



April 1, 2020

Dear Honorable Members of the House and Senate,

It has come to our attention that, recently, one or more of you may have received correspondence from a business promoting the use of do-it-yourself (DIY), at-home sexual assault evidence collection kits (see attached). We are writing to express our continued **support of HB 1495**—introduced in December 2019—**prohibiting the sale of over-the-counter rape test kits**. Public statements and positions of professional organizations regarding the use of DIY kits can be found [here](#).

Despite the national COVID-19 pandemic, **we reiterate our objection to any promotion, sale, free distribution, or use of the DIY sexual assault evidence kit** for the following reasons:

- The [medical forensic exam](#) comprises significantly more than evidence collection. Exams focus on the health and well-being of the survivor. No aspect of the DIY kit addresses pregnancy, Human Immunodeficiency Virus (HIV), sexually transmitted disease (STD) prevention, or the short- or long-term physical and mental health consequences that result from sexual violence victimization.
- DIY kits discourage the survivor from seeking critical health care and advocacy services.
- DIY kits are falsely marketed as an easy way to collect “evidence” when no reason exists to believe the “evidence” collected would be admissible in a court of law.
- In New Hampshire, NH RSA 21-M:8-c includes the [protocol](#) outlining the expectations of a sexual assault medical forensic exam. A patient who receives this exam can report the crime to law enforcement at the time of the exam, at a later date as defined by state statute, or anonymously.

Despite the challenges that COVID-19 presents, a patient who has experienced sexual assault—like any person experiencing a health emergency—will have access to the examination and treatment they need. [Sexual Assault Nurse Examiner \(SANE\) programs are open](#) and caring for patients, adapting the location and delivery of care as needed. SANEs are working closely and collaboratively with emergency departments, advocacy, and law enforcement to ensure the patient knows where to receive care.

Clinicians have a responsibility to remove barriers to care for all patient populations across the lifespan. During this moment of the national pandemic, we must continue to express fidelity to patients by ensuring essential access to trauma-informed medical care and justice for patients who experience violence. We find it unconscionable that companies are taking advantage of this national emergency to create barriers to critical medical care by promoting incorrect, misleading, and potentially harmful information.

Sincerely,

Lyn M. Schollett, Executive Director
New Hampshire Coalition Against
Domestic & Sexual Violence

Jennifer Pierce-Weeks, CEO
International Association of Forensic Nurses