



Central and  
North West London

NHS Foundation Trust

# Taking care of yourself after a sexual assault

Sexual Health Service



*Wellbeing for life*

**This leaflet provides information about common reactions to sexual assault and organisations that offer support.**

Sexual assault is any act of a sexual nature where one person has not given consent. Sexual consent is where a person has the ability and freedom to agree to sexual activity.

On average, one in four women and one in ten men are sexually assaulted in their lifetime.

# Common feelings

There is no right or wrong way to feel if you have been sexually assaulted. Everyone reacts differently, and a range of emotions are all natural responses to trauma. Some common reactions to sexual assault include:

## **Fear** or **anxiety** of

- Who to trust
- A similar event happening again
- Being left alone
- Breaking down or losing control
- About what might have happened (especially if you can't remember everything)

## **Anger** at

- What has happened
- A lack of support or understanding from others

## **Helplessness**

- Feeling a loss of control over life, or that the world is a dangerous place

## **Sadness** for

- Being hurt, emotionally and physically

## **Guilt** or **self-blame**

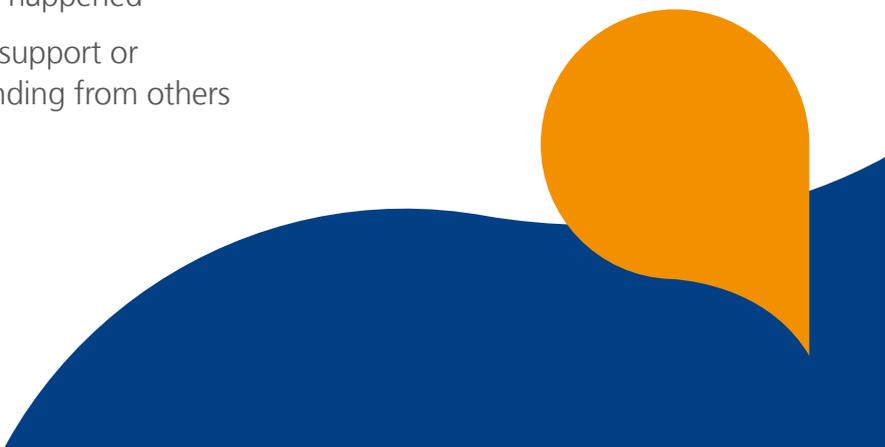
- Feeling somehow responsible
- Regret for things done and not done

## **Shame**

- About what has happened

## **Detached**

- Everything feeling unreal or strange



# Physical sensations

Physical sensations are often reactions to stress and can develop several months after the event.

## Some common feelings include:

- Feeling tense or irritable, uptight or panicky
- Heart racing, or chest feeling tight
- Dizzy or lightheaded
- Stomach churning and loss of appetite
- Difficulty sleeping or nightmares
- Poor memory and concentration
- Difficulty making decisions
- Feeling depressed or low in mood
- Change in sex drive.

# Common thoughts and reactions

## “I feel numb”

You may just feel numb. The event may seem unreal, like a dream, something that hasn't really happened. Sometimes you might feel spaced out, or even disorientated – this can be the mind's way of trying to shut out the experience.

## “I have to keep busy”

Being active may help you to cope. But, overactivity can be a problem if you overtire yourself or your behaviour feels out of control.

## **“It feels like it’s happening again”**

Sometimes people get ‘flashbacks’ – vivid memories or moments when they feel as if the assault is happening again. This may come out of the blue or be triggered by a particular place, event, thought or feeling, or even a smell or noise. It’s important to remember that these are the normal effects of an abnormal experience and the mind’s attempts to process what happened. It doesn’t mean you’re going mad and although it can be frightening when it happens, it is not dangerous.

## **“I feel jumpy or irritable”**

You may feel extra sensitive to noises, sudden movements or even feelings in your own body, or feel as if you are always ‘wound up’ and can’t sit still.

## **“I don’t want to see anyone”**

You may feel like being alone or staying away from places that remind you of the assault.

You might stop going out or answering the telephone. It can help to get emotional support from others but this may be difficult if you have upsetting or complicated feelings about what has happened. However, being alone might also feel hard or frightening.

## **“I just want to run away”**

You may feel like running away from it all. This may mean avoiding thinking and talking about what happened or using alcohol or drugs. Although this might make you feel better in the short-term, it might lead to more difficulties in the long-term.

Everyone is different and you may experience some or all of these feelings at different times.

## How to take care of yourself

- Try not to bottle up feelings. It's very common for a sexual assault to leave you with strong emotions.
- Talk it over with someone you trust when you feel ready to do so and remember that getting upset when you talk is ok.
- Try to get back to your usual routine, such as going to work or college and take care of yourself by eating regular meals and taking some kind of exercise – it can lift your mood and help you to sleep.
- Include enjoyable activities too, such as watching a film or going for a walk with friends, but also make time to rest and think.
- Avoid drugs and alcohol – this can numb difficult feelings but can stop you from coming to terms with what has happened.

## Managing sleep problems

- Sleep problems are very common after a traumatic event. When your mind is on 'high alert' it is more difficult to sleep.
- Try to avoid heavy food and don't drink caffeine in the hours before bedtime.
- Take time to relax in the evening. You could do this by having a warm bath or by listening to music. Avoid reading or watching anything that might remind you of the assault, particularly when you are already in bed.
- Only go to bed when you feel tired, but get up at the same time every day, even if you haven't slept, so your body gets used to the same routine. Try not to nap.
- Use breathing exercises and relaxation exercises to help drift off to sleep but if you haven't fallen asleep in 30 minutes, get up and do something quiet and calming until you feel sleepy again. Tossing and turning in bed is likely to keep you awake.

# Managing tension and anxiety

- Being hyper-alert is your body trying to stay on guard against danger, and is completely normal, but the symptoms can sometimes get in the way of everyday life.
- Try different things to relax, such as listening to music, watching TV or reading. Or try a relaxation CD, breathing exercises or yoga. Progressive muscle relaxation is a technique often used in yoga that many people find helpful (see YouTube for demonstrations of this).
- Exercise can be a good way of relaxing and switching off.
- Distraction from your memories can help, but can be unhelpful if you do it all the time.
- Anger is a normal response to feeling threatened but also when you feel you should be coping differently. If you are feeling angry or irritable, try to talk to someone about how you feel – let people

know you're having a difficult time and they shouldn't take it personally but understand why you might be feeling this way.

- Try to notice when you are becoming angry and walk away from the situation for a few minutes. Remind yourself that you can calm down and give yourself time to think about how to respond. Try to stay direct, but polite. Controlled breathing and relaxation exercises can also help.

## Overcoming avoidance

- Avoiding certain situations can help in the short-term, but can stop you from moving on and getting back to your usual routine.
- Write down a list of the things you're currently avoiding and try and tackle them one by one, starting with the easiest one first.
- You may feel anxious to begin with, but try to stick with it until you feel calmer and give yourself a reward for each one you manage.

# Managing memories and flashbacks

- Try to pay attention to the signs that show a flashback might be starting. When you recognise these, try to concentrate on something around you (such as the feel of the ground under your feet, or the advertisements on the tube) and describe these to yourself in detail in your head. Carrying a strong scent with you (for example, on a handkerchief), or a comforting object can also help bring you back to yourself. Remind yourself where you are and what you're doing, and that you are going to be ok. The same strategies can help if you wake up from a nightmare.
  - Avoiding thinking about what happened can help reduce distress in the short-term, but can sometimes cause more problems in the long run. Allow yourself to have memories of what happened for short periods of time every day and try not to avoid other reminders of what happened.
  - If you can't remember everything that happened (maybe because you were drugged), just focus on what you do know. You may remember a few more things over time but you're unlikely to remember much more – try to avoid filling the gaps – your worst fears can take over.
- 

# Managing low mood and shame

- After an assault it's common to have negative thoughts about yourself and others. You might lose confidence; feel unattractive, worthless, helpless, responsible, guilty or ashamed (even though the things people often feel ashamed about are usually things they couldn't control) or believe that others are looking down on you or judging you.
- Try to challenge these thoughts when you notice them. Write them down and think about another way of looking at the situation (thinking about what you would say to a friend who was in your position can be a good way to start).
- Try noticing when the negative thoughts come back, imagine placing them on a cloud, or in a balloon and allow them to float away.
- Remember that shame can grow when we tell ourselves we are bad or to blame but also when we keep silent about what has happened. Talking about what happened and getting support and acceptance from others can make it more difficult for shame to keep hold.
- Get back to a routine, including exercise and make sure you have things to look forward to. Sometimes it's not easy to do things when you feel down, so give yourself credit for anything you manage to do, no matter how small.
- Remind yourself that the way you're feeling won't last forever. It's ok that you might still be finding things difficult. Be patient and take care of yourself.

# When to seek help

## Consider seeking help if:

- Intense feelings or physical sensations get too much
- You feel tension, confusion, emptiness or exhaustion over a long period of time
- You have bad dreams or poor sleep that does not improve with time
- You can't stop thinking about what has happened or have frequent distressing flashbacks
- Your relationships with people seem to be suffering badly
- You have difficulties in your sexual relationships which do not improve with time
- You find you are avoiding people or places more and more and this is interfering with your normal life
- You continue to smoke, drink or take drugs to excess
- Your work suffers
- You are feeling very negative about yourself or have lost hope for the future.

## Who to contact

There are a number of support services available.

If you have been assaulted in the past twelve months, specialist support including counselling, sexual health screening and reporting to the Police is available (24/7) through the following organisations:

### In London:

**The Havens**

**020 3299 6900**

**[www.thehavens.org.uk](http://www.thehavens.org.uk)**

### In Surrey:

**Solace Centre**

**0300 130 3038**

**[www.surreysolace.org](http://www.surreysolace.org)**

If the sexual assault happened more than one year ago, psychological support is available through your GP.

You can also speak to a health professional at any of our clinics for further advice.

# Support organisations

## The Police

101 or 999 (in an emergency)  
[www.met.police.uk](http://www.met.police.uk)

## Rape Crisis England and Wales

0808 802 9999  
[www.rapecrisis.org.uk](http://www.rapecrisis.org.uk)

## The Survivors Trust

0808 801 0818  
[www.thesurvivorstrust.org](http://www.thesurvivorstrust.org)

## National Association for People Abused in Childhood

0808 801 0331  
[www.napac.org.uk](http://www.napac.org.uk)

## Victim Support

0808 168 9111  
[www.victimsupport.org.uk](http://www.victimsupport.org.uk)

## GALOP (LGBT+)

020 7704 2040  
[www.galop.org.uk](http://www.galop.org.uk)

## Women and Girls Network (women)

0808 801 0660  
[www.wgn.org.uk](http://www.wgn.org.uk)

## SurvivorsUK (men)

020 3598 3898  
[www.survivorsuk.org](http://www.survivorsuk.org)

## Samaritans

116 123  
[jo@samaritans.org.uk](mailto:jo@samaritans.org.uk)  
[www.samaritans.org.uk](http://www.samaritans.org.uk)

## Domestic Violence:

### Women's Aid

0808 200 0247  
[www.womensaid.org.uk](http://www.womensaid.org.uk)

### Men's Advice Line

0808 801 0327  
[www.mensadviceline.org.uk](http://www.mensadviceline.org.uk)



This document is also available in other languages, large print, Braille, and audio format upon request. Please email [communications.cnwl@nhs.net](mailto:communications.cnwl@nhs.net)

هذه الوثيقة متاحة أيضاً بلغات أخرى والأحرف الطباعية الكبيرة وبطريقة برايل للمكفوفين وبصيغة سمعية عند الطلب

## Arabic

این مدرک همچنین بنا به درخواست به زبانهای دیگر، در چاپ درشت و در فرمت صوتی موجود است.

## Farsi

এই ডকুমেন্ট অন্য ভাষায়, বড় প্রিন্ট আকারে, ব্রেল এবং অডিও টেপ আকারেও অনুরোধ পাওয়া যায়

## Bengali

Dokumentigaan waxaa xitaa lagu heli karaa luqado kale, daabacad far waa-wayn, farta indhoolaha (Braille) iyo hab dhegaysi ah markii la soo codsado.

## Somali

Mediante solicitação, este documento encontra-se também disponível noutras línguas, num formato de impressão maior, em Braille e em áudio.

## Portuguese

நீங்கள் கேட்டுக்கொண்டால், இந்த ஆவணம் வேறு மொழிகளிலும், பெரிய எழுத்து அச்சிலும் அல்லது ஒலிநாடா வடிவிலும் அளிக்கப்படும்.

## Tamil

Este documento también está disponible y puede solicitarse en otros idiomas, letra grande, braille y formato de audio.

## Spanish

Dokument ten jest na życzenie udostępniany także w innych wersjach językowych, w dużym druku, w alfabecie Braille'a lub w formacie audio.

## Polish

આ દસ્તાવેજ વિનંતી કરવાથી બીજી ભાષાઓ, મોટા છાપેલા અક્ષરો અથવા ઓડિઓ રચનામાં પણ મળી રહેશે.

## Gujarati

Be belge istenirse, başka dillerde, iri harflerle, Braille ile (görme engelliler için) ve ses kasetinde de temin edilebilir.

## Turkish