



**HOW  
DO WE  
MAKE IT  
BETTER?**

# I HAVE SEEN

the devastating consequences of interpersonal violence in individuals and families through my work as a psychiatric nurse. Anyone who reads the papers or listens to the news knows that violence and crime are huge societal problems. My studies focus on gender-based violence in young women. Most young women don't tell anyone they've experienced violence, but if you don't tell anyone, you can't get help. Through my research, I explore societal barriers to reporting and ways to encourage and facilitate help seeking in young women. By preparing advanced practice nurses in the forensic program, we have an opportunity to make the world a better and safer place as we help individuals and families affected by violence.



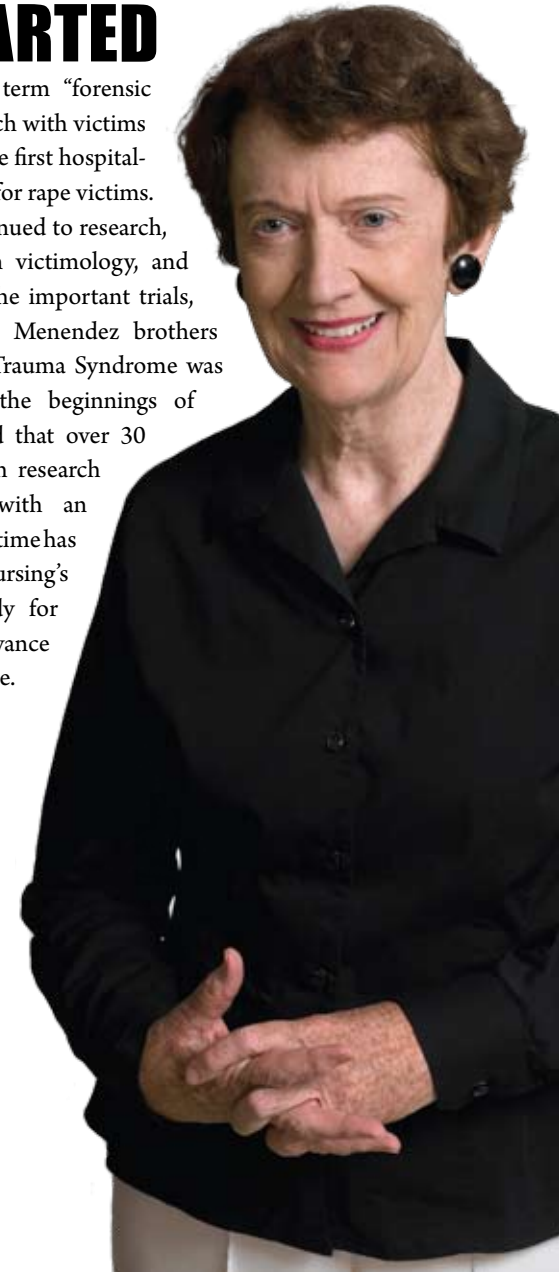
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**WHAT  
MAKES A  
LEGEND?**

## **WHEN I STARTED**

out in the field of nursing, the term “forensic nursing” didn’t yet exist. My research with victims began when I co-founded one of the first hospital-based crisis intervention programs for rape victims. Throughout my career I have continued to research, teach, train FBI special agents in victimology, and give court testimony at many of the important trials, including the Duke lacrosse and Menendez brothers cases. When my article on Rape Trauma Syndrome was published in 1974, stimulating the beginnings of forensic nursing, I never dreamed that over 30 years later there would be enough research to provide graduate students with an evidence-based curriculum. But the time has come and the Connell School of Nursing’s forensic nursing program is ready for students who will continue to advance forensic science and nursing practice.



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**WHY  
FIGHT FOR  
CHANGE?**

## **I HAVE ENCOUNTERED**

countless women whose lives have been disrupted by unbearable violence through my work as a women's health nurse practitioner. I know firsthand how difficult it can be to identify, care for, and help secure the appropriate resources for victims. Inspired to combat these clinical challenges, I decided to become a sexual assault nurse examiner. Now I provide forensic nursing-legal care for both men and women who have been sexually assaulted, as well as provide testimony. My hope for the future is to continue to make a difference by educating and equipping nurses with the tools they need to care for victims, and by developing and uncovering new strategies for violence prevention and intervention.



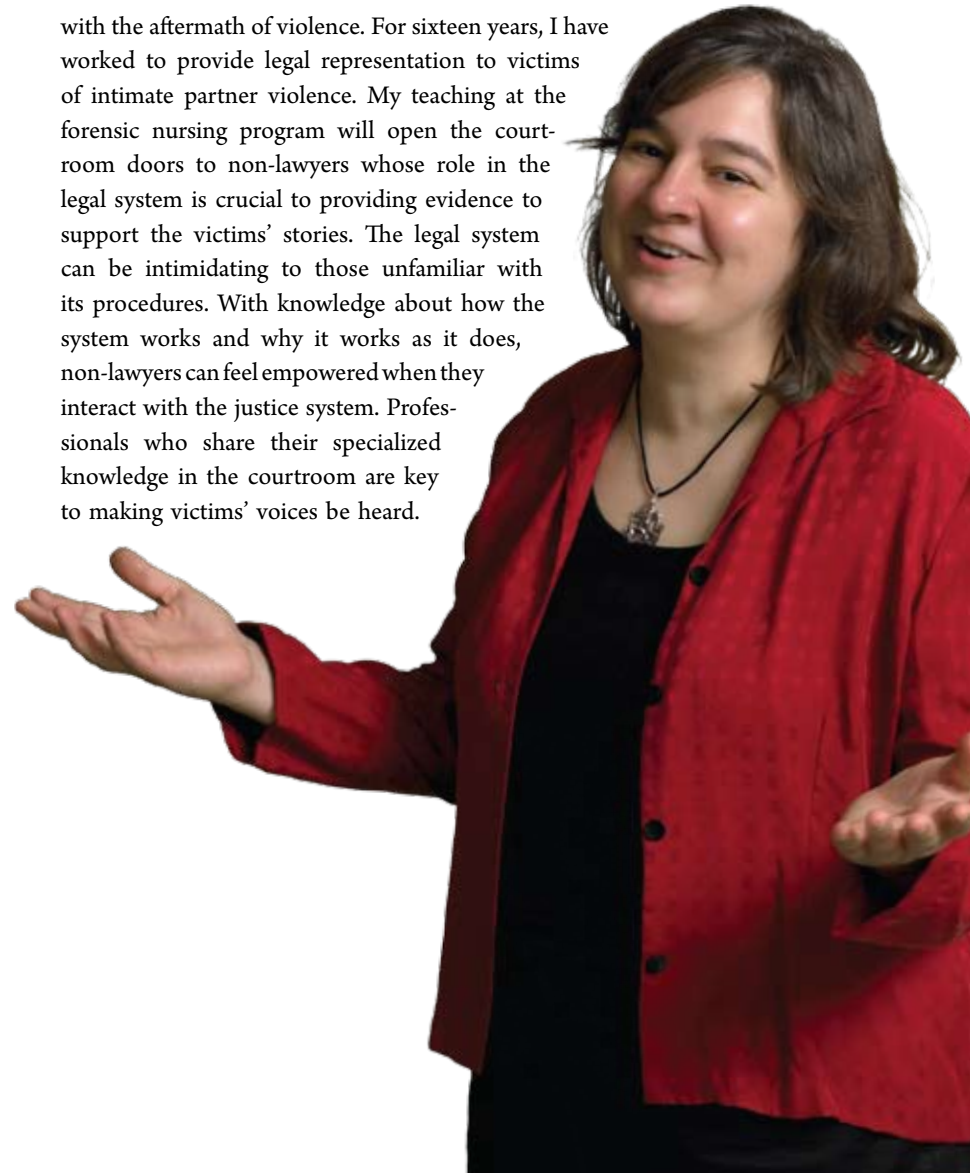
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# HOW CAN KNOWLEDGE EMPOWER?

## I BELIEVE STRONGLY

that survivors of assault need coordinated assistance to deal with the aftermath of violence. For sixteen years, I have worked to provide legal representation to victims of intimate partner violence. My teaching at the forensic nursing program will open the courtroom doors to non-lawyers whose role in the legal system is crucial to providing evidence to support the victims' stories. The legal system can be intimidating to those unfamiliar with its procedures. With knowledge about how the system works and why it works as it does, non-lawyers can feel empowered when they interact with the justice system. Professionals who share their specialized knowledge in the courtroom are key to making victims' voices be heard.



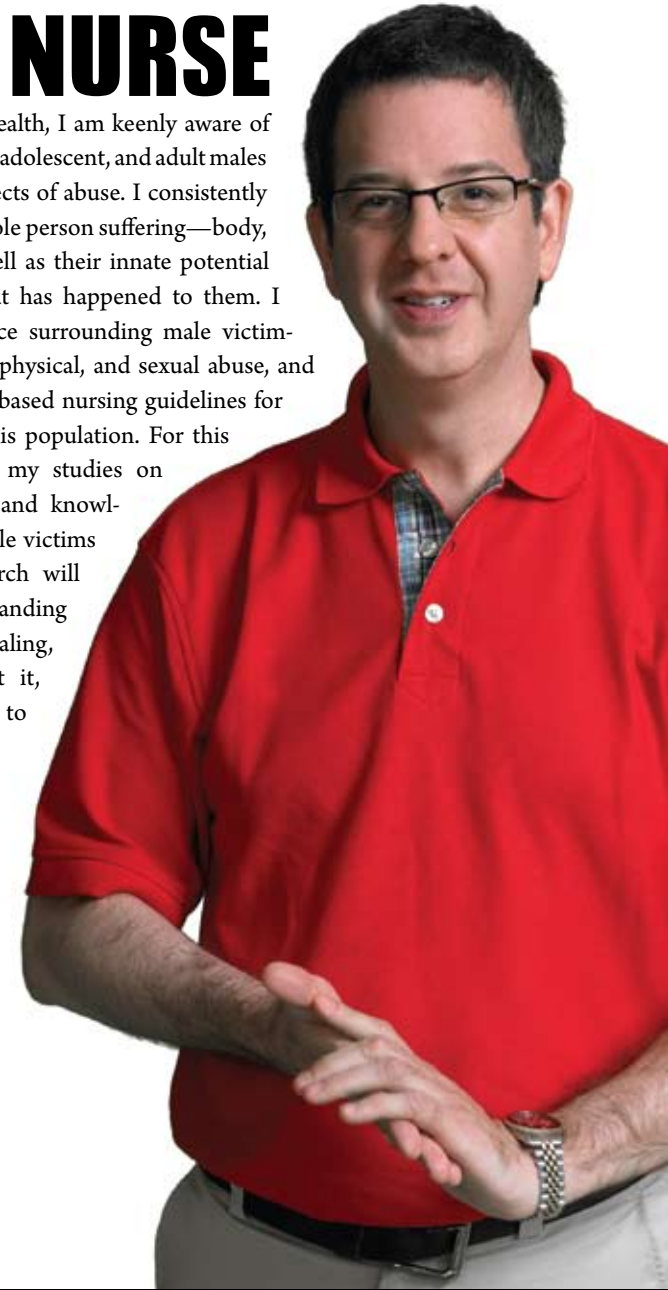
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**WHO  
ARE THE  
FORGOTTEN  
VICTIMS?**

## **AS A NURSE**

specializing in mental health, I am keenly aware of the vast number of child, adolescent, and adult males coping with the aftereffects of abuse. I consistently bear witness to their whole person suffering—body, mind, and spirit—as well as their innate potential for healing despite what has happened to them. I am struck by the silence surrounding male victim-survivors of emotional, physical, and sexual abuse, and by the lack of evidence-based nursing guidelines for facilitating healing in this population. For this reason I have focused my studies on advancing the science and knowledge of healing with male victims of abuse. Future research will bring a better understanding of the construct of healing, influences that support it, and actions that lead to positive self-transitions for these survivors.



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