Rape crisis counseling at the New Orleans Y.W.C.A. is provided on a 24 hour basis by a staff of two professionals and 30 volunteers who counsel persons calling the rape crisis line. The caller's confidentiality is strictly maintained. In approximately 36% of the calls which involve crimes not reported to the police, callers are encouraged but never pressured to report the crime. Volunteer training procedures are briefly described, as are linkages with other agencies. (Author)
Rape Crisis Counseling

Rape crisis counseling at the New Orleans YWCA is provided on a 24-hour basis by a staff of two professionals and approximately 30 volunteers. The volunteers serve 8- to 14-hour shifts in their own homes. Calls to the Rape Crisis Line are routed to the volunteer's home by an answering service.

The telephone counselors deal with 5 to 6 rape victims or relatives of rape victims per week. Approximately 10% of the calls involve victims who are children under 14 years of age. About 15% of the calls concern rapes which occurred more than three months prior to the call. Handling of the crisis cannot usually be completed in one telephone conversation: volunteer counselors often make two or three call-backs, and occasionally as many as 17 or 20 follow-up calls. These calls involve information, follow-up to the police, the district attorney, medical personnel, or other agencies and referrals to appropriate resources. Victim confidentiality is preserved: calls to agencies are made only if the victim specifically requests that such calls be made.

Many of the calls to the crisis line present a need for emotional support: the victim is frightened or traumatized. Since the telephone counselors are not trained mental health workers (except for one volunteer and one of the two paid professionals), when victims request or seem to need extensive one-to-one counseling, they are referred to Pontchartrain Mental Health Center, which has agreed to provide up to six sessions of free counseling to rape victims.

A 20-page training manual has been developed by the Director of the Rape Crisis Service. The manual contains not only general rules about telephone crisis counseling, but also spells out detailed practical information about procedures for contacting other agencies which have services which rape victims might need. These
related agencies offer VD tests, pregnancy tests, legal advice, and so on. Thus the crisis line component of the Rape Crisis Service functions to form an interface between the maze of community agencies whose services include services which the rape victim might need.

New volunteers for the Rape Crisis Line participate in training workshops which total perhaps 16 hours. At these workshops, volunteers are assigned considerable amounts of reading material; this material deals with crisis counseling in general, telephone crisis counseling, and articles dealing specifically with the rape trauma syndrome. These articles are read by volunteers outside the training sessions. I will not read a bibliography to you, but let me indicate that the articles included in Rape: Victims of Crisis, by Burgess and Holmstrom, have been found to be particularly useful.

In addition, volunteers participate in active role-play. A recent training session required the volunteer trainee to respond to each of six cassette-recorded opening pleas by simulated rape victims. The recorded statements consisted of pleas which experience has shown to be common initial statements by actual rape victims. One tape, for example, contained the frantic statement, "I was raped last week."

Another statement contained an angry threat; another, a suicide threat. One "statement" consisted of uninterrupted crying. Another opener was total silence.

Considerable time in the training sessions is expended on dealing with the victims' fear that confidentiality will be broken. Many victims fear the police, their relatives, or a return by the unapprehended rapist, hence do not wish to report the rape. About 36% of the calls involve rapes or other sexual assaults which have not been reported to the criminal justice system. Victims are usually encouraged to report the crime, but factual information as to the many time-consuming cross-examinations necessitated by local medical, police and District Attorney procedures is also given to victims who are considering reporting the crime.

Once volunteers receive initial training, they begin to serve on the Crisis Line for brief periods. In-service training is maintained at 2½ hour monthly.
The short-term emergency services provided by the telephone counseling service are complemented with long-term efforts to change attitudes toward rape victims. Our community education efforts have consisted of speeches to community groups such as high school, college classes and workshops, adult clubs, workshops at State and National Conventions and training of Police in Jefferson Parish. Here we describe the service and seek to dispel much of the misinformation and myth which are associated with the crime of rape. We also have information and articles to supply to local high school and college students who are seeking information for term papers and projects. Brief public service announcements appear on local radio and television stations. The YWCA service also produces a newsletter which is circulated to about 200 people locally who are interested in assisting rape victims.

Questions from Audience

Q: What is the background of the two professionals at the Rape Crisis Service, and how are they paid?

A: I am one of the professionals; I have a Ph.D in psychology. (Note: this person is now Asst. to Director at YWCA; a Ph.D sociologist has replaced her at the Rape Crisis Service.)

We are both paid by federal funds from the Comprehensive Employment and Training Act, a federal program designed to reduce unemployment. When this program ends, New Orleans United Way will pay the salary of the director, who will then be the only salaried professional at the Service.

Q: Who does medical examinations of rape victims in New Orleans?

A: Any MD may gather the physical evidence necessary for criminal justice processing of the crime. Any MD may administer medical aid to the injured rape victim who does not wish to report the crime to the police.
However, private MDs in New Orleans --and elsewhere-- are reluctant to examine rape victims. MDs here, like everywhere, are well-paid but overworked. They don't want to spend a few days in court, testifying, while their work load piles up. So they often tell rape victims that they have to be examined by the Coroner.

The local Coroner is a salaried MD who is an elected official. His office performs autopsies and examines rape victims at public expense. His assistants will present medical evidence in court in connection with a trial of a rapist. In practice, the coroner's office examines almost all New Orleans rape victims who report to the police. Hence, many hospitals in the area think (mistakenly) that only the Coroner's office can legally examine such victims. As part of our ongoing community education efforts, we attempt to keep the rapidly changing emergency room staffs apprised of the true legal situation.
ABSTRACT

Rape Crisis Counseling

Lou E. Hicks, Ph.D.

Paper given at N.A.W.D.A.C. Convention, New Orleans, March, 1976

Rape crisis counseling at the New Orleans Y.W.C.A. is provided on a 24 hour basis by a staff of two professionals and about 30 volunteers who counsel by telephone anyone calling the Rape Crisis Line. The caller's confidentiality is strictly maintained and in the approximately 36% of the calls which involve crimes not reported to the police, callers are encouraged but never pressured to report the crime to police. Volunteer training procedures are briefly described, as are linkages with other agencies. Answers to two audience queries are presented: these questions pertained to funding sources for the professionals on the service staff, and New Orleans medical examination procedures for rape victims.