First Rape Crisis Centre, 1976

ALISON DIDUCK

In November 1974 a group of approximately 40 women met to discuss rape with a view to 'doing something about it' ... In the weeks that followed the group roughly split into two – those who wanted to form a political group and those who wanted to set up a Rape Crisis centre.

The early work of these remarkable homemakers, lawyers, journalists, doctors, students, nurses and unemployed women was difficult. They needed first to secure premises, charity status and funding. They then invited counsellors from other organisations and speakers from the legal and medical professions to help them realise their goal. On 15 March 1976 they opened in North London, the first Rape Crisis Centre (LRCC) in Britain. Its aims were to offer 'sympathetic non-judgemental support, advice and information on police and legal procedures for those women who chose to report', and ultimately, 'to help raped women regain their strength as individuals'. The original LRCC collective of about 10 women maintained a 24-hour telephone line and offered face-to-face support and medical referrals. They engaged in research, public education and training of new support workers. In the first 19 months of operation they received 84 calls and by 1978 were receiving about 25 calls per week.

The significance of the achievement of this small collective of women, and the anti-rape movement of which they were a part, is difficult to overestimate. Not only did the LRCC provide an essential and unique service for survivors at a time when the social and legal culture of rape was extremely hostile to them, it paved the way for Rape Crisis Centres across the UK. Further, and crucially, it did all of its work in a way which was true to its beliefs: it merged 'theory and practice' by operating as a feminist collective committed to eliminating hierarchies of power from the ground up.

I. Context

Prior to the Sexual Offences (Amendment) Act 1976, the substantive law of rape was contained in section 1(1) of the Sexual Offences Act 1956, which stated only that 'It is a

1 Rape Counselling and Research Project, First Annual Report, 1977, 2.
2 Victoria Green, 'Crisis Centre Opens' (1976) 46(17) Spare Rib 17.
3 Rape Counselling and Research Project, n 1 above, 12.
4 Romi Bowen and Bernadette Manning, 'Writing Our Own History' (1987) 10 Trouble and Strife 49, 50.
5 Helen Jones and Kate Cook, Rape Crisis Responding to Sexual Violence (Russell House Publishing, 2008) 3.
felony for a man to rape a woman. The actual definition of the offence, unlawful sexual intercourse with a woman without her consent, was derived from common law. Like all criminal offences, rape consisted of an actus reus (a guilty act) and a mens rea (a guilty mind). Like now, the difficulty with prosecuting rape usually lay in establishing mens rea. In 1975 that difficulty was exacerbated by the House of Lords decision in DPP v Morgan, which established that a man might be acquitted of rape if he honestly believed his victim was consenting, regardless of the reasonableness of his belief. Further at this time, because complainants were not granted anonymity in court proceedings, many were named in the press. Cross-examination on their character, reputation and previous sexual history was freely permitted. Estimates of the number of rapes actually reported to police ranged from one in three to one in 99, and of those that were prosecuted, the conviction rate was poor. Perhaps for these reasons, and also because few women talked about their experiences because being a victim of rape was stigmatising, rape was assumed to be rare. When it did occur, it was assumed always to be graphically violent and to be committed by strangers. The newspaper reports in the ‘sexually liberated’ 1960s and 1970s from which much of the public received its information offered florid accounts of rape and sexual humiliation, often as a means of titillation.

The legal and social situation for women was much the same in other western countries. Indeed, the anti-rape movement in the UK began in the United States. From around 1967 women involved in the Women’s Liberation Movement in the US began to meet to talk about their experiences in what became consciousness-raising groups. Women spoke of their own violations and came to discover the personal was indeed political. From consciousness-raising came the first public ‘speak out’ on rape in New York in 1971. Its effect was powerful. It galvanised women’s activism and organisation around rape. Women began to talk about and, importantly, to write about and study rape: Susan Brownmiller’s ground-breaking work showed that rape was not a rare psychologically aberrant act; Louise Armstrong brought to light the reality of child sexual abuse; and Diana Russell gave us the politics of rape from survivors’ perspectives. From feminist consciousness raising, ‘speak outs’ and women’s writing came the anti-rape movement and a new theory and politics of rape. The first Rape Crisis Centre in the US opened in Washington DC in 1972. The idea spread quickly. By 1973 15 other centres had opened in the US and the UK anti-rape movement was not far behind. As the women involved in the original London Rape Crisis collective demonstrated, it too grew out of consciousness raising and the commitment not only to offering support for victims of rape, but also to their feminist politics.

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6 See further Section 1 of the Sexual Offences Act 2003.
10 Jones and Cook, n 5 above, 5.
11 Walby, Hay and Soothill, n 9 above, 95.
12 Susan Brownmiller, Against Our Will: Men, Women and Rape (Simon and Shuster, 1975).
15 Jones and Cook, n 5 above, 7.
II. The Landmark

The London Rape Crisis Centre was feminist and it said so. Its feminist method of collective working and consciousness raising came together to create a vital and radical form of support for women who had experienced rape. Its core values included believing women, working with women’s rather than the law’s understanding of rape, not offering ‘counselling’ in the therapeutic sense, but rather providing non-directional support and respecting women’s confidentiality and autonomy. For the first few years it maintained a 24-hour telephone service, often with unpaid workers sleeping overnight in the office. Workers took calls from women who had just been raped, women who had been raped years ago and women who had been raped as children. They saw women face to face at the Centre and at the women’s own homes. All workers received training for the support work they engaged in. And these early anti-rape workers were clear that they were providing ‘support work’ and not counselling or therapy. The ethos was that women who had been raped were not ‘ill’ and did not require healing; they wanted support and information outside of a medical model. Indeed, Rape Crisis Centre workers were reluctant to use the word ‘victim’ at all.

As a result of their roots in feminist consciousness raising, which understood rape as only one form of violence experienced by women on an everyday basis, the LRCC made links with other organisations devoted to combatting all forms of violence against women. They engaged with Women’s Aid, the new refuge movement which worked with survivors of domestic violence, with anti-porn and anti-street harassment campaigns, and with ‘incest survivors’ groups. Sometimes this work took the form of direct campaigns and sometimes public education. Indeed, both were as important a part of the LRCC’s mission as survivor support work.

Public education took the form of speaking to different lay groups. Unlike the early relationships US Rape Crisis Centres built with police, prosecutors and medical professionals, however, LRCC’s collaboration with professional groups was less successful in these early days. While some discussions were fruitful with forensic medical practitioners, the London Rape Crisis Centre faced open hostility from the police. The Metropolitan Police refused to recognise Rape Crisis and instructed its officers not to refer women who had been raped to the LRCC. Indeed, the LRCC was informed formally by the Commissioner that there would be ‘no useful purpose served’ to arrange a meeting between the Met and the LRCC to discuss the possibility of establishing a working relationship between them.

Notwithstanding LRCC’s difficult early relationship with law enforcement and with government, however, it carried on its campaign to reform the law and procedure. It submitted written evidence, for example, to the Advisory Group on the Law of Rape, chaired by Rose Heilbron, the first woman judge to sit at the Old Bailey, to the Criminal Law Revision Committee in 1977 and to the Royal Commission on Criminal Procedure in 1978.

16 Rape Counselling and Research Project, n 1 above; Bowen and Manning, n 4 above, 52–53.
17 Rape Counselling and Research Project, ibid.
18 See further First Women’s Refuge, 1971.
19 Rape Counselling and Research Project, n 1 above, 15; London Rape Crisis Centre, Second Annual Report (1978) 10.
20 Rape Counselling and Research Project, ibid, Appendix 7; London Rape Crisis Centre, ibid, Appendix III.
III. What Happened Next

Shortly after it began, the London group offered assistance to other groups around the UK and Ireland who wished to start Rape Crisis Centres and the movement grew quickly. Glasgow Rape Crisis opened in 1976, the Kent Rape Counselling and Research project started in 1977, Tyneside Rape Crisis and Edinburgh Rape Crisis opened in 1978 and Birmingham Rape Crisis and Dublin Rape Crisis in 1979. By 1988 there were 62 rape crisis groups across the UK and Ireland. Most of these groups relied primarily upon charitable and local government funding, although Irish centres have always received state funding. Many UK groups were reluctant originally to accept central government funding for fear it would necessitate a change in organisational structure from their non-hierarchical ethos. As demand for their services grew, however, some groups abandoned their women’s liberation focus in favour of a model of partnership-based service provision. Some changed their names from Rape Crisis to Sexual Assault Support and began to offer services for men. Some local centres began to enjoy good relationships with the police, but an edgy relationship with the police remained for others.

Difficulties with the police were highlighted in 1982 after the BBC broadcasted a fly-on-the-wall documentary supported by the Home Office and the Thames Valley Police who wished to demonstrate to the public their everyday work and procedures. In an episode entitled ‘A Complaint of Rape’ police officers were shown subjecting a complainant to extreme bullying and hostile questioning. To the surprise of the police, the public were shocked and public outrage led directly to changes in police and forensic medical procedures. Rape Crisis Centres, however, were not a part of many of these changes and relations with the Home Office remained difficult, exemplified by Ian Blair’s 1985 report in which, unlike in the US, he saw no possibility of a cooperative relationship developing in the UK between the police and Rape Crisis Centres.

Another result of the BBC documentary was the establishment by Dr Raine Roberts of the first Sexual Assault Referral Centre (SARC) in Manchester in 1986. The St Mary’s Sexual Assault Referral Centre provided coordinated forensic, counselling and medical aftercare service to survivors of rape or sexual assault. The now 36 SARCs in the UK continue this service, for both men and women. SARCs, primarily funded by the police and the NHS, are based on a medical model of rape and work closely with the police. Perhaps because of these differences in their philosophies and service delivery, the early relationship between the original Manchester SARC and Manchester Rape Crisis was difficult. The Manchester Rape Crisis collective was not invited to be a part of the set-up of the SARC and they, like many SARC/RCC relations, continue to operate separately.

SARCs appear now to be the government’s preferred targets of funding for ‘victim-centred services’. SARCs are aimed at improving criminal justice. 80 per cent of their ‘clients’ come from police or criminal justice referrals. These users are more likely to be the victims of recent sexual violence, to be assaulted by strangers and to be assaulted in public places. In contrast, the number of RCCs has fallen over the years. RCCs have twice the number of

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21 See further Section 5 of the Criminal Law (Rape) (Amendment) Act 1990.
23 Ian Blair, Investigating Rape: A New Approach for Police (Croom Helm, 1985).
self-referrals as SARCs. These women are twice as likely to be assaulted in domestic settings and by family members or partners.\textsuperscript{24} Further, RCCs’ woman-centred focus and independence from statutory agencies is both an advantage and a disadvantage when seen beside SARC. On the one hand, RCCs are seen as a non-mainstream space where survivors can tell their stories, yet on the other, their non-alignment with other agencies means they suffer from lack of or late referrals, to the detriment of some women. The existence of SARC has affected the work that some RCCs are able to do, but despite the variable relationship between individual SARC and RCC, most will cross-refer, as it is clear there is a need for the work done by both. And, while government funding and expansion is focused now on SARC, it is probably true to say that RCCs laid the foundation for the victim-led work that SARC now do.

IV. Significance

Despite a sometimes rocky road, UK RCCs navigated their first 40 years more or less successfully, working through different philosophical and political challenges to ensure their crucial work continues. In 1993, for example, after much negotiation, a Rape Crisis Federation was created with Home Office funding, bringing together 35 Centres. Not all centres were agreed on the benefits of federating, however, and indeed London Rape Crisis did not participate. In 2003 the Home Office withdrew its funding, but the RCF’s website continued and with a small grant, again from the Home Office, Rape Crisis England and Wales was created. Today, there are 45 independent member RCCs in Rape Crisis England and Wales, which, according to its website, is ‘proud to call itself’ a ‘feminist organisation’\textsuperscript{25}

And so, in the 40 years since London Rape Crisis opened its doors, much has changed. Organisational and structural changes, changes in funding and partnership collaborations have meant that only a few RCCs have maintained the original LRCC collective model, for example. Another change is that unlike in 1976, it would be almost unthinkable today for consultations on police procedure, criminal justice or law reform to proceed without Rape Crisis involvement. On the other hand, some things remain the same. Funding for rape crisis remains perpetually uncertain. Many centres are facing closure, despite the number of calls and referrals for service which show that the incidence of sexual violence remains stubbornly and depressingly high. In 2016–17, Rape Crisis England and Wales reports statistics from the Ministry of Justice, Office of National Statistics and Home Office that:

- Approximately 85,000 women and 12,000 men are raped in England and Wales every year; roughly 11 rapes (of adults alone) every hour;
- 1 in 5 women aged 16–59 has experienced some form of sexual violence since the age of 16;
- Only around 15 per cent of those who experience sexual violence choose to report to the police; and

\textsuperscript{24}Amanda Robinson and Kirsty Hudson, ‘Different yet complementary: Two approaches to supporting victims of sexual violence in the UK’ (2011) 11(5) Criminology and Criminal Justice 515, 530.

• Approximately 90 per cent of those who are raped knew the perpetrator prior to the offence.26

Rape Crisis England and Wales is the legacy of the London Rape Crisis Centre. It exists ‘to promote the needs and rights of women and girls who have experienced sexual violence, to improve services to them and to work towards the elimination of sexual violence’.27 Each of its member centres still provides specialist counselling, advocacy and information services in a women-only safe space. They will refer men to other services with which they coordinate. Rape Crisis England and Wales publish their own reports, respond to other reports, and continue their pioneering work of campaigning, educating, research and consultation. Similar work continues among Rape Crisis Scotland’s 14 member centres and the Rape Crisis Network Ireland’s 11 centres. Most importantly, RCCs across the UK and Ireland are there for women. Member centres of Rape Crisis England and Wales alone respond to an average of over 3000 calls per week providing essential help to thousands of rape survivors, 95 per cent of whom are female. In 2015–16 over 58,000 individuals in England and Wales received an on-going Rape Crisis service of more than 350,000 sessions of specialist support, including advocacy, emotional support and counselling.

The Women’s Liberation Movement, and the anti-rape movement and Rape Crisis Centres around the world to which it gave birth, changed the way rape was understood socially and legally. These centres helped to influence police, medical and criminal justice procedures and substantive law. They have assisted and supported millions of individual women. They are a truly remarkable example of women working together to improve women’s lives. The commitment of the original London Rape Crisis Collective and the thousands of women it has continued to inspire to do this work are both moving and powerful.

Further Reading

• Susan Brownmiller, Against Our Will: Men Women and Rape (Simon and Shuster, 1975).
• Helen Jones and Kate Cook, Rape Crisis, Responding to sexual violence (Russell House Publishing, 2008).
• Liz Kelly, Surviving Sexual Violence (University of Minnesota Press, 1988).

27 Rape Crisis England and Wales, ‘Who we are and what we do’: https://rapecrisis.org.uk/historyofrapecrisis.php.