Module 13: Medical and Mental Health Care
Objectives

- Identify common reactions to sexual abuse
- Identify medical and mental health services needed by and available for youth
- Understand mandatory reporting requirements
- Understand the public health implications of sexual abuse in youth correctional settings
Trauma Reactions

Adolescents and Stress

- Physiologically show an increased responsively to stressors
- Respond with greater negative affect than children or adults
- Even when referring to the same activities often find them less pleasurable than their parents.
- Higher risk for drug abuse may be tied to elevated stress responsivity.
Trauma Reactions

Each occasion of sexual violence is a trauma incident!

Common reactions are broken into three categories:

- Emotional Responses
- Cognitive Responses
- Behavioral Responses
Common Reactions to Sexual Assault: Emotional/Cognitive

- Emotional shock & disbelief
- Shame & sense of stigma
- Guilt
- Powerlessness
- Denial
- Disturbance in thought process
Common Reactions to Sexual Assault: Emotional/Cognitive

- Fear
- Depression
- Anxiety & hypervigilence
- Helplessness & Altered world view
- Anger
- Loss of trust
Common Reactions to Sexual Assault:

Behavioral

- Expressive
- Calm
- Withdrawn
- Sleep disturbances
- Eating disturbances
Common Reactions to Sexual Assault:

Behavioral

- Lack of concentration or energy
- Aggressive or self-injurious behavior
- Substance abuse
- Changes in appearance
- Changes in sexual behavior
Trauma Reactions

Common DSM diagnosis

- Acute Stress Disorder
- Post Traumatic Stress Disorder (PTSD)

Other Recognized issues

- Complex PTSD*
- Rape Trauma Syndrome
Being a Survivor and Being in Detention

- Little control over things survivors are sensitive to
- Contradiction in culture and rules
- Feelings of disorientation and anxiousness may make youth unable to follow rules
- Sharing or talking about feelings may be a safety risk for a youth
Being a Survivor and Being in Detention

- Isolation may be a relief but it could also cause further trauma.
- Increased anger may cause acting out.
- Complex nature of “consent” can lead to self-blame.
- Multiple traumas exacerbate symptoms.
Role of Health Care Providers

- Confidentiality
- Reporting
- Provide services to youth
  - Victim Centered Care
- Providers are part of the correctional team
  - Security and Safety
Immediate Medical Concerns

- Bleeding
- Head trauma
- Choking injuries
- Vomiting
- Shock
- Vaginal or anal injuries
- Bruising
Long Term Health Care Concerns

- HIV/AIDS
- Hepatitis B/C
- STD’s
- Pregnancy
- Suicidal thoughts and/or actions
- Ongoing problems from physical injury
Sexual Assault Exam (SANE)

- Can be performed within 96 hours of assault
- Consideration should be given to if you are doing it in-house or in a medical facility
- Exam lasts over an hour
Sexual Assault Exam (SANE)

• Chain of custody for evidence MUST be followed for it to be valid

• Age of youth - ability to consent to exam
The Need for SANE Exams in Juvenile Correctional Settings

- Treatment and documentation of injuries
- Treatment and evaluation of other medical issues
- Crisis intervention
- Collection of evidence
Sexual Assault Response Teams

• Composed of:

  - Law Enforcement
  - Mental Health/ Rape Crisis Providers
  - Medical Health Provider
Sexual Assault Response Teams

• Benefit:
  - Allows a comprehensive response to sexual assault
  - Information sharing while minimizing re-victimizing by asking the survivor to repeat the story multiple times
Rape Crisis Centers

- **Advocates**
  - Some communities have rape crisis counselors that will meet inmates at the hospital and act as advocates during SANE Exams

- **Mental Health evaluation**

- **Group counseling (in some situations)**
Child Advocacy Centers

- Physical Exam Center
- Forensic Interviewing/Evaluation Facilities
- Counseling
- Advocacy
Partnersing with Local Crisis Centers and Child Advocacy Centers

- **PROS**
  - Specialized training for care of sexual assault victims
  - Victims may be more comfortable with a provider outside of the agency
  - Ability to provide a wider range of services

- **CONS**
  - Counselors may not be trained in dealing with detained youth or regulations of juvenile correctional environments
  - May not agree with or understand policies that may go against ethical codes and beliefs
Mandated Reporting

- All mandated reporting laws specific to your State must be followed.

- Departmental/ Facility reporting policy does not over rule State’s mandated reporting laws.

- HIPPA does not preclude the release of information necessary to met mandated reporting of child abuse or neglect.

- Federal substance abuse privacy laws do not preclude the release of information necessary to met mandated reporting of child abuse or neglect.
Impact of Sexual Assault

Sexual assault in a juvenile detention facility affects youth, staff and society
Impact on Youth

- STDs
- Substance Abuse
- Suicide
- RTS
- May become perpetrators to gain control
  - I’m going to get you before you get me
Impact on Staff

- Unmanageable anger from youth
- Secondary trauma
- Increased hostility or anger
- Feelings of guilt
- Youth acting out aggressively
- Feelings of powerless
Impact on Society

- Spread of communicable diseases
- Financial burden of treatment
- Survivors may perpetrate in the community
- Substance abuse
Implications for Public Health

- Spread of infectious diseases
- Increased health care costs – mental and medical health
- Increased violence