This tool provides guidance for survivor supporters. This resource can accompany – but should not replace – a structured training and support programme. This tool can temporarily support a survivor supporter who has been chosen by a survivor (rather than assigned by an organisation) while the organisation arranges appropriate training for the individual if possible.

Organisations are advised to appoint someone to meet with the survivor supporter to go through the detailed steps outlined in the guidance in this section. The appointed person should fill in the missing names and contact details in this guidance before the meeting and should provide the survivor supporter with a printed and electronic copy of the guidance at the end of the meeting.

The guidance comprises an introduction and seven main sections. The introduction offers a statement of thanks from the organisation, brief comments on the provision of training and key points regarding what is expected of the survivor supporter. More detailed advice is provided in the seven main sections:

I. Key points to remember

II. Follow policy and procedures and guide the survivor through their next steps

III. Take care of yourself

IV. Understand the reactions to sexual violence

V. Know what to do and what not to do

VI. Remember that you are not alone

VII. Contact details

Guidance for survivor supporters

Thank you for agreeing to support our colleague at this very distressing time. We are asking you to help us by listening to them and being there as a supporter over the next few hours, days, weeks and months. We believe that one of the most important first steps in recovery from an event like this is to feel comfortable with a companion. Because the survivor may be feeling vulnerable, alone, confused, distressed or angry, a safe environment and supportive companion is important at this stage. If a survivor has chosen to confide in you or asked you to support them, please remember that this is a big step for them, and a large amount of trust has been placed in you to support them and keep information confidential.

If you have received training on how to be a survivor supporter, then please rely on your training. If you have not received training on how to be a survivor supporter, then the organisation will aim to provide you with training as soon as possible to help guide you in this role over the next days, weeks and months.

We ask you to be with, listen to and help the survivor as much as you can, without judgement. You may also need to accompany them to see the police or undergo a forensic examination. It is important that they feel safe and supported and are able to feel more in control and make choices. If supporting them causes you problems (with your work or life) please let

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know immediately and the organisation will support you.

I. Key points to remember

* Your main responsibility is to support the survivor.
* Your main contact point within the organisation is the

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* You should be with, listen to and help the survivor as much as you can and without judgement.
* Your role is to guide the survivor through the different response steps and to provide all the support and information they will need to make informed decisions on their own.
* You should not try to influence the survivor’s decisions or make any decisions on their behalf.
* The organisation will try to provide you with training on how to be a survivor supporter and in psychological first aid (PFA) as soon as possible if you have not yet been trained.

II. Follow policy and procedures and guide the survivor through their next steps

**Policy and procedures.** Follow organisational policy and procedures on sexual violence. If you cannot remember what these are, please ask for and re-familiarise yourself with them. If there is anything you are unclear on, please ask.

**Training.** If you have not received psychological first aid training, you will be briefed and trained on what you should be looking for in terms of trauma and other symptoms in the survivor and in yourself.

**Confidentiality.** You may hear details about the sexual violence incident from the survivor during the time you support them. There is no need to tell management private details of the survivor’s story that you have been told in confidence. If, however, you think that what you have been told might be important to the survivor’s safety and well-being or the safety of others (for example, if the survivor is expressing suicidal thoughts or if you hear something that suggests other people may be in danger), please let

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know confidentially.

**Medical and psychological treatment.** Please support the survivor as they seek necessary medical treatment, as recommended by the medical service provider. If you have doubts or questions about the treatment, share those with the

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but please do not confuse the survivor with your own opinions. It can be difficult to take post-exposure prophylaxis (PEP), a drug that reduces a survivor’s chance of contracting HIV. The medicine can make individuals feel very unwell. Possible side effects include fatigue, headaches, nausea, diarrhoea and vomiting. People who take PEP should be regularly monitored by a health professional.

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does not insist that the survivor receive counselling or any other form of professional psychological support unless they want it, in which case we will be very happy to set it up.

**Preservation of evidence.** You may need to provide support as the survivor decides whether to preserve evidence for possible future legal proceedings. This may include a medical examination. Ask

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for information and support to help the survivor make the decision.

**Your priorities.** During this period, if you are a staff member of the organisation, your workstreams and targets will be suspended, so you do not need to worry about your work or deadlines. Our primary focus at this point in time is the recovery of the survivor, and your role is an important part of this. As an organisation, we will provide the survivor with structured options and decisions to take. Your role is not to make these decisions for the survivor, but rather to create a supportive environment for them to make their own decisions.

III. Take care of yourself

**Your own mental and physical health.** You are helping someone cope with the trauma of a recent experience, and you are very important to them. It is vital that you take care of yourself and your own needs. The survivor will need time to recover, so you need to pace yourself in terms of how much time and energy you can realistically offer the person you are supporting. Feel free to talk to

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about how you are feeling and whether you need help.

**Secondary trauma.** Some supporters may be affected by the trauma about which they are hearing and may start to have some of the same symptoms as the survivor. You may be experiencing secondary trauma if you:

* have nightmares about the survivor’s trauma;
* imagine in graphic detail the survivor’s pain, fear and the trauma itself;
* are more on guard or anxious in situations that do not usually make you feel this way;
* develop strong attitudes or feelings towards people who are similar to the perpetrator;
* lie awake at night thinking of the survivor and their experiences;
* suffer from increased anxiety;
* experience strong feelings of helplessness;
* feel increased pressure to solve or fix the problem for the survivor; or
* feel overly responsible for the survivor’s recovery or feel a strong need to intervene in the investigative or organisational process.

These signs may indicate you need a break or some space from the survivor’s account. You will be offered trauma consultations or other services that are designed to support you at this stressful time. We strongly recommend you have one of these sessions to see whether you find them helpful. If you would like to discuss this directly with the

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| [enter your mental health service provider] |
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please contact them in confidence (see contact details below).

IV. Understand the reactions to sexual violence

**Common reactions to sexual violence.** Remember that no two people are the same and reactions to sexual violence can vary considerably. The most significant effect is usually the psychological impact. Survivors react differently but, whatever their experience, all of them most probably feared for their life at some point. In response to incidents of sexual violence, survivors commonly:

* feel numb, ‘cut off’ or in shock after the attack;
* appear perfectly calm and unaffected;
* fear they are ‘going mad’;
* have the sensation that the trauma is happening again;
* experience periods of high anxiety (heart palpitations, dizziness, trouble breathing, nausea, feeling as if one is dying);
* have intrusive memories (unexpected memories of the trauma);
* feel irritable or angry;
* suffer from low self-esteem;
* blame themselves;
* engage in uncharacteristic behaviour;
* alter their eating habits;
* feel the need to wash repeatedly;
* vomit or have other physical symptoms; or
* experience a range of different and changing emotions (such as anxiety, denial, self-blame, fear of not being believed or repercussions, feeling dirty, ashamed, guilty or withdrawn).

It is normal for people who have been sexually assaulted to go through these reactions. With time, care and support – including the support you provide – most survivors of sexual violence will recover.

**When to seek additional support.** Under certain circumstances, you may feel that the survivor needs additional support or more assistance than you are able to give. If you are worried about the survivor, let them know you want to get them more support and will need to alert the appropriate focal point.

You may wish to do so if you observe signs that the survivor is not coping well, for example if they are:

* very distressed, irritable or angry;
* crying all the time for more than a week;
* numb or not talking to anyone;
* unable to sleep and/or having repeated nightmares;
* not eating;
* not getting out of bed;
* overly anxious, fearful and jumpy;
* experiencing extremely low moods or inappropriate moods (that are incongruent with the circumstances);
* exhibiting behaviours that are incongruent with what has happened;
* having out-of-body experiences or hallucinations;
* suffering from multiple physical illnesses;
* increasing their alcohol or drug consumption;
* having thoughts of self-harm or suicide; or
* having homicidal thoughts or plans to harm the perpetrator or someone else.

**Please speak to**

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**if you notice any of the above symptoms or have other concerns while you are acting as a supporter.**

If you are very concerned about the survivor’s well-being – for example, you fear they may be at serious risk of further harm – you may still confidentially speak to

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even if the survivor has refused external support.

The focal point will give you advice. The contact details are at the end of this document. Trauma assessment or debriefs can be helpful for the survivor and for you as a main supporter. The organisation can arrange these locally by phone or Internet calls.

V. Know what to do and what not to do

Survivors can recover faster if they regain a sense of control over their lives and are able to make decisions. As a supporter, it is important that you not take over, but instead consult with the person about what they need. You can help them to explore options that are available to them.

Be aware that people can freeze when confronted with a terrifying situation. They are often afraid of how other people will react to what has happened to them. They may fear not being believed, being rejected and having their experiences minimised or trivialised. They may feel embarrassment or shame. They often fear well-meaning, but ignorant questions.

You may not understand why the survivor reacted in the way they did during the incident, or how they are currently feeling, but try to be patient and understanding. Bear in mind that the survivor may have their own questions about what has happened and may want to explore these with you. It is very important that they make up their own mind, find their own understanding of what has happened to them and make their own decisions moving forward.

You can best help by listening and asking what they want. Rather than telling them what you believe they ought to do, explore options with them, show respect and refrain from judgement. The following pointers are designed to help you find the most helpful approach.

**Show you are an active listener by:**

* mirroring back to the survivor what they tell you, such as by saying, ‘It sounds like you are saying ….’;
* clarifying what they are telling you by repeating it to make sure you have understood;
* validating how they feel, such as by saying, ‘It is expected that you would feel that way’ or ‘I can understand that you would feel that way’;
* empathising with them, such as by saying, ‘I’m sorry this happened to you. It is not okay that this has happened to you.’;
* reinforcing the message that they do not need to feel ashamed or embarrassed;
* inviting them to say more if they want to; or
* summarising what they have said.

**Show engagement and provide support, such as by:**

* helping the survivor meet their immediate needs and focusing on something practical to better manage the situation;
* being prepared to spend long periods of time with the survivor and possibly sharing accommodation with them, if appropriate;
* giving them choices so that they can take back control;
* making sure they can contact you easily and being there for them to talk to if they would like to;
* managing administrative matters and logistics for them and liaising with designated staff members to coordinate;
* speaking to them calmly and with compassion, using positive language such as, ‘I agree’;
* assuming that they are competent and will recover;
* recognising their strengths and providing positive reinforcements;
* if appropriate, referring them to other support or people they might like to speak to;
* suggesting or engaging in positive distracting activities, such as sports, reading or hobbies;
* suggesting the survivor gets adequate rest and eats healthy meals; and
* helping to promote a supportive and positive environment for the survivor.

**Do NOT:**

* blame the survivor for what happened;
* overwhelm them with questions;
* make judgements about what they did or did not do or how they are feeling;
* tell them what to do or assume you know what they need; and
* pressure them into doing anything or talking about things they are not ready to face.

**Do NOT make inappropriate comments, such as:**

* ‘I know how you feel.’
* ‘Something similar happened to me.’
* ‘I think you need to …’
* ‘You’re lucky it wasn’t worse.’
* ‘It was [the organisation’s or person XYZ’s] fault.’
* ‘Good can come out of this.’
* ‘It’s not that bad.’

**Do NOT offer false reassurances, such as:**

* ‘It’s going to be ok.’
* ‘You will definitely return to your job.’
* ‘They will catch the perpetrator.’
* ‘Justice will be done.’

**Do NOT ask inappropriate questions, such as:**

* ‘Why didn’t you fight back?’
* ‘Why didn’t you tell me before now?’
* ‘Why didn’t you scream?’
* ‘Why didn’t you tell someone?’
* ‘Why don’t you report it to the police?’
* ‘Why did you encourage [the perpetrator]?
* ‘Why did you wear that?’
* ‘Why were you walking that route?’

VI. Remember that you are not alone

This is a challenging role to take on, but an important one. Thank you for the support you are giving. Please make sure you look after yourself and follow the advice shared in this guidance and by the organisation. Please do not hesitate to contact the

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if there are things you would like to discuss confidentially or if you need to access further support. The survivor may be relying on you but remember that you can rely on the organisation to help you and the survivor through this.

Tools

VII. Contact details

Add contact details for:

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| Organisational focal point for these types of situations  (such as a safeguarding focal point) |
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| Medical service provider |
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| Mental health service provider |
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| A senior member of staff who is aware of the incident |
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