

# The effectiveness of sexual assault referral centres with regard to mental health and substance use: a national mixed-methods study – the MiMoS Study

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## Plain language summary

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## Plain language summary

**A** sexual assault referral centre provides a service for people who have experienced a sexual assault. It offers emotional support, health checks, forensic examination (to collect physical evidence of assault) and advice.

Many who experience sexual assault experience distress for some weeks and months afterwards, and some already have mental health problems. The aim of the study was to understand:

1. What was the level of mental distress and substance use issues?
2. How were mental health, drug and alcohol concerns picked up?
3. What therapy or other support is available as part of the sexual assault referral centre service?
4. How do sexual assault referral centres work with other agencies to ensure that people access the right help?

### What we did

We undertook several studies including:

1. Searching and examining published research (review).
2. A survey that asked sexual assault referral centres how mental health and substance use are addressed.
3. Questionnaires: survivors who had recently attended a sexual assault referral centre completed questionnaires on mental health, alcohol and drugs, and quality of life.
4. Interviews with staff at sexual assault referral centres and survivors of assaults.
5. Routine data: we analysed anonymous data from mental health services to compare how those with sexual assault benefit from psychological therapy.

### What we learnt

We combined the findings from all the aspects of the study to conclude that most people who attend sexual assault referral centres have significant mental health needs; however, the response to these needs is variable within sexual assault referral centres. Survivors report that the sexual assault referral centres offer a caring and supportive service, but many also reported difficulties in accessing the right support afterwards. Where there was co-located psychological therapy, there were benefits for both survivors and the wider team. We also showed that, despite high needs, people surviving sexual assault can benefit from therapies but may need more therapy than those who have not experienced sexual assault.



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