



Medical Advocacy

How to support survivors access medical care...

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Learning Objectives

- ▶ I can describe the role of an advocate to provide advocacy in a variety of medical settings
- ▶ I understand the importance of access to comprehensive reproductive health services for survivors, including CCRV
- ▶ I am able to assess the medical needs of survivors and make appropriate referrals

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What Advocates Need To Know

<https://www.wcasa.org/what-we-do/systems/medicalreproductive-health>

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Medical Advocacy: *What is medical advocacy?*



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Medical Advocacy: *All victims need...*

- ▶ Medically accurate information
- ▶ All the available options for care
- ▶ Restoration of control and decision making
- ▶ Attention to physical and medical concerns
- ▶ Support during exam
- ▶ Post-exam support



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Medical Advocacy: *Important Details...*

- ▶ Time since the assault
- ▶ Type of assault
- ▶ Medical needs
- ▶ Age of survivor
- ▶ Wishes of the survivor



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Building Networks



1. General Health
2. Acute Sexual Assault
3. Sexual Assault within context of IPV/DV
4. Ongoing Health Care Needs
5. Past Trauma/ACE

http://www.wcasa.org/file_open.php?id=1553



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1. General Health Assessment

To be asked during all intakes

- ▶ Do you have any immediate health care needs or concerns?
- ▶ Do you have any immediate concerns related to your health, as a result of the incident?

-If yes: Ask appropriate follow-up questions to assess needs & make referrals



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2. Acute SA Assessment

To be asked when history indicates "recent" sexual assault

- ▶ You have options in seeking medical care and having a forensic examination. Let's take some time to discuss all of them.



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Options: Medical – Forensic – Reporting

OPTION A:

- ▶ M: Decline
- ▶ F: Decline
- ▶ R: Decline

OPTION B:

- ▶ M: Request
- ▶ F: Decline
- ▶ R: Decline

OPTION C:

- ▶ M: Request
- ▶ F: Request
- ▶ R: Decline

OPTION D:

- ▶ M: Request
- ▶ F: Request
- ▶ R: Request

Your role is to offer the options & support whatever decision the survivor makes



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Option C

OPTION C:

- ▶ M: Request
- ▶ F: Request
- ▶ R: Decline

- ▶ Forensic evidence can be collected & stored for up to 10 years – don't need to report to law enforcement



FOR MORE INFORMATION:
WCASA-DOJ Webinar
<https://youtu.be/gsz6lQnyYM>



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3. IPV Assessment

To be used in incidents of Intimate Partner Sexual Violence

- ▶ Has your partner destroyed or tampered with your birth control, refused to use birth control or prevented you from using it?
- ▶ Has your partner forced you to become pregnant when you didn't want to or to terminate a pregnancy that you didn't want to?
- ▶ Does your partner make you have sex when you don't want to? Or are you afraid to say no when you don't want to have sex?



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Medical Advocacy

Before – During – After



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After An Assault: Seeking Medical Care



https://x3.us-east-2.amazonaws.com/wcasa/old-website-resources/After-An-Assault_Seeking-Medical-Care_InfoSheet2018.pdf

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Medical Advocacy: BEFORE

- ▶ Get to know the hospital – building and staff
- ▶ Get to know other medical providers in community – Family Planning/Reproductive Health
- ▶ Develop process for accessing interpreter services
- ▶ Offer training to staff on role of advocacy
- ▶ Learn about hospital procedures, including SANE
- ▶ Familiarize yourself with community protocols/MOUs



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Medical Advocacy: DURING

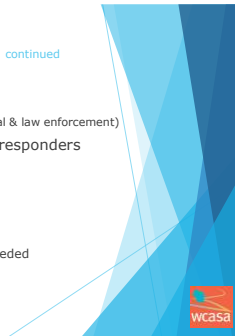
- ▶ Introduce yourself to staff
- ▶ Introduce yourself to victim
- ▶ Meet family/friends; call secondary advocate
- ▶ Ask about any special needs
- ▶ Discuss medical & reporting options



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Medical Advocacy: DURING continued

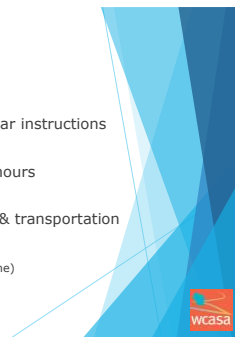
- ▶ Provide support during interviews (medical & law enforcement)
- ▶ Advocate in best interest of victim with responders
- ▶ Provide support during exam
 - ▶ Offer calming techniques
 - ▶ Advocate for the victim's needs/wishes
 - ▶ Explain process as you go along
 - ▶ Ask questions of SANE/medical staff, if needed



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Medical Advocacy: AFTER

- ▶ Make sure the victim has been given clear instructions
- ▶ Provide clothing, if needed
- ▶ Ask permission to follow-up in next 48 hours
- ▶ Provide information about services
- ▶ Make sure they have a safe place to go & transportation
- ▶ Explore support systems/safety plan
- ▶ Support filing CVC paperwork (more to come)



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Medical Advocacy

Forensic Examinations & Payment



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Forensic Exams



<https://www.youtube.com/watch?v=NoZr6fs5-64&feature=youtu.be>

National SANE Resources:
<http://www.safeta.org/285>
<http://www.forensicnurses.org/>

Wisconsin SANE Resources:
<https://sane.doj.wi.gov/>



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Forensic Exam Payment

Crime Victims Comp


- ▶ Crime reported in 5 days
- ▶ Cooperate with LE
- ▶ Claim filed in 1 year
- ▶ Payer of last resort

<https://www.doj.state.wi.us/ocvs/compensation/crime-victim-compensation-program-compensation-your-financial-losses>

SAFE Fund

- ▶ Don't want to report to LE
- ▶ Don't cooperate with LE
- ▶ Don't want to bill insurance
- ▶ Only covers exam costs

<https://www.doj.state.wi.us/ocvs/not-crime-victim/sexual-assault-forensic-exam>



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Important Considerations



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Confidentiality

Important Considerations

- ▶ Explain confidentiality to the victim (*more to come during Legal Advocacy section*)
- ▶ Tell the victim they can ask for one-on-one time with you at any point of the interview/exam
- ▶ Be aware of your surroundings; avoid conversations in public areas with the victim or responders



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Sensitivity/Privacy

Important Considerations

- ▶ Forensic/Medical exam is a very intimate setting to provide advocacy
- ▶ Be sensitive to positioning during the exam – like where to stand; where you are looking; etc.
- ▶ Let the survivor decide who will be in the room during the exam; offer secondary advocate for family/friends, if present



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Reproductive Choice/Access

Important Considerations

- ▶ It is important that all survivors have the full range of medical options after an assault
- ▶ It is not your role to share your beliefs or to pass judgment; also be prepared to challenge attitudes related to choice/access
- ▶ Bodily autonomy is critically important in SA and applies to the decisions survivors make about their body



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Reproductive Choice/Access

Important Considerations

- ▶ 16% of 18 million survivors surveyed reported having experienced a rape-related pregnancy in their lifetime
- ▶ More than ¾ of women reported that their perpetrator was a current or former intimate partner
 - ▶ 30% also experienced some form of reproductive coercion from the same partner

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6357953/>



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Reproductive Choice/Access

Important Considerations

State-Funded Clinics

- ▶ State-funded FP/RH clinics are restricted by WI Statute 253.07, which states that they are not funded to perform or provide referral for abortion

Planned Parenthood

- ▶ Important to also know where your nearest Planned Parenthood clinic is, for survivors needing information or referral for abortion services

- ▶ 1-800-230-7526
- ▶ <https://www.plannedparenthood.org/health-center/WI>

<https://docs.legis.wisconsin.gov/statutes/statutes/253/07/1/a>



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CCRV Important Considerations

Compassionate Care for Rape Victims (WI Act 102)

- Requires medically and factually accurate oral and written information about the use and effectiveness of emergency contraception (EC) to all female sexual assault victims of reproductive potential who present in the emergency room
- Requires on-site provision of first dose and all subsequent doses (if applicable) of EC to female victims who choose to take it

CCRV Toolkit:
<http://www.supportwomenshealth.org/upload/2/10/5/4/20541726/ccrv-2015-toolkit.pdf>



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Emergency Contraception (EC) Important Considerations

- EC is a safe and effective method of pregnancy prevention
- It is a high dose of ordinary birth control pills
- Can prevent pregnancy when taken within 5 days (120 hours)

<https://www.plannedparenthood.org/learn/morning-after-pill-emergency-contraception>



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What do you do? Important Considerations

- What do you do if a doctor/hospital is refusing to provide emergency contraception?



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Crisis Pregnancy Centers

Important Considerations

- ▶ Fake health-care clinics that lie to, shame and intentionally mislead women about their reproductive-health-care options to block them from accessing abortion care

<https://www.plannedparenthood.org/learn/pregnancy/crisis-pregnancy-centers>
<https://www.prochoiceamerica.org/issue/crisis-pregnancy-centers/>



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Working with Minors

Important Considerations

- ▶ Be sure to carefully inform minors about mandatory reporting guidelines for medical providers when making referrals
(more to come during Legal Advocacy section)
- ▶ Minors deserve the same victim-centered response & authority to make decisions
- ▶ Use age-appropriate language, while avoiding adultism (especially with teens)



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Marginalized Communities

Important Considerations

- ▶ It isn't uncommon for individuals to have mistrust or fear of system intervention
- ▶ Don't make assumptions
- ▶ If you don't know, it is okay to ask (as long as the information is needed to provide services)



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LGBTQ

Important Considerations

- ▶ Don't make assumptions about gender or orientation
- ▶ If you don't know, it is okay to ask (as long as the information is needed to provide services)
- ▶ Don't be afraid to correct/educate responders who are not understanding



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Dealing with Conflict

Important Considerations

- ▶ Don't forget that your #1 job is the support and advocate for the needs of the survivor
- ▶ Your relationships with partners shouldn't influence your response
- ▶ Be clear about your role with all responders to prevent issues



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