

Therapeutic and forensic medical responses for adults affected by sexual violence.

Contributed by Dr Christine Foley, September 2016.

The aim of this section is for all Crisis Support providers to be aware of the need for core competencies in:

- Knowledge about medical forensic services and therapeutic care
- Fostering good working relationships with SAATS providers in their areas
- Providing effective support and advocacy for their clients with both decision making and during the medical assessments
- Being aware of and addressing the many myths, which exist around both medical and forensic care and the effects of sexual violence on an individual's health.

All Crisis Support Services should have knowledge and understanding regarding

1. The medical and forensic roles in responding to Sexual Violence
2. The specifics of accessing and working with the local providers of this care.

This requirement reflects the **Tripartite Response** at a national and local level. Tripartite means Crisis Support, Police and Health working collaboratively. This knowledge enables all those affected to be able to access both accurate information regarding their choices and ensures that all co providers are working together to provide the best possible care.

Sexual Abuse Assessment and Treatment Services (SAATS)

Nationwide, SAATS provide therapeutic and forensic medical responses to adults who have been sexually assaulted. All areas should have access to a local service. SAATS operate on a national contract funded by ACC, Ministry of Health and the NZ Police. It is administered by ACC and channelled through all District Health Boards, so all areas should have access to a local service.

There are various models for this service contract and delivery around NZ. SAATS commenced in 2008 and is still in a development stage with respect to the range and availability of services able to be provided at a local level. All SAATS provide access to quality forensic and medical care for those who are reporting sexual assault to the Police. Most are also able to provide care to any adult who has been sexually abused or assaulted, whether recently or in the past. Importantly, this includes all those who currently are not wishing to report, and it does not matter how long ago the assault or abuse happened.

All SAATS are required to work together with their local Crisis Support Services. This includes having a Crisis Support person present at any first appointment, whenever this is possible. Crisis Support is considered an essential part of the medical response to sexual assault.

All clinical staff (doctors and nurses) working in SAATS are **DSAC** trained. **DSAC** stands for **Doctors for Sexual Abuse Care**. This is the professional organisation providing training, support and accreditation for all those working in SAATS. It is important to understand that DSAC is not a Service Provider

You need to know what your local SAATS can provide and what the age limits are for which service to access. This varies around the country.

All SAATS see anybody regardless of gender, age (cut off ages vary in local areas-see above), sexual orientation, ethnicity, disability or residential status.

Information about local SAATS

All SAATS will be expanding their presence on the internet over the next few years, both via more extensive websites for each service and a national SAATS website.

In the meantime, see below for information about Cambridge Clinic in Canterbury

<http://www.cambridgeclinic.co.nz/>

And the Auckland service at Pohutukawa Clinic

<http://www.ashs.org.nz/pohutukawa.html>

Acute Care – options when the assault is recent

All options within a SAATS include attention to and prioritising of a person's therapeutic care.

This means that the person always has control over what happens. They will have access to all needs they have to assist in their recovery.

This includes –

- emotional support,
- assessment and treatment of health conditions including injuries,
- access to emergency contraception or prevention of pregnancy,
- sexual health care, including prevention of sexually transmitted infections,
- assessment of immediate and on-going needs for support and safety,
- appropriate referral to other agencies.
- follow up care as indicated by the needs of each person.

Forensic Medical Assessment

This is an assessment where in addition to all the usual therapeutic care; the person is able to have the physical exam documented and evidence collected to assist with the reporting and investigation of an alleged assault to the NZ Police. This assessment usually takes around 2 hours but can take up to 3 hours or longer in some cases. The person's consent can be withdrawn at any stage. This exam can usually be done up to 7 days after a sexual assault.

“Just in Case” Forensic Medical Assessment

This is the same as a Forensic Medical Assessment but the documentation and any evidence collected is kept secure until the person has made a decision whether to proceed with Police reporting or not.

This can be a good option for those who are undecided about reporting and wish to leave their options open. People who have already spoken to the Police can also choose to have a “Just in Case”, if they need more time to consider the decision.

This exam can usually be done up to 7 days after a sexual assault.

NOTE-this “Just in Case” option is not necessarily available in all areas in all cases. You must know what your local SAATS is currently able to provide. This will change over time as SAATS resourcing improves, but means that at this time you cannot offer this option unless you know it is possible.

Acute Medical Assessment –Therapeutic Medical

This is an assessment, which provides all aspects of therapeutic care. Most SAATS will be able to offer a timely appointment and/or provide advice to another health care practitioner.

Non Acute Care – options when the assault was in the past

All SAATS will either be able to provide or facilitate access to a non-acute medical assessment. The person will be offered information on what can be provided and will always have control over what happens.

Many people who have experienced sexual assault or abuse in the recent or more distant past have health concerns, which a trained clinician (nurse or doctor) can assist them with. This can be anything from concerns that they have been damaged in some way, to worries about their sexual health, or difficulties in having intimate genital exams, to mention just a few. All SAATS will work together with Crisis Support with these types of assessments wherever possible.

Some of the myths about sexual violence and the medical process

This will be a dedicated section to be added at a later date.

For now some examples of common myths are-

- You can only see a doctor/nurse if you report to the Police.
- The doctor/nurse will be able to tell you if any sexual contact occurred.
- The doctor/nurse will be able to tell if you are a virgin or not.
- Once you have said Yes to a Forensic exam you have to go through with it.
- If the genital exam is normal, this means a sexual assault did not happen.

Helpful links

www.justthefacts.co.nz

www.whoareyou.co.nz
www.areyouok.org.nz
www.sexrespect.co.nz
www.dsac.org.nz

Hymen pamphlet

<http://www.dsac.org.nz/documents/patient-brochures/Te%20Puaruruhau%20Hymen%20Pamphlet.pdf>

Summary

- It is essential that all Crisis Support service providers are able to provide accurate information about medical services so that the person is able to make an informed choice.
- This information must include accurate knowledge about what options are available in your local area.
- To achieve this, all Crisis Support services should be working in cooperation with their local Medical and Forensic care providers –SAATS.