



How Can Counseling Help?

Counseling is a non-judgmental space to work through challenges. In counseling, you may learn new coping skills, ways to deal with your feelings, and strategies for managing stress. You can also explore thoughts you may not be able to say to a friend or family member.

Counseling is designed to give you tools to structure your life and interact with your environment in a healthy way that works for you. The amount of time you spend with a counselor depends on your needs and wants.

SARA provides free, voluntary, and confidential trauma-informed counseling to survivors of sexual violence ages 13 and up. We also work with friends and family members of survivors.

**Call today to schedule an appointment:
540-345-7273.**

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SARA Office 540-345-7273

SARA 24-Hr Crisis Hotline 540-981-9352

Carilion Roanoke Memorial Hospital
Emergency Department 540-981-7337

Police/Ambulance 911



www.sararoanoke.org



@SARARoanoke

Important Contacts



Restore Life & Balance



A Guide for
Sexual Violence
Survivors





No two paths of survivors are exactly the same. Response to the trauma of sexual violence is very personal and individual. There is no right or wrong way to respond or to feel.

Survivors may feel extremely intense, constantly changing, and conflicting emotions. Below is a list of *some* common feelings and symptoms survivors may experience.

- Shock, denial, disbelief
- Fear, anger, anxiety
- Change in eating/sleeping patterns
- Flashbacks, feelings of panic
- Nightmares
- Guilt and self-blame
- Depression
- Sadness, grief, loss
- Powerlessness
- Confusion
- Numbness
- Increased sensitivity
- Mistrust or avoidance of others
- Difficulty concentrating
- Isolation

Rape Trauma Syndrome

Rape Trauma Syndrome (RTS) describes common reactions resulting from either a completed or attempted sexual assault. RTS has three major phases:

1. Immediate Impact, in which one's lifestyle is completely disrupted
2. Reorganization, in which survivors try to take control of the disrupted lifestyle.
3. Recovery phase, in which survivors work toward resolution.

Immediate Impact

Physical Reactions

May include changes in sleeping and eating patterns, difficulty concentrating, headaches, and stomach pain.

Emotional Reactions

Survivors of sexual violence commonly experience fear and may be easily startled. Many survivors also experience anxiety where any minor disturbance can elicit crying and feelings of hopelessness. Some survivors describe that intense and uncontrollable emotions make them feel as if they are "going crazy". However, all of these feelings are normal responses to trauma.

Thoughts

It is common to try to avoid thinking about the assault in hopes of "blocking out" the traumatic event. Others become obsessive in thinking of how they have prevented it or somehow escaped. Some begin to question their judgment as to who may be dangerous.

Reorganization

Survivors often make changes in their lifestyle to regain a sense of control. Some may, for example, avoid crowds or become fearful of being alone. Fears of sex and of people similar to the perpetrator are common. Nightmares may occur frequently during this time.

Survivors often sacrifice their freedom for a sense of security and safety. This may include limiting social activities or constantly staying home in order to avoid potential danger. Survivors may find it particularly difficult to trust others. These attempts however may actually lead the survivor to feel even more powerless because their behavior is controlled by memories of the assault.

Integration and Recovery

The final phase involved returning to a level of functioning similar to before the assault. Survivors work toward feeling safe and in control again and are able to trust others. Survivors move away from blaming themselves as they learn to completely place the blame for the assault on the perpetrator. The support of others and the opportunity to freely discuss the assault and your reactions will help in this process.

From the book, Rape: Crisis and Recovery by Ann Burgess and Linda Holstrom (1986).