

Speaker 1 ([00:00](#)):

In this episode of Tim Talk, we will explore ways to destigmatize sexual violence in the healthcare setting.

Tim Dentry ([00:10](#)):

Welcome one and all. I'm Tim Dentry, president and CEO of Northern Light Health. I'm so pleased to have you join us for what should be another great discussion about medical and social justice here on Tim Talk. Today, we're very lucky to have not one but two guests to talk about an extraordinarily troubling and weighty issue of sexual violence. First, let me introduce Keri Kapaldo. Keri is a registered nurse and sexual assault nurse examiner at St. Joseph Hospital in Bangor. She also works as the SAFE clinical leader, caring and advocating for survivors of interpersonal violence. SAFE stands for sexual assault forensic examiner. Keri has also received training from the Maine Coalition Against Sexual Assault and the Maine Coalition to End Domestic Violence regarding human trafficking. Thank you for being with me today, Keri.

Keri Kapaldo ([01:06](#)):

Thank you for having me. It's a pleasure.

Tim Dentry ([01:08](#)):

Great. Our second guess is Danielle Coutu. Danielle is also a registered nurse, sexual assault nurse examiner and sexual assault forensic examiner. She currently serves as regional coordinator for the University of New England's Advanced Nursing Education Sexual Assault Nurse Examiner Program. This program recruits, trains, supports, and retains forensic nurses in Maine. She practices clinically as a forensic and staff nurse in the emergency departments of Northern Light Eastern Maine Medical Center, and St. Joseph Hospital. Thank you for joining us today, Danielle.

Danielle Coutu ([01:46](#)):

Thanks for having us here. I appreciate it.

Tim Dentry ([01:48](#)):

Terrific. Thank you both. Really, really appreciate it. Now, when we spoke ahead of this recording, I was very taken with our messages and what I learned from you and thankful for your expression of your sole purpose, those are your words and your mission of advocacy, education, and empowerment. You also told me about your higher reach across the state and into the communities. I would like to start by listening to each of you describe what being in this line of care means to you and those you serve. Danielle, let's start with you.

Danielle Coutu ([02:26](#)):

Sure. Thank you. I'm really blessed to have the positions that I do as sexual assault forensic examiner here in Maine, and it's really an honor to make efforts to improve the care and support of sexual assault patients that we see in a healthcare setting. That is priority for me in those two different roles that you've referenced, to be bedside and providing hands on care based on our specialized training that we've received. And then also next level in my position of regional coordinator, how I have the ability to have others join in on this purpose, other nurses that may be interested in this forensic nursing specialty to join and make a difference in our communities.

Tim Dentry ([03:09](#)):

That's terrific. Thank you. And Keri, how would you answer the same question of how you would describe what being in this line of care means to you and those you serve?

Keri Kapaldo ([03:21](#)):

I think that being in this specialty is like the ultimate ability to care for patients. It affords us the ability to spend one-on-one time with our patients and dedicate our efforts to teaching them and giving them strength back and meeting their needs, however that looks in that moment. And we can do a lot in the four walls when we're working with them, advocacy, and education, empowerment and all those things we talked about in the last time we met and what that looks like for the patient. It redefines justice for them. And it just gives us the ability to be like literally the best nurse you can be. And it's like what you dream about, I think when you ultimately think of what nursing is.

Tim Dentry ([04:06](#)):

That's terrific. You touched a lot of chords with me. First of all, I know from just having met both of you, but your dedication and there's so many different aspects of nursing. Nursing's been in my family. My mom was a nurse, my wife's a nurse. And so, there are people in my life that are dear to me that are nurses and they each have their gifts that they have expressed in different ways. And the fact that you were showing your dedication in the way that as you said, meeting the patient's needs in the moment and redefining justice, is that what you said Keri? Redefining justice. I mean, listeners think about that. Nurses care for someone, redefining justice for that individual. That's a beautiful way to sum it up. So thank you both.

Tim Dentry ([05:00](#)):

I would like to ask you now about how this translates into the day to day for our communities, for our individuals, and for our hospitals. And as an example, if a person were to be the victim of sexual assault, or if people in the community may have loved ones that have been victims of sexual violence, what can they, or should they expect when they come into a hospital seeking help? For anyone in that situation, what kind of advice do you have? And we'll start with you this time Keri.

Keri Kapaldo ([05:36](#)):

I think there's a couple of options out there and some people may know about them readily and others may not. Something that family, friends and survivors themselves can access for services is through the Sexual Assault Support Hotline. And they can reach an advocate 24/7, and they can just talk, chat or they can meet for a cup of coffee in public, or those advocates can accompany them to the hospital. They can assist them getting protection orders. They can assist them if they decide to report to law enforcement. There's a lot of different support services. If you're a friend or family member of a loved one who is a survivor of sexual violence, there's also a lot of support in how you can support your loved one as well.

Keri Kapaldo ([06:24](#)):

I can speak to what it looks like, if somebody shows up at St Joe's. We have staffed SAFE nurses, and we immediately assume primary care of the patient and we take care of them holistically. I don't think there's any other way to really describe it. It's medically, forensically, anything that's in between. I've sat in a chapel with a patient before. I have listened to music. We've shared pictures of our animals, all the

things in between. And we're especially trained of course, to take care of people who have been victims of violence, but it kind of just goes a little bit further.

Keri Kapaldo ([07:07](#)):

And so that trauma informed care and giving them that safe place to express their needs and get what they need in that moment, whatever that looks like. It could be that they need medications to prevent sexually transmitted infections or pregnancy. It could be that they are looking for evidence collection with a kit. Maybe they want help reporting to law enforcement, or they don't want to report at all. There's a lot of different levels to that care and a lot of different options. Our purpose is to let them know what those options are and support them in those decisions.

Tim Dentry ([07:41](#)):

Terrific. Thank you, Keri. Danielle, how about you? What are your thoughts?

Danielle Coutu ([07:45](#)):

I would just highlight and mimic what Keri's speaking about, the framework of trauma informed care. I would tell anyone that is a survivor of sexual violence that presents to the emergency department, that although we have the specialized training, it's really the choices of the patient that determines the care there. And that empowerment is made because the power has been taken away from them and that's usually why they're sitting with us. We understand the neurobiology of trauma. We don't want to have any bias against patients. We want to support them because we believe them and the experiences that they're telling us. And so that's really the thing that I think sets sexual assault forensic examiners apart is that they hold that in high regard and have that blanket with all the interventions that are available to them.

Tim Dentry ([08:33](#)):

That's terrific. And you mentioned the Keri, you mentioned the sexual assault hotline or helpline, and I wonder if either of you would just, if you have that number available, just so the listeners can hear it, we can reinforce that, if you could state that number for everyone, if you could.

Keri Kapaldo ([08:53](#)):

Sure. So the Sexual Assault Hotline is the same number for across the state. It's 1-800-871-7741. And when you call the hotline, I think it's super helpful to know what to expect. A person will answer and ask what county you are in that needs to be served. And then they may ask for a name. You don't have to give your own name. You can give a fake name or just say you decline if you don't feel comfortable. And then an advocate will call you back at the number that you give the hotline, that you feel is safe for you to be called back on so.

Tim Dentry ([09:29](#)):

Very good. Thank you. Again, the number, the Sexual Assault Hotline is 1-800-871-7741. So Keri and Danielle, many of our listeners are away from the larger population centers if you will, and the larger health facilities. Clearly the Maine population is covering the entire state and Northern Light is very fortunate. We are part of many of those communities. So obviously your service is not just for the Bangor area or also in Portland, et cetera.

Tim Dentry ([10:08](#)):

So from a statewide network point of view, what would you say to our listeners that are away from the larger population centers and the larger health facilities? Any advice you'd like to share with our smaller community based hospitals that maybe aren't familiar with your skillset and your training and what you bring? Because clearly we don't want to create a situation where those that do have access to trained professionals like yourselves, get the care and others would not. So what would you say to them? And what can, and should we do at the community level to help make sure there's awareness and connection, if someone needs the kind of trauma informed care, as you said, that we, the greater we, the caregivers of the state of Maine can step up and be there for them.

Danielle Coutu ([11:03](#)):

So for our member organizations, I would encourage the prioritization of employing forensic nurses as part of their healthcare staff. I would encourage a culture that is accepting of survivors and prioritizes the care of survivors that present to our various hospitals. Our work is important and it does make strides, but it also feels like we hit a ceiling in some ways. And so that's why we desperately need the engagement of our community and our community partners to stand alongside us and say, no sexual violence is wrong, and we're all here to take a stand about it. And that can happen in a hospital setting and it can happen within those smaller communities as well.

Keri Kapaldo ([11:52](#)):

I think that that was very well said. I agree. I agree. Prioritizing the training and encouraging people to pursue it and supporting the nurses that would like to.

Tim Dentry ([12:02](#)):

Yeah, terrific. It's definitely providing that because I'm sure there are a lot of people in those less populated communities where there are nurse professionals that would really love to have this background, this experience, and this ability to step in and help people in the moment, as you said. And I love the words, take a stand. And so for our listeners, I just want to make sure that you hear loud and clear Danielle and Keri are professionals there and providing such a positive force of service. That's what I hear from both of you. And at the same time, it's in the context of we're taking a stand as healthcare professionals and to be there with people, stand alongside people that need our help. And we're taking a stand against sexual violence as caregivers. Is there anything else you like to say, or any other thoughts or comments, anything whatsoever Danielle or Keri that are on your minds right now?

Danielle Coutu ([13:13](#)):

This is Danny. I think this is, because this is our world sometimes we forget or are remise of those basic needs, like what a community may need or what a healthcare organization may need. So we're both very open to questions or feedback if there's any listener that says, yeah, I want to do more. Where can I start? We would love to be the audience to that.

Tim Dentry ([13:36](#)):

That's great. Thank you so much. Thank you, Danielle. Thank you, Keri, for joining me for this very important discussion.

Keri Kapaldo ([13:47](#)):

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Thank you for having us.

Danielle Coutu ([13:48](#)):

Thank you so much.

Keri Kapaldo ([13:48](#)):

We really appreciate it.

Danielle Coutu ([13:49](#)):

Yeah.

Tim Dentry ([13:50](#)):

Pleasure. And thank you to you, our podcast listeners as well. Until next time, I'm Tim Dentry, encouraging you to listen and act to promote our culture of caring, diversity, and inclusion. Thank you.

Speaker 1 ([14:06](#)):

Thank you for listening to this episode of Tim Talk. If you enjoyed this podcast and would like to learn more about this subject, you can find additional information at northernlighthealth.org/podcast. We welcome you to join us next month, as we will get to know some of the people who sit on the Northern Light Health DEI council.