

Testimony of Rod O'Connor
In Support of
S.B. 1343 (RAISED) – An Act Concerning Compassionate Care For
Victims Of Sexual Assault

Last year when I testified before the Public Health Committee on providing emergency contraception to victims of rape in all rape trauma centers across the state, I was naïve. I believed that once all the personal stories, the facts and statistics had been laid out, that no one could oppose the sensible solution of allowing all women who have been raped the option of emergency contraception at the point of her first entry into the medical system.

I am no longer naïve, I'm just angry. I shouldn't have to be here before you to testify because rape is still a crime of violence. Rape is not about sex. Rape is not about reproduction. Rape is violence against women. If anyone withholds any form of treatment from a victim of a violent crime, they should be held accountable.

No woman who has been raped should be forced to wait until she can see another medical professional to prescribe emergency contraception. No woman who has been raped should be forced to look for an all night pharmacy or wait until her neighborhood drug store opens. No woman should ever have to bear a rapist's child.

Last year I used my friend Anne's experience as a victim of rape as the basis for my testimony. This year I asked Anne if she could write testimony to submit to the Human Services Committee. She agreed on the condition that her last name would not be used because, even after 14 years and with a new life as an Episcopal priest in the diocese of Virginia, she was afraid that somehow, someone could Goggle her name and find out the details of her rape. She still cannot mention her rape to even close friends, much less curious parishioners.

I hope you will indulge me while I read a portion of Anne's testimony:

"What if the rape had left me pregnant? What would I have done? I don't know. I can't imagine. Every task, every interaction felt overwhelming to me. How would I have dealt with pregnancy on top of everything else? For a very long time, just making it to the end of the day took every ounce of energy and stamina I had. I can't begin to imagine what it would have been like waiting for the results of the AIDS test and wondering if I were carrying a child who might have AIDS. Or trying to find a place to live not only for myself but also for a child. Or, knowing that

my job performance had plummeted, wondering what would become of me and a child if I were to be let go. Or telling my parents before I was ready not only that I'd been raped but also that I was going to have a child. Or explaining to my students how I came to be pregnant."

"The night of the rape, after all the evidence had been collected, the hospital staff gave me pain medication and offered me "the morning after" pill. I took it. I still remember the overwhelming sense of relief that washed over me the first time I got my period after the attack. On top of everything else, at least I didn't have to worry about being pregnant."

"I am so very grateful that in that horrific situation, I was given a choice about emergency contraception. It may have saved my life. There were times after the rape when I thought about suicide. My guess is that to have been faced with an unwanted, unwelcome pregnancy would have pushed me over the edge."

Every woman who is a rape victim deserves the most compassionate, effective and complete care at the earliest possible time in her journey to recovery. In every case, this should include the option of emergency contraception.

Testimony provided by Rod O'Connor
In Support of
S.B. 1343 (RAISED) – An Act Concerning Compassionate Care For
Victims Of Sexual Assault

My name is Anne. I am a survivor of rape. In October of 1993, when I was 27 years old, a man broke into the apartment in the middle of the night. He tied me up and raped me at knife-point. He was never caught.

I've been told that the average rape lasts 20 minutes. That's not a long time. But the impact of those twenty minutes is harsh and deep. For the first few years after the rape, my life was sliced cleanly in two: a before and an after, separated by a wide chasm. The territory of "after" was a whole new landscape for me.

In 1993, I was an elementary school teacher. I had never had sex. I was not dating anyone. I am the younger and only sibling of a brother born with a congenital heart defect and severe learning disabilities and have served as our family's emotional caretaker for most of my life. I did not tell my parents about the rape until more than a year after it happened. I needed time to make sure that I would be able to take care of myself and of them when I told them.

The police who came in response to my call the night of the rape were gentle and kind and extremely uncomfortable. All of them were male, and it was to them that I had to repeat all of the vile things the rapist had said to me—using words I'd never spoken before in my life. My 13-year-old cat ran away that night because the intruder had left the door open. I could hear him crying outside but he wouldn't come in, and I had to go to the hospital.

The hospital had a rape kit which is used to gather evidence. The doctor cut off strands of my hair, scraped under my nails, swabbed for fluids. All of my clothes were kept for evidence. I spent much of the morning at the police station working with a sketch artist. Although I'd seen the man's face, I couldn't remember it clearly. I thought maybe he was Latino—and then I worried that perhaps he wasn't Latino at all and that I was harboring some terrible prejudice. It was hard to think clearly—about anything.

When I finally got home, my landlady was there. Someone had called her, and she knew only that my apartment had been broken into. She came to my door and asked me, "Were you home?" When I said yes, she asked, "Did he touch you?" Later in the day, a man she had hired to do custodial work came to the house and cried when he saw me.

The day of the rape was the first of many days during which I was terrified to be home alone. I stayed with friends, or friends stayed with me. For the first few nights I didn't sleep at all, and for a long time I slept fitfully. Eventually a doctor prescribed valium to help me sleep. My teaching colleagues subbed for me for a week while I tried to collect myself. When I returned to school I found that I was completely sapped of creativity.

In the first few weeks and months after the attack, I filled out a jarring victim/witness compensation form (*twice!*—because of statewide administrative changes) so that I could be reimbursed for the costs of therapy relating to my experience. I searched for a new apartment until I finally realized that I was too afraid to live alone, and then I moved in with a friend. I battled with my insurance company, which initially refused to pay for my hospital bill because I hadn't called my doctor before going to the emergency room. I went for an AIDS test and didn't know answers to the most basic questions: *Does your partner have AIDS? How many partners has he had? Does he ever do drugs?* I fielded questions from the police as the investigation stretched on. Every time I called the station I had to identify myself again as a rape victim. I lost weight. I had bad dreams. I had been considering becoming an ordained minister, and I withdrew my name from the official list of candidates. I met with my therapist every week, and it was months before I could bring myself to tell him any details of the attack.

What if the rape had left me pregnant? What would I have done? I don't know. I can't imagine. Every task, every interaction felt overwhelming to me. How would I have dealt with pregnancy on top of everything else? For a very long time, just making it to the end of the day took every ounce of energy and stamina I had. I can't begin to imagine what it would have been like waiting for the results of the AIDS test and wondering if I were carrying a child who might have AIDS. Or trying to find a place to live not only for myself but also for a child. Or, knowing that my job performance had plummeted, wondering what would become of me and a child if I were to be let go. Or telling my parents before I was ready not only that I'd been raped but also that I was going to have a child. Or explaining to my students how I came to be pregnant. I can't imagine what it would have been like to be dealing with the health insurance agency about *both* the emergency room fee for the rape *and* coverage for prenatal care. It took more than a year—and the help of a lawyer—just to get them to stop sending me bills for my unapproved emergency room visit.

The night of the rape, after all the evidence had been collected, the hospital staff gave me pain medication and offered me “the morning after” pill. I took it. I still remember the overwhelming sense of relief that washed over me the first time I got my period after the attack. On top of everything else, at least I didn't have to worry about being pregnant.

I am so very grateful that in that horrific situation, I was given a choice about emergency contraception. It may have saved my life. There were times after the rape when I thought about suicide. My guess is that to have been faced with an unwanted, unwelcome pregnancy would have pushed me over the edge.

I offer my story in the hope that it may make a difference for other women who are victims of sexual assault. My fervent prayer is that they, too, will have the opportunity to make a choice about whether or not to continue a pregnancy that they did not have any say in creating.