



BRIEFING

Forensic Medical
Services (Victims of
Sexual Offences) Bill
Stage 1
(2020)

**RAPE
CRISIS
SCOTLAND**



Briefing Paper for MSPs | Forensic Medical Services (Victims of Sexual Offences) Bill

Rape Crisis Scotland welcome the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill.

We view this as a critically important piece of legislation that – if implemented properly – has the potential to transform survivors’ experiences of healthcare following sexual violence. We know from survivors’ accounts that an approach and response that is rooted in compassion is one that can make a fundamental difference in how someone moves forward after sexual violence. If passed, this Bill would be the first step in ensuring that survivors in Scotland rightly receive a response that is consistent, compassionate and trauma-informed.

The Context

The failures and dangers of the current operation have been well publicised. For too long forensic medical services in Scotland have been patchy, inconsistent and at times traumatising, characterised by long delays, a lack of access to female Doctors and examinations taking place in inappropriate and unsuitable locations including police stations.

In September 2019 Willow* shared her story of accessing services with Rape Crisis Scotland after sexual violence after being assaulted by her ex-partner and reporting it. Overstretched services meant a wait of almost **two days** for a forensic medical examination. During these two already horrific days, Willow wasn’t allowed to shower, wash or brush her teeth in case it compromised evidence:

“I was in the same underwear as when I’d reported. You are already feeling dirty, even if I’d scrubbed myself within an inch of my body after it happened I’d still have felt dirty, but you were literally not allowed to wash.”

Survivors like Willow* are being badly let down, in part because this issue has fallen between the cracks of health and justice – there is a real need for clear leadership and responsibility and this Bill provides an opportunity for change that we urge MSPs to seize.

Self-referral

The principle of self-referral within this Bill is of critical importance. Survivors are often in shock following rape or sexual assault and the decision to report these crimes is often a difficult one, for a multitude of reasons. No survivor should ever be pressured or coerced into reporting, but the forensic window means that evidence can be lost if someone decides at a later stage that they would like to report.

The ability to capture and store this potential evidence and access important healthcare in the immediate aftermath of sexual violence is a radical and necessary shift in how we approach this issue, and ensures that survivors have a degree of control over a process that too often is experienced as happening to them, rather than one which centres them.

Remit and Responsibility

Equally as important is the confirmation that this is a health issue and therefore falls under the responsibility of Health. As aforementioned, we consider that a previous lack of clarity on this area has allowed for this issue to be neglected and not prioritised. This absolutely cannot continue, so we welcome this commitment and confirmation.

Committee Recommendations

Members of the Rape Crisis Scotland Survivor Reference Group (SRG) were pleased to meet with the committee to share their experiences of accessing forensic medical services. We are grateful to the SRG for having made time to meet with the committee, and to MSPs for having listened to their – in many cases very distressing – experiences and used it as a catalyst for change.

We have considered the recommendations of the committee and would suggest that some of them are in our view questions for implementation rather than legislative change. For example, the provision of information – and indeed the quality and consistency of this information – is absolutely crucial but does not require legislative change.

Regarding the **age for self-referral**, we consider that the Committee and the Bill has got this right.

We would stress that **access to self-referral must be consistent across the country and available 24/7**. Again, this is primarily a matter for implementation and evaluation to make

sure that standards in relation to the timescales of the provision of examinations are being met across the country.

Rape Crisis Scotland welcome the recognition of the need for and benefits of **independent advocacy support**. It is critical that Rape Crisis Advocacy Services are a core part of the pathway and fundamentally that they are adequately resourced to ensure access to anyone who needs this service, whether this is on a statutory basis or integrated as part of the clinical pathways that support the Bill.

Access to female doctors is the single most pressing and important issue that requires to be addressed to improve survivors' experience of the process.

We note that this is not currently a single sex role. Replacing the word 'gender' for 'sex' in the bill is not going to address the barriers to survivors being able to access female doctors; what is required is to proactively ensure there are sufficient female doctors able to undertake this role. One of the key barriers is where the role also requires doctors to cover custody cases as well as undertake forensic examinations. Making this a dedicated role would have a significant and positive impact on the availability of female doctors.

Conclusions

We warmly welcome the Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill and are glad to have had the opportunity – alongside the Survivor Reference Group – to have helped to shape the direction of this Bill.

Scotland is a country that values compassion and justice and it is vital that we work to make sure that our response to survivors of sexual violence is trauma-informed and brought into line with these values.

Our final word must go to those survivors who have shared their experiences and expertise in order to make this Bill the best that it can be. Thank you.