## **FACULTY OF FORENSIC & LEGAL MEDICINE**

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## Comments from the Faculty of Forensic & Legal Medicine for Violence Against Women and Girls strategy 2021-2024

- 1. The Faculty of Forensic & Legal Medicine (FFLM) would like to see an overarching violence reduction agenda, aimed at reducing violence against women and girls, and against boys and men. Our members work in Sexual Offence Medicine (including child abuse), General Forensic Medicine (looking after people in custody), and in Medico-legal Medicine. Through this work they are involved with women and girls, men and boys who are victims of sexual and physical violence. This over-arching violence reduction strategy would, we recognise, need different strategies for different groups.
- 2. Regarding Violence against women and girls, we recognise that there is a significant gap in provision. A woman who is raped in the context of domestic violence will be seen at a Sexual Assault Referral Centre (SARC), where she will be examined by a forensically-trained clinician, and her injuries documented accurately and carefully, as well as having her needs for aftercare and support fully assessed. A similar woman who is physically assaulted, but without a sexual assault, will not be offered the same standard of care. In other countries, notably Canada, the network of SARCs is also commissioned to be domestic violence referral centres. In the long term, the FFLM would like to see a similar development here we recognise that has large cost implications.
- 3. The FFLM is very concerned about the rise in non-fatal strangulation which we are seeing in our SARCs. This is an overwhelmingly gendered crime, with a high risk of mortality, and something we are seeing increasingly often. There is some evidence of an increase of this in pornography and a normalisation of "breath play" in magazines aimed at young people. The FFLM would like to see publicity and a raising of awareness of this issue. We also have evidence that doctors working in general practice and emergency departments may not have training in history-taking and examination following non-fatal strangulation.
- 4. The FFLM is committed to multi-agency working and feel there should be even closer links between different groups working in this field.

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