



the great divide

After working in domestic violence and sexual assault programs in several states over a number of years, my colleagues and I have repeatedly observed sexual assault (SA) and domestic violence (DV) agencies practicing informal protocols for dealing with survivors of incest or sexual violence perpetrated by a partner. The services a victim receives depend on what he or she is initially ready to admit was perpetrated. For instance, a woman who decides to leave her abusive partner presents at a domestic violence shelter. In addition to receiving shelter services for herself and her two children, she is building powerful and trusting relationships with the workers who run classes on the cycle of violence, parenting skills and job skills. During an education class, she admits that her partner forced her to have sex when she didn't feel like it. At this point, the unspoken protocol would begin as her shelter case-worker would then refer her

... a long history of battling for shared but limited resources may have resulted in harsh feelings and an exaggerated effort to keep the work of both movements carefully separated.

to the local rape crisis center for therapy for this perceived separate issue. The woman is now forced to navigate services from two separate agencies. She now has at least three new obstacles to overcome:

- The need to build another trusting relationship with her rape recovery therapist;
- A lack of communication between the two programs resulting in a lack of continuity of care and overall awareness of her issues; and
- Logistical problems such as travel between the two agencies and an increased need for childcare.

The difficulties navigating a complicated service schedule may lead to frustration and burnout for the victim, resulting in her dropping out of both programs.

The sudden split in services could be the result of an overall separation between SA and DV movements. The degree of separation varies: SA and DV agencies may collaborate on trainings but do not work well together on a programmatic level; at other times, a long history of battling for shared but limited

resources may have resulted in harsh feelings and an exaggerated effort to keep the work of both movements carefully separated.

As service providers in both the SA and DV movements, we must understand the reasons behind this rift and find ways to collaborate programmatically and systemically in order to provide improved services. I believe this divide is rooted in the history of how both movements developed and in the practices used by SA and DV agencies to increase resources by defining their issues and their solutions using frameworks that appeal to different kinds of funding sources. Although this separation was initially a good idea, collaboration

may be the key to solving the structural problems that are the root of both problems.

The second-wave feminist movement that began in the mid-1960's called attention

to the fact that DV and SA are two crimes of which women are predominantly the victims. Both crimes had previously been regarded as private issues, but feminism's mantra of "the personal is political" drew out these issues: women were encouraged to speak out about these violations, and the recognition that a single victim does not suffer alone created a sense of community, complete with activists ready to provide support and shelter. Initially, agencies of both issues struggled to find funding from either federal or state governments. What funding was available had to be shared by both DV and SA advocates, as exemplified by the shared use of hotlines or the giving of a bed in a DV shelter to a rape survivor who was afraid to go home for the night.

However, this era of sisterly sharing soon came to an end. As DV began to gain salience in the public eye, more and more of the limited funding for violence against women services was put into DV shelters and programs. Additionally, as stranger SA was more recognized at the time than acquaintance rape, some

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fragmented movements

I have never claimed to have knowledge on domestic violence - I rarely suggest that I am an expert on issues of sexual violence. People have asked me to facilitate discussions about interpersonal violence, workplace violence, and family violence-broad terms that incorporate sexual violence and consume enough time that I easily remain in my comfort zone: discussions about rape. And herein lies the problem. After working in this movement this long, you would think I'd have a better grasp of these issues, sexual and domestic violence: independently and cohesively. And I don't.

I have some thoughts-thoughts on how our movements are at-odds-how it serves systems and administrations when domestic and sexual violence movements remain fragmented. I have felt overwhelmed and powerless when considering the relationship between women who were sexually assaulted as children and those same women who marry men who beat them. I daydream and imagine that as shelter staff and programs incorporate sexual violence recovery into the repertoire for healing from domestic violence that fewer women return to relationships that do not feed their souls. I imagine rape crisis counselors prepared to do safety planning with clients and support groups at rape recovery/crisis programs exclusively for women who were raped by intimate partners. And my ruminating is somewhat effective - effective at making me feel like I am engaged (if only mentally) in solutions that integrate a holistic vision of healing from violence.

I participated on the domestic violence fatality review committee. We pushed to participate in this group with a simple thought, "Domestic violence graduates to murder shortly after sexual violence is regularly integrated into the abuse." And then there it was-the edition of the National Institute of Justice Journal, Issue No. 250 - "Although drug abuse or serious alcohol abuse also translates into increased risk and tends to separate batterers from intimate partners who kill, threats to kill, extreme jealousy, attempts to choke, and forced sex present higher

risks." There it was - the evidence to support what I was thinking - what we had discussed at UCASA - and the sole reason for participating on the DVFRC. And I don't know what to do about it. I am frozen and liberated at the same time.

Because incest happens in our homes, is that domestic violence? Because those who beat their wives also rape their children, is that not domestic terrorism? Because rape within marriages may produce unwanted children, or produce wanted children in a hostile environment, is that not a concern of our families? So, why the fragmentation? Why do I refer calls for domestic violence out? Why do I not know of all the shelters who will house victims of sexual violence? Why have some shelters never had their staff 40 hour trained as rape crisis counselors?

There are so many areas where issues of sexual and domestic violence intersect. It is common to hear complaints that law enforcement officers and prosecutors do not handle cases of sexual and domestic violence with care. And I am critical that I make the same mistake - has my own discomfort with safety planning, issues of domestic violence, and stalking created unhealthy space and distance between those who are experts on dating violence?

This issue of the UCASA newsletter explores some of these questions and others in depth: men's involvement, spirituality, and competition for resources, marital rape, and professional interaction with victims in emergency rooms. Many of my own initial questions and criticisms of my own hesitations and shortcomings became more obvious as I read this issue. Some solutions have even surfaced. I hope you may also find some common threads and obstacles in the voices and contributions of those in this newsletter. We have come a long way - in even examining the disconnect - I look forward to re-connecting.

Grace Call is the previous executive director of UCASA and now lives and works in Washington State.

A recent poll conducted for the Center for the Advancement of Women stated that 92% of women cited domestic violence and sexual assault as the top priority, even above childcare and pay equity. To those of us who work in domestic violence shelters and rape crisis centers, it comes as no surprise that these are such important issues in the lives of women. We see women daily who are struggling with these issues, and we frequently talk to family members who are concerned about the most effective ways to help victims/survivors. Many of us know first hand the cascading nature of these crimes - that it seldom just affects one person in a family, neighborhood or community. We also know how stigmatizing these issues are and how often the

shame and humiliation women and their families experience silence them in public. That is what makes this news surprising - that women do feel comfortable, given the ability to speak candidly and in confidence, to acknowledge that domestic and sexual violence are top priorities for them.

Yet historically, these movements have struggled to obtain and maintain a level of funding that allows us to focus on more than survival, moving toward implementing real change so that we can live in a community that is not plagued with these crimes. The domestic violence and sexual assault movements began as grassroot efforts to respond to an unmet need in communities all over the U.S. by women who rec-

ognized the lack of services in these areas. Clearly, battered women's shelters and rape crisis centers are not operating from the garages of activist women any longer. Each year, centers struggle to piece together the funding that is required to stay open, paying staff low wages and banking on the passion and commitment of workers to stay in the movement and continue their hard work. The financial gains have been hard won and each year we fight attempts to cut or eliminate funding. Centers that serve victims must remain vigilant and creative to stay funded and implement real change.

Asha Parekh works as the shelter director of the YWCA of Salt Lake City.

from the board

This edition of the UCASA newsletter is of particular importance to me, having worked in the field of domestic violence for the past nine years. My experience in advocating for victims of both sexual and domestic violence has brought me to a recognition of how closely the two are intertwined in their causes as well as their potential remedies. Looking at the two issues side by side helps us to discern that both involve the use of force or coercion to exert power and dominance over the victim.

In cases of family violence, the relationship of trust between intimate partners is manipulated and taken advantage of to increase the abuser's sense of power and control. More often than not, perpetrators of sexual violence also exploit relationships of trust in the same way and to the same end. In both situations, the victim's ability to trust in future rela-

tionships is severely impacted.

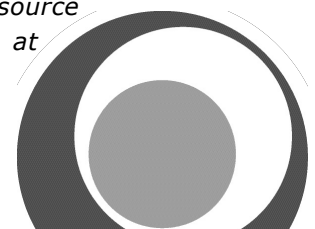
The work I do as an advocate is directed at helping individuals overcome and transform this impact, and to get to the point where they are no longer victims. Prior to arriving at this point, however, we usually have to get through the issues of self-blame and appropriate placement of responsibility. Fortunately, the criminal justice system is beginning to address the issue of perpetrator responsibility and recidivism prevention through restorative justice programs such as domestic violence courts that require the abuser to complete treatment specific to their behavior and monitor their progress through a probationary period.

On the other hand, many domestic violence cases, similarly to sex assault cases, are never reported and never reach the criminal justice system. Therefore it is our

responsibility as community members to be aware of indications that someone we know may be involved in an abusive relationship. Especially, as one of the most common techniques of abusers is to isolate the victim from social support by restricting contact with friends and family.

As a UCASA board member, I am committed to ending interpersonal violence of all kinds, and would be glad to serve as a resource for anyone with questions about local domestic violence resources.

Alana Kindness serves as Secretary on the UCASA board. She has served on the UCASA board of trustees since 2002 and can be reached through the Salt Lake City Police Department Victim Resource Center at 799-3729.



marital rape: the nexus

Domestic Violence and sexual assault are both crimes of power and control. They both fall under the umbrella term "violence against women." They are in many senses "sister" issues, and service providers and the state coalitions are "sister" agencies. In fact, in some cases, there are programs that specialize in services for survivors of both domestic violence and sexual assault. Both professions have made great strides in bringing knowledge and awareness to the pervasiveness

...one question seemed to keep coming up: who handles cases of marital rape - domestic violence programs or sexual assault programs?

and seriousness of these two crimes. The similarities between domestic violence and sexual assault seem obvious, and nowhere is the interconnectedness between these two issues more clearly highlighted than it is by the topic of marital rape.

I recently co-presented a workshop on the topic of marital rape with my colleague, Nancy Radcliffe of the Ohio Coalition on Sexual Assault. While we were quick to clarify that neither of us considers ourselves an "expert" on the topic, we recognized that the dialog between sexual assault programs and domestic violence programs on this issue must begin, if it hasn't already. As we worked on our presentation, one question seemed to keep coming up: who handles case of marital rape - domestic violence programs or sexual assault programs? Sadly, if we are like the rest of the country, the answer is probably neither. In fact, the issue of marital rape is largely overlooked by almost everyone.

Consider these statistics:

In one survey of public attitudes on criminalizing marital rape, only about 25% of people interviewed classified forced marital intercourse as serious a crime as stranger rape.

Over 60% of both men and women did not consider unwanted sexual intercourse between husband and wife as rape.

When asked to rank the severity of 140 crimes, forcible rape of a former spouse ranked 62, with the crimes of selling marijuana, committing a mugging or stealing \$25.00 as more serious.

It wasn't until 1993 that all states in the United States had outlawed rape in marriage. Prior to 1993, rape was generally defined as "the forcible penetration of the

body of a woman, not the wife of the perpetrator." Indeed our nation's social perception seems to be that rape within a marriage is neither serious nor criminal, and this is a belief that has literally been around for centuries.

The marital rape exemption, a troublesome relic that we inherited from English Common Law, essentially says that a man cannot be guilty of raping his wife. The marital rape exemption originated with Sir Mathew Hale, an 18th century British jurist who said, "but the husband cannot be guilty of a rape committed by himself upon his lawful wife, for by their mutual matrimonial consent and contract the wife hath given up herself in this kind unto her husband, which she cannot retract." Even in his own time, Hale's view was criticized both for its failure to state any supporting legal authority and for being held merely as one man's observation of the common practice in England at that time. Nevertheless, Hale's statement has influenced the legal response to marital rape for over 300 years.

Historically, supporters of the marital rape exemption have justified its continuation on the basis of three legal rationale: the contract theory, which suggests that a wife has contractually given her husband her irrevocable consent to intercourse; the women-as-property theory, which stated that the husband owns his wife as he own any other property and therefore cannot "take" what is already his; and the marital unity theory, under which the husband and wife merge, upon marriage, into

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one person (the husband) thereby relegating marital rape to a legal non sequitur - a man cannot rape himself. While these arguments have found little support in current times, advocates of a continued marital rape exemption often cite proof problems, fear of false accusations, and the need to limit governmental intrusion into the privacy of marriage as reasons for maintaining the exemption. Additionally, some proponents of the exemption contend that marital rape is less serious than stranger rape because the parties have seemingly implied some desire to have sexual relations with each other. Currently, most states, including Ohio, maintain a partial marital rape exemption where husbands can be prosecuted for raping their wives under certain circumstances (generally, where the two are legally separated or living apart or where force or threat of force is used).

There are a few different ways that both domestic violence and sexual assault agencies can be more responsive to clients who are dealing with the ongoing effects of marital rape. First, domestic violence programs and

sexual assault programs must both take ownership of the problem. One way of accomplishing this is to address marital rape in the agency's mission statement. Second, advocates from both professionals should be cross-trained. Domestic violence advocates need to be prepared to hear and address battered women's experiences of sexual violence, and rape crisis workers need to be aware of the dynamics of

. . .of the 45,890 rapes/sexual assaults committed by someone the victim knew, at least half were committed by the victim's spouse and greater than a quarter were committed by an ex-spouse.

power and control that give rise to the needs and concerns of women in abusive intimate relationships. In addition, agencies should provide training specific to marital rape in agency literature as well as in community education and outreach programs, including education and outreach to allied professionals such as clergy and law enforcement. Fourth, questions about marital rape should be included at screening and intake. It is critical to remember that women who

have been sexually assaulted by their partners may not define their experience as rape, so questions such as "Have you ever been raped?" or "Has your partner ever raped you?" will miss the mark with many marital rape survivors. Finally, agencies may want to consider implementing specific services for marital rape survivors.

Researchers believe that marital rape survivors benefit from both individual and group counseling as well as medical and legal advocacy. While existing services, such as support groups, at domestic violence programs and rape crisis centers may be beneficial to marital rape survivors, a group specific to marital rape issues may better address the needs of these survivors.

The information presented on this article is not meant to be a full treatment on the issues of marital rape. For more information, consult the following resources:

Christine Watchorn contributes to the Ohio Domestic Violence Network. This article was originally seen in "Network News" and was reprinted with permission.

an assessment

Shelter staff and volunteers frequently request tools to help assess sexual violence within the relationships of the shelter clients. Consider these questions:

1. Does my intake form include questions relating to sexual violence?
2. Are these questions specific and easy-to-understand?
3. If the client says they have experienced sexual violence, are staff and volunteer advocates prepared for the next step? Does our staff and volunteers have effective crisis intervention skills, and do they feel comfortable in knowing what to say to the vic-

tim? Does our staff know available groups, resources and referrals?"

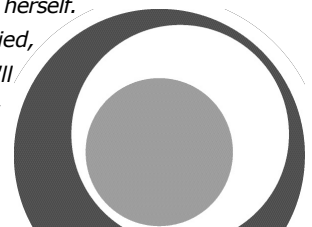
4. If the client says they have experienced sexual violence, does our agency provide a more detailed list of questions to assess the extent, and lethality, of the sexual violence?"

5. Does our agency provide in-house intervention or support groups for women working through issues of rape within a violent relationship or childhood sexual abuse?"

6. Do we understand the reporting obligations when we receive disclosures of sexually violent

crimes?" Several specific tools are available through UCASA and serve as the first steps for supporting survivors of sexual and domestic violence.

Rachel Jenkins-Lloyd is the UCASA Training Coordinator. Rachel was discussing the importance of equality in relationships and told Teagan, her daughter, to make sure she had a partner that treated her fairly and made her feel good about herself. Teagan replied, "I think I'll marry my CareBear."



guns and domestic violence

UTAH'S RAPE RECOVERY PROGRAMS

Brigham City
**Your Community In Unity
(YCU)**
P.O. Box 756
Brigham City, Utah 84302
435.723.5600
Serves: Box Elder County
Services: Crisis Line, Hospital
Response Team, Individual Crisis
Counseling

Cedar City
**Canyon Creek Women's Crisis
Center**
P.O. Box 2081
Cedar City, Utah 84721
tel. 435.867.9411
Serves: Iron, Beaver, and Garfield
Counties
Services: Crisis Line, Hospital
Response Team, Individual Crisis
Counseling, Support Groups

Kaysville
Safe Harbor
P.O. Box 77284037
Kaysville, Utah 84037
tel. 801.444.3191
www.womensdvshelter.org
Serves: Davis County
Services: Crisis Line, Individual Crisis
Counseling

Logan
**Community Abuse Prevention
Services Agency (CAPSA)**
P.O. Box 3617
Logan, Utah 84323
tel. 435.752.7023
www.capsa.org
Serves: Cache and Rich Counties
Services: Crisis Line, Hospital
Response Team, Individual Crisis
Counseling, Support Groups

Moab
Seekhaven
P.O. Box 729
Moab, Utah 84532
tel. 435.259.2229
Serves: San Juan and Grand Counties
Services: Crisis Line, Individual Crisis
Counseling, Support Groups

Ogden
**Your Community Connection
(YCC)**
2261 Adams Ave.
Ogden, Utah 84401
tel. 801.394.9456
Serves: Weber, Davis, and Morgan
Counties
Services: Crisis Line, Hospital
Response Team, Individual Crisis
Counseling, Support Groups

Park City
**Summit County Victim
Advocate Program**
P.O. Box 981535
Park City, Utah 84098
435.615.3850
Serves: Summit County
Services: Crisis Line, Hospital
Response Team, Court Advocacy

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Federal laws that passed with much fanfare in the mid-1990s made it illegal for anyone convicted of any crime of domestic violence (including misdemeanors) or anyone under a permanent domestic violence restraining order to possess or own a firearm. These landmark federal laws - and the companion laws of many states - are intended to provide a measure of protection to the thousands of women who are threatened, injured and killed each year by their domestic partners using firearms.

In domestic violence situations, firearms

involve an enormous threat: more than 600 women are murdered (and thousands more injured or menaced) each year by domestic abusers with guns. Indeed, if a woman's abuser has a gun, she is 20 times more likely to be killed. And yet, many domestic violence survivors, their legal providers, and sometimes even judges are unaware of state and federal laws designed to protect the abused. In fact, a lack of knowledge about the law, combined with reluctance from within some sectors of the judicial and legal community to enforce gun laws in domestic disputes, means that laws to disarm abusers are, in many jurisdictions, rarely or never enforced.

The issue of guns and domestic violence is very complicated. In fact, while removing guns from an abuser can decrease the risk of murder, taking guns away from an abusive partner can also create a potentially dangerous and volatile situation for survivors. While safety must be paramount in all domestic violence cases-extra caution must be taken when dealing with the issue of guns. A crucial part of understanding the rights of survivors and the laws regarding guns and domestic violence, is understanding that there are instances in which attempting to enforce gun laws against abusers may not be the safest possible course of action and could put the survivor and/or her family in danger.

Taking affirmative steps to include a gun prohibition as part of a protective order can help to make a client and her family safer and knowing the rights of survivors is an important part of helping survivors make educated decisions. However, a gun prohibition should be considered only if the advocate/lawyer and the survivor believe that doing so can make the survivor and her family safer.

With the understanding that education is a critical first step in the battle to increase enforcement, the Americans for Gun Safety Foundation is working with the National Network to End Domestic Violence, The Family Violence Prevention Fund and other national groups and interested state coalitions to run a national education campaign. The "Safety and the Law" project is designed to educate domestic violence survivors, their advocates and the legal community in each state about the steps that can be taken if disarming an abuser will make a women and her family safer.

The campaign will consist of: 1) state specific step-by-step brochures and on-line resources for domestic violence survivors, 2) detailed state-by-state resources for advocates, outlining state and federal law as it relates to guns and domestic violence and information on model laws and practices from around the country, and 3) a public education campaign to raise the profile of this important issue that includes public service announcements featuring actors from the hit television drama "The Practice" and press conferences with domestic violence groups, elected officials and celebrities to raise the profile of the campaign in key states.

For additional information on this effort, please contact Deborah Barron at AGSF at db@americansforgunsafety.com or (202) 775-0300 X204.

common denominator

advancing a society in which sexual violence is not tolerated

Seldom do the news reports note that virtually all the violence in the world today is committed by men. Imagine, though, if the phalanxes of violence were composed entirely of women. Would that not be the story, the only issue to be explained? Would not a gender analysis occupy the center of every single story? The fact that these are men seems so natural as to raise no questions, generate no analysis."

90 percent of all murder victims are killed by men, according to the United State Department of Justice's Crime Reports."

I am, as a man, involved in the issues of domestic and sexual violence whether I want to be or not. The violence of my maleness is a serious problem worldwide and across the country, and Utah is no exception. "Male physical power

common in homes in which the power is concentrated in the hands of the husband . . . Concentration of power in men's hands leads to higher rates of violence, period-whether against women or against men. Rates of wife abuse and husband abuse both plummet as the relationships become increasingly equal, and there are virtually no cases of wives hitting their husbands when all decisions are shared equally, that is, when the relationships are fully equal."

I am, as a man, involved in the issues of domestic and sexual violence, whether I want to be or not.

Both sexual and domestic violence are overwhelmingly the result of men's violence. "You would think the numbers alone would tell the story: Men constitute 99 percent of all persons arrested for rape; 88 percent of those arrested for murder; 92 percent of those arrested for robbery; 87 percent for aggravated assault; 85 percent of other assaults; 83 percent of all family violence; 82 percent of disorderly conduct. Men are overwhelmingly more violent than women. Nearly

over women, or the illusion of power, is nonetheless a minimal compensation for the lack of power over the rest of one's life. Violence against women is most common in those household in which power is concentrated in the hands of the husband. Interestingly, rates of violence against husbands are also more

"It doesn't have to be this way, of course . . . the best predictors of rape-proneness were levels of militarism, interpersonal violence in general, ideologies of male toughness, and distant father-child relationships . . . Societies in which rape was relatively rare valued women's autonomy (women continued to own property in her own name after marriage) and valued children

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a man s gotta do . . .

The following are pieces of a discussion between Marty Liccardo, Utah Men Against Sexual Violence Program Coordinator at UCASA, and Grace Call, UCASA's past Executive Director.

What is your vision of UMASV?
My vision is two fold and simple in concept. I want to connect agencies and offices and students on campuses and aid them in developing a unilateral or comprehensive sexual violence programming. I want men's program to be present on each campus, and for men to be a participatory component to rape prevention. Then, I want to connect or unite colleges around the state to collaborate on programming and Sexual Assault Awareness Month. Simple huh?

How do you want to accomplish this?

This is the complicated part. I think I finally understand the mission of UCASA and the role of a coalition. I first want each campus to define and develop a program that fits their campus best. But, I also want campus to be customizing and improving progressive programs nationwide. This is going to take more work on my part to identify effective programs and keep campuses connected to national trends and movements.

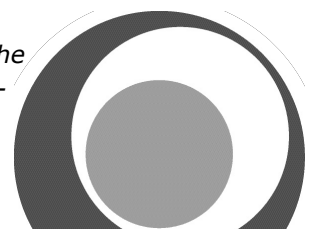
How does the programming you are currently participating in work toward the vision of UMASV?

Here is the problem. I thought most campuses would be providing their student body with some,

if different, forms of sexual violence prevention programming. I was wrong. Since most campuses are not doing sexual violence prevention work, I decided we couldn't start men's programming when few people on these campuses are provided basic information on rape and sexual assault. So, the plan changed. Instead of finding men involved in anti-sexual violence work on campus--ready to start men's programs, we will support and build basic interventions and responses so men are a part of a system organized to reduce rape on campus.

What is the biggest difference between

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to have and to hold

Where was God when, one month after our wedding, my husband first blackened my eyes? Where was God when he punched me in the stomach when I was pregnant? Where was God when he broke my nose because I wanted to see my family? And what did God expect of me, a wife who had vowed at the altar to love and cherish my husband through good times and bad? God's will, as the Bible instructed, was that I stay with my husband, forgiving him when he hurt me, countering his evil behavior with my love, cooperating with God's plan of salvation for him."

And what did God expect of me, a wife who had vowed at the altar to love and cherish my husband through good times and bad?

As I have described in this account, my religious beliefs were an important reason I stayed so long in my abusive marriage. I still believe that it is good to care about other people and to extend your life for their sake. But I've learned that God wants me to love myself also, and to balance my love for others with love for myself. I've learned that the Epistle to Ephesians is

just plain wrong when it advises, 'Wives, be subject to your husbands.' My message for women is this: 'Wives, leave your husbands, if they abuse you - do it today! God loves you and doesn't want you to suffer.' My message for the church is that we need fearlessly to examine the theology that sets women and men up in a power hierarchy that supports violence. We need to reconsider the theology of suffering and self-sacrifice and replace it with a theology of hope and affirmation of human beings.

We need to make the church a safe place for women, where pain can be shared and new life found. In this safe place, women and men together may work out nonviolent, nurturing ways to relate to another. And then God's community of love may come to us.

The woman's voice in this story is part of a sermon entitled One Woman's Journey through Wife Battering by Susan Hagood Lee.

faith initiative

A growing body of research suggests that victims of sexual assault who are denied services are left feeling blamed, doubted, and revictimized. In one particular study, three specific questions were addressed in this study: 1) Did this sample of rape survivors obtain needed community resources, and are there demographic or assault characteristics that differentiate those who did not receive services?; 2) Did survivors experience their contact with community system personal as helpful or hurtful?; and 3) How do both service delivery outcomes and perceived secondary victimization relate to objective measures of psychological and physical health outcomes?

faith initiative. The primary objectives of this initiative are the following:

- Create an outlet to share information;
- Develop collaborative relationships between UCASA, rape recovery/crisis programs, faith leaders and their congregations, and victims/survivors; and
- Provide training and a forum for dialogue, brainstorming, and support to clergy who provide a critical and indispensable role in the emotional and spiritual healing of victim/survivors.

Brittany Bennett, the Faith Initiative Coordinator, works closely with the Interfaith Leaders Committee of the Utah Domestic Violence Council.

Of the individuals ranked by victim/survivors, clergy were consistently felt to be the most healing and helpful following a sexual assault. The Utah Coalition Against Sexual Assault is pleased to announce our

Brittany Bennett just graduated from the University of Utah and interned at UCASA during her last semester in the Department of Communications.

UTAH'S RAPE RECOVERY PROGRAMS

Provo
Center for Women and Children in Crisis Sexual Assault Services (CWCIC)
2483 North Canyon Rd.
Provo, Utah 84604
801.356.2511
www.cwcic.org
Serves: Utah and Juab Counties
Services: Crisis Line, Hospital Response Team, Support Groups

Richfield
New Horizons Crisis Center
P.O. Box 9
Richfield, Utah 84701
435.896.9294
www.newhorizonscrisiscenter.com
Serves: Sevier, Wayne, Piute, and SanPete Counties
Services: Crisis Line, Hospital Response Team, Individual Crisis Counseling, Support Groups

St. George
Dove Center
P.O. Box 2972
St. George, Utah 84771
435.628.0458
Serves: Washington County
Services: Crisis Line, Mobile Team/Hospital Response Team

Salt Lake City
Rape Recovery Center
2035 South 1300 East
Salt Lake City, Utah 84105
801.467.7273
www.raperecoverycenter.org
Serves: Salt Lake, Summit, Tooele, and Davis Counties
Services: Crisis Line, Hospital Response Team, Individual Crisis Counseling, Support Groups, Court Advocacy

Vernal
Vernal Victim Advocacy
80 E. Center Street
Vernal, Utah 84047
435.789.4250
www.angelfire.com/ut/victimadvocate/
Serves: Uintah and Daggett Counties
Services: Crisis Line, Hospital Response Team

Statewide toll-free hotline
1.888.421.1100

legislative session

The 2004 legislative session was defined by election year issues. The entire legislature is up for election in November but the important decisions about who runs and who gets their party's support will have been made in March when memories of the session are still fresh in the minds of delegates.

Indelible memories are created by bills that strike at the heart of political ideology. Hence, abortion, parental rights, education, gay rights, resolutions supporting President Bush and the "war on terror" dominated the session. These issues will become fodder for election slogans and media campaigns come September.

One of the most contentious debates centered on the abortion debate when Representatives Stephen Clark and Morgan Philpot questioned on the House floor whether women who have been raped should have access to abortion. Their comments caused a great deal of distress for women and many men. Rep.'s Ty McCartney and Carol Moss strongly condemned the comments. Rep. Clark, after denying his comments, eventually apologized.

For advocates, children, families, women, immigrants, gays and lesbians, the issues decided in the 2004 session hit close to home. Important bills that passed or made significant progress this session are:

- A ban on any direct or indirect public funding for abortion. It is highly likely that Gov. Walker will sign this bill into law. When she does, low-income women in particular who use state and publicly funded medical facilities such as the University of Utah will be directly impacted. Their access to abortion services will be eliminated or severely restricted.

- A ban on same sex unions and a constitutional amendment prohibiting the State of Utah from recognizing same sex unions. Both bills were fast-tracked through the session and passed overwhelmingly with bi-partisan support.

- A total of 11 so-called parental rights bills. These address the power of the state and its agencies to intervene in child and family welfare. The bills are a continuation of a trend to vest far more authority with parents while severely limiting that of the state. Child welfare advocates are extremely concerned about the impact of these bills.

- A bill supporting the construction and funding of a multi-cultural health center. The center will address discrepancies in care, cultural competency, and access to care. The bill passed with broad community support and will be funded this year.

Bills that failed are perhaps more telling. They include:

- Three attempts to dramatically curtail access to driver's licenses and in-state tuition for immigrants. The bills were supported by an extremist Utah County anti-immigrant group called UFIRE. An impressive coalition of Latino groups and allies defeated the bills handily but anticipate renewed efforts next session.

- Hate crimes legislation. Once again, the legislature refused to address a hate crimes law that included sexual orientation. Rep. David Litvack vows to bring the bill back each year until it passes.

- Corporate accountability. Another attempt to repeal some of the \$500 million in special tax exemptions for corporations failed. It did make more progress this year, however, which bodes well for future attempts to get this money back into the budget.

- An attempt to give law enforcement

authority to pull over and cite drivers who are not wearing seat belts. Again, those who think there is no role for government in public safety defeated the bill.

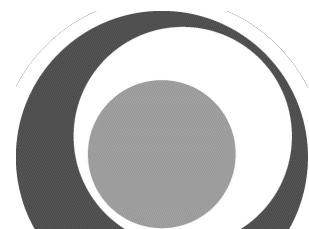
At the same time the legislature was trying to manage the 600 plus proposed bills, it did manage to take considerable time to debate a resolution removing the U.S. from the United Nations. Other meaningless resolutions ranged from supporting President Bush to condemning weapons of mass destruction to making the federal tax cuts permanent took up more precious time.

In the end, the 2004 legislative session was defined once again by highly partisan political maneuvering. At one point the minority Democrats of both houses issued a letter to the Governor complaining that Utah's message bill (abortion, gay rights, etc.) were hurting our business development prospects. This kicked off a firestorm of debate.

For social justice advocates it was another frustrating 45 days, but we are seeing a slow increase in the number of "regular" people up on the hill talking to representatives, learning the ropes, and making their voices heard. That alone is encouragement enough to keep up our collective efforts to advance democracy in Utah.

Lorna Vogt is the Executive Director of the Utah Progressive Network (UpNet). Learn more about UpNet by logging onto www.upnet.org.

advancing a society in which sexual violence is not tolerated



common denominator (continued from page 7)

(men were involved in child rearing). Stated most simply, "the lower the status of women relative to men, the higher the rape rate." What does that tell us about women's status in the United States?"

What responsibilities do men have? For UMASV, it is simple. Men need to begin supporting the work and goals of the anti-sexual violence movement. For decades, we have sat on the sidelines of this movement. It is now time for us to stand up and support the work that so many women have been involved in for so long.

Unfortunately, we have primarily been silent-or quietly supporting the wounds of those we care about. Rarely, have we

equally joined the struggle to end sexual and domestic violence. Unless we hold each other accountable for our rape supportive and violent behaviors, demanding each other's participation in this work currently being done to end these intimate crimes-for too many people we care about, ourselves included, this cycle of violence will continue. We have the most important role to play in ending our violence. This is my invitation to you to join us.

Marty Liccardo is the Utah Men Against Sexual Violence Coordinator. He received his degree in Women's Studies from the University of Utah.

a man s gotta do (continued from page 7)

UMASV and other men's programming throughout the nation?

The other groups are doing good stuff-- Yet, I think that a lot of these men's groups come from the perspective that "they can make a lot of change" but not from the perspective of working within the existing movement. We are a part of the anti-sexual violence movement, and I don't think men's groups are always situated in this philosophy. We can't be starting a new movement, we must join an existing movement.

UMASV is working to build and support basic rape intervention and education programs that can, in the future, spawn men's programs--this is different. Most men's groups are not situated in services for survivors--a response system for victims. UMASV still uses the knowledge of other groups-other men's programs. We are just working first to make sure the basic needs of programs, and of survivors, are established before a men's program specifically.

How do you manage male guilt and male privilege within this movement?

Male privilege is a reality and it is important to understand that in order to understand men's place in this movement, you have to understand privilege. This means understanding and working through guilt. The process of working through guilt and the pain of going through that is worth the

journey. It is nice to work with different types of men-we are all in such different places and there is benefit to discussing how far our guilt may take us. I'm really glad you feel bad, but that can only do so much. We know why you're feeling bad. And, in the process of doing this work for your community, your guilt is best left at the door. We can deal with that later. Everyone in this movement goes through guilt, myself included. Part of the consciousness raising experience is the ideological crisis I must go through as a man. I am part of a culture that promotes rape. You are going to feel really bad. You are going to feel guilty. And it will come back to haunt you in some creepy ways-and it's okay to feel bad. Yet, I think it is more common to feel frustrated than bad in this work.

What's the best part of working within this movement?

The best part is taking responsibility for something I know men have to take responsibility for. I enjoy realizing that there are a lot of men out there that are disappointed in the kind of violence that they see perpetrated by other men-and that there's a place for us in this movement.

Marty has worked at UCASA since last fall. He was recognized as a Vagina Warrior in February as part of Salt Lake City's V-Day 2004.

my name is angela shelton

My name is Angela Shelton. I am a filmmaker; writer, actress, producer, homemaker and companion to an awesome dog named Norma. I drove around the country and met every other Angela Shelton in America who would talk to me. Yes, that's right, I took the "go find yourself" literally and looked myself up on the Internet.

My plan was to do a study of women they just all happened to be named Angela Shelton. I found 76 Angela Sheltons on the Internet. 21 were disconnected. I left message for 55 women. I spoke to 32.

But as I told them what I was doing and who I was and what I had been through - their stories started. 12 out of the 32 Angela Sheltons I spoke to had been raped, beaten or molested - myself included.

Then I spoke to the Angela Shelton who was studying criminal justice and tracked sexual predators for a living. What struck me the most about this particular Angela was the fact that she happened to live in the same town as my father

who molested my stepbrother, my stepsister, and me for 5 years.

I believe everything happens for a reason. When I heard that I was going to be so close to my father, I immediately thought it was the God/my higher power/the universe - something greater than me - putting this opportunity in front of me. I knew

once I heard that I was going to be so close to my father that I would have to go and see him, but I thought I'd do it on my day off or something. But we just happened to be on the road in June...

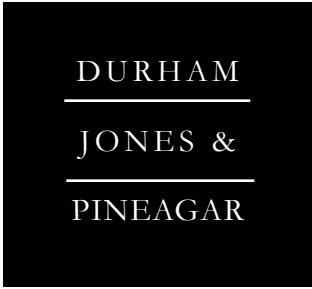
So I went to confront my father on Father's Day...

More information about Angela can be found on Angela's website at: www.searchingforangleashelton.com. Searching for Angela Shelton will be available to purchase through UCASA later this summer.

On April 13th, Angela was on Radioactive on KRCL. You can download this amazing interview at <http://www.krcl.org/radioactive/pastshows.htm>

... so I went to confront my father on Father's Day.

event sponsors



THE POWER OF OUR VOICES, a sexual assault awareness month awards event, was possible because of the generosity of the following businesses, individuals, and organizations:

- ARUP Laboratories
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- The Kura Door
- Chick-Fil-A Restaurants
- Melinda "bob" Maureen
- Jesse Ernest
- Christa Layton
- Sophie Bona-Layton
- Asian Star
- The Bakery
- Bakers De Normandie
- Big Apple Pizza
- Carlucci's
- The New Yorker
- Ruby River
- Pinon
- Porcupine
- Trio
- Cactus and Tropicals
- Salt Lake Hilton
- The Mansell Group

2004 award recipients

Shirley A. Brown-Miller
WEBER COUNTY

Shirley Brown Miller works at Your Community Connection in Ogden. Shirley was one of the original board members of UCASA. She was one of the individuals most responsible for integrating sexual violence prevention and sexual abuse prevention into the standard curriculum within the Ogden School District. As one of the individuals managing the Reduce Sexual Assault Against Women (RSAAW) grant through the Utah Department of Health, Shirley adapted and created the rape prevention and education curriculum that is still being used by rape recovery/crisis programs today.

Shirley is a pioneer of services for rape prevention education. She participates on numerous boards and councils. Shirley integrates issues of sexual and domestic violence. Because she understands the relationship between many forms of violence, Shirley has implemented comprehensive courses on parenting and self-esteem that incorporates a broad picture of what is happening.

Shirley's voice is an essential one in the anti-sexual violence movement. Because of this, she participates on many councils and committees: Orrin Hatch Women's Conference Organizing Committee, Weber County Coalition for a Healthy Community, 211 Directory Committee, Health Committee for free services in North Davis County, Weber State University Diversity Committee, and the advisory group for Prevent Child Abuse Utah.

Shirley enjoys her work. She enjoys her husband--Shirley and Honey have

presented at the annual GIFT conference about communication within relationships.

The Smart Family
SALT LAKE COUNTY

April is Child Abuse Awareness Month as well as Sexual Assault Awareness Month and honoring the Smart family's contributions to kidnapped and sexually exploited children reiterates the obvious connection between child abductions and sexual violence.

Through the loss and return of Elizabeth, the Smart's passionately sought the passage of the Amber Alert for the protection and rescue of other children. For the benefit of all children, they lobbied Congress and the Senate tirelessly to prevent further abductions and to rescue missing children.

The Smart Family has been involved in numerous conferences designed to further the awareness and cooperation in the area of child protection within law enforcement, media, and the public. Their commitment to family and the protection of every child has brought a heightened awareness to the need of every child to feel safe and secure.

Merelynn Cambridge
FORT DUCHESNE

Merelynn has worked as an advocate for the Ute Tribe for several years. Her job is complicated, as most advocates' work is, but she must attend trainings about developments in criminal justice systems that usually don't apply directly to the work she does and the governments that she works with. Merelynn also works within the context of a community that is extremely isolated. Merelynn travels many

miles to receive training and participate in steering committees. Many of the groups that Merelynn contributes to don't even give monies to agencies serving tribes and American Indian populations.

Merelynn participates on the planning committee for the Utah Victim Assistance Academy and the planning committee for the Violence Against Women Act.

Scott Wyatt
CACHE COUNTY

When Scott Wyatt ran for Cache County Attorney, he ran on the platform that he would aggressively prosecute sexual crimes. At this time, Cache County was reporting 0-1 sexually violent crimes a year. Now, Cache County has become one of the nation's models of an effective criminal justice response to rape. Under Scott's leadership, the Cache County Attorney's office prosecuted many difficult cases where the victim and perpetrator were related, lovers, married, or friends. His assertive approach led to an increase in reported sexually violent crimes, a comprehensive protocol for responding to victims of rape, a curriculum for other prosecutors, an award winning video, and indirectly, improvements throughout the state. Cache County is one of the only counties in Utah that allows the victim to work with other professionals (not exclusively law enforcement) to order a Code R exam. The Cache County Attorney's Office understands that collecting the evidence is the most important part of effective prosecution--realizing that individuals may choose not to seek complete

sexual assault awareness month 2004:
the power of our voices



award recipients (continued from page 13)

investigation/prosecution later.

Scott retired from the Cache County Attorney's Office in 2002. He is now in private practice. The Cache County area and response to rape is the subject of the American Bar Association Silver Gavel Award winning film, "It's Called Rape." He also provides free counsel to students at USU. Currently Scott serves on the board of trustees for Snow College and has been involved on USU's board of regents and board of trustees.

Dr. Janice M. Dieber
WASHINGTON COUNTY

Jan is a survivor of sexual and domestic violence who uses her experience to advocate for others as well as train professionals working with victims of sexual assault. Jan has sought justice above and beyond what most will endure. So wronged by her ex-husband's attorney during

several of their many hearings, Jan defended her own rights by filing and successfully defending an ethics complaint with the Utah Bar Association in hopes that the attorney would not be able to practice in Utah anymore. She was the keynote speaker for one of the regional trainings on working with people with disabilities who are victims of sexual assault, sharing on her own experience of violence that left her with permanent disabilities.

A resident of Washington County for the past seven years, Jan is originally from the Chicago area where she was a university professor and college dean. She has a master's in adult education and a doctorate in medical education. Author of several textbooks, journal articles and grants, Jan spends her volunteer time as a victim advocate with the St. George Police Department (formerly

with the Washington County Attorney General's Office); CASA; board chair of the Erin Kimball Memorial Foundation (transitional housing for victims); secretary and treasurer of the 5th district court's victim rights committee and the Washington County Domestic Violence and Sexual Assault Coalition; co-facilitator of the DCFS women's support group for domestic violence victims; and a UCASA trainer.

UCASA invites community members to consider a local professional, volunteer, or advocate for an award in 2005. Nomination requests will go out in winter 2005. Nominations are reviewed and recipients selected by the UCASA Board of Trustees.

advancing a society in which
sexual violence is not tolerated



the power of our voices

With the staggering statistics on rape and sexual violence and the rates of victimization, it seems hard to believe that we, as a community, still need to draw awareness to this problem and the devastation it causes. Unfortunately, rape victims remain a population silenced. By uniting all of our efforts and sharing resources, we can work together to gain statewide recognition and have our voices heard. Being part of a mobilized movement helps to raise awareness and shed light on what it is like to be a victim of sexual violence. Break the silence. Break the cycle. Join the movement.

In the last thirty years, the rape crisis movement has led the way in providing services to victims and empowering individuals to chart their own course for heal-

ing. More recently, we have concentrated our resolve on deepening an active public conversation about what sexual violence is, how to prevent it, and how to help survivors heal. This year's theme, The Power of Our Voices, reflects the contemporary movement's desire to give new meaning to the phrase "public advocacy"; encouraging every member of the public to join in raising awareness about sexual violence and its impact on communities as a public health issue. Because we understand rape is both a public health and public safety concern, we know that victim/survivors must seek healing, individuals with sexually aggressive behaviors must seek recovery, and communities must confront this problem without blame or shame.

No one person, organization,

agency or community can eliminate sexual violence on their own. Experts and front-line providers from diverse disciplines in the fields of sexual assault prevention and intervention agree: collaboration is key to gaining broad-based public acknowledgment of sexual violence as an insidious public health problem that impacts every community. In short, if we cannot move forward together, we cannot expect the public to move forward significantly.

UCASA appreciates the support of the CALCASA staff for the permission granted to use their SAAM materials.

walker signs proclamation

On April 21st, Governor Olene Walker met with members of the Utah Sexual Violence Council to declare April Sexual Assault Awareness Month.



Whereas, sexual violence effects people across the spectrum of society;

Whereas, one in three women and one in seven men will be victims of sexual violence in their lifetime;

Whereas, the Bureau of Justice estimates that less than 30 percent of rape victims report the crime;

Whereas, more than 55 organizations and agencies throughout Utah work to counter these crimes by advocating for and offering support to those affected

by sexual violence, and providing education about this violation of the law;

Whereas, no single person, agency, organization, or community can eliminate sexual assault; Whereas, we must work together to advance a society in which sexual violence is not tolerated;

Whereas, Sexual Assault Awareness Month encourages discussion about rape and other forms of sexual violence and their prevention;

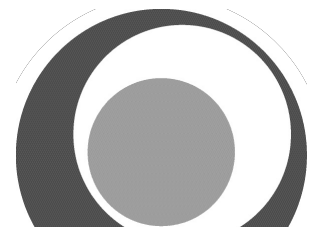
Now, therefore, I, Olene S. Walker, Governor of the State of Utah, do hereby declare April 2004 as Sexual Assault Awareness Month.



Members of the Utah Sexual Violence Council prevention sub-

committee are interested in knowing about the local activities you organized in your community. Participate in a survey by logging onto: <http://www.surveymonkey.com/s.asp?u=65105512439>

Contact Pat Mills at the Center for Women and Children in Crisis, Sexual Assault Services with any questions about the prevention subcommittee of the Utah Sexual Violence Council. You can reach her at 801.356.2511. You may also call Marty Liccardo at UCASA.



advancing a society in which sexual violence is not tolerated

the good, the bad, and the ugly

VICTIM ADVOCACY AGENCIES IN POLICE DEPARTMENTS

- Weber Co Sheriff's Office
801-399-8065
- Midvale City Police Department
801-256-2506
- Murray City Police Department
801-284-4203
- Salt Lake County Sheriff
801-535-5441
- SLC Police Department
801-799-3473
- Sandy City Police Department
801-568-7283
- South Jordan Police Department
801-254-4708
- South Salt Lake Victim Assistance
801-483-6009
- West Jordan Department
of Public Safety
801-566-6511
- Orem Department
of Public Safety
801-229-7128
- Pleasant Grove Police Department
801-785-3506
- Provo City Police Department
801-852-6375
- San Juan Co Sheriff's Office
435-587-2237
- Carbon Co Sheriff's Office
435-636-3250
- St. George Police Department
435-628-2408
- Kane County Victim Services
435-644-4989
Springville/Mapleton
Victim Advocate Program
801-489-4463 x 126
- Vernal City Police Department
435-789-4250
Beaver Co Sheriff Office
435-438-2862

VICTIM ADVOCACY AGENCIES IN PROSECUTOR'S OFFICES

- Cache County Victim Services
435-716-8361
- Davis County Attorney's Office
801-451-4301
- Layton City Attorney's Office
801.546.8539
- Weber County Attorney's Office
801-399-8377

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3rd District Juvenile Court

A ninth-grade student from Oquirrh Hills Middle School was charged with eight counts of sex abuse and five counts of forcible sex abuse of a child. Thirteen of the victims were girls between the ages of 13 and 14 years old who also attend Oquirrh Hills Middle School. Deputies say the 14-year-old boy preyed on the girls throughout the past seven months in the hallways of the Riverton school before and after class. The alleged incidents happened mostly in or around the school in areas such as the hallway or playground, usually while many other students were watching. Sheriff's officials say an assistant principal learned of the initial suspected attacks in September from two of the alleged victims - but did not report them until April. That failure to act enabled dozens of additional incidents to occur until this month, according to the sheriff's office. Salt Lake County sheriff's deputies are investigating whether the assistant principal violated the law - a possible class B misdemeanor - by not immediately informing police.

Deseret Morning News, April 21, 2004. The Salt Lake Tribune, April 21, 2004.

2nd District Court

34 year-old Scott A. Rainford was charged with one count of attempted homicide, one count of aggravated kidnapping and four counts of aggravated sexual abuse. Rainford allegedly kidnapped his estranged wife while she was at Weber State University. She was found tied up in a Kaysville motel room. She had filed a protective order against her husband a month prior.

Deseret News, April 24, 2004.

Utah Supreme Court

The Utah Supreme Court has upheld the aggravated sexual assault conviction of a former Utah State University student despite the man's claims that the state should not have been allowed to change information in the charging documents two days before the trial. Stacey Nelson-Waggoner was convicted of the November 1996 assault of a Logan woman he had met in a Salt Lake City nightclub. The woman said that they had lunch on a

Sunday in November 1996, and he took her back to his dormitory, where he assaulted her. As the trial approached, Nelson-Waggoner said he could produce witnesses who would testify that he was not with the woman on November 17, 1996, and that he was in Phoenix on November 24, 1996. Those were the only two Sundays in the time period mentioned in Nelson-Waggoner's charging document. The state amended the charge to say the assault occurred "on or around November 17, 1996," and Nelson-Waggoner argued that this was because the state knew witness testimony would give him an alibi and hurt the state's case.

But the high court ruled that the last minute change was acceptable and also disagreed with Nelson-Waggoner's claims that his attorney did not provide him adequate assistance.

Deseret News, April 17, 2004.

3rd District Court

David James Gomez, 57, was booked into the Salt Lake County Jail on Monday for investigation of 50 counts of forcible sodomy, 15 counts of aggravated sexual abuse of a child, 10 counts of sodomy on a child, all first-degree felonies, and 50 counts of forcible sexual abuse, all second-degree felonies. Gomez is accused of raping, sodomizing and fondling several boys ages 10 to 13 years old. According to court documents, alleged abuse began in 1989 when a 13-year-old victim sought counseling from Gomez, who was serving as bishop of the Hunter 10th Ward in West Valley City. Gomez is accused of multiple sex acts with the boy in Gomez's car and at his home. The accuser, now an adult, said he was abused at least twice a week, and the number of sexual abuse incidents was more than 500 during that time, according to a probable-cause statement.

Deseret Morning News, April 23, 2004. The Deseret News, April 23, 2004. The Deseret News, April 24, 2004.

2nd District Court

Michael Ladd Wilhelm, 37, was charged with raping a woman at knife point in her Weber County home more than 10 years ago. Wilhelm was charged after a DNA match was made earlier this month. The

continued from previous page
judge set bail at \$1 million cash.
The Salt Lake Tribune, February 11, 2004.

3rd District Court

Joe L. Christensen, 57, entered pleas to one count each of class B misdemeanor official misconduct and unlawful dissemination of criminal history for prying into the records of a woman who had accused Christensen's relative of rape in another jurisdiction. As part of the resolution, Christensen agreed not to appeal a two-year suspension of this police officer's certification. In a related case, Christensen - who was fired while he was police chief last September - was placed on probation by a Taylorsville City judge for one year for illegally accessing the same woman's criminal background information.
The Salt Lake Tribune April 17, 2004.

Federal Court

Luven Whitehorse, 37, pled guilty in December to two counts of aggravated sexual abuse of a minor was sentenced to more than 15 years in federal prison. The abuse occurred on the Navajo Nation reservation in southern Utah. Whitehorse must pay \$2,240 in restitution and complete five years of supervision after his release.
The Salt Lake Tribune, February 13, 2004.

3rd District Court

Clay Grant Wiscombe, 44, was sentenced to 90 days in jail for trying to rob a woman after offering her a ride. Wiscombe was initially charged with first-degree felony counts of aggravated kidnapping, aggravated robbery and aggravated sexual assault. According to charging documents, Wiscombe locked the doors of his van and fondled the victim, then grabbed her purse and fondled her again before throwing her from the vehicle, causing scalp injuries. Wiscombe pleaded guilty to second degree felony counts of kidnapping and theft. Third district Judge Ann Boyden

also placed Wiscombe on probation, fined him \$800, ordered restitution and counseling as directed by probation officers.
The Salt Lake Tribune, February, 1 2004.

3rd District Court

A 20-year-old West Valley man was charged with rape, a first-degree felony punishable by five years to life in prison. According to the charges filed, the man raped a teenage girl at her neighbor's Salt Lake County home on the night of April 11. The girl reported the rape the next day and was found to have injuries consistent with the charge.
Deseret News, April 18, 2004.

3rd District Court

Tow men have been charged with rape, a first-degree felony punishable by five years to life, after a teenage girl was attacked in a stairwell of a South Salt Lake apartment building nearly two years ago. According to the charges filed, one of the two men approached the 14-year-old girl and asked if she had a boyfriend. Before she could answer, he dragged her into a darker portion of the stairwell, where both men raped her. The girl reported the crime immediately.
Deseret News, April 18, 2004.

4th District Court

Jared Lyman Platt, 28, was charged with four counts of second-degree felony forcible sex abuse and one count of second degree felony solicitation of sexual exploitation of a minor. Platt, a patrolman for the Pleasant Grove police department for three years, resigned last week. Platt has not been arrested, but will receive a court summons.
The Salt Lake Tribune, April 25, 2004.

3rd District Court

Napoleon Reyes Castillo, 51, was charged with five second-degree felony counts of forcible sexual abuse after touching his daughter's 14-year-old friend during a

sleepover. Castillo pleaded guilty to one misdemeanor count of sexual battery and was sentenced to six months in jail. Prosecutors said the charge was reduced because the girl was too traumatized to testify.
The Salt Lake Tribune, April 29, 2004.

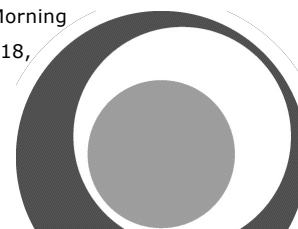
4th District Court

Jared Lyman Platt, 28, was charged with four counts of second-degree felony forcible sex abuse and one count of second degree felony solicitation of sexual exploitation of a minor. Platt, a patrolman for the Pleasant Grove police department for three years, resigned last week. Platt has not been arrested, but will receive a court summons.
The Salt Lake Tribune, April

2nd District Court

A West Bountiful couple was arrested for allegedly making separate sexual advances to a minor. The husband was booked in the Davis County Jail for forcible sexual abuse, unlawful sexual activity with a minor and kidnapping. His wife was arrested on two counts of attempted sexual battery. The husband, 34, is accused of fondling a 14-year-old girl and then telling her that his wife said it was OK for him to have sex with her because of his wife's poor health. The wife, 28, allegedly touched the same teen inappropriately while asking her if she would participate in a threesome with her and her husband. The wife is also accused of propositioning a friend of the girl, a 16-year-old female. While interviewing, detectives learned she was having consensual sexual relations with her 20-year-old boyfriend, illegal under Utah law. The boyfriend was arrested on three counts of unlawful sexual intercourse with a minor.

Deseret Morning
News, April 18,
2004.



learning to swim: a medical student's perspective

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Tooele City Attorney's Office
435-882-8900

Salt Lake County District Attorney's
Office
801-363-7911

Washington County Attorney's Offices
435-634-2488

West Valley Attorney's Office
801-963-3460

Millard County Attorney's Office
435-743-6522

Wasatch County Attorney's Office
435-654-9381

Northern Utah County Victim
Assistance Program
801-768-7117

Grand Co Attorney's Office
435-259-1384

Southern Utah County Victim
Assistance Program
801-465-5224

Utah County Attorney's Office
801-370-8015

Iron County Victim Services
435-865-6368

Duchesne County Attorney's Office
435-722-0828

VICTIM ADVOCACY AGENCIES

Colleen Quigley Women's Center
(Price)
435-636-2375-bus

Gentle Ironhawk (San Juan County)
435-678-2445-bus

Women's Crisis Shelter (Vernal)
435-781-4250-bus

Peace House (Summit)
435-647-9161

Department of Corrections Victim
Services
801-264-4343

FBI Victim Advocate
801-579-4605

YWCA of Salt Lake
801-537-8600

Tooele County Women's Shelter
435-833-7350

South Valley Sanctuary
(Salt Lake County)
801-255-1095

Ute Indian Tribe
435-722-3941x42

As a third year medical student at a large private hospital, I am assigned patients to care for by my resident physician. Early on during my Internal Medicine rotation, my resident sent me to see a female in her mid-30's who was admitted to the hospital through the ER with trauma-related injuries. Because the hospital is in an urban setting, I had assumed at the time that it was a motor vehicle accident or perhaps a mugging.

When I entered the patient's room, I found the woman quietly lying in her bed watching "Oprah". She had a rather large black eye and a cut on her chin. A man, who introduced himself as her husband, was also in the room. After I introduced myself, he quickly jumped in with the explanation of how the woman had been cleaning out their bedroom closet when a shelf gave way, toppling large boxes onto her head and body. (It is curious how victims often do not have voices.) On physical exam, the patient had bruises on her abdomen and sides and needed to be examined via CT for any internal bleeding.

After obtaining a history and completing the physical exam, I returned to my resident to report and then together we went to our attending physician. Upon hearing the patient's name, the attending physician quickly rolled his eyes and related to me a long history of this particular patient's visits to the hospital after having been beaten by her husband for trying to refuse intercourse. The attending physician explained that this patient always resisted any help that was offered to her, whether it is a support group, shelter, or legal assistance. He went on to hand me a laundry list of exams that we needed to perform for her safety and then expounded in detail on how frustrating it is to deal with patients like this who, seemingly, do not want to help themselves. Personally, I was a little shocked at the attending physician's attitude and what I deemed as a lack of compassion on his part. He

seemed to want to simply patch up the patient and ship her out again. I am not sure if he, himself, even went to see her.

Later on that day I again visited the patient. Her husband had left the hospital to go to work and I got a chance to have

He seemed to want to simply patch up the patient and ship her out again.

a conversation with the patient - alone. After explaining to her what I had learned from her past medical records, she admitted that her husband had once again, in

fact, beaten her for trying to refuse intercourse. She said that this happens every few months or so after he has been out drinking with his buddies. She has been married for 10 years with two children less than 2 years of age, so she feels very helpless and hopeless - stuck. She has no desire for any assistance and visibly turned cold to any conversation involving leaving her husband or even receiving counseling.

As a medical student, I am fortunate to have a fair amount of time for patient contact, so I was able to talk to this patient for quite awhile. I learned a lot from her about life as an abused spouse. She was rather matter-of-fact in the details in what seemed to me to be a horrible way to live, but to her was just "life".

I contacted psychiatry, social services, women's services, and legal services to see this patient. The patient refused all services and, since no internal injuries were found, she was discharged from the hospital with simply a few painkillers. If only there was something that medicated social pains as well as narcotics relieved physical ones.

This experience made me reflect on my training as a future physician. I had become very emotionally involved with this patient for the week that she was under my care. At the same time, I was amazed at how distant my attending physician was and how he was able to dismiss this case because of how chronic the

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problem had become. I, on the other hand, was astounded that the woman would want to return to her husband and the same horrific abuse.

My classroom training, during my first two years of medical school, involved quite a number of lectures on how to manage and treat a patient that has been abused. We were taught about and visited with all of the different services available to a patient that was being victimized. We were taught how we should communicate with the victim and how we should represent ourselves in a non-threatening manner. Unfortunately, textbook learning in medicine, as with most facets of education, rarely represents what is experienced in actual practice.

After successfully completing the first round of boards after my second year of medical school, I was finally permitted to treat actual patients. Being thrown into

the ocean after only having read on how to swim is quite a traumatic experience! However, after a few weeks of observing physicians and trying to emulate their actions, I was able to gain some confidence. The issue that I was now faced with, having actually treated a victim, was what I felt was a lack of compassion from an attending physician that I was supposed to be learning from. It was extremely disheartening to find out that someone I look up to has an image that seems to completely contradict my own idea of what a physician should be. I was perplexed. How did this attending physician become so removed from, and seemingly oblivious to, the chronic agony of his own patient?

After a few more months of other rotations, I have come up with somewhat of an answer to this question. After years of treating patients who have been abused and yet return to their abusers, and attempting over and over to

intervene on the patient's behalf, physicians often develop scars over the wounds that are opened at each early compassionate patient interaction. These scars serve as very effective defense mechanisms to keep the physician distant enough in order to maintain a functional status and to prevent the pain that is caused with each failure in treatment. It allows a physician to be able to handle patients that are undergoing traumatic experiences such as domestic violence. The physician must straddle a thin line around becoming so emotionally involved with each patient that he/she becomes completely burned out and are not able to then extend themselves to other patients. Failures such as this are one of the primary reasons for the alarming rate of depression and suicide amongst physicians.

What I have found is that the best physicians are the ones that show a balance. They remain distant enough that they are able to treat

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HIPAA

providing services to victims of sexual assault

If you have been to a health care provider's office, hospital or have a health insurance policy, sometime in the last three months you have probably received information about the new federal privacy regulations enacted under the Health Insurance Portability and Accountability Act of 1996, otherwise known as HIPAA. These new privacy regulations became effective on April 14, 2003, and must be followed by health plans (insurance companies, HMO's, employee health plans), health care providers (nurses, physicians, hospitals) and health care clearinghouses.

Under HIPAA patients must receive education about their privacy rights, they must be given

access to their medical records, they must give consent before information is released, and they will have recourse if privacy protections are violated.

How does HIPAA impact victims of sexual assault? Victims must sign an authorization before any personal health information is released to someone who is not a health care provider including: law enforcement, prosecutors, and the crime lab. The victim must also be informed that once information is released to someone outside of the health care system it is no longer protected by HIPAA. Since rape crisis advocates are not considered to be health care providers, a victim must give permission prior to having his or her personal infor-

mation released to a rape crisis advocate. It is important for rape crisis teams to work closely with hospitals to determine how this consent will be obtained.

Many hospitals are calling rape crisis without releasing any information about the victim to the advocate. When the advocate arrives the nurse gets permission for the advocate to meet with the victim. Once consent is obtained from the victim, the advocate must then collect any information they need directly from the victim. In this way the advocate is treated the same way a family member of the victim would be treated if

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advancing a society in which sexual violence is not tolerated

workers felt that the needs of SA survivors were not being recognized by DV services. Finally, these advocates, feeling burned out by the time, energy and resources invested in the larger issue of violence against women, saw an opportunity: creating specialized programs for SA survivors could both serve the unique needs of this victim population and divide the labor that was otherwise usurping their energy.

Separation of the issues may have initially been a good idea. However, that strategy is now outdated.

The first step toward dividing the two issues was to seek separate funding. With no money available at the federal level, both sets of advocates turned to state governments for additional assistance. DV programs have traditionally sought funding from a state's Department of Human Services. To appeal to human services and welfare agencies, DV services have had to stress that the family that experiences DV is one in crisis and that the solution is to provide services that help victims along the road to self-sufficiency (Loseke, D., 1992). This portrayal appealed to state agencies that were responsible for dispensing AFDC grants, geared toward ensuring the economic livelihood of single mothers with children and promoting the economic self-sufficiency of poor families through job training programs, income subsidies, food stamps and subsidized healthcare. By appealing to their funders' missions, over the years, DV services have grown from emergency shelters to include educational classes, job skills training, GED assistance and parenting skills. Advocates for SA victims faced a more challenging problem in gaining public support due to the still-persistent tendency to blame the victim. The solution for SA programs was to divert attention away from the victim by making the issue a medical one.

According to Barbara Nelson, medicalizing an issue is to use language that makes the problem sound like an epidemic that affects everyone, not just a stigmatized few (Nelson, B., 1984). Additionally, stating that the problem is a social disease implies not only that there is a cure but that preventative measures exist to con-

tain the problem. The result is that SA programs have traditionally sought funding from a state's Department of Health. Since the mission of these funding sources is to contain public health crises, SA programs have appealed to them by emphasizing the need to provide preventative education in schools, appropriate treatment in hospital emergency departments (to help guarantee preventative treatment for pregnancy and sexually transmitted diseases) and long-term therapy for depression and post-traumatic stress disorder.

On the surface, the decision to find separate funding sources seems good: both issues have thrived using their separate problem frameworks and continue to gain public and legislative support. However, the need to distinguish the issues from one another lays the groundwork for competition. Choosing separate funding sources does little to decrease competition for resources when the sources themselves must compete against one another for a larger share of federal and state budgets. Considering that we now live in a time where the current federal administration chooses to divert funds away from programs and services, the strategy to distinguish issues from one another works against both DV and SA agencies as both see their yearly budget allocations get smaller and smaller.

Additionally, as more SA survivors have felt community support throughout the years to speak up about their victimizations, we now know that the majority of these crimes occur within a family or relationship violence context. We also know that SA survivors often are in need of protection from a partner or family member. Therefore, the original argument for separating SA from DV has lost a lot of its relevance. This, combined with the current political climate, creates a new window of opportunity for DV and SA workers: a spirit of collaboration instead of a strategy of division and improved services for victims may result in a larger pool of funding. Moving in the direction of collaboration

might involve adopting what Lisbeth Schorr calls an "outcome orientation" to developing and evaluating programs (Schorr, L.B., 1997). An outcome orientation seems contradictory to the status quo of defining programs to meet the specific concerns of a narrowly focused funding source. Although this practice initiates good work, it is not effective, as little progress is made toward ending the problem once and for all. An outcome orientation accepts methods that seek solutions to the larger structural causes of a problem. By attacking the structural causes, we can make more progress with a limited amount of funds. Applying an outcome orientation to DV and SA would mean recognizing that to work on one issue is not to ignore the other because the root of both

crimes is one population using violence and humiliation to control another. Advocates from existing DV and SA programs would not need to farm out survivors who are victims of both crimes, thus ensuring continuity of care. Advocates can adopt a public agenda that seeks systemic change to eradicate one population's sense of entitlement to dominate another. This would differ from current, separate agendas that may name the structural cause as part of a vision, but only secondary to a primary goal of eradicating a specific crime. Specific projects under this new agenda could include combined preventive education workshops/psycho-educational groups for survivors that use an oppression/privilege analysis and collaborations with other agencies to

develop legislation that combats classism, racism, sexism and homophobia.

Separation of the issues may have initially been a good idea. However, that strategy is now outdated. Separation only undermines the efforts of advocates in both issue areas. Instead of fighting against one another, the time has come to focus our energy on fighting the common structural causes.

Christina Wong works at the Disability Law Center. This piece is based on her master's thesis with contributions from Roxanne Alvarez and Sarah Dorn Mudd.

learning to swim (continued from page 19)

and manage a victim's physical and emotional injuries, and yet they are involved enough with the victim to develop a relationship so that help can be given if, and hopefully when, the victim so desires. It is critical that the physician be ready to provide this help when the patient is ready - no matter how many times a victim comes in having been injured. Help and compassion must be readily available when the patient, who is a victim, is ready

to be the recipient.

During the past year, I have attempted to work this balance into my patient care. Admittedly, it is very difficult to not become hardened to the reality of the cycle of domestic violence and frustrated with the patient/victim that I treat who is in a physically and/or sexually abusive relationship, and who will not leave. I will always keep in mind this first patient that I saw and the shock

that I felt, as a new third year medical student, when I was called in to treat her. I am committed to use the memory of that experience to maintain my compassion and the ability to at least try to extend whatever help I can provide to every victim that I treat.

Joseph M. Dieber is a third year medical student at St. Louis University School of Medicine in St. Louis, MO. He has called Washington County, UT home since 1997.

HIPAA (continued from page 19)

they were present during an examination. The advocate should not have access to the patient's medical record without written consent from the patient requesting that information from the hospital.

the hospital and the agency that would maintain HIPAA protections for any information obtained by the advocate during the examination. All advocacy agencies should contact the hospitals where they provide services and make a plan for how they will deal with HIPAA issues.

HIPAA. All mandatory reporting laws must still be followed under HIPAA. HIPAA also does not change the ability for minors to consent to care and to receive confidential care for sexual assault issues.

Susan Chasson, MSN, JD, SANE-A, is the Statewide SANE Coordinator at UCASA.

If a hospital is not comfortable obtaining consent from the patient at the time of the examination, they may be willing to create a business associate agreement with the advocacy agency that would create a contractual arrangement between

Are there any exceptions to HIPAA? If a state has stricter privacy laws they take precedence over HIPAA. Therefore, the confidentiality of information given to advocates is not changed by



the jury is still out

On June 18, 2003, the Deseret News reported that "rapes and murders decrease in Utah". The deduction comes from the preliminary FBI crime report that shows Salt Lake City, Provo, and West Valley City had 5-11 less reported rapes in 2002. While numbers of reported rapes may have decreased slightly in the state's three largest cities, it is important to take a closer look.

The preliminary numbers for three cities alone can not reflect a statewide decrease in the rate of rape. The FBI crime preliminary report conversely finds that rape increased four percent in the nation. Furthermore, the west, one of four regions considered in the report, showed the only increase in the overall crime index: 2.9 percent.

There are 135 law jurisdictions in the State of Utah, the numbers the Deseret News reported on only capture the state's three largest cities. While the preliminary FBI data is not in its final form, it reports a trend that includes projected numbers so that numbers can better represent numbers per capita.

Utah's own preliminary Bureau of Criminal Identification (BCI) report, shows an even higher increase of rape in Utah; 14 percent. What can we tell from these "preliminary reports"? Unfortunately, not a lot. When all agencies are not required to report, the numbers reflect only a part, rather than the sum of the whole.

references

the great divide (p.1, 20-21)

Loseke, D. (1992). *The Battered Women and Shelters: The Social Construction of Wife Abuse*. New York: State University of New York Press. • Nelson, B. (1984). *Making an Issue of Child Abuse*. Chicago: University of Chicago Press. • Schorr, L.B. (1997). *Common Purpose: Strengthening Families and Neighborhoods to Rebuild America*. New York: Anchor Books, Doubleday.

marital rape (p.4-5)

Suggested readings: Bergen, R.K. (1996). *Wife rape: Understanding the response of survivors and service providers*. Thousand Oaks, CA: Sage. • Eskow, L.R. (1996). *The ultimate weapon? Demythologizing spousal rape and reconceptualizing its prosecution*. *Stanford Law Review*, 48, 677-709. • Finkelhor, D., & Yllo, K. (1985). *License to rape: sexual abuse of wives*. New York: Holt, Rinehart, & Winston. • Hanneke, C., & Shields, N. (1985). *Marital rape: implications for the helping professionals*. *Journal of Contemporary Social Work*, 66, 451-458. • Mahoney, P., & Williams, L. (1998). *Sexual assault in marriage: prevalence, consequences and treatment of wife rape*. In J. Jasinski & L. Williams (Eds.), *Partner violence: A comprehensive review of 20 years of research*. Thousand Oaks, CA: Sage. • Russell, D.E.H. (1990). *Rape in marriage*. New York: Macmillan Press.

guns and domestic violence (p.6)

All references are available by contacting Deborah Barron at db@americansforgunsafety.com.

common denominator (p.7)

Kimmel, M. (2000). *The Gendered Society*. New York: Oxford University Press. Pages 243, 255, 261, & 263.

to have and to hold (p.8)

The FBI estimates numbers for the law enforcement agencies that fail to report (reporting crime numbers is voluntary for agencies). The BCI report does not estimate the numbers for non-reporting agencies and can thus skew the crime numbers to be either higher or lower than they really are. Without all agencies reporting mandatorily, the survey conclusions on crime can be easily exaggerated or understated.

A third report, *Rape in Utah: A Report to the State*, by the National Violence Against Women Prevention Research Center, names Utah as second in the nation for rape, when projecting unreported numbers of rapes into the equation. It should be noted that the definition for this report is conservative in that it does not include unsuccessful attempts, statutory rape, alcohol or drug facilitated rape, male rape or child rape. Regardless of which report we look at, until the final reports come out, we won't know if rape has increased or decreased in Utah and even then it is an educated guess. Accurate statistics are available if Utah would carry out its own victimization survey. One thing is clear, until there is no rape in Utah, whether the numbers of occurrence are high or low, there are too many rapes.

Wendy Locante was the UCASA Research Coordinator and was recently accepted into the teaching program at Westminster College.

Lee, Susan Hagood (1991). *One Woman's Journey through Wife Battering*. In A. Milhaven (Ed.) *Sermons Seldom Heard Women Proclaim Their Lives*. (pp.11-22) New York: Crossroad Publishing Company

faith initiative (p.8)

Campbell, Wasco, Ahrens, Sefl, Barnes. Preventing the "Second Rape" Rape Survivors' Experiences With Community Service Providers. *Journal of Interpersonal Violence*, 16(12), 1239-1259.

hippa (p.19)

Department of Human Services Office of Civil Rights website: <http://www.hhs.gov/ocr/hipaa/bkgrnd.html>. • Glossary of HIPAA terms and definitions: http://snip.wedi.org/public/articles/HIPAA_GLOSSARY.PDF. • U.S. Department of Health and Human Services. Health Resources and Services Administration HIPAA website: <http://www.hrsa.gov/website.htm#overview>. • Website of Alan S. Goldberg, JD American Health Lawyers Association HIPAA Guru: <http://www.hipaalawyer.com>

UCASA index (p.23)

1. Randall, M. and Haskall, L. (1995). *Sexual violence in women's lives. Violence Against Women*, 1(1), 6-31. 2. honeymoons.about.com/cs/eurogen1/a/weddingstats.htm 3. deseretnews.com/dn/view/0,1249,595089479,00.html 4. Yegidis, B.L. (1988). *Wife abuse and marital rape among women who seek help. Affilia*, 3(1), 459-467. 5. deseretnews.com/dn/view/0,1249,595089479,00.html 6. *Uniform Crime Reports*, 1992. 7. *Guns and Domestic Violence: A Deadly Combination. HELP Network*, 2003. 8-9. honeymoons.about.com/cs/eurogen1/a/weddingstats.htm

1. As a percentage of all rapes, rape by intimate partners account for: 1/4
2. Every year, the average number of wedding performed in the U.S. annually: 2.4 million
3. In 2002, the number of weddings performed in Utah: 24,980
4. The percentage of women seeking relationship maintenance, counseling, or assistance who have reported at least one forced sexual assault by a partner: 20-30%
5. The most popular month to get married in Utah: August
6. In 1992, the least number of women killed by intimates: 1,414
7. Number of women raped and/or physically assaulted by an intimate partner in thier lifetime: 25 million
8. The average amount spent on an American wedding: \$22,000
9. Total spent on weddings annually in the U.S.: \$72 billion
10. In 1990, Federal, state and local governmental spending for criminal justice activities related to sexual assault: \$74 billion
11. The percentage of women who are being physically assaulted by their husbands who report sexual assault: 33-46%
12. The national median age for first time brides: 24.5 years
13. The national median age for first time grooms: 26.5 years
14. The percentage of women who said they were raped and/or physically assaulted by a current or former spouse, cohabitating partner, or date in their lifetime: 25%
15. The percentage of individuals who experienced domestic violence in Utah in 2002 and called the crime a minor offense: 23%
16. Number of men who propose on one knee: one in five
17. The percentage of women who continue to wear the same fragrance they wore on thier wedding day: 67%
18. The percentage of victims of intimate partner violence who were injured but not treated: 60%
19. The percentage of women who were assaulted by their partners when they wanted to leave: 50%
20. Most popular month to get divorced in Utah: March
21. In 2000, the number of couples who filed for divorce: 12,574
22. In 2000, the number of divorces granted: 10,138
23. Annual number of victims of intimate partner rape, physical assault and stalking who obtain protective orders against their attackers: 1,131,999
24. Number of these protective orders that are violated: 646,809 (60%)
25. The percentage of unhappily married couples that bounce back within 5 years: 86%
26. In Utah, a requirement of marriage includes: being sober at the time
27. In Utah, if you file for a divorce: you will be required to attend a two hour class to understand the negative impact of divorce on children before a divorce is granted

10. Bureau of Justice Statistics, *Criminal Victimization in the United States, 1990*. U.S. Department of Justice, Feb. 1992. **11.** Tjaden, Patricia and Thoennes, Nancy, November 1998. Prevalence, Incident, and Consequences of Violence Against Women: Findings from the National Violence Against Women Survey. Washington, D.C.: National Institute of Justice Programs, U.S. Department of Justice. **12-13.** honeymoons.about.com/cs/eurogen1/a/weddingstats.htm **14.** American Medical Association, 1997. Facts About Sexual Assault. Chicago, Illinois: American Medical Association. **15.** Russell, Diana, 1990. Rape in Marriage. Bloomington, Indiana: Indiana

University Press. **16.** starbulletin.com/2004/06/03/special/story5 **17.** honeymoons.about.com/cs/eurogen1/a/weddingstats.htm **18.** Tjaden and Thoennes, November 1998. **19.** Rennison, C. & Welchans, S., 2000. Intimate Partner Violence: Special Report. Bureau of Justice Statistics, United States Department of Justice. **20.** deseretnews.com/dn/view/0,1249,595089479,00.html **21-22.** utahmarriage.org **23-24.** Tjaden, P. Thoennes N., Extent, Nature and Consequences of Intimate Parter Violence, United States Department of Justice (2000). **25-27.** utahmarriage.org

UCASA Member Programs

Canyon Creek Women's Crisis Center

P.O. Box 2081
Cedar City, Utah 84721
tel. 435.867.9411

Community Abuse Prevention Services Agency (CAPSA)

P.O. Box 3617
Logan, Utah 84323
tel. 435.752.7023
www.capsa.org

Domestic Violence and Sexual Assault Victim Advocacy (DVSAVA)

305 N. Main, Suite 239
Tooele, Utah 84074
tel. 435.843.3429

Draper City Police Department Crime Victim Advocate Program

1020 E. Pioneer Rd.
Draper, Utah 84020-4700
tel. 801.576.6355

Office of the Attorney General Victim/Witness Program

160 East 300 South, 5th Floor
P.O. Box 140857
Salt Lake City, Utah 8114-0857
tel. 801.366.0223

Rape Recovery Center

2035 South 1300 East
Salt Lake City, Utah 84105
tel. 801.467.7273
www.raperecoverycenter.org

Seekhaven

P.O. Box 729
Moab, Utah 84532
tel. 435.259.2229

Sego Lily Center for the Abused Deaf

P.O. Box 71279
Salt Lake City, Utah
www.slcdad.org

Summit County Victim Assistance Program

6300 N. Silver Creek Drive, #8
Park City, Utah 84098
tel. 435.615.3850

Utah County Attorney Victim/Witness Program

100 E. Center, Suite 2100
Provo, Utah 84606
tel. 801.851.8015

Vernal Victim Advocacy

80 E. Center Street
Vernal, Utah 84047
tel. 435.789.4250
www.angelfire.com/ut/victimadvocate/

VVMC - IHC

1303 N. Main
Cedar City, Utah 84720
tel. 435.868.5458

Wasatch County Victim/Witness Services

55 South 500 East
Heber, Utah 84032
tel. 435.657.3300

Your Community In Unity (YCU)

P.O. Box 756
Brigham City, Utah 84302
tel. 435.723.5600



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