

Sexual Assault Referral Center (SARC) Brussels



Zorgcentrum na
Seksueel Geweld

Centre de Prise en charge
des Violences Sexuelles

Prevalence

- Worldwide
 - 5-59 % women victims of sexual violence by intimate partner
- Europe
 - 25, 4 % women victims of sexual assault by intimate partner
 - 5, 2% women victims of sexual assault by a non partner

OMS, 2013

- Belgium 2015 :
 - 3106 complaint for sexual assault

Statistics of federal police

Management in Belgium?

- CHU Saint-Pierre, 2002-2007
 - 356 patients > 15 years
 - 90% : non optimal management

Gilles et al, 2010

- CHU Saint-pierre, 2009-2015
 - New protocols, specific medical drafts, prophylaxis Kit, check list
 - 362 patients > 15 years
 - 90% : optimal management

Gilles et al, 2019

- Management of Minors
 - Heterogeneity in care path and management

Rebuffat 2012, Dachy 2016

Constatations in Belgium (before pilote project)

- ✓ No well defined carepath
- ✓ Random care of victims
- ✓ Forensic examination not optimal
- ✓ No proper medical and psychological follow-up

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE



PLAN D'ACTION NATIONAL
DE LUTTE CONTRE
TOUTES LES FORMES
DE VIOLENCE BASÉE
SUR LE GENRE | 2015-2019

Council of Europe convention on preventing and combating violence against women and domestic violence (Istanbul Convention)

- Need to create SARC
- Feasibility study SARCs in Belgium by ICRH
- Pilote project based on the results of the study

Hendriks et al 2018

Model of SARC in Belgium

- Pilot project by ICRH Ugent 2017-2019
- Creation SARC - Opening november 2017
 - UZ Gent
 - CHU Liège
 - CHU Saint-Pierre



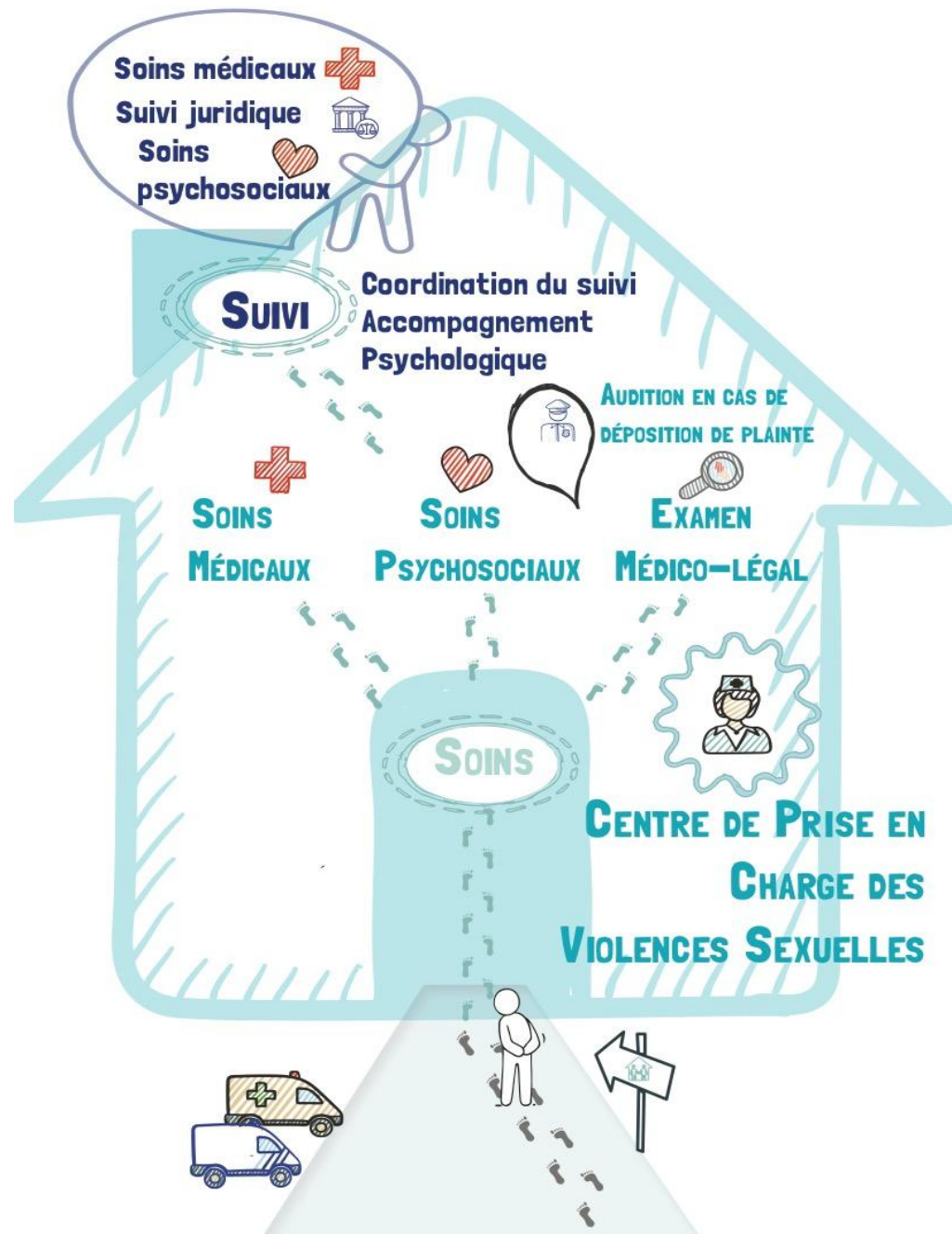
Team



- 10 forensic nurses (24h/24)
- 5 psychologists
- 2 gynaecologists
- 50 police officers specialised in sexual investigation

Care Path

- Multidisciplinary Center
- Point of contact: forensic nurse
 - Specific training
 - Forensic
 - Medical
 - Psychological: specificity problems of victims of sexual violence
- 24h/24h
 - center
 - phone
 - mail



What?

- Global and holistic **medical care**:
 - ✓ Qualitative medical and forensic examination
 - ✓ Prevention STD
 - ✓ Support in short and middle term (phone calls)
- Interactions with **prosecutor and police services** if victims want to make a complaint

What? (2)

- **Psychological** care
 - ✓ First interview (D3) : Evaluation of PTSD
 - ✓ Individual follow-up (max. 20 sessions)
 - ✓ Support of relatives: individual session or speaking group
- Collaboration with **help victims services**

Inclusion in center '320 Rue Haute'



cemavie



cityplanning



cpvs / zsg



320
rue haute
hoogstraat

STUURGROEP ZORGCENTRA NA SEKSUEEL GEWELD

COMITÉ DE PILOTAGE CENTRES DE PRISE EN CHARGE DES VIOLENCES SEXUELLES

Prof. Ines Keygnaert, Jana Verplancke en Saar Baert, Universiteit Gent –ICRH
Brussel, 30/09/19

Number of victims



Aantal aanmeldingen per ZSG/
Nombre de présentations par CPVS
(25/10/17–31/08/19)

1831 aanmeldingen sinds start pilootproject



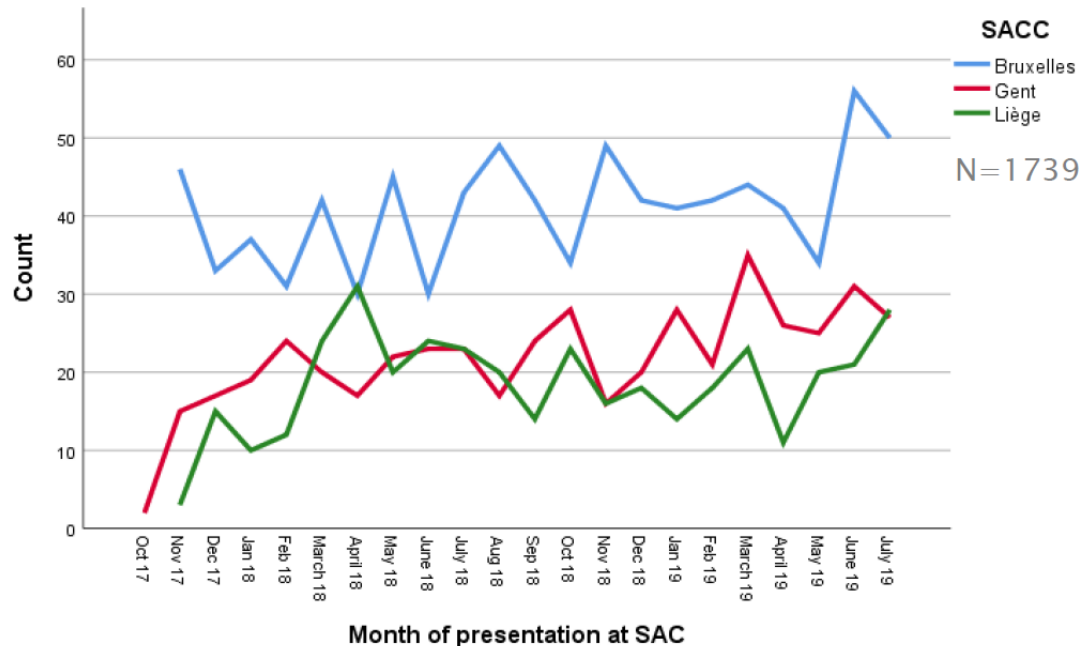
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Number of victims per month



Aantal aanmeldingen per maand per ZSG/
Nombre de présentations par mois par CPVS
(25/10/17-31/07/19)

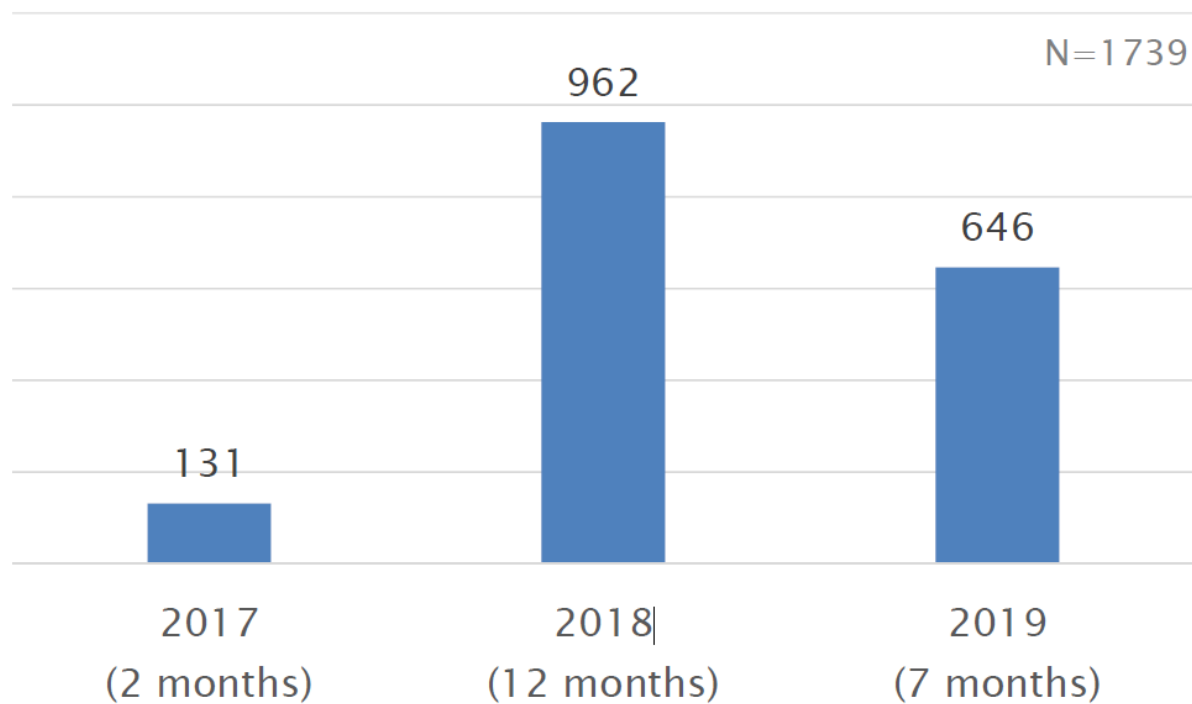


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Number of victims per year



Aantal aanmeldingen per jaar/
Nombre de présentations par an
(25/10/17-31/07/19)



Number of victims by age



ZSG aanmeldingen per leeftijd
Présentations au CPVS par âge
(25/10/17–31/07/19)



Gemiddelde
leeftijd: 24,8 jaar
(SD=13,02)

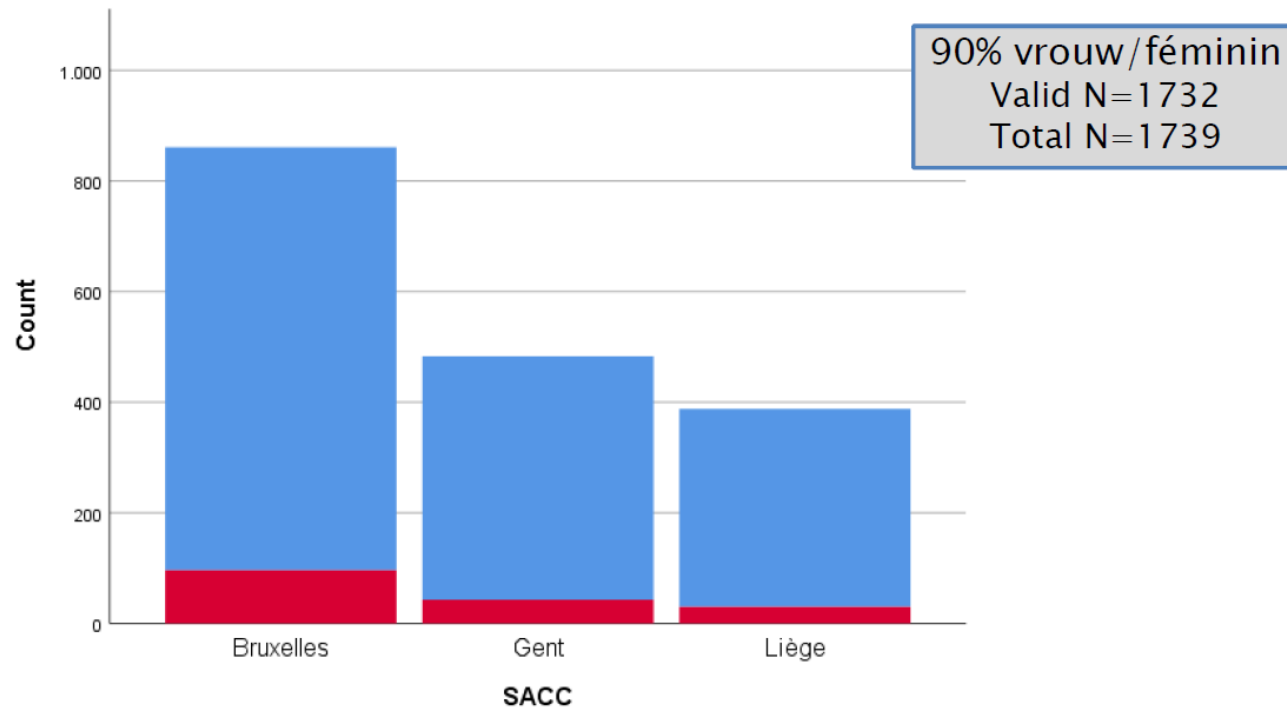
27% <18 jaar

Valid N= 1728
Total N=1739

Number of victims by sex



ZSG aanmeldingen per geslacht/
Présentations au CPVS par sexe
(25/10/17-31/07/19)

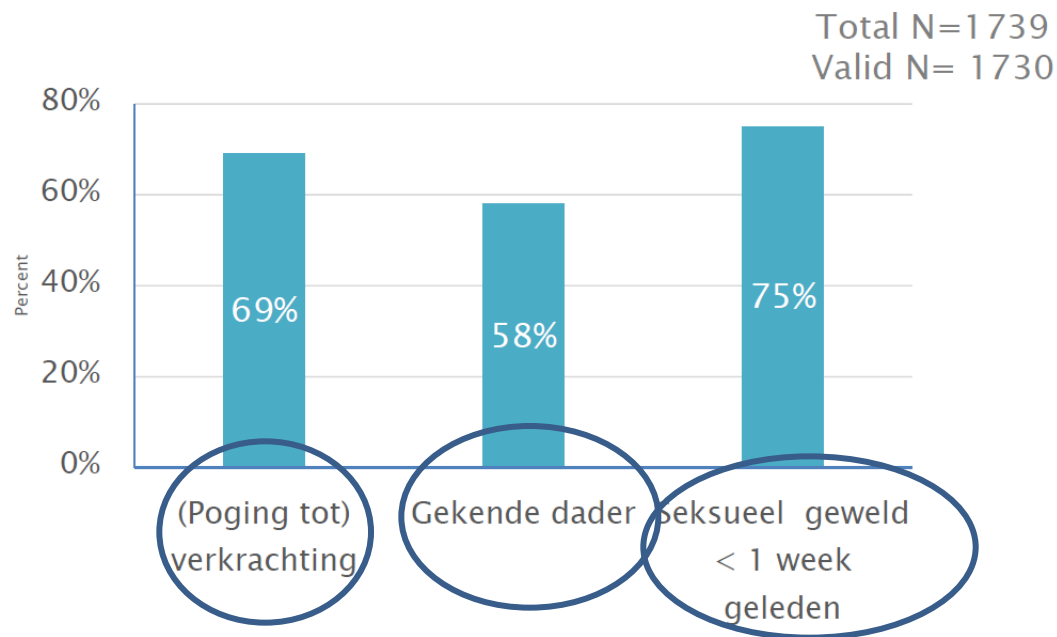


Characteristics of the sexual violence



Kenmerken van seksueel geweld/ Caractéristiques de la violence sexuelle

(25/10/17-31/07/19)



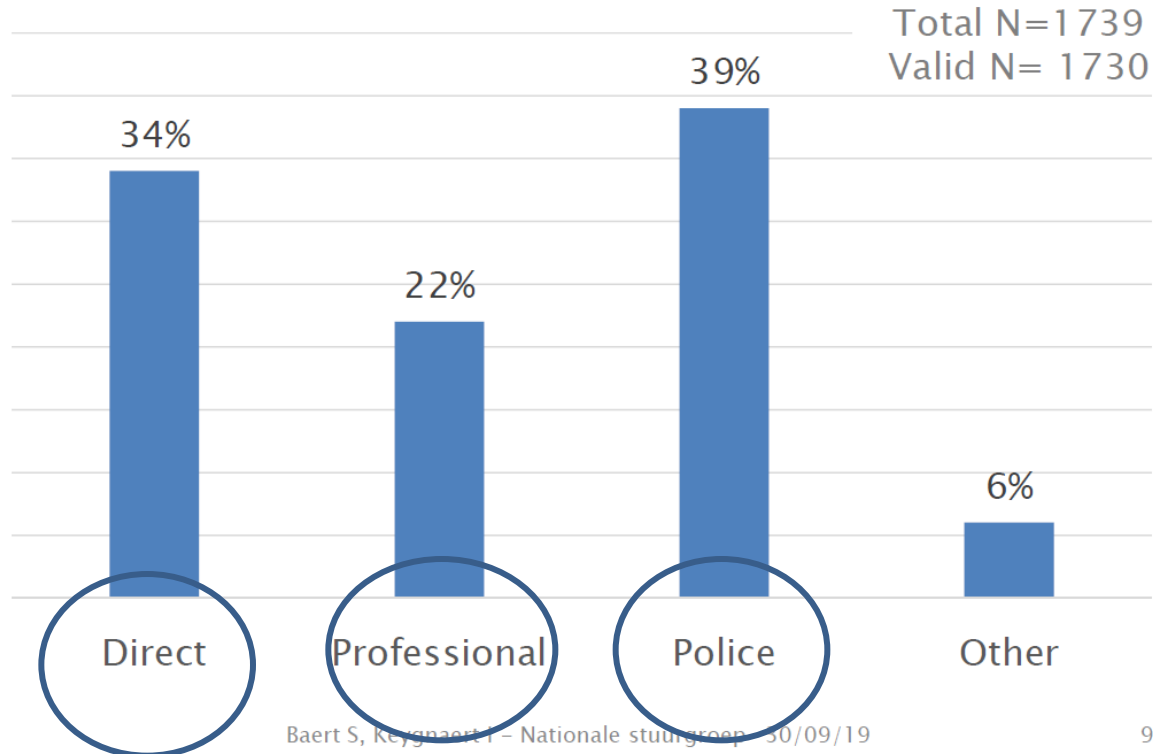
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Way of entry



Wijze van aanmelding op ZSG/
Mode d'admission au CPVS
(25/10/17-31/07/19)

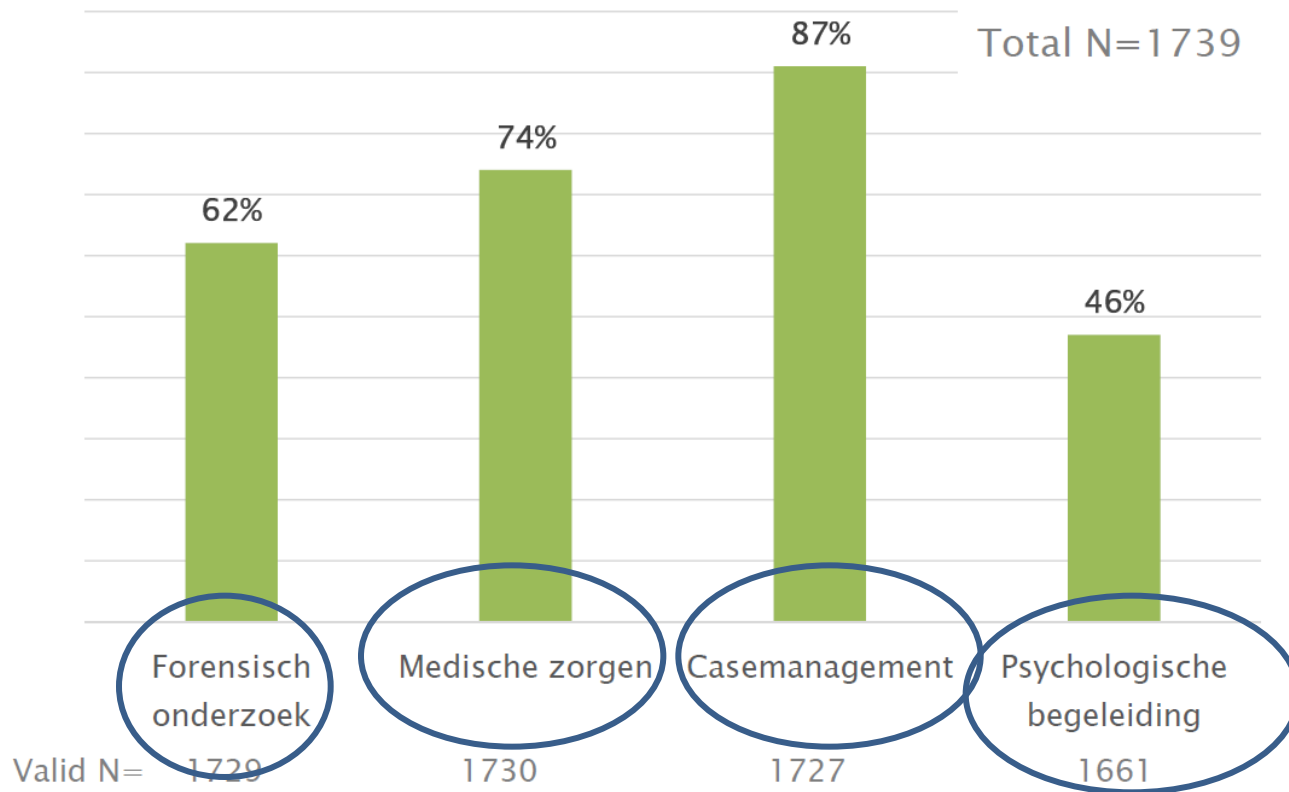


Care provided by SARC



Zorgen verstrekt door ZSG

Soins fournis par le CPVS (25/10/17-31/07/19)



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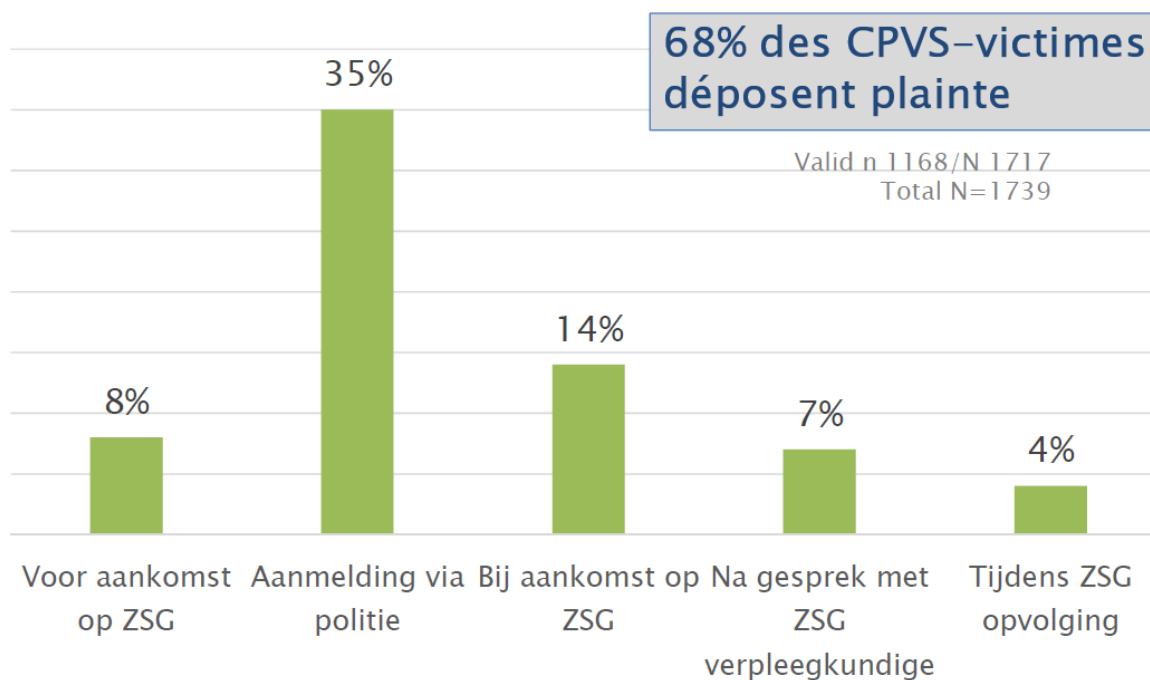
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Decision to make a complaint



Beslissing om klacht in te dienen/ Décision de déposer plainte

(25/10/17-31/07/19)



SARC

Conclusions

The creation of the center answers to a need;
The center allows a global management with respect and dignity
The holistic management is much better;
The consequences of this traumatic event are decreased

An answer to a need





Merci