

115TH CONGRESS
2D SESSION

H. R. _____

To amend the Public Health Service Act to provide for additional programs funded by grants to strengthen the healthcare system's response to domestic violence, dating violence, sexual assault, and stalking, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mrs. DINGELL introduced the following bill; which was referred to the Committee on _____

A BILL

To amend the Public Health Service Act to provide for additional programs funded by grants to strengthen the healthcare system's response to domestic violence, dating violence, sexual assault, and stalking, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Violence Against
5 Women Health Act of 2018”.

6 **SEC. 2. FINDINGS.**

7 Congress finds that—

1 (1) Millions of Americans continue to experi-
2 ence domestic or sexual violence each year with more
3 than three women murdered by their partners each
4 day;

5 (2) This type of violence and abuse results in
6 short-term and chronic physical and behavioral
7 health consequences that have a significant economic
8 burden to victims and communities;

9 (3) New CDC data found the lifetime per-victim
10 cost of intimate partner violence was \$103,767 for
11 women victims with 59% going to medical costs.
12 Public funding paid 37% of this total cost;

13 (4) Victims are also at a higher risk for devel-
14 oping addictions to tobacco, alcohol, or drugs; for ex-
15 ample, 31% to 67% of women in substance use dis-
16 order treatment programs report experiencing do-
17 mestic violence within the past year;

18 (5) Over 50% of survivors of domestic violence
19 have experienced depression, post-traumatic stress
20 disorder, and substance use and 23% have experi-
21 enced suicidality;

22 (6) A study conducted by the National Domes-
23 tic Violence Hotline, in conjunction with the Na-
24 tional Center on Domestic Violence, Trauma & Men-
25 tal Health practice mental health and substance use

1 coercion where abusers intentionally undermine their
2 partners' sanity or sobriety, control their access to
3 medication, and sabotage their treatment and recovery
4 efforts among other coercion tactics;

5 (7) Researchers have also found that exposure
6 to multiple childhood traumas such as sexual abuse
7 and domestic violence can cause long-term negative
8 physical and emotional health outcomes such as
9 heart disease, cancer and depression;

10 (8) Health care providers can identify survivors
11 of violence and interventions can decrease risk for
12 violence and improve health outcomes, but health
13 providers need training and systems level support in
14 order to do so;

15 (9) Congress authorized a public health re-
16 sponse to victims of domestic and sexual violence in
17 the Violence Against Women Act of 2005;

18 (10) Since its enactment, the VAWA Health
19 program has trained more than 13,000 health care
20 providers to assess for and respond to domestic and
21 sexual violence in over 230 clinical settings serving
22 more than 1.3 million patients.

23 (11) Last year, the Health Resources & Serv-
24 ices Administration made this issue a priority across
25 all of its bureaus and released the "HRSA Strategy

1 to Address Intimate Partner Violence 2017-2020”
2 with four key priorities:

3 (A) train the nation’s health care and pub-
4 lic health workforce to address intimate partner
5 violence (IPV) at the community and health
6 systems levels;

7 (B) develop partnerships to raise aware-
8 ness about IPV within HRSA and HHS;

9 (C) increase access to quality IPV-in-
10 formed health care services across all popu-
11 lations; and

12 (D) address gaps in knowledge about IPV
13 risks, impacts, and interventions;

14 (12) A strong public health response can pre-
15 vent and address the immediate and long-term
16 health impacts of this type of violence and abuse.

17 **SEC. 3. GRANTS TO STRENGTHEN THE HEALTHCARE SYS-**
18 **TEM’S RESPONSE TO DOMESTIC VIOLENCE,**
19 **DATING VIOLENCE, SEXUAL ASSAULT, AND**
20 **STALKING, AND FOR OTHER PURPOSES.**

21 Section 399P of the Public Health Service Act (42
22 U.S.C. 280g–4) is amended—

23 (1) in subsection (a)

24 (A) in paragraph (2), by striking “and” at
25 the end;

1 (B) in paragraph (3), by striking the pe-
2 riod at the end and inserting “; and”; and

3 (C) by adding at the end the following:

4 “(4) development or enhancement and imple-
5 mentation of training programs to improve the ca-
6 pacity of early childhood programs to address do-
7 mestic violence, dating violence, sexual assault, and
8 stalking among families they serve.”;

9 (2) in subsection (b)—

10 (A) in paragraph (1)—

11 (i) in subparagraph (A)(ii), by insert-
12 ing after “and other forms of violence and
13 abuse” the following: “(including labor and
14 sex trafficking)”; and

15 (ii) in subparagraph (B)—

16 (I) in clause (ii)—

17 (aa) by striking “on-site ac-
18 cess to”; and

19 (bb) by striking “or to
20 model other services appropriate
21 to the geographic and cultural
22 needs of a site” and inserting the
23 following: “or by providing fund-
24 ing to national, State, Tribal, or
25 territorial domestic and sexual vi-

1 olence coalitions to improve their
2 capacity to coordinate and sup-
3 port health advocates and health
4 system partnerships”;

5 (II) in clause (iii), by striking
6 “and” at the end;

7 (III) in clause (iv), by striking
8 the period at the end and inserting “,
9 with priority given to programs ad-
10 ministered through the Health Re-
11 sources and Services Administration,
12 Office of Women’s Health; and”;

13 (IV) by adding at the end the fol-
14 lowing:

15 “(v) the development, dissemination,
16 and evaluation of best practices, tools and
17 training materials for behavioral health
18 professionals to identify and respond to do-
19 mestic violence, sexual violence, stalking,
20 and dating violence.”; and

21 (B) in paragraph (2)—

22 (i) in subparagraph (A), to read as
23 follows:

24 “(A) CHILD ABUSE AND ABUSE IN LATER
25 LIFE.—To the extent consistent with the pur-

1 pose of this section, a grantee may address, as
2 part of a comprehensive programmatic ap-
3 proach implemented under a grant under this
4 section, issues relating to child abuse or abuse
5 in later life.”.

6 (ii) in subparagraph (C)—

7 (I) in clause (ii), by striking
8 “elder abuse” and inserting “abuse in
9 later life”;

10 (II) in clause (iv)—

11 (aa) by inserting “, mental
12 health” after “dental”;

13 (bb) by inserting “and cer-
14 tification” after “exams”; and

15 (cc) by striking the period at
16 the end and inserting “; and”;
17 and

18 (III) by adding at the end the
19 following:

20 “(v) development of a state-level pilot
21 program to improve the response of sub-
22 stance use disorder treatment programs
23 and systems to domestic violence, dating
24 violence, sexual assault, and stalking and
25 the capacity of domestic violence, dating

1 violence, sexual assault, and stalking to
2 serve survivors dealing with substance use
3 disorder; and

4 “(vi) development and utilization of
5 existing technical assistance and training
6 resources to improve the capacity of sub-
7 stance use disorder treatment programs to
8 address domestic violence, dating violence,
9 sexual assault, and stalking among pa-
10 tients they serve.”;

11 (3) in subsection (d)(2)—

12 (A) in subparagraph (A)—

13 (i) by inserting “or behavioral
14 health,” after “a State department (or
15 other division) of health,”; and

16 (ii) by striking “mental health care”
17 and inserting “behavioral health care”; and

18 (B) in subparagraph (B)—

19 (i) by striking “or health system” and
20 inserting “behavioral health treatment sys-
21 tem”; and

22 (ii) by striking “mental health care”
23 and inserting “behavioral health care”;

24 (4) in subsection (f), to read as follows:

1 “(f) RESEARCH, AND EVALUATION, AND DATA COL-
2 LECTION.—

3 “(1) IN GENERAL.—Of the funds made avail-
4 able to carry out this section for any fiscal year, the
5 Secretary may use not more than 20 percent to
6 make a grant or enter into a contract for research,
7 and evaluation, or data collection of—

8 “(A) grants awarded under this section;
9 and

10 “(B) other training for health professionals
11 and effective interventions in the health care or
12 behavioral health setting that prevent domestic
13 violence, dating violence, and sexual assault
14 across the lifespan, prevent the health effects of
15 such violence, and improve the safety and
16 health of individuals who are currently being
17 victimized.

18 “(2) RESEARCH AND DATA COLLECTION.—Re-
19 search or data collection authorized in paragraph (1)
20 may include—

21 “(A) research on the effects of domestic vi-
22 olence, dating violence, sexual assault, and
23 childhood exposure to domestic, dating or sex-
24 ual violence on health behaviors, health condi-
25 tions, and health status of individuals, families,

1 and populations, including underserved popu-
2 lations;

3 “(B) research to determine effective health
4 care interventions to respond to and prevent do-
5 mestic violence, dating violence, sexual assault,
6 and stalking;

7 “(C) research on the impact of domestic,
8 dating and sexual violence, childhood exposure
9 to such violence, and stalking on the health care
10 system, health care utilization, health care
11 costs, and health status;

12 “(D) research on the impact of adverse
13 childhood experiences on adult experience with
14 domestic violence, dating violence, sexual as-
15 sault, stalking and adult health outcomes, in-
16 cluding how to reduce or prevent the impact of
17 adverse childhood experiences through the
18 health care setting;

19 “(E) research on the intersection of sub-
20 stance use disorder and domestic violence, dat-
21 ing violence, sexual assault, and stalking, in-
22 cluding effect of coerced use and efforts by an
23 abusive partner or other to interfere with sub-
24 stance use disorder treatment and recovery; and

1 “(F) improved data collection using exist-
2 ing federal surveys by including questions about
3 domestic violence, dating violence, sexual as-
4 sault, or stalking and substance use disorder,
5 coerced use, and mental health.”; and
6 (5) in subsection (g), by striking “2014 through
7 2018” and inserting “2019 through 2023”.