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### EDITORIAL ARTICLE

## New Protocol of the Forensic Medical Council for the Response to Sexual Violence ☆

### El nuevo Protocolo de actuación ante la violencia sexual del Consejo Médico Forense

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The World Health Organization defines sexual violence as any act or attempt to commit an undesired sexual act using coercion or threats by any individual, regardless of their relationship with the victim, and in any place, including the home and workplace.<sup>1</sup>

In Spain, the Large Scale Survey on Violence against Women in 2019 revealed that 8.9% of women aged 16 years or more had suffered sexual violence by a partner, and that 6.5% had been subjected to this by someone with whom they neither had nor had in the past been in a relationship as a couple.<sup>2</sup>

Sexual violence has a major impact on the health of those who suffer it, making it necessary to offer effective medical assistance and psychological and social support. Nevertheless, expert assessment of possible injuries is also necessary, as is obtaining medical-legal evidence which contribute to clarifying the facts and the identification of the perpetrators.<sup>3</sup>

The existence of protocols for action is clearly an improvement in the quality of the expert response, and it reduces the time that is necessary to bring it about. In our country, the different Autonomous Communities and their Legal Medicine and Forensic Science Institutes have established

their guides for action, or they have developed internal protocols for intervention in these cases. Respecting this, the first report on evaluation in Spain by the Group of Experts Against Violence Against Women and Domestic Violence (GREVIO)<sup>4</sup> underlined the differences between institutions in responses and practices as a deficiency in the care of the victims of sexual violence. It also mentioned the existence of non-victim centered approaches and deficiencies in the collaboration between professionals. On the other hand, the RE-TREAT Project National Report on Spain, published in 2021, makes it clear that inertias and deeply entrenched practices in areas such as the police or judiciary make these institutions a space that is hardly amiable for those who have suffered a crime of this type. This study found that the necessary changes to modify the dynamic and the re-victimizing experience involve placing the personalized redress of the victim at the center of the process. For this purpose, it is necessary to prepare protocols for the conjoint action and coordination of care and forensic services, to ensure the validity and chain of custody of the samples obtained when the victim was first seen.<sup>5</sup>

The Technical Scientific Committee of the Forensic Medicine Council commenced work on preparing an action

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protocol for sexual violence in Spring 2021, analyzing the international bibliography and latest scientific evidence. This aimed to give Forensic professionals the tools to make it possible for them to ensure the quality of expert investigation, while also offering care that centers on the victim and their needs. The resulting document was enriched with contributions by the National Toxicology and Forensic Sciences Institute within its field, on genetic, toxicological, and microbiological analysis.

The specific objectives of this new action Protocol<sup>6</sup> include using it as a guide to improve coordination with the other bodies involved in responding to sexual violence, above all the police and medical bodies, and to strengthen the relationship with the forensic laboratories in charge of studying the evidence corresponding to these crimes.

One new feature of the protocol that can be underlined is that it establishes mechanisms so that medical and forensic action is implemented immediately, without any possible delay due to the lack of a crime having been reported. This principle obeys recent proposals for new forms of attention, based on gradual processes freely chosen by the victim in terms of the times involved in reporting a crime,<sup>7</sup> without this decision compromising the verification of the lesions or the collection of evidence to accredit the crime. In any case, Forensic action must always have the victim's consent, obtained after an explanation in comprehensible language of the scope of the examination, sample taking and possible divulgation of the information obtained in an expert report. This consent, which must be in writing and included in the file, will also include aspects relating to taking and filing images.

The protocol keeps the commonly accepted principle of conjoint medical and forensic assessment, with the aim of avoiding repeated examinations. The time limits for taking samples are updated based on the latest scientific evidence and advances in forensic genetics. Based on this, it is proposed that depending on the circumstances, occurrences 7 or 10 days prior to an examination should be considered recent or acute acts of sexual aggression (ones in which immediate forensic medical action is recommended).

Among other questions, the document makes it possible to somebody whom the victim trusts to accompany them throughout the assessment process, if they so wish. This will aid their emotional situation, avoiding discomfort and reducing the causes of secondary victimization to a minim, following WHO recommendations.<sup>1</sup>

Special attention is paid to following-up victims in case of the possible emergence of delayed harm. To this end, it is recommended that further examinations take place,

avoiding repeated descriptions of the crime and centering on the consequences which it may have for the victim's health. This applies especially to the detection of infectious diseases or mental health disorders.

Finally, quality control mechanisms are established to ensure the integrity and scientific and legal validity of the procedure. It also include the importance of attending to aspects relating to training, teaching, and research that makes it possible to gain new knowledge with the aim of improving the implementation of preventive strategy.

Thus, definitively the new medical-forensic action Protocol for cases of sexual violence in Legal Medicine and Forensic Science Institutes aims to become a tool that harmonizes victim-centered expert attention within the framework of good coordination with the other institutions that are involved. This will guarantee forensic examination that is early, high quality, and standardized, thereby minimizing victim trauma and increasing investigation efficacy to facilitate the resolution of crimes.

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