors* may benefit from counseling as well.

How to help yourself:

- Talk to a counselor or call the 24-Hour Sexual Assault Helpline: (614) 267.7020 to speak with an advocate who is happy to process with you.
- Get information about sexual violence and the impact of trauma.
- Moderate your stress levels through activities with other friends or through "alone time."
- Do not expect to be able to make the survivor feel better all the time.
- Do not blame yourself or the survivor. The only person who is at fault is the person who committed the crime.

Common Stress-Related Responses Experienced by Victims of Violent Crime

The following information will include physical, emotional, and behavioral symptoms many survivors have reported to have experienced following the violent incident. You may experience some or all of these but know they are normal reactions to a traumatic event.

Crisis Response

This period lasts from a few days to several weeks after the trauma. Often survivors will exhibit one of two styles or show pieces of both at different times.

- Expressed- emoting demonstratively – crying, shaking, etc.
- Controlled – stoic reaction, being “strong” for self or others

After the Crisis: Reorganization/Disorganization

After the crisis, the survivor may realize their life has changed forever. Figuring out how to get on with life can be a very important 1st step. Some people re-group, go on, but have underlying unexpressed feelings and issues that will seep out in various ways over time. They may decide at some point to look more closely at their traumatic experience and effects to heal in a more thorough way, or they may simply “cope” day in and day out.

Survivors may experience any or all of the following reactions immediately after the crisis or in the years after.

Physical

- Pounding heart
- Shortness of breath
- Nausea
- Nightmares
- Difficulty falling or staying asleep
- Increased need to sleep
- Periods of time sweating uncontrollably
- Changes in eating habits
- Changes in weight
- Memory problem
- Easily distracted
- Hyper vigilant – extreme alertness
- Intrusive thoughts – re-living the traumatic event

Emotional

- Difficulty regulating emotions
 - Fear
 - Irritability, resentment
 - Anxiety
 - Numbness, detachment

- Anger – assailant, family, friends, medical, legal, law, systems
- Grief, sadness, tearfulness
- Guilt, shame, self-blame
- Flash backs
- Low self-worth
- Low threshold to tolerate day to day stresses
- Challenging spirituality

Behavioral

- Difficulty making decisions
- Fighting with others
- Difficulty prioritizing, staying on, or completing tasks
- Need to compulsively talk about the trauma or process afterward
- Avoidance of going to the area or similar area where the trauma occurred
- Self-medicating with drugs, alcohol, food, or risky behavior
- Not participating in usual activities
- Withdrawal from partner, friends or family
- Restlessness, unable to settle or relax
- Need to stay busy or distracted

Trauma's Effects on the Brain

Many of the symptoms you have been experiencing since your trauma are due to actual changes in chemistry within your brain. It can often feel like you are “going crazy” but your brain is still trying to protect you from danger. These changes are temporary but the length of time it takes for them to subside is different for every person. This can depend on what the survivor experienced during the trauma, severity of trauma, past trauma, existing coping skills, support systems, and access to mental health care.

Triggers (or feeling activated)

You experience emotional and/or physical reactions, but don't know why they occur at that moment in time. This reaction is a piece of the traumatic event that intrudes into the present. Self-awareness and identification of triggers are key to managing your responses. Discussing the triggers and responses with a mental health professional would be helpful in your recovery.

Triggers can be anything that reminds you of the event including, but not limited to:

- Smells
- Sights
- Sounds
- Weather
- Things people say
- Things people do
- Objects
- Situations
- Locations

Trigger responses may have physical reactions such as:

- Racing heartbeat
- Sweaty palms
- Sinking or cramping stomach
- Sensitivity to touch
- Fight, Flight, Freeze, & Fawn
- Anger or irritability
- Flashbacks or intrusive thoughts

Coping After a Traumatic Event

Given the trauma you have experienced, it is really important to prioritize taking care of yourself.

- Consider what strategies have worked well for you in the past
- Consider mental health counselling
- Seek out support from people who you trust
- Journal thoughts and feelings
- Ensure you protect adequate rest
- Eat regular balanced meals
- Moderate use of drugs, alcohol, and stimulants
- Be self-aware of emotional status changes

Calming/grounding

- Gentle stretches /yoga/walking
- Singing
- Guided meditation
- Hugs from trusted safe people
- Take a break
- Go outside
- Revisit something that brings you joy

Alerting activities

- Holding ice, cool cloth to face, cool shower
- Cool room
- Air blowing across skin
- Stand on toes/balancing activities
- Movement – aerobic exercise
- Singing loudly
- Go outside/introduce natural day light

Utilize all your senses

- Sight:

- Avoid live TV/news/reality shows, consider planned content that is calming
- Display flowers, photos that bring you joy
- Draw, color, create, DIY projects
- Smell
 - Incense, candles, oils
 - Baking something fragrant
 - Bath balms
 - Perfume
- Taste
 - Keep a candy dish full of tasty items
 - Treat yourself to a tasty beverage
 - Gum, breath mints
 - Favorite foods in moderation
- Hearing
 - Avoid inflammatory TV or Radio with unpredictable content or noise level
 - Pre-plan play list of music, pod casts, books
 - Defer calls to voice mail rather than accepting in the moment
- Touch
 - Wear comfy clothing
 - Soft blanket
 - Get your hands in dirt, clay, other creative hands-on projects
 - Pets
 - Worry stones/beads/rings
- Imagination
 - Plan a vacation, staycation, or visit a favorite safe place
 - Guided imagery or meditation
 - Stretch your creativity with Art – music, paint, clay, storytelling, etc.

Take Time to Care for Yourself

It is essential that you be kind to yourself and take the time for self-care.

- Maintain a daily schedule/purpose
- Consider seeking mental health professional
- Take medication as prescribed if indicated
- Exercise – start small, stay consistent, slowly build time and intensity
- Rest – Sleep is essential to the healing process. Inadequate rest impacts memory, mood, ability to concentrate, learn, and engage in logical safe reasoning.
- Nutrition – Sometimes trauma survivors report having a loss of appetite or conversely, only eating comfort foods. Important to balance your food intake to fuel your body while you are healing.

Recommended Recovery Materials for Survivors and Co-Survivors of Sexual or Intimate Partner Violence

Many survivors have found reading about trauma recovery to be helpful in their healing. The following books are available at no charge by calling the 24-Hour Rape Helpline at (614) 267.7020.

8 Keys to Safe Trauma Recovery [book]

by B. Rothschild

This book is designed to help survivors recognize their own individual needs in recovery and evaluate whether those needs are being met. It offers real skills for managing trauma and reflective questions that are designed to avoid triggering the reader. They will have the tools necessary to put themselves in the driver's seat, navigating their own safe road to recovery.

Healing from Trauma: A Survivor's Guide to Understanding Your Symptoms and Reclaiming Your Life [book]

by Jasmin Lee Cori

While there are many different approaches to healing trauma, few offer a wide range of perspectives and options. With innovative insight into trauma-related difficulties, Jasmin Lee Cori helps you: Understand trauma and its devastating impacts Identify symptoms of trauma (dissociation, numbing, etc.) and common mental health problems that stem from trauma Manage traumatic reactions and memories Create a more balanced life that supports your recovery Choose appropriate interventions (therapies, self-help groups, medications and alternatives) Recognize how far you've come in your healing and what you need to keep growing Complete with exercises, healing stories, points to remember, and resources, this is a perfect companion for anyone seeking to reclaim their life from the devastating impacts of trauma.

I Will Survive: The African-American Guide to Healing from Sexual Assault and Abuse [book]

by Lori S. Robinson

Through interviews with prominent African-American lawyers and judges, Robinson offers accessible explanations of police and legal systems, advising readers on ways to navigate them effectively. Doctors and counselors weigh in on the importance of getting good physical care, using self-care techniques to heal, and finding the best therapist. I Will Survive also includes chapters on educating children and adults in Black communities to help prevent sexual assault; prayers and affirmations from Black spiritual leaders in a variety of religious traditions; an extensive resources section; and encouraging first-

person accounts from Black women (and men) who have healed from sexual assault and abuse.

Life after Trauma: A Workbook for Healing

by D. Rosenbloom and M. Williams

This compassionate workbook is full of practical strategies for coping and self-care. The book guides you toward reclaiming a solid sense of safety, self-worth, trust and control, as well as the capacity to be close to others. The focus is on finding the way forward in your life today, no matter what has happened in the past.

Trust After Trauma: A Guide to Relationships for Survivors and Those Who Love Them [book]

by Aphrodite T. Matsakis

Trauma survivors are often dismayed to find that traumatic events not only shatter their internal sense of well-being, but also leave them withdrawn or isolated. In this new book, psychologist Aphrodite Matsakis guides survivors through a process of strengthening existing bonds, building new ones, and ending self-perpetuating cycles of withdrawal and isolation. Step-by-step exercises help you learn how to manage emotions, handle unresolved issues, accept realistic limitations, and find ways to make your relationships a context for healing.

Adult Survivors of Childhood Sexual Abuse:

The Adverse Childhood Experiences Recovery Workbook: Heal the Hidden Wounds from Childhood Affecting Your Adult Mental and Physical Health

by Glenn R. Schiraldi PhD

In this innovative workbook, trauma specialist Glenn Schiraldi presents practical, evidence-based skills to help you heal from ACEs. In addition to dealing with the symptoms, you'll learn to address the root cause of your suffering, change the way your brain responds to stress and the outside world, and soothe troubling memories.

The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma

by Bessel van der Kolk M.D.

Dr. Bessel van der Kolk, one of the world's foremost experts on trauma, has spent over three decades working with survivors. In *The Body Keeps the Score*, he uses recent scientific advances to show how trauma literally reshapes both body and brain, compromising sufferers' capacities for pleasure, engagement, self-control, and trust. He explores innovative treatments—from neurofeedback and meditation to sports, drama, and yoga—that offer new paths to recovery by activating the brain's natural neuroplasticity. Based on Dr. van der Kolk's own research and that of other leading specialists, *The Body Keeps the Score* exposes the tremendous power of our relationships both to hurt and to heal—and offers new hope for reclaiming lives.

Courage to Heal Workbook

by L. Davis and E. Bass.

An in-depth workbook that speaks to all women and men healing from the effects of child sexual abuse. The combination of checklists, writing and art projects, open-ended questions and activities expertly guides the survivor through the healing process.

TEENS:

How Long Does It Hurt? A Guide to Recovering from Incest and Sexual Abuse for Teenagers, Their Friends and Their Families [book]

by C. Mather and K. Debye

This step-by-step guide speaks directly to survivors of sexual abuse to help them come to grips with what is happening to them and overcome their feelings of isolation, confusion and self-doubt.

If Your Teenager Was Sexually Assaulted: A Guide for Parents [booklet] by T.S Nelson

An overview of some of the most common concerns for parents of teen victims of sexual assault. Includes topics such as: addressing ongoing unhealthy and abusive relationships (dating violence), child abuse, alcohol or other drug involvement, pregnancy prevention, depression and other warning signs. Also includes tips on how to talk to your teen about sexual assault.

Intimate Partner/Domestic Violence:

Why Does He Do That? Inside the Minds of Angry and Controlling Men [book] by L. Bancroft

This book shows you how to improve, survive or leave an abusive relationship.

MALE SURVIVORS:

Joining Forces: Empowering Male Survivors to Thrive [book] by H. Fradkin

Empowering male survivors to develop skills to overcome the effects of trauma and learn to thrive. Based on the experiences of over 750 male survivors who have participated in Male Survivor Weekends of Recovery.

Victims No Longer: The Classic Guide for Men Recovering from Sexual Child Abuse by Mike Lew

The first book written specifically for men, Victims No Longer examines the changing cultural attitudes toward male survivors of incest and other sexual trauma. Now, in this Second Edition, this invaluable resource continues to offer compassionate and practical advice, supported by personal anecdotes and statements of male survivors. Victims No Longer helps survivors to: Identify and validate their childhood experiences

- Explore strategies of survival and healing
- Work through issues such as trust, intimacy, and sexual confusion
- Establish a support network for continued personal recovery
- Make choices that aren't determined by abuse

FOR FAMILY AND FRIENDS OF SURVIVORS:

Allies in Healing [book] by L. Davis

The author offers practical advice and encouragement to all partners — girlfriends, boyfriends, spouses and lovers — trying to support the survivors in their lives while tending to their own needs along the way.

You Can Help: A Guide for Family & Friends of Survivors of Sexual Abuse and Assault by Rebecca Street

You Can Help offers concrete tools to family and friends who wish to participate in the healing process of someone who has been sexually victimized. In Part One, the author chronicles her own journey to recovery while providing pragmatic advice and essential data from numerous experts in the field. Each chapter is followed by "Five Practical Tips." Part Two is comprised of inspirational stories by 19 other survivors of both abuse and assault (8 men and 11 women) who share what was most helpful and hurtful in their own recoveries. Besides empowering family and friends, You Can Help is a valuable asset for arming survivors in their battle against shame and is an important educational resource for professionals who work with trauma.

Healing the Harm Done: A Parent's Guide to Helping Your Child Overcome the Effects of Sexual Abuse [book] by J. Levy

This book answers questions and addresses concerns of parents whose children have been sexually abused.

SEXUALITY AND RELATIONSHIPS:

Healing Together: A Couple's Guide to Coping with Trauma and Post-Traumatic Stress [book] by S. Phillips

This book is for people in relationships where either partner has faced trauma in any of its forms. One or both partners can use Healing Together to recover from trauma or help their partner recover by understanding the impact of trauma, learning skills, recapturing lost intimacy and recognizing their resiliency as a couple.

Coping resources booklets:

Coping with Sexual Assault booklets are reviewed by national advisory councils of sexual assault survivors and professionals with expertise in their fields to ensure accuracy, best practices and input from the community. We are proud to offer publications that are survivor-centered, trauma-informed, and culturally sensitive for persons from diverse backgrounds.

Coping with Sexual Assault

Current information on coping with the aftermath of a sexual assault including medical, legal and emotional aspects of healing.

Specific editions available for:

- Adults
- Male Survivors
- LGBTQIA+ Survivors
- College Students
- Teens (and Parents)
- Military Victims/Active-Duty Military
- Victims of Violent Crimes

Additional Topics:

- A guide to the criminal justice system
- A guide to medical concerns after a sexual assault
- How to help a friend who was sexually assaulted
- Common questions and concerns for college students
- Common questions and concerns for teens

Onslow Victims Center Services

OVC provides advocacy for survivors who have experiences sexual assault, domestic violence, or human trafficking. Advocates are specially trained with a broad focus on all elements of victimization to provide trauma responsive services and empower survivors in the healing journey. All services are free, confidential, and survivor centered. Advocates collaborate with the survivor to identify and prioritize needs, set goals, provide information about options, resources, and referrals.

24-hour Crisis Line 910-347-4000

Trained advocates provide telephone crisis response, emotional support, safety planning, intake assessment to the emergency shelter, and resource for community partners and individuals.

Emergency Shelter

A Safe Shelter in an undisclosed location for survivors actively fleeing imminent danger of life-threatening conditions due to Sexual assault, domestic violence, or human trafficking.

Hospital Advocacy

In-hospital advocacy to provide crisis response, emotional support, information about options and resources for the duration of the emergency room stay.

Legal Advocacy

Advocacy and specialized information about the judicial system, legal processes, referrals to legal aid, assistance with completing application for protections orders, and accompaniment to court and law enforcement meetings.

Case Management

Longer term advocacy for individuals whose needs go beyond the hospital visit or crisis call. Community advocates will collaborate with the survivor to identify and prioritize needs, set goals, provide information about options, resources, and referrals.

Support Groups

Available monthly for survivors of Sexual Assault or Domestic Violence. The OVC website has more information about dates and times.

(Survivors can call (910) 238-2941, Monday - Friday 8a- 4pm.)

Resources

Onslow Victims Services	910-238-2941
Onslow Victims Services 24/7 Crisis Line	910-347-4000

Health

Suicide Hotline	800-272-8255
Trillium Healthcare	877-685-2115
Onslow Memorial Hospital	910-577-2345
Health Department	910-347-2154
Onslow Pregnancy Resource Center	910-938-7000
Onslow Commission of Persons w Disabilities	206-653-6090
Onslow Community Outreach	910-455-5733

Legal

Jacksonville Police Department	910-455-4000
Jacksonville Police Department-Victim's Advocate	910-938-6401
Legal Aid of North Carolina-protection orders	910-444-4628
Legal Aid of North Carolina Immigration	866-204-7612
Onslow County Court House	910-478-3600
Onslow County Sherriff's Office	910-455-3113
Onslow County Sherriff's Office-Victim's Advocate	910-989-4027
North Carolina Victims support	877-627-2826

Military

Camp Lejeune/New River Sexual Assault Hotline	910-750-5852
Camp Lejeune Domestic Violence Helpline	910-376-2155
Community Cancelling Center	910-451-2864
Consolidated Legal Assistance	910-451-1903
Department of Military Veterans Affairs	844-624-8387
Family Advocacy	910-449-9563
Military DOD SAFE Hotline	877-995-5247
New River Domestic Violence Helpline	910-376-2155
Onslow County Veteran Services	910-347-3309
Veteran's Crisis Line	800-273-8255

National

National Domestic Violence Hotline	800-799-7233
Rape, Abuse & Incest National Network Hotline	800-656-4673

North Carolina

North Carolina 211	211 or 888-892-1162
North Carolina Coalition Against Domestic Violence	919-956-9124
North Carolina Coalition Against Sexual Assault	919-871-1015

Youth

Guardian Ad Litem Program

910-478-3621

One Place (Child Advocacy Center)

910-928-0336

Onslow Child Protective Services

910-455-4145

PEERS Family Development Center

910-333-9725

Social Assistance

Social Security Administration

888-491-1885

Onslow Community Outreach

910-455-5733

Specific Populations

LGBTQ Hotline

212-714-1141

Additional Resources/Notes:

[illegible]



Onslow Victims Center
Serving All Survivors of Sexual Assault and Domestic Violence