Sexual Assault and Travellers

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Declarations of Interest

Commercial Interests Disclosures

Sexual Health

...a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.

(World Health Organisation, 2006)

Sequelae of Sexual Violence

Medical
Physical Injuries
Sexually Transmitted Infections
Pregnancy
Gynaecological complications

Psychosocial
Higher prevalence of mental health issues
High rates of social isolation
Impact on family, partner and friends
Effects on children of witnessing sexual violence

Anyone can be a victim of sexual crime

In Ireland

- more than 1 in 3 women experienced contact sexual violence in her lifetime
- more than 1 in 5 men experienced contact sexual violence in his lifetime

Only 1% of men and 8% of women reported their experiences to law enforcement with slightly higher rates of reporting to medical professionals and counsellors/therapists

Why might travellers be at increased risk of sexual assault and its sequelae?

We are more likely to be sexually assaulted or raped by someone we know

Factors in travel that can make us more vulnerable to opportunistic sexual violence:
- Perpetrators choose ‘easier’ targets
- Potentially weaker if you are unsure of your environment – checking maps on your phone on the street, carrying conference bag/materials/staying in conference hotel
- May unwind with alcohol or recreational drugs
- Be unsure of cultural norms and stand out or be targeted

Factors in travel that can make us more vulnerable to sequelae of sexual violence:
- Lack of support from friends and family
- Delay in return to “safe home”
- Additional stress of judicial process in foreign country

What will you need if you are sexually assaulted while travelling to this conference?

Professional Medical and Forensic Care in a safe, supportive, compassionate environment

Armed with the knowledge of the potential health risks from sexual violence that you may encounter during your travel, it is important to be prepared.

Time is of the essence

Medical needs always take priority over forensics sampling

- First Aid: recognition, management and documentation of injuries
- Forensic: examination and sampling with preservation of the chain of evidence
- Emergency contraception: post-exposure prophylaxis
- Psychosocial support

Case 1: Redacted content for distribution

Amanda* is 23 yo American female who presented to Galway SATU in the summer of 2017* having arrived in the city that day by bus from Belfast, Northern Ireland.

Redacted content for distribution
Examination

Medical stability always takes priority over forensics.

- Physical top to toe examination
- Genital examination
- Body diagrams
- Colposcopy, photodocumentation
- STI screening (if assault > 14 days ago)

Absence of injury does not mean assault did not happen, presence does not imply that consent was lacking. Presence or absence of injury frequently impacts on decision making.


Forensic samples

Early Evidence Kit may also be used prior to patient attendance.

Medical management

- Emergency contraception:
  - Levonorgestrel up <72 hours
  - Ulipristal <120 hours
  - Refer for Copper Coil
- STI Prophylaxis
  - Azithromycin 1g STAT
- Hepatitis B Vaccination
- HIV Prophylaxis
  - Tenofovir/Emtricitabine/Raltegravir
  - Condoms supplied and advised re: safe sex in window period

2018:

- 6% SATU patients prescribed HIV postexposure prophylaxis
- 20% of SATU patients who are prescribed HIV PEP are male
Aftercare

Follow-up appointments
- STI screening
- Hep B vaccination

Patients may prefer to go to their family doctor

Psychological care provided by Rape Crisis Centre

Case 2: STI clinic

A 33 year old Japanese man living in the UK and visiting Ireland for a holiday was brought to the STI clinic by a Rape Crisis Counsellor. He did not want to be forensically examined or make a report to the Gardaí. He alleged that about 55 hours previously he had been anally raped.

Considerations when seeing patients from abroad

Supporting patients safe discharge
- Contact with consulates

Legal implications if assault occurred in a different jurisdiction
- Allow your legal report to be released with the patient’s permission

Arranging follow-up care
- Letter for family physician at least

Advice for patients: Before travel

- Anyone can be a target of sexual assault or rape perpetrators can be strangers, recent acquaintances or known persons from any country

- Research before you travel
  Save contact details for your consulate and local emergency service numbers

Use of azithromycin chlamydia prophylaxis has increased from 23.4% of those attending in 2009 to 63% in 2016.

Illustration by Chris Gash
Advice for patients:
If assaulted

• Sexual Assault is NEVER the victim’s fault
• Move to a safe location
• Try to find someone you know and trust for support
• Seek immediate medical assistance and consider reporting to police
  • In some countries sex outside of marriage is illegal
• Contact your consulate
• Link with support and medical services on returning home