Forensic Medical Examination and Sexual Assault Referral Centre (SARC)

A forensic medical examination is an examination looking for injuries and taking samples (to look for DNA evidence) that may be used as evidence in a police investigation and that could be used in court. You can go to a SARC to have these samples collected (the samples can include clothing and swabs).

You do not have to report to the police to have the forensic medical examination done and the evidence collected can usually be stored until you consider all your options.

Forensic evidence is always better if it is collected as soon as possible after the assault. The SARC may also be able to organise anonymous reporting of the rape or assault to the police, where information of what happened is given to the police for their intelligence but your name and contact details are withheld. Details that you tell us about the incident can be documented and shared with police with your consent if you later decide to report the crime.

The SARC is a place where anyone irrespective of gender, age or sexuality who has recently experienced sexual violence can access support or services (and can sometimes access counselling even if the assault was a long time ago). The sexual health clinic can call the SARC for you, or you can call yourself to arrange an appointment. If you are unsure at this stage, your local Sexual Health Clinic may be able to offer you an Early Evidence Kit. This consists of a small range of swabs and urine sample collection. These tests do not require intimate physical examination. The kits can be stored until you have made a decision about police reporting.

If you are attending a SARC very soon after an assault - try not to wash, shower or bathe in order to preserve DNA evidence. If there was contact with your mouth try not to eat, drink or brush your teeth. If you are able to, bring along clothes you were in at the time (preferably unwashed) along with any sanitary wear you may have been using. This may not be possible in many situations.

Police

It is your choice whether you wish to report the assault to the police or not. If you have attended a Sexual Health Clinic, they can help you contact the police to arrange for a specially trained officer to attend to take a statement and take you to the nearest SARC if you decide to have a forensic examination. The police will be able to take you to the nearest SARC where you will have a more formal forensic examination and provide

a statement. A support worker or ISVA (see abbreviations section) can support you through this. If you need to, ask for a rest before or during the time you are giving your statement. If you are worried about going to the police, it may be useful to talk to an ISVA first.

List of contacts for help and support

Rape Crisis England and Wales (for women and girls) www.rapecrisis.org.uk | Tel: 0808 500 2222

Rape Crisis Scotland (for all survivors) www.rapecrisisscotland.org.uk | Tel: 0808 801 0302

Nexus (Northern Ireland) (for all survivors) www.Nexusni.org | Tel: 0289 032 6803

The Survivors Trust www.thesurvivorstrust.org | Tel: 0808 801 0818

The Survivors trust Wales www.thesurvivorstrust.org/wales | Tel: 0808 801 0818

Galop (LGBT+ anti-violence charity) www.galop.org.uk | Tel: 0800 999 5428

SurvivorsUK (for male survivors) www.survivorsuk.org | Tel: 0203 598 3898

Safeline (for men, women and young people) www.safeline.org.uk | Male Survivor's Helpline: 0808 800 5005 Young People's Helpline: 0808 800 5007

Information and support for friends and family of a survivor: www.rapecrisis.org.uk/get-help/supporting-a-survivor

To find a Sexual Assault Referral Centre (SARC) near to you:

Go to www.nhs.uk/Service-Search and search: 'Rape and sexual assault referral centres'

To find a Sexual Health Clinic near to you: Go to www.nhs.uk/Service-Search and search: 'Sexual health services'

In the event of an emergency call 999.

This leaflet was produced by the Clinical Effectiveness Group of the British Association for Sexual Health and HIV (BASHH). The information in the leaflet is based on the 'British Association for Sexual Health and HIV National guidelines for the management of individuals disclosing sexual violence in sexual health services (2022)' published by BASHH.

For more information regarding BASHH: www.bashh.org/guidelines

The leaflet was developed following The Information Standard principles developed by NHS England.

For more information: www.england.nhs.uk

If you would like to comment on this leaflet, e-mail us at: admin@bashh.org.uk. Please type 'Sexual Assault PIL' in the subject box.

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Please remember

It is not your fault

You are not alone
Support is available if and when you need it
You are in control of what happens next
Be kind to yourself

Rape or sexual assault is when a sexual act occurs without a person's consent. This includes situations where people are unable to give consent such as being asleep or under the influence of alcohol or drugs.

Rape and sexual assault is common and can happen to anyone regardless of age, gender identity or expression or sexual orientation.

People react differently to rape or any kind of sexual violence. There is no right or wrong way to think or feel about the situation.

This information is to help you make sense of how you feel, and to guide you in making choices about your health. You can talk in confidence to the healthcare team at your local sexual health clinic and there are contact details of support agencies you may wish to access at the end.

Everyone has different priorities following sexual violence. The areas covered here may not all be relevant to your needs. You may have other worries/concerns not addressed in this leaflet that you may wish to discuss with your healthcare team or a specialist support service.

Topics covered in this leaflet

· Emotional Health · HIV and Hepatitis B

· Injuries and Pain · Pregnancy

Support & Advice
 Sexual Health and
 Forensic Medical Examination
 and Sexual Assault Referral Centre

Sexual Relationships · Police

Abbreviations

SARCIVSALGBTISexual AssaultIndependent Sexuallesbian, gay, bisexual,Referral CentreViolence Advocatestransgender, and intersex

Emotional Health

Everyone responds in a different way to trauma. There is no right or wrong way to feel. Initially, after an assault you may experience shock, numbness or feel completely overwhelmed. You can ask for support from your local sexual health clinic, your GP or you can contact your local sexual assault referral centre (SARC) or other sexual violence support organization e.g. Rape Crisis. There will always be someone you can talk to and you can tell them as much or as little as you like. It is important to reach out for help if you feel that you cannot cope.

Injuries and pain

Call **999** and ask for an ambulance if you need urgent medical care, for example if you have significant pain or bleeding. You do not have to tell the medical staff what has happened although they may be able to provide better care for you if you do.

Support & Advice

Independent Sexual Violence Advocates (ISVA) are specially trained professionals who can provide emotional support and advice following sexual assault. They can support you whether you choose to involve the police or not.

A local sexual violence support organization e.g. a sexual assault referral centre or charity may have an ISVA. Sexual Health Clinics can provide you with their contact details or alternative support. Some ISVA/support services are specifically there for all men and LGBTI people who have experienced sexual violence.

Sexual Health and Sexual Relationships

Thinking about the risk of sexually transmitted infection (STI) soon after an assault can be very difficult but it is important that you get prompt advice to reduce the risk of developing any problems. STIs can be caught from vaginal, oral or anal sexual contact from someone who has an infection. In order to provide you with the best treatment you may be asked some intimate questions.

Some STIs don't have obvious symptoms which is why it is important to be screened even if you don't think you have any infection. Most STIs can be treated easily and effectively but some STIs can cause serious complications if they are not treated. Sexual Health Clinics will advise you about screening options and you can choose whether you want an examination, or whether you prefer to take swabs yourself. Blood tests may also be offered for infections such as syphilis, HIV and hepatitis.

Whether it is your partner or someone else who has assaulted you, it can sometimes be difficult to have consenting intimate relationships or to be alone with someone else following sexual violence. This is a very common response for survivors. If this happens there is support available.

HIV and Hepatitis B

HIV is an infection that can sometimes be passed on through sex without a condom. The chances of catching HIV from a one-off encounter are low but a healthcare professional will assess this risk with you, and if it's felt appropriate will offer you PEP (Post Exposure Prophylaxis). This is a 4-week course of treatment that will reduce the risk of you catching HIV. It must be started as soon as possible and up to 72 hours after the assault. You may experience some minor side effects whilst taking PEP but you will be monitored closely by your local clinic. PEP can be given in Sexual Health Clinics, Accident & Emergency (A&E) departments and SARCs.

Hepatitis B is an infection that affects the liver. The infection can be transmitted through unprotected sex. At the Sexual Health Clinic we offer vaccination against this infection if the sexual contact occurred within the last week. If you know the person who had sex with you has this infection, it is important to seek medical help urgently as other treatments may be considered.

Pregnancy

If you think you might be at risk of pregnancy, you may be offered emergency contraception. There are two main types of emergency contraception and these can be obtained from most Sexual Health Clinics, many pharmacies and GPs or A&E. An IUD (intra-uterine device often called a copper coil) is known to be the most effective way of reducing pregnancy risk and can be used in most cases up to 5 days after sexual contact or around 19 days after your period started depending on your normal cycle length. The other option is a tablet ('morning after pill') that can be given up to 5 days after the sexual contact. If both methods are suitable the final choice of the method used is yours.

If you are pregnant and think this is a result of an assault, you can talk this through with a healthcare professional in the Sexual Health Clinic. If you do not wish to continue with the pregnancy arrangements can be made to refer you to a termination service.