



**SANTA BARBARA RAPE CRISIS CENTER
CENTRO CONTRA LA VIOLACION SEXUAL**

VOLUNTEER NEWSLETTER

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SEXUAL VIOLENCE AND HOMELESSNESS, Pennsylvania Coalition Against Rape

Homelessness and sexual violence are inextricably linked. Homelessness places women, men, children, and teens at risk of sexual violence. For many victims, sexual violence can lead to homelessness or substandard housing. Many victims have to make impossible decisions: stay where they are and endure sexual abuse or run away, live on the streets, and face further victimization. Individuals cannot begin to heal from sexual violence if their basic needs, such as housing, are unmet. Statistics show that:

- Ninety-two percent of homeless women have experienced severe physical and/or sexual violence in their lifetime (The National Center on Family Homelessness, 2005).
- Sixty-five percent of chronically homeless women report childhood sexual abuse (Bassuk et al., 2001).
- Between 21 and 42 percent of homeless youth report being sexually abused prior to leaving home and up to 38% identify sexual abuse as a reason for leaving home (Administration for Children and Families, 2005).
- In 2002, 32.3 percent of homeless women, 27.1 percent of homeless men, and 38.1 percent of homeless transgendered persons were sexually or physically assaulted while on the streets (Kushel, 2003).
- Twenty percent of homeless adolescents sell sexual favors for food or shelter (Whitbeck, Hoyt, & Johnson, 2002).

Individuals who are both homeless and victims of sexual violence face significant barriers when trying to access services. Many homeless victims of rape go without the critical services they need due to incapacities as a result of mental illness, addiction, or trauma; lack of information about services; lack of health insurance; lack of reliable and affordable transportation; lack of safety to pursue services; double social stigma attached to sexual violence and homelessness; competing demands on time and resources; fear of deportation or punishment; language barriers; and a lack of culturally sensitive services. Many victims find themselves in a social services scavenger hunt when trying to meet the requirements and demands of many systems simultaneously. The courts may mandate drug and alcohol treatment. Child protective services may require the victim to find safe housing for his or her children. The welfare system may place more stringent work requirements and limitations on the victim without providing adequate childcare dollars. Drug and alcohol treatment may require the victim to attend intensive therapy three times a week for the better part of the day. This leaves many victims without the time and resources they need to heal from sexual violence.

What can rape crisis centers do to meet the needs of the homeless?

- Collaborate with local homeless providers, public assistance personnel, faith communities, veteran service providers, substance abuse providers, and other community allies; apply for grants or other funding; jointly educate the community about your issues and their interconnectedness; advocate for public policy changes; and advocate on behalf of homeless victims across systems.
- Engage in cross-trainings with local homeless providers. Educate them about sexual violence, your services and approach, and how sexual violence and homelessness are linked.
- Create media campaigns that reach individuals across literacy levels.

- Canvass streets with flyers/brochures, post flyers/brochures in churches, community centers, food pantries, homeless shelters, public assistance offices, emergency departments, drug and alcohol treatment centers, counseling/mental health centers, etc.
- Provide information about sexual assault services to residents and staff of homeless shelters, participants of food stamps and other public assistance programs and recipients of food pantry services.
- Provide services in homeless shelters or other areas accessible to individuals who are both homeless and victims of sexual violence.
- Advocate for the housing and other basic needs of victims you serve. Ask what their needs are and assist them in accessing resources.

SEXUAL HEALTH ROUNDUP – PLANNED PARENTHOOD FEDERATION OF AMERICA

- ***Cervical Cancer in the News:*** On the heels of the approval of the first vaccine to protect against cervical cancer, the U.S. Food and Drug Administration (FDA) has also approved a new combination of drugs to treat late-stage cervical cancer. One drug, Hycamtin, was originally approved for small-cell lung cancer and ovarian cancer, but can now be used conjunction with another drug to treat late-stage cervical cancer that is not likely to respond to traditional methods, such as surgery or radiation.
- ***FGM and Childbirth:*** Female genital mutilation (FGM), the practice of removing part or all of the female external sex organs, and/or stitching closed the vulva and opening of the vagina, has been linked to a marked increase in childbirth complications, including infant death, according to a study published in *The Lancet*. World Health Organization researchers examined more than 28,000 birth records from Burkina Faso, Ghana, Kenya, Nigeria, Senegal, and Sudan. They found that women who had undergone FGM were 31 percent more like to have a c-section, 66 more likely to have infants that require resuscitation, and 55 percent more likely to experience infant death, compared to women who had not experienced genital cutting. Women who had undergone FGM were also more likely to bleed heavily during delivery and to require surgery and/or longer hospital stays.
- ***Teen Sex in the U.S.:*** A recent study published in the *Archives of Pediatrics and Adolescent Medicine*, found that 41 percent of girls interviewed said they had experienced unwanted sex. Another 10 percent said a partner forced them to have sex, and five percent said they had sex after being offered money or gifts. The study included 279 girls age 14 to 17 from Indianapolis, IN. According to researchers, girls who engaged in unwanted sex were less likely to use condoms and had a higher rate of pregnancy.
- ***HIV/AIDS and Youth Under 25:*** June marked the 25th year of the HIV/AIDS crisis in the United States. Today, an estimated 40,000 Americans become infected with HIV/AIDS each year — and young people under 25, women, and African-Americans are among the hardest hit.

ANNOUNCEMENTS

MONTHLY ADVOCATE MEETING – MONDAY, SEPTEMBER 11TH AT 6 PM

An organizer from PUEBLO will come and speak about the organization and its efforts. We will also focus on increasing our team building skills. Look forward to seeing you all!

EXTRA! EXTRA! NEW SPANISH TRAINING COORDINATOR!

Hello my name is Anaïs Chavestie and I am the new Spanish Training Coordinator. I was born in Guadalajara, México and did my studies in Art, Art Therapy, and have a Single Subject teaching credential in Art. You are welcome to stop by anytime and visit so we can get to know more about each other.

POSITION AVAILABLE AT SBRCC: ENGLISH TRAINING COORDINATOR

English Training Coordinator (Full-time position): Provide direct services and case management to clients, prepare and facilitate three 60-hour Crisis Intervention Trainings per year in English according to certification requirements, recruit and screen training applicants, and prepare and facilitate Human Relations Training and medical in-service trainings. **Bilingual English/Spanish required.** *If you or anyone you know may be interested in this position, please submit a resume, cover letter and three references to Alana at alana@sbrcc.net*

FORUM ON YOUTH SUICIDE PREVENTION

In an ongoing outreach effort to build awareness, the Glendon Association will present its annual Suicide Prevention Forum with a special focus on youth suicide. The FREE Forum will be held on **Wednesday, September 27th, 2006 at 6:30 pm and will take place at San Marcos High School Auditorium, 4750 Hollister Avenue.** It will be moderated by Paula Lopez, Anchor, KEYT TV 3. The Forum will feature John Kevin Hines, a young man who survived a suicide attempt by jumping from the Golden Gate Bridge at the age of 19, and will screen the documentary "Faces of Suicide: The Making of the Central Coast Suicide Survivors Quilt." Attendance at the forum would count towards your required in-service training hours.

WE'VE MOVED! NOW IT'S TIME TO CELEBRATE!

Please join us for our Community Celebration of our new offices on **Thursday, September 28th from 4pm – 7pm** at our new location: 433 East Cañon Perdido Street. The event will feature comments by Assembly Member Pedro Nava and other local leaders, performances by the Middle Eastern Ensemble, appetizers, wine, and other refreshments. The event celebrates the new location and commemorates SBRCC's 32 years supporting sexual assault survivors and their loved ones, and working toward a violence-free community. We hope you can join us!

JOIN SBRCC'S TEAM FOR THE 15TH ANNUAL HEART & SOLE AIDS WALK/RUN '06! SATURDAY, OCTOBER 7, 2006 AT LEADBETTER BEACH, SANTA BARBARA

Be a part of SBRCC's team of volunteers and staff at the Annual Heart and Sole AIDS Walk on Saturday, October 7, 2006! The walk is a benefit for Pacific Pride Foundation's (PPF) HIV/AIDS programs and services. SBRCC will walk to show our support for PPF and the members of our community affected by HIV/AIDS. Together, we have a goal to raise \$500 for PPF's crucial community services. The Walk route is 10-kilometers (6.2 miles) and leads walkers along the beach on Cabrillo Boulevard. The Walk ends with a beachside celebration with complimentary snacks, live music, free massages, and an awards ceremony. For more information about the Walk, see the event website at www.aidswalksb.com. To join the SBRCC team, contact me at 963-6832 ext. 29 or alana@sbrcc.net. Thanks!



Happy Birthday to:



- Juan M. on September 1st
- Mojdeh K. on September 9th
- Aurora S. on September 9th
- Raquel L. on September 12th
- Debra G. on September 22nd
- Charlene A. on September 27th
- Vicki A. on September 29th