## FINAL BILL REPORT ESB 5573

## Synopsis as Enacted

**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.

## Senate Committee on Human Services, Reentry & Rehabilitation House Committee on Public Safety

**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, TBI's 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 TBI's 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**: 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

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.

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 are encouraged to inform victims that information on TBI can be found on the statewide web site developed under section 1 of this act.

## **Votes on Final Passage:**

Senate 47 0 House 97 0 (House amended) Senate 47 0 (Senate concurred)

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

Senate Bill Report - 2 - ESB 5573