Care for victims of sexual assault
Guide for significant others

Dr Ines Keygnaert, ICRH Ghent University
Inse Van Melkebeke, ZSG-UZ Gent
Note: This guide was developed within the framework of the piloting of Belgian Sexual Assault Care Centres and is largely based on the guide for family and friends of the Sexual Assault Referral Centre The Havens in London, United Kingdom [1].
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1. Introduction

What is sexual violence? How often does it occur? How do you respond to it as a victim or survivor? How can you offer support as a parent, partner, friend or member of family?

When someone you care about has become a victim of sexual violence, chances are that it affects you too and that you have many questions. It is important for the recovery process that the victim knows where to find, good support and get it.

This guide explains some typical reactions of victims after sexual violence, so that you can better understand what she/he is going through. This guide also gives you practical tips to support her/him through the recovery period. Finally, it gives you some useful tips to deal with your own feelings and needs, which are also important.

2. What is sexual violence?

Sexual violence is a public health problem on a global scale that also affects many people in Belgium. Not only girls and women are vulnerable: many boys and men can be victims of sexual violence too.

Many definitions

Sexual violence has many definitions. In the Belgian media, it is often referred to as ‘sexual abuse’ or, more recently, ‘sexually transgressive behaviour’.

The World Health Organisation (WHO) drew up a new definition in 2015: ‘Sexual violence is any sexual act that is carried out against
someone’s will. It can be carried out by any person, regardless of his or her relationship to the victim, in any setting’. (2)

This is a broad definition that underlines that the sexual acts are not wanted by the victim. The WHO has already specified earlier that this cannot always be demonstrated ‘actively’: ‘to force someone to commit sexual acts against his or her will, whether that act is complete or not, as well as an attempt to involve someone in sexual acts without that person being aware of the nature or condition of the deed, or without his/her option of refusing to participate or express lack of desire to participate, for example through illness, limitation, the influence of alcohol or drugs, or intimidation or pressure’. (3)

This, therefore, represents two important points: 1) Someone is forced to engage in sexual acts against their wishes/they do not want, and/or 2) no ‘informed sexual consent’ has been given.

Four types

Depending on the degree of physical contact, we can divide sexual violence into 4 types (4,5):

1. **Sexual harassment**: Sexual harassment does not involve physical contact. First of all it involves verbal intimidation: any unwanted, often repeated and unanswered sexual invitations, unwanted sexual attention, a request for sexual contact, verbal sexual insinuations or comments or a threat with a sexual act to achieve another goal. It also includes compulsory undressing and being looked at whilst undressing, the viewing someone who is naked whilst he/she does not want this, watching someone having sex or masturbating, and being forced to view pornographic material. Taking nude pictures of a sexual nature of a person who does not give their permission or who is unable to give or refuse consent is also considered sexual harassment.
2. **Sexual abuse:** In sexual abuse, there is physical contact but no penetration. Sexual abuse is the forced imposition of a physical act of a sexual nature, the deliberate groping of the penis, the vagina, the buttocks, the breasts, including the inside of the buttocks, of a person who does not give their permission or is unable to give or refuse permission.

3. **Attempted rape:** In attempted rape, there is forced or undesired contact between the penis, an object, finger or hand of the perpetrator and a body opening (the vagina, the anus or the mouth) of the victim without penetration, when the victim has not given permission or is unable to give or refuse permission.

4. **Rape:** Rape is any act of sexual penetration of any kind and by any means, committed with a person who does not consent to it. Sexual contact with someone younger than 14 years old is always equated with rape by law, even if the young person gives permission. The term penetration is also strictly defined: ‘entering a body opening (vagina, mouth, anus) with a body part or an object. This includes:

   - Single rape (oral, vaginal, anal, or any other body opening)
   - Multiple rape (multiple body openings and/or multiple times)
   - Group rape (by more than one person simultaneously or sequentially)
   - Forced abortion
   - Forced sexual relations within a marriage or relationship
How often does sexual violence occur?

Basically, anyone can become a victim of sexual violence.

Approximately 1 out of 3 women and 1 out of 8 men have been confronted with sexual violence at some point in their life.

A report from the WHO, in 2013, states that 25.4% of women and girls in Europe experience sexual and/or physical violence by (former) partners and 5.2% experience sexual violence by non-partners (6). The Flemish Sexpert study from 2012 noted that 13.8% of Flemish women and 2.4% of men between 18 and 80 years of age have been exposed to sexual violence (7). A study in young adults (18–27 years) in 10 European countries (Belgium, Cyprus, Greece, the Netherlands, Austria, Poland, Portugal, Slovakia and Spain) from 2015 showed, for example, that 27.1% of young men and 32.2% of young women have already had to deal with sexual violence reaching the age of consent to sex in their country (8). In Belgium, the age of consent to sex is 16 years. For Belgium, this was 10.1% of young men and 20.4% of young women (8).

Research has shown that gender, age, sexual orientation and an immigration background affect a person’s vulnerability.

A 2014 study in Flanders into transgender people and people with a lesbian, gay or bisexual sexual orientation (LGBT) found that 31.7% of transgender people had already been confronted with sexual violence at least once in their lives (9). More than 40% of the LGBTs who participated in this study indicated that they had already been a victim of sexual violence, with significantly more non-heterosexual men than non-heterosexual women being reported as victims. In general, this study showed that men who have consensual sex with men are up to 6 times more likely to experience sexual violence than men who only have heterosexual relationships (9). This means that having a
non-heterosexual orientation means that you are more likely to experience sexual violence.

In addition, asylum seekers, refugees and people without legal residence permits prove vulnerable to sexual violence not only before and during their flight, but also after arrival in Europe and Belgium (4,10,11).

3. The mechanism of sexual violence

Sexual violence as a power crime

Most perpetrators of sexual violence are motivated by the desire to dominate someone rather than by their own sexual needs and/or lack of empathy. During sexual violence, sex is used to remove someone’s sense of control. This makes sex more of a weapon than a goal in itself. You can compare this with a robbery in which a knife is used to steal valuable items. Similarly, the knife is a weapon, but stabbing is not a goal. In sexual violence, no object is stolen, but the self-determination and control of the victim is lost.

Sometimes perpetrators of sexual violence give drugs or alcohol to the victim, or abuse the fact that someone is drugged or intoxicated. When someone is under the influence of drugs or alcohol, their reactions are impaired and it is difficult for them to respond quickly or effectively. This makes it easier to control someone. Perpetrators can also use their high social status to intimidate and control the person they are attacking.
Automatic protective responses of the victim during sexual violence

When someone is threatened and/or attacked, the body instinctively switches to a ‘survival mode’. This is an automatic reaction beyond conscious control. The body is driven by a primitive part of the brain which is different from the usual rational ‘thinking’ part of our brain that we are accustomed to using in our everyday lives (12).

The survival instinct causes one of four possible reactions from which we cannot consciously choose. Sometimes victims react in a way that they would absolutely not expect of themselves. Below, we discuss the four reactions that usually occur (1, 12).

1. **Fight**
   This means fighting back when attacked. However, in about one-third of the cases of sexual violence, the victim does not fight back. Friends and family often find this strange. Fighting back can be a very risky strategy if you do not know whether the perpetrator can injure you or if you feel that you are not strong enough to fight back. Sometimes victims/survivors report that they did not fight so that the sexual violence would end sooner or because this seemed the safest option.

2. **Flight**
   This means fleeing. Once again, it is not always possible to flee when force or emotional blackmail is used, or when other forms of coercion make it difficult to run away. The victim may also think that it is not possible to run away and escape without arousing the perpetrator’s anger.
3. **Freeze**

With this reaction, the body ‘freezes’ and the victim is unable to do anything. The body no longer reacts. It is a reaction that often occurs in sexual violence and for which others show little understanding. They want to know why the person in question did not try to fight or flee. However, studies have shown that victims who fight or flee are more likely to be physically injured during sexual violence than those who ‘freeze’.

4. **“Appease”: Subjecting themselves and feeling numb**

Sometimes, the body reacts by completely surrendering and/or numbing. In this way, our brain protects us from negative experiences. Sometimes a victim tries to save themselves from the situation by obeying/appeasing/calming the perpetrator. Usually, this is the underlying idea: ‘If I simply do what they ask, it will be over sooner and they will not harm me any further’. Here, too, studies show that there is less physical injury when someone reacts in this way.

The important message is that in threatening or dangerous situations, such as sexual violence, our brain automatically reacts with a protective reflex, whereby we cannot choose how our body will react. Once out of danger, the rational, ‘thinking’ parts of our brain begin to evaluate, and start analysing the way we acted. This is why a victim/survivor will sometimes feel bad about the way that they reacted. It helps to emphasize that the survival instinct was triggered and that this has made him/her as safe as possible at that time (12).
4. Important tips for if you meet a victim shortly after the sexual violence

Many people who have experienced sexual violence are afterwards confronted with one or more of the reactions or consequences below (1, 12). There are also some useful tips for you as a significant other.

1. Sexual violence can cause a great number of **physical** complaints. This can include black and blue spots, bruises, wounds, fractures, pain in, on and around the genitals, abdominal pain, headaches, hair loss, but also sexually transmittable diseases, unwanted pregnancy, fertility problems and so on.

   You should seek medical assistance as soon as possible for these complaints.

   If the sexual violence took place less than a month ago, you can come to the Sexual Assault Care Centre (SACC) with these complaints. There, all complaints will be investigated, extra tests will be done if necessary and the victim will receive all possible care to reduce or eliminate their physical and mental complaints. In an SACC, traces of the perpetrator(s) can also be searched for up to 3 days after the sexual violence took place, as the basis for the forensic investigation. If there are injuries, these can also be recorded and photographed.

   If the sexual violence took place over a month ago, you can of course also contact the SACC or you can go to your GP or a specialist in a nearby hospital.

2. **Reliving** the trauma in your mind or physically, for example through flashbacks or nightmares. Flashbacks are vivid memories that can occur unexpectedly. Both flashbacks and nightmares can feel very intense and give the feeling that the trauma is happening again.
This can also be linked to physical feelings, which are related to what the victim has experienced.

Sometimes the person can ‘tune out’ if the moment becomes too intense. Mental withdrawal is an (unconscious) way to deal with this. He/she may view himself/herself as if from a distance or have the feeling they are in a kind of dream state.

If such an experience occurs while you are present, gently remind the person that he/she is now safe and that the incident is not happening again.

Try to remain calm yourself; this is reassuring.

Be patient and do not expect that she/he will immediately feel well afterwards. Give him/her some time to relax, make a cup of coffee or tea or find another way to make him/her comfortable.

3. **Avoiding** things, people, places or smells that remind one of the event. This may also relate to matters that are seen on TV or in the newspapers, or that are discussed in conversations.

Do not take it personally if you do things that he/she finds unpleasant: you cannot always know what the other person is remembering about the incident. Try to discuss what he/she finds difficult.

For example, avoid watching films with violence or turning on the news without prior consultation.

If the violence took place at home, for example in a particular room, you can help by moving the furniture around or changing the room in some way, so there are fewer visual reminders.
4. **Being more nervous, anxious or busy** than usual, making the victim likelier to respond irritably or defensively. Busy places, sounds, any daily sounds (even sounds that would normally not bother the person in question) can become very disturbing.

Ask how you can help. Offer help without giving the other person the feeling that he/she cannot do this himself or herself.

Help temporarily with daily tasks, so they are less stressful: pick up the children from school, offer to go along to crowded places until things improve, etc.

5. **Feelings of guilt or shame.** This happens when people judge harshly about how the victim reacted in this situation or when the people around them or society in general condemns their reaction to the assault. Sometimes it is even insinuated that the victim could have behaved or dressed differently and the violence could have been avoided. It is as if a victim of sexual violence is somehow responsible for the violence because they were careless, when actually the perpetrator is wholly to blame. As a result of their own condemnation or that of the environment, it is possible that the victim will withdraw him/herself socially and/or also hate him/herself.

If you notice that the person in question is blaming themselves, try to offer kind consolation and say that this type of guilt can be a normal reaction after sexual violence, but that you do not agree with it at all.

State that sexual violence is about abuse of power. So, if someone decides to dominate another person with power, conviction or deception, then they will try to do that regardless of how the other person is dressed and regardless of what that person does, drinks or says.
You can also explain the 4 biological protection mechanisms in the event of danger.

6. **Insomnia** or poor sleep quality. This can be the result of nightmares, but also of generally increased anxiety, which makes it difficult to relax and let go of things at night.

   Be aware that his/her sleep can be compromised and that this may also influence the energy levels and concentration.

   It is possible that someone will receive advice during the treatment that also influences the habits or behaviour of the partner, e.g. no electrical devices in bed, avoiding alcohol or caffeine in the evening. Try to support him/her as much as possible if he/she asks for help.

7. **Anger.** This can come across as intimidating or strange to people who do not normally become angry easily. However, it is a completely natural reaction to a threatening situation.

   Try to avoid allowing yourself to respond with anger or defensive reactions, because the person’s anger may even increase or worsen other symptoms. Try to schedule a time-out for yourself and return to the subject later on if you are calm enough yourself.

8. **Poor concentration and memory.** After a stressful situation, someone can keep on worrying and become stuck in thoughts, going over and over what has happened. Their thoughts may also repeatedly go to things that have a link with what has happened (like feeling guilty or thoughts as ‘if I had only/if there were only...’) This affects the capacity to concentrate and pick up current information. Some people therefore complain about
the feeling that they are less involved in things or that they are dissociated from what is happening around them.

If you find that he/she is not listening or cannot pay attention to what he/she is doing, be assured that it is possible that he/she does not realise that and involve him/her in a friendly manner.

If he/she wants to talk about this and you feel able to listen, make time for a chat.

9. **Difficulty with sexual intimacy.** Sometimes people think they are ready for sexual intimacy, but their body reacts tensely, anxiously, angrily or even simply blocks.

Do not be offended, worried or angry if this happens. It is perfectly normal for the body to need time to take a relaxed approach to sexual intimacy after sexual violence. Try to talk about it and show that you are willing to follow his/her pace. This may mean that there is no sexual contact for a certain period of time. Intimacy also includes holding hands or cuddling, it doesn’t just mean sexual contact. If he/she feels pressure to have sex again, this can increase his/her stress level.
5. If your child has experienced sexual violence

If your child has been a victim of sexual violence, it is normal that you do not know how to react and how to support your child. It is normal that you feel angry, guilty or helpless (1,12). The act of sexual violence not only has an impact on your child, but also on you. As a parent, you can be very concerned and want to help immediately.

Do not over-protect

A reaction that often occurs is over-protection. It is possible that you feel like you are helping the recovery process by setting certain rules, like prohibiting them to see certain friends, going out with friends, or setting a curfew. The child or young person may feel this over-protection is a restriction or punishment (13,14). Talk with your child to come to an agreement in which he/she is involved and feels safe.

Being present and allowing time

It is possible you want to start the conversation about the incident. However, always allow your child to take the initiative to broach the subject. Sexual violence is a traumatic event to which every person reacts differently. Your child may feel dazed and numb for days or weeks, not ready to discuss what occurred or his/her feelings. Give them time and let them know you are there.
Avoiding feelings of guilt

Feeling guilty as a significant other can and should be avoided (13,14). The child is already experiencing an entire storm of feelings; your feelings of guilt on top of that won’t help. Such a position would also diminish your role as a supporting parent. The only person who is feel guilty is the perpetrator. It is better to talk to your child about personal safety and personal boundaries, because this is self-care rather than guilt over what happened.

Patience and listening

Letting your child know that you are there for him/her is especially important. Be patient, and be there when he/she has to go through examinations or receive care, if your child wants you to. You may not agree with what your child decides during the recovery process, but listen to his/her view.

Studies show that when the parents or caregivers go with the child to consultation sessions, the child will have fewer consequences and experience a more tenable recovery (13,14).

Encourage your child, for example, to keep a diary about his/her emotions and feelings, and try to do fun and relaxing things together. Let your child express his/her feelings and be vigilant when your child has dark thoughts and feelings, can no longer sleep, avoids all sorts of things, shows signs of self-mutilation (your child may cut him/herself or bang his/her head against the wall) etc. If this happens, seek help as soon as possible from the SACC or a psychologist.
Find help for yourself

Accepting that your child endured an act of sexual violence may cause you to experience feelings of denial yourself, or you may feel like you have failed as a parent. It is also possible that the shocking event will bring up old memories of events that you yourself experienced as shocking once. You may also develop psychological problems yourself if you do not find a listening ear and support (13,14). Therefore, try to seek support and help for yourself. You can definitely get advice at the SACC about where you can go for help.

6. If your partner has experienced sexual violence

As partner of a victim/survivor of sexual violence, you can experience tensions in your relationship. Whether the sexual violence happened during the time of your relationship, prior to your relationship, or a lot longer ago, the impact on your relationship should not be underestimated (12,15).

Approximately one out of three women and one out of eight men have been confronted with sexual violence at some point in their life. This means that you, as the intimate partner of the victim/survivor are not alone.

If you were not aware of previous experiences with sexual violence

Sometimes, as a partner, you are not aware of past experiences of sexual violence. This can give you the feeling that your partner does not trust you.
Sometimes, victims/survivors of incidents of sexual violence consciously or unconsciously block experiences of sexual violence in their memory and never tell anyone about them.

Sometimes, they do not mention or report the incident because they are afraid they will not be believed, they will be disrespected or deemed unattractive. This fear stems from the fact that most victims/survivors were not protected by adults who ignored their plea during the abuse (especially if it happened in childhood). Victims/survivors subsequently assume that no one cares, that there is no safety or protection for them (1,12,16,17).

If an experience from the past is divulged to you now, this can trigger raw emotion in the victim/survivor that has been deeply buried. This, in itself, may bring about changes in the behaviour of your partner and in your relationship. The partner who was once upfront and liked to chat, may now become quiet and retreat physically and emotionally. Things that interested him/her before are now less interesting (1,12,16,17). The fact that someone who is so close to you closes off or withdraws from you may leave you feeling confused, angry or isolated (15). The victim/survivor needs time to organise his/her feelings.

Let him/her know that you are there to talk about it and that you are there for him/her. However, openness and recovery has to happen at their own pace; do not be impatient.

If you were indeed aware of previous experiences with sexual violence

Some victims/survivors do report their experiences with sexual violence at the beginning of their relationship. In this situation, you, as partner, know from the beginning what your partner has gone through. It may be that your partner is ashamed of the traumatic event or does not like to talk about it too much because
of the possible impact it might have on your relationship or out of fear of losing you as a partner.

Experiencing sexual violence during the period of your relationship

If the sexual violence happens during the period of your relationship, many partners also experience this as an attack on their relationship, causing feelings of fear, anger, anger, guilt and helplessness. Some partners subsequently question their role as protector within their relationship (11,12,15-17).

At such a time, many thoughts go through the mind of the victim, and your active participation in the medical, forensic and psychological process is a great help to your partner.

As partner, you may also have questions you want answered. These questions, although justified and valuable, are best not asked straight away. Immediately after reporting the incident, the victim/survivor may feel confused, numb and disoriented, and thus not immediately able to answer all questions. Have patience.

Impact of experiences of sexual violence on the relationship

Your partner may experience a variety of feelings, mood swings and crying fits (1,12,15). These low periods can give you, as a partner, the feeling that you are responsible for these feelings. Remember that these feelings are your partner’s alone; you did not cause them. This is part of the processing phase, and of recovery.

Continue to enjoy the nice moments with your partner and try to do fun things together; this will help you get through the difficult times.
It is possible that you, as a partner, will want to discuss the experiences of the victim/survivor with family, friends or peers. This is a delicate situation. The victim/survivor may not be ready to share these; do not insist that he/she does, and respect that choice. When he/she is indeed ready to talk about the experience, support him/her in the process of opening up to family, friends and peers.

Experiences of sexual violence often also affect the intimate and sexual relationships of partners (1,12). The interest of the victim/survivor in closeness, intimacy and sex may have decreased or become absent. This interest may also fluctuate. This can be very confusing or frustrating for you. It can give you the feeling that your partner does not desire you, does not feel safe with you or does not appreciate you. When you discuss this with your partner, she/he may get the feeling that she/he is being pressurised or misunderstood.

Let him/her know that you are still attracted to him/her, but allow the necessary time to process the emotions. Enjoy the intimacy or forms of sexuality that are still possible. Be present during the processing phase; this will also help you process the trust in your relationship.
7. If a friend or family member has experienced sexual violence [1, 12][17,18]

Your possible reactions and/or feelings are indicated with the following icon 🧡.

Feeling of guilt or helplessness because you could not prevent what happened

**Because of this, you may ...** overprotect, like trying to persuade people to change things: sleeping arrangements/whether or not to return to the family home to live/ seeing other people etc.... However, this will reinforce their feeling of vulnerability and uncertainty.

**You can help by ...** resisting the feeling of having to make their decisions or limit their independence. Support them in making their own decisions about who they spend time with or meet with etc.

Anger at the perpetrator

**Because of this, you may ...** seek revenge or become violent. This can get you in trouble yourself.

**You can help by ...** say that you are worried and angry that this happened and that it is difficult to deal with these feelings. Try to stay calm, so that the victim feels safe with you.
Confusion about what happened, lack of clarity about what you do not yet know about the sexual violence

**Because of this, you may ...** ask for more details about the sexual violence. However, this can come across as humiliating and stressful.

**You can help by ...** showing that you are there to listen when necessary, but that you respect their decision about what they tell to whom. This gives them a safe feeling when they are with you. Do not take it personally if you are not the person with whom the victim shares things. You may offer other support and strength that is not about sharing this type of information.

Anger at your friend/relative (the victim)

**Because of this, you may ...** search for ways in which violence could have been avoided, by asking ‘why’-questions, like ‘Why did you wear this/drink that/go there, etc.’, or immediately blaming them ‘You should not have done xyz... you provoked it’. This only increases the feeling of guilt in the victim and makes them feel like they could have avoided it.

**You can help by ...** explaining that you do not fully understand what they are going through, but that you care about them and want to help them.

Read the section above about rape to understand why people are quick to blame the victim.
If a friend or family member has experienced sexual violence

Shyness or shame

**Because of this, you may ...** make jokes or break off the conversation to hide your uncomfortable feeling.
Break off every conversation about what happened.

**You can help by ...** taking what they say seriously. If the victim makes jokes themselves, this can be a way of dealing with something very difficult.
If they want to talk about what happened, but you find this difficult, say it, and figure out how you can talk about it.

Disbelief

**Because of this, you may ...** tell them you cannot believe it.
This can make the victim wary of telling you anything else.

**You can help by ...** saying that you believe him/her and care about him/her and that you want to support him/her.
Feeling unhappy about the bad things that happen in the world.  
Feeling unmotivated or being in a bad mood

Because of this, you may ... withdraw or change your habits by avoiding your work or other activities. Or telling your friends, family and relatives that you are very upset about what has happened.

You can help by ... trying to continue to carry out your daily routine, since this structure and distraction can help you maintain your mood. If you are afraid of questions during social contacts, let others know that something unpleasant has happened, but that you would rather not talk about it.

Fear that it might happen (again) to the same person or other persons you care about

Because of this, you may ... overprotect (see above) or regularly message or call to ask if everything is OK. The more you check, the more you are waiting for answers or phone calls. This only increases your fear.

You can help by ... maintaining your daily routines. Agree on when you will listen and speak to each other.
If the victim/survivor is male, you may wonder if he is homosexual

Because of this, you may ... ask questions about their sexuality. Men who have experienced sexual violence often mention that they are afraid that others will wonder if they are gay, or have confused feelings about their sexuality.

You can help by ... reminding yourself that he was a victim of a crime and that is what you must focus on. Let him know that you are there to talk if he wants to.

Memories from your own life, or previous traumatic experiences that come up

Because of this, you may ... talk too much about what happened to you and how you dealt with it. Try to convince them that you know what they are experiencing because you have experienced something similar yourself. However, everyone’s reaction and way of processing things is different. Sometimes it can be frustrating to always have to hear what happened to someone else or what helped someone else, if this does not correspond with your experience.

You can help by ... letting the conversation revolve around the victim and what he/she feels like they need. Do not be upset if he/she does not want to talk about what happened to you. This does not mean that they do not care, but it may just be too much for them. Consider looking for support for yourself if you have a lot of memories coming back.
8. Self-care for you as a significant other

When you support someone you care about or a friend, this may also place a burden on you. Here are some suggestions to take good care of yourself:

» Ensure that you remain involved in meaningful and varied activities

» Continue to pursue your leisure activities, hobbies or sports

» Keep a diary. It may be helpful to write down your feelings

» Do relaxing activities, like taking a warm bath, doing breathing exercises, meditation, walking, running, ...

» Do not forget to pamper yourself occasionally

» Organise a time-out, where you can get away briefly from the stressful situation

» Ask for help and accept the support of family and friends

» Perhaps start supportive therapy yourself
9. What can a Sexual Assault Care Centre offer?

What and for whom?

A Sexual Assault Care Centre (SACC) is a service in a few hospitals (starting in University Hospital Ghent, UMC Sint-Pieter in Brussels and the UMC Liege, for an updated list see: www.seksueelgeweld.be -> Zorgcentra na Seksueel Geweld) where every victim of sexual violence can seek help, at any time and on any day.

The victim can receive the following care at the SACC:

» **Medical care**: both care for bruises and injuries, and examinations and treatments for physical, sexual or reproductive concerns.

» **Psychological care**: the first psychological care (both a listening ear and an explanation of normal reactions after a shocking event, and advice on how to deal with this) and further guidance from the SACC psychologist.

» **Forensic examination**: determining injuries, examination for traces of the perpetrator, gathering evidence for a possible charge and lawsuit.

» **Filing a complaint** to the police if wished, with the help of specially trained vice inspectors.

» **Follow-up afterwards**: both medical follow-up for possible medication or for injuries, and psychological follow-up during the processing phase of the event.

It has been proven that victims who receive this comprehensive care after sexual violence have a greater chance of recovery, of faster recovery and less chance of becoming a victim again (1, 12).
The World Health Organisation, therefore, prescribes that every victim should receive such care as soon as possible after the violence (2,19).

At the Belgian SACCs, you receive this care by specially trained forensic nurses who cooperate with and are supported by specialists such as emergency doctors, gynaecologists, urologists, paediatricians, geriatricians, psychiatrists and specially trained SACC psychologists.

Significant others who come along with a victim can also contact the forensic nurse for first relief, explanation and advice.

When can a victim admit to the SACC?

What the SACC can do for a victim depends on how long ago the sexual violence took place:

» If the sexual violence took place **less than 72 hours ago**, a victim can go to the SACC, call or email and he/she can immediately receive the necessary care. If the victim wishes to do so, he/she can also file a complaint with the police vice-inspectors at the SACC.

» If the sexual violence took place **more than 72 hours ago** but less than a month ago, then a victim can call or email for an appointment. There will be an investigation to find out what is still possible in terms of medical and psychological care and forensic investigation and who can offer each type of care best. An appointment can be made for the filing of a complaint at the police station or the SACC.

» If it happened **more than a month ago**, it is better to make an appointment. It will be determined what medical and psychological care is needed and, if possible, the victim is referred to support available. An appointment can also be made with the police for the filing a complaint.
How can you reach a Sexual Assault Care Centre?

As a significant other, you can call or email an SACC or go to an SACC with a victim:

**SACC Ghent:** 09 332 80 80, zsg@uzgent.be
accessible via Entrance 47 at the UZ Ghent, De Pintelaan 10, 9000 Ghent, tram 4 (end stop UZ), bus 5 (stop UZ)

**SACC Brussels/CPVS Bruxelles:** 02 535 45 42, cpvs@stpierre-bru.be
accessible via Hoogstraat 320, 1000 Brussels, Métro 2 and 6: stop Hallepoort, Pré-métro: 3 – 4 – 51 stop Hallepoort, Bus: 27, 48 stop Hallepoort, Bus De Lijn and TEC: Saint-Gilles (Hallepoort/Blaes)

**SACC Liège:** 04 367 93 11, cpvs@chu.ulg.ac.be
accessible via the emergency department of CHU Liège: Urgences des Bruyères, Rue de Gaillarmont 600, 4032 Chênée

For an updated list see [www.seksueelgeweld.be](http://www.seksueelgeweld.be)  
-> Zorgcentra na Seksueel Geweld
Important tips to help victims safeguard DNA traces

⚠️ Come to an SACC immediately. After 72 hours, there will be very few or no traces remaining for the forensic investigation.

⚠️ Do not let the victim wash or shower, even if this is the first thing he/she wants to do.

⚠️ Do not allow the victim to drink or rinse their mouth if there was oral contact.

⚠️ Try not to let the victim urinate and, if they do, try to collect it in a jar and bring it to the SACC.

⚠️ Avoid physical contact with other people.

⚠️ Have the victim keep the clothes on that they were wearing during the sexual violence or put them in a paper bag and take them to the SACC. Not in a plastic bag!

⚠️ If possible, bring the sheets on which there may be traces (e.g. sperm) from the perpetrator, and put them in a paper bag.

⚠️ If the victim wiped themselves with paper or something else after the sexual violence, or if they had a sanitary napkin in their underwear, bring this with you in a paper bag.

⚠️ If possible, bring fresh clothes and shoes with you: after the forensic examination, the victim can shower at the SACC and put on fresh clothes (in case of emergency, replacement clothing can be provided at the SACC or someone can bring in clothing later).
Further guidance and care

Significant others like family, partners and friends can always email or call the SACC for tips or support.

If the SACC psychologist decides, together with the victim, that it would be beneficial to start therapy, you as a significant other may be involved in this. They will also give you an explanation about what kind of therapy is being started.

Also, at each SACC, information sessions are given at regular intervals on how to deal with a victim of sexual violence as a partner, parent, child, relative or friend of a victim. Contact the SACC directly to find out when these infosessions are held.

References


SEXUAL ASSAULT CARE CENTRES