

**Testimony in Support of
Am. House Bill 333**

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Good afternoon Mr. Chairman and Members of the Committee. My name is Katie Edwards and I am an advanced doctoral student in clinical psychology at Ohio University. I am here to speak in support of House Bill 333, on behalf of the Ohio Psychological Association. HB 333 would ensure a basic standard of care for sexual assault survivors. Specifically, HB 333 would require hospitals in Ohio that offer organized emergency services to provide sexual assault victims with information and medication to prevent pregnancy, information and possible preventative treatments for sexually transmitted diseases, and counseling about additional services and follow-up care.

Recent data from the National Violence Against Women Survey and the National Women's Survey show that 1 in 7 adult women in Ohio have been the victims of one or more completed forcible rapes in their lifetime. To bring this closer to home, this means that approximately 634,000 adult women in Ohio have been the victims of rape, nearly 60,000 in Franklin County alone. In fact, these estimates are probably too conservative, because they do not include women who experienced alcohol- or drug- facilitated rape, incapacitated rape, or attempted rape. If we use a broader definition, such as the one I have used in my research with college women at Ohio University, the findings are even more alarming – 1 in 4 young women in Ohio have been the victims of an attempted or completed rape in their lifetimes.

Rape leads to a host of deleterious consequences, both short- and long-term. My research, as well as other research in Ohio and across the nation, demonstrates that victims of rape are at risk to experience a host of psychological consequences including but not limited to anxiety, depression, substance abuse, eating disorders, suicidal thoughts, and suicidal behaviors. Victims of rape are also at risk for physical health consequences directly related to being assaulted, such as sexually transmitted diseases and unwanted pregnancy. As many as 30% of women report contracting a sexually related disease as a result of being raped, and many of these diseases could have been prevented by appropriate prophylactic action. Additionally, 5% of women become pregnant following a rape – 30,000 rape-related pregnancies in Ohio. The vast majority of these pregnancies could be prevented, but only 10%-25% of rape victims seek emergency medical services within 72 hours of the assault. For women who do seek emergency medical services, 20% of emergency facilities in Ohio do not guarantee access to emergency contraception for rape victims.

Rape is a significantly underreported crime. Rape victims often do not report their experience to police or seek medical attention because of shame, difficulty acknowledging that what happened to them was actually rape, and fear of criticism or humiliation by police or hospital staff. Instituting a standard of care for rape victims would mitigate those worries and would ensure that those women who do seek emergency medical treatment following a rape receive appropriate care.

Rape is also an expensive crime. In the absence of appropriate and timely post-rape health care, rape can lead to significant social and economic costs related to unintended pregnancy, sexually transmitted diseases, and higher subsequent health care costs seen among individuals who have been raped. Establishing a standard of care for rape victims will increase the likelihood that rape victims will seek appropriate care by reducing concerns about fear of criticism or humiliation by hospital staff, in turn reducing STD's, unwanted pregnancies, and costs to the state.

On behalf of the Ohio Psychological Association and the approximately 650,000 rape victims living in Ohio, I urge each of you to support HB 333. Primary prevention of sexual violence and other forms of interpersonal violence should be a top priority for our state. Ohio can take pride in the recent passage of HB 19, a significant initiative in this regard. However, until interpersonal violence is eradicated in Ohio, it is essential that we have a basic standard of care in place for sexual assault survivors who seek emergency medical services.

Thank you, Mr. Chairman and Members of the Committee for allowing me to speak to you about this critical issue facing our state. I would be happy to address any questions that you might have.