

CALLING TIME ON SEXUAL VIOLENCE AND ALCOHOL: THE FACTS



FACTSHEET

Collecting data in relation to alcohol consumption and attitudes towards alcohol and sex is of considerable importance to ensure effective sexual violence reduction policies and programmes.

8

Growing a body of evidence: Data on alcohol consumption and sexual violence



Service providers have an important role to play in recording data that can be used to monitor and evaluate sexual violence in Ireland.¹ Given the prevalence of alcohol in sexual violence in Ireland, collecting data in relation to alcohol consumption and attitudes towards alcohol and sex is of considerable importance to ensure effective sexual violence reduction policies and programmes.

Why is data in relation to alcohol involvement in sexual violence important?

- Data on alcohol involvement in sexual violence in Ireland is essential to understand the scope and extent of the problem.
- Data can be used to petition for targeted prevention programmes and policies.
- Adequate and appropriate data collection allows service providers to monitor trends in relation to alcohol consumption in incidents of sexual violence and thus to tailor programmes and evaluate the services' effectiveness.

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Who keeps records of alcohol involvement in incidents of sexual violence?

Gardai

Details of reported incidents are entered into the PULSE (Police Using Leading Systems Effectively) computer system. Incident characteristics are recorded, including alcohol consumption, if relevant, by the complainant and the accused (where this is attainable). Data is published by the CSO.²

Limitations:

- Data can only be gathered from *reported* offences.
- Reports of sexual violence are often delayed and may reflect only a subjective knowledge of alcohol consumption which may be misreported (intentionally or unintentionally) by the complainant or the accused.

Potential: The Gardai are one of the only service providers with the capacity to gather data in relation to the alcohol use of those accused of sexual violence. This information is vital to inform effective programmes aimed at reducing sexual violence in Ireland.

Sexual Assault Treatment Units

SATUs record alcohol consumption as number of drinks consumed by a victim of sexual violence in the 12 hours prior to the assault, as reported by the patient.³

Limitations:

- Only alcohol consumption by the attending patient is recorded.
- While it is possible to access SATUs directly or through a Rape Crisis Centre, the majority of patients were referred by Gardai.⁴ Given reporting rates, SATU patients cannot be presumed to be representative of the general population experience of sexual violence.

Potential: Data on alcohol involvement in sexual violence incidents should continue to be recorded and published.

Rape Crisis Centres

Rape Crisis Centres record information on sexual violence characteristics as disclosed by victims.

Limitations:

Quantitative data on alcohol consumption is not gathered by RCCs due to:

- Inability to record accurate data on perpetrator alcohol consumption
- Victim reporting on perpetrator consumption is more likely in certain relationships and contexts of sexual violence, risking a distorted understanding of alcohol involvement in sexual violence.
- Distinguishing between voluntary and involuntary consumption may feed victim blaming narratives and lead victims to feel they are being judged or blamed where consumption was voluntary.
- Imprecise quantities of alcohol consumed are likely to be reported, as the longer ago the incident and more intoxicated the individual was at the time, the more effected their ability to accurately recall their alcohol consumption

Potential: RCCs are in an exceptional position to provide qualitative information about alcohol involvement in incidents of rape and, importantly, perceived effects on victim recovery of alcohol involvement in sexual violence incidents.

Other Agencies

Data may also be gathered through surveys, focus group discussions and interviews conducted by academics or organisations such as the Central Statistics Office.

Limitations:

- Individuals who participate in general surveys, of which sexual violence questions are included, may be unwilling to disclose experiences of sexual violence.
- Difficulties may arise in locating enough willing participants to take part in targeted sexual violence surveys.⁵
- Questions regarding alcohol use by victims of sexual violence may be perceived by the respondent as judgemental or blaming, thus reducing the likelihood of disclosure.
- Surveys tend to ask questions about experiences of victimisation only, thus data on perpetration is not gathered.

Potential: Surveys, focus group discussions and interviews can provide important information about the use of alcohol in sexual violence incidents and can be designed to uncover attitudes towards alcohol and sex, and Irish expectations of the effects of alcohol – factors which influence the likelihood of perpetrating sexual violence while intoxicated, or against someone who is intoxicated.⁷ Importantly asking the questions and publishing the results is itself an intervention in the acceptability and normalisation of the harmful links between alcohol consumption and sexual violence; it has the potential of initiating the conversations that can lead to social change.

Recommendations:

- The well-being of the victim should be central to all data collection and dissemination. Anonymity should be ensured when information is shared between services, and victims should be informed as to how, when and why data relating to their assault is collected and used.
- Collection and dissemination of data on *perpetrator* alcohol consumption, alcohol expectations and related attitudes. The probation and prison services would play a role in this as they have direct access to convicted perpetrators.
- Publication of data in relation to alcohol involvement in incidents of sexual violence by Gardaí along with other case characteristics currently published (e.g. sex, age, location).
- Greater inter-agency discussion and knowledge sharing regarding information/knowledge on the consumption of alcohol by perpetrators and victims
- Establishment of alcohol consumption measures to be used in data collection across services to ensure that data gathered is comparable.

References:

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Available at: http://www.cso.ie/en/media/csoie/releasespublications/documents/crimejustice/2010/gardacrimestats_2010.pdf
- ³ Egan, M. 2010. First National Sexual Assault Treatment Unit (Satu) Annual Clinical Report 2009.
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- ⁴ Ibid.
- ⁵ Saidlear, C. 2012. RCNI. Personal communication.
- ⁶ Abbey, A., Zawacki, T., Buck, P.O., Clinton, M. and McAuslan, P. 2001. Alcohol and Sexual Assault National Institute on Alcohol Abuse and Alcoholism (NIAAA) *Alcohol Health and Research World*, 25(1).
- ⁷ Abbey, A. 2011. Alcohol's role in sexual violence perpetration: Theoretical explanations, existing evidence and future directions. *Drug and Alcohol Review*, 20; 481-489.

About Rape Crisis Ireland:

Rape Crisis Network Ireland (RCNI) is a specialist information and resource centre on rape and all forms of sexual violence with a proven capacity in strategic leadership. The RCNI role includes the development and coordination of national projects such as expert data collection, strategic services development, supporting Rape Crisis Centres (RCCs) to reach best practice standards, using our expertise to influence national policy and social change, and supporting and facilitating multiagency partnerships. We are the representative, umbrella body for our member Rape Crisis Centres who provide free advice, counselling and support for survivors of sexual violence in Ireland.

The national coordination role delivered by RCNI across management, governance, data collection, data reporting, the design and delivery of a range of training courses and administration, facilities frontline services to direct resources at meeting survivor needs, service delivery and local multi-agency partnerships.