

SENATE BILL REPORT

ESB 5573

As Passed Senate, March 7, 2019

Title: An act relating to traumatic brain injuries in domestic violence cases.

Brief Description: Concerning traumatic brain injuries in domestic violence cases.

Sponsors: Senators Warnick, Hunt, Fortunato, Takko, Zeiger, Wilson, C., Hasegawa, Walsh, Schoesler, McCoy, Honeyford, Rolfes, Sheldon, Liias, Darneille, Keiser, Nguyen, Saldaña, Van De Wege and Wilson, L.

Brief History:

Committee Activity: Human Services, Reentry & Rehabilitation: 2/06/19, 2/12/19 [DP].

Floor Activity:

Passed Senate: 3/07/19, 47-0.

Brief Summary of Engrossed Bill

- Requires DSHS develop recommendations to improve the statewide response to traumatic brain injury (TBI) suffered by domestic violence survivors, in consultation with the Washington TBI strategic partnership advisory council (advisory council) and at least one representative of a community-based domestic violence program and one medical professional with experience treating survivors of domestic violence.
- DSHS shall establish and recommend or develop content for a statewide web site for victims of domestic violence to include: an explanation of the potential for domestic abuse to lead to TBI; information on recognizing cognitive, behavioral, and physical symptoms of TBI as well as potential impacts to a person's emotional well-being and mental health; a self-screening tool for TBI; and recommendations for persons with TBI to help address or cope with the injury.
- Requires the Criminal Justice Training Commission curriculum add understanding the risks of TBI posed by domestic violence.

SENATE COMMITTEE ON HUMAN SERVICES, REENTRY & REHABILITATION

Majority Report: Do pass.

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

Signed by Senators Darneille, Chair; Nguyen, Vice Chair; Walsh, Ranking Member; O'Ban, Wilson, C. and Zeiger.

Staff: Keri Waterland (786-7490)

Background: According to the Washington State Department of Health, TBI is a serious public health problem in the United States. A TBI is caused by a bump, blow, jolt, or penetration to the head that disrupts the normal function of the brain. Each year, TBIs contribute to a substantial number of deaths and cases of permanent disability.

Each year, 2.3 percent of women over the age of eighteen experience severe physical violence including “being slammed against something” or “being hit with a fist or something hard,” according to a U.S. Centers for Disease Control and Prevention report.

Up to 90 percent of survivors of intimate partner violence report head, neck, and face injuries at least once, and typically on multiple occasions. Additionally, women who receive TBIs from domestic violence are gaining attention, yet research studies are lacking in this area. A literature review conducted on TBI from domestic violence found prevalence of 60 to 92 percent of abused women obtained a TBI directly correlated with domestic violence. Adverse overlapping health outcomes are associated with both TBI and domestic violence. Genetic predisposition and epigenetic changes can occur after TBI and add increased vulnerability to receiving and inflicting a TBI. To provide appropriate treatment and improve the health of women and families, health care providers and community health workers need awareness of the link between domestic violence and TBI.

Summary of Engrossed Bill: DSHS, in consultation with the advisory council, and at least one representative of a community-based domestic violence (DV) program, and one medical professional with experience treating survivors of DV, shall develop recommendations to improve the statewide response to TBIs suffered by DV survivors.

DSHS shall establish and recommend or develop content for a statewide web site for victims of DV to include: an explanation of the potential for domestic abuse to lead to TBI; information on recognizing cognitive, behavioral, and physical symptoms of TBI as well as potential impacts to a person's emotional well-being and mental health; a self-screening tool for TBI; and recommendations for persons with TBI to help address or cope with the injury.

DSHS may consider the creation of an educational handout, to be updated on a periodic basis, regarding TBI to be provided to victims of DV.

The Criminal Justice Training Commission shall add understanding the risks of TBI posed by DV to law enforcement officers training curriculum.

Law enforcement officers shall provide victims with informing victims that information on TBI can be found on the statewide website referred to in the bill.

Appropriation: None.

Fiscal Note: Available.

Creates Committee/Commission/Task Force that includes Legislative members: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony: PRO: This bill is straightforward and I am hoping it will be considered. TBI is devastating for all involved, it changes everything because everything we are is in our brains. My mother was a victim of DV, and she had to give up everything to protect me. By not giving information about TBI, we put victims of domestic violence (DV) in a cycle of abuse. I did get information about DV, but did not get anything about a TBI or medical treatment, I am in the process of still recovering, 36 years later because I did not have information on TBI. Rapid recovery has a better chance when TBI is identified and treated early on. The window of opportunity for improvement is within two years of injury. Rapid success is possible, if I would have had knowledge or treatment I would be different. There is some potential amendatory language that was in the house and I will have it shortly to send for consideration.

Persons Testifying: PRO: Senator Judy Warnick, Prime Sponsor; Daniella Clark, Traumatic Brain Injury Advocate; Carey Morris, Washington State Coalition Against Domestic Violence; Edwina Waehling, Traumatic Brain Injury Group Co-Facilitator; Nick Mernoosh, Traumatic Brain Injury Specialist at Eastern Washington University.

Persons Signed In To Testify But Not Testifying: No one.