



RAPE CRISIS  
NETWORK  
IRELAND

# RCNI Rape Crisis Statistics 2019



**Rape Crisis Network Ireland is a specialist policy agency on sexual violence. We are founded, owned and governed by our member Rape Crisis Centres. We have been serving survivors' interests and working towards the prevention of all forms of sexual violence since 1985.**

**RCNI builds and sustains considerable expertise to identify, make the case for, and implement priorities for a whole-of-society and Government response to sexual violence.**

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The Rape Crisis model is a unique model of responding to sexual violence that has been developed, tested and adapted over 40 years across hundreds of women-led centres across the world.

The model is part of an international movement for change where local organisations supporting survivors, link with each other and draw and build learning and best practice.

An important part of the model is that rape crisis support, and service delivery, to a survivor is ethical only if we seek to learn, and understand, in order to transform.

Every survivor using a Rape Crisis Centre (RCC) is met, not only with a set of options that they may benefit from, but knows that in sharing their stories with a RCC they become part of a movement for change.

This Rape Crisis model is a feminist, woman-led, response to sexual violence. We understand all sexual violence to be an abuse of power and we understand gender inequality to be the most important determinant of that abuse, whether the victim (or indeed perpetrator) is male or female. We understand sexual violence happens in a social context rather than being purely about individual perpetration. This is a critical frame which makes Rape Crisis Counselling different to most generic counselling as it addresses victim blaming and the shame that seeks to individualise responsibility for what is a part of a system of oppression.

The model of supporting survivors is trauma informed, empowerment and healing based. It is non-directive and non-judgemental. It is also survivor-led as we believe that the best responses possible are led by survivors themselves who are best placed to know what they need at any given point.

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## Headline Statistics 2019

**1,298** people took up counselling and support (See Page 5)

**12,069** appointments for counselling and support (See Page 5)

**10,706** Helpline contacts (See Page 28)

**173** people accompanied (See Page 30)

**Sexual violence is a gendered crime which is predominantly perpetrated by males against females.**

**Sexual violence is perpetrated against different age groups of survivors in distinctly different ways.**

**Survivors of domestic violence and coercive control (perpetrated by partners/ex-partners) disclose distinct patterns of sexual abuse.**

**Survivors of sexual violence have different experiences and outcomes of reporting sexual violence depending on when the violence was perpetrated and who perpetrated it.**

**Survivors seeking and granted International Protection disclose distinctive patterns of abuse.**

# Common sexual violence patterns

## Age of survivor at time of abuse

	Under 13 years <b>U13</b>	13-17 years <b>13-17</b>	18 years plus <b>18+</b>
Gender of survivor	Female/Male	Female	Female
Type of sexual violence	Sexual assault	Rape	Rape
Additional forms of violence	Emotional/psychological	Emotional/psychological	Equal combinations of emotional/psychological, physical, and both
Duration of sexual violence	Years	Hours	Hours
Location of sexual violence	Survivor's home/ Perpetrator's home	Perpetrator's home/ Outside	Survivor's home/ Perpetrator's home/ Friend's home
Relationship to perpetrator	Family member	Friend/ acquaintance/ neighbour	Friend/ acquaintance/ neighbour
Gender of perpetrator	Male	Male	Male
Median age of perpetrator	31	20	30
Time between sexual violence and accessing RCC support services	31 years	6 years	3 years
First disclosure to	Parents/ other family	Parents/Friends/ Gardaí	Parents/Friends/ Gardaí
How long after sexual violence was disclosure made	10 years plus	Less than 1 year	Less than 1 year
Reported to a police/ formal authority	30%	45%	39%



# Common sexual violence patterns

## Adult survivors of domestic violence and coercive control



Gender of survivor	Female
Type of sexual violence	Rape
Additional forms of violence	84% emotional/psychological/physical
Duration of sexual violence	Years
Location of sexual violence	Home
Relationship to perpetrator	Partner/ex-partner
Gender of perpetrator	Male
Time between sexual violence and accessing RCC support services	7 years
Reported to a police/formal authority	Low levels

### Donegal RCC

*“At the Donegal Sexual Abuse and Rape Crisis Centre we provide a space for survivors of sexual abuse to feel supported, empowered and to heal. Survivors are at the heart and centre of everything we do. We understand that every person coming through the door for counselling and support has their own individual journey towards healing. Our intention is that they don’t feel alone in the journey, and that we can provide them with a safe space to unpick their trauma and move forward with their lives. Providing counselling and support to survivors of sexual violence is rewarding and inspiring. Even though we work with deep trauma and abuse, every day we encounter the strength and resilience of people, and with their ability to heal even stronger than they were before the sexual violence.*

*To anyone who is suffering alone with the trauma of sexual violence, know that we are here for you when you are ready. We will believe you. We will support you as best we can. You are not to blame. You are not alone.”*

**(Marina Porter, Donegal Sexual Abuse and Rape Crisis Centre)**

# Counselling and support

The following information is compiled using data entered by a sample of seven Rape Crisis Centres into the RCNI Data Collection System. We estimate this sample to be 37% of the national RCC survivor numbers and that patterns are similar across Ireland. The data in this section refers to all people who availed of face to face counselling and support in RCCs in 2019.

## Sexual violence disclosed to RCCs

In 2019 1,298 people took up counselling and support with 7 Rape Crisis Centres in Ireland.

- The majority of these were survivors of sexual violence (89% or 1,158 individuals).
- 11% (140 individuals) were people supporting a survivor of sexual violence.

Sexual violence is a gendered crime which is predominantly perpetrated by males against females.

**The two most important factors in understanding sexual violence and the patterns of abuse that exist are:**



**Gender**



**The survivor's stage in life when the abuse was perpetrated against them**

Throughout this report we will see how these two variables determine the pattern of abuse that was perpetrated. There are a few notable exceptions to this rule affecting particular categories of survivors which we will also explore within the report. These include:

- Survivors of domestic violence and coercive control, denoted by this symbol
- Survivors seeking and granted International Protection, and
- Survivors with disabilities.

## Gender

The majority of survivors attending RCCs were female (89%). Males accounted for 11% of survivors. There were also a small number of transgender survivors.



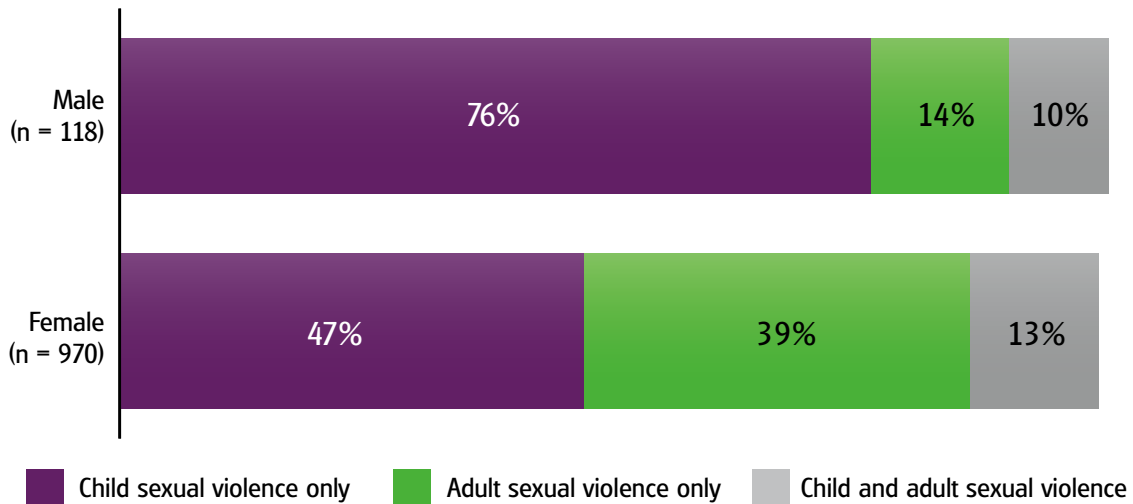
## When the sexual violence took place by gender

**Graph 1: When the sexual violence took place by gender (%) n = 1,088**

U13

13-17

18+



The above graph forms the basis of our understanding of how sexual violence is perpetrated. We see that:

- Vulnerability to sexual violence is greatest for both females and males when they are in childhood (47% and 76% respectively).
- Male vulnerability to sexual violence decreases significantly as he grows into adulthood (76% in childhood to 14% in adulthood).
- Female vulnerability to sexual violence decreases as she grows into adulthood, but not as dramatically as male vulnerability to abuse (47% in childhood to 39% in adulthood).

By looking at when in the life cycle of the victim the sexual violence was perpetrated, we can make predictions about vulnerability to abuse.

We are limited in our analysis because the numbers of male and transgender survivors attending the 7 participating RCCs who use the RCNI National Data Collection System are relatively low, meaning that detailed analysis is limited by the need to protect survivors' privacy and deliver robust statistics. For this reason, we will include all survivors in the analysis and speak to any significant gender patterns where appropriate.

*“Since starting my therapy I see bits of the old me returning, the happy me. This is down to the Centre. My therapist is just brilliant, she notices when I’m not alright. I honestly didn’t think I would make it past the first session, but I have. I’m not saying it’s easy but it is down to my therapist and the centre. I just want to say thank you for all you have done so far. It means a lot.”*

(Survivor, 2019)



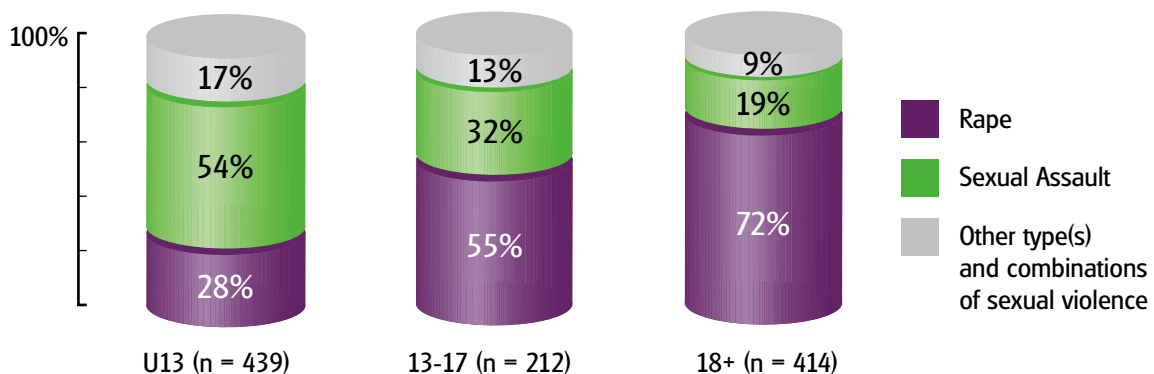
## Type of sexual violence

In our analysis over the past decade, we have seen a common pattern emerging in the details of sexual violence disclosed to RCC counsellors. **Sexual violence is perpetrated against different age groups of survivors in distinctly different ways.** It is important to note here that the majority of survivors attending RCCs for counselling and support are adults at the time they access services and are attending because of historic sexual violence perpetrated against them when they were children.

In 2013 RCNI published a detailed statistics report specifically on children attending RCCs [Hearing child survivors of sexual violence, Towards a national response](#) and followed this up with a policy document in 2014 entitled: [The Older Child and Sexual Violence, Questions and Challenges for a National Response.](#)

**Graph 2: Type of sexual abuse by age began (%) n = 1,065**

U13 13-17 18+



When we examine the age at which sexual violence was perpetrated against survivors attending RCCs we see that the majority of child sexual abuse was perpetrated against children who were under the age of 13 when the abuse began (439 children under the age of 13 compared with 212 children aged between 13 and 17). Some of the key patterns include:

- Children subjected to sexual violence which began when they were under the age of 13 were most likely to be sexually assaulted (54%), whereas
- Children subjected to the sexual violence which began when they were aged 13 to 17 were most likely to be raped (55%).
- Survivors of sexual violence in adulthood were more likely to be raped (72%).

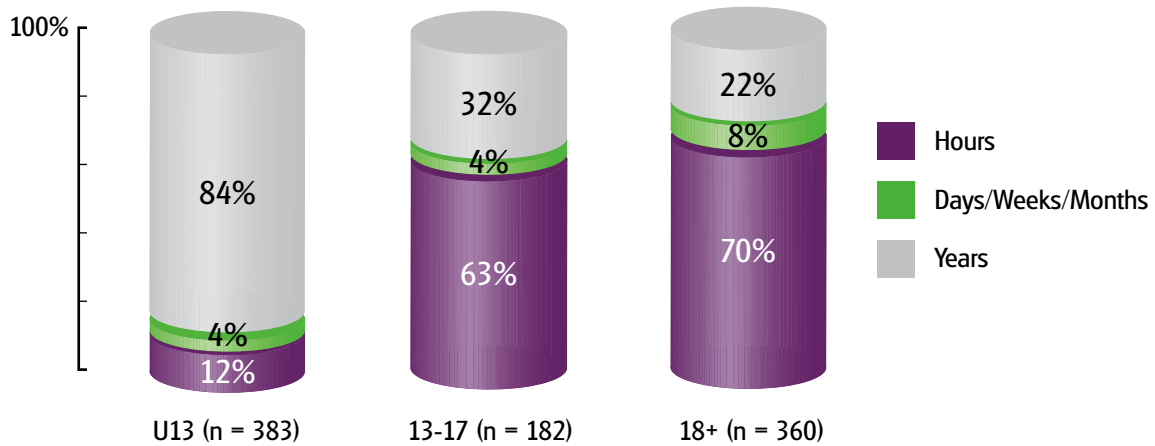
The vast majority of males attending RCCs in 2019 were subjected to sexual violence when they were under the age of 13. Therefore, they and their experiences are most visible in this age cohort. Females on the other hand are in the majority and are therefore driving all of the above trends. It is clear that **females become increasingly vulnerable to more extreme forms of sexual violence as they age.** This is evident from when girls enter their teens where they are more commonly disclosing rape as the dominant form of sexual violence perpetrated against them. We see this increase further when we look at the types of sexual violence perpetrated against adults where rape is even more commonly disclosed.



## Duration of sexual violence

**Graph 3: Duration of sexual violence by when the violence began (%) n = 925**

U13 13-17 18+



The age of the survivor at the time the sexual violence was perpetrated against them is often an indicator of the length of time over which the abuse took place.

- Children who were abused when under the age of 13 most commonly disclose that the sexual violence was perpetrated over a number of years (84%).
- Children between the ages of 13 to 17 when the sexual violence began, tell a different story, which is more similar to that disclosed by survivors of sexual violence in adulthood. Most commonly, they disclosed that the sexual violence was perpetrated over a number of hours (63%), with one third disclosing that the sexual violence was perpetrated over a number of years (32%).
- Survivors of sexual violence in adulthood most commonly disclosed that they were subjected to abuse which was perpetrated over hours (70%), with 22% disclosing abuse that was perpetrated over a number of years.

*“I have better relationships with my family and I am no longer suicidal. I am so thankful for this service that has helped me heal from trauma and loss, so that I can live a relatively happy productive life ... Medication free!!”*

(Survivor, 2019)

It is important to note here that when we further analysed the information given to us by survivors subjected to sexual violence as adults, we found an overwhelming correlation between the length of time the abuse was perpetrated over and the relationship of the perpetrator to the survivor. **The vast majority of adults who were subjected to sexual**

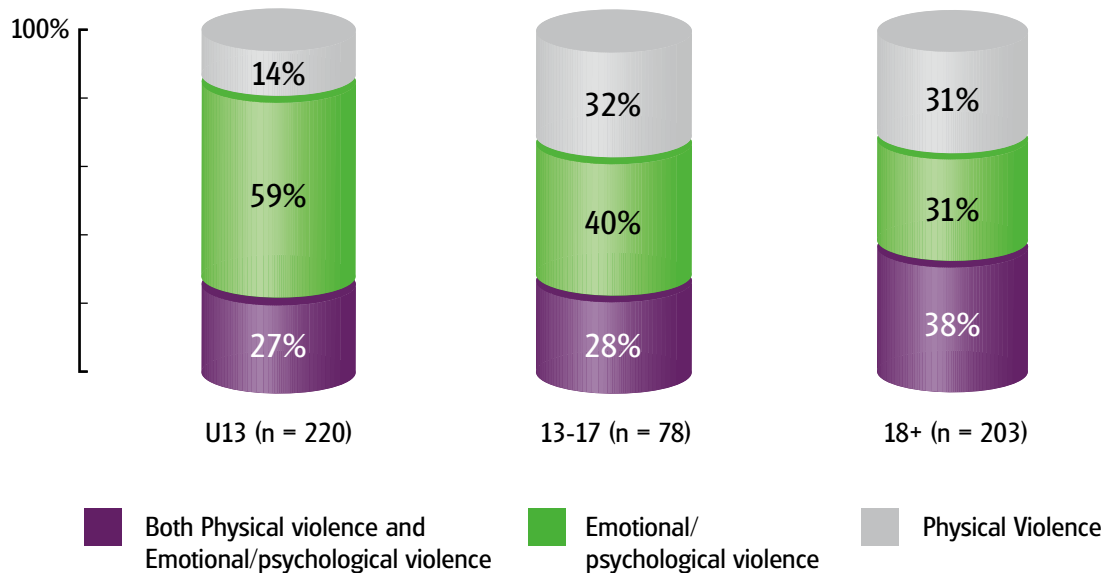
**violence over years disclosed that the abuse had been perpetrated by their partner/ex-partner.**



## Additional forms of violence

**Graph 4: Additional forms of violence by when the abuse began (%) n = 501**

U13 13-17 18+



57% of survivors disclosed that they had been subjected to additional forms of violence occurring at the same time as the sexual violence. This included physical violence (such as imprisonment, attempts to kill, and neglect), and emotional or psychological violence (such as harassment, intimidation, stalking, and death threats).

When we examine additional violence in the context of the age of victims, we see the same clear pattern; as children progress to their teenage years, they become more likely to experience similar patterns of abuse as adults. In this case we see that:

- Those who were under the age of 13 when the sexual violence was perpetrated against them were most likely to be subjected to additional emotional/psychological abuse (59%).
- Survivors who were teenagers (aged 13-17) when the sexual violence began predominantly disclosed that they were subjected to additional emotional/psychological abuse (40%) followed closely by physical abuse (32%).
- Survivors of sexual violence in adulthood disclosed being subjected to equal levels of either emotional/psychological abuse (31%) or physical abuse (31%), with the largest number disclosing that they were subjected to both forms of additional violence alongside the sexual violence (38%).

84% of survivors of domestic violence and coercive control disclosed that they had been subjected to additional violence as well as the sexual violence. This is significantly higher than the general population of survivors (57%).

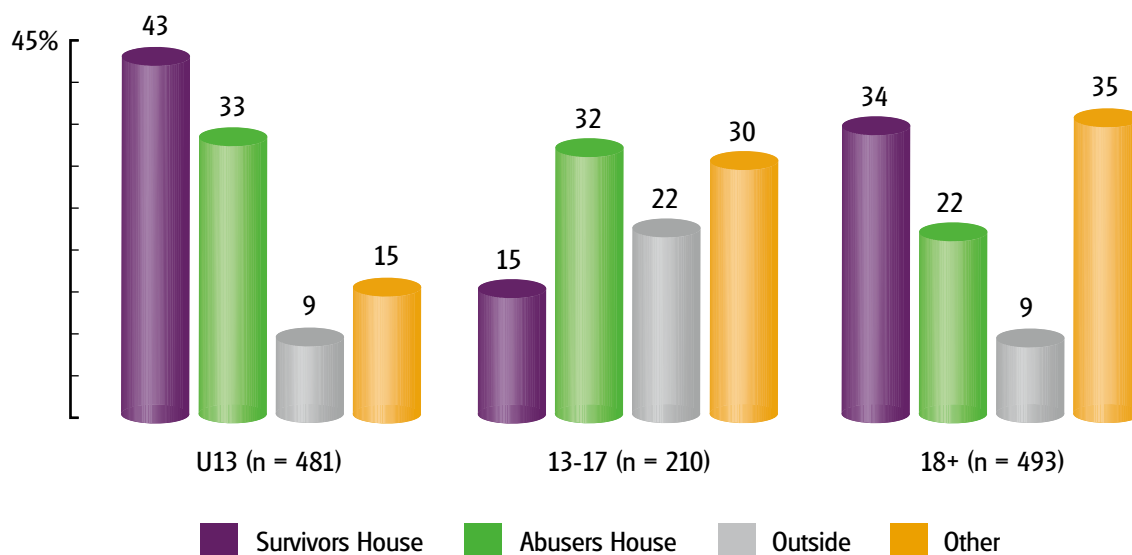




## Location of sexual violence

**Graph 5: \*Location of sexual violence by where the sexual violence took place (%) n = 1,184**

U13 13-17 18+



When we examine the location where the sexual violence was perpetrated, we see some clear evidence of the relationship between the age of the survivor at the time the sexual violence was perpetrated and the location where the sexual violence was perpetrated. In order to present this information in the greatest detail we have analysed every incident of sexual violence that survivors disclosed to RCCs in 2019.

- Survivors who were subjected to sexual violence when under the age of 13 most commonly disclosed that they were subjected to the sexual violence in either their own home (43%) or in the perpetrator's home (33%).
- Survivors who were subjected to sexual violence when aged between 13 to 17 disclosed that the most common location where the abuse took place was in the perpetrator's home (32%), followed closely by 'other locations' (30%), and outside (22%). The most common 'other locations' for this age group was a friend's house. A small number also disclosed that the violence took place in their workplace or in a pub/nightclub.
- Survivors who were subjected to the sexual violence when aged 18 and over disclosed that the most common locations of abuse were either in 'other locations' (35%) or their own homes (34%). The most common 'other locations' for this age group of survivors were a friend's house, a pub/nightclub, or their workplace. A significant number of survivors of sexual violence in adulthood disclosed that they were subjected to the sexual violence in the perpetrator's homes (22%).

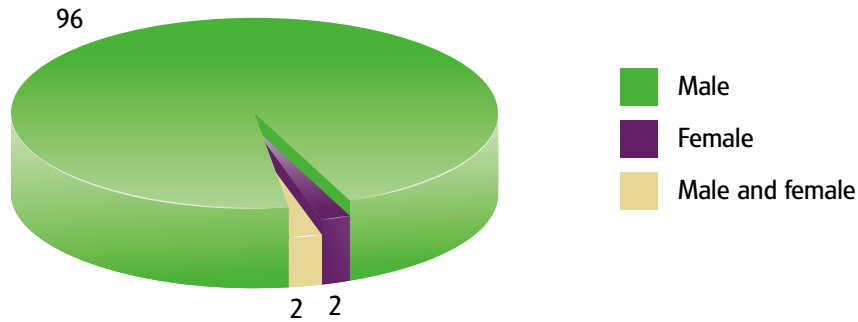
Survivors of domestic violence and coercive control were almost exclusively subjected to the sexual violence within the home – either their own home or their partner/ex-partner's home.



# Perpetrator Information

## Gender of perpetrator

Graph 6: Gender of perpetrator (%) n = 1,101



Sexual violence is a gendered crime. It is for the most part perpetrated by males against females. Since RCNI began producing statistical analysis of survivors attending RCC services in 2004 this pattern holds firm and correlates with the national prevalence study.

- The vast majority of perpetrators of sexual violence were males (96%).

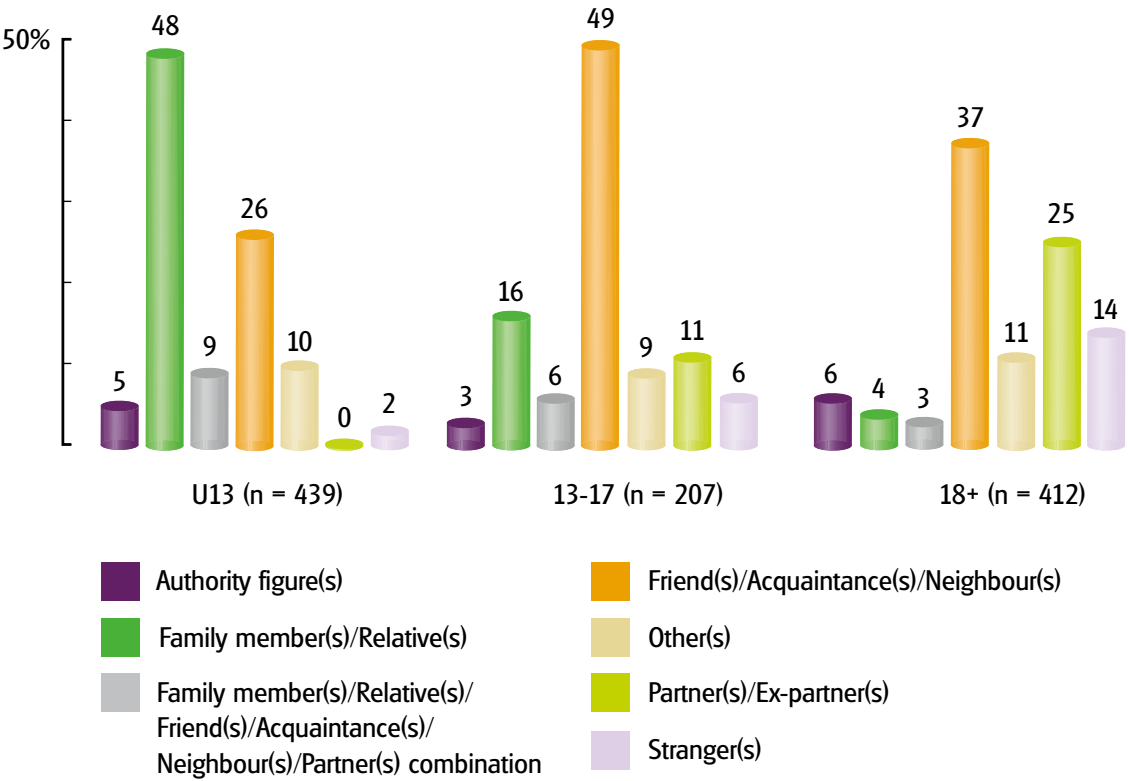
*“I am so grateful to have had the opportunity to process trauma, in a non-judgemental safe place. I had been suffering for many years with PTSD and I feel that I am recovering from my experiences and learning to live with anxiety and I have new skills to cope with stress as a result.”*

(Survivor, 2019)



# Relationship to perpetrator

**Graph 7: Relationship to perpetrator by when the sexual violence began (%) n = 1,058**



The vast majority of sexual violence is perpetrated by somebody known to the survivor and within their circle of trust. Common patterns emerge when we examine the relationship of the survivor to the perpetrator in the context of the age of the survivor at the time of the abuse.

### Children under age 13:

- Children who were under the age of 13 when the sexual violence was perpetrated against them most commonly disclose that the sexual violence was perpetrated by a family member/relative (48%).
- Approximately one quarter of children subjected to sexual violence when under the age of 13 were abused by friend(s)/acquaintance(s)/neighbour(s) (26%).

### Children aged 13-17:

- Similar to adults, children who were between the ages of 13 to 17 when the sexual violence was perpetrated against them most commonly disclosed that it was friend(s)/acquaintance(s)/neighbour(s) who subjected them to the abuse (49%).
- 16% of children subjected to sexual violence when aged 13-17 were abused by a family member/relative.
- We also see 11% of this age group being subjected to sexual violence by partners/ex-partners. This category of perpetrator becomes more common when we talk about survivors who were subjected to sexual violence in adulthood.





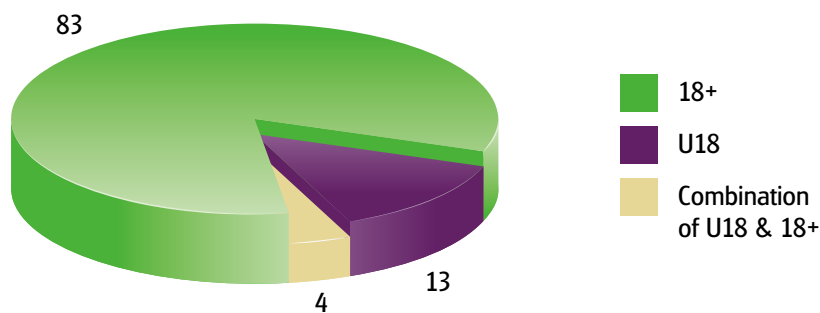
### Adults aged 18 and over:

- Those subjected to sexual violence when aged 18 and over most commonly disclosed that the perpetrator was a friend(s)/acquaintance(s)/neighbour(s) (37%).
- One quarter of those subjected to sexual violence in their adulthood disclosed that the violence was perpetrated by a partner/ex-partner (25%).



## Age of perpetrators

**Graph 8: Age of perpetrators (%) n = 1,005**



- The majority of survivors disclosed that the perpetrators of sexual violence against them were adults (83%).
- 13% of survivors disclosed that the perpetrators of sexual violence against them were children.
- A small number of survivors disclosed that the perpetrators of sexual violence against them were a combination of adults and children (4%).

As previous RCNI research has demonstrated, there is a correlation between the age of the perpetrator and the age of the survivor. Most of the perpetrators who were under 18 at the time they perpetrated the sexual violence targeted children who were approximately the same age or younger than them.



- The median age of those perpetrating sexual violence against children under the age of 13 was age 31.
- The median age of those perpetrating sexual violence against children aged 13-17 was age 20.

*“When I rang Rape Crisis Midwest I felt like I’d been carrying round a sack of rocks and I needed to put them down, and that was a real turning point in my life. They gave me counselling. I’ve got to say, they’re amazing people. I came to realise I had nothing to be ashamed of and that the rape wasn’t my fault, and that the blame for rape always rests with the rapist.”*

**(Survivor, 2019)**



## Pregnancy

6% of female survivors who were raped became pregnant as a result of the rape. This amounts to 42 women and girls. These survivors disclosed a range of different pregnancy outcomes. As the figures are quite low, we will give only a brief synopsis:



- Approximately half went on to parent their baby
- Approximately one quarter had terminations, and
- The remaining quarter disclosed a combination of adoption, fostering, miscarriage, and still births.

It should be noted that these figures may refer to pregnancy in the past and not necessarily in the year 2019. Additionally, these statistics do not speak to what choices a pregnant survivor made as our data merely records outcomes.

*“Empathy, trust, patience of my therapist and the length of time able to continue in therapy. I cannot put into words how much this service has helped me.”*

**(Survivor, 2019)**



## Reaching Out to Survivors of Sexual Violence with a Disability

*“Survivors of sexual violence with disabilities live in every community and can benefit from the full range of services provided by Rape Crisis Centres. We, in the Kerry Rape & Sexual Abuse Centre are aware that under-reporting of sexual violence is considered a particular problem for people with disabilities. A culture of blame and disbelief leaves the survivor without support or validation. Abuse perpetrated by a carer or person in authority is particularly hard to disclose, as a double vulnerability is in play. The survivor often remains dependent upon or in the control of the abuser after the incident and may be reluctant to complain.*

*Factors which place people with disabilities at higher risk of sexual violence include stigma, discrimination, and ignorance about disability, as well as a lack of social support for those who care for them. Placement of people with disabilities in institutions also increases their vulnerability to sexual violence. In these settings and elsewhere, people with communication impairments are hampered in their ability to disclose abusive experiences.*

*Identified acts of abuse tend to be recurrent, and to last for longer periods of time, when the target of the abuse is a person with a disability. We know that although disability is associated with the risk of abuse, it is important to avoid the assumption that disability is a direct cause of vulnerability. We believe that the increased vulnerability may be more associated with society’s response to disability rather than the disability itself.*

*A Report launched in 2011 by Rape Crisis Network Ireland; “Sexual Violence Against People with Disabilities”, found that survivors with a disability disclosed a lower incidence of sexual violence solely as children and a higher incidence of sexual violence solely as adults than people with no disabilities. Addressing barriers to disclosure, under-reporting of sexual violence and all forms of abuse is an important issue and considered to be a particular problem for people with disabilities. The research also showed that many of the survivors had never received any information on where to go for support, nor been asked whether they had experienced sexual violence. The top barriers to disclosure were fear of being blamed; fear of not being believed; or fear of the legal process. About a quarter mentioned fear of losing support as a factor in not disclosing abuse. The research also highlighted the need to ensure that sexual violence services are accessible and skilled in delivering appropriate services and supports to people with disabilities who contact them, and that they are perceived as accessible by people with disabilities.*

*Rape Crisis Centres have been working towards ending violence against children, youth and adults with disabilities and has made progress over the past decade. We have engaged with local disability advocacy/provider groups to increase accessibility to sexual assault survivors with disabilities. We have availed of specific training and awareness programmes to enhance our ability to respond effectively.*

*We now have greater awareness about the service gaps and barriers to accessible sexual violence services for people with a range of disabilities. Sexual violence survivors with disabilities are speaking out and giving voice to their experiences of sexual violence and many are connecting with RCCs. We will continue to avail of disability awareness training that is grounded in an understanding of gender-based violence and the impacts of trauma.”*

(Vera O’Leary, Kerry Rape & Sexual Abuse Centre)

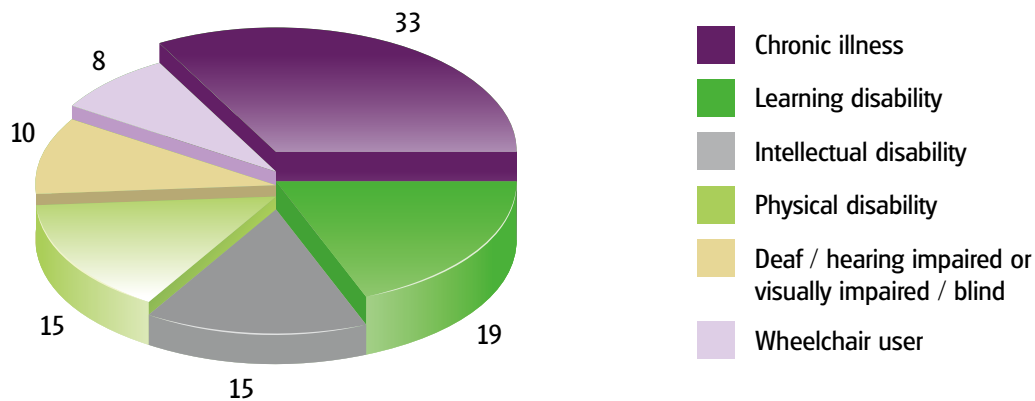




## Marginalised communities

### Disability

Graph 9: Survivors with a disability (%) n = 67



6% of survivors attending RCCs for counselling and support in 2019 had a disability of some kind. This amounts to 67 people. Of these:

- Chronic illness is the most commonly disclosed disability (33%),
- followed by a learning disability (19%), and
- an intellectual disability (15%),
- and a physical disability (15%).
- 10% of survivors with a disability were either hearing impaired/deaf or visually impaired/blind, and
- 8% were wheelchair users.

*“The shame I’ve carried is lifting. I now have a future.”*

(Survivor, 2019)

Because the numbers are quite low, we cannot speak in great detail about this group. What we can say is that:

- The majority of survivors with disabilities attending RCCs were female.
- There was a spread of age groups, with the highest number being in the 20-29 age group.
- The majority were living with parents or living in public rented/supplemented homes.
- Perpetrators of sexual violence against people with a disability were most commonly within their circle of trust.
- The sexual violence was usually perpetrated within the survivor’s or perpetrator’s homes.
- The majority were subjected to one incident of sexual violence, and
- There was a fairly even mix disclosing child sexual violence and adult sexual violence.

For more detailed information on survivors with disabilities attending RCCs see the RCNI report published in 2011 entitled [Sexual Violence Against People with Disabilities: Data collection and barriers to disclosure.](#)

## Supporting survivors seeking and granted International Protection

*“Over the past number of years Rape Crisis North East (RCNE) have experienced an increase in the number of people seeking International Protection (asylum seekers) and those granted International Protection (refugees) attending our Rape Crisis Centre. RCNE is located in Dundalk with outreach services in Drogheda Counties Louth, Meath and Monaghan.*

*Direct Provision was introduced as an emergency measure in 1999. It became a service in April 2000, originally to offer short-term accommodation for asylum seekers who were arriving in Ireland at the time; many as a result of the Balkan wars. There are 39 centres in operation across the country and are located in 17 counties. Twenty years later, the service still exists, and many people are kept in centres for several years at a time, a state of affairs which contravenes their human rights. There are more than 7,000 people living in Direct Provision Centres across Ireland with some centres over capacity.*

*The men, women and children asylum seekers and refugees living in Direct Provision Centres are often forced from their homes by armed conflict or persecution. Research has shown that women and children are more likely to be the victims of war and the recipients of male violence in societies experiencing conflict. The impact of sexual violence can last long after the act itself, affecting both physical and mental health. The long lasting impacts of conflict related sexual violence do not automatically resolve themselves once the victim has escaped from the threat. It is therefore imperative that these survivors can avail of support services so that they can begin the healing process.*

*The European Agency of Fundamental Rights (FRA) (2014) report that those who have experienced sexual violence were significantly more likely to suffer from emotional and psychological issues, such as; panic attacks, depression, and anxiety, and to have a general feeling of vulnerability. In addition, Akinsulure-Smith (2014) acknowledges that the psychological impact of sexual violence experienced in conflict situations is much more difficult to address effectively, because women’s safety and their very lives may have been threatened. In addition to the depression, anxiety and flashbacks experienced by women who had suffered rape in conflict, women also experience various physical injuries, ranging from bruises and fractures, to internal injuries. This report reflects what we see from the asylum seekers and refugees who attend our centre for counselling and support.*

*Our counsellors do extensive groundwork with asylum seekers and refugees to build trust as this is an absolute necessity before beginning any trauma work. These survivors often find it difficult to discuss rape and other forms of sexual assault. At RCNE we work with many women who have escaped from sexual violence in their countries and we find that long term engagement is the most beneficial.*

*However, there are many barriers working with survivors of sexual violence in conflict some of which include: language, travelling, appointment times, childcare. Another common barrier is that survivors of sexual violence living in Direct Provision may suddenly be transferred to another county which means bringing the counselling to an abrupt ending. Fortunately, RCNI member Rape Crisis Centres work very closely with each other and when such a situation as this arises, the RCC in that county accommodates the client as best they can and continues the counselling work where possible.*

*We offer excellent emotional, physical and legal support to these women, but we are very much under resourced which understandably impacts on the level of service we can provide. It is important that RCNE counsellors receive additional supervision or peer support when working with asylum seekers and refugees as they are working with a more challenging type of trauma.”*

**(Grace Mc Ardle, Rape Crisis North East)**



## Survivors seeking and granted International Protection

5% of survivors attending RCCs in 2019 were people seeking International Protection under International Human Rights mechanisms. This amounted to 58 people which includes those seeking International Protection (asylum), those with leave to remain, and people with refugee status.

The numbers are too low to provide a detailed analysis, however what we can say about survivors attending RCCs in this group is that:

- The majority were female, and
- Usually between the ages of 30-39.
- Most were from African countries.
- The majority were subjected to sexual violence in adulthood.
- This group disclosed sexual violence perpetrated by multiple perpetrators more commonly than the general population of survivors.
- They also disclosed higher than average levels of sexual violence which was perpetrated by authority figures and partners/ex-partners.
- The sexual violence was usually accompanied by greater levels of physical violence than the general population of survivors.

For more detailed information on survivors seeking and granted International Protection see the RCNI report: [Asylum seekers and refugees surviving on hold](#).

## Irish Travellers

A small number of Travellers attended RCCs for counselling and support in 2019. The figures are too low to provide any meaningful analysis without risking identification. However, we feel that it is important to maintain the visibility of this marginalised group within our reports.

## LGBTQI+

4% of survivors attending RCCs in 2019 identified as lesbian, gay or bisexual. This amounts to 44 people. Because the figures are quite low, we cannot provide detailed analysis. What we can say is:

- The majority were female, and
- The majority were subjected to sexual violence when under the age of 18.
- They disclosed both rape and sexual assault in equal numbers.
- The sexual violence was mostly perpetrated by someone within their circle of trust.

For more detailed information on survivors who identify as LGBT see the RCNI report [Finding a Safe Place, LGBT Survivors of Sexual Violence and Disclosure in Rape Crisis Centres](#) published in 2016.

*“In this moment I feel very proud of myself. I’ve come a long, long way. The rape doesn’t go away. Going to counselling doesn’t make it un-happen. It happened. But I’ve learnt to live with it. I’ve talked about it and it doesn’t have the hold on me that it had for all those years. And somehow, I’m much freer than I was.”*

(Survivor, 2019)

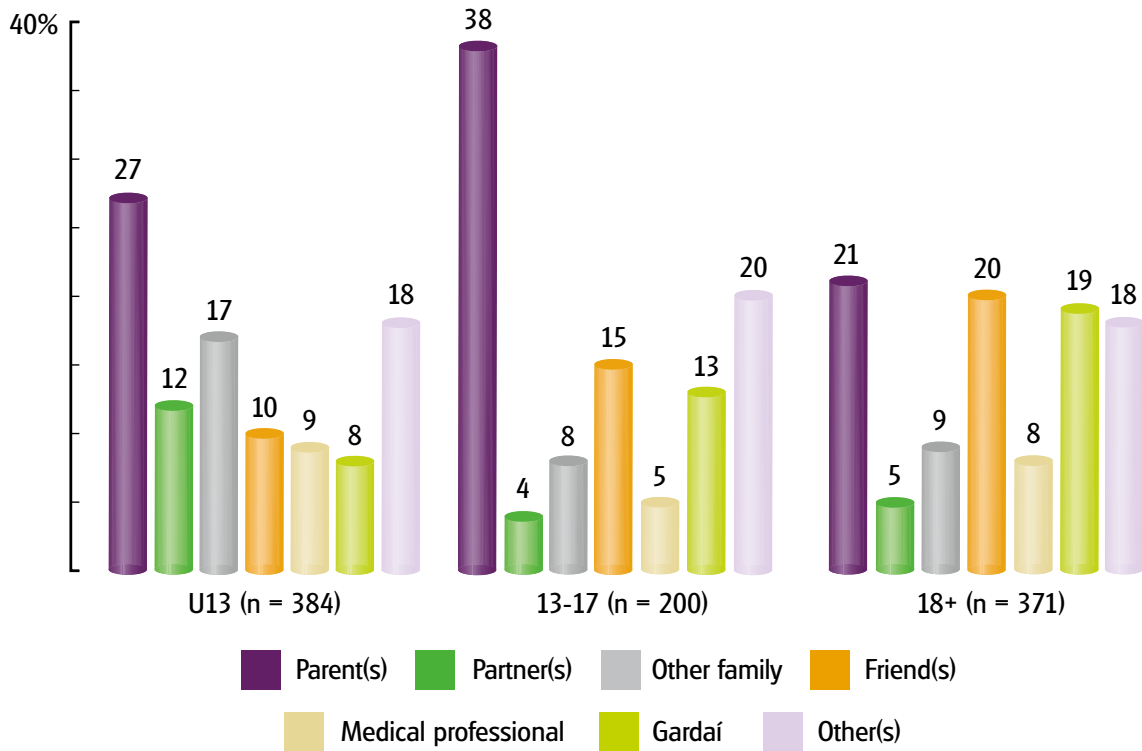


# Disclosing and reporting of sexual violence

## Telling someone for the first time

**Graph 10: Whom survivors first told about the sexual violence by when the abuse began (%) n = 955**

U13 13-17 18+



RCCs were the first point of disclosure for 9% of survivors attending their services in 2019. The majority (91%) had disclosed some or all of the details of the sexual violence perpetrated against them to someone else prior to attending the RCC.

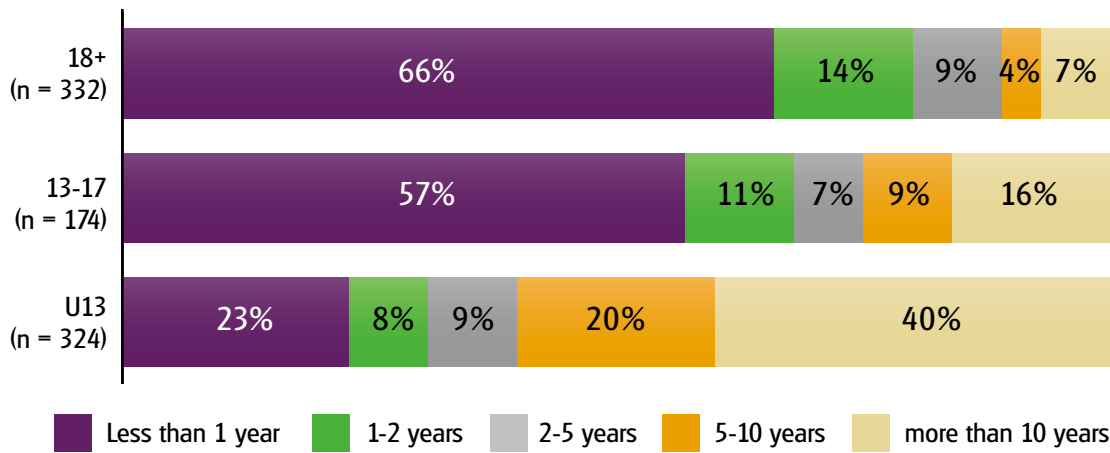
- A parent was the most common point of first disclosure for those who were subjected to sexual violence when under the age of 13 (27%). Other family members were also commonly disclosed to by this cohort (17%).
- People who were subjected to sexual violence when between the ages of 13 to 17 most commonly first disclosed to parents (38%), friends (15%), and the Gardaí (13%).
- Those subjected to sexual violence in adulthood first disclosed to parents (21%), friends (20%), and Gardaí (19%). As can be seen in the above graph the highest category for disclosure to the Gardaí are those subjected to sexual violence as adults.





**Graph 11: How long after sexual violence was first disclosure (%) n = 830**

U13 13-17 18+



We see a clear correlation between what age the survivor was when the sexual violence was perpetrated against them and how long after this abuse they first disclosed to another person what had happened.

- Those who were abused in their childhood when under the age of 13 most commonly did not disclose anything about the sexual violence for 10 years or more (40%).
- Those who were abused in their childhood when aged 13 to 17 most commonly disclosed that the sexual violence had taken place less than a year afterwards (57%).
- Survivors who were in their adulthood when the sexual violence was perpetrated against them usually disclosed to someone less than a year afterwards (66%).

## Referrals

**Graph 12: Survivors referred to RCCs by (%) n = 1,239**



Over half of survivors referred themselves to an RCC (56%).

- The most common other source of referral was from health services (21%), and
- From family and friends (10%).



## Time between sexual violence and the first contact with an RCC



When we examine the median length of time between sexual violence being perpetrated and the survivor accessing RCCs for counselling and support we see stark differences between those subjected to sexual violence at different life stages.

- For those subjected to sexual violence in adulthood the median length of time between the beginning of the abuse and coming to an RCC is 3 years.
- For those subjected to sexual violence when aged 13 to 17 the median length of time between the beginning of the abuse and coming to an RCC is 6 years.
- For those subjected to sexual violence when under the age of 13 the median length of time between the beginning of the abuse and coming to an RCC is 31 years.

Survivors of sexual violence when aged 18 and over who were subjected to the violence by their partners or ex-partners access RCC supports later than other survivors of sexual violence when in adulthood. The median length of time between the beginning of the abuse and the start of RCC counselling and support for survivors of domestic violence is 7 years. This is also reflective of the longer length of time over which the violence is perpetrated by partners/ex-partners with a high proportion disclosing that the sexual violence was perpetrated over years.



### Providing support through Outreaches

*“Mayo Rape Crisis Centre’s high level of Outreach Service activity is very reflective of the nature of being a rural Rape Crisis Centre in a county where access to public transport is an ongoing issue.*

*The north of our county has always been an area which has been under funded and poorly serviced by government. Yet, for us, it has - and continues to be - an area to which we are committed to as a way of guaranteeing parity of services to all communities in Mayo.*

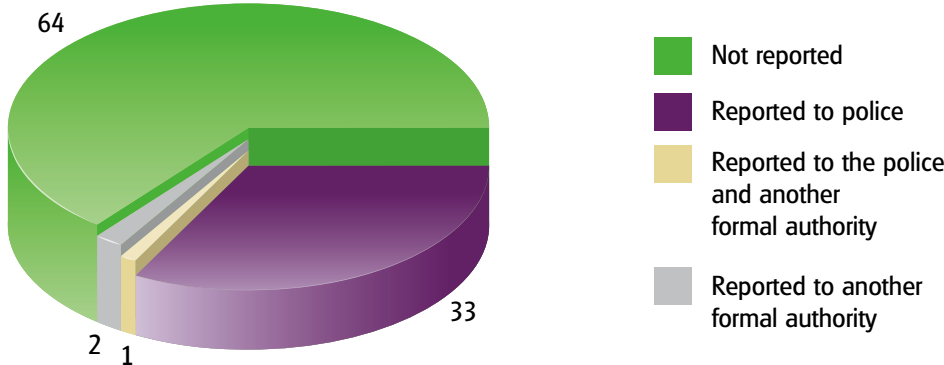
*2019 saw Tusla increase our funding allocation by 10% following a decision by the then Minister for Children and Youth Affairs, Katherine Zappone. As a result we were able to offer an increased outreach service which now is core funded so no longer vulnerable to relying on fundraised monies. This is a hugely positive change for us and the uptake of the service by clients says it all.”*

**(Loretta McDonagh, Mayo Rape Crisis Centre)**

# Reporting to a formal authority

This section of the report dealing with reporting the sexual violence to a formal authority refers to all incidents of sexual violence. This means that it counts every incident that survivors reported to formal authorities. Some survivors reported more than one incident to a formal authority, such as the Gardaí, because they were subjected to multiple different incidents of sexual violence. For a definition of ‘incident’ see the Index of Terms and Methodology sections at the end of this report.

**Graph 13: \*Reporting the sexual violence to a formal authority (%) n = 1,347**



When we examine every incident of sexual violence that survivors disclosed to counsellors in RCCs we see that 36% of incidents were reported to a formal authority by the survivor. The most common formal authority survivors reported to was the Garda Síochána (33%).

*Reporting to a formal authority by the age of survivor when the abuse began (%)	<span style="border: 1px solid purple; border-radius: 50%; padding: 2px;">U13</span> <span style="border: 1px solid purple; border-radius: 50%; padding: 2px;">13-17</span> <span style="border: 1px solid purple; border-radius: 50%; padding: 2px;">18+</span>		
	U13	13-17	18+
Reported to a formal authority	30%	45%	39%
Not reported	70%	55%	61%

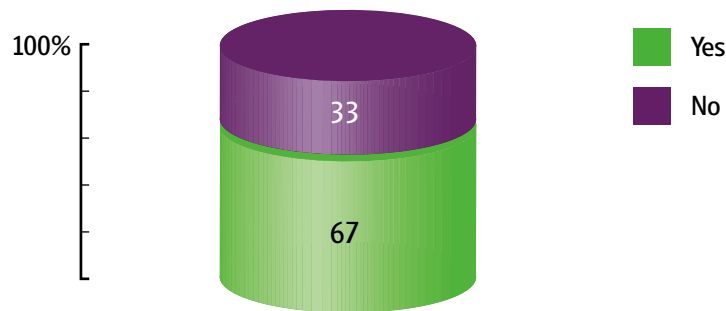
When we examine these incidents in more detail we can see clear differences in the level of reporting of sexual violence perpetrated at different life stages of a survivor. It is important to remember that the majority of child sexual violence reported to these formal authorities is historic abuse and being reported by survivors who are now adults.

- Incidents of sexual violence which were perpetrated against teenage children (ages 13-17) were most commonly reported to a formal authority (45% of incidents were reported).
- 39% of incidents of sexual violence perpetrated against adults were reported to a formal authority.
- Sexual violence perpetrated against children under the age of 13 was the most unlikely to be reported to a formal authority (30%).

Survivors of sexual violence when aged 18 and over who were subjected to the violence by their partners or ex-partners disclosed significantly lower levels of reporting to a formal authority (28%) than the general population of survivors of sexual violence subjected to abuse in adulthood (39%).



**Graph 14: \*Did the Gardaí maintain ongoing contact throughout the case (%) n = 386**



The majority of survivors who reported incidents of sexual violence to An Garda Síochána disclosed that the Gardaí maintained ongoing contact with them throughout the case (67%). This means that the Gardaí contacted the survivor with regular updates on the progress of their case.

*Did the Gardaí maintain ongoing contact by the age of survivor when the abuse began (%)	Age Group		
	U13	13-17	18+
No	39%	34%	29%
Yes	61%	66%	71%

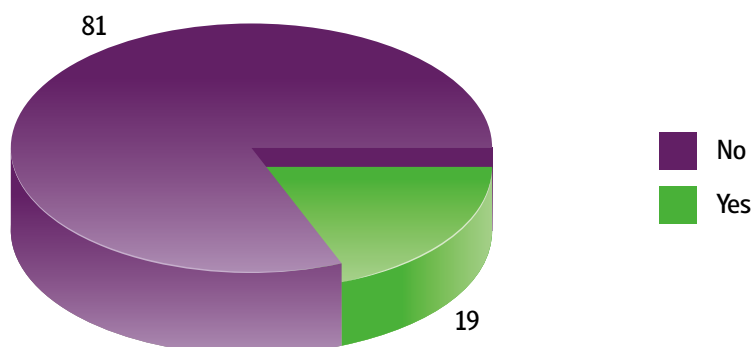
We see significant differences in survivor experiences of reporting the sexual violence to the Gardaí when we look at what age the survivor was when the sexual violence was perpetrated against them. The majority of child sexual violence reported to the Gardaí is historic abuse and being reported by survivors who are now adults.

- In 71% of incidents those subjected to sexual violence as adults disclosed that the Gardaí had maintained ongoing contact with them throughout the case.
- Those who were subjected to sexual violence when aged 13-17 disclosed that in 66% of incidents the Gardaí had maintained ongoing contact with them.
- Survivors who were subjected to the sexual violence when under the age of 13 disclosed the lowest level of Gardaí maintaining ongoing contact with them throughout the case (61%).





**Graph 15: \*Did the survivor have difficulty obtaining case information from the Gardaí (%) n = 355**



81% of survivors who reported to An Garda Síochána disclosed that they had no difficulty obtaining information on their case from the Gardaí.

**\*Did the survivor have difficulty obtaining case information from Gardaí by the age of survivor when the abuse began (%)**

U13 13-17 18+

	U13	13-17	18+
No	78%	83%	82%
Yes	22%	17%	18%

When we examine the experience of survivors subjected to the abuse at different life stages, we see some small differences in difficulty levels in obtaining information on their case from the Gardaí.

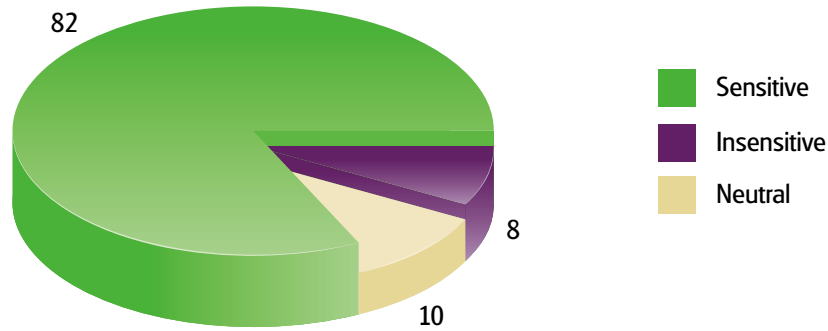
- Survivors who were subjected to sexual violence when under the age of 13 disclosed they had no difficulty obtaining case information 78% of the time.
- Those who were subjected to sexual violence when aged 13-17 disclosed that in 83% of incidents they had no difficulty obtaining case information from the Gardaí.
- In 82% of incidents those subjected to sexual violence as adults disclosed that they had no difficulty obtaining case information from the Gardaí.

*“I am very grateful for the safe space I was given when I was a very, vulnerable victim of sexual abuse. It was a relief to be listened to and to share my story confidentially, however this took years to get all the hurt and pain out.”*

**(Survivor, 2019)**



**Graph 16: \*How did the survivors perceive they were treated by the Gardaí (%) n = 369**



The majority of survivors attending RCCs who reported the sexual violence to the Gardaí felt that they were treated in a sensitive manner by the Guards (82%) and 10% felt they were treated in a neutral manner. This is a significant improvement from the last time these figures were collated in 2015 where 69% said they were treated in a sensitive manner and 22% said they were treated in a neutral manner.

**\*How did survivors perceive they were treated by the Gardaí by the age of survivor when the abuse began (%)**

U13 13-17 18+

	U13	13-17	18+
Insensitive	7%	2%	12%
Neutral	8%	8%	13%
Sensitive	85%	90%	74%

There are significant differences in survivors perception of how they were treated by the Gardaí when we look at what age the survivor was when the sexual violence was perpetrated against them.

- 85% of those who were subjected to sexual violence when under the age of 13 disclosed that they felt the Gardaí treated them in a sensitive manner.
- 90% of those who were subjected to sexual violence when aged 13-17 disclosed that they felt the Gardaí treated them in a sensitive manner.
- Survivors of sexual violence in adulthood disclosed the lowest levels of perceiving a sensitive response by the Gardaí (74%).



## Supporting the Supporter at the Rape Crisis Centre

*“Carlow & South Leinster Rape Crisis Centre have continued over the past number of years to offer support to those supporting people that are affected by Sexual Violence. Our Team offered this service because of people contacting the RCC looking for support, advice or for some callers a caring listening ear. This support is offered through one to one counselling or by joining group support following a therapeutic process. We offer this service to both males and females. Our group has a varied range of ages, genders, and cultures which at times has enabled wonderful learnings and support in particular from the different age groups, viewpoints, and beliefs.*

*For many supporters, the feeling of isolation, helplessness, fear, the unknown territory and emotional turmoil are very much words described when they contact our service. To hear someone from the Centre acknowledge what they are describing as “normal” gives hope to the supporter. Then, to be offered professional support is an even greater relief; as expressed by one of our Supporters, Mike, at a recent group meeting. Mike spoke about the offer of counselling to help him support his wife during this “dark time for us both” was like “someone lifting a heavy load from my body” to have a confidential caring space to talk “as I felt so alone and just did not know how to help her. The group has supported me to support my wife, cemented our marriage, and brought us closer in our relationship. To all involved, I thank you from the bottom of my heart.”*

*Anna, another client, described her experience of the group support as knowing that when times were tough and confusing, there was always a place where she could speak out her true feelings, shed her tears, share her fears, her concerns and feel supported not judged, “a place where there was always light at the end of the tunnel”.*

*Many of those taking part in group sessions echo Mike’s and Anna’s words, while others shared some tips, they have learned along their journey in supporting their loved ones:*

- *Do not be afraid to ask for help, people do care, use this space to explore your own feelings*
- *Keep listening and believe what is being said*
- *Respect the other persons wishes, do not feel you know best*
- *Be there for them, just listen and do not try to give advice*
- *Allow them to feel what they are feeling, please, please don’t tell them not to cry*
- *Just Be Yourself”*

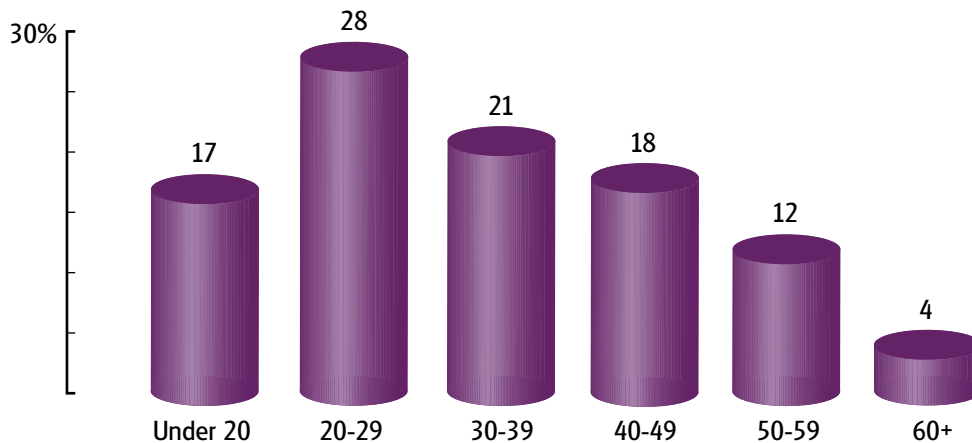
**(Anne Kirwan-Finn, Carlow & South Leinster Rape Crisis Centre)**



## Demographics

### Age of survivor

**Graph 17: Age of survivors accessing RCC services (%) n = 1,147**



- 9% of survivors accessing our RCC services in 2019 were under the age of 18 when they began counselling and support.
- Survivors were most commonly between the ages of 20-29 when they began using services (28%).
- 21% were aged 30-39, and
- 18% were aged 40-49.

*“I was always treated with patience, humanity and compassion which helped me to face my fears and open up honestly. My life has been empowered and transformed positively since my therapy.”*

**(Survivor, 2019)**

When we examine this in more detail we see a correlation between what age the survivor was when the abuse began and how long after the sexual violence they accessed RCC services:



- Those subjected to sexual violence when under the age of 13 most commonly accessed RCC services when they were between the ages of 30-49. This group of survivors have the greatest gap between the sexual violence being perpetrated and seeking support from an RCC.
- Those subjected to sexual violence when aged 13 to 17 most commonly took up counselling and support with RCCs when they were still under the age of 18.
- People subjected to sexual violence in adulthood most commonly began counselling and support in RCCs when aged 20 to 29.

### Country of origin

The majority of survivors accessing RCC services in 2019 were Irish (88%),

- 5% were from African countries
- 3% were from the UK, and
- 4% were from other countries.





## Helpline support

*A helpline can be many things to many people. For Rape Crisis Centres it is most often the starting point for survivors - a chance to connect while remaining anonymous, to dip a toe in the water and maybe get a sense of what the people in the Centre are like. Some will tell their story on that first call and see how it's received before they go any further. Many are much more cautious and give very little of themselves but ask questions about how things are done and where to from here. It's where people who are unsure if they're contacting the right service can sound that out or find out where they need to go for help.*

*For others, it's where they are immobilised by the very act of reaching out, and so they sit in silence, listening to the voice on the other end and wanting/hoping/trying to say anything at all. And for yet others, it's their only support, even before Covid changed our way of living, because they're living in isolation – unable to get to the Centre because they have no means of travel or unable to leave their home because they're ill or too afraid of the world outside. And our helplines are crisis lines, because the caller has just been raped or sexually assaulted, because they're being flooded with flashbacks and uncontrollable emotions or because they're feeling suicidal and thinking it would all be better if they didn't exist anymore.*

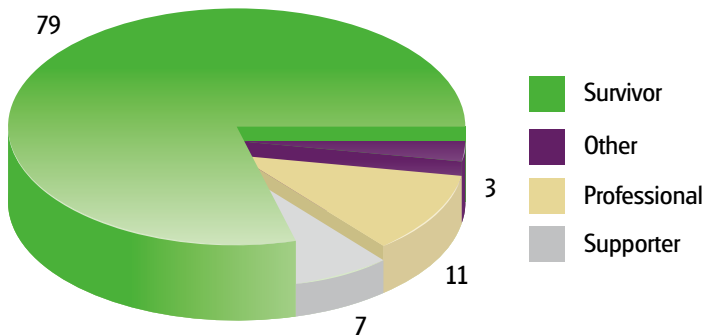
*Anyone answering a helpline in a Rape Crisis Centre has no idea what they will be dealing with in the following minutes. Our helpline is a fundamental resource for all of the above, and for other reasons as well. We take calls from clients who are currently in therapy with us or other services who are experiencing a crisis now and need to talk. Other professionals contact us for advice, information and guidance. Former clients ring to talk through a current, troubling situation or to share their triumphs and achievements because we will truly understand them. Parents, sisters, brothers and friends' phone to tell of someone they love who's in trouble and ask what can they do to help and how do they cope? Survivors ring as they're going through the legal process to ask "how, when, why, who and what-the-hell-is-this-all-about?" questions.*

*Those who are already our clients, those who will be, and those who will never make more than that one call tell us how vital our helpline is to them - "Being able to phone ye to just say how bad I'm feeling has kept me alive". "I won't be troubling you again, I just needed to tell someone else what happened to me – I've never done that before and that's enough for me". "Thank you so much – you don't know what it means to be able to ask you all this, we didn't know where to turn". A call to our helpline can be about making an appointment, or it can be about turmoil and despair, it can be about so many different scenarios between those two extremes and we're here to answer, to listen and to help.*

(Anne Scully, Waterford Rape and Sexual Abuse Centre)

The following information is compiled using data entered by a sample of six Rape Crisis Centres into the RCNI Data Collection System. We estimate this sample to be 24% of the national RCC survivor numbers and that patterns are similar across Ireland. The data in this section refers to all people who availed of RCC Helpline services in 2019.

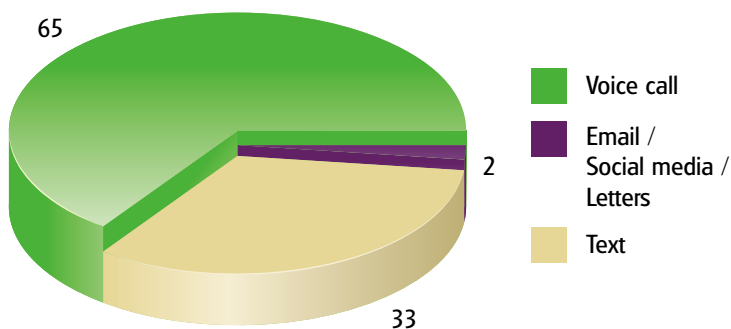
**Graph 18: Who is contacting RCC helplines (%) n = 10,706**



In 2019 10,706 contacts were made to 6 RCC Helplines across Ireland.

The majority of these contacts were made by survivors of sexual violence (79%).

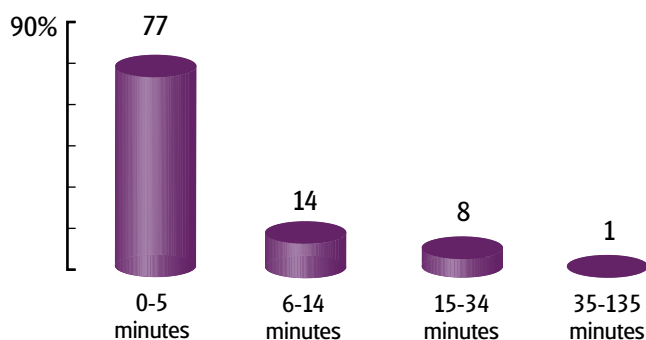
**Graph 19: Method of helpline contact (%) n = 10,706**



These Helpline contacts were made through a number of different mediums.

- Voice calls were the most common form of contact (65%).
- Text messages accounted for one third of contacts to RCC Helplines (33%).
- RCC Helplines were also contacted by email, letters, and through social media (2%).

**Graph 20: Number of voice calls to RCC helplines by call length (%) n = 6,893**



The majority of voice calls to RCC Helplines in 2019 were short calls under 5 minutes each in length (77%).



## *Rape Crisis Accompaniment services*

*A vital part of Rape Crisis work is our accompaniment service to SATU (FME) Garda and Court. Rape Crisis Network Ireland provide regular training to our wonderful volunteers who take on this work. Here in the Midwest, we have accompaniment to Court, Gardai and also the Forensic Medical Examination which is part of the legal process when a report has been made to AGS.*

*The SATU (FME) service here in Midwest is a callout service initiated by An Garda Síochána when a report is made to them. This service is available from 6.30pm each evening Monday – Thursday until 6am and is 24hrs from 6pm Friday until 6am Monday and Bank holidays. Our dedicated team of volunteers are on call and are contacted by the Forensic Examiner when an FME is being arranged. Following an FME the client is contacted within 24 – 48 hours by us and the information given at FME reiterated and other supports needed are arranged (Garda Acc / STI / Crisis counselling etc.).*

*Here in Limerick, we work very closely with the Limerick DPSU (this has been operating for almost 4 years as it was one of the pilot units), so in fairness provision of Garda accompaniment protocols were quickly agreed. It is the client's decision as to whether they will come to the centre or go to the Garda station to make their statement. One of our volunteers will accompany them, if the venue is the Garda station. If the client chooses to use the centre we can usually arrange for a support session after the meeting with AGS here. This is working really well, and we hope to build the same relationship with the newly formed units in Clare & Tipperary.*

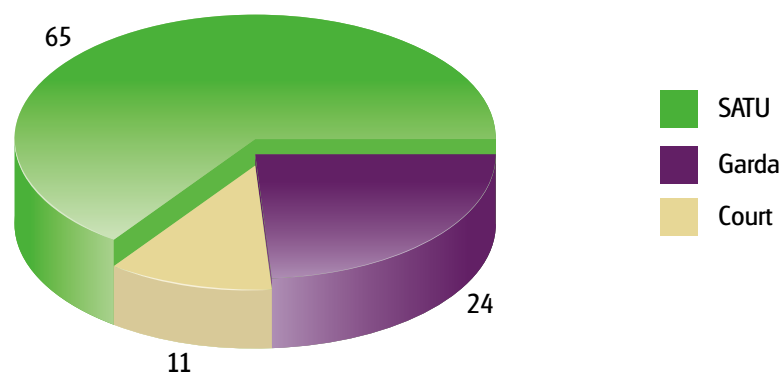
*For Court Accompaniment we also have a team of RCNI trained volunteers who provide accompaniment to courts.*

*Feedback from clients who availed of all our services has been very positive.*

**(Miriam Duffy, Rape Crisis Midwest)**

The following information is compiled using data entered by a sample of 5 Rape Crisis Centres into the RCNI Data Collection System. While RCNI runs the national Court and Garda Accompaniment programme funded by the Department of Justice not all centres record their activity in the RCNI database. We estimate this sample to be 19% of the national RCC numbers and that patterns are similar across Ireland. The data in this section refers to all people who availed of RCC accompaniment services in 2019.

**Graph 21: Accompaniment type (%) n = 173**



In 2019 five RCCs provided accompaniment services to 173 survivors of sexual violence.

- The majority of these accompaniments were to Sexual Assault Treatment Units (SATUs) (65%).
- One quarter of accompaniments were to the Gardaí (24%), and
- 11% of accompaniments were made to court.

*“I have taken back control of my life and gained tools to continue living a good life today. It still is work in progress and I always need to work on myself. Amazing therapists and service was given to be and I will always will be thankful to MRCC.”*

**(Survivor, 2019)**





## **RCNI Database project overview**

RCNI has developed a highly secure online data collection system which allows authorised RCC personnel to log in and record specific information on each individual service user. RCC personnel do not record any direct identification details for service users or any other person. Those inputting data have varying levels of access to their RCCs data set depending on their role in the data collection process. This system is designed to equip RCNI to deliver comparable national data and simultaneously equip RCCs to, at any time, extract data regarding use of their own local service. This data collection system has been specifically designed to collect data in frontline services dedicated to working with victims of sexual violence. RCNI has developed standards on data collection, data use and data protection which all RCNI database users must adhere to. In order to ensure best practice an extensive data cleaning process is carried out before any data is analysed. This involves checking all of the data entered by RCCs for mistakes and omissions, and rectifying these.

## **RCNI Statistics Report compilation**

The information in this report is compiled from the data entered by a sample of Rape Crisis Centres around Ireland. The number of RCCs included in each section of the report is noted at the top of each section as well as an estimate of how this relates to usage of RCC services throughout Ireland. The data represents all people using these RCCs for counselling, support, accompaniment, and helpline services in 2019. It represents only these people and cannot be used to make assumptions about the overall incidence or nature of sexual violence in Ireland.

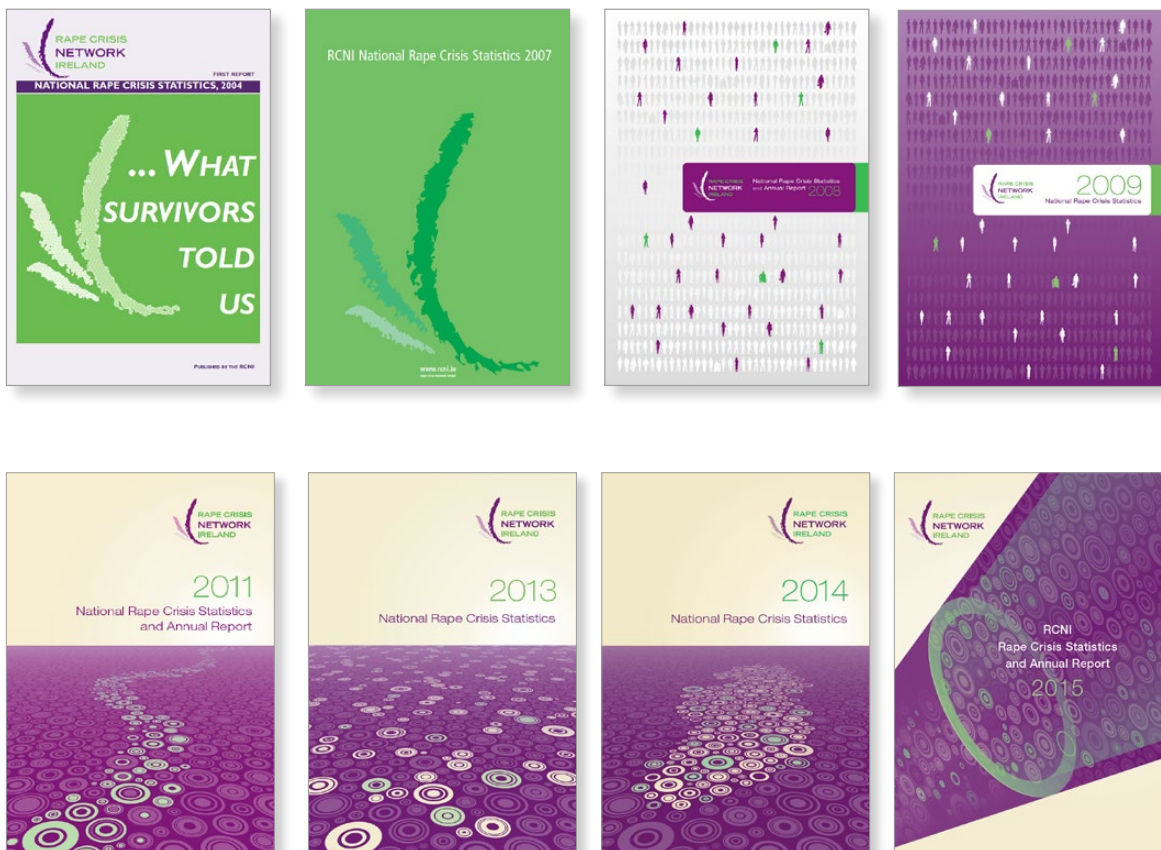
RCNI and RCCs do not have all information on the sexual violence experienced by these survivors, as some information is not always available. For this reason, the n values vary between graphs. The analysis used in this report is compiled using two distinct base figures, that of 'person-related' figures and 'incident-related' figures.



**'Person-related' figures** - Information inputted into the RCNI Data Collection System is anonymised by use of unique numeric identifiers for each RCC service user. Demographic information and service user characteristics entered include information such as age, country of origin, legal status, disability, etc. The totals provided in tables and analysis relating to these characteristics refers to the total number of people aggregated across all RCCs in the study and not by individual centres in order to protect privacy.

**'Incident-related' figures** - This information relates to each incident or episode of sexual violence. Some survivors using RCC services have experienced more than one incident of sexual violence. An incident is not necessarily a once-off act of sexual violence. It instead identifies if the sexual violence was connected by the same perpetrator acting alone or a specific group of perpetrators acting together. An incident of sexual violence may last hours, days, weeks, months or years. Each incident may include multiple if not hundreds of crimes perpetrated by the same individual or group of perpetrators. The RCNI Database collects data on survivors' abuse details by incident because it is the internationally recognised best practice method of doing so (Basile, 2009). For each service user, data is input about each incident of sexual violence and the perpetrators of sexual violence. It is clearly indicated with an asterisk (\*) when any tables, graphs and analysis in this report refer to incidents of sexual violence.

### Previous RCNI Statistics reports



## Bibliography

Basile, K.C., Saltzman, L.E., (2009) Sexual Violence Surveillance: Uniform Definitions and Recommended Data Elements, Centers for Disease Control and Prevention & National Center for Injury Prevention and Control Atlanta.

Available at: [https://www.cdc.gov/violenceprevention/pdf/SV\\_Surveillance\\_Definitions-2009-a.pdf](https://www.cdc.gov/violenceprevention/pdf/SV_Surveillance_Definitions-2009-a.pdf)

European Institute for Gender Equality (2014) Administrative data sources on gender-based violence against women in the EU, current status and potential for collection of comparable data Report, EIGE.

Available at: [https://www.scribd.com/fullscreen/244725303?access\\_key=key-r3fwsmeXXltSY28Mnur&allow\\_%20share=true&escape=false&show\\_recommendations=false&view\\_mode=scroll](https://www.scribd.com/fullscreen/244725303?access_key=key-r3fwsmeXXltSY28Mnur&allow_%20share=true&escape=false&show_recommendations=false&view_mode=scroll)

Hanly, C., Healy, Dr. D., & Scriver, S. (2009) Rape & Justice in Ireland, A National Study of Survivor, Prosecutor and Court Responses to Rape, The Liffey Press.

MacNeela, P., Conway, T., Kavanagh, S., Kennedy, LA., & McCaffrey, J. (2014) Young people, alcohol and sex: What's consent got to do with it? Exploring how attitudes to alcohol impact on judgements about consent to sexual activity: A qualitative study of university students, RCNI. Available at: <https://www.rcni.ie/wp-content/uploads/Whats-Consent-Full-A41.pdf>

McGee, H., Garavan, R., de Barra, M., Byrne, J., Conroy, R. (2002) The SAVI Report: Sexual Abuse and Violence in Ireland, The Liffey Press in association with Dublin Rape Crisis Centre.

Rape Crisis Network Ireland (2012) Asylum seekers and Refugees surviving on hold, Sexual violence disclosed to Rape Crisis Centres, RCNI. Available at: <https://www.rcni.ie/wp-content/uploads/RCNI-Asylum-Seekers-and-Refugees-Surviving-on-Hold.pdf>

Rape Crisis Network Ireland (2016) Finding a Safe Place LGBT Survivors of Sexual Violence and Disclosures to Rape Crisis Centres, RCNI. Available at: <https://www.rcni.ie/wp-content/uploads/RCNI-Finding-a-Safe-Place-LGBT-Survivors.pdf>

Rape Crisis Network Ireland (2014) Hearing child survivors of sexual violence, Towards a national response, RCNI. Available at: <https://www.rcni.ie/wp-content/uploads/Hearing-Child-Survivors-of-Sexual-Violence-2013.pdf>

Rape Crisis Network Ireland (2018) Hearing Every Voice, Towards a New Strategy on Vulnerable Witnesses in Legal Proceedings, RCNI. Available at: <https://www.rcni.ie/wp-content/uploads/210807-Rape-Crisis-Network-Ireland-Hearing-Every-Voice-Report-3.pdf>

Rape Crisis Network Ireland (2011) National Rape Crisis Statistics and Annual Report 2010, RCNI.

Available at: <https://www.rcni.ie/wp-content/uploads/RCNINationalRapeCrisisStatisticsAndAnnualReport2010.pdf>

Rape Crisis Network Ireland (2010) RCNI Member Rape Crisis Centre Best Practice Model with Associated Best Practice Standards, RCNI. Rape Crisis Network Ireland (2012)

Sexual violence against people with disabilities: Data collection and barriers to disclosure, RCNI.

Available at: <https://www.rcni.ie/wp-content/uploads/SexualViolenceAgainstPeopleWithDisabilities2011.pdf>

Rape Crisis Network Ireland (2014) The older child and sexual violence, Questions and challenges for a national response. RCNI Policy Document: January 2014, RCNI.

Available at: <https://www.rcni.ie/wp-content/uploads/Older-Child-Policy-Document-FINAL.pdf>

Sylvia Walby, Jude Towers, Brian Francis (2016) Is violence increasing or decreasing? a new methodology to measure repeat attacks making visible the significance of gender and domestic relations British journal of Criminology.

Available at: [http://www.research.lancs.ac.uk/portal/en/people/sylvia-walby\(eae438c4-8116-45b9-9af5-8b4f785599c0\).html](http://www.research.lancs.ac.uk/portal/en/people/sylvia-walby(eae438c4-8116-45b9-9af5-8b4f785599c0).html)

## Index of Terms

**Acquaintance:** Somebody that the survivor may know to say hello to or have chatted to on a night out for example

**Accompaniment:** RCC service which supports survivors by being with them when they go for medical treatment, forensic examination, to the Gardaí, court, and refugee legal hearings. This role includes crisis intervention, providing information, and supporting survivors to get the best possible service

**Adult sexual violence only:** People attending RCCs who experienced sexual violence solely when they were over the age of 18

**Authority figure:** Babysitter/childminder, Carer/Residential staff, Clergy, Doctor/Medical/Caring profession, Employer, Gardaí/PSNI/Other national police force, Landlord/Landlady, Pimp/trafficker, Security forces, Sports coach/Youth worker, Teacher (clergy), Teacher (lay)

**Child sexual violence only:** People attending RCCs who experienced sexual violence solely when they were under the age of 18

**Child and adult sexual violence:** People attending RCCs who experienced sexual violence when they were under the age of 18 and when they were over the age of 18

**Domestic abuse and coercive control:** A persistent and deliberate pattern of behaviour by a partner/ex-partner designed to achieve obedience and create fear. In this report it includes sexual violence as part of the abuse. It may also include coercion, emotional/psychological abuse, isolation, physical violence, degradation and control

**Emotional/psychological violence:** Harassment/intimidation, Psychological abuse, Stalking, Threats to kill

**Formal authority:** Asylum application, Gardaí, PSNI, Other national police, HSE, Redress board, Church authority, Education authority.

**Family member/relative:** Child, Cousin, Foster parent, Foster sibling, Grandparent, Parent, Parent in law, Sibling, Sibling in law, Step grandparent, Step parent, Step sibling, Uncle/aunt

**Friend/acquaintance/neighbour:** Acquaintance, Co-worker, Family friend, Friend, Neighbour

**Incident:** An incident is not necessarily a once-off act of sexual violence. It instead identifies if the sexual violence was connected by the same perpetrator acting alone or a specific group of perpetrators acting together. An incident of sexual violence may last hours, days, weeks, months or years. Each incident may include multiple if not hundreds of crimes perpetrated by the same individual or group of perpetrators. The RCNI database collects data on survivor's abuse details by incident because it is the internationally recognised best practice method of doing so (Basile, 2009)

**International Protection:** Human Rights law protecting people who are outside of their country of nationality, who have a well-founded fear of being persecuted in that country if they return to it. This includes people seeking International Protection (formerly known as asylum seekers), and people granted Refugee status or leave to remain

**Other forms of sexual violence:** Grooming, Observing/voyeurism, Sexual harassment

**Other locations of sexual violence:** Car, Direct provision centre, Friends house, Hospital/Medical Centre, Institution/care setting, Place of employment, Prison, Pub/Nightclub, School, and OtherOther relationships to perpetrator: Sex purchaser, Taxi driver/driver, Other

**Partner/ex-partner:** Partner Cohabiting, Partner Non-Cohabiting, Partner Ex-Cohabiting, Partner Ex-Non-Cohabiting

**Perpetrator:** A person who has committed a sexual offence

**Physical violence:** Attempts to kill, Imprisonment, Neglect, Physical abuse, Prostitution, Trafficking

**RAJI:** *Rape & Justice in Ireland: A National Study of Survivor, Prosecutor and Court Responses to Rape* (Hanly et al, 2009)

**Rape:** Penetration (however slight) of the mouth, vagina, or anus by the penis without consent or penetration (however slight) of the vagina with an object or the penis without consent

**RCC:** Rape Crisis Centre

**SAVI:** *Sexual Abuse and Violence in Ireland: A national study of Irish experiences, beliefs and attitudes concerning sexual violence* (McGee et al, 2002)

**Service user:** A person who is using RCC services. They may be a supporter of a survivor or survivor of sexual violence

**Sexual Assault:** An assault, ie: touching or 'reasonable apprehension' of touching without consent, in circumstances of indecency, formally called indecent assault. Sexual assault is without any penetration of the mouth, vagina, or anus. In this report sexual assault also includes aggravated sexual assault which involves added serious violence, grave injury, degradation, humiliation or the threat of serious violence

**Sexual Harassment:** Subjecting a person to an act of physical intimacy, requesting sexual favours, or subjecting to any act or conduct with sexual connotations when the act, request or conduct is unwelcome and could reasonably be regarded as sexually offensive, humiliating or intimidating, or someone is treated differently or could reasonably be expected to be treated differently by reason of her or his rejection or submission to the request or conduct

**Sexual violence:** Any actions, words or threats of a sexual nature by one person against a non-consenting person who is harmed by same. This could include; Rape, Aggravated sexual assault, Sexual assault, Sexual harassment, Ritual abuse, Trafficking, Reckless endangerment, Observing/voyeurism, Grooming

**Stranger:** Somebody that the survivor has never met before

**Supporter:** Someone who is supporting a survivor of sexual violence

**Survivor:** Someone who has experienced sexual violence




# Notes

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Although every precaution has been taken in the preparation of this resource, the publisher and author assume no responsibility for errors or omissions. Neither is any liability assumed for damages resulting from the use of this information contained herein.



**Survivors from the following Rape Crisis Centres  
are included in this report.**

To donate to your local Rape Crisis Centre select the  button  
beside the Centre you wish to donate to.

**Carlow & South Leinster Rape Crisis  
& Counselling Centre**

 1800 727 737

**Donegal Sexual Abuse & Rape Crisis Centre**

 1800 448 844

**Kerry Rape & Sexual Abuse Centre**

 1800 633 333

**Mayo Rape Crisis Centre**

 1800 234 900

**Rape Crisis Midwest**

 1800 311 511

**Rape Crisis North East**

 1800 212 122

**Waterford Rape & Sexual Abuse Centre**

 1800 296 296

**Donate to Rape Crisis Network Ireland**

For information on sexual violence services and supports in all  
16 Rape Crisis Centres in Ireland: [www.rapecrisishelp.ie](http://www.rapecrisishelp.ie)





**RAPE CRISIS  
NETWORK  
IRELAND**

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[www.rapecrisishelp.ie](http://www.rapecrisishelp.ie)



An Roinn Dlí agus Cirt  
Department of Justice



Statutory funding for all RCCs comes predominantly through  
Tusla: The Child and Family Agency. All Centres fundraise also.

RCC contact details for support or donations can be found on:  
[www.rapecrisishelp.ie](http://www.rapecrisishelp.ie)

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