



THE RAINBOW AFTER THE STORM: INTRODUCTION TO THE SANE PROGRAM AT COA

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Objectives—

- Increase awareness of pediatric sexual abuse and care provided through the SANE Program
- Discuss history of forensic nursing and the SANE specialty
- Inform participants about the history and current operations of the SANE program at COA
- Review flow of patient care during a SANE visit
- Discuss consent and legal implications regarding pediatric and adolescent sexual activity
- Address common myths and misconceptions surrounding pediatric and adolescent sexual assault and abuse



Disclosure—

I have no relevant financial arrangements or affiliations with commercial interests.

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What is Sexual Abuse?

“Engaging children in sexual activities they cannot understand or consent to, including genital or anal contact; exposing the child to exhibitionism, voyeurism, or sexually explicit material; using the child in pornography; and pandering the child for sex by others.”

—AAP Committee on Child Abuse & Neglect



Statistics —

- About 1 in 4 girls and 1 in 13 boys in the United States experience child sexual abuse
- Mean age at time of onset of sexual abuse is 9-10 years
- Children are most vulnerable to CSA between the ages of 7 and 13
- 82% of all victims under 18 are female
- Females ages 16-19 are 4 times more likely than the general population to be victims of rape, attempted rape, or sexual assault
- Children who had an experience of rape or attempted rape in their adolescent years were 13.7 times more likely to experience rape or attempted rape in their first year of college
- Every 9 minutes child protective services substantiates, or finds evidence for, a claim of sexual abuse



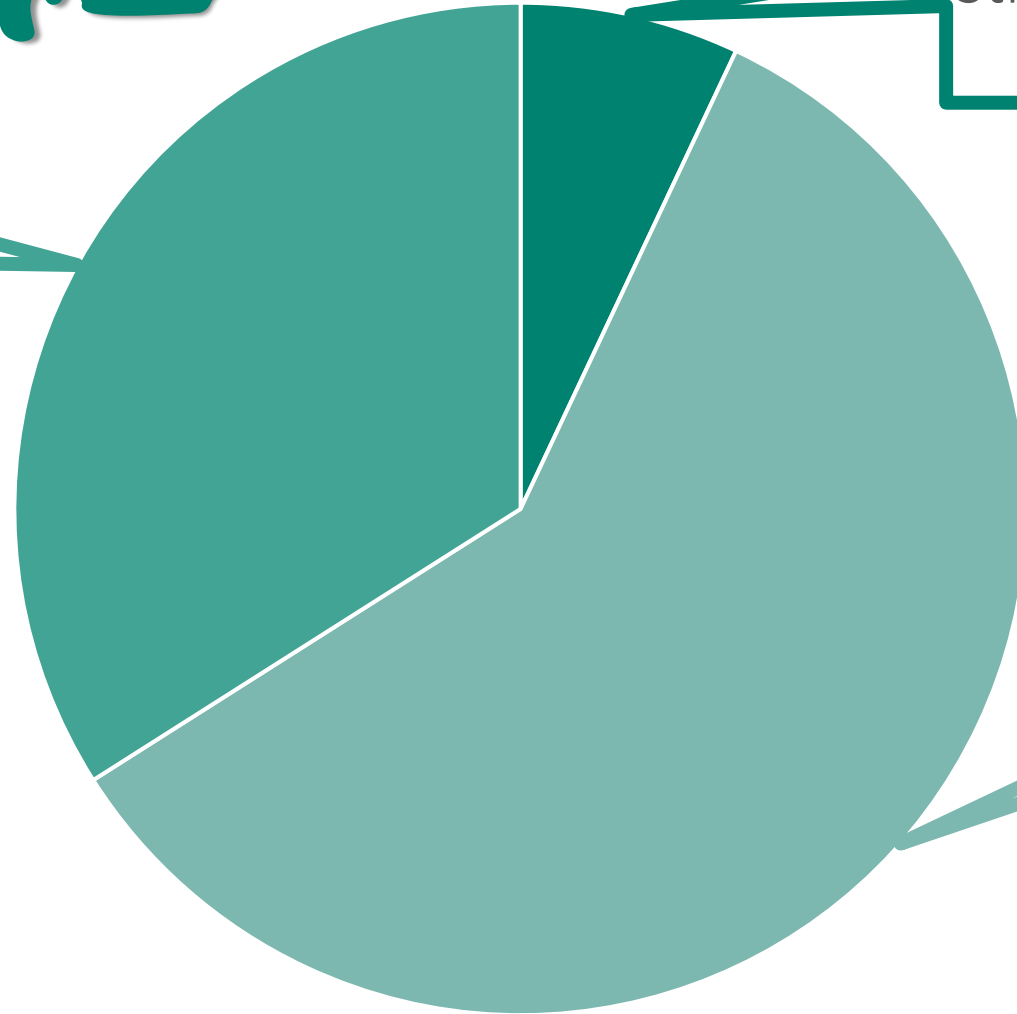
Perpetrator—

Family Members
34%

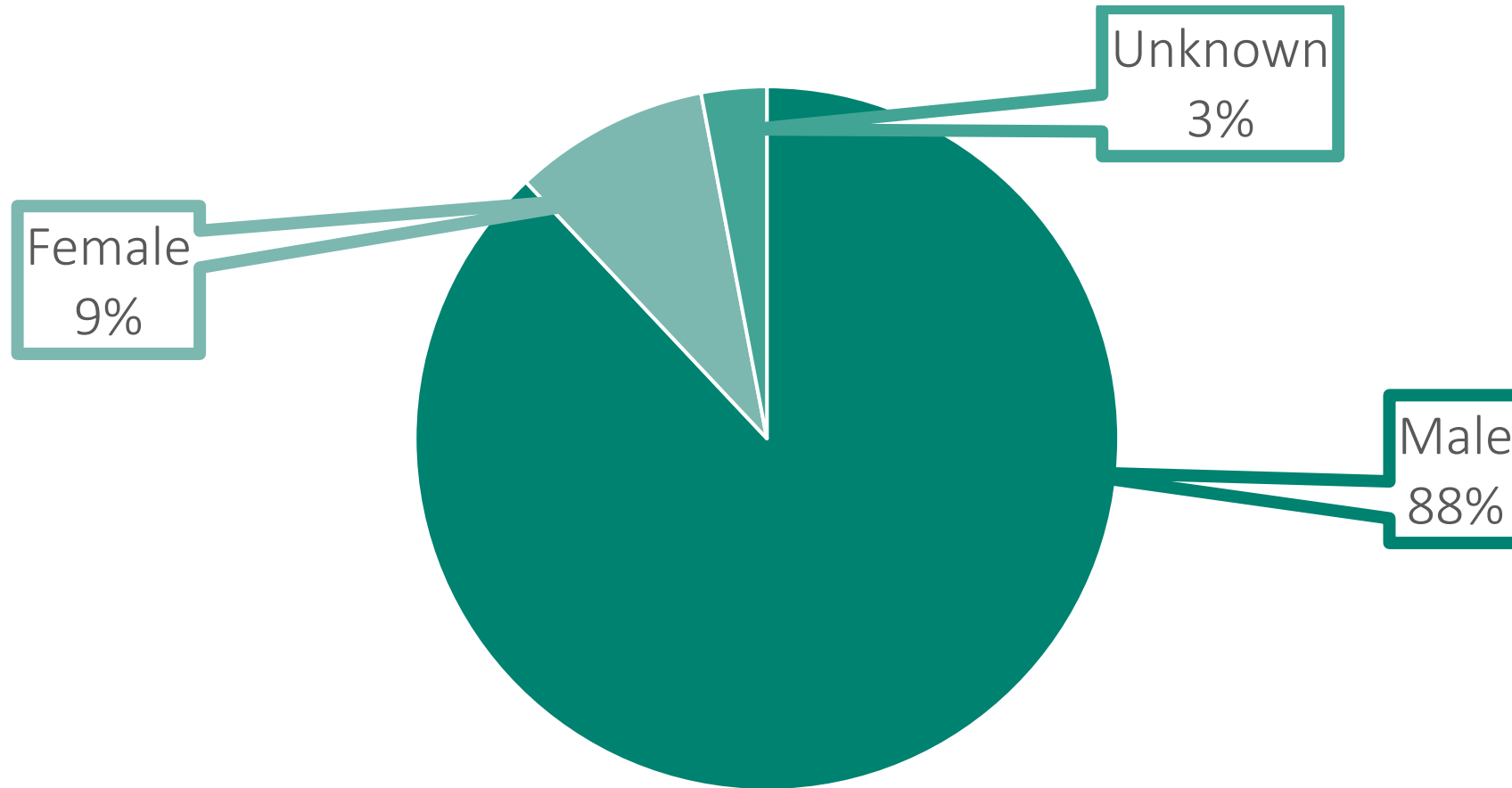
Stranger
7%

Acquaintances
59%

93% of
perpetrators
are *KNOWN* to
the victim



Perpetrator—



Effects of Pediatric Sexual Abuse—

- About 4 times more likely to develop symptoms of drug abuse
- About 4 times more likely to experience PTSD as adults
- About 3 times more likely to experience a major depressive episode as adults



Immediate Consequences –

- Physical Injury
- STIs
- Pregnancy
- Emotional stress
- Depression
- Anxiety
- Family upheaval
- Poor school performance
- Constipation or encopresis
- Voiding dysfunction or bedwetting
- Poor sleep



Long-term Consequences –

- Pregnancy
- Untreated STIs
- Depression
- Anxiety
- Disordered/unsafe relationships
- Sexual Dysfunction
- Substance Use Disorders
- PTSD
- Criminal Activity
- Sexual Abuse of Others
- Poor Overall Health



Disclosure—

- Extremely RARE
 - Purposeful
 - Accidental
 - Elicited
- Often Delayed
 - One survey showed that 75% failed to disclose their victimization within the year after occurrence
 - 66% of adults surveyed report experiencing sexual abuse as children never disclosed to ANYONE prior to the survey
 - 82-90% surveyed had never reported the abuse to authorities



Barriers to Disclosure—

- Power Dynamic
- Perpetrator is a Caregiver or a Trusted Person
- Afraid They Won't be Believed
- Shame Culture
- Fear of Deportation
- Cultural Differences
- Not Aware of Resources
- Medical Mistrust
- Fear of Judgment



What Exactly is a SANE?

- Sexual Assault Nurse Examiner (SANE) is a registered nurse who received additional training resulting in having expertise in conducting forensic exams and providing a wide-range of care with compassion to survivors of sexual abuse and/or assault
 - International Association of Forensic Nurses (IAFN)
 - Certification—
 - SANE-A (currently 1739 certified)
 - SANE-P (currently 744 certified)



History of SANE—

1975—Memphis formed first group of nurses focused on Forensics

1977—Minneapolis started forensic initiatives

1979—Amarillo, TX next

1980s—Some growth in forensic nursing focus

1985—Nation's First Child Advocacy Center opened in Huntsville, AL

1992—IAFN was formed with 72 nurses, primarily SANEs

1996—86 Programs in the US

2001—SANE began at Children's of Alabama

Adam's Classification System Publication

Now—CAC's in every state, over 6000 members in the IAFN, SANEs are the national standard of care

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SANE Program at COA—

MISSION STATEMENT—

Our mission is to meet the needs of the sexual assault victim by providing immediate, compassionate, culturally sensitive, and comprehensive forensic evaluation and treatment by trained, professional nurse experts within the parameters of the State Nurse Practice Act, the SANE standards of International Association of Forensic Nurses (IAFN) and agency policies.

OUR LOGO—

“I’ve had rainbows in my clouds. And the thing to do it seems to me, is to prepare yourself so that you can be a rainbow in somebody else’s cloud.”

—Maya Angelou—

Often as SANEs, we are one of the first people to interact with survivors in a very vulnerable time; a personal storm. We cannot erase the storm; however we can help them step into hope and healing. We aim to be *the RAINBOW after the storm.*

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SANE Program at COA—

- Small team of concerned and passionate nurses who've completed SANE training
- Function out of the Emergency Department
- Provide care 24/7/365 for acute pediatric and adolescent cases of sexual abuse or assault
 - SANE Program Coordinator—Michelle E. Morris, MSN, RN, CNL, NPD-BC
 - SANE Medical Director—Dr. Kara Huls, MD

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SANE Program at COA—

Began in April 2001, as an Emergency Medicine Fellow's Project by Dr. Don Arnold

- Funding provided through a grant by the Children's of Alabama Foundation of \$300,000
- Initially a blended effort of Emergency Medicine Physicians and SANEs

In 2005, switched to an all SANE model

22 years of providing care for this patient population at COA

- Over 6,500 cases seen
- Annual Average Number of Cases: 287.9
- Monthly Average of 20+ cases
- Over Hundreds of Testimony given in Legal Proceedings

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Care Provided by SANE Program—

- STI Testing and Prophylaxis
- Pregnancy Testing
- Emergency Contraception
- Forensic Evidence Collection
- Focused and Comprehensive Physical Assessment
- Counseling Referrals
- Collaboration efforts with Law Enforcement Agencies, Department of Human Resources, District Attorneys, and Social Workers for legal proceedings

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Workflow of SANE Patient in ED—

Patient Presents to Emergency Department

Triaged

- Chief Complaint
- VS
- ESI 2
- Roomed in ED
- SANE Contacted



SANE Arrives to Emergency Department

Visit Begins

- Introductions
- Obtain History
- Consults as Needed
- Develop Plan of Care
- Obtain Consent
- Prepare for Exam



Examination

Comprehensive Examination

- Head to Toe
- Photodocumentation of any Physical Injuries
- Anogenital Exam with Colposcope (VIDEO)
- Forensic Evidence Collection
- Documentation of Findings



Labs & Medications

Labs & Medications

- Pregnancy Testing
- STI Testing
 - Gonorrhea, Chlamydia, Trichomonas, HIV, Syphilis, HSV, Hepatitis B
- STI Prophylaxis
 - Gonorrhea
 - Chlamydia
 - Trichomonas
 - HIV PEP
- Emergency Contraception



Discharge & Follow Up Care

Post-Care

- DHR
 - Report (1593)
 - Safety Plan
- LEA
 - Local, County, FBI, Homeland Security
 - Report/Case Number
 - Call for Evidence Pickup
- CHIPS Center
 - Follow Up Exam
 - Counseling
- Child Advocacy Center
 - Forensic Interview
 - Counseling Services



Let's Talk about Consent—

- Sexual consent happens when **all** people involved in **any** kind of sexual activity **agree** to take part **by choice**.
 - Should be **clearly** and **freely** communicated
 - Should be for **every type** of activity
 - Previous history of consent does not mean current consent
 - Can be withdrawn at any point
 - Natural physiological responses are not consent



Who Cannot Give Sexual Consent—

Unequal
Power
Dynamics

Unconscious

Asleep

Intoxicated

Incapacitated

Pressured

Threatened

Your
Outfit

Intimidated



Who Cannot Give Sexual Consent—

Unequal
Power
Dynamics

Incon

Intoxicated

UNDERAGE

Benefit

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Age of Sexual Consent in Alabama

AGE	Consent for Sexual Conduct or Related Issues
0-11 years	Deemed incapable of consent
12 years	Cannot consent to have sex, even if the sex is “consensual” and not forced
13 years	Can consent to sex with another party that is 13yo AND no greater than 24 months older in age
14 years	Can consent to sex with another party that is 13yo AND no greater than 24 months older in age
15 years	Can consent to sex with another party that is no less than 24 months younger in age AND no greater than 24 months older in age
16 years	Can consent to sex with another party that is no less than 24 months younger in age AND any adult of ANY age



Common Myths and Misconceptions –

- The *HYMEN*
 - Broken
 - Intact
 - “Pop the Cherry”
- Virginity Testing
- There is **ALWAYS** Evidence of Sexual Assault or Abuse
- The Survivor is Making it Up
- It’s Not Assault if You’re Married
- Perpetrators are Strangers



What's My Role?

- Response to Disclosure
 - Acknowledge the Disclosure
 - Nonjudgmental Position
 - Assess for Safety
 - Avoid Interrogation
- Mandated Reporting
- Connecting Survivor to Services
 - SANE
 - CHIPS
 - CAC
 - LEA
 - DHR



Questions?

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Contact Information—

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