State of Arkansas
86th General Assembly
Regular Session, 2007

By: Senator Salmon

For An Act To Be Entitled

AN ACT TO CREATE A MODEL ACT TO GUARANTEE SEXUAL ASSAULT SURVIVORS INFORMATION REGARDING EMERGENCY CONTRACEPTION IN HOSPITAL EMERGENCY DEPARTMENTS;
AND FOR OTHER PURPOSES.

Subtitle

AN ACT TO GUARANTEE SEXUAL ASSAULT SURVIVORS INFORMATION REGARDING EMERGENCY CONTRACEPTION IN HOSPITAL EMERGENCY DEPARTMENTS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code Title 20, Chapter 13 is amended to add an additional subchapter to read as follows:

(a) The General Assembly finds that:
(1) One (1) of every six (6) women in the United States will be the victim of a sexual assault;
(2) Forty-four percent (44%) of the victims of a sexual assault are under eighteen (18) years of age, and eighty percent (80%) of the victims of a sexual assault are under thirty (30) years of age;
(3) It is estimated that sixty percent (60%) of all sexual assaults are not reported;
(4) A woman who is the survivor of a sexual assault may face the additional trauma of an unwanted pregnancy or the fear that pregnancy may
result;

(5) Each year, between twenty-five thousand (25,000) and thirty-two thousand (32,000) women in the United States become pregnant as a result of sexual assaults, and approximately twenty-two thousand (22,000) of these pregnancies could be prevented if these women used emergency contraception;

(6) Standards of emergency care established by the American College of Emergency Medicine and the American Medical Association require that sexual assault survivors be counseled about their risk of pregnancy and offered emergency contraception;

(7) The National Protocol for Sexual Assault Medical Forensic Examinations issued by the United States Department of Justice Office on Violence Against Women recognizes pregnancy as an often overwhelming and genuine fear among sexual assault survivors and recommends that health care providers discuss treatment options with patients, including reproductive health services;

(8) The federal Food and Drug Administration has declared emergency contraception to be safe and effective in preventing unintended pregnancy and has approved over-the-counter access to the medication for women over eighteen (18) years of age;

(9) Emergency contraception is designed to prevent pregnancy if taken within one hundred twenty (120) hours after unprotected sexual intercourse, but it is most effective if taken within twenty-four (24) hours after unprotected sexual intercourse;

(10) There are inconsistent policies and practices among Arkansas hospitals for dispensing emergency contraception and providing education to sexual assault survivors; AND

(11) Because emergency contraception is time-sensitive and a sexual assault survivor may have delayed seeking hospital treatment, it is critical that she be informed of this option at the time of her treatment.

(b) The purpose of this subchapter is to:

(1) Promote awareness of the availability of emergency contraception for sexual assault survivors as a compassionate response to their traumas; and

(2) Reduce the number of unintended pregnancies and induced abortions that result from sexual assault.

As used in this subchapter:

(1)(A) "Emergency contraception" means a drug approved by the federal Food and Drug Administration that prevents pregnancy after sexual intercourse, including without limitation oral contraceptive pills.

   (B) "Emergency contraception" does not include RU-486, mifepristone, or any other drug or device that induces a medical abortion;

(2) "Sexual assault survivor" means a female who:

   (A) Alleges or is alleged to have been the victim of sexual assault or to have been raped; and

   (B) Presents as a patient for treatment with regard to the sexual assault or rape.

20-13-1403. Emergency contraception information required.

(a) All health care facilities that are licensed in this state and provide emergency care to sexual assault survivors shall amend their evidence-collection protocols for the treatment of sexual assault survivors to include informing the survivor in a timely manner of the availability of emergency contraception as a means of pregnancy prophylaxis and educating the sexual assault survivor on the proper use of emergency contraception and the appropriate follow-up care.

(b) This section does not require:

   (1) A health care professional who is employed by a health care facility that provides emergency care to a sexual assault survivor to inform the sexual assault survivor of the availability of emergency contraception if the health care professional refuses to provide the information on the basis of religious or moral beliefs; or

   (2) A health care facility to provide emergency contraception to a sexual assault survivor who is not at risk of becoming pregnant as a result of the sexual assault or who was already pregnant at the time of the sexual assault.

(c) The General Assembly encourages each health care facility to provide training to emergency room staff concerning the efficacy of emergency contraception and the time-sensitive nature of the drug.

(d)(1) Because emergency contraception is time-sensitive and a sexual
assault survivor may seek information on or direct access to emergency contraception to prevent an unintended pregnancy resulting from the assault instead of or before seeking hospital treatment, it is critical that a sexual assault survivor has accurate information about the availability and use of emergency contraception.

(2) Therefore, the General Assembly encourages:

(A) An entity offering victim assistance or counseling and rape crisis hotlines to include information concerning the availability and use of emergency contraception; and

(B) A licensed or registered pharmacy in the state of Arkansas to distribute information concerning the availability and use of emergency contraception.

/s/ Salmon