Violence Against Women Act of 2011 (Title V)

Violence Against Women Health Initiative Act of 2011 (S. 1765/H.R. 1578)

Background:
Domestic and sexual violence is a health care problem and one of the most significant social determinants of health for women and girls. According to 2010 data from the National Intimate Partner and Sexual Violence Survey (CDC, December 2011):

- 81% of women who were victims reported significant short or long term impacts related to violence in the relationship such as PTSD;
- 42% reported an injury and 22% needed medical care;
- Women victims were more likely to experience long-term chronic disease such as asthma and diabetes.

Despite the scope of this issue, a critical gap remains in the delivery of health care to victims. Many providers discharge a woman with only the presenting injuries being treated, leaving the underlying cause of those injuries not addressed.

Violence Against Women Act (VAWA)
In the last reauthorization of VAWA in 2005, a new health title was included to develop a public health response to abuse by strengthening the health care system’s identification, assessment and response of victims. Based on this model, over the last three years, through the DHHS Office of Women’s Health:

- Over 2,000 health providers were trained at over 100 clinical settings;
- Over 300,000 women were screened for abuse as part of routine care; and
- Over 200,000 safety cards that contained referral information were taken by patients.

As VAWA is scheduled to expire, Senators Hagan and Harkin and Reps. Slaughter and Bass introduced stand alone legislation reauthorize VAWA’s health title. These health programs were successfully included in S. 1925, the Leahy/Crapo VAWA reauthorization bill. Title V of the Senate VAWA bill would consolidate the three existing statutory programs into one program and reduce the funding authorization levels by more than 20 percent with changes designed to increase evaluation and accountability. VAWA Title V incorporates these three focus areas:
1. **Grants to Foster Public Health Responses to Intimate Partner Violence and Sexual Violence**

The existing program is working in eight states with statewide collaborations to integrate treatment and referral for domestic and sexual violence into family planning, adolescent health, and home visitation programs.

2. **Training and Education of Health Professionals**

This program supports partners including health professional schools, allied health training programs, and national health and trauma-related associations to develop, implement, evaluate, and disseminate education and training curricula to respond to lifetime exposure of violence and abuse.

3. **Research on Effective Public Health Approaches to End Violence Against Women**

This section would support research to evaluate effective interventions within the health care setting to prevent violence and abuse across the lifespan, address and prevent the physical and mental health effects of such violence, and improve the safety and physical and mental health of individuals that are currently being victimized.

The current appropriated funding level is very modest at $2.3 million through the U.S. Department of Health and Human Services’ Office on Women’s Health.

**Current endorsing organizations of VAWA Title V include:**


For questions, please contact Sally Schaeffer with Futures Without Violence, formerly the Family Violence Prevention Fund, at sschaeffer@futureswithoutviolence.org or 202.595.7384. To cosponsor S. 1925, the Violence Against Women Act reauthorization bill, please contact Anya McMurray with Senator Leahy at 202-224-7703. To cosponsor the stand-alone health bill, please contact Tracy Zvenyach with Senator Kay Hagan at Tracy_Zvenyach@hagan.senate.gov or Cheri Hoffman with Rep. Louise Slaughter at cheri.hoffman@mail.house.gov.