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The Impact of Gynecological Violence on the Healthcare Management of Sexual Assault Survivors

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Problem: Sexual violence is defined as "any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting". It constitutes a severe violation of sexual and reproductive health and rights, with profound short- and long-term effects on survivors' physical and psychological well-being, including morbidity, disability, and mortality. Emergency department staff are often the first point of contact and bear a dual responsibility: providing physical and psychological care while managing forensic procedures. During medical examinations, survivors may be exposed to obstetric-gynecological violence, defined as "any act perceived as sexist or disrespectful of human dignity during gynecological examinations". This can include violations of privacy, derogatory or misogynistic comments, or inadequate communication about medical procedures and treatment pathways.

Innovation: It is important to prevent patients, who have already suffered sexual abuse, from experiencing further trauma as a result of gynecological procedures. Healthcare institutions must establish clear protocols for gynecological examinations and forensic care of sexual assault survivors. This includes:

- Minimizing non-essential personnel and ensuring a safe, confidential environment.
- Providing dedicated, trained professionals capable of interpreting non-verbal cues and avoiding judgmental behavior.
- Conducting simultaneous clinical and forensic assessments guided by the survivor's account to avoid multiple examinations and unnecessary intrusion.
- Treating informed consent as a therapeutic and ethical act, restoring agency, integrity, and dignity.

This presentation emphasizes how relational dynamics can critically influence the risk of gynecological violence.

Impact: An empathetic, informed and shared medical and forensic pathway can protect and empower survivors, whereas judgemental attitudes and a lack of autonomy can perpetuate harm. Implementing survivor-centred protocols ensures that medical and forensic care promotes healing rather than secondary traumatisation, thereby highlighting the essential role of relational care in the recovery process.

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