

Role of Forensic nursing in Sexual Assault Forensic Examination Including Protection of Children from Sexual Offences 2012

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Abstract

Sexual offence cases are a common problematic crime for prosecution. The conviction rate of these cases is significantly less due to lack of circumstantial evidences and in many cases there is only the version of the survivor vs accused. Medicolegal evidence play a pivotal role in conviction of accused. Sexual assault nurse examiner (SANE) is an established concept in many countries where trained Forensic nurses plays an important part in history taking, prompt collection of evidence and documentation of injuries, resulting in timely examination of Sexual assault survivors with a sensitive and humanitarian approach. This is system is still not in practice in our country. The current system is based on the examination of survivors in already overloaded emergency department of hospitals by doctors involved in life saving procedures leading to delay in examination of survivor. The article intends to outline and educate the nursing professionals about the medicolegal examination in sexual assault case and POCSO cases, evidence collection, and other aspects. The article deliberate the basic knowledge about the medicolegal examination procedures, preservation of samples with proper chain of custody, SAFE Kit and the POCSO act of 2012 that will be helpful for forensic nursing professionals orientation and training.

Keywords: Sexual Assault Nurse Examiner; Sexual Assault Forensic examination (SAFE); SAFE Kit; Forensic Nursing; POCSO Act.

INTRODUCTION

Sexual offense cases are always a problematic crime for prosecution as there are generally

no eyewitness and the only evidences in most of the cases are scientific evidences. As per National crime record bureau (NCRB) data 2020, India has a Conviction rate of 33.3% in metropolitan cities with more than 2 million population. This low rate of conviction could be improved by timely Medicolegal examination and thorough evidence collection.¹ The Sexual assault forensic examination (SAFE) in our country is doctor based and is mostly conducted in the emergency departments of hospitals where management of patients with life threatening conditions is the top priority. In adult female survivors though female doctors are preferred but still the examination could be done by a male doctor after consent. But in cases of child

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victims as per Protection of Children from sexual offences (POCSO) Act, a female doctor should examine the female child, and non-availability of female doctor at that duty time may also lead to delay in examination and evidence collection.² To overcome these problems many countries have introduced the concept of dedicated and trained nursing professionals called as Sexual Assault Nurse Examiner (SANE) for medicolegal examination in sexual assault cases. They are trained and authorized nursing professionals to conduct the SAFE examination in priority with a sensitive humanitarian approach to already traumatized survivors.^{3,4} In our country the concept of SANE is yet to be introduced. This article details the basic knowledge about the role of nursing professionals in SAFE cases, evidence collection, to act as guide in routine Medicolegal practice.

Important aspects of SAFE for Forensic nursing professionals for guidance and orientation

The detailed history taking is an important aspect of SAFE including date and time of alleged incidence, any history of intoxication, physical assault or restraint, etc. The Ministry of Health and Family welfare, Government of India has prescribed a detailed proforma for SAFE which included the columns for detailed history.⁵ History should be elicited in the survivors own wordings without influencing, should be done in the confidential manner and with a sensitive approach.

PREREQUISITES

- The examination should be conducted in a well lit room with comfortable surroundings for the survivors.
- The examination should be done confidentially with minimum number of personnel present in the room.
- Articles and requirements for SAFE should be made ready before the starting the examination. This prevents missing out on any evidence and will avoid last-minute confusion. Forensic nurses should prepare a list of requirements needed with a checklist. Then every day, check all items for evidence collection mentioned in the checklist are available i.e., the Sexual offense forensic examination kit (SAFE

kit).⁶ Fig.1



Fig. 1: SAFE Kit (1) Cotton Swab stick, (2) Test tube vials (violet, grey), (3) FTA card, (4) Lancet, Syringe, needle and tourniquets, (5) Scissors, (6) Nail cutter, (7) Glass slide, (8) Magnifying lens, (9) Gauze piece, (10) Distilled water or normal saline, (11) Urine container, (12) Inch tape and Gloves as per size of examiner.

- SAFE kits are readily available on GEM portal of Indian government and could be procured by the concerned authorities. But still if it is unavailable, it consists of things which are already present in hospital supplied. The hospitals/centers can make their own kits by compiling different materials. Fig. 1 is an example, which has been made by articles coming in routine hospital supply.
- Articles like needles, lancets, nail cutters, nail scrappers, and swab sticks are used for only one case then they should be disposed off properly and not to use for another case, it can lead to contamination of DNA samples, etc.

CONSENT

- Informed written consent in the prescribed manner should be taken from Survivor/legally accepted guardian before the medicolegal examination.
- It should be in their language and well understandable about the entire procedure, evidence collection from the body and genitals, and treatment. All the queries should be clarified.
- Survivors aged 18 years and above can give consent for SAFE and further management.
- In a situation like age less than 18

years, physical and mental incapacities, intoxicated state, or language barrier, one should seek consent from parents/guardians, special educator, interpreter, and support person from the child welfare committee.

- Survivor has full rights to refuse medicolegal examination at any point in time and no examination of sexual offense survivors to be conducted on refusal.⁵ In such cases, the refusal of the survivor needs to be documented and informed to concerned police personnel.

MEDICOLEGAL RECORDS MAINTENANCE

The register /digital records should be adequately maintained, which involves the following details are

- Proper numbering of MLC cases
- Preliminary details, i.e., name, age, and gender, police station, investigating officer
- Brought by whom
- Samples preserved/Evidence collected
- Assisted by nursing officer name and examining doctors with legibly handwritten register
- The name and signature of the constable or police officer who collected the report and samples should be mentioned in the record

The confidentiality of the register should be maintained, and data can be utilized for reporting to the concerned authority for administration purposes and research without revealing the identity of the survivor.

SAFE PROCEDURE OF SURVIVOR

The aim of the SAFE examination should be proper visualization of injuries, genital examination, and documentation of exact findings in scientific language.

- **Step 1:** Prior to the examination, ensure a good light source is present
- **Step 2:** Documentation of two identification marks (I.D Mark). It is necessary to mention the two (I.D mark) in the report to confirm that it examined the same person at the prosecution time. I.D marks include

moles, scars, and tattoo marks on the body, exposed parts like the face, upper limb, and lower limb.

- **Step 3:** Asking the person to stand on white paper on the floor and undress. If possible, look for falls of debris for evidence collection.
- **Step 4:** Outer and inner clothing should be preserved separately, and white paper should be kept on the floor. A clean pair of clothing needs to be provided to the survivor.
- **Step 5:** General and physical examination should be done in a standing position.
- **Step 6:** Genito-anal examination, which includes knee, and elbow position for the anal region and lithotomy position for vaginal orifice.^{5,7-9}

EVIDENCE COLLECTION

A forensic nurse can assist with evidence collection, which may vary from case to case. The evidence like swabs from bite marks, nail clippings and scrapping, vaginal swabs, oral swabs and their smears, pubic and scalp hair combing, clothes, blood on gauze/FTA card, blood for alcohol and drugs, etc.⁵

Steps for collecting blood in Flinders Technology associates (FTA) card¹⁰

- **First step:** Wear gloves and mask.
- **Second step:** Open the pack of FTA card. (Fig. 2)



Fig. 2: Flinder's Technology Associate card for blood collection for DNA analysis

- **Third step:** Fill in the name, Id number, and date.
- **Fourth step:** Use of lancet and prick the pulp of the finger.
- **Fifth step:** Keep a drop of blood in a circle of FTA card.
- **Final step:** Allow drying at room temperature.

Note: If FTA card is not available, we can use alternatives like gauze pieces for blood sample preservation in same manner.

Do's	Don't do
Use of lancet for pricking	Use of needle for pricking leads to overstaining
Use of mask and gloves	Without mask and gloves Talking and laughing (Splitting of examiner's saliva in FTA leads to artefacts)

Do's and Don't do for Blood preservation in FTA Card

IMPORTANCE OF TRACE EVIDENCE SAMPLE PRESERVATION

All the sample preservation is mandatory if the case is reported within 72 hours without taking a bath as mentioned in Table no. 1. In Survivors, spermatozoa can be detected within 72 hours from the vagina.¹¹ The presence of vaginal discharge can suggest a sexually transmitted disease by the sexual assault that gives a clue for the duration of the incident. The

Table 1: Samples preservation with examination findings

Samples to be preserve	History/examination findings
Scalp Hair	
Pubic Hair	
Cut strands of pubic hair	Contact during the intercourse (not changing clothes/no bathing)
Pubic hair combing	
Head Hair combing	DNA of accused can be detected
Clothes	
Oral swab & others swab	Oral sex, Bite mark on victim
Both Hand swab for finger in between debris	Detection of accused DNA
Blood for DNA analysis	DNA Matching
Blood for blood grouping	Blood stains found in accused can be matched
Blood and urine for testing Alcohol/drugs	Under influence/intoxication by drug/alcohol
High vaginal swab (survivor)	Spermatazoa and semen detection
Cervical swab (survivor)	DNA of accused can be recovered (During struggle with accused at time of incident).
Nail clipping and nail scrapping	

presence of injuries like bite marks implies taking a swab from the site and documentation of injuries helpful for the alleged time of the incident.¹²

PACKING AND SEALING OF SAMPLES

- The preserved samples are sealed in a paper bag/paper envelope separately with details of the case, type of sample, date and time of collection, and signatures of the sealing person.
- The samples should be air dried before preservation and packaging to prevent fungal growth that will destroy the DNA evidence.¹³
- All the samples should be handed over to IO along with a sample seal for all samples, as the samples might be sent to different divisions of the forensic science laboratory/different FSLs also.

MEDICAL LAB INVESTIGATION

- Urine pregnancy test to be conducted
- Blood investigation like HIV, HBSAG, VDRL should be conducted so as to rule out transfer
- Other investigation like blood sugar level, serum, CBC, electrolytes, hormonal analysis may be conducted depending upon the clinical requirement

DRAFTING REPORT

A forensic nurse will note their examination findings in an objective manner and get it confirmed and counter signed by the doctor. The role of the forensic nursing like in assistance and recording of injuries needs to be specified in the report.

SUMMON TO WITNESS IN COURT

Honorable court issues summons to give their testimonies in the concerned case to concerned Medical professional who have signed, prepared the Medicolegal reports and were involved in SAFE. It is a must to attend the court to prove the Medicolegal reports and give clarification to the queries raised by prosecution and defense counsels.

POCSO ACT OF 2012

The forensic nurse/Sexual assault examiner must

be aware about the detailed provisions about the POCSO Act of 2012. The Act details the issue of sexual offences against children, including sexual assault and harassment and pornography. The act describes that if any child below 18 years of age, including males and females, suffer from any sexual abuse, it is mandatory to report to the police or concerned authority. Failing to report leads to a punishable offense. The medicolegal examination should be conducted in the presence of parents and legally accepted guardians.¹³ The report should be forwarded to the concerned authority with one copy to the victim free of cost.

CONCLUSION

Forensic nurses if involved in SAFE of adult and POCSO survivor's will lead to a prompt medicolegal examination of sexual assault survivors and evidence preservation leading to higher conviction rates. They will not only help in the humanitarian examination of the survivor with a sensitive approach but will also take off load from already stressed out Emergency doctors leading to a better patient care.

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