

To whom it may concern,

I am writing today in support of the proposal addressing the need for continuity in sexual assault testing and support services. This is a very important service that warrants immediate attention to ensure quality treatment to victims and design consistent protocols in testing procedures and evidence collection.

Over my twenty-five-year career, I have witnessed firsthand the failure of systemic processes and procedures to secure truth and justice for victims. It is heart wrenching to see the countenance of victims fall when justice is not upheld due to a failure to uphold the highest integrity in the evidence collection process. Not only does this provide outcomes that are unacceptable, but it also further victimizes the very people it is meant to protect.

It is well documented that the most grossly underreported crime is sexual assault. Victims tend to avoid reporting offenses due to the stigma of their trauma. They have been humiliated, their dignity has been stripped away, and they report feeling shame and guilt.

Guilty of a crime that has been committed against them. This is a terrible injustice to victims, and it is proper to correct protocols to protect the innocent from further victimization. By implementing this proposal, integrity in the process can be restored and our hope is that victims and professionals can have faith in the process once again.

By centralizing this specialized care, victims will be treated with the highest degree of respect and their confidentiality will be much easier to maintain. A cross-disciplinary trauma responsive approach would support better long-term health outcomes. There is clear evidence that victims that experience sexual trauma are less likely to attend follow up appointments with health care professionals. It is also well known that survivors of sexual trauma don't feel safe attending gynecological care and annual health exams. Understandably, this can trigger trauma responses that are rooted in their original victimization.

I understand that this proposal may not be perfect in addressing all the concerns surrounding treatment and medical care for victims of sexual trauma. However, it is very comprehensive and allows us to start the process and have conversations.

I served as a county supervisor during the era of mental health redesign. It has been very gratifying to see the shortfalls and gaps in services be corrected. Through regionalization this was possible. On a micro scale this redesign for S.A.N.E. can duplicate the process that we know has been proven effective.

I appreciate you taking time to read my thoughts. I look forward to further conversations to move this process forward. I am in this for the long haul and plan to see it through to its much-needed end.

Regards,

*Mark Doland*

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