

## 4.2 History taking - role play

### Learning objective for this exercise:

Develop skills for history taking of survivors of sexual violence

### Time:

30-45 minutes

### Resources needed:

- Print out of Handout: Topics to cover when taking the history with a survivor for each group
- Print out of Handout: Sample history and examination form for each group
- Print out of scenarios (below)

### Instructions for facilitators

- Divide participants into groups of three. Ask each group to decide who will play the roles of the patient, the patient's mother and the health-care provider, or the patient, observer and health care provider.
- Separate the scenarios, give 1 scenario to each group.
- Ask the "providers" to listen to the patient's account and then ask about the history of the sexual assault (Topics to cover when taking the history with a survivor), record findings on the Sample history and examination form
- Each role play should take about 10 minutes. Then ask the participants to switch roles within their group and repeat the role play one or two more times.

### Participant instructions:

- Divide into groups of 3
- In each group choose roles: patient, patient's mother and health care provider, or patient, observer and health care provider
- Read your character description to yourself.
- Health-care provider: Listen to the patient's account and then ask about the history of the sexual assault, prepare the survivor for examination and record findings on the form
- Then, rotate roles in your group and repeat the role play two more times.
- Time: 10 minutes for each role play

### Activity resources

#### Scenario 1 (two characters)

#### Character: Client/patient

You are Elena, an 18-year-old student. You were raped 13 hours ago by someone from school as you were returning home from school. You do not know whether the perpetrator used a condom. You come to the health-care facility with your mother. She is not aware that you are sexually active and that you had sex with your boyfriend 24 hours (one day) ago. Since the rape

you have urinated but not taken a shower. Concerning your medical history, you had a tonsillectomy at the age of 5, and you are healthy. You have a regular menstrual cycle, and your last period was two weeks ago. You and your boyfriend use condoms.

**Character: Client's/patient's mother**

You are Jacky, Elena's mother. Your daughter is 18 years old. Last night, when she returned home from school, she was crying and upset. When you asked her what happened, she told you that she was raped by someone on the way home from school. You were immediately worried about what could happen to your daughter. However, since it was evening, you decided to wait until this morning to bring her to the health facility. This morning you brought her to the doctor for a check-up. You are concerned about her getting pregnant and what people would say if she does. You are worried about your daughter and want to remain with her throughout the consultation. You think she needs your support, and you will not be happy to leave the consulting room if asked by the health-care provider. If you are allowed to stay in the consulting room, you keep trying to answer questions on Elena's behalf.

**Scenario 2 (one character)**

Your name is David. You are a 13 year old boy. You joined the military to fight to earn money for your family. You are afraid of being hurt and injured, but felt proud. You have had medical problems in the past, you had malaria twice last year and you have a wound on your left arm from military training. You are not sure if you have received any vaccinations. You have never heard of HIV.

One day in the fighting your group lost and the other group won. The soldiers beat you and took you into their barracks. Two of the soldiers always beat you. Once they beat you so badly you lost consciousness. One day they forced you to put their penises in your mouth, they said if you did not that they would kill you. You felt something in your mouth, like they passed urine. One of them put their penis in your anus, it was very painful. You felt very ashamed. This happened 3 weeks ago.

Now you have wounds on your back and arms from beatings. You have pain, swelling and itching on your anus, and you have problems passing stool. You are passing urine normally.

**Scenario 3 (one character)**

You are a widowed woman named Mary. You have had 7 pregnancies and you have 6 children, one of your pregnancies ended in miscarriage. You do not have any food and you have been forced to have sex with your neighbor, because he provides you money and food. You don't want to, but you have no other way of feeding your children. This has happened 5 times over the last 2 months. He penetrated your vagina with his penis. Your neighbor did not use physical violence.

You do not have pain, discharge or itching. Your last menstrual period was 6 weeks ago, before that you had normal regular menstrual periods.

### **Discussion**

- Ask the patients how they felt telling their stories and about the health-care provider's response.
- Ask the health-care providers what difficulties they experienced in the history-taking.
- Ask the entire group for suggestions about how the provider could best deal with the mother (for scenario 1).

### **Key messages**

- The history of the rape/sexual assault/abuse determines the examination, forensic evidence collection and treatment.
- Before taking the history, providers should explain any obligations to report the incident to authorities and the limits of confidentiality.
- Obtain consent separately for the history-taking, the examination and forensic evidence collection, and for reporting/sharing evidence.
- Whether to collect forensic evidence is determined by whether the survivor wants legal redress, whether there is a legal obligation to report, whether the survivor presents within five days of sexual assault and whether staff specifically trained to do this are available.

*Adapted from WHO (2019) Caring for women subjected to violence: A WHO curriculum for training health-care providers*