

The Truth about 'Date Rape' Drugs

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Edited by: Dana English

Please note that 'date rape' will appear in quotations throughout this article because the term 'date' is somewhat misleading. Drug facilitated sexual assault extends beyond the dating scenario to include friends, acquaintances, even strangers.

This article should help clarify the reality of 'date rape' drugs and drug facilitated sexual assault. Although perpetrators of any assault are utilizing power and control to victimize others, it is important to note that perpetrators of this type of assault possess a commanding tool to overwhelm and immobilize their victims. In utilizing substances to facilitate assault, they have the capability to rape and harm their victims, devoid of the risk of rejection. No resistance, no screams = all encompassing control. The drugs they use disable, immobilize and silence their victims. One's ability to sense danger is imperative to protect one's personal safety. The administration of 'date rape' drugs incapacitates this innate sense of security, and with a slip of a colorless, odorless, tasteless weapon; victims never get an opportunity to defend themselves. Although all sexual assaults create enormous trauma for victims and those in their lives, the very nature of drug facilitated assaults create further victimization, based on the reality that victims also may lose memory of the assault, which, in itself, creates additional trauma, leading to further self-blame, frustration, confusion and loss of trust.

The use of 'date rape' drugs continues to be a prevalent issue for those who work with victims of sexual assault. One of the harsh realities involving drug facilitated assaults is that the public often buy into myths around the use of these drugs for facilitating sexual assault. These myths include:

- only specific drugs are used for these crimes;
- such drugs can now be detected when put in a drink;
- if the victim was already consuming alcohol, then it's somehow their fault;
- only strangers will commit drug facilitated assault.

These are just a few, which lead us to shift blame unto the victims of these crimes, to give up ownership of this issue, and to lead us to think that it can't happen to us. The reality is harsh – 'date rape' and drug facilitated assault can happen to anyone, regardless of their gender, age, socio-economic status, etc. Nor does this happen only in 'certain' bars or locations, but throughout the bar scene, at house parties as well as at campus residence parties. Druggings occur with the use of multiple substances, not the least of which is alcohol, which can, and generally does, diminish our ability to take in our surroundings and protect ourselves from assault.

In order to diminish the prevalence of this crime, education and awareness in schools and among the general public is essential, along with community involvement to ensure protection of potential victims.

The Facts

GHB (gamma hydroxybutyrate), Rohypnol, Ketamine and Ecstasy are the widely recognized names when speaking of 'date rape' drugs. It should be noted that these drugs are injected voluntarily by some for recreational purposes, but are also slipped into unmonitored drinks at both bars and house parties to facilitate sexual assault. Alcohol isn't what typically comes to mind, but statistics show that this is the

most frequent drug and preferred avenue for administration of other substances used to perpetrate a sexual assault. Other drugs, when combined with alcohol, exacerbate the effects and are particularly hazardous.

GHB (also known as 'G') is a central-nervous system sedative. Its effects can be noted within 15 minutes after ingestion. It produces drowsiness, dizziness, unconsciousness, respiratory depression and coma.

Rohypnol (also known as 'roofies', 'roche', 'robe', 'R2', 'the forget pill') is a powerful sedative. It leaves a victim feeling intoxicated with slurred speech, unsteady gait and impaired judgment. The effects can often be experienced within 10 minutes and can last for hours.

Ketamine (also known as 'K' or 'Special K') is a disassociate anesthetic agent used in veterinary clinics, which can cause a sense of "separation" from one's body, hallucinations and temporary paralysis.

Ecstasy (also known as 'E', 'X', 'bombs', 'MDMA', 'the love drug') produces confusion, anxiety, increased heart rate, blurred vision and fainting.

Many of these drugs are synthetic and unregulated in their production, and so it's very hard to know if what one buys is in fact what one gets.

Many victims experience the effects of these drugs for hours after ingestion. They may be unconscious for hours and remain dazed and confused for an extended period of time.

Detection of these substances has shown to be extremely difficult. Many are excreted within short time frames and the ability to establish a definite presence of such a drug is exasperating. Urine samples are collected up to 36 hours after the assault, but often victims do not come forward until after this time.

Reporting Issues

Accurate statistics around the prevalence of 'date rape' drugs or drug facilitated assault are almost impossible to gather. General surveys may assist in data collection. Low reporting for sexual assault is highly problematic with less than 10% reporting the crime for the following reasons:

The fear of not being believed or the possibility of interacting with disparaging, critical professionals is often enough to dissuade victims from coming forward. "I can't tell them anything; they will never believe me", is heard frequently by crisis workers. Feelings of self-blame are not uncommon, particularly in cases where the consumption of alcohol, in combination with other substances (voluntarily or not) have caused haziness or complete loss of memory of the actual events. The reluctance to accuse someone without recall of the attack or circumstances surrounding it may further hinder the victim's ability to seek medical attention, thereby affecting reporting patterns.

Due to the anonymous calls received from crisis centres, police, and those who provide medical attention, we recognize that this problem is widespread. One such agency in our province that provides services to victims is the **Sexual Assault Nurse Examiners program**, as part of Eastern Health in St. John's, NL.

Since the inception of the Sexual Assault Nurse Examiners Program in 2005, 40 patients have been assessed. Of these, 27 have been suspected drug facilitated assaults (68%). The victims, or their friends

that accompany them, report either remembering or witnessing a level of “drunkenness” that does not correspond with the quantity of alcohol ingested. Unexplained memory loss, disorientation, waking up in an unknown location or next to a strange person and the presence of inexplicable injuries or pain is frequently the incentive for the victim to seek medical attention. Both men and women have presented at emergency for treatment following a sexual assault.

With the particulars of the attack and the description of the perpetrator being the basic fundamentals for any rape investigation, the victim’s inability to provide this essential information will, through no fault of their own, impede the interview process and the medical/forensic assessment.

Summary

For all sexual assault victims, the loss of control is distressing. Whether a memory exists or not, the feeling of violation and powerlessness is evident and genuine. Many victims have the recurring and disturbing recollection of the attack; they relive the events in their sleep. Those that have been subjected to a ‘date rape’ substance and have absolutely no recollection, have another nightmare to deal with; “what happened? what did they do to me?” These will be questions almost certainly never answered. Many victims have articulated the anguish they suffer due to the lack of recall.

For these reasons, ensuring a secure, nonjudgmental approach to victims of sexual assault is crucial.

Actions we can take as a community include raising awareness, educating ourselves, on the dynamics of this crime. We must learn how to realistically protect ourselves, while hand-in-hand educate those who are possible perpetrators of this crime. It is not only for us to protect ourselves, but also to educate that slipping a drug to someone for the purpose of sexual assault is a criminal offense, and will create lifelong trauma for the victims. We must engage as community members to change the face of sexual violence.

There are programs such as the Sexual Assault Nurse Examiners program, the NL Sexual Assault Crisis & Prevention Centre, and the Coalition Against Violence, which can help direct those who need not only direct services in the aftermath of assault, but can also lead our communities in gaining awareness to help prevent ‘date rape’ druggings.

Formerly the Coordinator of the NL Sexual Assault Crisis & Prevention Centre, Tracy Duffy presently works as a counselor with Unified Family Court. Tina Whalen coordinates the Sexual Assault Nurse Examiners Program, Eastern Health.

For more information on this or related issues, please contact:

NL Sexual Assault Crisis & Prevention Centre

24 hour toll-free crisis, information and support line:

Province wide - 1-800-726-2743

St. John's region - 726-1411

Sexual Assault Nurse Examiners Program

(709) 777-5865

NL Sexual Health Centre

(709) 579-1009

Toll-free line 1-877-NO-MYTHS (1-877-666-9847)

TIPS TO MINIMIZE YOUR RISK AND INCREASE YOUR SAFETY:

- If you are heading out for drinks, remember that alcohol impairs perception and judgment. So, have a plan with friends to stick together, travel in groups, have a signal that you can exchange with a friend if something is wrong, and plan what you will do if something seems to go wrong. Use the buddy system.
- Watch your drink as it is being poured or made for you. Don't drink it if you didn't see it being prepared.
- Avoid drinking from punch bowls; You don't know what has been put in the punch.
- If you move around, take your drink with you. Never leave it unattended, including with friends. (If they are drinking, they may be too impaired to protect your drink; or it may be someone with your group who is planning to commit an assault.)
- These tips apply whether you drink alcohol or non-alcoholic beverages.
- If you are drinking alcohol and you feel "too drunk" too fast for the amount of alcohol you consumed, GET HELP IMMEDIATELY. You may have been drugged and you may be close to passing out.
- If you know or suspect you have been drugged and sexually assaulted, call 1-800-726-2743 for 24/7 rape crisis support and information about your options. The crisis volunteer can listen, provide support, and help you sort through what you know or remember so that you can make decisions about your next steps.
- TRUST YOUR GUT. If the situation feels uncomfortable or like something is not right, you are probably right. Seek help. It is better to be safe in this situation.
- Remember, most sexual assaults are perpetrated by SOMEONE YOU KNOW & TRUST (your date, an acquaintance, friend of a friend, the person who offers to walk you home so you will be safer), NOT the stranger in the bushes. (We still encourage you to take precautions for your safety -- not walking alone at night is always smart, but stay in larger groups.)