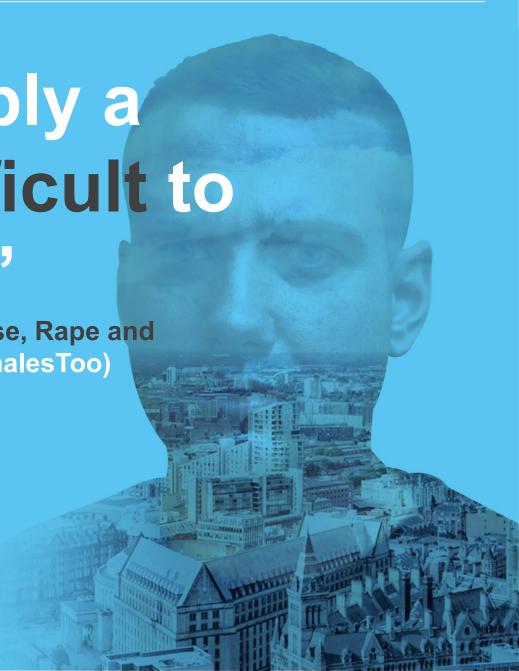


Duncan Craig. MBACP Acred. MA Couns (Dist). FRSA. Chief Executive Officer

Billie Andrews. MBACP Acred. MA Couns (Dist).
Trauma Informed Psychotherapist





### **Duncan Craig**

- Duncan Craig is the founder Chief Executive Officer for Survivors Manchester.
- Qualified Psychotherapist, specialising in sexualised trauma and Post Traumatic Stress.
- Member of the National Rape Working Group at New Scotland Yard.
- Chair of GMCASE (Greater Manchester Campaign Against Sexual Exploitation)
- Advisory Panel Member for the Children's Commissioner E&W Inquiry into Child Sexual Abuse in the home.
- Co-founder of Male Survivors Partnership





### **Billie Andrews**

- Billie Andrews is a qualified psychotherapist, specialising in sexualised trauma and Post Traumatic Stress.
- Manages the Counselling & Psychotherapy Service at Stockport Women's Centre
- Works as a Trauma Informed Therapist at both Survivors Manchester and in Private Practice
- Accredited (& Registered) member of the BACP
- Member of EMDR Europe





#### **Survivors Manchester**

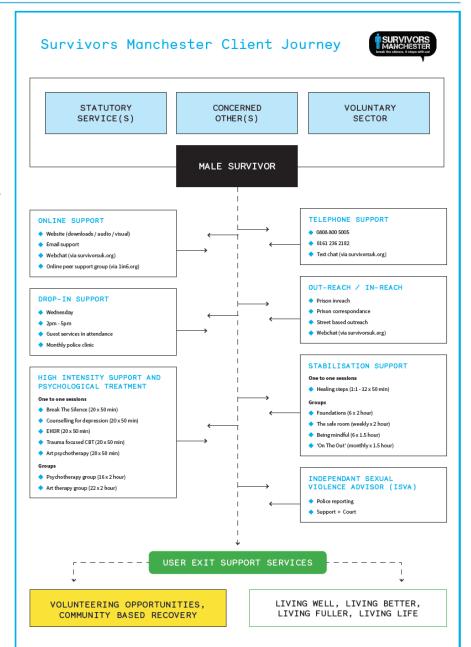
"exists to break the silence of the sexual abuse, rape and sexual exploitation of boys and men, in order to empower those affected to defeat the legacy of abuse and move towards positive futures"

Survivors Manchester is third sector agency that aims to provide:

- advocacy
- therapeutic based support services

to male survivors of sexual abuse, rape and sexual exploitation across Greater Manchester.





### Words & Language

Research shows us time and time again that talking about sexual abuse is difficult for many, but for boys and men there is another level of silence.





### **Rape in Historical Context**

Male rape' wasn't classed as a crime until 1994, with S1 amendment to the Sexual Offences Act (1956), via the Criminal Justice Act (1994).

Andrew Richards became the first person to be convicted of Attempted Rape along with Indecent Assault and ABH.

Richards attack of his 18 year old victim in Regent's Park, London, was hailed as a "significant step in bringing the taboo subject of male rape into the open".

Judge Richard Lowry QC said at the Old Bailey that the new law gave him greater sentencing powers to combat the growing problem of male rape, stating that Richards was "a danger to the public and children of both sexes".



#### A Change in Law – Changing Life

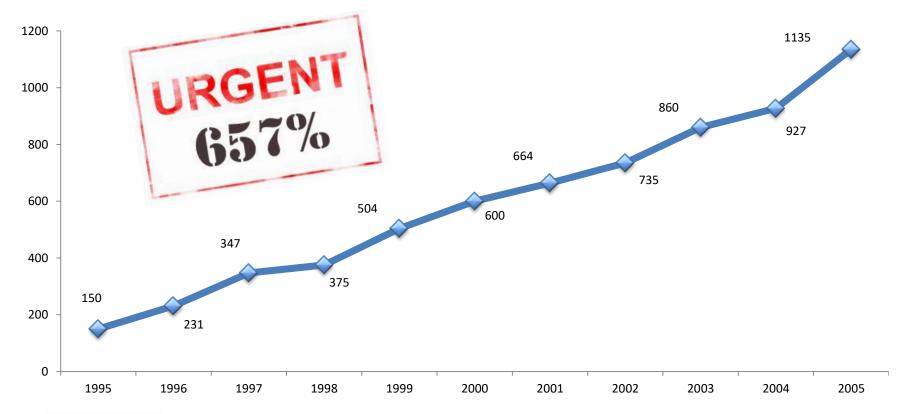
The Richards Case was the first conviction under new male rape laws.

The Judge recommended that as Richards was a prolific Sex Offender, he should serve a minimum of 10 years of the life sentence.



## **Statistics: Decade Post Richards (UK)**

The following graph shows UK Crime Data of recorded rapes where the victim is male





## **Sexual Offences Against Males**

In 2013, the Ministry of Justice provided us with the following sexual offences data.

There are an estimated **78,000** victims of rape, or attempted rape a year. Of these, **9,000** victims are men – that's more than

1 in 10 †\*\*\*\*\*\*



Figures suggest that few victims report to the police.

Just 1,550 incidents of male rape were recorded by the police in 2012/13

In 50% of reported cases, the sexual abuse lasted between two to eighteen years

72,000
men are victims
of sexual offences
each year

These figures do not include boys who are victims of sexual crimes. Statistics show around three quarters of all recorded male rape victims in 2012/13 were under 16 years old

Recent estimates now state that at least 1 in 6 UK Males will have experienced some form of sexual abuse before the age of 18



## #Me(n)Too

© 2 February 2018



#### Reported sex offences against males in England and Wales tripled in 10 years



Reported sexual offences against males in 2016-17 Figures for England and Wales

7,610 sexual assaults

4,520 rapes

**94%** of offences are estimated to go unreported

Source: ONS/GLA Conservatives



- 12,130 reports of sexual offences against men and boys in England and Wales between 2016 – 2017.
- Sexual Assaults 2,687 > 7,610 (+186%)
- Rape 1,132 > 4,520 (+299)



#### **Barriers to Disclosure**

- Perceptions of what a man is supposed to be (internal and external)
- Feelings of guilt for not being able to stop it
- Shame
- Body's physiological reaction (erection, ejaculation, dopamine, endorphins)
- Confusion around sexuality
- Fear of judgement by others
- Vampire syndrome myth
- Lack of understanding
- Original grooming issues
- Feelings and love for the perpetrator



## **Legacy of Sexual Offences**

The impact of rape, sexual assault and abuse can be long lasting and far reaching, and affect not just the victim.

#### **Mental Health**

Anger, Anxiety, Boundaries, Confidence, Depression, Dissociation, Fear, Flashbacks, Guilt, Issues with Intimacy, Isolation, PTSD, Self-Worth / Self-Respect, Shame, Trust.

#### **Physical Health**

Anorexia, Bulemia, Counter-phobic Activities, Insomnia, Neglect of Physical Needs, Self Harm / Suicide.

#### **Sexual Health**

Erectile Dysfunction, Hepatitis, HIV/AIDS, STI, Sexuality / Sexual Orientation, Sexual Performance Anxiety, Unsafe and Unhealthy Sexual Behaviours.

#### **Crime & Disorder**

Authority, Hate Crime (homophobia, racism), Substance Misuse (tertiary factors), Violence.



Survivors Manchester website: www.survivorsmanchester.org.uk

National Male Survivor Helpline: 0808 800 5005 (Safeline)

## **Supporting Disclosure**

- Allow time for him/her to talk in a space he/she feel safe in.
- Check out what support he/she has once he/she leaves you.
- Be explicit with, and keep hold of, clear boundaries/confidentiality.
- Be empathic and congruent.
- Help the him/her be empowered, words can often fail him so think about creative techniques (drawing, writing, imagery, symbols)
- Be the passenger, ask what he/she wants to do and what you can do to help him/her.
- Be careful not to be drawn into collusion, making promises you



## Herman's 3 Stage Model of Recovery

- Stage 1 overcoming problems; where the survivor learns to feel safe in their bodies and their environment. During this stage, the survivor learns how to selfcare and moved away from self-harming behaviours. The survivor develops a more secure attachment base and starts to look at building support networks, allowing them to overcome isolation and start to learn how to implement boundaries to develop healthy relationships.
- Stage 2 remembrance and mourning; where the survivor tells their story and learns to accept the unknown (not all memories will be recalled). During this stage the survivor grieves not only for what happened but for what they never had. The survivors explores the impact their experiences have had on them and gains new insights, perspectives and understanding over time.
- Stage 3 active engagement with people, life and building connections. During this stage, the survivor starts to actively engage in life and start to take social and personal action to make a difference in both theirs' and others' lives.



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#### **How We Use This Model**

#### **STAGE 1 - STABILISATION**

- Telephone Support
- Email Support
- Drop In
- The Safe Room
- Healing Steps

#### **STAGE 1, 2 & 3**

- Breaking the Silence
- EMDR
- Trauma Focused CBT
- Art Psychotherapy
- Structured Psychotherapy Groups



## Why (& how) IAPT in the Third Sector

- Who doesn't want to improve access?
- What are we doing this for?
- Who is the organisation open for? Us or the clients?
- Will this make us more sustainable?
- Does the vision meet our aims?
- How do we know what is working now?
- Are we able to stand up and prove our effectiveness?

- "Our clients won't like IAPT"
- Loss of identity
- Would IAPT be the death of us as a unique service?
- How will this effect service pathways?
- Will we get the right support to implement the change?
- Our we doing ourselves a disservice?



So why (& how) IAPT in the third sector?

## **Going Through Changes**

- From CORE 34 to GAD7/PHQ9
- IES-R stayed the same
- Comprehensive Assessment reviewed and slightly altered – IAPT Has made it better!
- Sessions roughly the same

- Data reporting significantly changed
- System monitoring changed
- Workforce upskilled
- IG Toolkit changed us! (and nearly killed us in the process)



## Let the data do the talking...

- From CORE 34 to GAD7/PHQ9
- IES-R stayed the same
- Comprehensive Assessment reviewed and slightly altered – IAPT Has made it better!
- Sessions roughly the same

- 93% of individuals entering treatment had a positive change
- 100% of clients offered an assessment appointment in less than 18 weeks
- 65% of clients offered appointment in less than 6 weeks



#### So What Have We Learnt?

 There is an urgent need for NHS and the National IAPT programme board to engage with the third sector and understand what it needs

- The third sector needs to pull down the barriers and look properly and making the transition to become IAPT-compliant
- Commissioners to recognise the importance of the third sector and see us as part of the transition
- NHS isn't for everyone many service users opt for the third sector over statutory services – let's stand up and be counted!
- Let's join forces and work together to improve access it's a shared value for us all, surely?



#### **Points to Remember**

- Men can be and are raped, sexually abused and sexually assaulted
- The rape or sexual assault of a man is never about his sexual orientation
- If a boy or a man does disclose, then just think about what barriers has he had to overcome?
- As yourself the question, what can you do to help the victim speak?
- Think about the language you use, the tone of your voice, what can you do to get some equality?
- Next time you hear a colleague, friend, family member, ANYONE use one of the myths, challenge it and correct them!
- Get used to words, they don't cause harm, not speaking them does!
- Remember, a body will respond as a body, not always how the mind wants it to





#### **Contact**



# **Survivors Manchester**



www.survivorsmanchester.org.uk support@survivorsmanchester.org.uk 0161 236 2182