

DOVER AFB SEXUAL ASSAULT PREVENTION & RESPONSE CC QUICK REFERENCE GUIDE

Prevention

CC Talking Points

How to reduce your risk of sexual assault

- Set sexual limits—decide how far you want to go
- Assert yourself – communicate with your partner
- Get to know people before you trust them
- Don't get so drunk that you are incapacitated
- Hang out with others who share your values
- Have a Wingman you know you can trust
- Trust your instincts
- Be cautious of social media/dating apps (Tinder) – if you decide to meet, meet at daytime, in public, drive your own car, and tell a friend where you're going

Watch out for Red Flags from potential partners

- Gives you a negative gut reaction, that 'uh-oh' feeling
- Has a reputation for being a 'player'
- Makes suggestive remarks about your clothes or appearance
- Drinks too much or uses drugs
- Pressures you to be alone together
- Pressures you to have sex
- Tries to guilt you into sex
- Does what he/she wants without asking what you want



436 AW/CC Guidance

- Create culture not conducive to sexual assault – stop the sexual innuendos and harassment before it leads to assault
- Encourage survivors to report sexual assault, establish a climate of dignity and respect, and build a culture intolerant of sexual assault
- We take complaints seriously, treat victims with respect and provide the services and support they need
- Sexual assault will NOT be tolerated on Dover AFB!

Watch for traits/behaviors of perpetrators (no 'typical profile')

- Experts at rationalizing their behavior
- They 'hook up' often and/or look for partners who are drinking
- Use alcohol to coerce victims into sex
- 5 I's of offenders: Ignoring, Instinct, Intoxication, Invasion, Isolation
- Macho/aggressive/dominant/hostile/controlling personality
- Emotionally constricted/lack empathy
- Underlying anger/power issues with women
- Negative gender-based attitudes
- Pornography consumption/sexually aggressive
- Impulsive

Bystander Intervention

- Notice the situation—Is something strange going on?
- Interpret the event as requiring intervention—Something doesn't look right in this situation.
- Assume responsibility—I am going to do something.
- Decide how to help—Should I talk to offender or victim?
- Act—Call the police, tell a bouncer to intervene, etc.

Statistics

- 1 in 4 women & 1 in 6 men will be sexually assaulted before age 18
- 1 in 33 (3%) of American men have been assaulted in their lifetime
- 1 in 6 (18%) of American women have been assaulted in their lifetime
- 86% of victims know their offender (friend, co-worker, spouse, etc.)
- Only 30% of sexual assaults are reported to police (non-DOD victims)
- Only 14% of sexual assaults are reported in the military
- Only 12% of cases involved a weapon

Effects of Rape on Victims

- 3x more likely to suffer from depression
- 6x more likely to suffer from PTSD
- 13x more likely to abuse alcohol
- 4x more likely to contemplate suicide

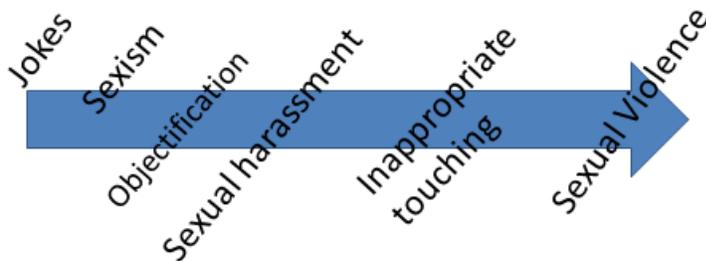
Statistic Sources or for more information

- www.nsopw.gov – National Sex Offender Public Website
- www.sapr.mil – DOD Sexual Assault Prevention & Response
- www.woar.org – Women Organized Against Rape
- www.rainn.org – Rape, Abuse & Incest National Network

Continuum of Harm

- Visual—staring, pictures/websites of a sexual nature
- Verbal—"nice butt", "you look HOT today!"
- Written—texts, emails, Facebook posts
- Touching—pinching, brushing against, grabbing
- Power—pressure/coerce into dates/favors/sexual activity
- Threats—"if you want a firewall 5, then you have to give me some sex or ____"
- Force—indecent acts, physical assault, sodomy, rape

Continuum of Harm



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Response

CC Checklist	Immediate Response	<p>When a subordinate asks to speak with you about a personal issue</p> <ul style="list-style-type: none"> Remind him/her of reporting options—only the SARC, Victim Advocate, or healthcare personnel can take a restricted report; anyone in their chain of command who has knowledge of a sexual assault MUST report it to OSI Assure him/her that you will support them and appreciate the trust they have in coming to you for help Express empathy for their situation and how courageous they are to come forward and report this crime against them
	Immediate Actions	<ul style="list-style-type: none"> Assess victim's safety and emergency medical attention as necessary Do not ask questions, take statements or investigate Be cautious to avoid negatively affecting the victim or investigation Reassure victim of command support Advise victim of the need to preserve evidence (no showering, drinking, eating, changing clothes, etc.) Provide 'warm hand-off' to helping agency (SARC, medical, etc.) <p>CC/1st Sgt/supervisors must report to</p> <ul style="list-style-type: none"> AFOSI: 302-677-2852 or 363-0686 SARC: 302-677-3680 or 363-2630 24/7 SAPR: 302-363-7272
Reporting Options	Restricted Report	<ul style="list-style-type: none"> Available to: Service member and dependents 18 yrs and older Report ONLY to SARC, Victim Advocate (VA), or healthcare personnel Confidential services Command is NOT notified OSI will NOT initiate an investigation <p>Victims will receive</p> <ul style="list-style-type: none"> SARC/VA supportive services Medical care and counseling on or off base
	Unrestricted Report	<ul style="list-style-type: none"> Available to: anyone wishing to report a sexual assault Report to SARC, VA, healthcare, Commander, 1st Sgt, OSI Details limited to only those personnel who have a need to know Command IS notified OSI will initiate an investigation <p>Victims will receive</p> <ul style="list-style-type: none"> SARC/VA supportive services Medical care and counseling on or off base Special Victims Counsel (SVC) Option of Expedited Transfer (PCS to new location)
	Independent Report	<ul style="list-style-type: none"> Available to: anyone wishing to report a sexual assault Third party report made to Commander, 1st Sgt, supervisor, OSI Command IS notified OSI will initiate an investigation <p>Victims will receive</p> <ul style="list-style-type: none"> Option to make an Unrestricted Report or decline services SARC/VA supportive services Medical care and counseling on or off base Special Victims Counsel (SVC) Option of Expedited Transfer (PCS to new location)
	Resources	<p>Dover AFB</p> <ul style="list-style-type: none"> SAPR Office: (302) 677-4357; SAPR 24/7 Hotline: (302) 363-7272 SARC Office: (302) 677-3680; SARC 24/7 cell: (302) 363-2630 Mental Health: (302) 677-2674 Family Advocacy: (302) 677-2711 Chapel: (302) 677-3932; Chaplain 24/7: (302) 677-3000 Law Enforcement Desk: (302) 677-6666 AFOSI: (302) 677-6918 Legal: (302) 677-3300 MFLC (Military & Family Life Consultant): (302) 535-6196 <p>Off Base</p> <ul style="list-style-type: none"> DoD Safe Helpline: (877) 995-5247 Bayhealth Kent General, Dover: (302) 744-7121 Bayhealth Milford Memorial, Milford: (302) 430-5721 Contact Lifeline: (800) 262-9800 DE State Police Victim Services: (800) 842-8461 Dept of Family Services: (800) 292-9582

