

January 29, 2024

Senator Beebe-Center, Representative Salisbury, and Members of the Joint Standing Committee on Criminal Justice and Public Safety:

My name is Danielle Coutu, and I am a registered nurse, a state credentialed and board-certified sexual assault nurse examiner for pediatric, adolescent, and adult populations with five years of experience caring for victim/survivors as patients in Penobscot County. I've received specialized training and education in caring for victims of crime, with the focus on those who experience sexual assault and interpersonal violence. I have held the honor of bearing witness to personal accounts from patients following their rape.

I stand before you today in support of LD 2129, An Act to Establish a Statewide Sexual Assault Forensic Examination Kit Tracking System and Conduct an Inventory of Existing Forensic Examination Kits in the Possession of Law Enforcement.

Multiple interventions are available for the medical treatment of someone who has experienced sexual assault. This patient has multi-faceted needs, all of which should be provided within a framework that is person-centered and trauma informed. That means that the provision of care is a response which is grounded and guided in an understanding of the impact of trauma. Forensic nurses aim to reduce re-traumatization of individuals seeking medical forensic treatment: the full course of medical care is reviewed with the patient -- including the intent and purpose of each aspect -- and the patient gets to decide to pursue or decline that care within the medical forensic examination. Trauma informed care means systems must own a culture of supporting survivors and facilitating a person-centered response.

I hold fast to the initiative that there is opportunity for improvement of a particular intervention of medical forensic care: evidence collection via the Maine State Sex Crimes kit. Although the kit is somewhat trauma-informed in that in many cases, the patient is given a choice to remain anonymous or self-identify their evidence by reporting their assault to law enforcement, what's missing is that once the kit leaves the hospital, it takes time and work for the patient to receive updates about their kit. It is unfair to ask a patient to be okay with having unanswered questions about the status or whereabouts of their kit. It re-victimizes victim/survivors of sexual assault when kits are not tested. It is persistently a heavy conversation between patients and nurses as the nurse explains that for the majority, the journey of a kit stops at the evidence collection locker of their local law enforcement agency.

To pass LD 2129 signals that Maine supports survivors of sexual assault, understands the necessity that is improved person-centered processes, and that trauma-informed care must be present throughout these processes as the victim navigates such complexities following their assault.

Respectfully,

Danielle Coutu, RN, SANE-A, SANE-P, ME-SAFE-A, ME-SAFE-P