

Compassionate Care for Rape Victims SB 129

Victims of rape or incest deserve immediate access to safe, efficient methods of pregnancy prevention. The Compassionate Care for Rape Victims Bill ensures that this occurs by requiring hospital emergency rooms to give rape victims information about and, if requested by the patient, access to Emergency Contraception (EC). In a recent poll, over 80% of Wisconsin voters report that they favored ensuring access to EC for rape victims.

Surveys Show that Rape Victims Are Denied Pregnancy Prevention Information and Access

A 2006 survey of 109 Wisconsin hospital emergency departments shows that only one-third of Wisconsin hospitals provide emergency contraception on site without exception to rape victims. Forty-two percent do not offer emergency contraception at all and another 23 percent offer it but have exceptions to their policy.

Rape Victims Deserve to be Able to Protect Themselves from a Forced Unintended Pregnancy

In 2004, an estimated 4,775 female sexual assaults were reported in Wisconsin, yet it's estimated that only 36% of rape victims ever report an assault. The average victim age was 15. Nationally, over 300,000 women are raped each year, resulting in over 25,000 unintended pregnancies and approximately 16,000 abortions. About 22,000 of these pregnancies could be prevented if all women who were raped used EC, or 88%.

What is EC?

EC is a safe and effective, Food & Drug Administration (FDA) approved method of preventing pregnancy after unprotected intercourse. It is simply a high concentration of birth control pills that prevents pregnancy when taken within 120 hours of unprotected intercourse. If taken within 12 hours, EC is 99.5% effective and within 72 hours, EC is at least 75% effective in preventing pregnancy. The sooner EC is taken, the more effective it is.

As the FDA, the American Medical Association (AMA) and the American College of Obstetricians and Gynecologists (ACOG) state, EC does not cause an abortion, but is a high concentration of birth control pills. In fact, the most common form of EC, Plan B, contains the hormone progestin, which studies show actually maintains pregnancies in women who have frequent miscarriages.

Providing Emergency Contraception is the Standard of Care for Rape Victims

The AMA and ACOG support widespread access and availability of EC as a means of reducing unintended pregnancies. AMA guidelines require counseling and the provision of EC to rape victims. In Wisconsin, Sexual Assault Nurse Examiners (SANE) are trained to provide information about EC to rape victims.

All hospitals that treat sexual assault victims should follow established standards of care. This ethical obligation extends to all hospitals, including Catholic hospitals, which make up 41% of Wisconsin hospitals. The Religious Directives for Catholic Hospitals specifies that EC is an acceptable form of treatment for rape victims as long as the victim is not already pregnant. The Compassionate Care for Rape Victims Bill accommodates this concern by not requiring hospitals to administer EC to a rape victim who is pregnant as confirmed by a pregnancy test.

The Public Overwhelmingly Supports Compassionate Care for Rape Victims

In an August 2004 survey of Wisconsin voters, 82% reported that they favored ensuring access to EC for victims of rape and incest. This number is significantly higher than the national average, which in a nationwide poll by Lake Snell Perry & Associates and John Deardourf found that 74% of voters favor requiring hospitals to make EC available to rape victims.

In addition, 53% of Wisconsin voters said they would be more likely to vote for a candidate who supports mandatory EC availability and half of voters said they would be less likely to vote for a candidate who supports hospitals denying rape victims access to EC.

CCRV and the New Over-the-Counter (OTC) Status of Plan B

In 2006, the FDA approved Plan B, the most commonly prescribed form of EC, for over-the-counter (OTC) sales to consumers 18 and older. Plan B is available at pharmacies but is kept behind the pharmacy counter and not on store shelves. Women must show proof of age to get Plan B.

Because Plan B is kept behind the counter and subject to pharmacy staff approval, there is a huge need for victims to receive immediate access to EC in hospital emergency rooms. Further, as indicated above, most rape victims are not aware of EC and deserve to be told in hospital emergency rooms about the existence and availability of the medication. Finally, the longer the delay in administering EC to a rape victim, the less effective the medication is in preventing pregnancy. Information about EC and immediate access to EC is the standard of care that each rape victim deserves.