

EXAMINATION OPTIONS AFTER SEXUAL ASSAULT: DO SURVIVORS HAVE TO REPORT?

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Some of this information is derived from the materials created from the webinar: Models of Compliance for Sexual Assault Medical Forensic Examinations by Joanne Archambault, Tori Camp and Kim Day

#### LEARNING OBJECTIVES

- Identify the key requirements from VAWA 2005 that apply to sexual assault examinations
- Explore strategies to implement examination options for victims
- Provide some practical implementation strategies for communities to ensure that responding providers are supporting victim options for exams.

#### VAWA - EXAM ACCESS & PAYMENT VAWA 2005 VAWA 2013

## Nothing in this section shall be construed to permit a State, Indian tribal government, or territorial government to require a victim of sexual assault to participate in the criminal justice system or cooperate with law enforcement in order to be provided with a forensic medical exam, reimbursement for charges incurred on account of such an exam, or both."

- A State, Indian tribal government, or unit of local government shall not be entitled to funds under this subchapter unless the State, Indian tribal government, unit of local government, or another governmental entity—
- (A) incurs the full out-of-pocket cost of forensic medical exams described in subsection (b) for victims of sexual assault; and
- 42 USCA S. 3796gg-4 (d) (1)

- (B) coordinates with health care providers in the region to notify victims of sexual assault of the availability of rape exams at no cost to the victims.

section 2010 (42 U.S.C. 3796gg-4)





#### SO WHAT DOES THIS MEAN??

The victim drives the process- IF THEY REQUEST AN EXAM, they should be provided an exam without having to 'cooperate with law enforcement'



#### **REPORTING OPTIONS**



- Anonymous reporting
- Confidential/"Jane Doe" reporting
- Medical reporting

#### ANONYMOUS REPORTING

- Information may be provided to police about the sexual assault WITHOUT giving identifying information about the victim
- Law enforcement will not conduct an investigation unless the victim later comes forward to report
- Provides information to law enforcement that might help link crimes or provide statistics for other uses

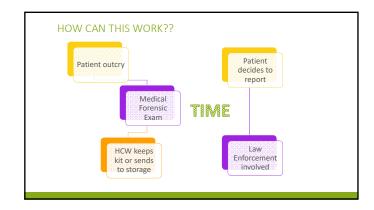
#### CONFIDENTIAL OR "JANE DOE" REPORTING

- Some jurisdictions have laws allowing victims to use a pseudonym (false name) on all legal and medical documents associated with the sexual assault
- Other jurisdictions allow victims to request that their name and other identifying information not be available in any public records
- Victim identity will be known to the hospital/forensic examiner and recorded on their documents
- The pseudonym is used in any public records

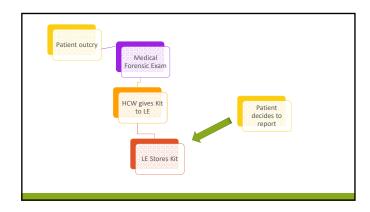
#### THIRD PARTY REPORT (WHERE MANDATORY REPORTING APPLIES)

- Report made by someone other than the victim who is mandated by law to report
- May or may not identify victim by name- depending upon mandatory reporting law
- Could become crime or informational report depending upon information given- the procedures for reporting and the information required are outlined in the law.
- Some places have these types of systems in place that may go through another system (ie; rape crisis center, hotline or other)

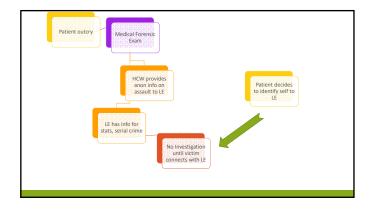
#### HOW CAN THIS WORK?

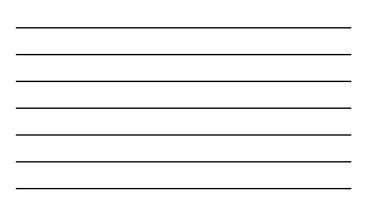


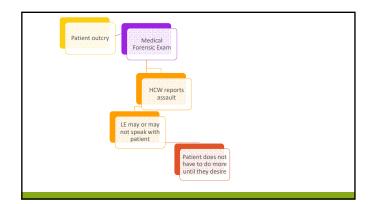


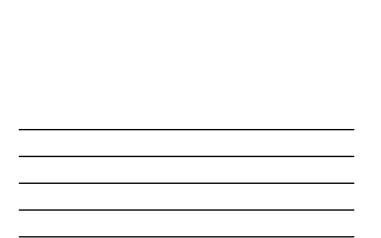












# WHAT HAPPENS WITH THE KIT?

#### CHALLENGES FOR THIS PROCESS LAW/POLICIES

- Jurisdictional differences
- Legal issues
- Worries about moving forward on cases where there has been delay in report
- Lack of statewide or jurisdictional payment structures can cause conflict
- Tribal protocol does not take victim options into account

#### COMMON CHALLENGES

- Perception that the process has been set up without involvement of all parties (ie: law enforcement is seen as a storage facility or transporter only)
- · Fear that advocates and healthcare will discourage victims from reporting
- Fear that victims will not get the correct information on their options
- Fear that large numbers of victims will come forward with this option, overwhelming healthcare and advocacy
- Fear that there will be no way to prosecute cases where the victim has decided to wait to report
- Fear that victims will believe that when they decide to report that the case will
  automatically move forward
- The belief that if there is DNA evidence it will be submitted to CODIS

#### HOW CAN WE MAKE THIS WORK?

- Review your current procedures and make sure they allow the victim options
- Meet with your SART, CCRT, MDT to discuss potential ways to facilitate this process
- Seek resources to assist with this: <u>www.safeta.org</u> and <u>www.evawintl.org</u>





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