**** Version 1.0 6.7.2020
 IRAS Project ID: 281719

**Long-Term Support Needs of Adult Sexual Assault Survivors**

Thank you for agreeing to complete a questionnaire.

The questionnaire consists of three sections (A-C). Please try and answer all of the questions as honestly as possible. However, if there are any you cannot answer or do not feel comfortable doing so, please feel free to leave them blank.  **Please enter your Personal Identification Number (PIN) included in the email sent to you**

|  |
| --- |
|  |

**SECTION A: ABOUT YOU**

1. Which of the following are true for you? *(Tick all that apply)*
* I am married and living with my spouse
* I am living with a partner, we are not married
* I am in a relationship with someone I don’t live with
* I am single
* I am divorced
* I have been widowed
* I am separated from my spouse
1. Have you been pregnant at any time in the last 6 months? *(Tick one box only)*
* Yes, I am currently pregnant
* Yes, I am not pregnant not but have been in past 6 months
* No
* Not sure
* Not applicable (male)
1. Do you have children?
* No
* Yes (please specify ages of each child below)

\_\_\_\_\_ Child 1 (oldest)

\_\_\_\_\_ Child 2

\_\_\_\_\_ Child 3

\_\_\_\_\_ Child 4

\_\_\_\_\_ Child 5

\_\_\_\_\_ Child 6

1. Which of the following best describes where you live? *(Tick one box only)*
* Own my home (with or without mortgage)
* Rent privately
* Rent from Council or Housing Association
* Lodge with friends or relatives
* In sheltered accommodation or refuge
* Homeless

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Less than 3 months | 3 months to 1 year | 1 to 5 years | More than 5 years | All my life |
| 1. How long have you lived at your current address?
 |  |  |  |  |  |
| 1. How long have you lived in your current neighbourhood?
 |  |  |  |  |  |
| 1. How long have you lived in the North West of England?
 |  |  |  |  |  |
| 1. How long have you lived in the UK?
 |  |  |  |  |  |

1. Which of the following qualifications do you have? *(Tick all that apply, and leave blank if you have none)*
* O levels /CSEs/ GCSEs
* NVQ, GNVQ, Basic Skill/City and Guilds Craft, BTEC First/ General Diploma, RSA diploma, apprenticeship or other vocational qualifications.
* A or AS levels/VCEs, Higher School Certificate, Progression, Advanced Diploma
* Undergraduate Degree (for example BA, BSc)
* Higher degree (for example MA, PhD, PGCE)
* Professional qualifications
* Other qualifications
1. Currently are you: *(Tick all that apply)*
* Unemployed
* Employed full-time
* Employed part-time
* Studying
* Caring for children
* Retired
* Long-term sick/unable to work
* Doing voluntary work
1. Which of the following represents your MONTHLY income after any deductions for tax or national insurance? *(Tick one box only)*
* Under £100
* £101-£200
* £201-£400
* £401-£1,000
* £1,001 -£2,000
* £2,001-£3,000
* £3,001- £4,000
* £4,001 - £5,000
* Over £5,001

1. How many times in your life have you been sexually assaulted? *(Tick one box only)*
* Once
* 2-5 times
* 6-10 times
* More than 10 times
1. In the consent form you completed earlier, did you agree to us linking your questionnaire responses with your St Mary’s record?
* Yes (jump to SECTION B – you do not have to answer the remaining questions in this section)
* No (please complete the remaining questions in this section)
1. What age were you at your last birthday?

|  |
| --- |
|  |

1. How would you define your ethnic group?
* Arab
* White – British
* White – Gypsy or Irish traveller
* White – Irish
* White and Asian
* White and Black African
* White and Black Caribbean
* White – other
* Black – African
* Black – Caribbean
* Black – other
* Chinese
* Bangladeshi
* Indian
* Pakistani
* Asian – other
* Other mixed
* Other not listed
* Not sure
1. How would you define your gender?
* Woman (including trans woman)
* Man (including trans man)
* Non-binary
* Another way
* Prefer not to say
1. Are you a transsexual?
* Yes
* No
* Prefer not to say
1. How would you define your sexual orientation?
* Heterosexual (straight)
* Lesbian/Gay
* Bisexual
* Other not listed
* Not sure
* Prefer not to say
1. In the month before the assault for which you attended Saint Mary’s SARC, were you: *(Tick all that apply)*
* Unemployed
* Employed full-time
* Employed part-time
* Studying
* Caring for children
* Retired
* Long-term sick/unable to work
* Doing voluntary work

**SECTION B: SUPPORT**

1. In the last 3 months, which organisations have you been in contact with as a direct or indirect result of the assault you reported to Saint Mary’s? *(Tick all that apply)*

|  |  |
| --- | --- |
|  Tick if ‘Yes’ | If yes, how satisfied were you with the way they dealt with you?  |
| **Very dissatisfied** | **Dissatisfied** | **Neither**  | **Satisfied**  | **Very satisfied** |
| The Police  |  |  |  |  |  |  |
| Social Services |  |  |  |  |  |  |
| Doctors/GP (General Practitioner)  |  |  |  |  |  |  |
| Accident & Emergency/ Hospital |  |  |  |  |  |  |
| Sexual Health Clinic |  |  |  |  |  |  |
| Criminal Court (Magistrates or Crown)  |  |  |  |  |  |  |
| Rape Crisis |  |  |  |  |  |  |
| Women’s Aid or other Women’s Refuge |  |  |  |  |  |  |
| Survivors Manchester |  |  |  |  |  |  |
| Saint Mary’s SARC |  |  |  |  |  |  |
| Solicitor/Legal Advice |  |  |  |  |  |  |
| Victim/Witness support |  |  |  |  |  |  |
| Mental health services/ psychotherapist/ counsellor |  |  |  |  |  |  |
| Substance use services |  |  |  |  |  |  |
| Other services or helplines. Please Specify: |  |  |  |  |  |  |

If you wish to make comments about the response you received, add them here:

2. In the last 3 months, have you told any of the following people about the sexual assault you reported to Saint Mary’s SARC?

|  |  |
| --- | --- |
|  Tick if ‘Yes’ | If yes, how satisfied were you with the way they dealt with you? |
| **Very dissatisfied** | **Dissatisfied** | **Neither**  | **Satisfied**  | **Very satisfied** |
| Partner  |  |  |  |  |  |  |
| Child(ren)  |  |  |  |  |  |  |
| Other family member(s)  |  |  |  |  |  |  |
| Friend(s)  |  |  |  |  |  |  |
| Employer/boss/line manager |  |  |  |  |  |  |
| Other work colleague(s)  |  |  |  |  |  |  |
| Tutor/academic support |  |  |  |  |  |  |
| Other, please Specify:  |  |  |  |  |  |  |

If you wish to make comments about the response you received, add them here:

3. How important is it for you to get the following now or in the near future? *(Tick one option for each statement)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Unimportant** | **Important** | **Very important** | **Essential** |
| A restraining order against the perpetrator |  |  |  |  |
| Legal support during the court process |  |  |  |  |
| Information about my case in the criminal justice system |  |  |  |  |
| Psychological support (therapy and counselling) |  |  |  |  |
| The chance to listen to other victims  |  |  |  |  |
| The chance to share experiences with others |  |  |  |  |
| Care of children while attending support services or criminal justice |  |  |  |  |
| Financial support to cover expenses related to the assault |  |  |  |  |
| Help to come back into work or studies |  |  |  |  |
| Language support (translation services) |  |  |  |  |
| Help with dealing with the police  |  |  |  |  |
| Additional security and access to emergency services |  |  |  |  |
| Support with stopping further online, text or phone harassment  |  |  |  |  |
| Support with stopping further verbal or emotional abuse |  |  |  |  |
| Support with stopping further physical or sexual harassment |  |  |  |  |

**SECTION C: IMPACT**

The next set of questions asks you about your wellbeing.

* + 1. How often have you experienced the following as a result of the assault you recently reported to St Mary’s?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Not at all** | **A little** | **A lot** | **Not applicable**  |
| Fear of being assaulted again |  |  |  |  |
| Fear for your safety of your children |  |  |  |  |
| Fear of being trapped in an abusive relationship  |  |  |  |  |
| Fear of personal or private information about you being shared |  |  |  |  |
| Problems with your physical health  |  |  |  |  |
| Conflict with your family |  |  |  |  |
| Avoiding your family |  |  |  |  |
| Conflict with your friends |  |  |  |  |
| Difficulties with sexual intimacy |  |  |  |  |
| Disinterest in sex |  |  |  |  |
| Finding sex painful/physically uncomfortable |  |  |  |  |
| Avoiding travelling alone |  |  |  |  |
| Avoiding being home alone |  |  |  |  |
| Difficulties caring for others |  |  |  |  |
| Conflict at work or your place of study |  |  |  |  |
| Concerns about your appearance  |  |  |  |  |
| Anger about the assault |  |  |  |  |
| Financial in difficulties  |  |  |  |  |
| Increase in use of substances (e.g. alcohol, drugs)  |  |  |  |  |

* + 1. Over the last 2 weeks, how often have you been bothered by the following problems?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not at all | Several days | More than half days | Nearly every day |
| Feeling nervous, anxious or on edge |  |  |  |  |
| Not being able to stop or control worrying |  |  |  |  |
| Worrying too much about different things |  |  |  |  |
| Trouble relaxing |  |  |  |  |
| Being so restless that it is hard to sit still |  |  |  |  |
| Becoming easily annoyed or irritable |  |  |  |  |
| Feeling afraid as if something awful might happen |  |  |  |  |

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* + 1. Over the last 2 weeks, how often have you been bothered by the following problems?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not at all | Several days | More than half days | Nearly every day |
| Little interest or pleasure in doing things  |  |  |  |  |
| Feeling down, depressed, or hopeless  |  |  |  |  |
| Trouble falling or staying asleep, or sleeping too much  |  |  |  |  |
| Feeling tired or having little energy  |  |  |  |  |
| Poor appetite or overeating  |  |  |  |  |
| Feeling bad about yourself – or that you are a failure or have let yourself or your family down  |  |  |  |  |
| Trouble concentrating on things, such as reading the newspaper or watching television  |  |  |  |  |
| Moving or speaking so slowly that other people could have noticed? Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual  |  |  |  |  |
| Thoughts that you would be better off dead or of hurting yourself in some way  |  |  |  |  |

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* + 1. Below are a number of problems that people sometimes report in response to traumatic or stressful life events. Please read each item carefully, then circle one of the numbers to the right to indicate how much you have been bothered by that problem in the past month regarding the assault you reported to St Mary’s.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all | A little bit | Moderately | Quite a bit | Extremely |
| Having upsetting dreams that replay part of the experience or are clearly related to the experience? |  |  |  |  |  |
| Having powerful images or memories that sometimes come into your mind in which you feel the experience is happening again in the here and now? |  |  |  |  |  |
| Avoiding internal reminders of the experience (for example, thoughts, feelings, or physical sensations)? |  |  |  |  |  |
| Avoiding external reminders of the experience (for example, people, places, conversations, objects, activities, or situations)? |  |  |  |  |  |
| Being “super-alert” or watchful or on guard? |  |  |  |  |  |
| Feeling jumpy or easily startled? |  |  |  |  |  |

4a. In the past month how much have the above problems:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all | A little bit | Moderately | Quite a bit | Extremely |
| Affected your relationships or social life? |  |  |  |  |  |
| Affected your work or ability to work? |  |  |  |  |  |
| Affected any other important part of your life such as parenting, or school or college work, or other important activities? |  |  |  |  |  |

* + 1. Below are problems that people who have had stressful or traumatic events sometimes experience. The questions refer to ways you typically feel, ways you typically think about yourself and ways you typically related to others. Answer the following, thinking about how true each statement is for you.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| How true is this of you?  | Not at all | A little bit | Moderately |  Quite  a bit | Extremely |
| When I am upset, it takes a long time to calm down |  |  |  |  |  |
| I feel numb or emotionally shut down |  |  |  |  |  |
| I feel like a failure |  |  |  |  |  |
| I feel worthless |  |  |  |  |  |
| I feel distant or cut off from people |  |  |  |  |  |
| I find it hard to stay emotionally close to people |  |  |  |  |  |

5a. In the past month, have the above problems in emotions, in beliefs about yourself and in relationships:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all | A little bit | Moderately | Quite a bit | Extremely |
| Created concern or distress about your relationships or social life  |  |  |  |  |  |
| Affected your work or ability to work? |  |  |  |  |  |
| Affected any other important part of your life such as parenting, or school or college work, or other important activities? |  |  |  |  |  |

You have reached the end of the questionnaire, thank you very much for completing it.

To help us further understand the long-term needs of sexual assault survivors, we would like to find out how you are doing in the future: in 6, 12 and 24 months time. Would you be willing for us to contact you using the contact details you have already provided to complete a similar questionnaire at one or more of these time points?

* Yes
* No

If, as a result of answering the questions, you feel you need further support from St Mary's or would like to explain your answers in more detail, please email Dr Rabiya Majeed
Email: Rabiya.Majeed@mft.nhs.uk

We hope that completing this questionnaire has not caused you any distress. If you feel you need some help, the following can offer support:

• Samaritans https://www.samaritans.org
• The Manchester Action on Street Health (MASH) [http://www.mash.org.uk](http://www.mash.org.uk/)
• Men's Room <https://mroom.co.uk/contact-us/>
• Survivors Manchester [https://www.survivorsmanchester.org.uk](https://www.survivorsmanchester.org.uk/)
• Rape Crisis [https://www.manchesterrapecrisis.co.uk](https://www.manchesterrapecrisis.co.uk/)
• Women's Aid <https://pankhursttrust.org/manchester-womens-aid/get-help>