

**In support of SB1343: AN ACT CONCERNING COMPASSIONATE CARE FOR  
VICTIMS OF SEXUAL ASSAULT**

Submitted to the Human Services Committee  
Public Hearing, March 13, 2007

Dear Members of the Human Services Committee,

I am a CT registered nurse and survivor of sexual abuse by clergy. I am urging your support of SB 1343, An Act Concerning Compassionate Care for Victims of Sexual Assault. There is every reason to require emergency rooms to offer emergency contraception to sexual assault victims. "Plan B" (Levonorgestrel) is a safe medication that is 95% effective in preventing pregnancy within the first 24 hours after sexual assault. Its use in medical treatment after rape is supported by: the American Medical Association, the American College of Emergency Room Physicians, the American College of Obstetricians and Gynecologists, the American Academy of Pediatrics (yes, doctors for children), and the American Public Health Association. In other words, emergency contraception is part of generally accepted medical care for victims of sexual assault.

Plan B contains the same ingredients as regular oral birth control. It does not induce abortion. It will not terminate an established pregnancy. It is only useful for prevention of pregnancy. Plan B, is sold over the counter and on the web. While emergency contraception can be taken up to 72 hours after sexual assault, its effectiveness drops to 60% within 48 to 72 hours after rape. The best chance for success in preventing unwanted pregnancy from sexual assault is immediate care.

Connecticut women who need emergency contraception after sexual assault are mothers, sisters, daughters, maybe even grandmothers. Anyone can become a victim of sexual assault. Women presenting to emergency rooms have already endured the trauma and pain of sexual assault and have summoned their courage to seek medical treatment (yes - it is an act of courage to seek emergency room care after sexual assault.) Immediate care should be complete before leaving the emergency room. By statutory regulation, only certain licensed health care providers are permitted to prescribe and dispense medication. No such health care provider should be allowed to deny this simple, effective measure based on their personal beliefs. Public funds support emergency rooms and it should be public policy that simple, effective pregnancy prevention be offered at the time the woman seeks initial treatment for sexual assault.

Our sexuality is at the core of each of us. It is something basic to our definition of self. Sexual assault damages that inner core. Whether or not people heal from sexual assault depends, in part, on how the community responds to it. Like being a little bit pregnant, there is no middle ground. As community leaders, you are being called upon to make the choice that, one way or the other, will have life long repercussions for Connecticut citizens victimized by sexual assault. I am asking you to make the choice to help minimize a rape victim's experience of trauma and allow her the immediate medical care that is generally accepted by medical experts. I am asking you to make the choice that will prevent some health care practitioners, working in publicly funded emergency centers, from imposing their personal beliefs on rape victims who seek their help. Such a demand is oppressive, discriminatory, and has no place in the Connecticut health care system.

Your vote to support SB 1343 is a vote for the health and well being of Connecticut women and their families. It is a vote to curtail the punishing aftermath of sexual assault. Emergency contraception has nothing to do with abortion, only pregnancy prevention. It is simple, effective, and safe. Please vote "yes" for Compassionate Care for Victims of Sexual Assault.

Sincerely,

Frances Park