

Therapeutic Issues for Survivors of Alcohol- and Drug-facilitated Sexual Assault

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For the most part, survivors of alcohol- and drug-facilitated sexual assault deal with the same issues as other sexual assault survivors. Still, counselors need to be attentive to several reactions that are exaggerated or amplified in this particular type of situation.

Loss of Control

Recovering a sense of control is often the driving issue in the emotional resolution of the effects of rape. For people who were assaulted with the help of alcohol or drugs, that loss of control can be particularly acute and the resolution especially elusive. They were not able to defend themselves, even if they'd always imagined that they could fend off a rapist. They may have behaved in uncharacteristic ways due to the drugs or alcohol, and feel guilty or embarrassed. The survivor may question whether they consented, or may be confused about whether what happened to them meets the definition of sexual assault. It is important that a counselor in this situation be clear about the dynamics of consent, and prepared for a long and complex journey back to a feeling of control.

Loss of Memory

Hazy memory and uncertainty inhibits resolution of trauma. Unlike classic PTSD, where intrusive memories of the assault interfere with daily functioning, the survivor of drug- or alcohol-facilitated sexual assault often has little or no memory of the actual event. If there were no witnesses, they may be left with only an odd sense that "something happened." Without the facts, it is left to the survivor's imagination to fill in the blanks, which can be traumatic in its own right. Often, the survivor wants to recover memories that may never be available, even with hypnosis or EMDR. If the assailant is unknown, the survivor may find it especially difficult to judge when it is safe to relax and trust others. Not having a clear memory of the assault can be a frustrating, confusing, and anxiety-provoking experience.

The loss of memory also frequently causes a delay in reporting the assault. These delays can be a result, in part, of the continued effects of the drugs used, an effect that sometimes last for days. Since the tests for drugs such as Rohypnol and GHB are most accurate 12-24 hours after ingesting them, any delay can compromise the legal evidence necessary to successfully try a case of drug-facilitated sexual assault.

Prior Alcohol or Substance Abuse

There are a number of confounding issues when a survivor has a history of substance or alcohol abuse. Many of the drugs known as "date rape drugs" are commonly used recreationally on college campuses. Survivors who have a history of using these or other drugs may be more likely to blame themselves and reluctant to report the suspected assault to the authorities. Publicity about GHB and Rohypnol have led people to suspect dosing, when, in fact, the amount of alcohol or other drugs they willingly ingested caused the blackout or loss of control. When a client has come into counseling because they suspect they were slipped something, the counselor may find it difficult to raise concerns about the survivor's alcohol or drug use. It is imperative that any attempt to raise these issues be done in an open and accepting manner, free of any trace of moralistic judgment or victim-blaming. Counselors are well advised to examine and understand their own beliefs and values about drug and alcohol use before counseling clients with these concerns. Still, it is valid and important work to help clients explore ways in which they may be contributing to their own vulnerability to sexual violations.

Victim-blaming Attitudes

As we know from hard-won experience, often the most painful part of recovery from sexual assault can be the attitudes encountered in those closest to the survivor. What strides we make in shoring up the confidence of the survivor can be easily undermined by an insensitive comment by a relative or friend. Victim-blaming can be especially intense when the survivor was drinking or using recreational drugs prior to being assaulted. Despite our insistence that rape is never acceptable, survivors often hear the message from others that they “deserved” it for their poor judgment in using drugs or drinking underage. A counselor or advocate can assist in educating families and friends about where the responsibility for sexual assault lays -- always with the assailant. At the same time, it is important to allow the client to explore her or his own attitudes about the nature of their own responsibility in the events. Prematurely cutting off this consideration with an unconditional statement of their powerlessness can actually prevent the client from working through their doubts and questions.

The feeling of being blamed can be further intensified when law enforcement is reluctant to prosecute a case. Even if the decision is based on a District Attorney’s necessary assessment of the likelihood of getting a conviction, it can feel like the legal system is blaming the victim for the assault. The psychological resolution of a drug- or alcohol-facilitated sexual assault and the legal resolution of the same case may bear no relationship to one another, and, in fact, may at times be at odds. The legal system is limited and imperfect, and need not be the final judge of right and wrong. We need to be sensitive to its effect on the survivor’s experience, especially in these situations where true justice is rarely found.

Loss of control, memory loss, prior history of substance abuse, and victim-blaming attitudes can complicate the resolution of alcohol- and drug-facilitated sexual assault. By paying attention to these issues, a counselor can respond more effectively to survivors of these traumas.