Chair Barker, Vice-Chairs Olson and Williamson, and members of the House Committee on Judiciary,

On behalf of Rapid SAVE Investigation, I submit this testimony in support of Senate Bill 795.

I am a nurse with 5 years of experience, currently working as a sexual assault nurse examiner (SANE) for Rapid SAVE Investigation, an agency that provides medical-forensic care to patients who have experienced sexual assault. I am also the SANE Coordinator for the Oregon Attorney General's Sexual Assault Task Force. In this role, I organize trainings for new and experienced SANEs across the state, coordinate the Oregon SANE Certification Commission, and staff the Medical Forensic Committee. I am a member of the International Association of Forensic Nurses. Prior to becoming a nurse, I had five years of experience as a victim advocate.

Advocates are an essential component of any medical-forensic exam. As an advocate, I experienced firsthand the relief and gratitude patients expressed upon finding that I could stay with them to offer support, connect them to resources, and facilitate communication. Prior to my arrival, few of the patients I met were aware that advocates existed. However, once I explained my role, not a single patient ever declined my services.

As a SANE, I have a new perspective and a new appreciation for the role advocates play. There is a noticeable difference in the exams I perform with an advocate, compared to the exams I perform without an advocate. Medical-forensic exams are inherently challenging and can be traumatizing experiences. Advocates are able to focus exclusively on the patient's emotional state, physical needs, and overall comfort, which leads to a more positive and less traumatizing experience for my patients. With my patients in a better state of mind, they are more likely to stay engaged with the medical system, allowing my exam to flow more smoothly and medical care to be more thorough. Advocates are also able to connect patients to numerous resources and continue to stay engaged long after the medical-forensic exam is done.

Over the hundred-odd exams I have performed, I have seen an advocate's services declined in person only once. However, I have see their services declined more frequently when health care professionals, rather than advocates themselves, attempt to explain the advocate role. This is a lost opportunity, as health care professionals cannot understand all the nuances of what an advocate can provide; many health care professionals do not even fully grasp what an advocate does, as the two fields rarely interact. For this reason, I always call an advocate when I respond to an exam. Advocates are the experts in explaining advocacy, and it would be a disservice to my patients to allow them to miss out on the opportunity for these services due to incomplete understanding.

I support SB 795 because it is consistent with national best practice and because I see the difference that advocacy makes in the lives of my patients. I urge you to support this bill as well.

Sincerely,

Nicole Broder, BSN, RN, OR-SANE, SANE-A