

# Rape, Sexual Assault and Sexual Harassment in the Military The Quick Facts

Author's Note: The phrase Military Sexual Trauma (MST) is the official term for the psychological trauma that may result from military rape, sexual assault and sexual harassment. SWAN considers the term a euphemism and prefers to call these crimes and violations what they are—rape, sexual assault and sexual harassment. The term "MST" masks the severity of this crisis, and it is important to properly name these egregious acts committed against our men and women in uniform.

There is no end in sight to sexual violence in the U.S. military. Despite over 25 years of Pentagon studies, task force recommendations and congressional hearings, rape, sexual assault and sexual harassment continue to occur at alarming rates year after year. In addition to the devastating effects of sexual violence on survivors and their families, rape, sexual assault and sexual harassment threaten the strength, readiness and morale of the U.S. military, thus effectively undermining U.S. national security.

### THE CRISIS

\* 3,158 military sexual assaults were reported in fiscal year 2010, a decrease of 2% from fiscal year 2009. Only about a quarter of these sexual assaults occurred during deployment to a combat zone.<sup>1</sup>

\* While sexual assaults are notoriously under-reported, this problem is exacerbated in military settings. The Department of Defense (DOD) estimates that only 13.5% of survivors report the assault,<sup>2</sup> and that in 2010 alone, over 19,000 sexual assaults occurred in the military.

\* Approximately 55% of women and 38% of men report that their assailant sexually harassed or stalked them prior to the incident of rape or sexual assault.<sup>3</sup>

\* Prosecution rates for perpetrators of rape and sexual assault are astoundingly low—in 2010, less than 21% of reported cases went to trial.<sup>4</sup>

\* The Department of Defense does not maintain a military sex offender registry that can alert servicemembers, unit commanders, communities and civilian law enforcement to the presence and movement of military sexual predators.

## CONSEQUENCES OF MILITARY RAPE, SEXUAL ASSAULT AND SEXUAL HARASSMENT

\* Rape, sexual assault and sexual harassment are the primary causal factors of Post-Traumatic Stress Disorder (PTSD) for women, whereas combat experience is the strongest predictor of PTSD for men.<sup>5</sup>

\* Rape, sexual assault, sexual harassment and their attendant consequences are often risk factors for homelessness among women veterans. 40% of homeless women veterans have reported experiences of sexual assault in the military.<sup>6</sup>

\* Stress, depression and other mental health issues associated with surviving rape, sexual assault and sexual harassment make it more likely that survivors will experience high rates of substance abuse and will have difficulty finding work after discharge from the military.<sup>7</sup>

#### THE AFTERMATH: PROBLEMS WITH ACCESSING BENEFITS AND TREATMENT

\* Rape, sexual assault and sexual harassment survivors who have used Veterans Health Administration (VHA)<sup>8</sup> services report experiencing a "second victimization" while under care, often reporting increased rates of depression and PTSD.<sup>9</sup>

\* Female rape, sexual assault and sexual harassment survivors who have used VHA services reported a lower quality of care and dissatisfaction with VHA services compared to women using outside care.<sup>10</sup>

\* While women and men both face enormous barriers to receiving VA disability compensation for MST-related PTSD, evidence indicates that men receive higher compensation ratings than women.<sup>11</sup>

#### THE COSTS OF MILITARY RAPE, SEXUAL ASSAULT AND SEXUAL HARASSMENT

\* In 2010, the VHA treated 68,379 patients in connection with MST. 61% of survivors were women.<sup>12</sup> This means that 39% (26,904) of patients being treated for conditions associated with MST in 2010 were men.<sup>13</sup>

\* The Veterans Administration (VA)<sup>14</sup> spends approximately \$10,880 on healthcare costs per military sexual assault survivor. Adjusting for inflation, this means that in 2010 alone, the VA spent almost \$872 million dollars on sexual assault-related healthcare expenditures.<sup>15</sup>

\* The Department of Defense (DOD) estimates that legal expenses that result from military sexual assault cases average \$40,000 per case. With 481 sexual assault-related courts-martial in 2010, DOD legal expenses totaled more than \$19 million dollars.<sup>16</sup>

#### WHAT SWAN DOES: ADVOCATING FOR JUSTICE, HEALING THE WOUNDS

\* SWAN is spearheading a national movement to end rape, sexual assault and sexual harassment in the military using litigation, legislative remedies, media advocacy and public education.

\* Through our National Peer Support Helpline, SWAN provides confidential peer support, legal referrals and counseling referrals to both servicewomen and servicemen, veterans and family members of survivors of rape, sexual assault and sexual harassment in the military.

For more information, please contact Brittany Stalsburg by e-mail at info @servicewomen.org or call (212) 683-0015 x324

<sup>7</sup> Skinner et al. 2000. "The Prevalence of Military Sexual Assault Among Female Veterans' Administration Outpatients." *Journal of Interpersonal Violence* 15 (3):291-310.

<sup>&</sup>lt;sup>1</sup> Department of Defense, SAPRO. 2011. "Fiscal Year 2010 Annual Report on Sexual Assault in the Military." Available:

http://www.sapr.mil/media/pdf/reports/DoD Fiscal Year 2010 Annual Report on Sexual Assault in the Military.pdf; Department of Defense, DMDC. 2011. "2010 Workplace and Gender Relations Survey of Active Duty Members." Available: http://www.sapr.mil/media/pdf/research/DMDC\_2010\_WGRA\_Overview\_Report\_of\_Sexual\_Assault.pdf.

<sup>&</sup>lt;sup>2</sup> Department of Defense. SAPRO, 2011.

<sup>&</sup>lt;sup>3</sup> Department of Defense, DMDC, 2011.

<sup>&</sup>lt;sup>4</sup> Department of Defense, SAPRO. 2011. Note that of 2,554 alleged perpetrators of rape or sexual assault in 2010, only 529 were preferred to courts-martial. In these cases, charges are submitted to a convening authority who ascertains whether or not the case goes to trial. Thus, not all 529 alleged perpetrators were necessarily prosecuted.

<sup>&</sup>lt;sup>5</sup> Street et al. 2008. "Sexual harassment and assault experienced by reservists during military service: Prevalence and health correlates." *Journal of Rehabilitation Research and Development* 45: 409-420; Kang et al. 2005. "The role of sexual assault on the risk of PTSD among Gulf War veterans." *Annals of Epidemiology* 15(3):191-195.

<sup>&</sup>lt;sup>6</sup> Vanessa Williamson and Erin Mulhall. 2009. "Invisible Wounds: Psychological and Neurological Injuries Confront a New Generation of Veterans." New York: Iraq and Afghanistan Veterans of America.

<sup>&</sup>lt;sup>8</sup> The VHA includes VA Medical Centers.

<sup>&</sup>lt;sup>9</sup> Rebecca Campbell and Sheela Raja. 2005. "The Sexual Assault and Secondary Victimization of Female Veterans: Help-Seeking Experiences with Military and Civilian Social Systems." *Psychology of Women Quarterly* 29 (1): 97-106.

<sup>&</sup>lt;sup>10</sup> Kelly et al. 2008. "Effects of Military Trauma Exposure on Women Veterans' Use and Perceptions of Veterans Health Administration Care." Journal of General Internal Medicine 23 (6):741-747.

<sup>&</sup>lt;sup>11</sup> In conjunction with the ACLU, SWAN filed a Freedom of Information Act (FOIA) request to obtain data concerning gender differences in compensation awarded for MST-related PTSD claims. Based on data analyzed for fiscal years 2008-2010, men are more likely than women to receive 70% and 100% ratings for MST-related PTSD claims (p<.001). See also Department of Veterans Affairs, Office of Inspector General. 2010 "Review of Combat Stress in Women Veterans Receiving VA Health Care and Disability Benefits." Washington, D.C.: Office of Inspector General.

<sup>&</sup>lt;sup>12</sup> Department of Veterans Affairs, Office of Inspector General. 2010. "Review of Inappropriate Copayment Billing for Treatment Related to Military Sexual Trauma."

http://www4.va.gov/oig/54/reports/VAOIG-09-01110-81.pdf. <sup>13</sup> Department of Veterans Affairs, Office of Mental Health Services. 2011. "Summary of Military Sexual Trauma-related Outpatient Care Report, FY 2010." Washington, D.C.: Department of Veterans Affairs, Office of Mental Health Services.

<sup>&</sup>lt;sup>14</sup> The VA includes the Veterans Health Administration (VHA) and the Veterans Benefits Administration (VBA).

<sup>&</sup>lt;sup>15</sup> Suris et al. 2004. "Sexual Assault in Women Veterans: An Examination of PTSD Risk, Health Care Utilization, and Cost of Care." *Psychosomatic Medicine* 66: 749-756.

<sup>&</sup>lt;sup>16</sup> Department of Defense, SAPRO. 2010; 2011. Although 529 sexual assault cases were preferred for courts-martial in 2010, only 481 received a case disposition during this year.