

# Initiation of services in healthcare for victims of sexual assault in Estonia

Kai Part\*, Made Laanpere

Department of Obstetrics and Gynaecology, University of Tartu, Tartu, Estonia

## Background

This presentation describes the initiation of standardized services in health care for victims of sexual assault (SA) in Estonia in the frame of the project financed by Norwegian Grants and Estonian Social Ministry in 2014–2016.

Estonia did not have standardized services in health care for SA victims in 2014. The professionals were not appropriately trained, there were no written guidelines and forensic examination kit. Few victims turned to the police and women's shelters, more self-referred to health care institutions, mostly weeks and months after the assault. The co-ordination between different agencies was weak.

## Description of developments

The following activities were started by engaged professionals working for the Estonian Sexual Health Association in order to initiate standardized services for SA victims in health care.

- A study visit to Oslo SAC was organized in order to learn from the model of care for SA victims.
- The lecturers from Oslo SAC held two 'key seminars' for health care professionals, police, prosecutors, women's shelters, and decision-makers.
- Two seminars for policemen, prosecutors and judges were held.
- Forensic examination kit was developed.
- Handbook of standardized care for victims of SA in healthcare was compiled.
- 300 professionals working in health care were trained (acute care, trauma reactions, forensic and medical examination, principles of after-care).

- Local professional networks were started in four main areas of Estonia.
- A web-page was set up for victims, professionals and general public.
- A two-wave media campaign was launched.
- Massive lobby work (visits, lectures) was conducted throughout the project period: Ministry of Social Affairs, Ministry of Justice, Ministry of the Interior, Head Prosecutor, Head Police and local stations, Policemen's Academy, five main hospitals in Estonia, women's shelters, child protection agencies, journalists.

What was achieved?

One year financing from Ministry of Social Affairs is granted for co-ordinating the services for SA victims in four main regions in Estonia. Five main hospitals are offering standardized services for SA victims, two sexual health clinics are offering after-care. Nearly 40 patients have received care during the project. 8 forensic examination kits have been used during four months in 2016. Next steps are: on-going co-ordination of local professional networks and lobbying for sustainable financing of the services. Training professionals working in the health care and police. Building a standardized data collection system.

Conclusion

The primary impetus to develop services in health care for SA victims came from enthusiastic medical professionals in Estonia, but the vital preconditions for these activities were Norway Grants financing and stimulating guidance from Oslo SAC. In order to start the services, massive lobby work by engaged health professionals was needed in order to improve the understanding of the decision-makers about the negative effects of SV on individuals and societies. In the conditions of lack of resources for establishing new SACs, starting with offering the services based on existing medical staff has justified itself – better start small.