

The Bridge SARC: How we support survivors and professionals

Dr Neky Sargant

Consultant General Paediatrician with expertise in Adolescent Health | Bristol Royal Hospital for Children
Clinical Lead for Eating Disorders | Bristol Royal Hospital for Children
Forensic Medical Examiner | The Bridge, Sexual Assault Referral Centre

The Bridge Adult and Children's Centre of Excellence Sexual Assault Referral Centre
University Hospitals Bristol and Weston NHS Foundation Trust

Looking after yourself

- Sexual abuse can be difficult to think about and talk about. Thinking about it and talking about it will affect us all in **different ways**, at **different times**.

It is therefore important that we...

- Are aware of the feelings and experiences of others
- Are kind to ourselves (personally and professionally)



Overview

- Scale and nature of SA
- Trauma informed
- Communication
- The Bridge SARC – what we do
- Spotlight
- Resources



Aim - realise how important you are in the management of trauma for CYP & adults

Scale and nature

What is Sexual Violence?

- Any unwanted sexualised act or activity, whether perpetrated by someone known or unknown.
- Anyone can be the victim of sexual violence.
- It is a crime of power and control, NOT necessarily a desire for sex

Scale

- Estimates from the Crime Survey for England and Wales for the year ending March 2025 showed that **1.9% of adults aged 16 years and over had experienced sexual assault** (including attempted offences) in the last year.
- Approximately **15.9% of people aged 16 years and over** (7.7 million) had experienced sexual assault (including attempts) since the age of 16 years.
- **Unwanted sexual touching was the most common type of sexual assault** experienced by people aged 16 years and over in the last year (1.4%) compared with rape or assault by penetration (including attempts) (0.2%).



How many children experience sexual abuse?



A snapshot of child sexual abuse

Centre of expertise on child sexual abuse



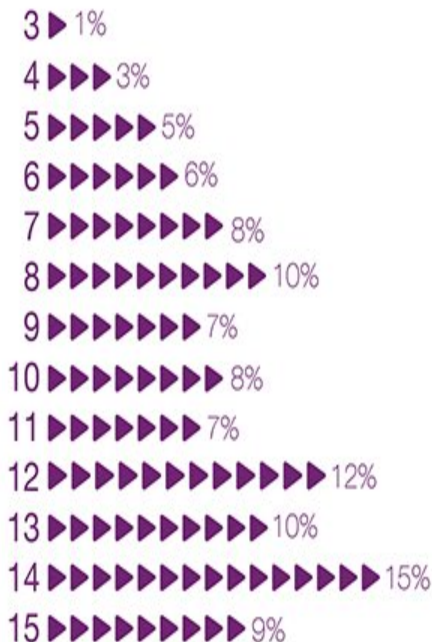
15% of girls/
young women



5% of boys/
young men

are estimated to experience **some form of sexual abuse** before the age of 16

Age when abuse started



The likelihood of experiencing child sexual abuse **does not vary significantly with ethnic group** in England, but people from some minority ethnic communities **face barriers to reporting abuse**



1 in 8 victims come to the attention of the authorities at the time

The most serious and repeated offences are more likely to be committed by **known persons**



For boys, abuse by authority figures is more common



For girls, abuse by family members is more common

Disabled adults are **2x**

As likely as non-disabled adults to say they had been abused in their childhood



of those who had lived in a care home reported experiences of child sexual abuse - almost **4x as many** as those living with family / carers



of child sexual abuse **images depicted girls** only in 2019



Founding Principles

Trauma informed

- Safety
- Trust & honesty
- Enable choice and control no matter how small
- Individual

Trauma

“Resulting from an event or series of events that is experienced as physically or emotionally harmful and has lasting adverse affects on the individuals functioning, social, emotional and psychological well-being.”



It's not what you do it's the way that you do it.....

- Professionals are often worried about saying doing the wrong thing so say or do nothing

Research shows that your immediate response when someone discloses to you that they have been raped or sexually assaulted can have a powerful effect on their later recovery (Ullman, 2010).

- Whatever your role or the context of the young people have been sexually abused a good principle is to prioritise the **relational** aspects of that consultation.

Being profound in a moment: Candice Harris

- Feel safe in that space at that time
- Remove/addressing the professional power imbalance
- Empowering and judgement free language
- Allow them to be heard
- Seeing the whole person
- Supporting non abusing parents and carers, siblings, peers

Remember that non recent CSA is
Still CSA.

Your interaction might be
profound in that moment:

Communication



- Minimise or avoid re-traumatisation (this can happen when we ask survivors to talk about a traumatic experience and consciously trigger memory)
- Avoid making them 'retell' and instead;
 - Clarify
 - Ask only what you need
 - Explain why you are asking
 - Don't make assumptions
 - Be open and honest about next steps
- Maintain choice and control

Asking Questions

General invitations	Cued invitations	Open ended questions	Closed ended questions	Option posing questions	Suggestively worded questions
Open questions inviting the child to tell in their own words unprompted, encouraging longer answers	Open questions using a cue from the child or undisputed facts	Who', 'what', 'when', 'where', 'how' questions which invite a narrative	'Who', 'what', 'when', 'where', 'how' questions which can be answered in one word or a few words	Questions that can be answered "yes" or "no", or that prompt the child to select from given choices	Questions that force the response in a specific direction, or use false or unknown information

Clinical care



- 'The Bridge' is a Sexual Assault Referral Centre (SARC)
- Opened in 2009 it is a single point of access to offer medical care, emotional and psychological support, and practical help to anyone who has been raped or sexually assaulted.
- Commissioned by NHS England and Police Crime Commissioner's Office
- It is open to any adult or child, living in Bristol, South Gloucestershire, North Somerset, Bath & North East Somerset or Somerset (or people visiting these areas)
- Any child, living in Gloucestershire, Wiltshire or Swindon.



‘To enable adults, children and young people who have been raped, sexually assaulted, or sexually abused at any time in their lives to live healthier, hopeful lives, empowered by the support they have received’

How people access our service



“You took away my worth, my privacy, my energy, my time, my safety, my intimacy, my confidence, my own voice, until now.”

What can The Bridge offer?

- Someone to talk to and to discuss options (client and professional support)
- A Forensic Medical Examination (FME)
- Medical treatment
- Referrals to other support and health agencies (Sexual health/Counselling/ISVA/CYPSVA)
- Ongoing support during the referral process
- Support for the future (referral at a later date if not now)
- Open 24 hours – no overnight paediatric FMEs

Forensic Medical Examination (FME)



- What is a Forensic Medical Examination?
 - Holistic examination
 - Time
 - Autonomy
 - Forensics

**FORENSICS ARE NOT THE
FOCUS – THE CLIENTS ARE**

What an FME cannot do



- Cannot legally confirm there and then that there has been an assault (DNA is gathered for laboratory testing)
- Cannot routinely test for all sexual health infections

When you see someone in primary care

Consider:

- Immediate medical needs trump everything else
- Emergency contraception/PEPSE.
- Double gloves
- Stick clothing in a bag if need be
- Only examine what you need to examine
- Document well and information share
- Risk of self-harm / on-going mental health problems.
- Are they an adult with needs for care and support that may make them vulnerable to ongoing harm/neglect and abuse?
- Child protection concerns?



Forensic Sample timescales

FORENSICS ARE NOT THE FOCUS – THE CLIENTS ARE

- Sooner rather than later!
- Injury documentation ASAP
- Persistence data:
 - Vaginal if vaginal rape; 7 days (digital 2 days)
 - Anal if anal rape; 3 days
 - Oral rape; 2 days
 - Skin swabs: 2 days
 - Toxicology: Blood 3 days, urine 5 (maybe more..) hair after 4 weeks to 6 months)

Outside the forensic window?

- Child – police/ social care – strategy discussion
- Ask for consent to provide The Bridge with their details so that we can offer support.
- Phone 0117 342 6999 (24/7/365 days)
- Email thebridge@uhbw.nhs.uk attaching completed referral

Our Website

<https://www.thebridgecanhelp.org.uk/>

(where you can)

- Refer
- Information
- Forensic windows





The Law

- 2.7 % cases of sexual assault are charged
 - high evidential threshold
 - lengthy investigation process
 - digital disclosure demands
 - trauma
- 50-60% conviction rate

Spotlight

Sexual assault of men and boys

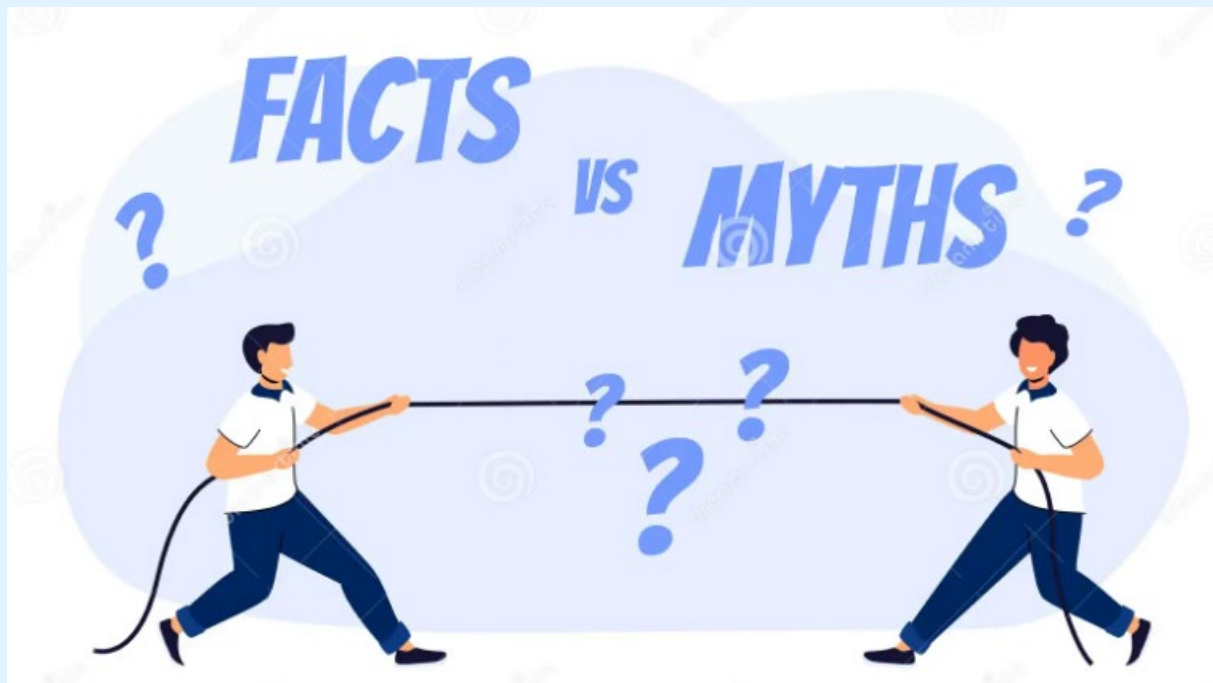


- Difficult to know the true prevalence.
- Generally estimated that 1 in 6 males experience an unwanted or abusive sexual experience in their lifetime.
- 45% of gay and bisexual men said they have been affected by sexual assault
- According to the CSEW, only 3.9% of males report their victimisation to the police

The hidden story

- Over three quarters of people who kill themselves are men (Reference: ONS).
- Men report significantly lower life satisfaction than women in the Government's national well-being survey – with those aged 45 to 59 reporting the lowest levels of life satisfaction (Reference: ONS)
- 73% of adults who 'go missing' are men (Reference: University of York).
- 87% of rough sleepers are men (Reference: Crisis).
- Men are nearly three times more likely than women to become alcohol dependent (8.7% of men are alcohol dependent compared to 3.3% of women) (Reference: HSCIC).
- Men are three times as likely to report frequent drug use than women (4.2% and 1.4% respectively) and more than two thirds of drug-related deaths occur in men (Reference: Information Centre).
- Men make up 95% of the prison population (Reference: House of Commons Library). 72% of male prisoners suffer from two or more mental disorders (Reference: Social Exclusion Unit).
- Men are nearly 50% more likely than women to be detained and treated compulsorily as psychiatric inpatients (Reference: Information Centre).
- Men have measurably lower access to the social support of friends, relatives and community (References: R. Boreham and D. Pevalin).

Sexual assault of men and boys



Sexual assault of men and boys

Men cannot
be sexually
assaulted

Sexual assault
via penile-anal
penetration
makes you gay

Erection/
ejaculation
during assault
means there
was consent

Criminal Justice
and Public
Order Act 1994
recognised the
rape of men

Men cannot
be sexually
abused by a
woman

Sexual Offences
Act 2003 added
“assault by
penetration” and
“forced non
consensual acts”

#DontForgetTheBoys



Spotlight

Pornography

- It's a big business
- While paid-for services exist, key drivers is a business model offering free access to pornography, with revenue generated through data-mining, on-sales and advertising.

National Sex & relationships

OPINION

Porn as default sex educator heightens risk of abuse

By Maree Crabbe

January 7, 2021 — 12.10am

Save

Share

A

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Late last year Pornhub, one of the world's most popular porn sites, removed millions of videos that had been uploaded by unverified sources after an investigation by *The New York Times* found content on the site featuring under-age subjects and sex trafficking victims. Credit card companies also revoked their services to Pornhub in the wake of the article's revelations.



Pornhub has removed thousands of videos from its platform. GETTY

What is (some)Porn like?

Research Study

- 70% frequently saw men portrayed as dominant (compared to 17% frequently seeing women as dominant);
- 36% frequently saw women being called names or slurs (compared to 7% frequently seeing men treated this way);
- 35% frequently saw 'consensual' violence towards women (compared to 9% frequently seeing this towards men)
- Videos with Asian and Latina women were more likely to depict aggression than those involving white and black women
- Black men more often portrayed as perpetrators of aggression than white men, and black women more often targets of aggression than white women



Pornography

- 2021 research study
- 3 most accessed porn sites over 150 000 titles
- 1 in 8 titles describes sexual activity that depicts sexual violence (e.g. *‘again and again’* “forced”)
- The word *‘Teen’* was in 7.7% of titles
- 6.4% of titles contained family relationships as a descriptor; 4.4% explicitly so (e.g. brother f**** sister in the ass outside)
- Association between pornography use and unhealthy sexual scripts

Case studies

J aged 15 with a moderate learning disability. Had been watching pornography online. Responded to a message where he was asked for pictures of himself naked. The person claimed to be a 14 year old girl. J sent the images. He was then asked for images of a child. Took photos of his step brother aged 3 in the bath and shared.

M aged 12 had been searching online for “sexy things”. Had seen some porn on his friends phone. This included images of gagging. Felt pressured into watching. Decided to try it with his 6 year old sister.

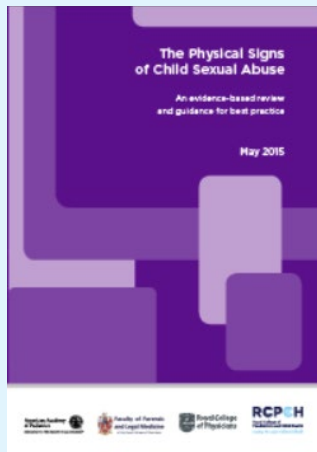
S aged 11 had been watching pornography regularly for over a year. Said it made him think about sex a lot. Decided to “try out” some of what he saw with his 9 year old sister’s friend. Followed her into the bathroom, raped her and asked her if she wanted him to come in “her mouth, her ass or her pussy”.

Pornography

- Ask the questions ...Build the broader skills....
Limit exposure.....Encourage critical
thinking...Have the conversations....
- Be mindful of those with additional needs and
vulnerabilities e.g. young people with learning
disabilities, neuro-diversity, mental health
difficulties

Getting Help

Resources



[Safe Link](#) – ISVA/CYPSVA support

[SARSAS](#) – Talking therapy/support

[Womankind](#) – Talking therapy/support

[Somerset Phoenix Project](#) – Young people therapy

[The Green House](#) – Young people therapy

[Trauma Breakthrough](#) – Talking therapy/support

[We Stand](#) – Parents/carers

[Survivor Pathway](#) – Options resource

Summary

- Be Brave
- Be Hopeful
- [Maya Angelou](#)
[introduces and recites](#)
[her poem 'Still I Rise'](#)



Thank you for listening