Black Women Reporting and Seeking Help for Sexual Assault: A Call for Action

Maya Hart[*] and Mary S. Jackson

East Carolina University, North Carolina, USA

Abstract: Black women in America have historically been victims of oppression, racism, and sexual assault. This victimization can be traced as far back as the forced immigration to America in Jamestown, Virginia in 1619. Forced travel bondage on slave ships highlights the institutionalized pattern, not only of their suffering from repeated rape, but also logs their victimized sufferings in silence that they had to endure then and continue to endure in 21st century contemporary America. Black women have been socialized intergenerationally to respond in a specific manner similar to the female slaves who endured rape from ship crew members during their long voyage to the Americas. Even after slavery was legally abolished in 1865, Black women continued to endure victimizations not only due to their gender, but also due to discrimination, classism, perceptions regarding their sexuality, racism, and fear. These intersectional factors cause Black women to have become unique experiences at the hands of rapists. Thus, Black women have unique experiences as victims of rape than other individuals who are also rape victims. Any discussion of Black women and rape must be placed in a sociohistorical framework. The purpose of this article is to revisit historical underpinnings about the rape of Black women in a socialized manner that continues to hinder a silent, nonactive role, and in some instances denial of being a victim of rape. The aim is to sensitize, stimulate, and motivate action by increasing social work classroom discussions about the topic, increasing research in the area of rape of Black women utilizing an intersectional approach reviewing factors that are unique to Black women, and providing more information as a resource to enhance community awareness. Effective intervention strategies are also delineated.

Keywords: Black women, sexual assault, rape.

INTRODUCTION

African Americans or Black Americans (as the concepts will be used interchangeably in this article) are defined by the U.S. Census Bureau as having origins from any of the Black racial groups in Africa (U.S. Census Bureau, n.d.). This includes those who only identify as Black, those who identify as Black and one or more races, and those who identify as Black and have a Hispanic/Latino ethnicity (Tamir, 2022). Black Americans currently make up 13.6% of the total US population and Black women make up 12.9% of the total population of women in the U.S. (Asante-Muhammad *et al*., 2022). Black Americans are a diverse group and mostly consists of the descendants of enslaved Africans who were forcibly brought to the Caribbeans and Americas as early as the 16th century. Due to the numerous and traumatic atrocities committed against Black Americans during and after slavery, 21st century American Black women are still struggling with the need for protection against violent crimes of rape and sexual assault with many not reporting and continuing to suffer in silence as their enslaved ancestors did over 400 years ago. According to the U.S. Department of Justice (2013) as cited in The National Center on Violence Against Women in the Black Community (2018), 1 in 5 Black women are rape survivors and for every 1 that does report, 15 of the victims will remain survivors who suffer in silence. This article will explore history of sexual assaults committed against Black women in a socialized manner with the intent to sensitize, stimulate, and motivate action via effective intervention strategies.

Black women in America have long been the victims of sexual violence (Davis, 1978; Barlow, 2020). Going as far back as the Atlantic Slave Trade, Black women were subjected to rape and sexual abuse at the hands of both White crew staff and other slaves. There were no legal repercussions enforced for the perpetrators because when at sea the captain is considered the chief law enforcement officer as well as the judge, the women were seen as property, and there would be almost no chance of a report being made when the ships arrived to their destinations as the women often did not speak the same language as those at the destination. When the slave ships landed their products (slaves) and displayed their merchandise (slaves), the women were stripped naked because their value to reproduce healthy offspring increased their value when auctioned (West & Johnson, 2013). The more slaves born into a household would increase the owner's ability to produce more goods which in turn would increase the master's wealth. White men were allowed to do as they pleased with slaves and even with free Black women with no consequences.

*Address corresponding to this author at the MSW Candidate at East Carolina University, North Carolina, USA; E-mail: hartm18@students.ecu.edu

I in 4 Black girls will be sexually abused before the age of 18.

According to the U.S. Department of Justice, I in 5 Black women are survivors of rape.

35% of Black women experienced some form of contact sexual violence during their lifetime.

National Center for Injury Prevention and Control and the Centers for Disease Control and Prevention, "The National Intimate Partner and Sexual Violence Survey (NISVS)

40-60% of Black women report being subjected to coercive sexual contact by age 18.

Black Women's Blueprint, "The Truth Commission on Black Women and Sexual Violence," 2012

In the U.S., 38% of Black women experienced sexual violence other than rape during their lifetime.

17% of Black women experienced sexual violence other than rape by an intimate partner during their lifetime.

African American girls and women 12 years and older experienced higher rates of rape and sexual assault than White, Asian, and Latina girls and women from 2005-2010.

Among students, 11% of Black girls in a national high school sample reported having been raped.

Thompson, McGee, & Mays, 2012.

40% of confirmed sex trafficking survivors in the U.S. are Black.

Banks, Duren and Kyckelhahn, Tracey," Characteristics of Suspected Human Trafficking Incidents, 2008-2010", The Bureau of Justice Statistics, 2011.

Figure 1: Black Women and Sexual Assault.

Source: The National Center on Violence Against Women in the Black Community, (2018). Black Women and Sexual Assault. Retrieved from: (Ujima-Womens-Violence-Stats-v7.4-1.pdf (ujimacommunity.org)

HISTORICAL EXAMPLES

Harriet Jacobs

Harriett Jacobs was a woman born into slavery in North Carolina who endured repeated sexual assaults from her master beginning at the age of 12. After years of abuse and the threat of her children being sold, she ran away and hid in a small crawlspace at her grandmother's house for 7 years. She was finally able to escape to New York and was eventually reunited with her children. Jacobs published her autobiography, *Incidents in the Life of a Slave Girl,* in 1861 under the pseudonym Linda Brent detailing the events of her life including the years of sexual abuse:

> He was too scrupulous to sell me; but he had no scruples whatever about committing a much greater wrong against the helpless young girl placed under his guardianship, as his daughter's property. Sometimes my persecutor would ask me whether I would like to be sold. I told him I would rather be sold to anybody than to lead such a life as I did. (Jacobs, 1861, pp. 55-57, as cited in Thayer & Eldridge, n.d.).

Celia

Celia was an enslaved woman in Missouri who suffered repeated sexual assaults from her master over the course of 5 years which began when she was aged

14. While suffering from a difficult third pregnancy, she asked him to leave her alone. He refused and Celia killed him in an act of self-defense. After being threatened with her children being taken away she confessed to his murder and she was incarcerated, convicted, and eventually executed by hanging on December 21, 1855. Below is an excerpt from Enslaved Peoples of the Historical Slave Trade (2013) briefly summarizing her story:

> Celia became the cook and only female slave in the Newsom household in neighboring Calloway County. At some point on the return journey from Audrain County, seventy-year-old Newsom raped 14-year-old Celia. It immediately became apparent to Celia, however, that Robert Newsom had purchased her primarily to serve as his concubine…Court records show that over the next four years the rapes continued, and that Newsom repeatedly forced Celia to have sex with him against her will…In spite of Jameson's efforts, trial judge William Hall advised the all-White jury that they could not acquit Celia on the grounds of self-defense, and all but instructed them to find her guilty of murder in the first degree…Pregnant, ill, and having suffered from Newsom's abuse for more than five years, something inside her had simply snapped...Her case, according to the legal historian and federal

judge, A. Leon Higginbotham, was even more "venal and racist" than the more famous Missouri slave case, Dred Scott v. Sanford (1857). Unlike Scott, who was ultimately freed and who died of natural causes, Higginbotham argues, Celia was executed because the Missouri courts held that "a slave woman had no virtue that the law would protect against a master's lust" (Higginbotham, 1989 p. 694 as cited in Jones & Niven, 2-13).

The Sexual Abuse Continues

After slavery ended, during the reconstruction period, Black women continued to remain victims of sexual assault and rape at the hands of White vigilante groups such as the Ku Klux Klan (KKK) who engaged in gang rape tactics of Black women (Sommerville, 2004). Black women were still subjected to rape at the hands of White men during the Jim Crow era to invoke fear and complacency in the Black community (Ohio Alliance To End Sexual Violence [OAESV], n.d.). Today, decades later, 1 in 4 Black girls will experience some form of sexual abuse before they reach adulthood, age 18 (Barlow, 2020). Additionally, 22% of black women will experience rape in their lifetimes when compared to 18.8% of white women (The Center for Disease Control, 2010, as cited in OAESV, n.d.). Many of these victimized women do not seek medical or mental health services relating to their sexual assaults. This is due to several reasons that are unique to Black women including social stigmas and norms, financial barriers, and the need to protect Black men. Slaton & Richard (2020) provide strong evidence explaining the vulnerability of Black women as sexual victims due to their marginalized status, which makes them unwilling to disclose sexual victimization. If reported they are less likely to be believed by authority figures, and if believed, their access to community resources is limited.

The need to protect Black men is a major concern in the Black community due to the continued brutality and lethal force imposed on Black males by law enforcement officers in Black communities. Thus, the accusation of rape would provide further enticement by officers to continue their rampage against them. The shift from stranger rape (white master) to acquaintance (intraracial) sexual victimization created a traumatic psychological impact not only on the victim, but also on the Black community which has historically had to "protect" itself from "outsiders" who could cause harm.

Williams (2013) provides clinical research to support the need by Black women to protect Black men and the psychological impact of the non-disclosure due to communal protectiveness of Black males so that another Black male is not arrested and placed in prison.

Zounlome *et al*. (2019) utilized an intersectional phenomenological approach to examine cultural barriers and their perceptions about sexual violence. They concluded that although there is information in the literature providing discussions related to sexual violence, they suggest that there is a lack of diversity in the research samples that can provide generalizability. For example, they question the perceptions of college Black women on the issue of Black sexual victimization. Their research concluded similar findings that Black college women's perceptions were like larger Black community with silence and the need the need to protect the Black male, historical racialized trauma against Black women, stereotypes about Black women and their sexuality, and continued racial injustices in American society. They concluded with the need for college campuses to provide prevention initiatives for Black women to enable them to discuss sexual victimization in a non-judgmental and safe environment.

Kelley (2023) suggests that although there is research in the literature regarding Black women and sexual violence, there is limited information with discussions about their actual experiences. She notes that importance of understanding the historical and cultural context because these features shed light on why there is a tendency for them to remain silent about sexual violence when they become victims. From a Black feminist perspective, Kelley's (2023) research findings revealed that when Black women sought medical assistance resulting from sexual victimization, they considered the culturally specific and legal sanction aspects when filing police rape reports. She concluded that although these women in her study did seek medical treatment, they were reluctant to involve the police.

Campbell *et al.* (2020) proposes that help seeking by sexual violence victims has been to seek medical treatment however, classical research promotes the thinking that intragroup allegiance may cause barriers for pursuing the issue further beyond medical treatment because the experiences of Black women are different (Collins, 2000; Crenshaw, 1991). Kelley (2023) strongly advocates for more research on help seeking providers

working with sexual violence victims as her findings occurred during the COVID-19 pandemic where many of the Black women sought medical treatment over silence. However, Kelley (2023) also suggests that her sample was drawn only from the victims who sought medical treatment.

Ullman and Lorenz (2020) conducted a mixed methods study to explore the mental health care help-seeking behaviors and experiences of Black women who had been sexually assaulted. The quantitative sample consisted of 836 African American women from the Chicago metropolitan area, with 4.8% also identifying as Hispanic, who had an unwanted sexual experience when they 14 years of age or older. The qualitative sample consisted of African American women, with 19% also identifying as Hispanic, who were survivors of various forms of sexual assault including childhood sexual abuse, sexual coercion, and romantic acquaintances. The measures included interviews which were coded into positive, negative, or mixed. Interview transcripts were later summarized and analyzed to identify patterns and themes and the qualitative data revealed barriers to mental health care. These barriers included financial, social stigma, and the lack of more Black providers. Their findings concluded that although Black women have a higher risk for sexual assault than other racial/ethnic women, Black women are more reluctant to use mental health or medical services due to certain factors that are related to the chances that survivors will or will not seek mental health care in relation to their sexual assault. These intersectional factors are discrimination, gender issues, racism, and class (socioeconomic status).

Although there is information in the literature on sexual assault victims however, the literature is limited with information regarding connecting factors that may cause Black women to remain silent and to not seek professional (medical & mental health) services. There are major gaps in the literature on the Black women's intersectional experiences related to sexual assaults (Slatton & Richard, 2020) and help seeking providers (Kelley, 2023). Most of the studies provide a comparative analysis of experiences based on different racial and ethnic groups (Ullman & Lorenz, 2019), but fail to consider intersectional factors. Only a few studies considered whether Black survivors of sexual assault sought or received professional follow up from medical and or mental health professionals (Ullman & Lorenz, 2019).

Although there is a focus on barriers that Black women face when they are victims of sexual abuse, there is limited information on strategies that can be utilized for help seeking providers working with Black victims of sexual violence. The challenges must not only be addressed, but there must be dialogue, support systems, and safe environments for the victims so that they can receive appropriate interventions. This can occur with providing effective intervention strategies to help seeking providers who may experience helplessness when working with this population.

Application of a Theory of Human Behavior

African American women have a unique history that has been passed on by generation after generation formulating major themes that are perpetuated in each generation as delineated by Slatton & Richard (2020): 1) the social construct that Black women are strong, 2) sanctioning of intra-racial sexual assault disclosure, and 3) delegitimization of Black women as rape victims.

Bandura's (1977) social learning theory is applicable when exploring this topic focused on Black women and sexual assault. Social learning theory is the belief that social behavior is learned by observing and imitating the social interactions and behaviors from the people around us and our environments. This learning can occur both directly and indirectly. "More specifically, behavior is assumed to be developed and regulated by external stimulus events, such as the influence of other individuals, and by external reinforcement, such as praise, blame, and reward" (American Psychological Association [APA], n.d.). Bandura (1977) stated that there is a shift in behavior from inner determinates to detailed external influences by individuals and or the environment. These external influences can cause responsiveness by individuals in terms of stimulus events which can cause reinforced consequences. Black women learn how and how not to react to sexual assault by listening to others in their communities and the media as Black women have historically been depicted as promiscuous and hyper sexualized (West & Johnson, 2013). They also learn by watching how other women within the family who have been sexually assaulted are treated and how they function. Through their oral historical depictures of their rape victimizations to grandchildren and children, the knowledge is passed on intergenerationally.

Environmental reinforcements are significant features in learning behaviors. One thing that is reinforced in the Black community is the notion of the

strong Black woman. Many Black women are socialized to believe that they should remain strong no matter the circumstances. Washington (2022) states, "the pressure to uphold the trope of the Strong Black Woman puts us in the impossible position of having to keep going, even when we are burned out and have nothing left to give to the world or ourselves." This is often exhibited in matriarchal Black households where there is a disproportionate number of female headed households, with 64% of Black children being raised in single-parent households, primarily headed by women (Lloyd, Shaw, Sanders, & Schaefer, 2022). Black women often see their mothers, grandmothers, aunts, and other women around them having to do everything, often with little to no help. Collins (2000) describes "a series of women-centered networks, including grandmothers, siblings, other relatives, neighbors, and even strangers, all of whom became what she calls the 'other mothers' assisting the blood mothers" (pp. 173-199, as cited in Berrey, 2009). Another thing that is learned is "what happens in this house, stays in this house." This is something that is said in many Black households, and it is told to children, so they do not speak about family business outside of the home (Gunderson, 2020). This applies to sexual abuse as the survivor may be afraid to break this cultural norm to seek the help they need because Black women have been socialized to embrace Black values (Ullman & Lorenz, 2019).

Black women are also often taught to "protect Black men" due to the dehumanization of and historical violence perpetuated against Black males as well as the ongoing societal perceptions of Black males being aggressive and dangerous. Due to this thinking, Black boys as young as 10 are more likely to be considered older and less innocent than their White counterparts which then leads to perceptions of guilt and increased violence against them by police when accused of a crime (American Psychological Association [APA], 2014). While Black men are not inherently violent and aggressive, according to the Blackburn Center (2020), a national study reported 91% of Black women are sexually assaulted by Black men and 75% of those attacks are perpetrated by someone the survivor knows. Social learning theory also suggests that Black women and girls may be faced with pressure from others in the Black community not to report sexual violence as it would be seen as a betrayal. Not only does stigma from the Black community pressure Black women into not reporting, it also can lead to them not seeking mental health treatment. Washington (2022) states:

In my life, upholding the Strong Black Woman stereotype has only deterred me from getting the help I needed. At one point — when I was on the brink of homelessness in January — I refused to take any time off of work because I didn't want to let my team down. I convinced myself that I needed to be "strong" and figure a way out of the situation by myself. Refusing to acknowledge how I was feeling only left me drained.

Failure to disclose sexual assault or rape is due to a number of reasons including the expectation to uphold the image of the strong Black woman, stigma and fear of judgement, not believing in the effectiveness of mental health treatments (Alvidrez, Snowden, & Kaiser, 2008), the small percentage of Black therapists, and due to a general distrust of the medical system because of past indiscretions such as the Tuskegee Experiment and Henrietta Lacks. Historically, there is a distrust in the Black community based on experiments used in scientific research without their consent. Specifically, the Tuskegee experiment conducted between 1932 ending in 1972 by the government (US Public Health Service & CDC) using 600 Black men and injecting them with the syphilis virus and providing no cure (penicillin) for their treatment. In 1972 after public outcry the experiment was discontinued, and President Clinton issued a public apology from the nation. Similarly, Henrietta Lacks' cells were sent to John Hopkins and used experimentally, without her or her family's consent, to diagnose cervical cancer cells in humans (Khan, 2011). As a result of racialized trauma many Black women believe that prayer, the use of family members, and friends are major protective factors when dealing with mental health issues, and their belief in mental health treatment was low (Ward, 2009). Improving factors such as increased culturally competent mental health practitioners would likely increase the number of victims of sexual violence who are willing to break the chain of silence about sexual violence. However, there is an increase in need for mental health workers, and a decrease in mental health workers in the workforce with even less minority mental health workers. The Bureau of Labor Statistics suggest that 74.2% of mental health professionals are White, followed by Black or African American 7.9%, Hispanic or Latino (7.9%) and Unknown 6.2% (BLS, 2021).

Risk Factors

Social workers may view a strengths perspective as a very significant aspect of the clinical counseling

process. However, it can be a risk factor to Black women who are victims of sexual assault. For example, the strong Black woman analogy (Wyatt, 2008) can deter a victim from seeking professional help. Being taught to internalize the "strong enough" to cope persona (West & Johnson, 2013) enforces the need to remain silent about a sexual assault.

Not only can some values present strong risk factors, but stereotypes also create barriers to obtaining professional services for Black victims of sexual assault. Wilson (2021) provides a historical background on these stereotypes stating: that Black women are perceived as lustful and promiscuous beings while White women are portrayed as models of self-respect and sexual purity (pgs. 123-124).

With a higher risk of sexual assault than their White counterparts (Slatton & Richard, 2020), the Black female is also a victim of stereotypical nuances such as hypersexual and promiscuous and therefore, "deserving" to experience sexual attacks. This thinking that the Black victim "deserved it" and was not raped provides policy and decision makers with the suggestion that the Black female is not a rape victim and "unrapeable" (Tillman *et al*., 2010) because she deserved it. Beck (2014) states, "It wasn't until the Civil War when black women were actually able to come forward and call it rape. Before that time, even in the North, they would make it a lesser charge [for black women], if at all."

Another risk factor is the years of oppression that Black women have faced for generations based on race as well as the health risks as sexual assault can cause physical and emotional health consequences including increased risks of depression, drug misuse, PTSD after sexual assault. Wilson (2021) concluded that Black women internalize external perspectives and view themselves as objectified individuals which results in producing mental health issues (e.g., body shaming and depression). These feelings can cause them to feel less competent, and obtaining feelings that they are responsible and deserving to be raped (p.128).There can be social drawbacks to sexual assault including name calling, isolation, and the need to constantly explain behavior. In addition to that, black women are exposed to discrimination and researchers whose focus is less about well-being and more about comparative analyses, which furthers the limited disclosure information from a victim. Thus, limiting or nullifying the professional counseling or medical services.

Another relevant risk factor among Black women is impoverished conditions where they are more likely to live in poverty-stricken areas (22.3%) below the poverty level (Bleiweis *et al*., 2020). West & Johnson (2012) suggest that these women struggle daily to provide the basic necessities for their children while living in areas where they may witness and also may become as a victim of sexual assault. According to Darkness to Light (2015), a non-profit focused on child sexual abuse prevention, children in low socioeconomic households are three times as likely to be the victim of child sexual abuse and children who witness and/or are the victim of another crime are also significantly more likely to be sexually abused as well. In 2021, 30% of Black families led by single mothers were living in poverty (U.S. Census Bureau, 2022). "Children who live with a single parent that has a live-in partner are at the highest risk of sexual abuse: they are 20 times more likely to be victims of sexual abuse than children living with both biological parents" (Sedlack *et al*., 2010 as cited in Sanders, 2014, n.d.). Holmes (2007) also adds that the risk for abuse in single parent homes was higher in the lower income groups than it was in the higher income groups and that there is an increased likelihood of predators having easier access to emotionally needy children due to the type of facilities available in these areas.

Black college women are viewed as the protective factor in the black family (Kelley, 2023), however, this protective factor can also become a hazardous risk factor on the college/university campus because many may "go Greek" (jargon for sisterhood /brotherhood) and join a sororities they are prime victims of sexual harassment and assaults at fraternity parties and other events. Certainly, nondisclosure or delayed disclosure about sexual assault at Greek events can cause increased stress, insecurity, and in some instances dropping out of higher education.

Culturally Sensitive Response – Effective Interventions

When considering effective interventions for this population, it is significant that consideration is given to the characteristics of the survivors who are victims of rape and sexual assault. Ullman & Lorenz (2020) suggest that factors such as age, socioeconomic status, education, knowledge of the perpetrator, and support systems are essential entities that must be factored into the treatment planning process. However, even when focusing on these traits, Black rape survivors are still left with enormous mental health

issues such as depression, substance abuse/misuse, alcoholism, PTSD (Price *et al*., 2014), limited support, and suicide ideation. Although survivors are termed "survivors" because they were not murdered in the process of the rape or sexual assault, however, the quality of their survival, in many instances, is poor because many continue to suffer in silence.

Kelley (2023) provides research considering the impact of COVID-19 pandemic and the increased cases of sexual assault cases. An increase in meeting perpetrators online during lockdown (Majeed-Ariss *et al*., 2023). Evidence also suggests that sexual violence increased during the lockdown period reporting 40% increase in rape crisis centers, with concern from the National Sexual Violence Resource Center that this increased trend will continue as over 30 million Americans are now out of work (Harvard Medical School Review, 2020). Police organizations report that only 23% of sexual assaults were reported. The criticism was that lockdowns were hurriedly implemented to contain the virus, but there was not thought given to resources for victims of sexual violence. Therefore, their situation was unthinkable because there was no escape for them.

Black women due to sociohistorical and cultural aspects along with multiple barriers face unique factors as victims of sexual assault. Thus, interventions must be effective strategies that will acknowledge these aspects and utilize them to empower and enhance daily functioning. Eliminate the pathological thought that Black women must be strong and endure the aftermath of sexual assault (e.g. depression, suicide ideation, guilt/shame). Black women survivors of rape/sexual assault seek professional help at lower rates than other racial/ethnic group survivors (Ullman & Lorenz, 2020). This can be attributed to many sociohistorical aspects such as the lack of trust of systemic mental health programs. Although, mental health programs are designed to focus on issues that survivors endure, the major issues are whether mental health workers have been properly prepared (culturally competent) to work with these survivors and are social work programs preparing future mental health workers with an understanding of sociohistorical aspects that may impact these women as they move toward accomplishing successful treatment outcomes? The literature places the blame for Black women's continued silence on them (blaming the victims) with study after study suggesting that more of these survivors should seek mental health services. What should occur to accomplish this? There is a need to advocate for the inclusion of specific information into clinical practice curriculum about sexual assault. Council on Social Work Education (CSWE) has
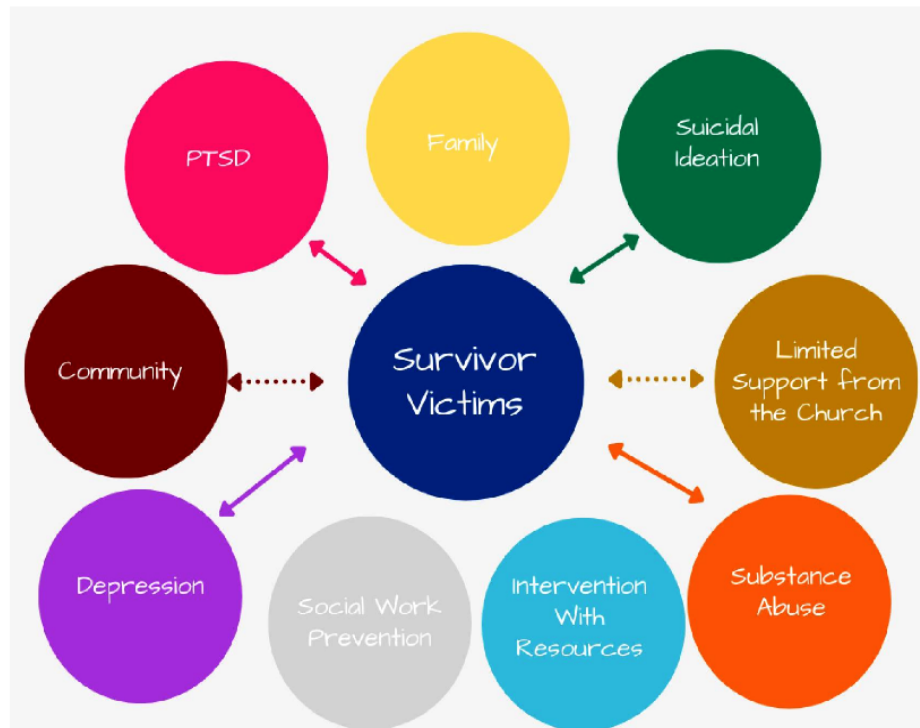

Figure 2:

mandated that all accredited social work programs include information on specific topics (e.g., special populations, social justice, substance use disorders, school social work, gerontology, military). Certainly, the number of sexual assault survivors would be a strong indicator of the need to mandate that social work classes include classroom discussions about this underserved and understudied marginalized population of victims of sexual violence. However, academicians and practitioners do not have to wait for a CSWE imposed mandate. The development and design of classroom curricula can begin with the inclusion of class discussions and specific assignments to focus on sexual assault. Clinical practitioners can begin to work closely with perpetrators of sexual assault to not only discover and allow them to express their thoughts, but this would also provide a mechanism for developing more effective programs to address the needs of the survivors as well as the perpetrators who are also in need of counseling. Too often programs are designed by individuals to simply obtain data, and the data is seldom used. This strategy will allow input (expressions/thoughts) from the perpetrators and the survivors as well. This beginning strategy will not only remove the blame from the survivors but would stimulate mental health workers to begin to actively include sexual assault and rape into class discussions utilizing case vignettes, YouTube videos, guest speakers, Kahoot, and community projects.

Each intervention level must consider the need to conceptualize the interventions with the understanding that these women have experienced not only sexual assault but many prejudicial complexities in their lives.

Implications for Social Work Practice

Davis (1989) called for action to focus on black women and sexual assault, over thirty-four years ago, identifying it as one of the "fastest growing violent crimes" (p.24) in America and identifying it as an epidemic as she focused on the need to not only change laws but to understand that rape provided the essential ingredient to terrorize and exploit Black women. Crenshaw (1990) expanded on Davis' thinking with expressing the need for practitioners to shift their thinking to become more cognizant of the overlapping factors of features such as racism, gender, and values that should be considered when working with Black women survivors of sexual assault.

Social work practitioners are given the ethical responsibility to work with marginalized populations.

This responsibility entails the need to function from many practice levels (micro, macro, community). Clinical practitioners must engage directly with survivors in counseling (micro). At this level of practice, the practitioner must demonstrate an awareness of sociohistorical aspects that impact the lives of Black rape survivors. This display of competence can ease the stress from the client who may be reluctant to enter the therapeutic process for fear that the "therapist does not understand." This feature at the micro level of practice is significant especially in instances where the therapist may not be Black. There are limited Black clinical practitioners in America, and thus it is important to the Black client survivor that the therapist understands the numerous barriers that Black women must endure. At the macro level of practice (intervening and advocacy on a large scale) impacting policy and policy changes and communities. Black rape survivors who have been and continue to be unlikely to utilize mental health services may turn to the Black church (Ullman & Lorenz, 2020) as a means of support because the Black church has historically been the primary means of comfort and societal change in the Black community. African American Christianity is losing relevance among younger millennials and Gen-Zers, however, Black churches continue to have influence (Mather, 2023). What has occurred is that the Black church has become intertwined with political tenets and no longer provides the "street talk" (feelings of comfort that the church will provide the leadership) for the community (Daughty, 2021). Thus, the church, although still very essential, but less visible in social action to the community at large. This shift in proactivity by the Black church may cause many survivors to continue their silence because the pastor may not view rape and sexual assault as an "appropriate" church topic (Mather, 2023). Thus, clinical practitioners may not be able to utilize the Black church as a resource for assisting these Black women who are rape survivors because the Black church may also introduce harmful interventions such as couples counseling when the Black women may be continuously raped by the significant other or spouse. Williams & Jenkins (2019) suggest that Black churches are mixed in their views on Black women and their battered environments. They reported that few faith-based communities (churches) received domestic violence training and some views that battered women programs are anti male and keep couples apart. They note that Black women in particular use the church as a coping mechanism. But, when the church blames the victim, some victims may continue to seek pastoral counseling, but others will not

and will continue in silence, leaving the practitioner with the task of advocacy for more community resources for support of these victims.

It thus becomes necessary to ensure that social work practitioners are trained to work competently in the area of sexual assault, especially in the Black community. Church leaders have indicated that they are concerned about Black women and victimization, but they acknowledge that they have not been trained to sufficiently assist their congregation in this area (Williams & Jenkins, 2019). Social work practitioners can begin to interact with faith-based community entities to not only sensitize them about the victims, but also provide training (intervention & prevention) that the ministers and church deacons can utilize within their congregations and communities.

Social workers must continue or must become strong advocates for not only the increased awareness about sexual assault but also become active shareholders in the decision-making process. This can occur with continued meetings with policy and decision makers and lobbyists. American Medical Association (AMA) has one of the strongest lobbying units on Capitol Hill. Social workers must establish a partnership with AMA or begin to become more involved with political entities when decisions are made about marginalized populations. This can begin on the local level with interactions with local political leaders to obtain their views.

CONCLUSION

Black women and girls continue to remain victims of sexual violence due to systemic institutionalized racial and gender based social norms and laws. They face sexual abuse at an alarmingly high rate, but the rate of reporting and seeking help is low due to a number of oppressive barriers. These barriers include social stigmas and pressure related to racial and gender discrimination, financial, and the need to protect Black men. Bandura's social learning theory could help explain the fear and it can be utilized in future research to identify ways to combat the negative learned behaviors that are still being reinforced and passed down in the Black community. More research is strongly encouraged to consider the unique aspects of Black women survivors of sexual assault. Social workers are encouraged to engage in more micro and macro level prevention and intervention strategies with Black women rape survivors. Advocacy should be

extended to more research, both quantitative and qualitative, on what resources can be provided for these victims, the mechanisms that can be used to break their silence, and utilization of an intersectional approach that includes factors unique to Black women. As the church will continue to be the "backbone" of the African American community, there is also the call to action for church leaders to become proactive providers of equal protection for Black women who are victims of rape violence.

REFERENCES

Alvidrez, Jennifer, Lonnie R. Snowden, and Dawn M. Kaiser. 2008. "The Experience of Stigma among Black Mental Health Consumers." *Journal of Health Care for the Poor and Underserved 19(3), 874-893.* https://doi.org/10.1353/hpu.0.0058

American Psychological Association. n.d. "APA Dictionary of Psychology." Retrieved from https://dictionary.apa.org/social-learning-theory.

American Psychological Association. 2014. "Black Boys Viewed as Older, Less Innocent Than Whites, Research Finds. [Press release]. Retrieved from https://www.apa.org/news/press/releases/2014/03/black-boys-older.

Asante-Muhammad, Dedrick, Esha Kamra, and Connor Sanchez. 2022. "Racial Wealth Snapshot: Women, Men, and Racial Wealth Divide." National Community Reinvestment Coalition. Retrieved from https://ncrc.org/racial-wealth-snapshot-women-men-and-racial-wealth-divide/.

Bandura, Albert. 1973. "The Social Learning Theory of Aggression." Pp. 141-156 in *The War System: An Interdisciplinary Approach,* edited by R. Falk and S. S. Kim. Taylor & Francis. N.Y. Retrieved from https://books.google.com/books?hl=en&lr=&id=rGMPEAAAQBAJ&oi=fnd&pg=PA141&dq=bandura+social+learning+theory+1977&ots=StNZHi1Pcz&sig=ywDIGSqd_gh-UuiFBpu7-Up1VlE#v=onepage&q&f=false.

Barlow, Jameta Nicole. 2020. "Black Women, the Forgotten Survivors of Sexual Assault." American Psychological Association. Retrieved from https://www.apa.org/topics/sexual-assault-harassment/black-women-sexual-violence.

Beck, Julie. 2014. "Gender, Race, and Rape During the Civil War. The Atlantic. Retrieved from https://www.theatlantic.com/health/archive/2014/02/gender-race-and-rape-during-the-civil-war/283754/.

Berrey, Stephen A. 2009. "Resistance Begins at Home: The Black Family and Lessons in Survival and Subversion in Jim Crow Mississippi." *Black Women, Gender + Families, 3(1), 65–90.* Retrieved from https://www.jstor.org/stable/10.5406/blacwomegendfami.3.1.0065.

Blackburn Center. 2020. "The Barriers That May Prevent Black Women From Reporting Sexual Assault." Retrieved from https://www.blackburncenter.org/post/2020/02/19/the-barriers-that-may-prevent-black-women-from-reporting-sexual-assault.

Bleiweis, Robin, Diana Boesch, and Alexandra Cawthorne Gaines. 2020. "The Basic Facts About Women in Poverty. Center for American Progress. Retrieved from https://www.american-progress.org/article/basic-facts-women-poverty/.

Campbell, Rebecca, Wenjuan Ma, McKenzie Javorka, Katie Gregory, Lauren Vollinger, and Matt Opsommer. 2020. "Why Do Sexual Assault Survivors Seek Medical Forensic Exams and Forensic Evidence Collection? Exploring Patterns of Service

Needs in a State-wide Study. *Psychology of Violence, 11(3), 1-12.*
https://doi.org/10.1037/vio0000355

Centers for Disease Control and Prevention. 2023. "The U.S. Public Health Service Untreated Syphilis Study at Tuskegee." Retrieved from: https://www.cdc.gov/tuskegee/index.html.

Crenshaw, Kimberle. 1991. "Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color." *Stanford Law Review, 43(6), 1241-1299.*
https://doi.org/10.2307/1229039

Darkness to Light. 2015. "Child Sexual Abuse Statistics Risk Factors." Retrieved from https://www.d2l.org/wp-content/uploads/2017/01/Statistics_4_Risk_Factors.pdf.

Daughtry, Leah. 2021. "Of Impact, Of Influence: The Black Church in Contemporary American Politics." Berkley Center for Religion, Peace, and World Affairs. Retrieved from: https://berkleycenter.georgetown.edu/responses/of-impact-of-influence-the-black-church-in-contemporary-american-politics.

Goff, P. A., M. C. Jackson, B. A. L. Di Leone, C. M. Culotta, and N. A. DiTomasso. 2014. The Essence of Innocence: Consequences of Dehumanizing Black children. *Journal of Personality and Social Psychology, 106(4), 526-545.*
https://doi.org/10.1037/a0035663

Gunderson, Erica. 2020. "Having 'The Talk': How Families Prepare Black Children for Police Interactions." WTTW News. Retrieved from https://news.wttw.com/2020/06/08/having-talk-how-families-prepare-black-children-police-interactions.

Holmes, William. C. 2007. "One-Parent Households Double Risk of Childhood Sexual Abuse. Penn Medicine News. Retrieved from https://www.pennmedicine.org/news/news-releases/2007/march/oneparent-households-double.

Jacobs, Harriet. 1861. *Incidents in the Life of a Slave Girl (pp. 55-57).* Thayer & Eldridge. (Excerpted from The American Yawp Reader). Retrieved from https://www.americanyawp.com/reader/the-cotton-revolution/harriet-jacobs-on-rape-and-slavery/.

Jones, Briona and Steven J. Niven. 2013. "Celia (Missouri)." Enslaved Peoples of Historical Slave Trade. Retrieved from https://enslaved.org/fullStory/16-23-106167/.

Kelley, Shamika M. 2023. "Post-Sexual Assault Decision Making: Centering Black Women's Experiences." *Feminist Criminology, 18(2), 133-155.*
https://doi.org/10.1177/15570851221150912

Khan, Faroque, A. 2011. The Immortal Life of Henrietta Lacks. *The Journal of IMA, 43(2), 93-94.* Retrieved from: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3516052/.

Lloyd, Chrishana M., Sara Shaw, Mavis Sanders, Maria Abdul-Masih, and Catherine Schaefer. 2022. "Reimagining Black Families' Cultural Assets Can Inform Policies and Practices That Enhance Their Well-being." Child Trends. Retrieved from https://www.childtrends.org/publications/reimagining-black-families-cultural-assets-can-inform-policies-and-practices-that-enhance-their-well-being.

Majeed-Ariss Rabiya, Debbie M. Smith, Laila Mohamed, Lauren Wood, and Catherine White. 2023. "The Impact of COVID19 Pandemic and Government Enforced Lockdowns on Levels of Attendance and Context of Sexual Assaults Reported at Saint Marys Sexual Assault Referral Centre. *Journal of Forensic and Legal Medicine, 97, 102550.* Retrieved From: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10245237/.

Mather, Mike. 2023. "Are Black Churches, Once a Civil Rights Vanguard, Losing Importance?" 2023. UVA Today. Retrieved from: https://news.virginia.edu/content/are-black-churches-once-civil-rights-vanguard-losing-importance#:~:text=Despite%20this%20decline%2C%20African%20Americans,churches%20continue%20to%20have%20influence.

Ohio Alliance To End Sexual Violence. n.d. "Sexual Violence & Women of Color: A Fact Sheet [Fact sheet]. Retrieved from https://oaesv.org/wp-content/uploads/2021/04/oaesv-sexual-violence-women-of-color.pdf.

Pathak, Vibha, Jena Bijayini, and Kalra Sanjay. 2013. "Qualitative research." *Perspectives in Clinical Research*, *4*(3), *192.*
https://doi.org/10.4103/2229-3485.115389

Sanders, Jayneen. 2014. "Sexual Predators and the Targeting of Single Parents." The Good Men Project. Retrieved From https://goodmenproject.com/featured-content/sexual-predators-targeting-single-parents/.

Slaton, Brittany C., and April L. Richard. 2020. "Black Women's Experiences of Sexual Assault and Disclosure: Insights from the Margins. *Sociology Compass. Vol. 14 (6).*
https://doi.org/10.1111/soc4.12792

Tamir, Christine. 2022. "The growing diversity of Black America." Pew Research Center's Social & Demographic Trends Project. Retrieved from https://www.pewresearch.org/social-trends/2021/03/25/the-growing-diversity-of-black-america/.

The National Center on Violence Against Women in the Black Community. 2018. "Black women and sexual assault." Retrieved from https://ujimacommunity.org/wp-content/uploads/2018/12/Ujima-Womens-Violence-Stats-v7.4-1.pdf.

Ullman, Sarah. E. and Katherine Lorenz. 2020. African American Sexual Assault Survivors and Mental Health Help-Seeking: A Mixed Methods Study. *Violence against women*, *26 (15-16), 1941–1965.*
https://doi.org/10.1177/1077801219892650

U.S. Census Bureau. 2022. "Historical Poverty Tables: People and Families-1959 to 2021." Retrieved from. https://www.census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-people.html.

U.S. Census Bureau. n.d. "Race." Retrieved from https://www.census.gov/quickfacts/fact/note/US/RHI625221.

Walker, Taylor. 2020. "A Second, Silent Pandemic: Sexual Violence in the Time of COVID-19." Harvard Medical School Primary Review. Retrieved from https://info.primarycare.hms.harvard.edu/review/sexual-violence-and-covid.

Ward, Earlise C. and Susan M. Heidrich. 2009. "African American Women's Beliefs About Mental Illness, Stigma, and Preferred Coping Behaviors." *Research in Nursing & Health, 32(5), 480-492.* Retrieved from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2854624/.

Washington, Toiell. 2022. "Black Women are Constantly Expected to be Strong. It's Taking a Toll." The Boston Globe. Retrieved from https://www.bostonglobe.com/2022/08/09/magazine/black-women-are-constantly-expected-be-strong-its-taking-toll/.

Wickham, Pearl and Joseph K. Hoereth. n.d. "Interventions for Black Women That Are Survivors of Child Sexual Assault." Institute for Policy & Civic Engagement. Retrieved from https://uofi.app.box.com/s/p0vi7lwslwq2ramvl0bxo60bkq32egdr.

Williams, Kiana. 2013. "The Courage to Speak: Breaking the Silence of Sexual Assault in the African American Community." St. Catherine University. Retrieved from Sophia, the St. Catherine University repository website: https://sophia.stkate.edu/msw_papers/275.

Williams, Oliver and Esther Jenkins. 2019. "A Survey of Black Churches Responses to Domestic Violence." *Journal of Social Work & Christianity. Vol. 46, (4), pgs. 21-38.*
https://doi.org/10.34043/swc.v46i4.110

Wilson, Dominique. R. 2021. "Sexual Exploitation of Black Women From the Years 1619–2020. *Journal of Race, Gender, and Ethnicity Volume 10-Spring 2021*. Retrieved from https://digitalcommons.tourolaw.edu/cgi/viewcontent.cgi?article=1079&context=jrge.

Zippia. 2023. "Mental Health Professional Demographics and Statistics in the US." Retrieved from: https://www.zippia.com/mental-health-professional-jobs/demographics/.

Zounlome, Nelson. O O., Y. Joel Wong, Elyssa M. Klann, Jessica L. David, and Nat J. Stephens. 2019. "'No One…Saves Black Girls': Black University Women's Understanding of Sexual Violence." *The Counseling Psychologist, 47(6), 873-908*. Retrieved from: https://journals.sagepub.com/doi/10.1177/0011000019893654.