



## Session 9

### Handout 9b: Preparing to gather the story<sup>1</sup>

#### Background/rationale

Telling others about the experience of sexual assault is often stressful, embarrassing and difficult. It can also be challenging for the person listening to the account. The aim of this job aid is to provide some suggestions to prepare individuals to whom the story of sexual violence is told. If someone is willing to talk about what happened and is comfortable with you hearing their account, it suggests that they trust you with this information. It is essential to respect and maintain this trust. Anyone obtaining the story must be trained to interview victims of sexual violence.

#### Key points

- Make sure that the immediate environment is secure and private.
- Ensure that any medical, psychological and safety issues have been addressed.
- Provide a trained interpreter if needed and with the consent of the victim/survivor.
- Ensure that victims have access to and choice of a same-sex interviewer.
- Acknowledge the difficulty in telling the account, which will include embarrassment, fear and patchy recollections; and respect cultural, religious and ethnic sensitivities.
- Ensure that the victim is comfortable speaking and is not doing so under coercion.
- Seek the victim's informed consent to document (in writing, photographs/videos, recording devices) the details she/he tells you and to hold this information securely until a later date, and ensure she/he knows to whom you may pass it on. Explain how information may be used and any limits to confidentiality.
- Stress the importance of being truthful and of the value of her/his account.
- Allow the victim to have another person present (obligatory for children) if they wish.
- Offer emotional and social support during the process.
- Allow the victim to tell her/his account when and how she/he wishes. Respect her/his choice if she/he wishes to stop at any time.
- Be sensitive to cultural, ethnic and religious needs of victims and/or their caregivers. Be aware that female and male victims may have different needs and concerns, and respond to these (i.e. be gender sensitive).

Above all else – listen with empathy and allow a free narrative.

#### Some questions that could be asked of the person telling her/his story:

- Personal information (ideally supported by official identification papers) – name, address, telephone number, email address. How does the victim wish to be contacted?

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<sup>1</sup> WHO, UNODC. Strengthening the medico-legal response. Geneva: World Health Organization; 2015 ([https://apps.who.int/iris/bitstream/handle/10665/197498/WHO\\_RHR\\_15.24\\_eng.pdf?sequence=1&isAllowed=y](https://apps.who.int/iris/bitstream/handle/10665/197498/WHO_RHR_15.24_eng.pdf?sequence=1&isAllowed=y), accessed 21 July 2018).



- Is she/he a victim or witness? Is she/he recounting details of what happened to her/him or to another person (if the latter, then details of that other person should also be recorded)?
- Setting of the assault – when, where, what time and date, how many times, were there any other witnesses (and if so, who), were any photographs or other recordings made?
- Details of the assault – health providers should focus on details relevant to the provision of medical care. Specific information about perpetrators for the purpose of legal processes should be gathered by trained investigators. The victim can be asked to provide as many details as possible about what happened before, during and after the assault – in particular, details of any penetration, any acts of humiliation, other assaultive events, restraint or detention, threats or blackmail, assaults or threats to friends, family or other members of the community.

### **Additional resources**

- Do's and don'ts in community-based psychosocial support for sexual violence survivors in conflict-affected settings. Geneva: World Health Organization; 2012 (WHO/RHR/HRP/12.16; [http://apps.who.int/iris/bitstream/10665/75175/1/WHO\\_RHR\\_HRP\\_12.16\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/75175/1/WHO_RHR_HRP_12.16_eng.pdf), accessed 9 May 2014).
- Guidelines for medico-legal care of victims of sexual violence. Geneva: World Health Organization; 2003 ([http://www.who.int/violence\\_injury\\_prevention/publications/violence/med\\_leg\\_guidelines/en/](http://www.who.int/violence_injury_prevention/publications/violence/med_leg_guidelines/en/), accessed 9 May 2014). United Nations Office on Drugs and Crime (UNODC) and United Nations Children's Fund (UNICEF) tools for child victims and witnesses
- UNODC, UNICEF. Handbook for professionals and policymakers on justice in matters involving child victims and witnesses of crime. New York: United Nations; 2009 (<http://www.unodc.org/files/Handbook%20for%20Professionals%20and%20Policymakers%20on%20Justice%20in%20Matters%20involving%20Child%20Victims%20and%20Witnesses%20of%20Crime.pdf>, accessed 9 May 2014).
- UN Economic and Social Council Resolution 2005/20 of 22 July 2005. Guidelines on justice in matters involving child victims and witnesses of crime. New York: United Nations; 2005 (<http://www.refworld.org/docid/468922c92.html>, accessed 9 May 2014).
- UNODC, UNICEF. United Nations guidelines on justice in matters involving child victims and witnesses of crime. Online training (<http://www.unodc.org/justice-child-victims/>, accessed 9 May 2014).
- UNODC, UNICEF. Justice in matters involving child victims and witnesses of crime: model law and related commentary. New York: United Nations; 2009 ([http://www.unicef.org/albania/Justice\\_in\\_matters.pdf](http://www.unicef.org/albania/Justice_in_matters.pdf), accessed 9 May 2014).