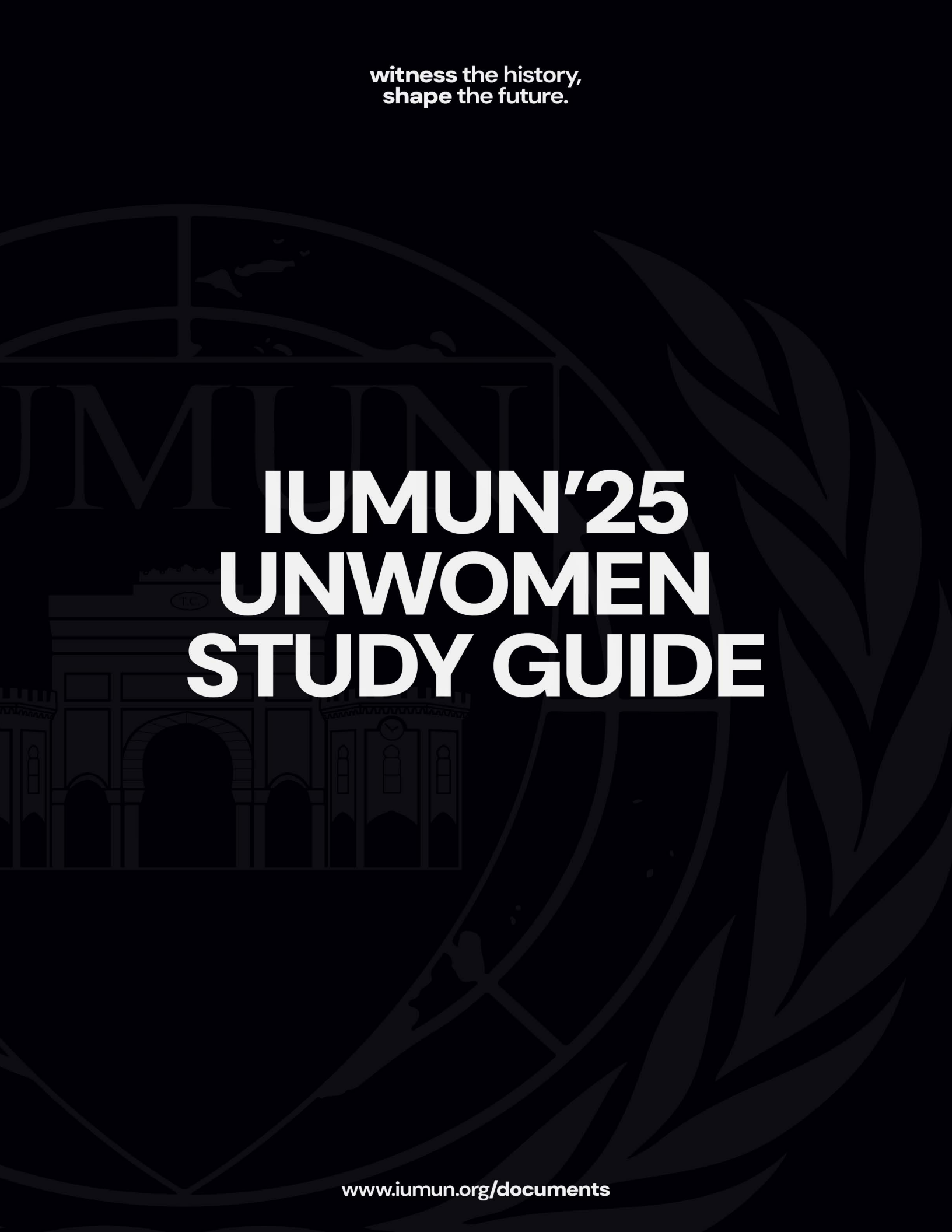


witness the history,  
shape the future.



# IUMUN'25 UNWOMEN STUDY GUIDE

## LETTER FROM THE SECRETARY GENERAL

**Dear Honourable Delegates,**

I am profoundly privileged to welcome you to the UN Women Committee of IUMUN 2025.

As the Secretary-General, I am honoured to be hosting such a passionate and dedicated group of delegates willing to explore an issue that affects so many people across the globe:

Fighting drug-facilitated sexual exploitation in domestic and social contexts. This problem grazes the weakest points of society and challenges us to rise to horrific facts with courage, empathy, and irrevocable commitment.

Drug-facilitated sexual exploitation is a disturbing crime that creeps in the darkest crevices of our society, exploiting its victims and robbing them of justice. Your debate here in this committee will have a significant contribution to policy formulation and awareness that can help protect survivors, improve the law, and promote prevention.

The agenda encourages you to think critically about the intersection of power, gender, and vulnerability, and the social and legal mechanisms by which this crime may successfully be combatted. Your task is more than diplomacy—it is an exercise in human rights and dignity.

I would like to present my sincere gratitude to Under-Secretary-General Berrak Günçe and Academic Assistant Ela Zehra Yılmaz as well for their great efforts in preparing the study materials. Their dedication and professionalism have offered a strong foundation for your debates and research.

UN Women isn't a committee—it's an agent of change, empowerment, and justice. I have every confidence you will approach your deliberations with the seriousness and sense of urgency this issue demands.

On behalf of the whole Secretariat, I extend to you a warm welcome to this urgent mission. I hope your work will be productive and influential.

With best regards,

**Secretary-General**

**Öykü Taş**

## **LETTER FROM THE UNDER-SECRETARY GENERAL**

**Dear Delegates,**

I am delighted to welcome everyone to IUMUN'25. I hold a special place in my heart for the UNWOMEN committee. It is with immense pride that I share with you my long-held dream of this committee and this agenda. It is great to be able to discuss such a critical issue in a world when everyone is trying to isolate women. I am confident that we will have fantastic discussions and innovative ideas.

Together with my Academic Assistant Ela Zehra Yılmaz, we have put a lot of effort into creating a thorough study guide that will be a vital part of your preparation. We strongly encourage you to learn more about the subject and the policies of the nations you have been assigned.

Wish you all luck! Best regards,

**Under-Secretary-General**

**Berrak Günçe**

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## **1. INTRODUCTION OF THE COMMITTEE: UNWOMEN**

The United Nations Entity for Gender Equality and the Empowerment of Women, known as UN Women, was established in 2010 to accelerate progress in addressing the needs of women and girls worldwide. UN Women strengthens efforts to advance gender equality by concentrating on topics that include issues such as gender-based violence, women's leadership, and economic independence. It seeks to eliminate prejudice and discrimination against women and gender inequality on a global scale.

To implement policies and standards, UN Women collaborates with various UN bodies, civil society organizations, governments, and intergovernmental organizations, including the International Labour Organization (ILO), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the United Nations Office on Drugs and Crime (UNODC), and the World Health Organization (WHO). Research and advocacy are the main factors that fuel UN Women's global influence, making gender equality a core principle and priority of the United Nations.

## **2. INTRODUCTION OF THE AGENDA ITEM: COMBATING DRUG-FACILITATED SEXUAL ABUSE WITHIN DOMESTIC AND SOCIAL ENVIRONMENTS**

Drug-facilitated sexual abuse refers to the act of rendering an individual or individuals' unconscious by drugging them with various substances to commit sexual assault and degradation against the victim. This form of abuse can occur in both domestic and public environments.

In a domestic environment, this type of assault happens when both parties have a close relationship, where the trust is betrayed. On the other hand, in a public setting, it mostly takes place in social places like parties and clubs where the assaulter can easily take advantage of the individual's vulnerability. Alcohol is the most common substance used to perpetrate drug-facilitated sexual assault. Since DFSA mostly happens in an environment in which the victim trusts the perpetrator, it is considered one of the least reported crimes.

In this ongoing battle against sexual violence and exploitation, this issue holds significant importance. Therefore, measures need to be taken to prevent it from ever happening again. Addressing these issues requires comprehensive actions such as improving legal frameworks, educating the public, spreading public awareness and establishing strong support systems for victims. As required by their main principles, UN Women is determined to combat such forms of violence and ensure a world free from sexual exploitation for every individual.

### 3. TERMINOLOGY

**Rape:** To force someone to have sex when they are unwilling, using violence or threatening behaviour.

**SA:** Sexual Assault. The term sexual assault refers to sexual contact or behaviour that occurs without explicit consent of the victim.

**DFSA:** Drug-facilitated Sexual Assault. Drug-facilitated sexual assault occurs when alcohol or drugs are used to compromise an individual's ability to consent to sexual activity.

**Date Rape Drugs:** Date rape drugs are any type of drug used to make rape or sexual assault easier. Alcohol is often used this way. Or date rape drugs can be put into a drink without you knowing. Drugs or alcohol can make a person confused about what is happening, less able to defend themselves against unwanted sexual contact, or unable to remember what happened.

**Consent:** Agreement to sexual activity, given by someone who is free to choose and able to choose (because of being old enough, being able to think or communicate clearly, etc.)

**ACPO:** Association of Chief Police Officers

**SARCs:** Sexual assault referral centres, or SARCs, provide a safe space and dedicated care for anyone who has been raped, sexually assaulted or abused. They offer a range of services, including crisis care, medical and forensic examinations, emergency contraception and testing for sexually transmitted infections.



**FSS:** Forensic Science Service. Worldwide, forensic sciences are a cornerstone of criminal justice investigations used by all modern law enforcement and justice services to solve all types of crime and bring justice to victims. Forensic sciences provide extremely efficient ways to accelerate crime-solving by building cases on physical evidence rather than only on confession and testimony.

**PTSD:** Post-traumatic stress disorder (PTSD) is a mental health condition that's caused by an extremely stressful or terrifying event either being part of it or witnessing it. Symptoms may include flashbacks, nightmares, severe anxiety and uncontrollable thoughts about the event.

**To Incapacitate:** To remove someone's ability to do something.

**Victim Blaming:** Victim blaming can be defined as someone saying, implying, or treating a person who has experienced harmful or abusive behaviour (such as a survivor of sexual violence) like it was a result of something they did or said, instead of placing the responsibility where it belongs: on the person who harmed them.

## 4. OVERVIEW

Drug Facilitated Sexual Assault (DFSA) has been defined as offences in which victims are subjected to non-consensual sexual acts, while they are incapacitated or unconscious due to the effects of alcohol and/or drugs. It is estimated that 75% of all acquaintance rapes involve alcohol and/or drugs. Drugs, when used with alcohol, can result in a loss of consciousness and a loss of the ability to consent to sexual intercourse. Most DFSA victims are women and perpetrators are men, although men can also be the victims. DFSA occurs in three specific circumstances: when the victim involuntarily ingests an intoxicating substance, when the victim ingests both voluntarily and involuntarily an intoxicating substance, and when the victim voluntarily ingests an intoxicating substance. The psychoactive substance most commonly associated with DFSA is alcohol, but levels of recreational drug use are rising, and drug markets are expanding, providing faster and cheaper ways to incapacitate a victim.

It is difficult to estimate the number of DFSA occurring every year considering the low reporting rates, although assaults are increasingly reported. Victims are often reluctant to report incidents because of embarrassment, guilt or perceived responsibility, or because they do not clearly remember the assault. Moreover, most of the drugs used during sexual assaults are rapidly absorbed by the body and metabolized, making it difficult to detect these drugs in routine urine and blood drug screenings. Over the past ten years, the number of DFSA reports increased in the United States, the United Kingdom, France, the Netherlands and Australia, where serious concerns were expressed about the incidence of alcohol and drug use in non-consensual sexual activity.

Since the majority of publicly available records only discuss sexual assault as a class and do not differentiate between different types, it is challenging to get statistics on drug-facilitated sexual assault. The underreporting of cases of sexual assault makes this situation even worse. According to a Crime Victimization Survey in 2016 conducted by the Australian Bureau of Statistics and reported by the AIHW, the underreporting of sexual assault is estimated to be 86.8%. The research included the excuses given by victims for not telling the police about their assault, including embarrassment or feelings of humiliation. The data have been collected from females assaulted by male perpetrators and do not consider neither male victims nor female perpetrators.

Reasons given by females in the Crime Victimization Survey for not reporting their most recent sexual assault by a male perpetrator to the police [16].

Reason	Number (‘000)	RSE (%)	Proportion (%)	95 % MoE
Felt they could deal with it themselves	189.4	8.1	34.2	4.0
Did not regard the incident as a serious offence	187.4	10.7	33.8	6.1
Felt ashamed or embarrassed	142.7	9.0	25.8	3.6
Did not think there was anything the police could do	122.0	11.6	22.0	4.4
Did not know or think the incident was a crime	118.9	12.0	21.5	4.5
Fear of the person responsible	102.1	13.4	18.4	4.4
Did not want the person responsible arrested	92.1	13.5	16.6	4.0
Felt would not be believed	89.3	11.4	16.1	3.2
Did not think the police would be able to do anything	80.3	12.1	14.5	3.1
Fear of legal processes	54.3	15.3	9.8	2.7
Did not want to ask for help	49.2	14.9	8.9	2.4
Did not trust the police	32.1	24.2	5.8	2.7
Workplace/on the job incident	10.3 <sup>b</sup>	29.8	1.9	1.1
Cultural/language reasons	18.3 <sup>b</sup>	28.4	3.3	1.8
Other	39.7	24.4	7.2	3.4
Not known	16.1 <sup>b</sup>	28.6	2.9	1.6
Total <sup>a</sup>	553.9	5.4	100.0	0.0

Abbreviations.

RSE: Relative standard error (%).

95 % MoE: Margin of error of proportion ( $\pm$ ).

<sup>a</sup> Components for all reasons police not contacted are not able to be added together to produce a total. Where a person has more than one reason, they are counted separately for each reason but are counted only once in the aggregated total.

<sup>b</sup> Should be used with caution because RSE is from 25 % to 50 %.

#### 4.1. Historical Background

Accounts of rape go as far back as Greek mythology (for example the rape of Persephone) and the use of drugs to incapacitate a woman to facilitate rape was mentioned in the Arabian Nights stories, which pre-date their first appearance in Arabic around 850AD. They contain the tale of the rape, by King Umar al-Numan, of the virgin Queen Ibrizah, who had been rendered unconscious by consuming a piece of banj. These historical examples serve to highlight the fact of rape occurring since time immemorial, and in particular remind us that drug-assisted rape is not a modern invention.

For a long time, toxicologists have preferred the definition “the use of a drug, noxious substance or chemical agent to facilitate sexual contact”. However, following the most recent investigation of DFSA in England by the combined efforts of ACPO, FSS and SARCs it has now been suggested that DFSA should be redefined as Proactive and Opportunistic DFSA.

Proactive DFSA entails the active or coercive administration of psychoactive or incapacitating substances with the goal of making a person intoxicated or unconscious in order to facilitate non-consensual sexual activity. On the other hand, in opportunistic DFSA, the offender does not give the incapacitating drug. Self-intoxicated individuals are sexually assaulted by the attacker when they are unable to give their permission. The majority of reported DFSA cases are classified as opportunistic DFSA rather than proactive DFSA, which may involve drink spiking. This does not necessarily imply that proactive DFSA is less common than opportunistic DFSA, which is the opinion backed by data indicating that opportunistic DFSA is far less common.

In addition, since the 1980s the term 'date-rape' has been commonly used as awareness of the phenomenon increased exponentially. From this time, definitions such as "rape perpetrated by the victim's social escort", or "rape in which the rapist is known to the victim (as when they are on a date together)" have existed, in association with a perception that drink-spiking has played a pivotal role in the commission of this offence.

#### **4.1.1. The Case of Gisele Pelicot**

Gisele's husband Dominique Pelicot was arrested for photographing underneath a girl's skirt in the grocery store. When police seized all of Dominique's electronic devices, they discovered graphic images of Gisele Pelicot with 73 different men. According to records, Gisele was sexually assaulted between 2011 and 2022 (the year Dominique was arrested). Gisele was drugged to sleep by her husband for eleven years, and she was subjected to sexual assault by several guys each time. To contact all of these men, the husband used a website called "without them knowing," which was later outlawed in France. Gisele has been suffering from memory loss, excessive fatigue, and balance problems in the past few years. Every doctor she saw advised Gisele to "rest a little," but they were unable to identify any issues. Gisele had no idea that this kind of event would occur. Lorazepam, a benzodiazepine drug used to treat anxiety and sleeplessness, was being used by her husband. How Dominique managed to get that many doses of medication is unknown and is a whole another issue of the system.

Alongside the graphic images and videos of Gisele, there were pictures of their daughter and daughter-in-law wearing underwear. We always assume that rapists or perverts fit a certain description, such as having an abusive or missing mother or

perhaps having experienced a terrible breakup that left them furious with women. Men like Dominique, a happy parent, a cherished grandfather, and someone you wouldn't typically think of as a pervert, can actually be one. These individuals can be found all around us, despite what the general public believes. A police officer, teacher, doctor, mailman, etc. Therefore, it is essential to be able to remind women that they are never alone and to foster trust within the community.

Just like Gisele, it is possible that a lot of women are experiencing DFSA in their own home all around the world. Unlike drink-spiking or date rape, it is nearly impossible for an individual experiencing DFSA in a domestic environment to understand what is happening to them until it is too late. For Gisele, it took 11 years, for others it may be a lifetime. In these cases, it is crucial to focus on how to hinder the purchase of an extreme amount of these drugs as well as pondering on how to make sure the victim knows they are a victim and report the assault.

#### 4.1.2. Example Cases

In Singapore, Marina Bay Sands Hotel, James (whose name is not the defendant's; all names are kept private in this case) and six other men drug and exchange wives in order to sexually abuse them. To find out if his wife would cheat, he first got in touch with "Oliver." James got furious when his wife cheated on him. He desired revenge. These seven men met in a community where users express their sexual fantasies and upload videos of themselves having sex with one other's spouses. They made the decision to switch and drug their spouses. The assault went on for eight years, from 2010 to 2018, without the wives noticing. The assaulters were sentenced to 13–22 years in jail.

After her husband admitted to drugging her and raping her for years, a woman in England has spoken up, according to a report. Under the alias "Kate," the victim told the BBC about how her ex-partner would use sleeping pills to spike her tea at night and then sexually assault her while she slept. Kate could never have imagined what her husband was about to tell her when they sat down to talk one evening. She was unable to understand what her spouse was saying and was speechless. "He told me that as though he wanted to know what we were having for dinner." Her spouse has been abusive and controlling behind closed doors for years. On other times, Kate had awakened up to discover her husband having sex with her against her will. Kate made the decision to tell her sister what happened following a severe panic attack about a year after the confession. For the sake of her kids, Kate didn't want to pursue the matter even after she phoned the police. Kate started to think more clearly about the incident when her husband left the house. Six months later, she made the decision to call the police once more, which started her husband's trial. Kate shared her tale on the BBC's journalism documentary series, *File on 4 Investigates*. This case is similar to Gisele's.

A Paramedic killed his pregnant lover's unborn child by secretly giving her an abortion medication. The 33-year-old man, who was married at the time, worked as a Clinical Team Leader for the Scottish Ambulance Service. In 2023, as she lay on a bed at his house in the upscale Grange neighbourhood of Edinburgh, he squeezed pills into a syringe and then gave her the drug. Days later, Doohan gave her more of the medicine. Soon after, the woman became ill and fainted in the shower.



## 4.2. Major Issues

Major problems of this topic can be divided into two main categories which being: “victimization” and “aftermath and healing process”. Victimization being the before and during of the sexual exploitation and how to prevent it, and aftermath being the criminal process, mental and physical evaluations and the coping process of the victim.

### ***Victimization***

Social changes that impact sexual engagement and consumption behaviours are part of the victimization process. However, victims experience a range of situations that make it difficult for them to self-acknowledge themselves as victims. Widespread myths about the victimization process add to the social questioning faced by victims, stemming from gender-based double standards which condition the expected female behaviours regarding the use of drugs and sexual interaction. The victims usually experience amnesia, lack of injuries and emotional harm, which aggravates the self-acknowledgement as a victim of sexual assault and the reporting of the episode suffered. Therefore, it is essential that public health adopt a fresh perspective on how women are victimized by opportunistic drug-facilitated sexual assault in social environments in order to raise awareness of the seriousness of this type of sexual violence.

Society must recognize the existence of this problem within itself to help victims to acknowledge themselves as such, file a complaint and seek adequate help. The lack of this social support feeds the continuation of the victimization process, which increases the risk of locking victims into loops of re-victimization and favours both the underreporting as well as inadequate coping strategies. In addition to focusing on the need to increase awareness of the severity of female victimization by drug-

facilitated sexual assault in domestic and social environments, other recommendations include the use of the term “take advantage”, the development of specific criminal approaches, and the in-depth knowledge of the phenomenon via victimization surveys. These steps are necessary for developing well-targeted and evidence-based preventive measures consistent with reality.

### ***Aftermath and Healing Process***

Sexual violence is a serious and highly prevalent public health problem with tremendous physical, psychological, social, behavioural, and economic consequences. Recent estimates indicate 43.6% of women and 24.8% of men experience sexual assault (SA) in their lifetime.

SA is the most powerful predictor of posttraumatic stress disorder (PTSD) compared to other trauma types and is strongly associated with substance use disorders (SUD) and suicidality. Physical impacts include injury, sexually transmitted infection, long-term health issues, and impairment in sexual functioning. Adverse psychological consequences include depression, anxiety, self-blame, mistrust, substance use, impulsivity and risk-taking. SA also causes significant economic and social costs from use of medical, mental health, forensic, criminal justice, and social services, and decreased relational and occupational functioning.

Social support, in the form of both emotional support and tangible support, can directly lead to positive outcomes among survivors. Emotional support constitutes showing care or concern, and tangible support represents the provision of information or resources to help survivors navigate their situation. Both of these types of support have the potential to sway survivors toward positive assessments and active rather than avoidant coping, thus indirectly buffering the effect of initial abuse. A variety of empirical investigations establish social support as a significant

factor in the progression from sexual abuse victimization to positive psychological adjustment." For example, at the most basic level, family connectedness is associated with half the odds of suicide attempts among sexual abuse survivors.

Furthermore, social support from family and/or others erases the association between sexual assault and outcomes like loss of self, loss of childhood, depression, low self-concept and post-traumatic stress disorder. In this way, social support empowers the survivor and those close to him/her to positively affect their outcomes. Consequently, it also empowers professionals to assist survivors because it is related to two factors that can be modified through clinical intervention: appraisals and coping. Appraisals refer to an individual's understanding of an event (especially concerning the cause of the event). There is strong evidence that internal causal appraisals (i.e., self-blame) of sexual abuse are associated with negative symptoms and behavioural outcomes, including post-traumatic stress disorder (PTSD). Additionally, negative appraisals are connected to coping strategies that lead to undesirable outcomes. Thus, when social support leads to more positive appraisals, it can decrease the odds of negative outcomes associated with both appraisal and coping

### **4.3. Ethical Considerations**

#### ***Privacy of the Victim***

The victim's privacy is one of the most important ethical concerns in the case of a drug-facilitated sexual assault. The victims often have to face difficulties in their lives not only caused by the traumas they endured during the assault but also burdened to endure the public judgement and social stigmas. Confidentiality in legal and medical contexts must be done in private. Violating a victim's privacy may result in

reliving their traumas and possible withdrawal from seeking help. Survivor-centred action must be taken that ensures anonymity and privacy of the victims by developing necessary frameworks in the judicial system.

### ***Victim's View of the Judicial System and Reporting***

Reporting a drug-facilitated sexual assault case might feel uncomfortable because of the disturbing nature of the crime. Victims often have trouble remembering the memories of the incident, having only small recollection of details, sometimes none. This can cause authorities to doubt or disbelieve the victim, putting the victim in an unfair position which can lead to discouraging victims to cooperate and reporting similar crimes. In addition, there have been cases where police officers take advantage of victims by reaching out or harassing the victims with the personal information they give while reporting. Cases like these might cause the survivor to hesitate reporting. Thus, the judicial system should be inspected and improved constantly and a system that ensures the wellbeing of victims must be established.

### ***Criminal Process After the Incident***

When taking juridical action, in the investigation stage and trial process, many victims relive their traumas from the assault while being asked questions that feel offensive and troubling by police or court. It should be the criminal justice system's priority to make the process as sensitive and victim oriented as possible, making sure it does not cause the survivor any additional harm. The professionals that look into DFSA cases must be well trained, protecting the victim's psychological state while making sure the legal process is certain.

### ***Society's Reception***

DFSA can affect how an individual is perceived by society. In many societies, victims experience victim blaming, social stigma and judgement. It is crucial for societies to lean towards a victim centred, empathetic approach with the understanding of the non-consensual nature of the crime, than a judgemental one. One of the ways to increase public support is through international and local awareness campaigns, educating the public and encouraging community involvement in order to make victims feel safe.

Moreover, it is important to note that the topics which will be debated upon in the committee such as sexual assault, rape and drugs are extremely sensitive topics. The delegates must be aware that regardless of their allocated country's policy, their speeches must be mindful of statements that can trigger an individual throughout the discussions.

## 5. MEMBER STATES' ROLE IN DRUG-FACILITATED SEXUAL ABUSE

Bearing in mind the devious nature of DFSA, where the offender often operates in secret while leaving the victims in a condition which they may not even be aware of until hours or days later, it is important for member states to have a survivor-oriented and preventative approach.

Member states are in a powerful position to make significant changes and reforms as they are the lead contributors to the national law and policy. Their primary roles are mainly focused on taking legislative action, making legal reforms, public education and raising awareness, international cooperation, and victim-focused support systems.

### ***Strengthening Legal Frameworks***

In efforts to eliminate DFSA, the necessity of a strong and comprehensive legal framework is undeniable. Most legal frameworks around the world still continue to not recognize DFSA as an offense, which usually results in injustice for the victims. Therefore, member states must:

*Criminalize DFSA directly:* Laws should clearly define drug-facilitated sexual assault as a specific type of sexual offence, differentiating it from other types of SA and pointing up the non-consensual nature due to incapacitation caused by drugs.

*Create new consent laws:* Consent should be legally considered invalid when a person is under the influence of drugs or alcohol, even if the substances were taken

voluntarily. This holds the perpetrators accountable while relieving the victims of some of the burden.

*Introduce severe penalties:* To reflect the premeditated and abusive nature of the offense, sentences should be harsher when drug or alcohol use is proven.

*Protect survivor privacy:* Legal reforms should be made in order to protect the victim's anonymity, helping to prevent any further trauma during investigation.

### ***Institutional Reform and Law Enforcement***

Laws are important; however, the actual implementation is critical. In DFSA cases, it is often incredibly complicated to investigate due to victims' memory loss, disappearance of evidence and social judgment. Member states must:

*Train law enforcement professionals:* Police officers, prosecutors, forensic and health care workers require training on how to answer DFSA cases efficiently and the necessary procedures to do with certainty and precision.

*Develop DFSA protocols:* Police departments need special protocols and procedures to respond appropriately to DFSA cases including procedures for obtaining and maintaining necessary forensic samples.

*Improve forensic labs:* Modern labs need to have advanced tools and materials to test for drugs like GHB, Rohypnol, and Ketamine, which often known as date-rape drugs. These drugs break down quickly in the body and they are hard to detect after some time has passed.

## ***Education and Public Awareness***

Education and public awareness are crucial in preventing DFSA. Member states should commit to raising awareness, providing knowledge about DFSA, and encouraging individuals to intervene when they witness risky situations that could potentially lead to these types of incidents. Therefore, member states must:

*Implement health campaigns:* These should educate the public about the dangers of DFSA, how to spot signs of drink spiking, and where to find help. These campaigns should focus on reaching young people, college students, and those who frequently visit nightlife spots like bars and nightclubs.

*Include consent teachings in education:* School programs should include thorough education that covers consent, healthy relationships, the importance of building respectful interactions, communicating their boundaries and respecting those of other people.

*Cooperate with nightlife spots:* Member states should collaborate with bars and nightclubs to ensure people's safety by providing anti-drug-spiking kits, training their staff, encouraging using technological safety equipment and apps and creating safe environments.

## ***Survivor-Centred Support Systems***

Victims of DFSA often face difficulties like trauma, memory loss, confusion, feelings of shame and legal challenges from the assault. Member states must have a victim-centred approach such as:



*Establishing Sexual Assault Referral Centres (SARCs):* These centres should provide a support system that combines forensic medical examination, psychological support and legal assistance for the survivors of the assault.

*Ensuring availability to emergency services:* Crisis hotlines, emergency shelters and services must all be accessible 24/7.

*Offering long-term therapy:* DFSA victims are more likely to experience PTSD (Post-Traumatic Stress Disorder), anxiety, substance abuse and suicidal tendencies. National health services must have sufficient funding to provide long-term trauma-sensitive mental health care.

*Creating financial support systems:* After an assault, many victims face issues such as job loss, housing problems and legal costs due to investigations and trials. Member states should guarantee the survivors well-being and financial stability by establishing funds or welfare initiatives.

## 6. INTERNATIONAL COOPERATION AND NGO'S

International organizations and non-governmental organizations play a critical role in combating DFSA not only by advocacy but also giving the required support to the victims. It is an issue that transcends beyond national borders which can interrelate with crimes such as human trafficking, drug trafficking and digital exploitation. Understanding that no state can combat these issues alone is important. Member states must be in full cooperation with each other for the purpose of preventing these assaults from reoccurring.

Promoting data sharing and doing research have a major role in combating DFSA. Regional platforms like the European Union and African Union and international platforms like the United Nations should be in contact with governments and allow for sharing of new information and legal frameworks. Member states should endorse conventions such as the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence as known as the Istanbul Convention or related UN Conventions in order to uphold national and international standards. Collaborating and reaching out to civil and nongovernmental organizations like women's rights organizations, survivor networks, and youth organizations can improve public engagement and accountability. In terms of security, border control has a critical place. Border controls must be strengthened, and internet surveillance must be in control. States must regulate and improve their laws to combat illegal networks that coordinate drug trafficking.

## 7. QUESTIONS TO BE ADDRESSED

- What are the main causes of drug-facilitated sexual assault?
- How can women be made aware that they are DFSA victims in domestic or social environments?
- What steps can member states implement to improve DFSA detection and prevention, especially in private settings like houses, parties, and nightclubs?
- In order to strengthen the jurisdiction system for DFSA crimes, what international recommendations or legal amendments are required?
- How may DFSA be avoided or traced using technology?
- What steps can be taken to increase public awareness of DFSA?
- What kind of support systems should be established or strengthened to help the physical, mental, and legal recovery of DFSA victims?
- While preventing DFSA and ensuring the safety of survivors, what role do international organizations, civil society, and NGOs play?

## 8. FURTHER READING

- <https://youtu.be/isQPCow48LY?si=KEj9O8-LPo8mjzwo>
- <https://www.tandfonline.com/doi/epdf/10.1080/20008198.2022.2057165?needAccess=true>
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