Cambria County Sexual Assault Protocol

and Anonymous Reporting of Sexual Assault Protocol

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Acknowledgements

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Many individuals contributed their skills and expertise to the development of this protocol. We are grateful to all of the women and men who gave their time and energy to attend committee meetings and review drafts.

Their efforts greatly enhanced the quality of this final product.

We would like to thank the following organizations for answering questions we had while developing this protocol, including Pennsylvania Coalition Against Rape, Pennsylvania Coalition Against Domestic Violence, End Violence Against Women International, the State Police Crime Lab at Greensburg, York County SANE Program and the Pennsylvania Commission on Crime and Delinquency.

Thank you to all of the individuals and organizations who support Cambria County's efforts to improve the services available to individuals impacted by the crime of sexual assault.

Statement of Purpose

Sexual assault is a crime of violence against a person's body and will. Sex offenders will use psychological and physical aggression to victimize, often threatening a victim's sense of privacy, safety and well-being. Sexual assault can result in physical trauma and significant mental anguish and suffering for years after the assault.

Yet less than one third of all sexual assaults are ever reported to law enforcement.

Victims may be reluctant to report and to seek medical attention for a variety of reasons. For example, victims may blame themselves for the sexual assault and feel embarrassed. They may fear their assailants or worry about whether they will be believed. A victim may also lack easy access to services. Those who have access to services may perceive the investigation and medical forensic examination as yet another violation because of its extensive nature in the immediate aftermath of the assault. Rather than seek assistance, a sexual assault victim may simply want to go somewhere safe to clean up and forget the assault ever happened.

The first contact after a sexual assault is critical to the victim's recovery.

Responders at every point of contact can dramatically impact the victim's emotional well-being and ability to accept and respond positively to continued investigative efforts. Sexual assault investigations must focus on the medical care of the victim first and the investigation second.

It is the expectation of our community that all sexual assault victims will be treated with respect and appropriate attention will be given to their emotional and physical needs, regardless of their decision whether or not to participate in the criminal justice process.

It is also the expectation of the community that:

- Investigations will be based on facts presented.
- Interviewers will use techniques specially designed for sexual assault cases.
- Evidence will be properly identified, documented, sensitively collected and preserved.
- Law Enforcement Officers, Victim Advocates, and SANEs will work closely as a team.
- Efforts will be directed toward the respectful and sensitive treatment of victims and successful investigation and prosecution of sex offenders.

Our community understands that every effort made to relieve a victim's feelings of shame and/or self-blame, to regain a sense of control of their lives, and to ensure that all victims are treated professionally and with dignity, will enable victims to provide the clearest and most thorough information about the crime.

It is our belief that this protocol will assist Cambria County responders to simultaneously address the immediate health care and support needs of a victim and the future needs of the criminal justice system in the most competent, compassionate and effective manner possible.

This protocol was developed with input from the Cambria County Office of the District Attorney, Johnstown Police Department and other law enforcement agencies across the county, The Women's Help Center, Victim Services, Inc., Conemaugh Memorial Medical Center, and the Pennsylvania State Police Crime Lab at Greensburg.

Specifically, this protocol has the following goals:

- 1. Facilitate a countywide coordinated community response to sexual violence and standardize the quality of care, evidence collection and documentation as supported by the *Violence Against Women Act of 2005.* Such a response can help victims gain access to comprehensive immediate care, minimize trauma, and encourage use of community resources.
- 2. Address the needs of victims while promoting the criminal justice system response. Stabilizing, treating, and engaging the victim as an essential partner in the criminal investigation are central aspects of this protocol. It is for this reason that our protocol includes an option of <u>Anonymous Reporting</u>, giving victims, <u>18 years of age and</u> <u>older</u>, needed time to decide if and when they are ready to engage in the criminal justice process. The objective is to promote better and more victim-centered care, support, and evidence collection and documentation, in order to increase reporting and ultimately hold more offenders accountable.
- 3. Delineate the separate roles and responsibilities of responders and establish procedures for interagency coordination and collaboration, thus strengthening relationships between agencies and creating objective uniform standards that will improve overall victim care, and investigation and prosecution of sexual assault cases.

Guiding Principles

Sexual assault has a devastating and long-term impact on individuals from all walks of life. All members of society are vulnerable to this crime, regardless of race, age, gender or social standing.

When sexual assault does occur, victims deserve a coordinated, competent and compassionate response from the community. For individuals who experience this horrendous crime, having a positive experience with the criminal justice system, medical professionals, and victim advocates can contribute greatly to their overall healing.

This protocol is guided by the following key principles that support a victim-centered response to the crime of sexual assault:

- Recognition that responders at every level play a significant role in both the victim's ability to cope with the emotional and psychological after effects of the crime and the decision to participate in the investigation;
- Awareness that a victim's acute distress may create an unwillingness or psychological inability to assist the criminal justice system;
- Understanding that providing victims with information about available resources, and of the possible outcomes of choosing one option over another, will help a victim make informed decisions and will assist in their healing;
- Respect for the right of victims <u>18 years of age and older</u>, to make the choice <u>not</u> to participate or to delay participating in the criminal justice system.

A Victim-Centered, Trauma-Informed and Offender-Focused Response

Above all else, a collaborative response to sexual assault must be victim-centered.

This means that responders at every level recognize that they are accountable to the victim. This is particularly important since one reason victims give for not reporting a sexual assault is the fear of not being believed. It is important to the safety of the entire community that victims regard reporting to Law Enforcement and participating in the criminal justice system a safe and viable option.

It is also crucial that every responder in every discipline is informed about the effect of trauma on an individual.

Trauma can affect an individual's memory and ability to give detailed information. For all responders, this means being educated about the effect of trauma on an individual and treating each victim with consideration, professionalism, and compassion.

Common reported reactions that may occur during an assault, immediately following an assault, and for a considerable time period after the assault may include, but are not limited to:

- Anger
- Anxiety
- Hyper-vigilance
- Fear for the safety of self or loved ones
- Preoccupation with circumstances surrounding the assault
- Flashbacks in which the individual mentally re-experiences the event
- Physical symptoms including muscle aches, headaches, fatigue
- Disbelief at what has happened, feeling numb
- Problems with memory (especially concerning the traumatic event)
- A misperception of time
- Increased startle response
- Misplaced feelings of guilt, shame and/or self doubt

Responders must also be offender-focused in response to sexual assault.

An offender-focused response acknowledges that offenders purposefully, knowingly and intentionally target victims whom they believe they can successfully assault. Responders must recognize that offenders often choose victims based on the victim's accessibility, vulnerability and a perception by the perpetrator that the victim's report of the attack will lack credibility. This is seen by the offender as an assurance of their ability to escape accountability for their offense(s).

Offenders hope that community responders will participate in victim blaming, not educate themselves about offenders, and not have a solid understanding of the effects of trauma. All of these can combine to allow the offender to continue to re-offend.

If Cambria County's collaborative response to the crime of sexual assault can balance the needs of the victim with the expectations of the criminal justice system, while maintaining focus on holding offenders accountable, the goals of a victim-centered response will be met.

Initiating a Collaborative Response The Sexual Assault Response Team/SART Approach

The team approach to sexual assault seeks to lessen the traumatizing nature of the medical forensic evidence examination. Through coordination of the medical, support services and investigation process, SART works to reduce repeated and unnecessary questioning of the victim, to ensure the physical and psychological well-being of the victim, and to increase effective collection, documentation and preservation of evidence.

SART consists of a core team of responders:

- Law Enforcement Officer
- Sexual Assault Nurse Examiner
- Victim Advocate

This core team provides immediate collaborative response to adult victims of sexual assault.

The Primary Objectives of SART are:

- To provide victims with immediate advocacy and support during the medical examination and throughout the investigative and legal process.
- To provide victims with immediate and compassionate medical care and follow-up.
- To provide timely and professional forensic evidence collection, documentation and preservation and a responsive and thorough investigation by law enforcement.

It is as important for each responder to understand the specific role and responsibilities of each SART member, as it is to know each other's motivations. The goal is for responders at every level to call on each other for assistance and direction as well as to hold each other accountable on behalf of the victim.

Many sexual assault victims report the crime immediately to law enforcement. Reporting provides Cambria County's criminal justice system the opportunity to offer immediate protection to the victim, collect evidence from all crime scenes, prosecute if there is sufficient evidence and hold the offender accountable for crimes committed. Equally important, reporting gives law enforcement the chance to identify patterns of sexual violence in our county.

Some victims, however, are unsure, unwilling or unable to make an immediate decision about whether or not to participate in the criminal justice system in the traumatic aftermath of an assault. Any real or perceived pressure put on these victims to report immediately may in fact discourage future or continued involvement in the judicial system.

A countywide method for **Anonymous Reporting** provides for the collection, documentation and maintenance of time-sensitive evidence while allowing the victim time to recover, consider his/her options, or even arrange for safe accommodations and economic provisions in the case of intimate partner sexual violence/domestic violence.

Victims who receive compassionate support and appropriate care at the time of the exam are more likely to engage fully with law enforcement and prosecution in the future.

In June of 2009, a collaborative effort across Cambria County was initiated to create a countywide systemic response to sexual assault that closely follows the victim's process of trauma, disclosure and recovery.

Recognizing the importance of a victim-centered response, this interagency protocol establishes clear procedures to collect, document, maintain and track evidence from an **<u>adult</u>** <u>**victim**</u> of sexual assault who is unwilling or unable to participate in the criminal justice system at the time of the initial disclosure. If and when the victim is ready to convert to a standard reporting method, this crucial evidence may then be used in prosecution.

The **<u>Cambria County Sexual Assault Protocol</u>** mainly addresses the roles and responsibilities of responders <u>with regard to victims age 18 years and older</u>.

The protocol mainly addresses the following responders:

- Sexual Assault Nurse Examiners (SANE) and other health care providers
- Victim Advocates
- Law Enforcement Representatives

Each of these professions has a role in responding to and caring for patient/victims, investigating the crime, and/or holding offenders accountable. Together, these responders form the core Sexual Assault Response Team (SART) and respond to immediate disclosures of sexual assault.

Each responder should be able to explain to victims the roles of other team members.

A victim of sexual assault in Cambria County who is <u>age 18 years or older</u> has the option to speak with one, two, three or **none** of the SART members.

While this protocol addresses the role of the core SART team, it is important to recognize that responders at every level play a significant role in the recovery process of survivors of sexual assault and in helping to recover a sense of peace and security in the life of the survivor and the community at large.

The Role of the Law Enforcement Officer

Law Enforcement Agencies in Cambria County

The first contact after a sexual assault is critical to the victim's recovery.

Law Enforcement Officers are often the point of first contact for the victim. Responding officers can dramatically impact the victim's ability to accept and respond positively to continued investigative efforts. Sexual assault investigations must focus on the medical care of the victim first and the investigation second.

Officers should be aware that their actions as the first responder have a vital impact on the future psychological well-being of the victim. Every effort made to relieve victims' feelings of shame and/or self-blame, to regain a sense of control of their lives, and to ensure that all victims are treated professionally and with dignity, will enable victims to provide the clearest and most thorough information about the crime.

The role of an officer responding to sexual assault focuses on the following:

- protecting the safety and well-being of the victim;
- ensuring the victim receives proper medical attention;
- initiating a collaborative response;
- collecting and preserving evidence, including initial witness statements;
- identifying whether a crime has occurred; and
- conducting an investigation.

Initiating the Collaborative Response

When a victim presents to a responding officer and indicates that a sexual assault has occurred, the officer will initiate the multidisciplinary response/SART by *promptly* contacting Victim Services, Inc. at **<u>814-288-4961</u>** and will request that an on-call Advocate be dispatched.

Victim Services, Inc. should be contacted in every case of sexual assault whether or not a victim chooses to have a sexual assault exam.

The victim of sexual assault needs prophylaxis to prevent sexually transmitted infection and pregnancy. *The victim should always be referred to SANE for assessment and care.*

When a forensic examination is indicated, the responding officer should promptly contact the hospital Emergency Department and request that a SANE be dispatched. The responder can reach the SANE Program at Conemaugh Memorial Medical Center at <u>814-534-9101</u> and the SANE Program at Miners Medical Center at <u>814-247-3100</u>.

Role of Law Enforcement During the Forensic Exam

The Law Enforcement Officer may be present and participate with the SANE during the taking of the assault and forensic history. However, the Law Enforcement Officer will not be in the room during the taking of the medical history or during the medical forensic evidence examination.

Conducting an Initial Victim Statement Interview

The initial victim statement is typically taken upon first contact with the victim and law enforcement. The initial victim statement is the opportunity for law enforcement to obtain basic information and establish the location and elements of the crime. The Victim Advocate should be available to sit in on the initial victim statement if the victim chooses. The initial victim statement is **not** a comprehensive interview – the initial statement is used to assess safety and health needs, ascertain jurisdiction, identify and preserve sources of evidence and determine next steps.

Conducting a Comprehensive Interview/Assault History

If available, officers who have specific training in sexual assault interviews and investigations should perform the comprehensive interview with the victim.

The comprehensive interview should take place after the victim has had time to rest and recover from the medical forensic examination. In most cases, it is appropriate to postpone the interview at least one or two days. An Advocate should be present during the interview, if the victim consents. The Advocate and the Law Enforcement Officer should work together to minimize re-victimization during the interview process.

Victim interviews take time to complete. Law enforcement should allow ample time to conduct a thorough victim interview. The comfort and needs of the victim should be taken into consideration throughout the course of the interview process.

Law Enforcement Officers should consider that trauma, cultural differences, cognitive ability, fear, self-blame and other factors can influence the victim's ability to provide concise details about the assault. Law enforcement and the Advocate should work together to ensure the victim's comfort in order to facilitate the disclosure of as many relevant details as possible.

The purpose of the comprehensive interview is to develop a fuller picture of the circumstances of the sexual assault. The interview presents an opportunity for the victim to provide additional information she/he may not have remembered, may have been afraid or embarrassed to share, or may have suppressed immediately following the assault. It presents an opportunity for law enforcement to:

- Verify, clarify and expand on the initial interview;
- Confirm and establish the elements of the crime;
- Develop supporting details related to the circumstances surrounding the assault.

Law Enforcement continued

Victims may fear not being believed. A victim-centered approach to interviewing acknowledges these factors and attempts to make the victim comfortable by:

- Establishing a rapport before beginning the interview.
- Explaining the investigative process and why certain questions are necessary.
- Avoiding victim-blaming questions such as why did you? or why didn't you?
- Encouraging the victim to provide a comprehensive statement of the event from beginning to end – with only minimal interruption but with the understanding that follow up questions will be necessary for clarification
- Acknowledging the impact of trauma on the victim during the interview.

Reluctant and/or Recanting Victims

It is not uncommon for sexual assault victims to be reluctant about reporting to law enforcement and participating in the criminal justice system.

Victims who are reluctant often feel they have no other choice but to recant in an effort to disengage from the criminal justice system.

A victim centered approach by law enforcement recognizes the tremendous cost to a victim who proceeds with the criminal justice system and understands that recantation of one or more aspects of a prior statement doesn't necessarily mean false reporting.

Various influences affect a victim's willingness to participate and/or recant. Among those influences are:

- A victim's feeling of embarrassment, fear, and shame
- A victim wanting to put the assault behind them
- Anxiety over having to face the perpetrator in court
- Pressure from offender, friends, family or community
- Pressure from cultural and/or religious communities
- Concern or confusion about the likely outcome of a prosecution
- Concern that the victim will not be believed



In Cambria County, victims 18 years of age or older reporting sexual assault may choose not to interact with law enforcement. The medical forensic examination will be performed, if the patient consents to Anonymous Reporting. This method will provide for time-sensitive evidence collection and documentation without revealing identifying information to law enforcement. Please refer to Anonymous Reporting Protocol on **page 19** for more information.

The Role of the Victim Advocate

Victim Services, Inc. Women's Help Center, Inc.

The Victim Advocate provides essential support to victims of sexual assault and <u>must be</u> <u>called to each and every sexual assault investigation and prosecution</u>. They are trained to assess victim needs and to provide counseling, advocacy, information, referrals and support. Additionally, they serve as important liaisons with SANEs, law enforcement officers and prosecutors throughout the entire criminal justice process.

Victim advocates are an important resource for explaining victim's rights. They assess ongoing victim safety issues and provide referrals to medical, counseling and social service resources. Advocates assist prosecutors in identifying expert witnesses and supporting victims in court.

In Cambria County, Advocates from Victim Services, Inc. are on call 24 hours a day.

The role and responsibilities of the Victim Advocate are defined below.

- The Victim Advocate, <u>in coordination with the attending SANE</u>, will assess and accommodate the special needs of the patient/victim including but not limited to any needs relating to language or culture, physical or mental ability, age or gender.
- The Victim Advocate, <u>in coordination with the attending SANE</u>, will provide supportive, unbiased information concerning available options about emergency contraception, follow-up counseling, and reporting methods.
- □ The Victim Advocate will provide crisis intervention, support, and referrals to the patient/victim and to family and friends.
- The Victim Advocate will determine the need for safety planning and will assess whether the patient/victim is in need of food, clothing, shelter, transportation, and will access or assist in accessing services and/or resources.
- The Advocate will be present while the SANE conducts medical and forensic history, and the exam, if the patient consents.
- If time and situation permit, the Advocate will be present while the Officer conducts the initial victim statement, if the victim consents. If the initial victim statement is conducted in the field, the Advocate will be contacted as soon as the safety of the victim and others is ensured.
- The Advocate will be present while the Officer conducts the comprehensive interview, if the victim consents.

In the event that the patient/victim chooses the anonymous reporting method, the advocate will provide information, *in coordination with the attending SANE*, on evidence collection and documentation, evidence holding period and timeline, method for future contact, and how anonymous reporting may affect any possible future prosecution.

Victim Advocate continued

- In cases of Anonymous Reporting, three weeks prior to the end of the <u>two (2) year</u> <u>evidence-holding period</u>, the SANE Program will contact the victim, if consent was given, to remind the victim of the evidence holding period and timeline.
- In the event that a victim who has reported anonymously chooses to convert to a standard report by contacting Law Enforcement or another agency and indicates that she/he has previously had evidence collected anonymously, the responder <u>must immediately contact or instruct the victim to contact Victim Services, Inc. or the SANE Program at the medical facility where the exam was completed.</u>
- If the victim chooses to contact Victim Services, the Advocate will then provide the victim with support and assist the victim in contacting the SANE program. The SANE program will provide the victim who is converting from an Anonymous Report to a Standard Report with necessary information regarding the kit storage or will contact Johnstown Police Department (JPD) directly and relay the information, such as the SANE number from the front of the kit, the name of the attending SANE, the name of the responding officer who picked up the kit, and the date and time of kit retrieval.
- JPD will then link that information to the <u>Anonymous Forensic Sexual Assault</u> <u>Evidence Kit</u> stored in the evidence room and to the informational police report using the informational report incident number and the SANE number on the front of the evidence kit provided to them by the SANE program.
- JPD will then determine the jurisdiction where the assault took place and how the victim will report to the appropriate law enforcement agency.
- □ JPD will arrange for transfer of evidence to the appropriate jurisdiction.
- The jurisdictional Law Enforcement Agency will proceed with the investigation as in a standard report.

The Role of the Sexual Assault Nurse Examiner (SANE)

Conemaugh Memorial Medical Center Miners Medical Center

The Sexual Assault Nurse Examiner (SANE) is an advanced trained nurse who serves the patient/victim by providing prompt, objective, compassionate and comprehensive medical treatment and forensic evaluation within a coordinated community response.

The victim of sexual assault needs prophylaxis to prevent sexually transmitted infection and pregnancy, and may need other medical attention. <u>The victim should always be referred to</u> <u>a SANE for assessment and care.</u>

The SANE examination of the victim of sexual assault may assist with the investigation and prosecution of the case but is foremost intended to assist the survivor of sexual assault in her/his recovery. The physical and psychological well-being of the sexual assault patient is always given precedence over forensic needs.

Assessment, examination evidence collection, and documentation should be performed by trained SANEs. The examination and evidence collection of the victim which follows a sexual assault is complicated and time consuming. If done by healthcare providers who have a limited understanding of the many needs and concerns of sexual assault victims, it is sometimes as intrusive, invasive and as traumatizing as the assault.

The collection of evidence and the documentation of injury cannot be done in retrospect. If the evidence collection and documentation is done improperly or the chain of custody not properly maintained, the result may be a thwarted investigation and unsatisfactory prosecution. Expertise is also important to establish credibility when testifying in a court of law.

A SANE does not provide an opinion on the merits of the case, although a SANE will conduct and document each examination knowing that fact and/or expert testimony in court may ultimately be required.

Adult victims of sexual assault in Cambria County have the following reporting options:

- Reporting the assault to law enforcement and having evidence collected.
- Choosing NOT to report and NOT having evidence collected.
- Choosing to have evidence collected anonymously and stored for two (2) years.

Whatever decision is made by the victim should be supported by the SANE. The victim who decides not to report or who is undecided should be assessed and treated in the same manner as the victim who is reporting.

In Cambria County, on call SANES are available 24 hours a day.

SANE continued

The roles and responsibilities of a SANE are outlined below.

- A victim will often report sexual assault first to medical personnel. In the event that a patient indicates that there has been a sexual assault, hospital staff will immediately contact the on-call SANE. The SANE, or designated hospital staff will then contact Victim Services, Inc. immediately to dispatch a Victim Advocate to the medical facility.
- The SANE will first assess the patient/victim for acute medical needs and provide stabilization, treatment for acute injuries and/or consultation. At times, treatment of other injuries may be delayed to ensure that evidence is preserved.
- The SANE will conduct a physical medical and forensic examination in a supportive and objective manner in order to treat the patient and collect evidence according to the Commonwealth's forensic sexual assault examination protocols.
- The SANE, <u>in coordination with the Victim Advocate</u>, will provide supportive, unbiased information concerning available options about medical care, emergency contraception, follow-up counseling and reporting methods.
- In the event that the patient/victim chooses the anonymous reporting method, the attending SANE, *in coordination with the Victim Advocate*, will provide information on the evidence holding period and timeline, method for future contact if and when the patient/victim chooses to convert to the standard reporting method, and how anonymous reporting may affect any possible future prosecution.
- The SANE will conduct a medical history of the patient/victim. The medical interview provides information necessary to complete the subsequent physical examination. The SANE will allow the Advocate to be present, if the victim consents. The Law Enforcement Officer should never be present for the medical interview.
- The SANE will also conduct an assault history to guide the forensic examination, focusing on information about the assault, day and time of the assault, and characteristics of the assault such as penetration of any orifice, weapons, forms of violence and resulting injuries, the patient/victim's level of consciousness during the assault and whether the patient/victim has bathed, showered, douched, urinated, etc. since the assault. The SANE will allow the Officer and/or Advocate to be present, if the victim consents.
- The SANE will conduct the forensic examination and properly collect and document any evidence. The SANE will allow the Advocate to be present, if the victim consents. The Law Enforcement Officer should not be present for the forensic examination.
- □ If the victim consents, the SANE will photograph the patient/victim's injuries
- A SANE does not attempt to gather detailed investigative information such as the height or weight of the perpetrator, for example, but will document what is necessary to guide the forensic exam and treat the patient/victim.

- The SANE <u>coordinates with the Victim Advocate</u> to determine whether or not the victim is safe both physically and emotionally and will assist as needed in determining the need for safety planning.
- Upon completion of a standard medical forensic examination, the SANE will transfer the completed kit to the responding Law Enforcement Officer for transport.
- In the event of an <u>Anonymous Report</u> and upon completion of the medical forensic examination and after the patient/victim has left the hospital, the attending SANE will place the completed kit in the SANE evidence locker according to procedure.
- In the event of an Anonymous Report, SANEs at Conemaugh Medical Center will contact Johnstown Police Department (JPD) and ask that an officer be dispatched to retrieve a completed <u>Anonymous Forensic Sexual Assault Exam Kit.</u>
- In the event of an Anonymous Report, SANEs at Miner's Medical Center will contact the Cambria County Detective Bureau and ask that a detective be dispatched to retrieve a completed <u>Anonymous Forensic Sexual Assault Exam Kit.</u>
- The SANE will then give the <u>Anonymous Forensic Sexual Assault Exam Kit</u> to the responding officer or detective who will transport the kit to JPD's evidence room and log it in as evidence according to departmental procedure.
- Johnstown Police Department was chosen as the county's repository for <u>Anonymous</u> <u>Kits</u> because Conemaugh Memorial Medical Center, the county's largest emergency department, is in the jurisdiction of Johnstown Police Department.
- Three weeks prior to the end of the <u>two (2) year evidence-holding period</u>, the SANE Program will contact the victim, if consent was given, to remind the victim of the evidence holding period and timeline.
- If and when a victim chooses to convert to a standard method of reporting, the victim may contact either Victim Services, as advised at the time of the exam, or the victim may choose to contact the SANE Program, Law Enforcement, or some other agency.
- In the event that a victim who has reported anonymously chooses to convert to a standard report by contacting Law Enforcement or another agency and indicates that she/he has previously had evidence collected anonymously, the responder <u>must immediately contact or instruct the victim to contact Victim Services, Inc. or the SANE Program at the medical facility where the exam was completed.</u>
- If the victim chooses to contact Victim Services, the Advocate will then provide the victim with support and assist the victim in contacting the SANE program. The SANE program will provide the victim who is converting from an Anonymous Report to a Standard Report with necessary information regarding the kit storage or will contact Johnstown Police Department (JPD) directly and relay the information, such as the SANE number from the front of the kit, the name of the attending SANE, the name of the responding officer who picked up the kit, and the date and time of kit retrieval.

SANE continued

- JPD will then link that information to the <u>Anonymous Forensic Sexual Assault Kit</u> stored in the evidence room and to the informational police report.
- JPD will coordinate the information with SANE or Victim Services to determine the jurisdiction where the assault took place and how the victim will report to the proper law enforcement agency.

The Role of the Prosecutor

Office of the District Attorney of Cambria County

The District Attorney is the Chief Law Enforcement Officer for Cambria County. The primary responsibility of the District Attorney is to see that justice is accomplished within the framework of the United States Constitution, the Constitution of the Commonwealth of Pennsylvania and the laws of the Commonwealth.

In Cambria County, the District Attorney along with a staff of well-trained, highly qualified Assistant District Attorneys handle all criminal cases filed by local law enforcement officers including sexual assault cases.

The District Attorney is committed to ensuring the public safety and the safety of victims through effective and efficient prosecution of cases. It is the role of the prosecutor to lead victims through the criminal justice process and be their voice in the pursuit of justice, recognizing that every case and every victim is unique. It is very important to the District Attorney's Office to seek convictions that will hold offenders accountable for their actions, and to seek sentences that adequately punish the actor for the crime committed while at the same time protecting the constitutional and legal rights of the accused.

Prosecutors play a pivotal role in the outcome of sexual assault complaints with the most critical decision being the decision to prosecute or not prosecute after evaluating whether there is enough evidence to proceed in court.

If charges are filed, the victim is afforded many rights pursuant to the Victims Rights Act. The District Attorney's Office, with assistance from Victim Advocates, strives to keep the victim notified and informed on all developments in the case. The victim has the opportunity to appear and be heard in court proceedings and has a direct line of communication with prosecutors.

Although the ultimate decision of how the case will proceed rests within the sole discretion of the District Attorney, input from the victim is an important component in the decision-making process and carries considerable weight in determining the best course of action.

Victims should feel comfortable that prosecutors will explain the various stages of the court proceedings to them and prepare them to testify in court should it become necessary. Steps are taken to ensure that the victim is safe in the courtroom setting. Each victim presents with unique circumstances of victimization. The District Attorney's Office strives to listen to what each victim of sexual assault has to say, answer any questions and address any concerns each victim may have, and make the best possible decision on how to proceed on behalf of the victim.

Cambria County's team approach to prosecuting offenders best serves victims while promoting accountability and punishment for perpetrators of sexual abuse.

Dispatcher Protocol Checklist:

- □ Check safety of victim (weapons, injuries, direction of travel of suspect, etc.)
- □ Check special language access or needs.
- □ Confirms victim's safety and medical needs; activate Emergency Medical Services as needed.
- □ Seek suspect information, description, direction of travel, vehicle, etc.
- Ask if the victim has bathed, changed clothes, combed hair, brushed teeth, smoked, etc. If not, encourage them to wait until after the forensic exam has been completed, if possible.
- Dispatch an officer.
- □ Remain on line with victim until officer arrives on scene for all calls, even for delayed reports.

Responding Law Enforcement Officer Protocol Checklist:

- □ Re-evaluate safety of victim and any other person at potential risk.
- Activate Emergency Medical Services as needed.
- □ Identify crime.
- Establish jurisdiction.
- Preserve evidence/secure scene.
- Determine if offender is known and possible locations.
- □ Activate SART—Officer, SANE, Advocate.
- □ If the victim is a juvenile, contact CYS at 814-539-7454 or Child Abuse Hotline at 1-800-932-0313.
- □ If adult victim falls under mandated reporting, contact Adult Protective Services at 814-539-5595.
- Conduct initial victim statement (with Advocate present, when possible), if victim consents.
- Follow up with comprehensive interview in the following days with Advocate present, if victim consents.
- Determine need for search warrant and execute search warrant as needed.
- Conduct witness interviews including disclosure witnesses.
- Conduct initial suspect interview to obtain statement. Conduct interrogation at a later time.
- Promptly and thoroughly document case.
- □ Refer all preliminary field reports to the investigative unit or sergeant for review.
- Conduct comprehensive review of all documents, statements, etc. before sending case to DA.

SART Collaborative Protocol Checklist:

- Difficer, Advocate, SANE will work together to determine safety needs of victim.
- Difficer, Advocate, SANE will work together to determine special needs of victim.
- Difficer, Advocate, SANE will work together to provide victim with information on Victim Rights.
- Difficer will conduct initial victim statement with Advocate present, if victim consents.
- □ SANE will conduct forensic history with Officer and/or Advocate present, if victim consents.
- Officer will leave the room for medical history and forensic examination.
- Officer will conduct comprehensive victim interview with Advocate present, if victim consents.

Role of Law Enforcement with Regard to Anonymous Reporting

All Cambria County Law Enforcement Agencies

Law Enforcement Representatives (including patrol officers and investigators) respond to initial complaints, secure safety for the victim, arrange for transportation to and from the exam site as needed, interview the victim and witnesses, coordinate collection, documentation and delivery of evidence to designated labs or evidence facilities, investigate cases, apprehend suspects, and prepare reports for prosecutors.

In the case of **Anonymous Reporting** of Sexual Assault, the *initial* role of Law Enforcement is very different.

The majority of victims of sexual assault who receive medical care, initially present to law enforcement.¹ However, some victims first present at a medical facility or advocacy center. For a variety of reasons, many victims are reluctant to speak with law enforcement.

The goal of this protocol is to reach those victims, <u>age 18 years and older</u>, who might not otherwise receive medical attention because of their reluctance to report, and offer treatment, support, information and referrals, and in the process, with the victim's consent, gather critical and time sensitive evidence through a medical forensic exam.

The role and responsibilities of Law Enforcement in the case of Anonymous Reporting of Sexual Assault is defined below.

- In the event of an <u>Anonymous Report</u> in Cambria County, upon completion of the medical forensic examination and after the patient/victim has left the hospital,
 - the attending SANE at Conemaugh Medical Center will contact Johnstown Police Department (JPD)
 - the attending SANE at Miner's Medical Center will contact will contact the Cambria County Detective Bureau (CDB)
- The SANE will request an officer or detective to be dispatched to retrieve a completed <u>Anonymous Forensic Sexual Assault Exam Kit</u> to be taken to JPD Evidence Room.
- Johnstown Police Department (JPD) was chosen as the county's repository for these kits because Conemaugh Memorial Medical Center, the county's largest Emergency Department, is in the jurisdiction of Johnstown Police Department.
- An officer or detective will respond to the Emergency Department and ask to see the attending SANE or designated staff member. The SANE will then release the <u>Anonymous Forensic Sexual Assault Exam Kit</u> to the responding officer who will transport the kit to JPD's evidence room and log it in as evidence according to departmental procedure.

¹ US Department of Justice, Office of Violence Against Women, *A National Protocol for Sexual Assault Medical Forensic Examinations*, September 2004, page 8.

- The responding officer will prepare a routine informational police report and indicate in the report the SANE number from the front of the evidence kit, the name of the attending SANE, and the date and time of retrieval of the evidence. The incident number generated by JPD will be provided to the SANE for documentation on the SANE log.
- Law enforcement will not investigate this matter unless and until a standard report is initiated. An exception may be made at the discretion of the District Attorney on a case by case basis in high profile cases and/or serial cases or in the event public safety is at issue.
- The <u>Anonymous Forensic Sexual Assault Exam Kit</u> will remain in the evidence room for up to two (2) years unless the victim converts to a standard report before two (2) years. At the end of two (2) years, JPD will address the final disposition of the evidence according to departmental procedure.
- Three weeks prior to the end of the <u>two (2) year evidence-holding period</u>, the SANE Program will contact the victim, if consent was given, to remind the victim of the evidence holding period and timeline.
- If and when a victim chooses to convert to a standard method of reporting, the victim may contact either Victim Services, as advised at the time of the exam, or the victim may choose to contact the SANE Program, law enforcement, or some other agency.
- In the event that a victim who has reported anonymously chooses to convert to a standard report by contacting Law Enforcement or another agency and indicates that she/he has previously had evidence collected anonymously, the responder must immediately contact or instruct the victim to contact Victim Services or the SANE Program at the medical facility where the exam was completed.
- If the victim chooses to contact Victim Services, the Advocate will then provide the victim with support and assist the victim in contacting the SANE program. The SANE program will provide the victim who is converting from an Anonymous Report to a Standard Report with necessary information regarding the kit storage or will contact Johnstown Police Department (JPD) directly and relay the information, such as the SANE number from the front of the kit, the name of the attending SANE, the name of the responding officer who picked up the kit, and the date and time of kit retrieval.
- JPD will then link that information to the <u>Anonymous Forensic Sexual Assault Kit</u> stored in the evidence room and to the informational police report using the informational report incident number and the SANE number on the front of the evidence kit provided to them by the SANE program.
- JPD will determine the jurisdiction where the assault took place and how the victim will report to the proper law enforcement agency.

□ JPD will arrange for transfer of evidence to the proper jurisdiction. *Law Enforcement with Regard to Anonymous Reporting continued*

 The jurisdictional Law Enforcement Agency will proceed with the investigation as in a standard report.

Law Enforcement Protocol with Regard to Anonymous Reporting

Overview			
If an individual <u>18 years of age or older</u> , presents to the Emergency Department reporting sexual assault but is reluctant to speak with law enforcement, he/she will be offered the option of <u>Anonymous Reporting</u> . A consent form for the collection and documentation of evidence under <u>Anonymous Reporting</u> will be obtained by the SANE. The consent form will review benefits and challenges of Anonymous Reporting. The forensic medical examination, including the Forensic Sexual Assault Exam collection kit, will be performed.			
Upon completion of the exam, the attending SANE will contact either JPD (Conemaugh ER) or the County Detective Bureau (Miners ER) to dispatch an officer. The officer will transport the Anonymous Forensic Sexual Assault Exam kit to the JPD evidence room. No identifying information will be released to law enforcement at this time.			
The kit will be stored for two (2) years following the date of the forensic exam. During those two (2) years, the victim may decide that she/she would like to convert to a standard report. After two (2) years, if the victim has not issued a standard report, JPD will address the final disposition of the evidence according to procedure.			
Evidence:			
Upon completion of an <u>Anonymous Forensic Sexual Assault Exam</u> , and after the patient/victim has left the hospital, a SANE will contact JPD (Conemaugh ER) or the County Detectives (Miners ER) requesting that an officer be dispatched to retrieve an <u>Anonymous Forensic Sexual Assault Exam Kit</u> at the Emergency Department.			
 The responding officer will ask for the attending SANE (or designated staff member) and retrieve the <u>Anonymous Forensic Sexual Assault Exam Kit</u>. The kit box will be marked with a unique <u>SANE Number</u>. No other identifier will be provided. 			
The responding officer will transport the kit to <u>JPD's Evidence Room</u> and complete an informational incident report which will include the <u>SANE Number</u> from the kit box, the name of the attending SANE, and the date and time the kit was retrieved. The incident number will be provided to the SANE for documentation on the SANE log.			
 The kit will be stored in the JPD evidence room in an evidence cabinet. The kit will be stored for <u>two (2) years</u>. The informational report will not be destroyed. Three weeks prior to the end of the two (2) year period, the SANE Program will contact the victim, if consent was given, informing her/him of the three-week period remaining to report. 			
Decision to Prosecute:			
At anytime during the <u>two (2) year period</u> , if the victim decides to initiate a standard report, it is recommended that he/she first contact Victim Services, Inc. or the SANE Program at the facility where the exam was performed.			
Any entity contacted by a victim who indicates that evidence has been collected anonymously <u>will</u> <u>immediately contact or instruct the victim to contact the SANE Program or Victim Services</u> and relay any identifying information they have received (ex. victim name, SANE Number, date/ time of exam, etc.).			
SANE will then use that information to match the <u>SANE Number</u> and the individual reporting the assault. The information will then be given to JPD.			
□ JPD will use the SANE Number to locate the kit in the evidence room.			
 JPD will then coordinate with SANE to determine location of the assault to ascertain jurisdiction. JPD will contact the jurisdictional law enforcement agency, provide them with the report, and arrange for transfer of the evidence. 			
The jurisdictional law enforcement agency will proceed with the investigation as in a standard report. Desumantation:			
Documentation:			
Documentation will include an informational police incident report, completed by the responding JPD officer, which will indicate that an Anonymous Forensic Sexual Assault Exam Kit was retrieved, the name of the attending SANE, the date and time of retrieval, and the SANE Number from the front of the Kit Box.			

Victim Advocacy Protocol with Regard to Anonymous Reporting

Overview

If an individual <u>18 years of age or older</u> presents to the emergency department of a medical facility in Cambria County as a result of sexual assault, the <u>SANE or designated staff will immediately contact Victim Services</u>, <u>Inc. and request that an on-call Advocate be dispatched to the Emergency Department</u>.

If a victim presents to the Emergency Department of a medical facility in Cambria County reporting sexual assault but is reluctant to speak with law enforcement, the Advocate will offer her/him the following options:

- □ Receive a forensic exam with immediate report to police,
- Receive a forensic exam as an <u>Anonymous Report</u>, or
- □ Receive medical treatment only.

If the victim selects the **Anonymous Report** option, the victim shall be fully informed of the following:

- The benefits and challenges of **Anonymous Reporting**.
- The length of time for which evidence will be stored, which is two (2) years from the date of the exam.
- The methods for future contact and for converting from an <u>Anonymous Report</u> to a <u>Standard Report</u>.

Procedure:

- Assess and accommodate the special needs of the patient/victim including but not limited to any needs relating to language or culture, physical or mental ability, age or gender.
- □ Assess the safety of the victim both physically and emotionally and determine the need for safety planning.
- Offer referrals for shelter as needed.
- Provide supportive, unbiased information concerning available options about the examination process, emergency contraception, follow-up counseling, and reporting methods.
- Provide crisis intervention, support, and referrals to the patient/victim and to family and friends.
- Provide information, in coordination with the attending SANE, on evidence collection and documentation, evidence holding period and timeline, method for future contact if and when the patient/victim chooses to convert to the standard reporting method, and how anonymous reporting may affect any possible future prosecution.
- Assess whether the patient/victim is in need of food, clothing, shelter, transportation, and access or assist in accessing services and/or resources.
- In the event that a victim contacts an Advocate to convert to a standard report, the Advocate should immediately contact or instruct the victim to contact the SANE Program and give identifying information in order that the Anonymous Forensic Sexual Assault Exam Kit might be located at JPD.
- Approximately three weeks before the end of the two (2) year evidence holding period, the SANE Program, will attempt to contact the victim, if the victim has provided consent, to provide notification that the two (2) year evidence holding period will be ending and the evidence will be destroyed if the victim does not report to law enforcement.
- □ The victim may be contacted again after the first attempt, if consent to do so is given.

Documentation:

Victim Advocates will document the provision of services according to the protocol of Victim Services, Inc.

Overview:

An individual <u>**18 years of age or older**</u> presenting to the emergency department reporting sexual assault <u>**may**</u> <u>**choose not to interact with law enforcement immediately**</u>. The medical forensic examination will be performed, including the collection and documentation of evidence if the patient consents to Anonymous Reporting. Anonymous Reporting will provide for the collection and documentation of time-sensitive evidence without revealing identifying information to law enforcement.

Supplies:

- Consent for Anonymous Reporting of Sexual Assault Forensic Medical Examination Form (see appendix)
- Forensic Medical Record Adult/Adolescent
- Sexual Assault Forensic Evidence Collection Kit
- Drug Facilitated Sexual Assault Kit as indicated.
- □ All other equipment as indicated.

Procedure:

- □ ER staff will contact on-call SANE to report to ER for every disclosure of sexual assault.
- SANE or designated staff will contact on-call Victim Advocate. <u>DO NOT</u> at this time ask the patient if he/she would like an Advocate to be contacted—go ahead and make the call. <u>Phone: 814-288-4961</u>
- When the Advocate arrives, a SANE or designated staff member may ask the patient "A counselor who is not law enforcement, and who specializes in this type of situation is here now. Would it be okay if they just checked in with you?"
- The on-call SANE or designated staff member must obtain consent for Anonymous Reporting. (See appendix).
- Complete the Forensic Medical Examination Documentation. The medical record will be labeled with both personal identifier and the SANE Number.
- Obtain specimens as outlined in the Forensic Sexual Assault Exam Evidence Collection Kit. Label internal kit contents with patient labels that have personal identifiers (patient name, date of birth, gender and age, medical account number, and the date of the encounter)
- Seal kit.
- □ Place SANE Number on outside of kit box. DO NOT PLACE ANY PERSONAL IDENTIFIER ON KIT BOX.
- □ If there are additional evidence bags place the **<u>SANE Number</u>** on them.
- □ Complete the information on the top of the kit box: Date/Time, Nurse, Health Care Facility, Tampon/Sanitary napkin included in kit and chain of custody.
- Evidence will be given to Johnstown Police Department (JPD) for storage. Kit will be stored up to two (2) years. Document JPD's informational incident report number on the SANE log.
- Place the "sealed kit" in the <u>SANE area of ED in the locked cabinet</u>. Note on the chain of custody form date and time the kit was secured and notify the JPD (Conemaugh) or County Detectives (Miners) that an <u>Anonymous Forensic Sexual Assault Exam Kit</u> is available for transport.
- Approximately three weeks before the end of the two (2) year evidence holding period, the SANE Program will attempt to contact the patient, if the patient has provided consent, to provide notification that the two (2) year evidence holding period will be ending and the evidence will be destroyed if the victim does not report to law enforcement. The victim may be contacted again after the first attempt, if consent to do so is given.

PLEASE NOTE: AFTER TWO (2) YEARS, ONLY THE EVIDENCE COLLECTED, NOT THE SANE/MEDICAL RECORD, WILL BE DESTROYED.

Documentation:

Documentation will be completed regardless of how a patient proceeds with law enforcement.

The anonymous evidence will be stored by enforcement for two (2) years. A log of Anonymous Reports will be created and maintained by the SANE Program. The SANE Program will document up to 2 attempts to contact the patient, if consent is given, prior to evidence destruction.

Response Contact Information

Conemaugh Memorial Medical Center

SANE Program (24 hour) 814-534-9101

Miners Memorial Medical Center SANE Program 814-247-3100

Victim Services, Inc.

Sexual Assault Crisis (24 hour) 814-288-4961 1-800-755-1983

Women's Help Center, Inc.

Domestic Violence Advocacy and Emergency Shelter (24 hour) 814-536-5361

City of Johnstown Police Department (JPD)

Non-Emergency 814-533-2074

Cambria County Detective Bureau

Non-Emergency 814-472-1481 or after hours contact the on-call ADA or Detective through the 911 Call Center

Cambria County District Attorney's Office

Non-Emergency/weekdays 814-472-1680 or after hours contact the on-call ADA or Detective through the 911 Call Center

Children and Youth Services (CYS) 814-539-7454

Area Agency on Aging/Adult Protective Services Non-Emergency/weekdays 814-539-5595

Elder Abuse Crisis Hotline 814-535-8531

The following are common reactions seen in most people who suffer the trauma of sexual assault. An understanding of common reactions leads to an understanding of the recovery process.

There are two phases of reaction after a sexual assault:

- The Acute Phase
- The Reorganization Phase

Acute Phase

The acute phase may last from a few days to several weeks. The victim's life has been drastically disrupted, and she/he may be experiencing disorientation and shock. A variety of physical and emotional reactions may occur during this phase. In general, there are two types of emotional reactions:

- Expressed reaction
- Controlled reaction

In the expressed reaction, a victim may show outward signs of fear, anxiety and anger.

Expressive behaviors may include:

- Crying
- Laughing
- Screaming
- Joking
- Tenseness
- Shaking
- Restlessness
- Pacing

In the controlled reaction, a victim displays little or no outward response. Feelings are hidden or masked. Victims may appear calm, composed, disaffected or subdued.

Controlled behaviors may include:

- Numbness
- Depression
- Feeling dirty
- Vengeful thoughts
- Guilt
- Difficulty concentrating
- Shame
- Moodiness
- Fear

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- Restlessness
- Denial
- Anger
- Self-blame
- Revenge

Physical reactions that may occur during the acute phase include:

- Soreness
- Fatigue
- Bruises
- Eating disturbances
- Infections
- Sleeping disturbances
- Head aches
- Easily startled
- Stomach aches

Victims may alternate between expressed and controlled responses and these responses may surprise or catch the victim off guard. Emotions may go from one extreme to another.

Reorganization Phase:

The reorganization phase begins as the victim starts to integrate the experience into his/her daily living. The duration of this phase varies and will depend on such factors as the victim's age, personality style and available support system. It may last anywhere from a couple of months to years.

During the reorganization phase, victims may undergo:

Lifestyle changes such as:

- Change of telephone number and/or residence
- New job or school
- New friends
- Nightmares
- Phobias

Global fears such as:

- Men (if the perpetrator was a man)
- Sex
- Crowds
- Being alone

Specific fears such as:

- Night driving
- Specific areas or neighborhoods
- Things directly associated with the assault

Physical issues such as:

- Sexually transmitted diseases
- Pregnancy
- Lasting scars or physical damage from assault

Trying to regain control over her/his life, which may include:

- Return to work
- Long-term therapy
- More/less contact with family
- Want to be in control of choices

Sexual assault is the ultimate loss of personal control. Empower the victim by giving her/him choices, autonomy, support and respect.

Sexual assaults can be facilitated by the use of drugs both legal and illegal (e.g. alcohol, prescription drugs, "street" drugs, etc.). Among the drugs used in drug-facilitated sexual assault, alcohol is the most common. The use of substances may render the victim unconscious or unable to give consent.

Watch for symptoms that may indicate drug facilitated sexual assault.

- Victim thinks she/he may have been assaulted, but is not sure (unexplained soreness, woke up in a different location, etc.)
- Victim's recollection of assault is patchy and confused.
- Victim remembers assault but was unable to move or speak.
- Victim feels her/his intoxication level does not correlate with amount of alcohol consumed.

When drug facilitated sexual assault is suspected, arrange for the collection of blood and/or urine specimens as soon as possible.

Criminal and sexual acts committed against persons with disabilities (physical, mental, or communicative) generally go unreported.

The difficulty of providing adequate responses to the sexual assault victim is compounded when the victim is disabled. Some have limited mobility, cognitive defects that impair perceptual abilities, impaired and/or reduced mental capacity to comprehend questions, or limited language/communication skills to tell what happened. They may be confused or frightened and unsure of what has occurred, or may not understand that they have been exploited and are victims of a crime.

Additional time should be allotted for interviewing victims with disabilities. Improvisations from normal protocol may be necessary in some instances. Keep the following points in mind when responding to a victim with **physical disabilities**:

- The severity of a physical disability is not necessarily reflective of mental impairment.
- Speech impairment does not necessarily imply mental impairment.
- A lack of mobility may increase the victim's sense of vulnerability to future sexual assault.
- If the offender is the victim's caretaker, she/he may feel that no one can be trusted to provide appropriate care, or that access to care may be lost completely.
- Depending upon the severity of the disability, the victim may not realize that a sexual assault has occurred or understand the consequences of the assault. Someone other than the victim may be the person who called the police.
- A primary issue in responding to sexual assault victims with mental impairment is determining their levels of comprehension and communication.
- Responders should not necessarily assume that a person with mental impairment would not make a good witness.
- When treating a victim who is severely mentally incapacitated there is a mandate to report the assault to the Adult Protective Services at 814-539-5595.

The Elderly Victim

The elderly victim experiences the same humiliation, shock, disbelief, and denial as an adolescent or younger adult. Often, the full impact of the assault may not be felt until after initial contact with physicians, police, prosecutors, and advocacy groups.

It is usually when the older victim is alone that she/he deals with having been violated. Elderly victims become more aware of their physical vulnerability, reduced resilience, and mortality. Fear, anger, or depression can be especially severe in older victims. Often, they are isolated, have no friends or family members, and live on limited incomes.

The elderly tend to be physically more fragile, and injuries from an assault are more likely to be life threatening. In addition to possible pelvic injury and sexually transmitted infections, the older victim may be more at risk for other physical, tissue or skeletal damage. The assault may also exacerbate any existing illness or injury. The recovery process for elderly victims tends to be lengthier than for younger victims.

Hearing impairment and other physical conditions attendant to advancing age, coupled with the initial reaction to the crime, may render the elderly patient unable to make her/his needs known. This may result in prolonged or inappropriate treatment. It also is common for responders to mistake this confusion and distress for senility.

Medical and social follow-up services must be made easily accessible to older victims, or they may not be willing or able to seek or receive assistance. Responders should be aware that the perpetrator might be a service provider (in a nursing home for instance) or a family member.

Adult Protective Services provides protection for incapacitated adults who are abused, neglected, or exploited.

Any person who has reason to believe that any incapacitated older adult (defined as a person age 60 years or older who, because of one or more functional limitations, needs the assistance of another person to perform or obtain services necessary to maintain physical or mental health) has been subjected to physical abuse, neglect, or exploitation must report the abuse to Adult Protective Services at <u>814-539-5595</u>.

Lesbian, Gay, Bisexual, or Transgender survivors of sexual assault have many of the same reactions and fears as would any survivor. However, LGBT sexual assault survivors may face additional concerns. These concerns may include, but are not limited to:

Fear of Prejudice

An LGBT survivor may fear reporting the crime because of prejudice. She/he may fear that an officer, hotline worker, doctor, or attorney will judge them because of their sexuality. They might feel like people believe they brought the attack on themselves by being LGBT.

Assumption of Heterosexuality

People assisting a survivor of sexual assault may assume that the person is heterosexual. A survivor may feel uncomfortable correcting that assumption, or disclosing that they are homosexual.

Fear of Being "Outed"

A LGBT survivor of sexual assault may not have revealed to their friends, family, or community that they are homosexual. They may worry if they come forward to report that this information will be revealed.

Rape Myths

Sexual assault is most often portrayed as a crime committed by men against women. However, sexual assault can be perpetrated by men against men, by women against women, or women against men. LGBT survivors must have the same options available to them as are afforded to all other sexual assault survivors.

Betrayal of LGBT Community

A LGBT victim of sexual assault may hesitate to report the crime because they may worry about betraying their community. They might worry that a stigma of sexual violence will be attached to the LGBT community.

Sexual Assault Crisis Advocates and Domestic Violence Advocates are specially trained to offer support to victims who are lesbian, gay, bisexual, or transgender.

The Male Victim

The number of adult male victims of sexual assault who report the crime or seek medical care or counseling represent only a portion of those actually victimized due to the strong resistance to report assault/abuse. Estimates show that one in six men will be sexually assaulted in their lifetime. Most often these assaults occur before the age of 18.

Men commit almost all reported cases of sexual assaults against males, and often the victims are young boys or teenagers. However, some perpetrators are women, and some victims are men past their teens.

As with female sexual assault victims, male victims experience fear, anger, and an overwhelming sense of loss of control over their bodies and selves. The male victim may also feel dirty, ashamed, and/or guilty. He may be very embarrassed. His body may have responded sexually to the assault (e.g. with an erection). He may feel particularly disturbed by the fact that he was unable to protect himself from the assault. A male victim may fear that others will discover that he has been sexually assaulted. A male may fear the assault reflects on his identity as a straight or gay person.

Sexual assault against homosexual males may be significantly underestimated and underreported. In the gay male community, the stigma of reporting and legitimate concerns about discriminatory treatment may contribute to underreporting. Sexual assault against men in prison populations may also be significantly underestimated and under-reported. Among prison populations, non-disclosure may emanate from concern that correctional officers will not address the issue, or from fear of retaliation by other inmates.

Refer the victim to the local crisis center who has expertise in the area of sexual assault of males, and are vital to assist in the recovery process. All crisis centers in the state of Pennsylvania provide services and support to men as well as women.

In the past, sexual violence was understood as an assault by a stranger upon an unsuspecting victim. As the body of knowledge about sexual violence has advanced, it is clear that most sexual violence occurs between two people who know one another.

Intimate Partner Sexual Violence (IPSV) refers to rape/sexual assault that occurs between two people who have or have had a consensual sexual relationship. Sometimes this is referred to as "marital rape," but of course this does not only happen in married relationships.

Intimate partner sexual violence is often a part of relationships in which other types of violence or battering are occurring. IPSV can occur in dating relationships, marriages or long term gay or lesbian relationships.

Sexual assault of any kind can result in a host of reactions – some are immediate, some are long term. The variety of reactions may depend on the victim's previous life experience; the kind of force used, the relationship of the offender to the victim, the age of the victim, etc.

Most victims experience levels of fear, anger, self-blame, depression and anxiety that can be exhibited both emotionally and physically. Difficulty sleeping and concentrating, nightmares, flashbacks, emotional numbing are all common reactions to sexual assault.

For a more complete discussion of reactions, please see our fact sheet, "Common Reactions to Sexual Assault."

In addition to the other common responses a victim may have, intimate partner sexual violence may cause the following added impact:

- Because victims of IPSV often share homes and children with the perpetrator, they are often unlikely to report abuse. Therefore, a victim of IPSV is likely to have been sexually assaulted multiple times.
- Victims of IPSV may experience heightened forms of self-blame for staying in the abusive relationship.
- Because the perpetrator is someone with whom the victim had chosen to be intimate on other occasions, the victim's sense that she/he can trust her/his own judgment can be strongly affected.
- When a perpetrator is also a person with whom one has shared intimacy, the sense of betrayal of trust is keen.

As a victim of crime you have the following rights:

- To be provided with basic information on available services;
- To be told about certain significant actions within the justice system pertaining to your case. This includes the granting or denial of bail to an adult offender, the detention or release of a juvenile, the filing of a petition alleging delinquency, and the escape and subsequent apprehension of an adult prior to trial or a juvenile prior to adjudication;
- To be accompanied at all proceedings by a family member, a victim advocate or other support person;
- To give prior comment (communicate their feelings or opinions) on the sentencing decision regarding an adult offender or the disposition of a delinquent child;
- To receive help in preparing an oral and/or written victim impact statement detailing the physical, psychological and economic effects of the crime, which will be considered by the courts;
- To be restored as you were before the crime, as much as possible, through restitution and to receive assistance with preparing, submitting and follow-up with a claim for compensation;
- To be notified of an adult offender's transfer from a state prison to a mental health facility and the discharge, transfer or escape of the adult offender from that facility;
- To receive immediate notice of the release of an adult offender on bail who is incarcerated in a local prison for a violation of a Protection From Abuse (PFA) order, or for a personal injury crime committed against the victim protected by the PFA;
- To have property returned that was seized as evidence, but is no longer needed for prosecution;
- To have notice and to provide prior comment on a judicial recommendation that the defendant participate in a motivational boot camp;
- To have notice and provide comment on resentencing decisions regarding an offender;
- To have notice and provide prior comment on prosecutor's waiver of eligibility requirement of an offender to enter the Recidivism Risk Reduction Incentive (RRRI) Program;
- To be notified and provide comment if the Pennsylvania Department of Corrections requests that the court reconsider an inmate's sentence, and re-sentence that inmate to the State Intermediate Punishment Program;
- To be present at trials and the execution of an offender; and
- To receive notice of the arrest of a defendant for violating a PFA order.

Victims of personal injury crimes have the additional right:

- To receive notice of the arrest of a suspect or the filing or forwarding of a complaint relating to the crime;
- By your request, to receive notice when an adult offender is released from incarceration at sentencing;
- To receive notice of an opportunity to give prior comment on and receive postsentencing decisions involving an offender's release from a state prison, such as medical release, work release, furlough, parole, pardon or community treatment center placement;
- To receive notice of and provide prior comment on recommendations sought by the Department of Corrections that an offender may participate in a motivational boot camp;
- To receive notice of the release of an adult offender from a local correctional facility, including work release, medical release, furlough, parole, release from a boot camp or community treatment center placement;
- To receive immediate notice of the escape of an adult offender and subsequent apprehension;
- By your request, to receive notice of the filing, hearing or disposition of appeals;
- To receive notice of the commitment to a mental health institution from a state or local correctional institution;
- To receive notice of the termination of the courts' jurisdiction;
- To provide prior comment on work release or medical release of an offender from a state prison or local correctional facility; and
- To give prior comment on the potential reduction or dropping of charges or any changes of a plea in a criminal or delinquency proceeding or diversion of a case, including an informal adjustment or a consent decree.

Victims of personal injury/burglary crimes have the additional right:

• To give prior comment on the potential reduction or dropping of charges or any changes of a plea in a criminal or delinquency proceeding or diversion of a case, including an informal adjustment or a consent decree.

Victims of personal injury crime committed by a juvenile have the additional right:

- By your request, to receive notice prior to the release of a juvenile from residential placement, a shelter facility, or a detention center;
- By your request, to be notified and have the opportunity to submit a written objection prior to the transfer or release from a placement facility of a juvenile who has been adjudicated delinquent, when such action is contrary to a previous court order or placement plan approved at a disposition review hearing;
- By your request, to be given immediate notice of a juvenile's escape from residential placement, a shelter facility or a detention center and subsequent apprehension;

- By your request, to be given immediate notice of a juvenile's escape from residential placement, a shelter facility or a detention center and subsequent apprehension; and
- By your request, to submit written comment and oral testimony at a disposition review hearing.

Victims of crime committed by a juvenile have the additional right:

- To receive prior notice of delinquency hearings and notification of hearings about the transfer of a juvenile to and from criminal proceedings; and
- To receive notice of the details of the final disposition of a juvenile's case.

For assistance in explaining to a victim his or her rights, please contact a Victim Advocate and refer to the Pennsylvania Crime Victim's Rights Handbook.

The Pennsylvania Protection from Abuse Act allows a person who has been abused to quickly secure a court order that will keep away the abuser. Under the PFA Act, abuse includes:

- 1. causing or attempting to cause physical injury, sexual assault, indecent assault, or incest whether or not any weapon is involved;
- 2. physical or sexual abuse of any minor children;
- 3. interfering with a person's freedom of movement (false imprisonment);
- 4. placing a person in reasonable fear of imminent serious physical injury;
- 5. stalking or repeatedly committing other acts that cause a person reasonable fear of bodily injury.

A person is protected by the PFA if she/he has been subject to abuse by a member of his/her family or household, or a sexual or intimate partner.

For help in obtaining a PFA, the victim should be referred to the Women's Help Center.

In accordance with the Violence Against Women Act and Department of Justice Reauthorization Act of 2005 and in unity with Cambria County's commitment to a victimcentered response, the county's team of responders recognizes that truth-telling devices must not be used with victims of sexual assault as a condition for proceeding with any criminal investigation or prosecution for the following reasons:

- Polygraph results may be inaccurate when used to determine the credibility of victims of sexual assault. Many factors affect the accuracy of truth-telling devices such as heightened arousal, emotional reactions, anxiety and anger. These factors are all common reactions seen in victims of sexual assault (see *Common Reactions to Sexual Assault*). Test results from truth-telling devices may detect these factors and inaccurately attribute them to deception when they are, in fact, part of the common reaction to trauma.
- The use of truth-telling devices can be harmful to the investigation and prosecution. Asking victims to take a polygraph examination can also irreparably damage the rapport between the investigator and the victim which is essential to a successful prosecution. It can also discourage other victims from coming forward thereby contributing to the underreporting of sexual crimes.
- The use of truth-telling devices can be harmful to victims. Asking victims to take a polygraph examination can make them feel disbelieved and may discourage them from participating in the criminal justice system.

Resources

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Office of Technology Assessment. (1983, November). *Scientific validity of polygraph testing: A research review and evaluation—A technical memorandum.* Washington, D. C.: U.S. Congress.

Saxe, L., Dougherty, D., & Cross, T. P. (1985). The validity of polygraph tests: Scientific analysis and public policy. *American Psychologist, 40*, 355–366.

Wright, A. (2004, Spring). *The use of polygraphs on rape victims: State of the nation*. Portland, OR: National Crime Victim Law Institute.

Law Enforcement Policy Regarding the Polygraphing of Crime Victims

The Pennsylvania District Attorneys Association, the Office of Attorney General, the Pennsylvania State Police and the Pennsylvania Chiefs of Police Association hereby recognize the following findings regarding the testing of victims of crimes by the use of a polygraph or similar testing device.

WHEREAS, the law enforcement community recognizes that all victims of crimes must be treated with dignity and respect; and,

WHEREAS, the use of polygraph or similar testing devices on a victim of crimes can cause the victim additional stress and a fear of being disbelieved; and,

WHEREAS, the polygraph and other similar testing devices can, in certain instances, serve as a valuable tool in the criminal investigation.

Accordingly, the above-named organizations hereby adopt for use by their members and personnel the following policies regarding the use of polygraph and similar testing devices during the course of criminal investigations.

- 1) No law enforcement agency shall ask or require victims of a crime to submit to a polygraph examination, or any form of mechanical or electrical lie-detector examination, or psychological stress evaluation examination as a condition for proceeding with any criminal investigation or prosecution.
- 2) The submission to a polygraph examination, or any form of mechanical or electrical lie-detector examination, or psychological stress evaluation examination shall be voluntary in the part of the victim, and a victim will be advised that they have no obligation to submit to such an examination whatsoever.
- 3) No investigation or prosecution shall be terminated on the basis that the victim in the crimes refused a polygraph examination, or any form of mechanical or electrical lie-detector examination, or psychological stress evaluation examination.
- 4) Whenever possible, investigators and prosecutors investigating a crime should conduct all other investigative steps before asking a victim to submit to a polygraph examination, or any form of mechanical or electrical lie-detector examination, or psychological stress evaluation examination.

Anonymous Reporting Consent for Collection, Documentation and Release of Evidence and Information

I.

, request a medical forensic examination to document and collect evidence, but I do not want to speak with law enforcement at this time. I understand that Anonymous Reporting means that I may have evidence collected without having to talk with police or participate in the criminal justice system **unless and until I am** ready to do so.

Patient Consent:

I have read and have had the following explained to me and I understand:

Cost

I will not be billed for the forensic exam. I can request that my insurance company is not billed for the forensic exam.

Talking with Law Enforcement

By not talking with the police now, I understand that the opportunity to collect evidence from the suspect and other crime scenes may be permanently lost. I understand that this might make it more difficult to prosecute a case if I do decide to report later.

My Medical Records

In accordance with HIPPA, the hospital will keep information from the examination as part of my medical record. My medical records remain private according to the law and hospital privacy practices.

My Privacy

In order to protect my privacy, the sexual assault evidence kit and any paperwork given to the Johnstown Police Department and/or any other law enforcement agency will not include my name or any of my personal information.

Evidence Storage

Evidence collected today will be stored by the City of Johnstown Police Department for two (2) years. I understand that some information will be kept by the hospital so that if I decide to report at a later date, the evidence can be matched up with my name and information and given to the law enforcement agency handling my case.

Contacting Law Enforcement:

If I decide at any time that I would like to talk with a police officer, I can call Victim Services, Inc. or the SANE Program at the Hospital Emergency Department. They will help me match my information to the evidence stored anonymously. I can also contact local Law Enforcement myself directly and tell them I have had evidence collected anonymously.

Contact Information:

If I choose **not** to talk with police, the evidence will be destroyed after two (2) years. If I provide contact information, a Sexual Assault Nurse Examiner (SANE) from the hospital will try to reach me three weeks before the evidence is destroyed. If I cannot be reached after two attempts, the evidence will be destroyed without any further notification.

Would	you like a SANE to contact you before your evidence is destr	oyed?	\square NO	
	Cell Phone	May we leave a message?	□ YES	\square NO
	Landline Phone	May we leave a message?	\square YES	\square NO
	Email Address	_ May send a message?	\Box YES	\square NO

I give the hospital permission to collect and transfer my evidence and all other related forms to the City of Johnstown Police Department. I understand that Johnstown Police Department and any other law enforcement agency have not been given the right to view my SANE/medical record, or analyze the evidence. I understand that if I do not report the crime to the police within two (2) years the evidence will be destroyed.

Print Name (patient)

Signature (patient)

Date