



NATIONAL ASSOCIATION OF STATE HEAD INJURY ADMINISTRATORS

S. 3963 and H.R. 7301: Protecting Survivors of Domestic Violence from Brain Injury

What is the purpose of S. 3963 and H.R. 7301

The proposed legislation directs the U.S. Department of Health and Human Services (HHS) to collect data on the prevalence of brain injuries resulting from domestic and sexual violence in order to assist in understanding, addressing, and allocating resources to reduce and treat such injuries and the cause of such injuries. Sponsored by U.S. Senators Catherine Cortez Masto (D-NV) and Joni Ernst (R-IA) and Congressional Brain Injury Task Force (CBITF) Co-chairs Bill Pascrell, Jr. (D-NJ) and Don Bacon (R-NE), S. 3963 and H.R. 7301 were introduced in response to the General Accountability Office (GAO) report that found such data was lacking. The legislation authorizes \$1,000,000 to fund the data collection project. The funding is to be available for three years. Not later than three years after enactment, HHS is to submit a report of its findings to relevant House and Senate committees and post the report on its website.

How would the data be collected?

HHS would create and distribute a survey that follows up on, and would operate under, the same structure that is used under the National Intimate Partner and Sexual Violence Survey (NISVS) and would ask questions about the prevalence and circumstances surrounding brain injuries due to domestic and sexual violence. The Secretary shall allow for data collection for not fewer than 2 years. The NISVS was developed by the Centers for Disease Control and Prevention (CDC) and is an ongoing survey that collects the most current and comprehensive national- and State-level data on intimate partner violence, sexual violence and stalking. The NISVS collects data on these important public health problems and to enhance violence prevention efforts.

What is the correlation between domestic violence and brain injury?

According to the CDC, one in three adults have experienced domestic violence, also known as intimate partner violence. Preliminary research has found brain injuries to be common among victims of intimate partner or domestic violence as a result of blows to the head or an object piercing the brain, such as a gunshot wound; strangulation; and choking. Such injuries are under-diagnosed, under-treated, and under-discussed.

Yet, individuals suffering from brain injury may have permanent physical and emotional scars. Symptoms may range from headaches to cognitive issues impacting memory, communication, and poor judgment; behavioral problems; emotional; and co-occurring conditions, such as mental health and substance use. These related problems may impact the ability to carry out activities of daily living, such as shopping, cooking, adhering to rules and schedules, paying bills, working, and driving. The brain injury may impede a person's ability to assess danger, to make and remember safety plans, and to leave the abusive situation. Children suffering from abuse may demonstrate poor academic performance and problem-solving skills and may exhibit behavioral problems such as aggression, phobias, insomnia, low self-esteem, and depression.

Supporting Organizations

National Association of State Head Injury Administrators; National Coalition Against Domestic Violence; Futures Without Violence; MANA: A National Latina Organization; Violence Intervention Program; Esperanza United; Legal Momentum, the Women's Legal Defense and Education Fund; National Resource Center on Domestic Violence; Justice for Migrant Women; Brain Injury Association of America; and Vera Institute of Justice.

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