

# Examination of alleged sexual assault/violence

---

PROF. ANURUDDHI EDIRISINGHE

MD(FOR MED), MBBS,DLM,DMJ(LOND), MFFLM(UK)

# Objectives & aims

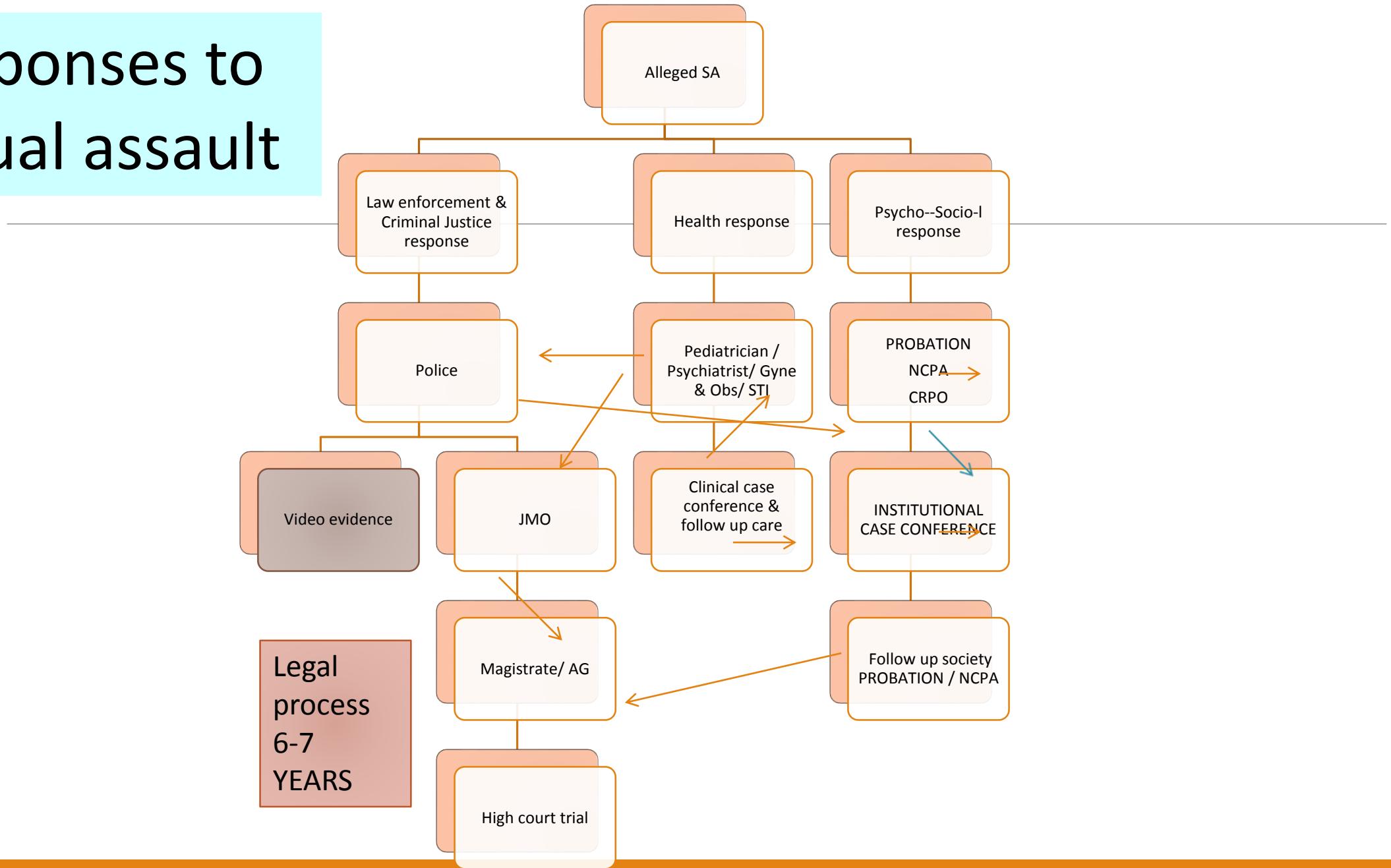
---

To have  
comprehensive knowledge, skills and competency  
in clinical examination of victims/perpetrators  
of sexual assault (rape/anal abuse),  
collection of samples,  
injury interpretation  
and opinion to the courts

To produce a graduate who will be able to conduct a medico-legal examination of an alleged victim or perpetrator of sexual assault adhering ethical principles, write a report and give evidence in a court of law as an expert witness

Knowledge, skills and attitude

# Responses to sexual assault



# Sexual offences and Justice

---

- Rape is not a medical concept but a legal concept
- Investigation into the alleged sexual offence: police
  - According to the requirements of law
    - Whether the alleged sexual offence has taken place (Sexual intercourse/ or other sexual offence) (penetration)
    - Consented act or non consented act
    - Identification of possible assailant/s
    - Other relevant findings – Age, intoxication, STI, pregnancy

# Adult sexual assault/ abuse VS Child sexual assault/ abuse

---

- Adult is a person above 18 years
- With sound mind
- it is the right of the individual whether he /she wants all three responses or only one of the responses
- Thus, some may not want criminal justice response
- ? Serious crime
- ? Mandatory reporting

If the victim is child, he or she comes under the vulnerable group

---



Mandatory reporting to the criminal justice system is practiced by professionals and the society

# How and who presents victims for medico-Legal examination in Sri Lanka?

---

Police

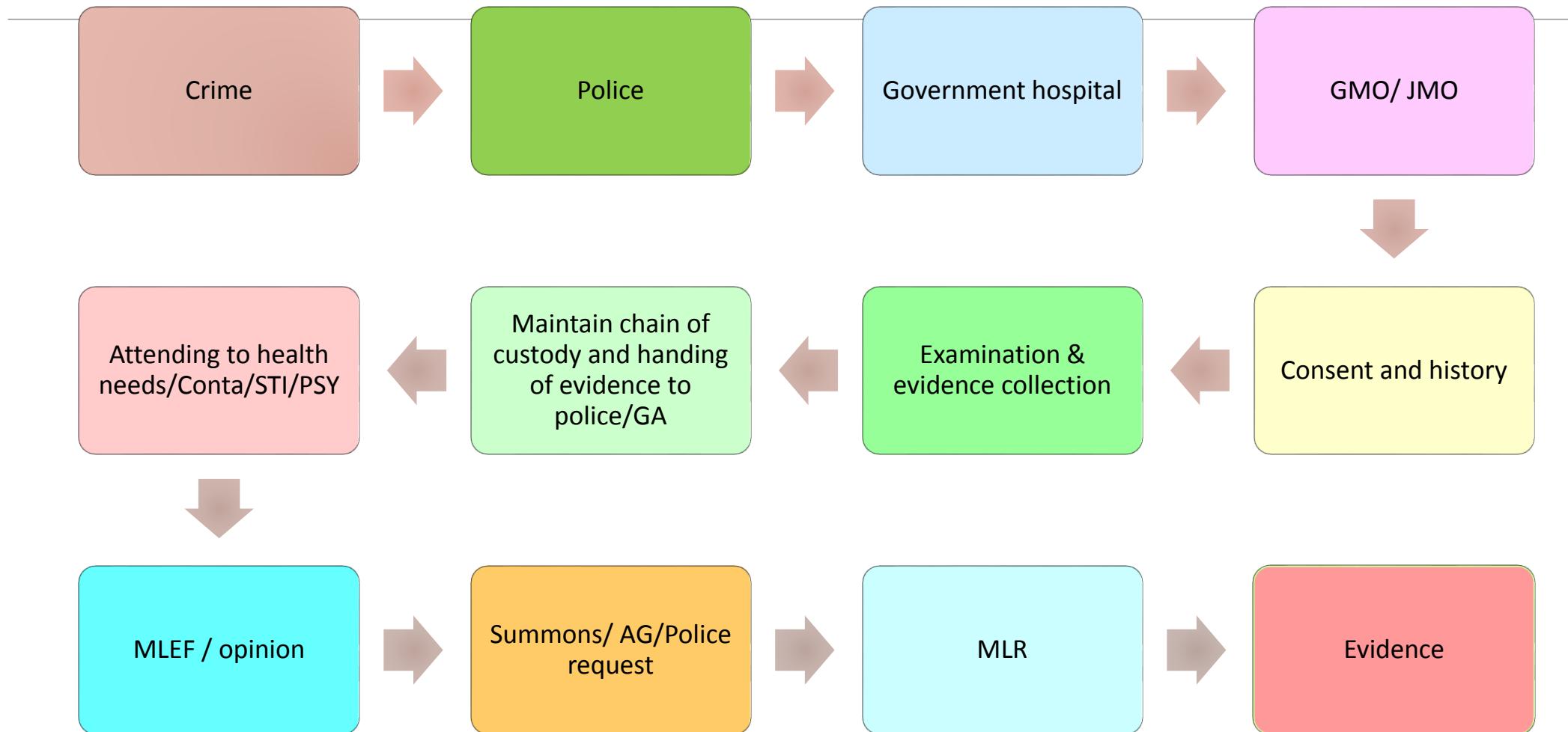
OPD/ WARD/  
police

Courts

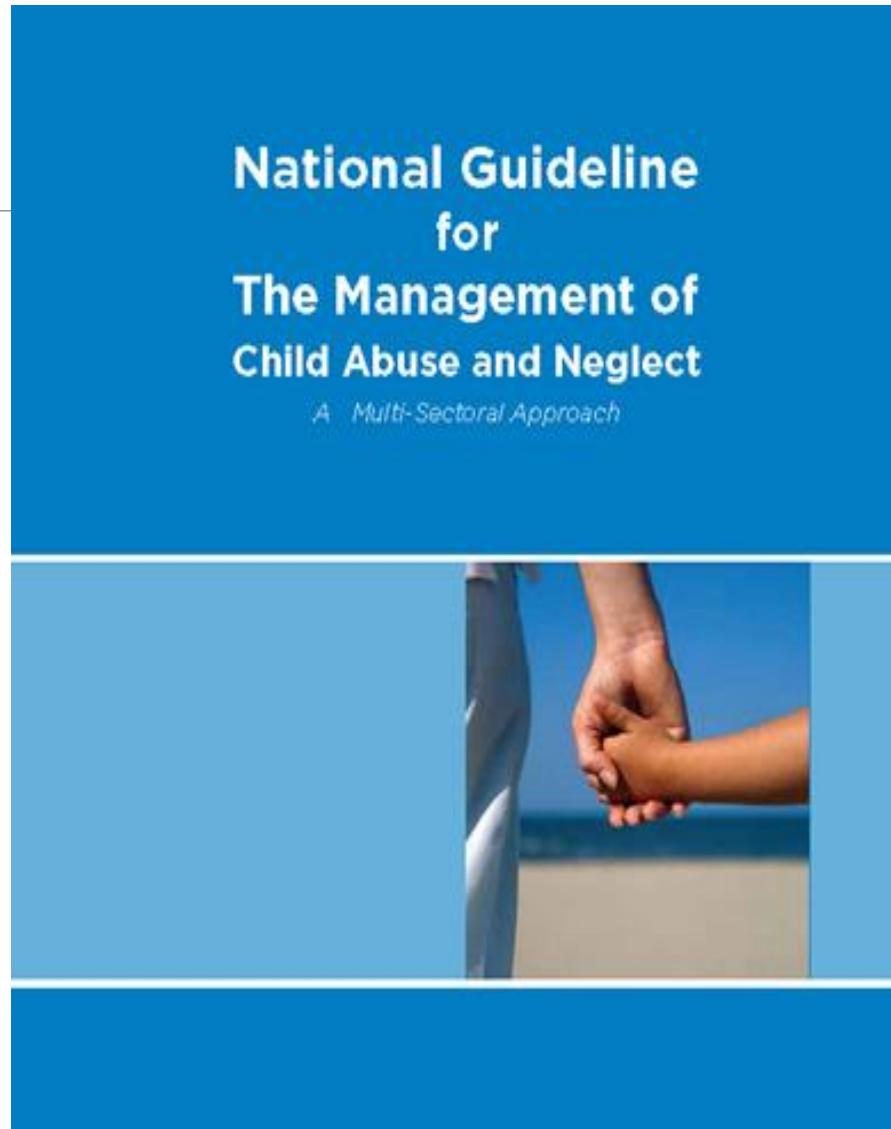
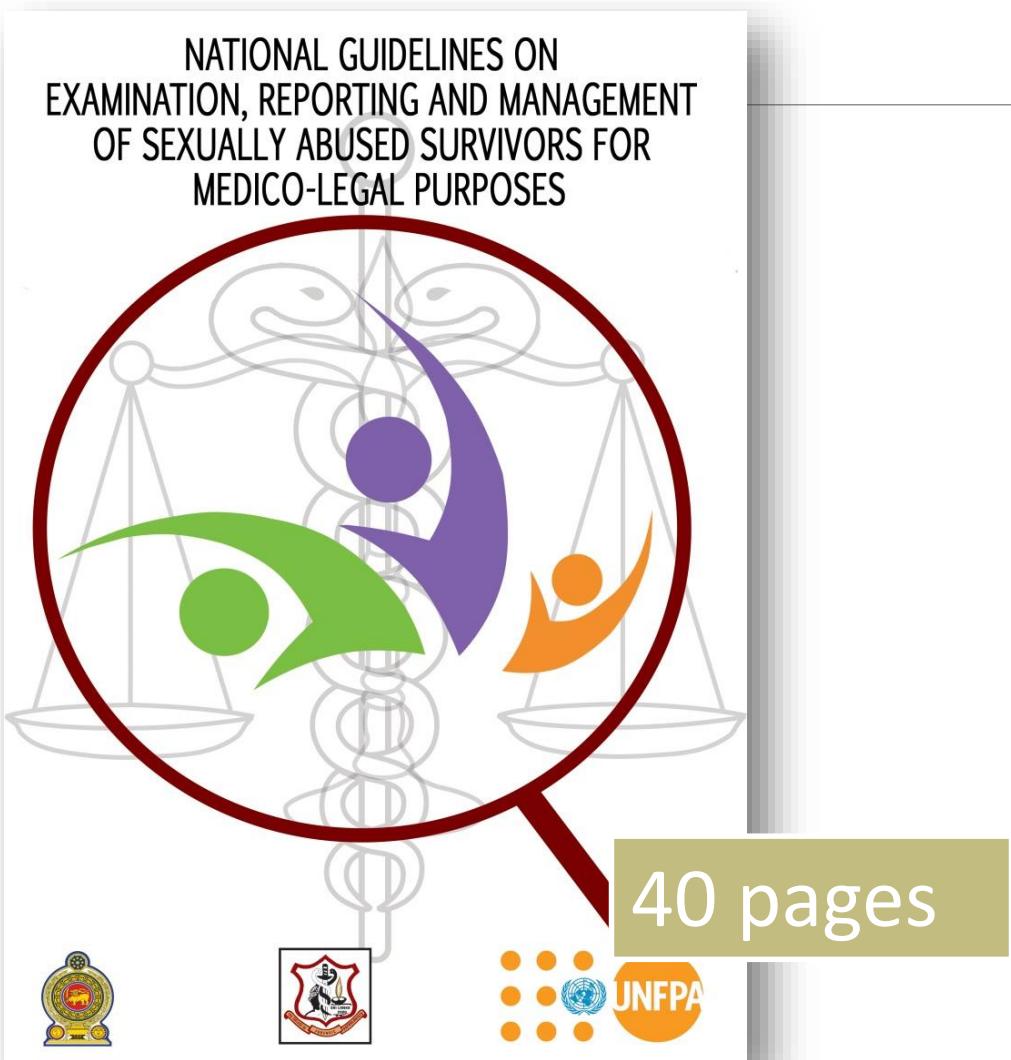
NCPA

For 2<sup>nd</sup>  
opinion by  
other JMOs

# Medico-legal response in Sri Lanka



# Sri Lankan Guidelines





May 2014



May 2015

Health Publications & Rep x [www.health.gov.lk/en/index.php?option=com\\_content&view=article&id=306&Itemid=101](http://www.health.gov.lk/en/index.php?option=com_content&view=article&id=306&Itemid=101)

Ministry of Health & Indigenous Medicine Sri Lanka

HOME ABOUT US STAFF ACCESS OUR SERVICES PROJECTS PUBLIC NOTICES PUBLICATIONS TRAVELLER'S SITE MAP

## Health Publications & Reports

Filter

National Guidelines on Examination, Reporting and Management of Sexually Abused Survivors for Medico-Legal Purposes	<a href="#">download</a>
Manual of Management	<a href="#">download</a>
Operational Structure and Patient Care Model in Accident and Emergency Departments in Sri Lanka	<a href="#">download</a>
Guideline for A Healthy Canteen in Work Places	<a href="#">Sinhala</a> <a href="#">Tamil</a> <a href="#">English</a>
Design Considerations on Accessibility for Persons with Disabilities	<a href="#">download</a>
Policy Guidelines for Fortification of Food in Sri Lanka	<a href="#">download</a>
Performance and Progress Report 2012-2013	<a href="#">English</a> <a href="#">Sinhala</a> <a href="#">Tamil</a>
Accident and Emergency Care Policy of Sri Lanka	<a href="#">download</a>
National Health Development Plan (2013-2017)	<a href="#">Page 01-100</a> <a href="#">Page 101-200</a> <a href="#">Page 201-300</a> <a href="#">Page 301-344</a>
Cancer Incidence Data Sri Lanka Year 2007	<a href="#">download</a>
Cancer Incidence Data Sri Lanka Year 2006	<a href="#">download</a>



# Department of Forensic Medicine

Faculty of Medicine, University of Kelaniya

Search...

Go

[Faculty Home](#) | [Contact us](#)

HOME

ABOUT

STAFF

UNDERGRADUATE PROGRAMMES

POSTGRADUATE PROGRAMMES

RESEARCH

SERVICES

SAFE TEACHING UNIT

ACTIVITIES

NOTICE BOARD

**LEARNING MATERIALS**

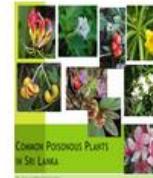
STUDENT SELECTED COMPONENTS

ARCHIVES

GALLERY

EVENTS

## Learning Materials



Poisonous Plants



Museum Specimens



National Guidelines on Examination, Reporting And Management of Sexually Abused Survivors For Medico- Legal Purposes



National Guideline on Child Abuse and Neglect



Guidelines For Clinical Examination For Drunkenness



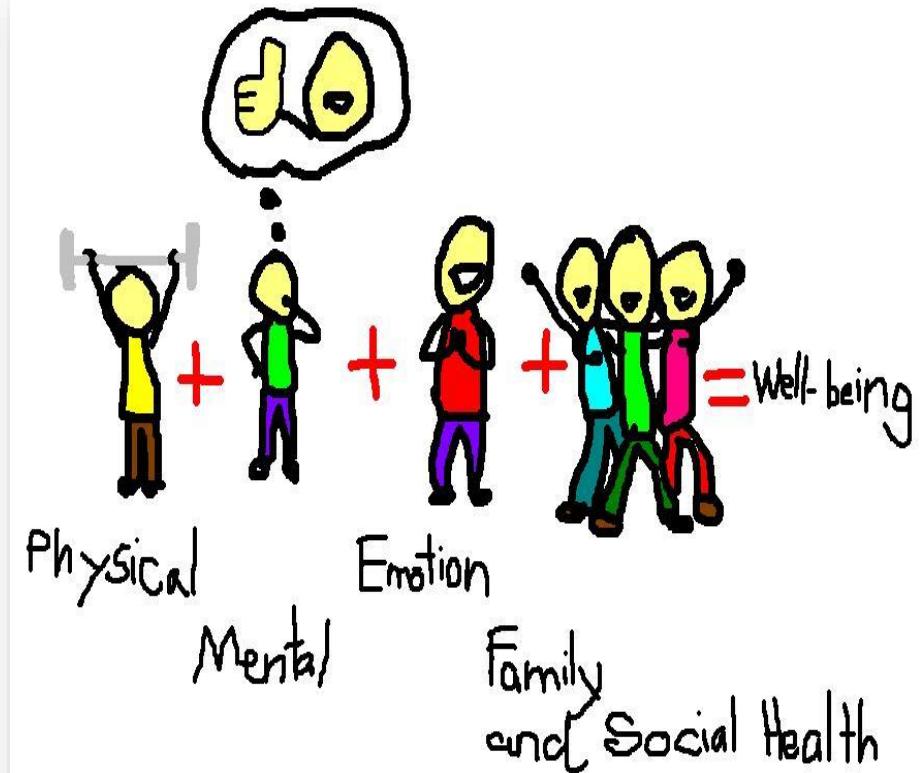
Sexual Rights and Responsibilities



Fixed Learning - 5 -Poisonous Plants

# Examination Principles

In caring for victims of sexual violence the overriding priority must always be the health and well-being of the patient



# Conduct of examiners

kindness of the  
treating personnel as  
being beneficial to  
their recovery



Actions, words and deeds of  
examiners should be for the  
benefit of the examinee





# Our actions

Words that are gentle  
and soothing

No judgmental or  
critical comments

Treated with respect  
and dignity

# Human Rights of sexually abused survivors

Right to health care



Right to human dignity



Right to non-discrimination

Right to information

Right to self-determination

Right to privacy

Right to confidentiality

# Obtaining consent for examination

---

Consent should be “informed consent”

Explaining all aspects of the consultation

- Examination process
- Samples that are obtained
- Information released to other parties including police and judiciary
- Management options

Informed Witten consent

# Consent Forms

SEXUAL VIOLENCE EXAMINATION RECORD	NAME: DATE OF EXAMINATION:
<b>CONSENT FOR A MEDICAL CONSULTATION*</b>	
<p>..... (<i>insert health worker's name</i>) has explained to me the procedures of examination, evidence collection and release of findings to police and/or the courts.</p> <p>I ..... (<i>insert patient's name</i>) agree to the following:</p>	
<p>(Mark each n that applies)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Examination, including examination of the genitalia and anus.</li> <li><input type="checkbox"/> Collection of specimens for medical investigations to diagnose any medical problems.</li> <li><input type="checkbox"/> Collection of specimens for criminal investigation.</li> <li><input type="checkbox"/> Photography.</li> <li><input type="checkbox"/> Providing a verbal and or written report to police or other investigators.</li> <li><input type="checkbox"/> Treatment of any identified medical conditions.</li> </ul>	
<p><i>Patient's (or parent's or guardian's) signature or mark</i> .....</p>	
<p><i>Witness' signature</i> .....</p>	
<p><i>Date</i> .....</p>	

# Examination

## Good doctors: good practices

Greet the patient by name

Make her your central focus

Introduce yourself and tell her your role.

Be empathetic and nonjudgmental

Be unhurried



Take time to explain the procedures and why they are needed

Give your patient a chance to ask any questions

Allow a family member/ friend present throughout the examination, if he/she so wishes.

Chaperone always to be present throughout examination

## WHY CHAPERONE IS NEEDED?



provide comfort and support  
to the patient

always be present

preferably a trained health  
worker

protects the examiner in the  
event of an allegation that  
examiner behaved in an  
unprofessional manner

# Chaperone

# Examination setting



Good light, warm, clean and private place.  
Provide both auditory and physical privacy.

Separate areas for undressing (e.g. behind a screen or curtain, or separate room).



Obtaining History of the incident

# Procedures in history taking

---

Befriending

Prevent re-victimization/ Secondary victimization

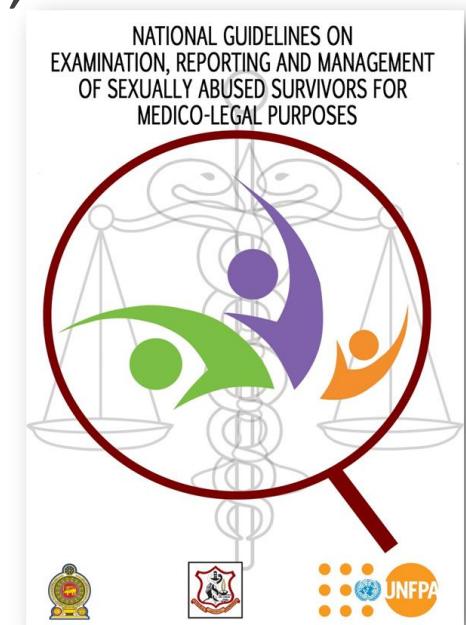
Open ended /no leading questions

Leads the doctor in physical examination & evidence collection

# History

---

- ❑ General information
- ❑ Information about the incident-how, when, where, who, etc.
- ❑ Sexual, gynecological and obstetric history
- ❑ Past medical history
- ❑ Social history
- ❑ Family history
- ❑ Relevant systemic inquiry

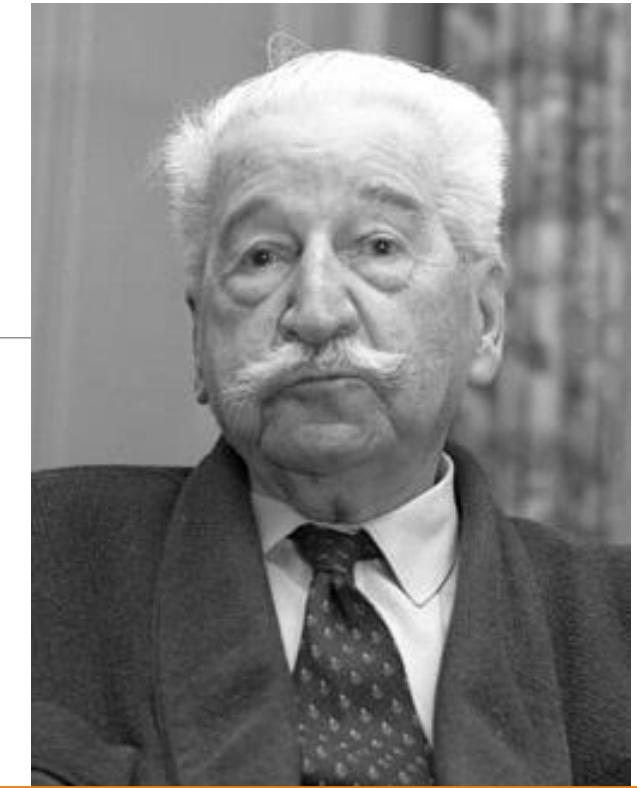
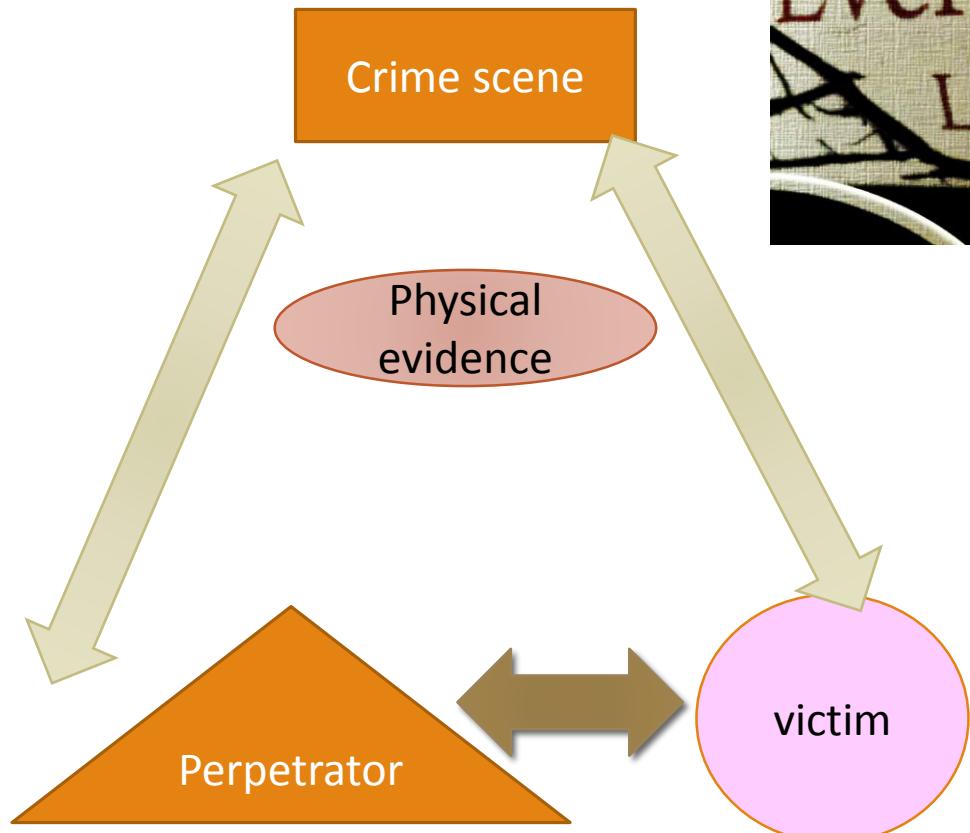


[LITRATURE SEX ASSAULT\National  
Guidelines.pdf](#)

# Sexual assault forensic/physical evidence



# Why we need forensic evidence?



Physical evidence is factual. Unlike humans, It's a silent witness that speaks when humans cannot. Physical evidence cannot be wrong, it cannot lie, it cannot be wholly absent. Only human failure to find it, study and understand it.

# Best practices during examination



Throughout the physical examination inform what you plan to do next and ask permission.

Always let the examinee know when and where touching will occur

Show and explain instruments and collection materials.

Examinee may refuse all or parts of the physical examination and you must respect the patient's decision

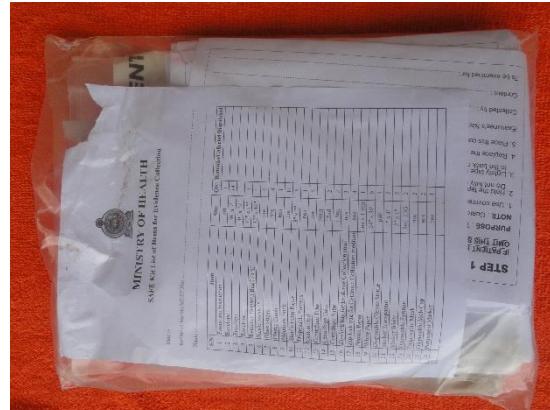
Allowing the examinee a degree of control over the physical examination is important to her recovery.

# “Rape/ SAFE kits” (72 hours/96 hours)

## INTERNATIONAL



## SRI LANKAN SAFE KIT BY MOH



# Universal precautions



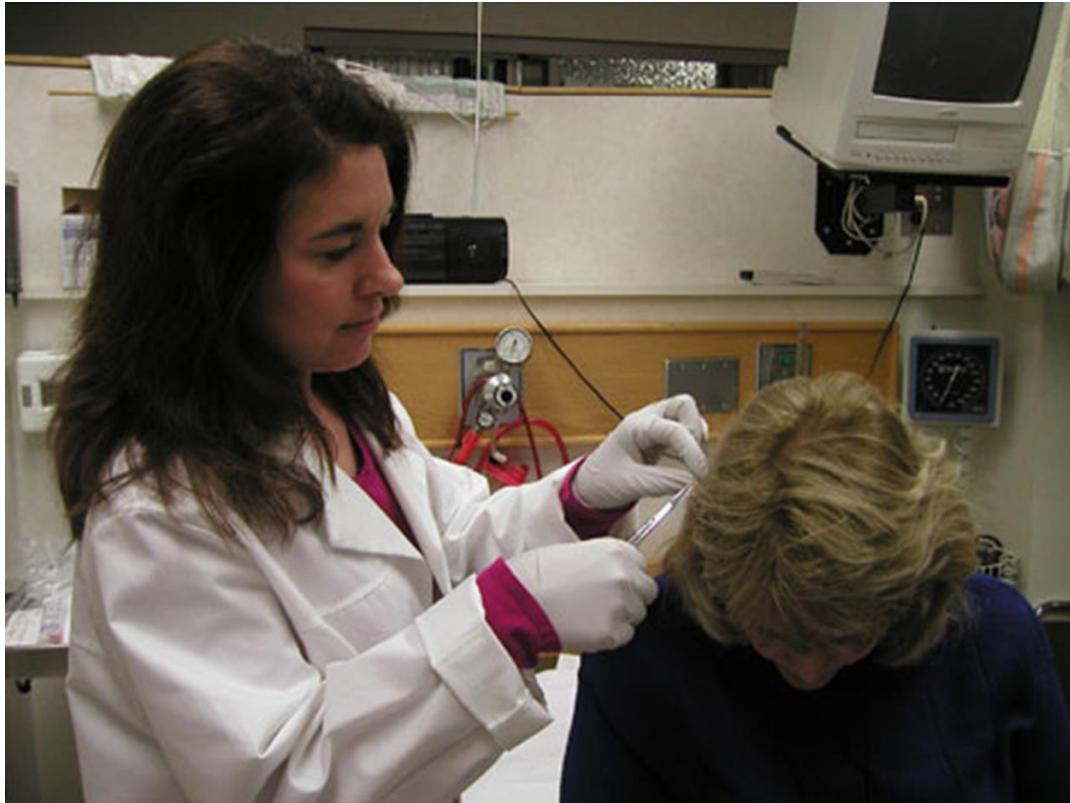
# Debris collection

---



# Head hair (known head hair)

---



# Nail scrapings

---



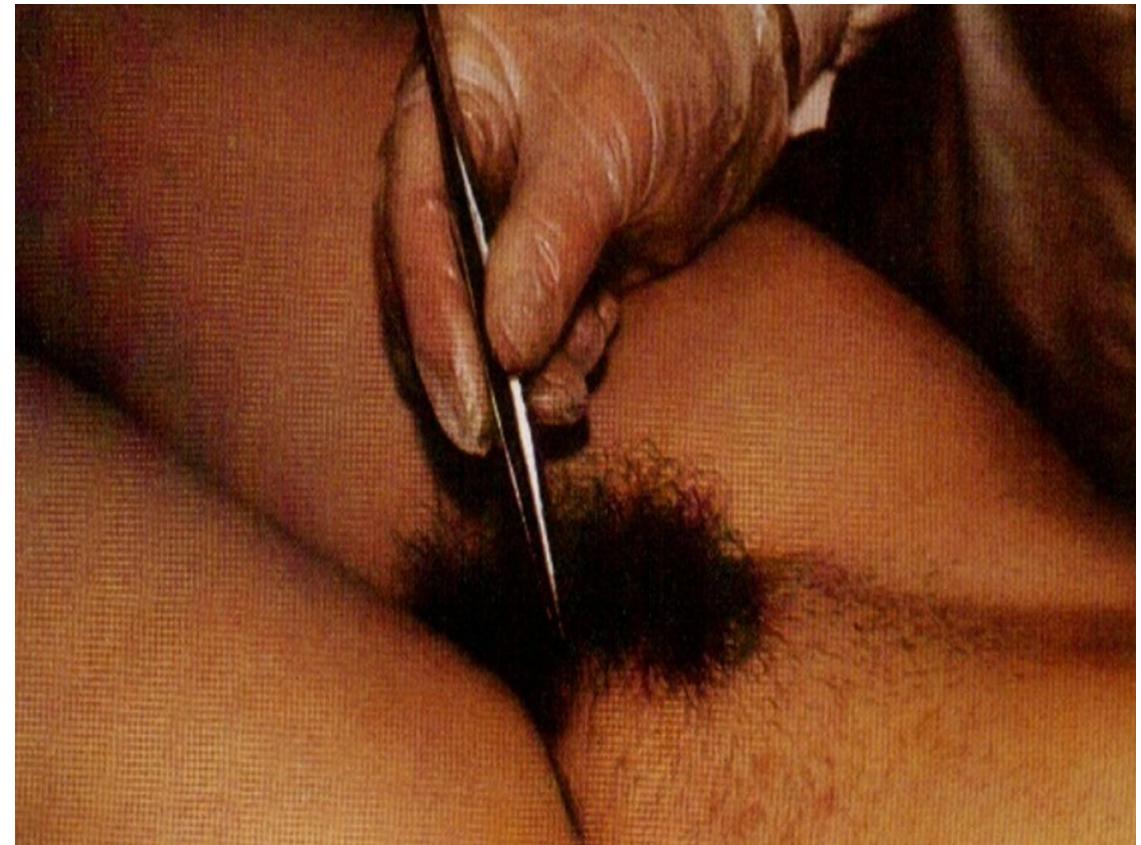
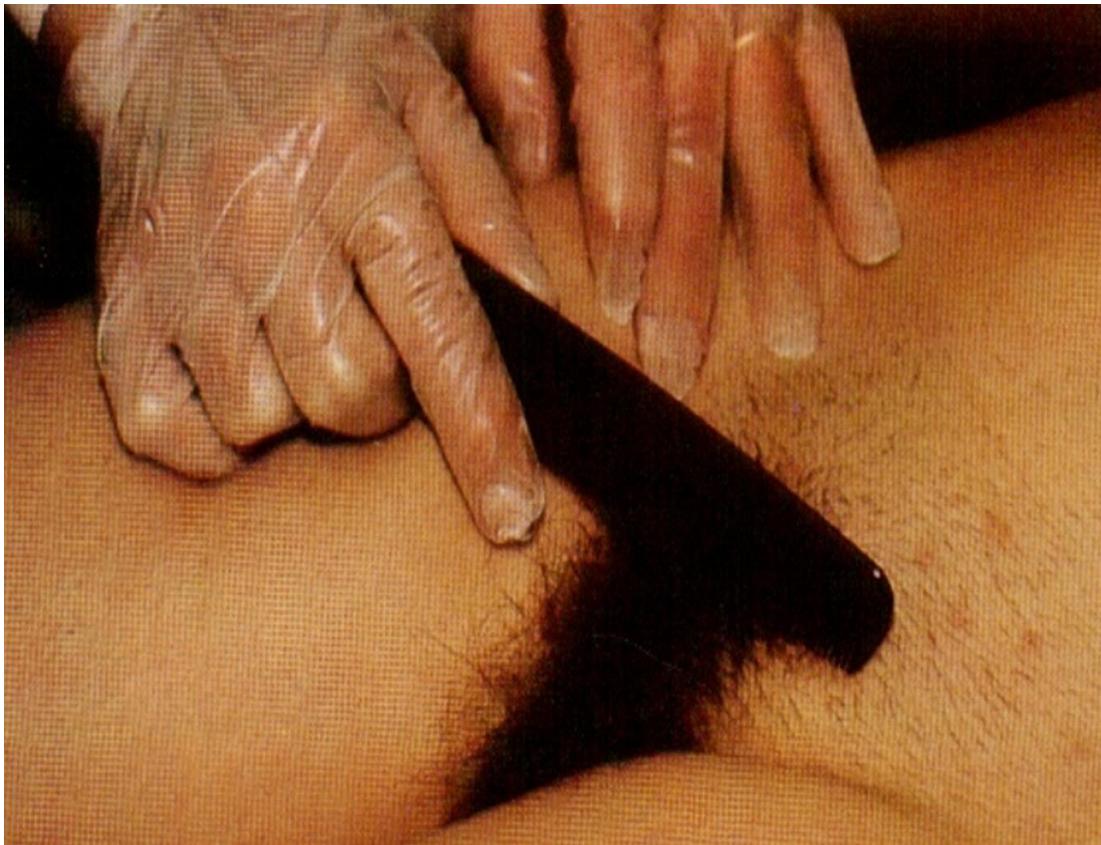
# Stains of the body

---



# Pubic combings & known pubic hair

---



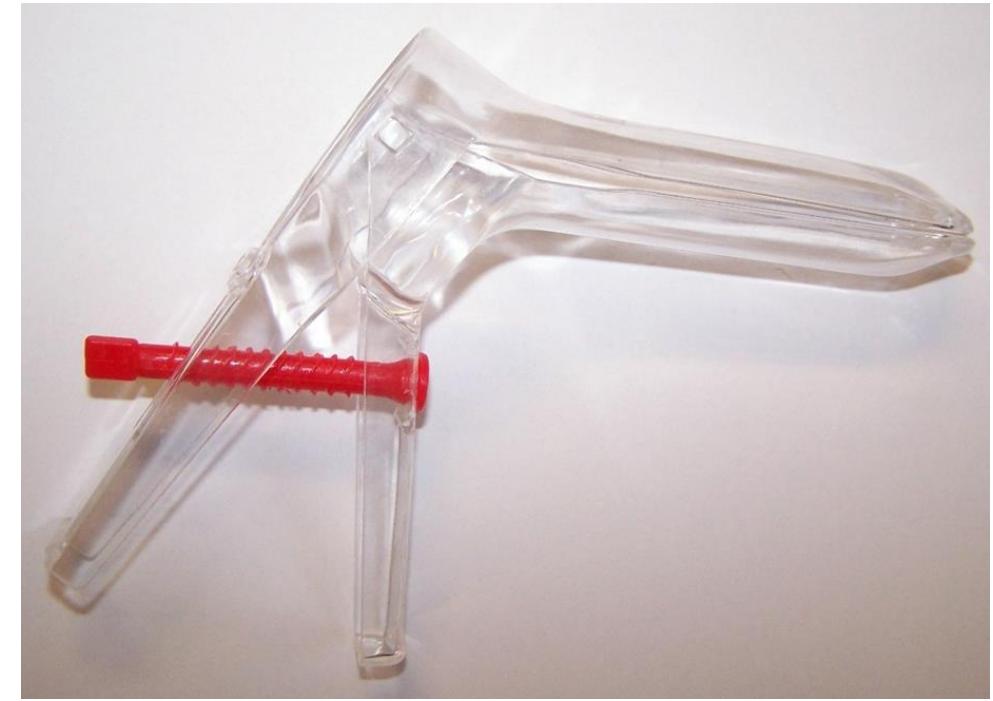
# Genital swabs

---



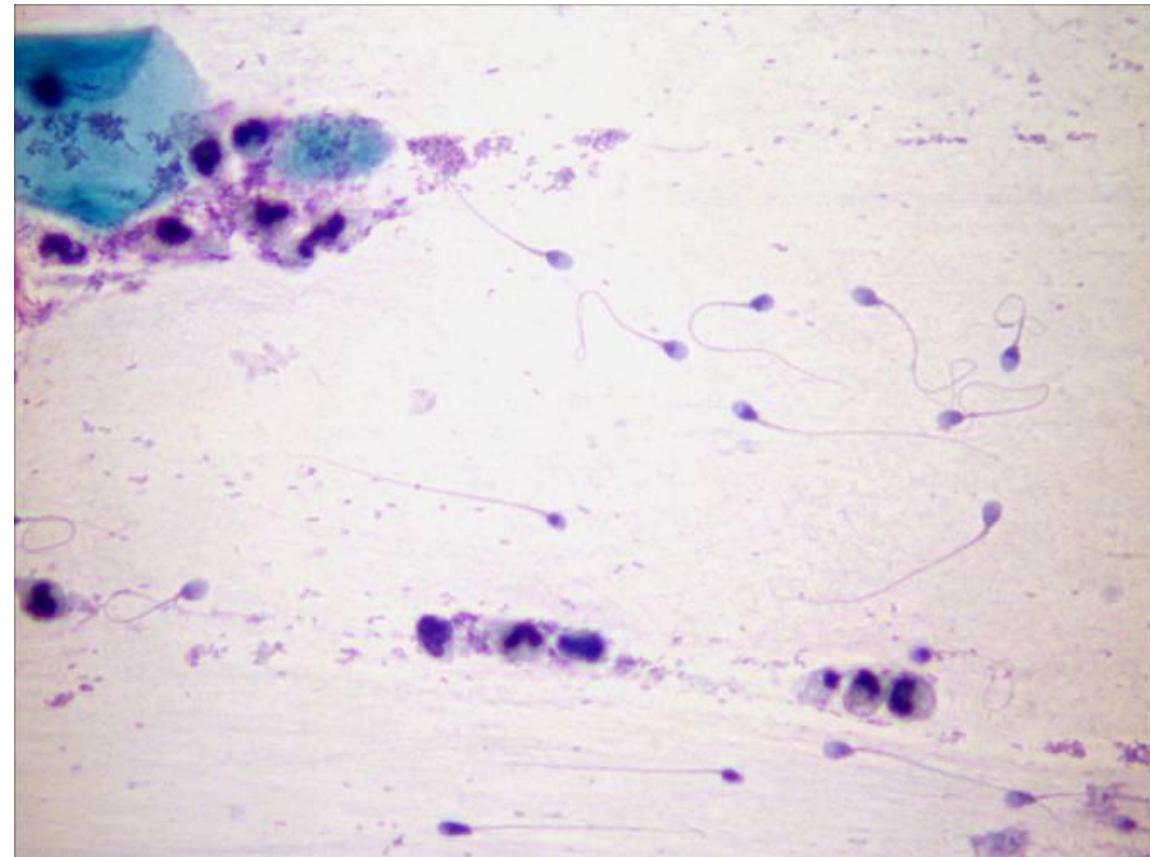


If 12 hours have elapsed since the assault, collect 2 swabs from the cervix.



# Vaginal smear

---



# Allegation of intoxication /drugs

---



Blood : 12 hours

Urine : up to 96 hours

# Golden rules in evidence collection

---

Take all steps to avoid contamination during collection

- Universal precautions by the examiner (doctor/SANE)

Take steps to avoid cross contamination (perpetrator/victim)

- Transportation, during examination

Maintain chain of custody (storage/ transportation/ lab)

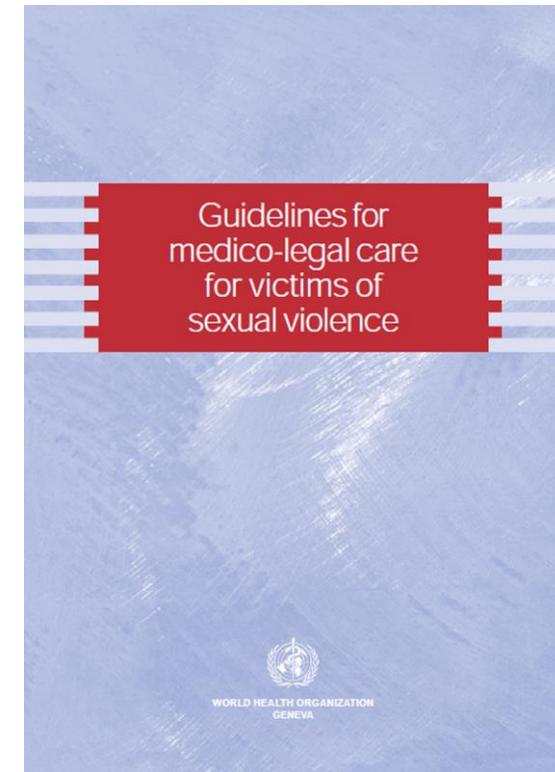
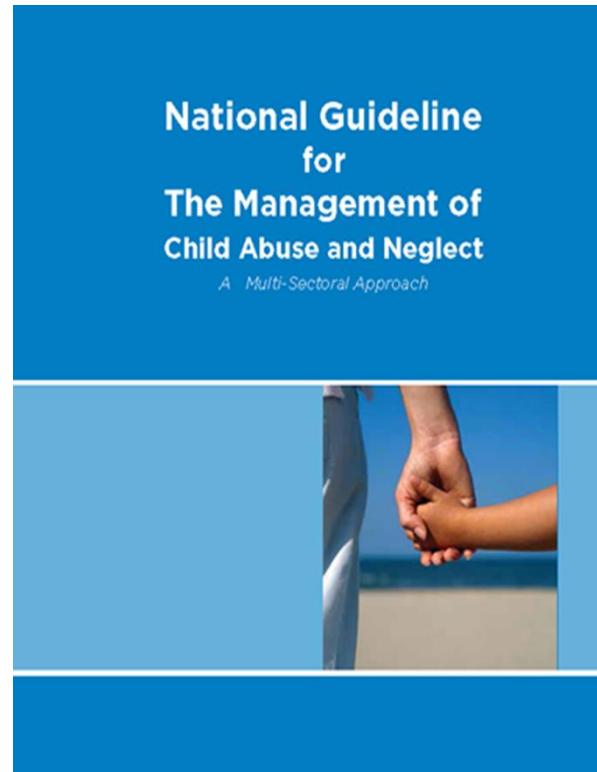
---

<https://www.youtube.com/watch?v=vRcR8s6oQtg>



# Recommended reading

---



# Summary

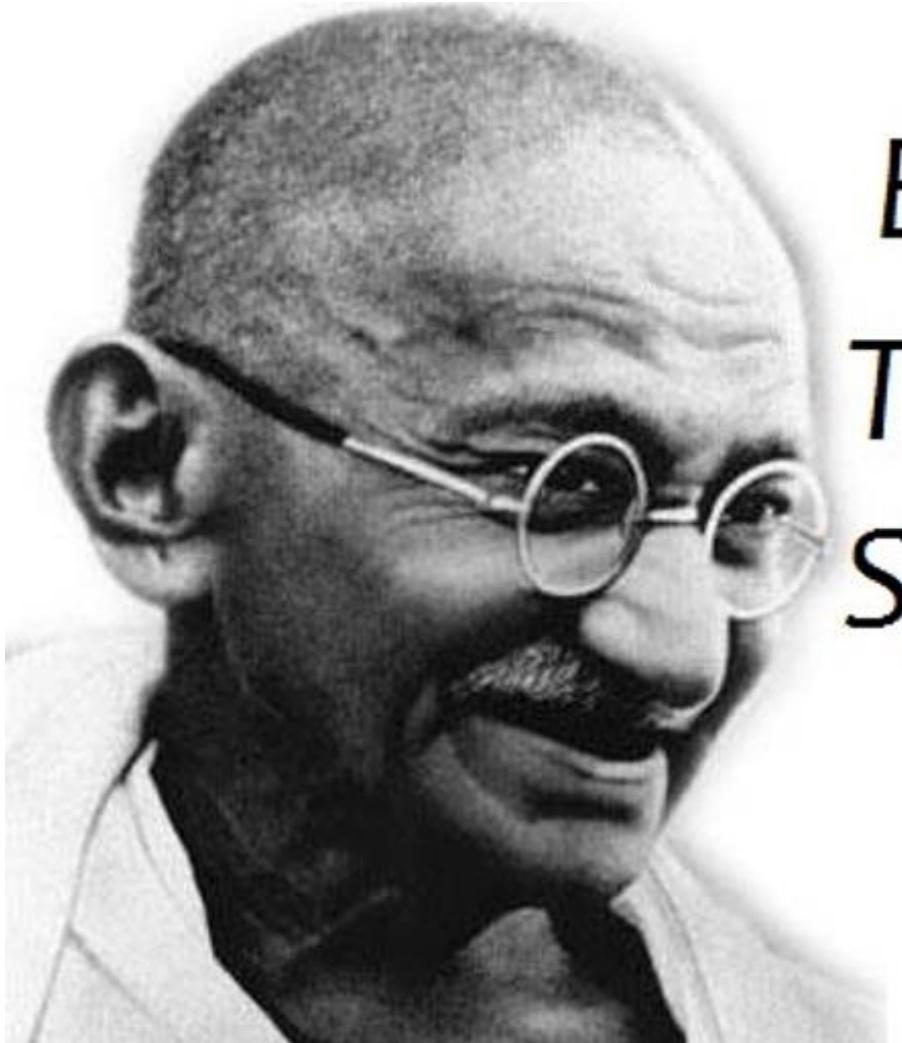
---

- ❑ Survivor concerns and human rights are top priority.
- ❑ The doctors should practice highest ethical standards
- ❑ Early incidents(72-96 hrs) collection of evidence is important.
- ❑ An incident within 72-96 hrs is a medico-legal emergency
- ❑ National guidelines enables an examiner to do a quality work



# Develop an attitude of





Be The *Change*  
That You Want to  
See In The World.

