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Supporting male victims/survivors accessing a sexual assault referral centre

Good practice guide

February 2022



Contents

What is the purpose of this guide?	3
About this good practice guide	5
Understanding male identity	7
Understanding societal expectations	9
Case study 1	
Masculinity and sexuality	11
Understanding myths and stereotypes	12
Accessing SARCs: barriers for males	14
How can SARCs support males?	15
Promoting SARCs to males	17
Ensuring males feel welcome at the SARC	19
Ensuring the SARC has a visible male presence	21
Ensuring SARC staff are trained to support males	23
Tailoring medical examinations for males	25
Case study 2	
Sam's experience of attending a SARC	26
Aftercare and onward referral	27
Importance of feedback	28
Case study 3	
Male Sexual Assault Support service (MSAS)	30
References	31
Further reading	32

For information on supporting the needs of males assaulted in a chemsex context, please refer to the 'Good practice guide supporting LGBT+ victims and survivors accessing a SARC'.

Accessibility

This information can be made available in alternative formats, such as easy read or large print, and may be available in alternative languages, on request. Please contact 0300 311 22 33 or email: england.contactus@nhs.net, stating that this document is owned by the National Sexual Assault and Abuse Commissioning Team at NHS England and NHS Improvement.



Content warning: Please be aware that this guide includes offensive terms, myths and stereotypes about male victims/survivors of sexual violence. It is important to include so they can be addressed and challenged by users of this guide. We need to understand the potential negative impact of these myths and stereotypes on those who seek support so that we can ensure the service provided is appropriate and inclusive.

What is the purpose of this guide?

Promoting quality care that is informed by the needs of those with lived experience and delivered by a confident and competent workforce is a key priority for NHS England and NHS Improvement. This is outlined in the [Strategic Direction for Sexual Assault and Abuse Services 2018-2023](#), which has a vision to improve access to services for victims and survivors of sexual assault and abuse, and to support them to recover, heal and rebuild their lives.

This includes improving access for males who, due to very low numbers using sexual assault referral centres (SARCs), are less likely to:

- access specialist medical care after being raped or sexually assaulted
- provide forensic and other evidence to support a criminal investigation
- be supported to recover from trauma
- be referred to longer-term support services.

This may also mean that SARC staff have limited experience in supporting males, which can then impact on their confidence and competence to effectively support those seeking support.

The purpose of this guide is to educate and guide staff working in SARCs to better enable males, including those from diverse communities, to access the support of a SARC following sexual assault and abuse.

Where males do access support from a SARC, this guide also aims to support SARC staff to deliver high-quality care that is responsive and understanding of the diverse needs of male victims/survivors of sexual assault and abuse.

About this good practice guide

The guide includes a combination of rationale, evidence and suggested practice to improve males' access to SARCs and the care and support they get from them. It has been developed in consultation and collaboration with male victims and survivors, SARC staff – including crisis/outreach workers specialising in male survivor engagement – and leaders of organisations specialising in sexual violence support services for males. It draws on evidence from those discussions and on UK and international academic research into male sexual abuse, harms, disclosure and responses.

What is male sexual abuse?

Male sexual abuse is any unwanted or non-consensual sexual act performed against a male adult or child at any time in his life.

Why is this guide needed?

It is difficult to know the true prevalence of sexual offences against males. While it is generally estimated that 1 in 6 males will experience an unwanted or abusive sexual experience in their lifetime, research¹ commissioned by Mankind UK in 2021 found even higher prevalence rates:

- 1 in 7 men had been coerced into sex
- 1 in 10 men had experienced rape or non-consensual penetration.

For the year ending March 2020, the Crime Survey for England and Wales estimated that 155,000 men aged 16 to 74 years experienced sexual assault (including attempts) in the last year.²

Despite these shocking statistics, we know that males are more likely to suffer in silence as there are significant and multiple barriers to them seeking help.

Notwithstanding sexual abuse and rape against males being one of the most under-reported crimes, for those who do disclose, some come forward immediately, while many may not disclose until decades after the abuse took place. The effect of not disclosing abuse can mean a life damaged by past suffering.

Those working in SARCs have a unique opportunity to demonstrate to males that help is available in their community, to support them at the moment they ask for help and enable them to access further support.

Understanding male identity

It is an important principle that males are not one homogenous group. While all males face some common social pressures about 'being a man', each man and each boy is a unique individual.

Gender is an important aspect of identity; however, it is essential to remember that within differing communities, and different walks of life, males may have complex identities that also shape their experiences and views. For example, identity may also be shaped by race/ethnicity, sexuality, age and/or faith. This means that males with different backgrounds may not respond, engage or access services in the same way, and their identity may present significant barriers to disclosure of a sexual offence against them.

Understanding male identity and the impact this may have on an individual's

¹ [Mankind - Sexual Consent Poll February 2021 « Savanta ComRes \(comresglobal.com\)](#)

² [Sexual offences prevalence and victim characteristics, England and Wales - Office for National Statistics \(ons.gov.uk\)](#)

willingness to seek help following a sexual offence is important for SARC staff. For those males who do seek help, their experience and perception of the support they receive will also be influenced by their own individual gender and sexual identity, as well as other factors including age, ethnicity and disability.

It may feel that the obvious answer is to provide a service that appears to be 'gender-neutral', and therefore accessible and supportive for everyone regardless of gender or background. However, it is becoming more widely recognised that a 'gender-neutral' approach to service delivery may not be a suitable way to meet the distinct needs of different genders. This view is supported by feedback from male victims/survivors. Instead, service providers are increasingly recognising the need for a 'gender-inclusive' approach, which includes tailoring services, acknowledging protected characteristics and providing different choices in how services are delivered.

The information that follows aims to serve as a roadmap for SARCs to progress towards providing an inclusive service for males based on an understanding of the social context of sexual violence against males, how this affects the willingness of males to make disclosures, and the actions SARC staff can take to improve their response.

Understanding societal expectations

Understanding how societal expectations can impact on males who have experienced sexual assault/abuse is essential to the delivery of appropriate and effective support services that meet their needs.

Male victims/survivors report that expectations about masculinity are associated with dominance, strength and resilience, and can commonly result in feelings of embarrassment and shame when they have an unwanted sexual experience. Male victims/survivors report that these feelings are then exacerbated further by the need to seek help.

Male victims/survivors may experience – or may be concerned that they will experience – disbelief and negative attitudes towards their masculinity or sexuality. Research³ confirms that male victims may encounter professionals who disbelieve them due to

“I thought masculinity meant never asking for help.”

“I’d expect that they’d assume I’m a perpetrator.”

“If there was one thing I’d want to tell SARC staff reading this guide it’s don’t presume we’re gay”

³ Javid A (2017) Male rape, masculinities, and sexualities: understanding, policing, and overcoming male sexual victimization, Newcastle: Newcastle University Press.

<https://theses.ncl.ac.uk/jspui/handle/10443/3922>

common myths about men and masculinity.

Further, it is not unusual for males to experience unwanted physical reactions (such as an erection or ejaculating) during a sexual assault, which may lead to them feeling uncomfortable about their response to the assault and their sexuality. The impact of this may contribute to their unwillingness to seek help.

Good practice tips

SARC staff should make sure practice is underpinned by an understanding of the expectations of male behaviour, including attitudes around masculinity and men's responses to trauma and seeking help.

Some male victims/survivors report feeling re-traumatised by their engagement with services that did not understand or recognise their responses to trauma and their specific support needs.

SARCs should:

- provide a trauma-informed service that recognises the impact of masculinity and sexuality on males
- provide males, where possible, with a choice of gender of support worker
- ensure all staff receive training on the male response to rape and sexual abuse, including the psychological and physiological reaction to sexual violence
- ensure marketing material includes real-life stories from males who have used the SARC, and demonstrates understanding of male responses to trauma.

Case study 1

Masculinity and sexuality

Ben contacted the SARC self-referral line and disclosed he had been raped in the past by an unknown male while visiting London for a sporting event with friends. He was informed that he was outside the 'forensic window' for a forensic medical examination; however, the crisis worker talked to him about his options for support.

Ben was very distressed and couldn't understand why he hadn't put up a fight against his abuser. He also disclosed he hadn't reported to the police as he was concerned about the effect on his wife and teenage children, who were unaware of what had happened.

The crisis worker and Ben discussed telling his wife. He explained they had a good marriage and he felt sure she already knew something was wrong. The SARC arranged for the forensic medical examiner to talk to Ben and explain the trauma response, which he found very helpful.

Ben called the SARC again and told the crisis worker that he had told his wife about his experience. The SARC arranged for counselling to support them going forward.

Understanding the sexual abuse of males

Myths and stereotypes about the sexual abuse of males can make it even harder for men and boys to reach out for support. It is important to rebut this and ensure understanding of the following:

- Any man or boy can be sexually assaulted.
- Anyone, regardless of their sexual orientation, can be sexually abused.
- Sexual abuse does not make you gay.
- Men and boys can be sexually abused by females.
- Erection or ejaculation during sexual assault or rape does not mean there was consent. It can, however, have a major impact on the trauma, confusion, guilt and shame often felt by victims.
- The vast majority of men who have experienced sexual abuse do not go on to abuse others.
- The sexuality of the victim or perpetrator is irrelevant – sexual abuse between gay men does happen and straight men also sexually abuse other men.



Accessing SARCs: barriers for males

Male victims/survivors report there are a range of barriers that prevent them from seeking support following a sexual assault. These include:

- fear of not being believed or taken seriously
- fear of judgement from SARC staff
- fear of being labelled a perpetrator
- perception of masculinity – feeling embarrassed or ashamed
- confusion around sexuality
- unwillingness to disclose sexuality
- confusion about whether a crime was committed
- expectation of racist attitudes from institutions, including NHS services
- experience of not being understood by professionals/institutions that don't 'get' the realities of being of Black, Asian or minority ethnic heritage
- a lack of awareness of SARC services
- believing that SARCs (and other sexual violence support services) are 'women only' services
- SARCs not being welcoming to males
- use of the word 'sexual' may be a barrier for males with conservative beliefs
- concern about the SARC's connection to authorities, such as the police
- perceived lack of understanding of the needs of male victims/survivors by SARC staff.

SARCs need to be aware of these types of barriers, and the perceptions that may be held by males, if they are to become more accessible to male victims/survivors.

“There should be work in schools. Boys aren't taught to see themselves as vulnerable. It should be what they are talking about with their mates.”

“I felt a lot of guilt being in the SARC. I was terrified of coming across a woman and her feeling that this was not a safe space for her.”

“I wasn't well enough to understand where the separation was [between police and NHS] so I asked for less help than I needed.”

How can SARCs support males?

Male victims/survivors who helped develop this guide reported that reaching out for support can be difficult for a variety of reasons. For example, if they think the service might not be intended for males, or that they might not be believed or taken seriously, then they will be much less likely to access support. It is therefore important that SARCs consider what they can do to support male victims/survivors to access the service in the first place.

Feedback from specialist sexual violence support services indicates male victims/survivors will typically engage with support services in a different way to female victims/survivors. They may need different levels of support, delivered in different ways and at different intervals or timeframes.

Service providers supporting male victims/survivors report males often take longer to decide if a service is right for them before they engage with the support on offer. When asked, males expressed a desire for more flexible support, including email/online contact, before engaging with the service.

Male victims/survivors reported that the reaction to their disclosure of sexual violence is hugely significant to what action they choose to take next. Research⁴ shows that negative responses to disclosure have been associated with increased levels of post-traumatic stress symptoms. It is crucial all SARC staff understand the importance of responding appropriately to a disclosure and the potential consequences of this for a male victim/survivor.

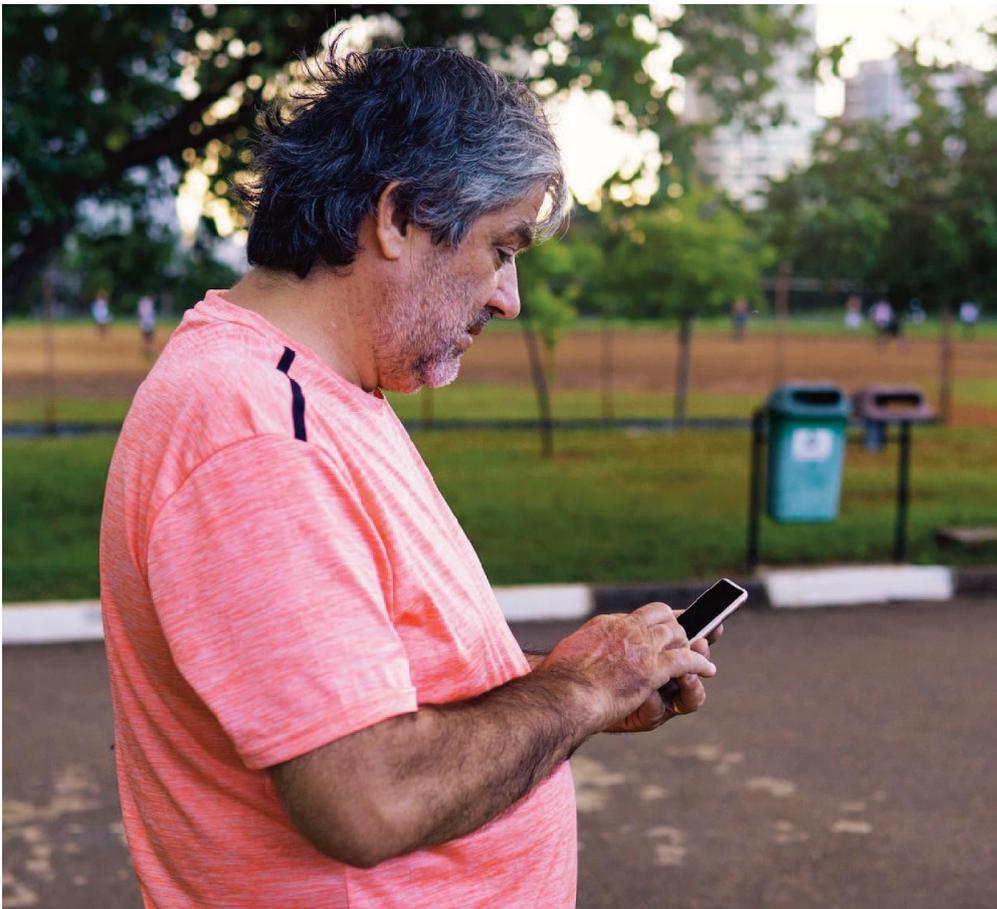
“We’re all different, us men. What one wants and needs from a SARC won’t be the same as another man. SARCs absolutely have to understand this. It’s not possible to ‘male-proof’ a SARC. We need to be seen as individuals and SARCs need to be person-centred to each of us.”

”It would be good to be able to communicate by text, WhatsApp or instant message.”

Good practice tips

SARCs should:

- put in place a variety of methods through which males can contact the service (eg phone numbers, email addresses, text chat and online forms), ensuring a timely response to each method
- give males space to decide if they want to engage with support by encouraging them to attend the SARC when they are ready
- have information available for male clients to take away and consider
- ensure there is flexibility to allow males to access the SARC when they want, for example at a specific time
- recognise and acknowledge the courage it takes for males to come forward to seek help and understand the impact of a negative response to a disclosure
- recognise the need for a 'gender-inclusive' approach, which includes tailoring services, acknowledging protected characteristics and providing different choices in how services are delivered
- monitor the ethnicity, sexuality and disability of all males who access the service to ensure an understanding of the demographics of male service users.



Promoting SARCs to males

Male victims/survivors reported that they did not access SARC services because they did not know these existed, or if they did know, they had very little understanding about the support on offer and did not believe it was intended for them.

Males felt that publicising the SARC more widely in male-dominated spaces, such as barbers, gyms, workplaces (including occupational health), transport hubs and sporting venues, as well as using subtle marketing techniques, such as adverts on beer mats, would increase the awareness of SARCs among more males.

Building good working relationships with other professionals/services who come into contact with males and letting them know SARCs support all genders is likely to increase awareness of them among males.

Feedback from male survivors suggests that engagement with male victims/survivors is more successful if they see themselves represented in marketing or engagement material for the SARC.

All advertising, including website and social media design, should explicitly reflect the diverse communities that the SARC supports and is aiming to engage with.

The recruitment of a male outreach worker in a number of SARCs has been successful at reaching out to a wide range of services that engage with males. By promoting the SARC at local services team meetings, talking at service user events and running stalls at public events, the male SARC outreach worker has led to an increase in male referrals into those SARCs where they have been recruited.

“I struggled to find any information about support for male sexual or domestic violence and when I eventually did it was miles away.”

“The SARC has recently employed a male crisis worker who is also our engagement officer. He has reached out to so many services we had previously been unaware of and it’s resulting in an increase in male referrals.”

“I provide awareness training to education establishments, public authorities and support services on our services and the difficulties faced by marginalised communities, men and young boys when it comes to disclosure.”

Male crisis worker

Good practice tips

SARCs should:

- promote the SARC in 'male' spaces (such as sports clubs and male toilets)
- ensure images of males are used in SARC publicity material, including the website, so males see themselves represented and know it is a service for them
- host a website that is easy to find, and provides clear information on how to contact the SARC and the support offered
- engage with local organisations that typically see males to tell them about the SARC and ask them to publicise the service
- be proactive about listening to voices from local communities about how to engage males from diverse backgrounds or cultures, for example men of Black, Asian or minority ethnic heritage. Consider collaborating on two-way awareness and training initiatives
- encourage males who have accessed the SARC to share how they found out about the SARC and any views they have on how to reach more males
- consider employing a male outreach worker to support the promotion of the SARC among males.



It is important for SARCs to understand that the needs of males differ from those of females. To address this, it is essential that SARCs have appropriate policies, procedures and working practices in place to support males. For example, this might include adapting language in assessment questionnaires to ensure they are appropriate for use with male clients, designing male-specific processes for engagement or revising models of working. These policies must also be sensitive to diversity in the male community.

“I think that a lot of the spaces to have conversations were gender-neutral but I would have benefited sometimes going for a walk and things like that, with someone who was there to be supportive.”

Good practice tips

SARCs should:

- take steps to make males feel welcome within the SARC building so that they feel it is a service intended for them
- display leaflets and posters featuring males, including from diverse backgrounds
- ensure appropriate resources are available for males, for example having reading materials aimed at males available in waiting areas
- make sure appropriate clothing (eg large sizes) and male toiletry packs are available after an examination.



Ensuring the SARC has a visible male presence

Male victims/survivors reported that having a male present at the SARC is beneficial for everyone, as it shows a positive role model within the service.

This also creates the sense that the service is 'for males too' and is a space where males are welcome.

SARC staff have advised having a male worker who can provide insight into the needs of males and how services can adjust aspects of service delivery to better support them has been invaluable.

Research shows that some males, but not all, have a clear preference of the gender of the professional who supports them. This may be linked to their experience of sexual violence. The Male Survivors Partnership found that 55% of the males who took part in its research were not given a choice of gender of support worker, and yet 64% felt being offered a choice was important. As such, it is important that males are given a choice of the gender of the professional, and any implications of that choice should be fully explained. For example, if they prefer a male professional but one is not immediately available, then the impact of a delay on a forensic medical examination should be explained.

“I had to go into a tiny box room at the SARC and I was not able to see a male support worker, I felt awful in this situation and disempowered.”

“I've never been able to trust men as I was abused by a man when I was [young]... I can only open up to a woman.”

“There is shame attached to what I am talking about and I don't feel a woman can understand as much as a man.”

“My perpetrator was a woman. I should not be pigeon-holed into working with a woman unless I want to.”

Good practice tips

SARCs should:

- have male representation in SARC staff teams
- offer a choice of gender of professional
- have a 'meet the team' board with photos of all staff
- consider employing a male outreach worker to help promote the service externally.

Training SARC staff to support males

It is possible that SARC practices have been developed and evolved from supporting females, so consideration should be given to whether these practices are also suitable for supporting males.

It is an important principle that all staff providing support to males should have the relevant skills and knowledge to appropriately support their needs. Training should focus on the male response to trauma and the societal issues that they experience.

Physical impact on males

A review of academic research⁵ of male and female victims/survivors found:

- no bodily injury in a significant proportion of cases involving males
- more injuries to the anal area and more digital or object penetration in males; fewer injuries to other areas of the body
- male victims are more likely to be assaulted by multiple assailants.

Psychological impact

- Males have the added burden of societal views on masculinity, which influence the myths and stereotypes relating to male victims.
- Males who are sexually assaulted are at increased risk of developing mental health problems, including PTSD, depression, alcoholism, suicidal thoughts, relationship difficulties and under achievement in school or the work environment.
- Suicide rates for males who have experienced sexual violence are 14–15% higher than other males and are higher than those for females.
- Male gender roles tend to emphasise greater levels of independence and risk-taking behaviours.
- Re-inforcement of these gender roles often

“Staff need training that men can be victims too! And should be taken seriously.”

“Men in the community I serve avoid engaging with the police. For lots of reasons they’re unlikely to access a SARC.”

“I speak from experience when I say that males might be in a total state of shock when they arrive at a SARC. They might be so traumatised that they don’t make any sense at all. They might not know what is going on and SARCs need to understand this.”

⁵ McLean IA, Balding V, White C (2004) Forensic medical aspects of male-on-male rape and sexual assault in greater Manchester. *Med Sci Law* 44(2): 165-69.

prevents males seeking support for depression and suicidal thoughts.

Good practice tips

SARCs should:

- consider whether the operational practices that have been developed/evolved at the SARC are appropriate for supporting males
- ensure all staff attend male-specific training that focuses on trauma, how males engage with services and the barriers to accessing support
- carry out regular staff surveys to establish whether staff feel confident and competent to support males and identify gaps in staff training needs.

Tailoring medical examinations for males

It is important that the care and support provided by the SARC is tailored to meet the individual victim/survivor's needs. This includes giving each individual choice about the support provided.

Medical examinations can be difficult for those who need to experience them. However, SARC staff told us that things can be done to make the process more comfortable for males.

Male victims/survivors reported that providing clear information about what is going to happen at the SARC and when is helpful for males who like to have a 'plan' and know what is going to happen next. It is also important to explain why certain things will be done during an examination and for what purpose.

If demographic details have not previously been provided, then it is important to ask the male about sexuality and gender identity. Be clear that you are asking because you want to offer the best service possible.

When asking about recent sexual activity, it can be helpful to explain why you need to ask the questions. Be clear with your questions and listen to the answers. If the male, or you, use the word 'partner', be clear what this means. Don't assume the person is heterosexual and/or cisgender (this, or cis, refers to a person whose gender identity is the same as the label they were assigned at birth). Foster a non-judgemental approach by offering reassurance and understanding.

Respectfully ask the male how he would prefer you to refer to parts of his body during the examination. For some people, having a part of their body labelled in a medical way (such as penis or vagina) can feel deeply dysphoric. If you cannot use the male's

“A patient can still attend the centre outside the forensic window for a holistic assessment. In these circumstances the SARC may provide sexual health advice, emotional support, make an ISVA referral and document injuries.”

A SARC manager

preferred words on the form (ie for medical or legal reasons) explain this, but use his preferred words in your interactions with him.

If the client is likely to receive any results at home (eg STI results), ask him how he wants them to be addressed. Receiving results can be very distressing but when sent to a private address could potentially break confidentiality about the male to his neighbours or people in his household, and may lead him to refuse tests if they are unsure how this will work.

Case study 2

Sam's experience of attending a SARC

"I reported my rape to the police straight away. They told me about the SARC and I agreed to go for a medical examination. Unfortunately, they couldn't book me into the SARC for another 12 hours. I'm not sure why and nobody told me. In fact, nobody told me very much about the SARC or what would happen there. I had no idea what to expect.

"I was told that I couldn't wash or shower until I had been to the SARC. Again, nobody told me why not and I didn't think to ask. It was bad. I could smell the men who had raped me. For 12 hours, I could smell them ... but I did what I was told without questioning why I couldn't shower. I didn't realise until afterwards that I could have had a choice about this. I just did what I was told.

"With better information, I may well have made the same decisions about the SARC, I mean, I now realise why they asked me not to wash, and I understand that now ... but I could have been better informed and felt like I'd had a choice.

"I can't fault the experience I had at the SARC for the examination. I felt supported, I felt they explained everything and I could have stopped the examination at any point. However, with hindsight, I think it would have been better for me if I had been given more information about the SARC before I went there, as I'd have had a better idea of what was coming next. For 12 hours, I had no real idea of what was going to happen at the SARC.

"I have no idea why I wasn't referred to an independent sexual violence advisor (ISVA) but I wasn't. I was given a leaflet by the SARC for a counselling service provided by a local charity. Turned out they didn't support men.

"I wasn't given any information about a local service that specialises in supporting men. I found out about ISVAs over six months later. In that time, I continued with the investigation without any support. When my case was NFA'ed – I hadn't got a clue what that meant.

"Some really simple things could've meant the experience was so much better. I could have been supported if only the SARC had given me the right information."

Aftercare and onward referral

It is important that longer-term support or 'aftercare' is available to males who have accessed a SARC. The SARC should be able to refer on to appropriate support services to meet the needs of male victims/survivors.

Information about support services specifically for males, both locally and nationally, should be readily available and shared with male SARC users, ideally in different formats to ensure accessibility.

SARC staff should research local services and ensure they provide support to males. Male victims/survivors reported the impact of being turned away from a service can be devastating, particularly because it can make them feel they are not worthy of recognition or help.

Good practice tips

SARCs should:

- allow males time and a safe space to discuss and consider next steps
- check what support a male has once he leaves the SARC – where is he going? Has he got support from friends or family?
- offer a choice of method for any follow-up required from the SARC, eg email, online or phone
- create referral pathways with local support services that support male victims/survivors, eg ISVA, therapy, sexual health and mental health services. Find out if they have male support workers available and create links. Ensure they will accept your referrals
- have specific information available for male victims/survivors and maintain links with local groups.

Key resources and support

MSP | MALE SURVIVORS
PARTNERSHIP

malesurvivor.co.uk

Safeline
believe in you

0808 800 5005 • safeline.org.uk

National male survivor helpline and online support service

SURVIVORSUK
male rape and sexual abuse

survivorsuk.org

National male survivors online web chat service

1in6.uk

1in6.uk

Self-help resources, information and support for men who have been raped or sexually assaulted

Importance of feedback

SARCs should encourage all victims/survivors to provide feedback about the support they have received (or are receiving from the service). A range of options should be available to encourage feedback, including face-to-face, written, text and online feedback.

It is also important that SARCs attempt to gather feedback from those who choose not to proceed with support, as this can identify potential barriers to engagement and assist the development of new types of services or delivery methods.

Providing the opportunity to give feedback anonymously will aid honest views, with one SARC reporting that they have found the introduction of a 'feedback box' in the waiting area to be helpful in collecting the views of service users.

Being able to consult with those who have accessed the SARC is also a useful mechanism to ensure the service is as good as it can be at reaching all those who need it. Developing a mechanism, such as a service user advisory panel, to discuss ideas and challenges will assist the design and monitoring of services that truly meet the needs of those who access the SARC. Males should be included on such panels to ensure their views, suggestions and experiences are considered and used to improve the SARC.

“Have service users, including males, on a panel to regularly get their feedback so service users are at the heart of decision making.”

Good practice tips

SARCs should:

- seek feedback from males on whether the service met their needs and what their experience of accessing the SARC was like
- ask males whether they have any ideas or suggestions for how the SARC might be improved for other males
- ensure feedback can be provided in a variety of different ways, for example feedback forms, via the SARC website and comment slips
- display information on how feedback has shaped the SARC and the improvements made based on suggestions
- encourage males to be part of an advisory panel to review and shape how the SARC operates.

Case study 3

Male Sexual Assault Support (MSAS)

Developed and operated by males, for males across the South East region

In 2019, The Saturn Centre (Sussex SARC), Beech House (Kent SARC) and The Solace Centre (Surrey SARC) committed to appoint a male outreach/crisis worker. These roles were created as a result of an increase in males being referred to the SARC and their recognition that male-specific targeted work, as well as offering a mixed gendered team, would help them to better support male victims/survivors. Following these appointments, and robust outreach work, the numbers of males accessing these SARCs continued to increase, and it quickly became apparent that there was further scope for them to promote the SARC services to more males across the South East.

Despite each worker having the responsibility of building links within their own areas, it was felt that a regional approach, bringing all three counties together, would increase awareness even further and provide a structured cross-county pathway. As a consequence, Sussex, Kent and Surrey created the Male Sexual Assault Support (MSAS) service and launched a dedicated website and social media platforms, bringing good practice from all three SARCs together.

The MSAS service operates across the three counties, working to support men and boys who have experienced sexual assault and abuse. The male crisis workers engage with agencies and organisations to raise awareness of SARCs and the options available for men and boys. The service is available to all males, regardless of whether they want to report to the police, and individuals can self-refer to the SARC.

Rob James, MSAS representative in Sussex comments, "This broader approach works brilliantly in terms of outreach, particularly when working with institutions, such as police forces, educational establishments, local councils and prisons. It enables a consistent regional message to be delivered and often encourages cross-county conversations to be had.

Since the launch of MSAS, I have witnessed direct referrals to The Saturn Centre SARC from both individuals and agencies for Sussex residents who were assaulted outside the county. Without the MSAS platform, they may not have realised there was support closer to home. Likewise, via the MSAS platform, the Sussex SARC has been contacted by agencies seeking support for residents of Kent and Surrey, which we are easily able to refer to our MSAS counterparts."

Further reading

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Male Survivors Partnership (MSP) – founded by Survivors Manchester, Mankind, SurvivorsUK and Safeline – is a consortium of UK-based male victim/survivor organisations who have formally agreed to work together to:

- increase society’s awareness of male sexual violence
- highlight and promote the needs of male victims/survivors
- increase the support for male victims/survivors of sexual violence across the UK.

www.malesurvivor.co.uk

LimeCulture Community Interest Company (CIC) is a national sexual violence and safeguarding organisation based in the UK. LimeCulture works with frontline professionals, and their organisations, to improve the response to sexual violence and safeguarding through our range of training and development initiatives, research and specialised consultancy services.

www.limeculture.co.uk

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