

In 1975 age 25, a male, who I just met that afternoon [REDACTED] raped me. I suffered injuries. Back then we knew what we were dealing with so I never reported the rape to the police and never sought medical treatment for my injuries. Police, doctors and nurses would blame the victim and treat us with complete disrespect. I just shut up, put up and got on with life as best I could while trying hard to block the incident from my memory. Unfortunately, this was one I was never able to completely block and it would rear its ugly head every now and then before I pushed it back again.

Moving forward to [REDACTED] years after the rape alone, I attended [REDACTED] at a [REDACTED] hospital [REDACTED]. My medical, surgical and social history was taken before I had worked up enough courage to say I don't want the surgery done vaginally because I have been raped. I watched as the female [REDACTED] gasped and threw her arms up in the air. Her only words to me were, quote, "I'll have to speak to the registrar" end quote. That response was what is called a secondary rape/victimisation. She phoned the registrar but failed to say why I didn't want the surgery done vaginally. Failure of Duty of Care. I was able to hear every word they said and kept thinking tell him why, let me speak to him, but I was so traumatised disclosing that I froze. The result was I would need to re-sign and go back on the waiting list. [REDACTED] that would mean at least a 12/14 month wait. As an ex Enrolled (EN) and Registered nurse (RN) I knew the prolapse could possibly fall out of the vagina and ulcerate. Consequently, that would mean more complex surgery and a longer, more painful recovery. I stated, quote "I'll compromise" end quote. Surgery went ahead. At the 6 week post op check the female gynaecologist said "I'm finished you can go now" I replied, "I have something to say. I will never sign for that surgery again because I have been raped" Her immediate response was, quote. "That's why you don't have an active sex life" end quote. Second secondary rape/victimisation and failure of Duty of Care.

Both those responses to my disclosure left me suicidal on and off for 8 long years. I couldn't understand my reaction as I had not reacted like that when I was raped. I knew how I would kill myself. There was a large tree on the side of a road that wasn't behind a fence. I would drive my car into it at breakneck speed, aiming my side of the vehicle at the tree thus obliterating myself on impact. A note would be left for first responders apologising for having to find me, but also telling them why I had killed myself. However, every time I got that low, my logical brain would kick in. I had made a commitment to the cats when I took them from the pounds/shelters that I would look after them until they found a home. **I always fulfilled my Duty of Care to the cats.** Unlike those two female doctors working in gynaecology had done to me.

In 2021, I attended the rally at Parliament House. Signs saying Survivor were on my backpack and chest. Shortly after I found an article in The Guardian newspaper written by Dr Neeraja Sanmuhathan, Senior Sexual Assault Counsellor at RPAH. Reading through the article there were flood lights (not just light bulbs) going on one after the other. Wow oh wow oh wow. I had suffered unnecessarily for 8 years. My reaction to the female doctors was normal. That was the start of my recovery.

Over the ensuing months, triggers brought up the sexual assaults at ages 14 and 16. Several weeks later another trigger brought up the sexual assaults suffered in [REDACTED] I manage to deal with them without becoming suicidal. However, when combined with everything else, they still have an impact on me.

[REDACTED] my [REDACTED] failed. That meant another consult with the same female gynaecologist. By this time I had obtained my medical records from the hospital. I was shocked to read the [REDACTED] had recorded, "Brenda is happy to retain her ovaries and undergo vaginal surgery" How on earth this woman could think I was

"happy" is beyond my powers of comprehension. I cannot use that word anymore. The failure of the [REDACTED] had left me with severe pain in my pudendal nerves and sacrospinous ligament. The pain going right down the nerve to the labia on the left side. An [REDACTED] in the clinic was aware I had my notes. Before the consult with the female gynaecologist, I discussed a few things with her, including the fact I would consent to a vaginal examination as that is part of the diagnostic process. However, while waiting for the appointment, I decided I would no longer permit a vaginal examination ever again.

During the consultation, the female gynaecologist stated [REDACTED] had told her I had my notes. I knew that would happen as I know how the hospital grapevine works. The time came for a vaginal examination. The gynaecologist was half out of her seat with both gloves removed from the box when I said I do not give permission for that. She sat down and I then told her what her words had done to me in [REDACTED]. This woman had the perfect opportunity to apologise for her behaviour, but again she failed miserably in her Duty of Care to me. Her body language and lack of verbal responses was amazing.

Since then I have tried to find a male gynecologist who will [REDACTED] respect the conditions I have placed to protect myself from further trauma. The first one had my history well before the consult [REDACTED] at a [REDACTED] hospital [REDACTED]. I had suggested both he and the clinic sister learn about sexual assault before the consult took place. During the consult, the gynaecologist asked me if I was unconscious would I consent to a vaginal examination!! No. He also admitted he didn't understand what secondary rape/victimisation is. What is wrong with this man? Why didn't he read about sexual assault/rape beforehand? No idea. Unfortunately for me, I was subjected to yet another (now my third) secondary rape/victimisation from a gynaecologist. Needless to say emails were sent to the [REDACTED] about my experiences during the consult, plus copies of a federal government survey that provides all the possible health issues a survivor can develop following sexual assault/rape. I also sent a copy of the article from the Guardian written by Dr Neeraja Sanmuanathan, Senior Sexual Assault Counsellor at RPAH.

I have now included specific details of the refusal to undergo a vaginal examination, which includes no vaginal examination whether I am conscious, unconscious or anaesthetised. This has been done as another male gynaecologist, who had been sent a list of my conditions and the reasons for them, told me he would have to do a vaginal examination when I was unconscious. What is wrong with doctors working in the women's health area that they don't understand the trauma a sexual assault/rape victim, survivor, lived experience person suffers?

I also have a failed total knee replacement [REDACTED]

[REDACTED] Several orthopaedic surgeons have been contacted, along with the conditions and reasons for them. Not one has respected them, so yet again, they fail in their Duty of Care to the patient. The medical profession has a lot to answer for when it comes to dealing with sexual assault/rape survivors.

Unfortunately I also had failed [REDACTED]. A general surgeon in [REDACTED] was contacted, along with the conditions. He never questioned them, but respected them and worked with me, even asking if there was anything else I needed to avoid further trauma. Surgery was completed [REDACTED]

[REDACTED] If this one surgeon can do that, why can't every other so called specialist doctors?

Currently I am awaiting a consult with a gynaecologist [REDACTED] who has so far accepted the conditions. However, I will not hold my breath believing he will really respect me.

I also have a consult with an orthopaedics surgeon who did not need to know the reasons why I have placed the conditions. The staff accepted the fact I refuse to have female doctors assist or anaesthetise me. Three failures by female doctors was the end of me allowing any more to treat me ever again. All this can directly be traced back to those two female doctors working in gynaecology [REDACTED] Private health insurance was taken out so I could travel interstate for treatment. The only way I will be admitted to a hospital in my place of residence is if I am unconscious or dead, when I would not have a say.

You may need to eliminate some of this history and possibly redact as well. However, I hope everyone who reads it will see how things have a flow on affect. I am now pushing for changes in the medical profession, but it is slow going. Having been a nurse, I know who to contact and how to impact them. The Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG) has actually respected the trauma and asked if they could use my story to change the curriculum in the training requirements for future obstetricians and gynaecologists. While they offered to withhold my name I said please do not as having a name (and face) to something like this has a far bigger impact. So far neither of the two people contacted at the [REDACTED] [REDACTED] have responded to me. I will not give up.

This if for publication and my name can be included, if permitted.

I Have a Voice I Will be Heard
(Tattooed on my hands)

Kind regards,
Brenda Colbourne

[REDACTED]

