

FACT SHEET

POST-SEXUAL VIOLENCE KITS

There are many reasons humanitarian aid workers may become exposed to HIV¹ and other diseases spread through bodily fluids, and sexual violence is just one of those reasons. When this does occur though, it is important to know what options might be available to survivors, as well as what humanitarian organisations can do to appropriately respond.

Post-sexual violence kits

When an incident of sexual violence has occurred, it is recommended that medical care be sought. This can include the administration of a post-sexual violence kit². The items included in such kits may vary, though typically include:

- Guidance on how to use the kit;
- Post-Exposure Prophylaxis (PEP) to cover the 28 days recommended course of antiretroviral treatment, which may be available in two different doses: Tenofovir Disoproxil Fumarate 300 mg and Lamivudine 300 mg (taken once daily), or Lopinavir 200 mg and Ritonavir 50 mg (taken twice daily). PEP treatment can usually be taken at the same time as the other medications, though this can exacerbate the side-effects;
- Medication to help reduce common side effects of the PEP, such as Domperidone tablets, an anti-nauseate, and Loperamide tablets, an anti-diuretic;
- Drugs for sexually transmitted infections (STIs);
- Pregnancy test kit to assess if there was a pregnancy before the incident of sexual violence; and
- Emergency contraception.

Post-Exposure Prophylaxis (PEP)

The first drug typically found in a post-sexual violence kit is Post-Exposure Prophylaxis, known more commonly as PEP. PEP is a short-term anti-retroviral treatment that reduces the likelihood of HIV infection after exposure to HIV-infected blood or sexual contact with an HIV-positive person. It is recommended that PEP be taken after a possible exposure to HIV, including incidents of sexual violence where the HIV/AIDS

¹ HIV stands for Human Immunodeficiency Virus, which attacks the immune system, making it more difficult to fight off secondary diseases. In most cases, the virus evolves into AIDS (Acquired Immune Deficiency Syndrome) if ² Such kits are also often referred to as PEP kits, due to the inclusion of a drug designed to reduce the likelihood of contracting HIV.



status of the perpetrator is unknown.

PEP drugs should be administered within 24 hours, and no later than 72 hours. The effectiveness of the drugs reduces with the amount of time which lapses between exposure and ingestion. The typical course is 28 days of drugs, taken either once or twice a day. Medical advice should be sought before taking PEP, as the drugs can be very hard on one's body and there are dangers of it conflicting with other drugs one might routinely ingest.

PEP often causes extreme nausea and gastro-intestinal problems. It can also have a longterm effect for some individuals, including stomach problems for a period of time after finishing the course of drugs. It is a personal choice whether to take PEP, and that choice should be informed.

Doctors typically recommend that one get an HIV test before starting the PEP course, as well as every three months afterwards for one year, to ensure the disease has not been contracted.

Sexually Transmitted Infections (STIs)

There are multiple infectious diseases that can be spread through contact with another person's bodily fluid, tissue, or blood. These are often referred to as sexually transmitted infections (STI), as they are most commonly spread through sexual activity; this includes unwanted sexual activity. Most, though not all, can be easily treated through a course of one or more antibiotics. The drugs needed for different types of STIs should be included in a post-sexual violence kit, including drugs for chlamydia and gonorrhoea.

It is important to get tested for STIs, as not all show symptoms. It is also advisable to speak with a physician about whether one can take STI medication along with the other medication included in a post-sexual violence kit.

Emergency contraception

Preventing pregnancy up to a few days after an incident of sexual violence is possible, because it can take up to six days for sperm to meet and fertilise an egg. Emergency contraception works by temporarily stopping the ovary from releasing an egg, reducing the chances of impregnation.

There are two main options for emergency contraception: IUD or the morning after pill. Regarding the IUD, if inserted within the first five days after an incident of sexual violence, it is the most effective form of preventing pregnancy in the short and long-term. If kept inserted, it can prevent pregnancy for five to ten years, depending on the type of IUD. Like all forms of contraception – emergency or otherwise – it might not be right for all individuals. It does also require a sterile location and qualified medial personnel to



insert.

Regarding the morning after pill, which is more likely to be included in a post-sexual violence kit as it is east to administer in the field, there are two main types. The first, Ella, is the most effective of the two and works, just like the IUD, until five days after the assault. However, it might not be as effective if someone has used a birth control pill, ring, or patch within five days before the incident of sexual violence.

Plan B is the second type of morning after pill, and contains a dose of Levonorgestrel that must be taken as soon as possible. It is best taken within 24 hours and no later than five days after potential impregnation; a second tablet must be taken 12 hours after the first. This is the least effective means of preventing an unwanted pregnancy, but might be available in some locations without a prescription and can typically be purchased in advance on an individual basis.

Organisational duty to provide post-sexual violence kits

Report the Abuse believes that it is the responsibility of humanitarian organisations to provide its employees with the medical and emotional support needed to recover from the traumatic impacts of sexual violence. For this reason, it is essential that everyone in all levels of humanitarian organisations know where they can find post-sexual violence kits, as well as understand why they are needed.

Humanitarian organisations should ideally provide post-sexual violence kits for their own staff, rather than relying on medical services in specific locations, as this can help to ensure that such drugs are available when incidents do occur. Not all medical services will have the necessary drugs in stock or in the quantities required.

Having readily available post-sexual violence kits is also necessary to ensure drugs are administered in a timely manner. When reflecting on how many kits to have available, and in what locations, humanitarian organisations should consider how long it would take to get the kit to a survivor in the incident sexual violence occurs. If there is a danger that kits might not be delivered to survivors within 24-72 hours, then humanitarian organisations to ensure their staff is protected.

Where to purchase post-sexual violence kits?

International SOS

 $\frac{\text{For more information:}}{\rightarrow \text{Website: } \underline{\text{https://www.internationalsos.com}}}$



UNFPA

The United Nations Population Fund allows humanitarian organisations to order PEP kits for emergency situations.

For more information:

- → Website: <u>https://www.unfpaprocurement.org/home</u>
- → Email address: procurement@unfpa.org
- \rightarrow Phone number: +45 45 33 50 00

WHO

The World Health Organization allows UN agencies to order PEP kits. Their kits are also available for individuals with a UN organisational contract, and their recognised spouses and dependent children, who are exposed to the HIV virus because of sexual violence or occupational accident.

For more information:

- → Website: <u>http://www.who.int/hiv/topics/prophylaxis/info/en/</u>
- \rightarrow Email address: <u>hiv-aids@who.int</u>

Additional Source(s)

http://apps.who.int/disasters/repo/13849_files/r/PEPkit.pdf http://www.uncares.org/PEP/ http://youngwomenshealth.org/2013/01/16/sti-information/ https://www.interhealthworldwide.org/home/locations/nairobi/kenya-centrekits/physical-assault-kit/ https://www.plannedparenthood.org/learn/morning-after-pill-emergencycontraception/which-kind-emergency-contraception-should-i-use https://www.plannedparenthood.org/learn/stds-hiv-safer-sex/hiv-aids