Tools for Survivors:
Making the Forensic Exam Process Accessible

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TOOLS FOR SURVIVORS

ABSTRACT

This paper outlines the research methodology, ideation process, design process, iterations, user testing, and reflections I worked through as I completed my second semester's Major Studio project at Parsons School of Design in their Design and Technology MFA program. My project, focused on the forensic medical exam experience for survivors in North Carolina and how I could create a tool that might help to make that process less retraumatizing and more accessible, is one that I hope to carry on into my Thesis I course next year with more of a systemically critical lens using the information I have gathered and learned this semester.

Keywords

Survivors, Sexual Assault, Forensic Exam, Technical Tools, Design Justice, Accessibility, Trauma-Healing

1. INTRODUCTION

1.1 Concept

I chose to focus my time on studying the forensic exam experience for sexual assault survivors in North Carolina because I wanted to find out how I might be able to design a tool that could make that experience more accessible and less retraumatizing in order to help young users of all identities understand the process, what their options are throughout, and the relevant resources they have available to them. Survivors all over this country and of varying, intersectional identities struggle to find and understand the care they need after their experience and I wanted to see if I could contribute my skills to assist in easing even a portion of this process. I aimed to create a toolkit that was accessible, comprehensive, not biased toward any particular choice, and was more engaging than existing resources, such as medical brochures.

1.2 Past Experience

I have been previously trained as a sexual assault advocate and peer educator in North Carolina and have worked with multiple rape crisis centers, educational groups, and relevant non-profit organizations in the area, so working specifically in this area of the country was the most immediately helpful for me in narrowing my scope. My past experience also meant I already had some contacts to work with to be sure that this was a project that was well-rounded, working alongside survivors and advocates rather than designing something for them to use without their input. I had to choose a single state to work in because laws and test kits related to sexual assault differ in each state, so the experience of the survivor is going to differ in each state.

1.3 Project Future

I knew that the amount of research and time this project would require to be done completely and properly would take me well over the semester's time limit. This is why I decided very early on that this would be one part of a larger thesis project for next year that would take a much more critical and speculative approach. I decided I would use this semester's time to focus on research and testing various final forms. The results of this semester will potentially serve as a starting point for me for next year as I move forward in my exploration of the existing system for survivors' care and how it could be reworked to serve them the way they really need and want to be served. This is also a project that could be reworked for each and every other state in the United States, so that the specifics and

details matched each other state's specific legislature and procedures.

2. PRECEDENTS

2.1 National Resources

Although I am trying to do something new for survivors in North Carolina, I am certainly not the only person working to support them through their difficult and traumatic experiences. There are national hotline numbers, textlines, and resources, some of which I refer to directly in my project, that have been verbally supporting survivors in times of crisis for years. They work to train advocates to communicate helpful information given any situation and to know what other resources are available to connect survivors to. Even though this is absolutely essential as a resource, I do not think that this, or any, single resource is perfect. Therefore, we as a society must supply alternative options to survivors in need. These national resources were great to add into my own tool and to use as a basis for what exists already as I worked to build upon them in a less sterile and standardized way.

2.2 Individual Organizations

North Carolina has their own set of crisis centers in each county that regularly work on the local level to provide in-person, virtual, and telecommunication support to survivors in their areas, as do most states. However, that does not mean that every center is always active and easy to access. They do their very best given the resources they have to supply educational materials, workshop opportunities, and online resources to survivors and their supporters. This is not easy given the fact that these organizations are often underfunded and understaffed, so there is a definite pattern of survivors not always knowing about these resources being available to them or not being able to access them due to things like a lack of connection to the internet or means of transportation. Again, this is why supplying more and different types of resources in this field is a good thing and was certainly part of my own goal with this project. Even though these personal advocates are irreplaceable when it comes to survivor support options, they can only do so much in their own day-to-day process to serve the amount of survivors that actually need support.

Other states supply similar resources online and in each of their own counties, and these were similarly helpful to explore even when the information might have been slightly different given that state's laws compared to North Carolina's. For example, Hennepin County in Minnesota supplied one of the few picture guides for the medical exam process following a sexual assault that I could find[1]. Another even more comprehensive, helpful resource came from Colorado. This was a website that felt like the closest thing to what I wanted to create for survivors in North Carolina, with its general information regarding the exam, the options for reporting, confidentiality differences, and even included resources for professionals and supporters[2]. I was able to take a resource like this and compare it to my own research for North Carolina to be sure I was including all of the most helpful information regarding reporting options, rape kit tracking, and other such legal specifications that were different but important to include[3].

2.3 Resources for Professionals

One of the first realizations I came across when exploring this topic was the number of resources regarding forensic medical exams that are available to professionals

and how much they outnumber the amount of resources available to the populations these professionals end up serving. There are long lists of available training modules and online workshops to work through if you are seeking forensic examiner certification, but this information is made for those professionals who understand the terminology and jargon of other medical professionals. There was much less available for survivors written in lay language that I could find about the specifics of the forensic exam experience and how to prepare for such an experience. Furthermore, even when information was written in terms that were easy to understand, often health literacy does not stop there. Difficulties in health literacy extend to not knowing enough about the body and how it works, how care looks for different types of bodies, and where to find accurate resources regarding these things, and these sorts of resources for professionals did not explain these things because they assumed their audience would already know the answers[4].

3. RESEARCH PROCESS

Primary resources were my start for this project. I knew if I wanted to do this correctly and within the lens of the Design Justice methodology, I would need to interview all sorts of people: survivors, advocates, forensic nurses, and any other people familiar with this exam process and working with survivors. My first response from all of these sources I reached out to was from a sexual assault forensic nurse that had been working for years in New York and was willing to share her thoughts[5]. My other primary set of interviews was with The Movement Peer Educators, a group that I was a part of and led back in Raleigh, North Carolina that worked directly with and indirectly supported survivors on campus. Within that group were a number of self-identified survivors that were also gracious enough to share their personal thoughts and past experiences with me[6].

I took the notes I got from my primary interviews and held that as my most valuable information. However, I still had more to understand about the forensic exam process and what resources already were available to survivors in North Carolina. I took the time to work through a multi-hour training module created to support nurses through their certification and that helped me to get more specific details about the exam process and the options survivors might have available to them throughout it[7].

My final research was done by exploring existing research studies done on the experience of survivors seeking care in the United States, what work is being done currently to improve their experiences in different settings, and what makes existing tools and resources difficult to use because they do not have health literacy, ease of access, or trauma-informed language in as central focuses. I found some great information in a study done in 2022 regarding the responses survivors had to their experiences throughout the forensic exam process and what systemic change recommendations they had for the future[8].

4. DESIGN PROCESS

4.1 Ideation

As a class, we worked throughout our research to nail down a concept statement that we felt represented our goals well, often iterating upon that statement after conversations with peers and as our scopes become more focused. I knew my goal was a tool that survivors all over North

Carolina could use, could easily access, and would actually find helpful compared to the typical medical brochure-type resources they were used to getting handed. However, I did not know whether my tool would be best received in a paper or digital format. My ideation process became focused on how I could test what worked the best, how I could make my final tool as comprehensive as possible without having it become overwhelming, and how I could make sure whatever I created stood out from other existing resources. I needed to start creating pieces that I could test with my classmates, survivors, and professionals.

4.2 Preliminary Prototyping

Our 5-in-5 assignment was the most helpful starting point for the official creation process, as it encouraged my creativity. We were tasked in our Major Studio course to create 5 different things in 5 days, each thing being completed and documented in a day and all being related to our overarching concept. My five days were used to decide on a visual theme, to figure out what accessibility features would be most valuable in my final product, to survey users about how they prefer to learn new information, to test my own capabilities, and to see what a tool that was completely outside of my potential options at the time might look like. I shared each mini project with my class with guest critics and got a lot of constructive feedback to work with, ranging from suggesting that I push more boundaries and expectations in my final form to making sure that I am continuously mindful of the language used and how to make everything accurate and accessible to people of varying identities. This was all essential for me to hear before going into my first official prototypes.

4.3 Paper Prototype

The first official prototype I created to be user tested and observed was on paper. I had feedback from guest faculty members about how this might better serve a population of survivors that struggle with web and internet access and wanted to be sure I was mindful of this and tested it early on. I had also felt at this point that a paper format might better serve my goal of a quick, informal, but informational guide for the forensic exam process, especially if I worked in a format similar to a zine booklet of both words and visuals. I referenced multiple other existing zines that had been created with social justice ambitions as their main focuses and those served as helpful inspirations and guides[8]. I was able to achieve the informally honest perspective I was aiming for in this prototype, while still including all the information I needed to in one place.

I tested the physical copy of this product with my peers in class and then emailed virtual versions to the leaders of the Movement Peer Educators and advocates at the North Carolina Coalition Against Sexual Assault. This gave me a range of helpful feedback from multiple different perspectives. The main takeaways seemed to focus on the fact that most of the information was clear but that certain details could be explained more and that sections could be better organized in a way to make them easier to read and more visually appealing. This was very helpful as I moved into my next prototype, hoping to iterate on this one as a direct comparison to my upcoming web prototype.

4.4 Web Prototype Comparison

I wanted my web prototype to come next and directly relate but be compared to my

paper prototype. Although at this point I had felt confident that my primary stakeholders were more interested in a paper product, I had received a couple of comments from previous guest critics regarding the fact that a digital format has been proven in multiple instances to be better than other formats at helping people healing from difficult emotional experiences and trauma[10][11]. I was also interested in the potential of having both options be available to create choice for my intended audience. I wanted to be sure that I was taking it all into account as I thought about what needed to be tested next and how to best meet that format's specific requirements for this content.

I decided on starting with an elaborate wireframe, as that would be easier to test without spending too much time coding or updating online before I felt that it was ready. I used a lot of the same information as I had used in my paper prototype, but reorganized and expanded upon it. This expansion included some added features that would really only be helpful in an online interactive format, such as a searchable map of crisis centers and contact information. I wanted to see whether interactive features like this would be more or less helpful or engaging than the reiteration of the paper format when tested side-by-side.

After surveying users about the comparison between the two existing forms, I found that preferences seemed to be fairly skewed towards the paper prototype, although the potential for options between the two was also appealing. This feedback made my final steps very clear and helped me to organize my time for the rest of the semester.

4.5 Final Iteration

My final iteration for this project focused back onto the paper format. Although I would have liked to fully expand both my paper and web forms and may even continue that work into my own time this summer, I wanted the short time left in this semester to be focused on making sure this last iteration was one thing I focused all of my time on making complete. Once final edits were made, I had my final paper product printed, bound, and distributed amongst my various user groups. This was a product that was accessible, approachable, and something that I hope becomes a tool for real resource centers in North Carolina that I will continue to work with to be sure that it is a living document even in paper form, assessing the changing needs of its users and being reformed as needed.

5. REFLECTIONS & CONCLUSIONS

Completing a project with such a sizable goal in just a semester was certainly daunting and tested my limits at times. However, I do think it was necessary for me as a designer interested in working directly against systemic injustices and within the framework of Design Justice to push myself in my timeline and learn to adjust as needed. I think my personal goals were reached and I hope that the positive feedback I received from my intended audience of survivors and advocates in North Carolina was honest as they are the stakeholders whose opinions truly matter within this context. This project is one that will continue to change and carry on past this semester, though in potentially different ways, continuing to work with the communities that use it so that it serves them the best way it can.

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