



- Sexual Violence
- Bodily Autonomy
- Concepts of Healthy Relationships
- Consent

### SEXUAL VIOLENCE AND SEXUAL ABUSE

 Sexual Violence is the use of sexual actions or words that are unwanted or harmful to another person. MN Statute 245D.02 Subd.32a

## HOW OFTEN DOES SEXUAL VIOLENCE OCCUR TO PEOPLE WITH DISABILITIES?

• The rate of sexual violent victimization against persons with disabilities is this many times higher than the rate for persons without disabilities? It is 2.5 times higher.

### **BODILY AUTONOMY**



The right for a person to govern what happens to their body without external influence or coercion



## **BODILY AUTONOMY**

- Help the participants to understand they have a right of what touch they do and don't receive
- Intimate cares such as bathing, dressing, teeth brushing the participant has the right to refuse those cares and what touches their body
- Teach along the way. Help them feel comfortable knowing its their choice as to what happens to their body.
- Cover them when performing personal cares so they aren't unnecessarily exposed to help them feel more comfortable and dignified.



# PRIVACY AND DIGNITY

- Maintain a participant's dignity while performing personal cares
  - Drape towels over them, cover them up when they are not in the shower but in the bathroom
  - Keep their body covered as much as possible while giving a bed bath, only uncover parts that are being washed at that time
- Respect their privacy
  - Never open the bathroom door while they are undressed.
  - Never transfer them to another room while undressed

### PRIVACY AND DIGNITY

- Always use proper names of body parts
- Make sure the participant knows the proper names of body parts
  - When a person is knowledgeable about the proper names of body parts, they are better
    equipped to report abuse and this reduces the risk of abuse because the perpetrator
    may be more fearful to abuse when they know someone is educated and can
    communicate the abuse accurately
  - Even when someone cannot communicate verbally always use proper terms



- Victim Offender Relationship who is most likely to abuse:
  - 40% Well known/casual acquaintances
  - 30.3% Strangers
  - 14.7% intimate partner
  - 10% other relatives
  - 5% unknown

## HEALTHY RELATIONSHIPS

- Strong relationships with others
- Involvement in activities and hobbies
- Good communication
- Supportive and encouraging

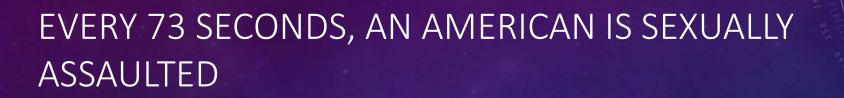
- How do we help participants explore healthy relationships
- How do we support them to connect to their community
- How do we help to equip them to advocate for themselves



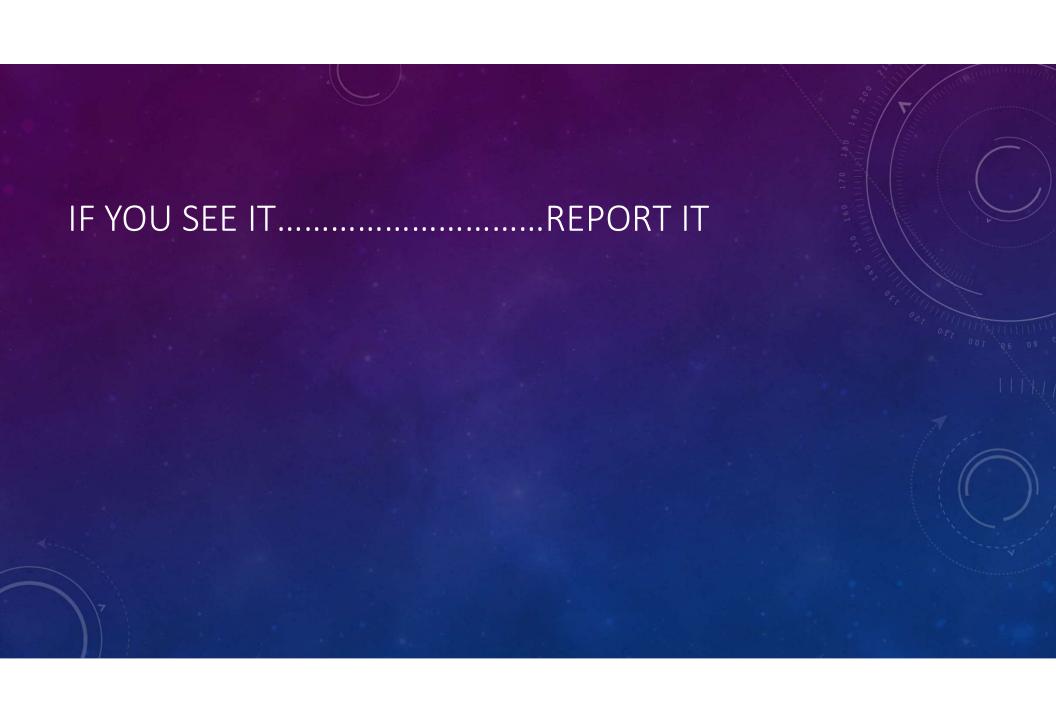
- In order to give consent, one must have the knowledge and awareness of what they are consenting to
- Never assume that someone because of their diagnosis can or can't consent
- We rely on family, guardians and team members to help determine what someone understands and what they are comfortable with if they can't tell us

## CONSENT

- Each time consent must be sought each and every time
- Never Assumed never assume you know their preference when they don't communicate verbally
- No means no whether it is a sexual activity or personal cares, the individual gets to decide what happens to their body
- Can be withdrawn at any time just because they said yes does not mean if they feel uncomfortable at
  any time that they can't change their consent to no



55% OF SEXUAL ASSAULT OCCURS AT OR NEAR THE VICTIM'S HOME



#### REPORTING ABUSE

- When immediate assistance is needed call 911
- MAARC Minnesota Adult Abuse Reporting Center 1-844-880-1574; OR
- Report internally to your designated Program Coordinator. If the Program Coordinator is involved with the abuse, report to the Director of Programs.
- If reported internally, you can expect to receive a follow up report within two working days