

# MANAGING SEXUAL ASSAULT DISCLOSURE



**Sexual assault** is defined as any deliberate sexual act performed by one person on another without their explicit consent. In Alberta, **1 in 3 children & adolescents** have experienced sexual abuse and **over 85%** knew the abuser.

APPROACH TO A SEXUAL ASSAULT DISCLOSURE	
1) SAFETY	✓ Call 911 if you and/or the child are in immediate danger
2) Validate & Support	<ul> <li>✓ Tell them you believe them</li> <li>✓ Remind them it is not their fault</li> <li>✓ Validate their feelings</li> <li>X Avoid making promises</li> </ul>
3) Be mindful about your questions	<ul> <li>Ask questions relevant to medical care</li> <li>Do NOT ask details about the assault (especially directly to the child). Liaise with trained child interviewers to arrange further forensic interview</li> </ul>
4) Identify what supports they have	<ul> <li>✓ Psychological / Mental health</li> <li>✓ School counsellor</li> <li>✓ Trusted family &amp; friends</li> <li>✓ Primary care physician</li> </ul>
5) Pregnancy	<ul> <li>If they have a uterus, have they reached puberty?</li> <li>Offer emergency contraceptives and pregnancy testing if timing is appropriate</li> </ul>
6) Sexually Transmitted Infections	<ul> <li>✓ Consider empiric treatment for chlamydia &amp; gonorrhea (cefixime / azithromycin)</li> <li>✓ Check their vaccination status. If they are not immune, order Hep B &amp; C serology (now &amp; 6 weeks) and consider Hep B Ig within 14 days</li> <li>✓ Consider HIV post-exposure prophylaxis within 72h</li> </ul>
7) Reporting	<ul> <li>Identify IF they want to report the assault to police.</li> <li>Often police will come to the hospital to collect the report &amp; forensic evidence.</li> </ul>
7) Reporting	Giving survivors the power of choice is important.  Consider whether they have the capacity and ability to protect themselves. If not, you must report.
8) Physical Exam	<ul> <li>✓ If the patient consents, a head-to-toe exam is important to identify any occult injuries.</li> <li>✓ In cases of historic sexual assault, if they have no acute injuries, physical exam can be deferred.</li> </ul>
	95% will have a normal exam after an assault

The age of consent in Canada is 16, but there are some close-in-age exceptions:

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Under 12	Unable to consent	
12 - 13	Can consent up to 2 years older	
14 - 15	Can consent up to 5 years older	

No one under 18 can consent to sexual activity that is exploitative or with someone in a position of power.

## **ESSENTIAL QUESTIONS**

- Are they <u>safe</u> now? At home? At school? Etc.
- Do they have any injuries? Genital symptoms (pain, bleeding, dysuria, discharge)? Side effects of drug / alcohol ingestion?
- Were/Are they on birth control?
- Do they want to report?
- Is there a role for forensic evidence collection (acute assault)? Do they want to collect forensic evidence?

## **SUPPORTS**

Each region will have their own:

- Sexual assault response team
- Sexual assault centre
- Mental health resources
- Child & youth advocacy centre

## **INVESTIGATIONS**

- Pregnancy test
- Testing for syphilis, HIV, Hep B, Hep C, chlamydia, gonorrhea
- ☐ Alcohol, drug and toxin screening
- Forensic evidence collection
- ☐ Additional workup dependent on injuries present (XR, CT, labs, etc.)

## When to report:

- 1. The patient does not have the capacity for decision making or the ability to maintain their own safety
- 2. The perpetrator is in a position of power (relative, teacher, coach, etc.) or has ongoing contact with the child

## **How to Report:**

- Contact Child & Family Services || Child Welfare || Children Services (naming may vary across provinces)
- Consult your local child maltreatment team if available

