



OCTOBER IS

domestic violence
awareness month

NASHIA Observes NDVAM

Domestic Violence + COVID-19 = Risk of Brain Injury

The National Association of State Head Injury Administrators (NASHIA) joins other organizations in promoting awareness with regard to domestic violence during the month of October. The **National Domestic Violence Awareness Month (DVAM)** evolved from the First Day of Unity observed in October 1981 by the National Coalition Against Domestic Violence (NCADV). In the President's Proclamation, the President noted the impact of the COVID-19 pandemic on domestic violence:

“As our Nation continues to combat the coronavirus pandemic, we are forced to face the consequences of increased domestic abuse. We must protect and support those who have found themselves locked down with an abuser. Now more than ever, we must do our part to provide domestic violence survivors with the tools and resources they need to escape their abuse and secure justice for the harm inflicted upon them. The pandemic has also underscored the need for well-trained law enforcement professionals, who often respond to domestic violence calls and provide assistance in situations that very often involve physical injury, psychological trauma, or even death. As we recommit to ending this unconscionable cycle of abuse, we also commend the heroes who courageously answer the call for help time and time again.”

To read the full proclamation, click [here](#). NASHIA too is concerned about the number of individuals who are at risk of domestic violence, particularly with those who are impacted by COVID-19, and subsequently, are at the risk for a brain injury.

How does COVID-19 impact domestic violence?

GAO Calls for Increased Data to Identify Prevalence of Brain Injuries Among DV

“Sheltering in place” rules relating to the novel coronavirus (COVID-19) placed many individuals who were at risk for violence to be alone with their spouse or significant other, who may be the abuser, yet were separated from families and friends who would normally be around to check on the individual. The perpetrator may believe that he or she was immune from any oversight, thus free to engage in abuse. Anxiety and stress due to loss of job, alcohol, and isolation may contribute to the abusive situation.

While hotlines may be operational, potential victims may not be alone to make the call. And, they may not be able to leave their homes to go to shelters or access other resources, which may be closed or limited during the pandemic. The potential increase in the number of battered victims also impacts the number who sustain a brain injury due to the injuries associated with violence. For more information, click [here](#) for a NASHIA handout regarding COVID-19, domestic violence and brain injury.

Victims

This summer, the General Accounting Office (GAO) release the [report](#), “Domestic Violence: Improved Data Needed to Identify the Prevalence of Brain Injuries among Victims.” GAO identified 12 non-federal initiatives that provide education, screen for, or treat brain injuries resulting from intimate partner violence. Six of the 12 initiatives used screening tools to identify potential brain injuries among intimate partner violence victims, and two included a treatment component. Eight of the projects received grant funding from either the U.S. Department of Health and Human Services (HHS) or the U.S. Department of Justice (DOJ), although agency officials told the GAO that the funding had no specific requirements to address brain injuries resulting from intimate partner violence. In its conclusions, GAO recommended that HHS develop and implement a plan to improve data collected on the prevalence of brain injuries resulting from intimate partner violence and use these data to inform its allocation of resources to address the issue.



Intimate Violence: A serious public health problem

How common is intimate violence (IV)?

According to the Centers for Disease Control and Prevention (CDC), it affects millions of people in the United States each year. Data from CDC’s National Intimate Partner and Sexual Violence Survey (NISVS) indicate:

-- About 1 in 4 women and nearly 1 in 10 men have experienced contact sexual violence, physical violence, and/or stalking by an intimate partner during their lifetime and reported some form of IPV-related impact.

-- Over 43 million women and 38 million men

From infants to the elderly, violence affects people in all stages of life -- making it a serious public health problem. Many more survive violence and suffer physical, mental, and or emotional health problems throughout the rest of their lives. CDC is committed to stopping violence before it begins. For more information, go to the CDC [website](#).

For an overview of Intimate Partner Violence (IPV) watch the above video on [What is Intimate Partner Violence?](#) from the Centers for Disease Control and Prevention (CDC).

have experienced psychological aggression by an intimate partner in their lifetime.

IPV starts early and continues throughout the lifespan. When IPV occurs in adolescence, it is called teen dating violence (TDV). TDV affects millions of U.S. teens each year. About 11 million women and 5 million men who reported experiencing contact sexual violence, physical violence, or stalking by an intimate partner in their lifetime said that they first experienced these forms of violence before the age of 18.



**NATIONAL ASSOCIATION
OF STATE HEAD INJURY
ADMINISTRATORS**

