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| **Mary Speaks Out**  **By Mary Suggs and Shirley Paceley *On The Edge – 2012***  Editors Preface: It is important to hear the account of the patients we work with. Mary Suggs is a brave and outspoken survivor of sexual assault. Her words can help us understand the importance of treating every patient as a person, with dignity and respect. Within the confines of a hectic ER we may forget simple things like providing privacy. Mary’s harrowing story is a reminder of the good that we as Forensic Nurses do, and how easy it is, in our busy days, to forget that each person is an individual. The list after Mary’s story by Mary and Shirley Paceley is a good reminder for each of us who care for patients who are victims of violence. (The large font in this article is intentional).  It was March 21, 2003. I got a call to go to my mom’s house to spend the night. After a while, she had to go to the store and she left me alone with a guy that was a sex offender. It was her boyfriend. He had this drink that I didn’t really care for. He shoved it down my throat after I said no. And then he started touching me inappropriately and then after that he took me into the bedroom where he raped me. I tried to get him off of me. Then my mom came home and then it was dinner time. Then he started to touch me in the kitchen and I grabbed a pizza cutter and told him, “You have touched me more than enough.” And then after that I was getting me a drink of milk and I spilled it and I wiped it up. Then he raped me from behind in the kitchen hallway and as he did, he knocked me down and I tried to grab a lamp from a bedroom and he pinned my arms down. I was crying and screaming for my mom to help me. My mom was in the living room passed out and she couldn’t hear me. When he was asleep, I slept with my eyes open and the next day he touched me and I said, “What do you want?” I was still in shock about what he did to me. He said he was sorry for what he done to me and I told him, “You hurt me.” He told me not to say anything. In my mind, I wanted to tell, because it was the right thing to do; because I don’t want anybody else to get hurt. I told my mom that when she left me to go to the store, that he raped me. And my mom blamed me for what he did to me. In April, I talked to my Aunt and she asked me if I wanted to press charges against him and I said I did. I showed the cops where he hurt me. I showed them the living room, the hall and the kitchen, where he raped me. After the meeting with the police, we went to the emergency room. When I went they did the exam and after that, the Rape Crisis worker and the nurse at the ER, when we were talking, the door was open and I didn’t want the whole emergency people to know what happened to me. I remember there was a baby next door to me and I didn’t want the baby to hear or the whole world to know what happened to me. After I asked them they closed the door. They gave me medicine to take for seven days.   When they were positioning me, I told them to be gentle with me because of my disability. They paid attention. Then I told them if they were going to give me a shot, not to do it on my left hand because my veins roll and to be gentle on my right side. They were pretty gentle. After that, they gave me medicine and the Rape Crisis people talked to me.  I want to tell nurses who do these exams that when we go into the ER part, the door should be shut and ensure privacy so no one can hear or see. When examining people with disabilities, you have to be sure not to hurt their bodies. You should ask people how to best examine them; what position is best. The part with my legs was painful. I wanted to be in a different position to where I http://iafn.org/associations/8556/files/mARY%20sUGGS.jpgdon’t have to use my leg muscles and it doesn’t hurt. Most important is always treat people with disabilities with respect.  Mary Suggs *is a survivor of sexual assault and an advocate for people with*  *disabilities. Mary serves on two statewide teams in Illinois to address violence*  *against people with disabilities and is involved in the self-advocacy movement.*  *Mary has spoken before judges, violence providers, disability organizations,*  *medical personnel and others.*    The Top Ten Things We Want Forensic Nurses to Know about People with Disabilities  By Mary Suggs and Shirley Paceley  1. There are a lot of us. People with disabilities experience sexual violence at alarming rates. You may not have met many of us because it is hard to report and our reports are not always taken seriously. As more people with disabilities are speaking up and learning about our rights, you will probably get to know more of us, so please understand…  2. We need you. Many people with disabilities have been oppressed, segregated, isolated and treated unjustly. We need you to understand that we are people just like you. Please see how scared we are to be here. Please know that we need you to help us get justice for what has happened to us. We want you to understand that…  3. We are not our labels. A label doesn’t tell you who I am or what I like or dislike or how I communicate. While my label might help you understand something about how I learn, I am a person first. Remember this, I am a person first! Some labels are very hurtful and I prefer not to be labeled anymore. Take a few minutes and get to know me, not my label. Give me a chance to show you who I am because…  4. We want to be heard. Help us to break the silence by listening with your eyes, listening with your ears and listening with your heart. Look at us, talk with us, listen to us, be with us and you will discover…  5. We are sexual beings. Not everyone sees us as fully human, but you can. We have the same feelings and desires as everyone else. Be sensitive to the fact that some adult women with disabilities may have never had a pelvic examination before. We want to know what is happening and how it will be done. Information is power and we want our personal power so…  6. Ask us what we need. Some of us may need a straw to drink. Some of us can’t swallow easily and need liquid medicine instead of pills. Some of us need a unique position for the exam. Some of us need time to respond to what you say. We are the experts on what we need so…  7. Respect our boundaries. Ask before you touch us, our clothing, or our possessions. It is okay to offer to help, but let us decide what we need help with and how we need help. It is different for everyone. We feel safer when our boundaries are respected. A big part of respect means you will…  8. Accommodate our needs. To assure that your services are accessible, make individualized accommodations. Some of us need an American Sign Language Interpreter; some of us need written documents in Braille or large print; some of us need pictures to communicate; some of us need physical assistance. Do what is needed to make the exam equal for everyone because we want you to….  9. Respond to our trauma. Do not focus on our disability, but the trauma we have experienced. How you respond to us can help us begin to heal and regain our hope for a safe and happy life, or it can cause us further trauma. We know that you care about survivors of sexual trauma and we….  10. Thank you. Thank you for treating me with respect. Thank you for taking the time to understand what I need. Thank you for asking my permission before helping me. Thank you for sharing information. Thank you for being patient as I learn to trust you. Thank you for believing that I deserve justice. Thank you for reminding me that I have value.   |  |  | | --- | --- | | Nursing Framework for Responding to Sexual Assault Survivors with Disabilities by Sheryl Samuelson, Ph.D, RN | | | Key elements of crisis theory | Individual’s perception of the event Individual’s coping resources Individual’s support available | | Individual’s perception | Powerlessness Violation of boundaries Fear Failure | | Factors that influence response to trauma | Shock—may be more physical Receptive and expressive communication skills Understanding of emotions Cognitive abilities: plan, follow-up Coping Resources Support (possible isolation) | | Key Interventions | Offer Hope, Help, Support Talk with the person (not others) Make simple, clear plan in writing Reinforce the positive Call in 24 hours to check in |   Did you know? The “Patient Protection and Affordable Care Act” mandates standards are developed to address independent access to medical equipment by people with disabilities to the maximum extent possible.  http://iafn.org/associations/8556/files/mARY%20sUGGS.jpgMary Suggs *is a survivor of sexual assault and an advocate for people with disabilities. Mary serves on two statewide teams in Illinois to address violence against people with disabilities and is involved in the self-advocacy movement. Mary has spoken before judges, violence providers, disability organizations, medical personnel and others.*  http://iafn.org/associations/8556/files/Shirley%20Paceley.jpgShirley Paceley *has a Masters Degree in Clinical Psychology http://iafn.org/associations/8556/files/mARY%20sUGGS.jpgand has worked with people with disabilities for 38 years. Shirley is on the Board of Directors of End Violence Against Women International and the Editorial Board of Sexual Assault Report. Shirley is a national trainer, published author, counselor, activist and visionary.* |