



# Senate of the Associated Students of the University of Nevada

*86<sup>th</sup> Session, 2018-2019*

## A RESOLUTION IN SUPPORT OF AB-124

Resolution Number: 140

Authored By: Senator Alvarez

Sponsored By: Committee on Public Affairs

*Whereas*, in the state of Nevada, a person is guilty of sexual assault if the person subjects another person to sexual penetration, or forces another person to make a sexual penetration on himself or herself or another, or on a beast, against the will of the victim or under conditions in which the perpetrator knows or should know that the victim is mentally or physically incapable of resisting or understanding the nature of his or her conduct;

*Whereas*, in the state of Nevada, lack of consent results from force, threat of force, or physical or mental incapacity of the victim;

*Whereas*, there is no case law or statutory basis to require freely given consent or affirmative consent;

*Whereas*, 1 out of 6 American women has been the victim of an attempted or completed rape in her lifetime, according to the Rape, Abuse & Incest National Network (RAINN);

*Whereas*, about 3% of American men have experienced an attempted or completed rape in their lifetime, according to RAINN;

*Whereas*, 9 out of every 10 victims of rape are female, according to RAINN;

*Whereas*, 7 out of 10 rapes are committed by someone known to the victim, according to RAINN;

*Whereas*, 27% of victims at the University of Nevada told no one, according to the 2016 Sexual Conduct and Campus Safety Survey;

*Whereas*, only 9% of victims reported the sexual assault to a University of Nevada, Reno; the majority contacted only one office/service, according to the 2016 Sexual Conduct and Campus Safety Survey;

*Whereas*, the University of Nevada, Reno has a number of resources for sexual assault survivors, such as Nevada Cares, It's On Us, Crisis Call Center Campus Victim Advocates, Equal Opportunity and Title IX, Counseling Services, Sexual Assault 24-Hour Crisis Line, Student Health Center, Victims of Crime Treatment, Downing Counseling Clinic, University Police Services Dispatch, University Police Services Detectives, Student Conduct Office, Residential Life, and Human Resources;

*Whereas*, the Campus Pharmacy at the University of Nevada, Reno provides a discounted price of emergency contraception at \$20;

*Whereas*, the Student Health Center and Campus Pharmacy operates on the hours of 8am-5pm and is closed during the weekends and holidays;

*Whereas*, students at the University of Nevada, Reno may explore additional external opportunities for treatment if the Student Health Center is closed, such as local hospitals, emergency care facilities, Reno Police Department, etc.;

*Whereas*, according to the Mayo Rape Crisis Centre, some rapist may use condoms out of habit, for their sexual health or to avoid leaving evidence of the rape;

*Whereas*, the presence of a condom does not indicate whether or not the victim consented;

*Whereas*, emergency contraception is defined as a birth control method to prevent pregnancy in women that can be used after a sexual assault or rape, when a condom breaks or diaphragm slips out of place, when a woman forgets to take birth control pills, when you have sex and do not use any birth control, and when any method of birth control is not used correctly, according to MedlinePlus;

*Whereas*, emergency contraception is available over the counter at drugstores and at some family planning clinics;

*Whereas*, emergency contraception is more effective the sooner an individual takes it;

*Whereas*, if a victim of sexual assault is being treated, the victim may suffer from anxiety and trauma if the sexual assault was done without a condom and does not have emergency contraception readily available;

*Whereas*, Plan B One-Step, a brand name emergency contraception costs, on average, about \$40-\$50, which is another additional expense to the livelihood of the victim;

*Whereas*, AB-124 requires a hospital or independent center for emergency medical care to take certain actions when treating a victim of sexual assault;

*Whereas*, AB-124 also requires a hospital or independent center for emergency medical care to provide emergency contraception to a victim of sexual assault;

*Whereas*, AB-124 seeks to amend NRS Chapter 442 by adding an additional section to read as follows:

**1. Each hospital and independent center for emergency medical care shall adopt a written plan to ensure that:**

**(a) Each female victim of sexual assault or attempted sexual assault who is treated by the hospital or independent center for emergency medical care is:**

**(1) Provided with medically and factually accurate written information concerning:**

**(I) Emergency contraception and prophylactic antibiotics including, without limitation, possible side effects of using those medications and the locations of facilities or pharmacies where those medications are available; and**

**(II) Other services available to victims of sexual assault, including, without limitation, counseling, a list of clinics and other facilities that specialize in serving victims of sexual assault and a list of locations that provide testing for sexually transmitted diseases;**

**(2) Provided with an oral explanation of the written information provided pursuant to subparagraph (1) in a language that the victim understands;**

**(3) Provided contact information for law enforcement or an opportunity to meet with an officer to file a complaint; and**

**(4) Offered the opportunity to receive any emergency contraception or prophylactic antibiotics available at the hospital or independent center for emergency medical care and**

provided any such treatment requested immediately in accordance with accepted medical standards; and

(b) Each person responsible for carrying out the tasks described in paragraph

(a) Receives training concerning the performance of those tasks.

2. Each hospital or independent center for emergency medical care shall submit a written plan adopted pursuant to subsection 1 to the Division for approval. The Division must approve the plan if the Division determines that the plan is likely to meet the objectives prescribed by subsection 1. If the division does not approve a plan:

(a) The Division must provide to the hospital or independent center for emergency medical care a summary of the reasons for the rejection; and

(b) The hospital or independent center for emergency medical care must submit to the Division, not later than 30 days after receiving the summary pursuant to paragraph

(a), a revised plan.

3. As used in this section:

(a) “Emergency contraception” means methods of birth control which, when administered within a specified period after intercourse, may prevent pregnancy from occurring.

(b) “Sexual assault” means a violation of NRS 200.366 or 200.368.

*Whereas*, “prophylactic” in this context means “intended to prevent diseases”;

*Whereas*, section 1 of this bill requires each hospital or independent center for emergency medical care to adopt a written plan to ensure that a victim of sexual assault who is treated is provided with medically and factually accurate written information concerning emergency contraception, prophylactic antibiotics and certain other services in a language the victim understands;

*Whereas*, section also requires the written plan to be approved by the Division of Public and Behavioral Health of the Department of Health and Human Services;

*Whereas*, the National Protocol for Sexual Assault Medical Forensic Examinations declares that when rape or other forms of sexual assault occur, “victims deserve competent and compassionate care”;

*Whereas*, having a positive experience with the criminal justice and health care systems can contribute greatly to a victim of sexual assault's overall healing, according to the Center for Reproductive Rights;

*Whereas*, at least ten States have laws that require hospital emergency rooms to provide emergency contraception to rape survivors who want it, such as California, Connecticut, Massachusetts, Minnesota, New Jersey, New Mexico, New York, Oregon, South Carolina, and Washington, according to the Center for Reproductive Rights;

*Whereas*, three states have laws that require hospitals that require hospitals to inform rape survivors about emergency contraception, although not necessarily to provide it on demand, such as Arkansas, Colorado, and Illinois, according to the Center for Reproductive Rights;

*Be it resolved that*, the Associated Students of the University of Nevada, Reno is in support of the passage of AB-124 by the Nevada State Legislature if the definition of victims extend to all persons who experience sexual assault;

*Be it further resolved by the Senate of the Associated Students*, a copy of this resolution be sent to University President Marc Johnson, Mayor Hillary Schieve, Governor Steve Sisolak, Assemblywoman Connie Munk, Assemblywoman Michelle Gorelow, Assemblyman Michael C. Sprinkle, Assemblyman Richard Carrillo, Assemblyman Alex Assefa, Assemblywoman Bea Duran, Assemblywoman Rochelle T. Nguyen, Assemblyman Tyrone Thompson, Assemblyman Gregory T. Hafen, Assemblyman John Hambrick, Assemblywoman Lisa Krasner, and Assemblywoman Robin L. Titus.

Adopted in Senate on March 6th, 2019

Attest:

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Andrea Godoy, Secretary of the Senate

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Anthony Martinez, Speaker of the Senate

