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Position on House Bill 3111

Katelyn Ramsey

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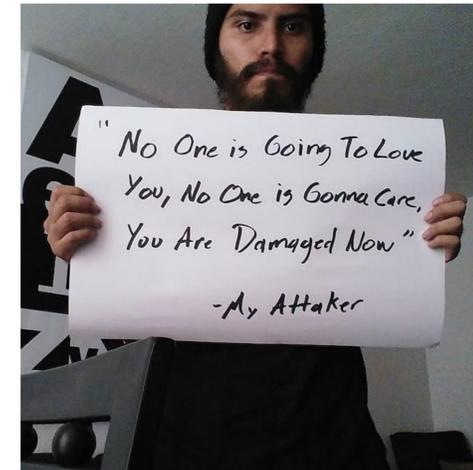
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House Bill 3111

This bill provides sexual assault victims with a Bill of Rights that fully defines sexual assault as the continuation of vaginal intercourse after consent has been taken away.

Support of HB 3111

This Bill should be passed because it benefits and protects those that have had to endure sexual assault.



Proposition 1

This bill should be passed because it provides a clear definition of sexual assault.



Having a clear definition of sexual assault is important, for without it, it can hurt both the victim and the proposed perpetrator. It has been shown in numerous studies that anywhere from two to ten percent of all sexual assault cases are falsely reported (Lisak et al.) As such, because of the loose definition today, innocent people get charged with crimes they did not commit. On the other hand, it also prevents some victims from reporting their assault because they are not sure if what happened to them counts as sexual assault. In fact, studies have shown that today only one in four people will come forth and claim they were sexually assaulted (Lonsway and Archambault). Based on these numbers, it is clear that if a concrete definition existed, then there would be less confusion on the matter and the actions taken by the perpetrator would be easily categorized as assault.

Summary Statement / What is the Impact?

I support House Bill 3111 for it will enable sexual assault survivors with a voice as well as options when handling their cases. Without a clear definition of sexual assault many cases take more time than necessary and while the legal portions are being fought over, the evidence then expires and is not longer useful to protect the survivor. With this bill, these problems will be fixed. By just stating sexual assault is the continuation of vaginal intercourse after consent was withdrawn, it excludes those that have been forced to participate in anal and oral intercourse. These people are still assaulted and should be protected just as much as someone who was forced to have vaginal intercourse. With this, all states should adopt a bill like this one to ensure the safety of everyone in their communities.

Proposition 2

This bill should be passed because it allows the evidence to be preserved so that it can be used later to protect the victim as well as the general public.



In one study it was found that some healthcare providers would not follow the protocols for the rape kits (Parnis and Du Mont). Because of this, there will missing pieces of evidence. With pieces of evidence missing, this in turn will make the job of forensic scientists harder to bring justice to the victim. In addition, studies have shown that previously, health care providers would throw the clothes of the victim on the floor, thus contaminating it and decreasing its forensic value to be used later (Eisert, J. et al.). With this bill, more precaution and education concerning the preservation of evidence will be administered and therefore, should the survivor choose to prosecute the rapist presently or in the future, the evidence will still be viable.

Proposition 3

This bill should be passed because it allows the victim to have a sense of control or agency when all else seems to be spiraling out of control around them.



Due to the trauma that has occurred, many of the people that have experienced sexual assault end up showing signs of depression as well as post-traumatic stress disorder. In fact, in one study they found that compared to those that have not been assaulted, the survivors were more likely to show and experience depressive symptoms and behaviors (Atkeson et al.). Because they now have to deal with all of these extra health problems, the victims will feel lost and overwhelmed. Because the bill provides the victim the right to be informed about the possible actions that can be taken by the law as well as with the forensic evidence, he or she will have more comfort and confidence when dealing with the proceeding actions.

Resources

Atkeson, et al. "Victims of rape: Repeated assessment of depressive symptoms." *Journal of Consulting and Clinical Psychology*, vol. 50, no. 1, 1982, pp. 96-102. APA PsycNET, <https://psycnet.apa.org/record/1982-10032-001>.

Eisert, Peter, J., et al. "CSI." *Critical Care Nursing Quarterly*, vol. 33, no. 2, April-June 2010, pp. 190-199. Ovid, <https://oce.ovid.com/article/00002727-201004000-00011/HTML>.

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Parnis, D. and Du Mont, J. "Examining the standardized application of rape kit: an exploratory study of the post-sexual assault professional practices." *Health Care for Women International*, vol. 23, no. 1, May 2002, pp. 846-853. Taylor & Francis healthsciences, <https://www.tandfonline.com/doi/abs/10.1080/07399330290112362>.