April 2, 2019

The Honorable Nancy Pelosi
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Kevin McCarthy
Minority Leader
U.S. House of Representatives
Washington, DC 20515

Dear Speaker Pelosi and Leader McCarthy:

I am writing on behalf of the American College of Physicians (ACP), to share our support for the enactment of H.R. 1585, the Violence Against Women (VAWA) Reauthorization Act of 2019, legislation that authorizes funding for services to protect and improve the health of survivors of domestic violence, dating violence, and stalking. Although we don’t have specific policy on some of the provisions of the bill, we believe it is essential that Congress act without further delay to reauthorize the Act and specifically, the policies in the bill listed below to provide protections to women who are victims of violence to maintain their safety and well-being as well as enhance the health care system to improve treatment for victims of these crimes.

ACP is the largest medical specialty organization and the second largest physician group in the United States. ACP members include 154,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

Last year, ACP released a policy paper on Women’s Health Policy in the United States that examines the challenges women face in the U.S. health care system and provides a series of recommendations that will ensure a health care system that supports the needs of women over the course of their lifespans. ACP recognizes the need for the increased availability of effective screening tools for physicians or health professionals who treat women who are experiencing or are survivors of intimate partner or sexual violence. Physicians are often trusted members of the community and the physician’s office can be place where women may feel more comfortable talking about their situations or concerns. Our members, many of who are in primary care, would benefit from having tools to screen and identify women who are victims of sexual violence as victims of this abuse may go unrecognized or crimes of intimate partner violence (IPV) are not reported. Additionally, ACP supports increased patient education about intimate partner and sexual violence and the availability of resources for those impacted by these abuses. The U.S. Preventive Services Task Force recently finalized updated recommendations on screening for IPV in women of childbearing age. These recommendations
included that in addition to screening for IPV, clinicians should also provide or refer women who are identified as survivors of IPV to support services. These additional resources are key to providing the ongoing support they need to effectively address the physical and social needs of women experiencing IPV.

We are pleased that the reauthorization of VAWA would increase authorized funding for many programs designed to prevent sexual violence against women and improve patient education and treatment for victims of IPV. We specifically support several sections in Title III of this legislation that offer increases in authorized funding for rape prevention and education grants, expand education for youth programs designed to address sex trafficking or bullying, provide grants to combat sexual abuse crimes on campuses, and train campus health centers to recognize and respond to survivors of domestic violence, dating violence, and sexual assault. We also support a section of this legislation that reauthorizes funding for grants to strengthen the health care systems response to sexual and domestic violence crimes, and to include improving the capacity of early childhood programs to address these crimes among the families they serve.

We also strongly support several provisions that strengthen measures to prevent acts of gun violence, one of the most dangerous threats to abused women or those in danger of abuse. Last year, ACP released an updated position paper on Reducing Firearm Injuries and Deaths in the United States, which provides an updated series of recommendations to reduce the threat of firearms violence in this country. We are pleased that several provisions in the bill will close loopholes in the background check system that allow domestic violence offenders, who are not currently covered by the National Instant Criminal Background Check System (NICS), to buy and own guns. Such domestic violence offenders, not currently included in the NICS, include dating partners, cohabitants, stalkers, those who victimize a family member other than a partner or child, and those with temporary restraining orders.

We specifically support sections of this legislation which would prohibit persons convicted of a misdemeanor crime of violence, including violence against persons outside their own household, from possessing firearms as well as prohibit persons who are subject to a court order of protection from possessing firearms. The bill would also direct that relevant law enforcement agencies be contacted when a prohibited purchase of a firearm has taken place, where the prohibited purchaser has been previously convicted of misdemeanor domestic violence, misdemeanor stalking, or who is subject to a court order of protection.

ACP is encouraged that this bill includes needed protections for lesbian, gay, bisexual, and transgender (LGBT) individuals that experience intimate partner or sexual violence. LGBT individuals are among the most vulnerable of our population and face challenges of social stigma, discrimination, and disparities in health care. According to the most recent National Intimate Partner and Sexual Violence Survey, nearly 44% of lesbian women and 61% of bisexual women have experienced rape, physical violence, or stalking by an intimate partner at some point, a significantly higher prevalence than heterosexual women (35%)ii. Research also shows that excluding same-sex couples from definitions of domestic violence definitions is a barrier in seeking assistance for those experiencing IPViii. We support new additions to the
reauthorization of the VAWA that add sexual orientation and gender identity to the statistical summary of those served by grants to combat violent crimes on campus. There is limited research and data on IPV or intimate partner sexual assault among the LGBT population and the collection of this data is a good first step in the need to gain a better understanding IPV or intimate partner sexual violence and the unique needs and challenges facing the LGBT community. We would also like to express our opposition to any amendments to alter this legislation that would strip gender identity or sexual orientation provisions that were included in the 2013 VAWA reauthorization bill. The 2013 VAWA law included a provision to ensure that LGBT victims of domestic violence, sexual assault, dating violence, and stalking are not denied, on the basis of sexual orientation or gender identity, access to the critical services, such as housing or shelters that would protect them from additional harm. We urge that these gender identity provisions included in the 2013 VAWA law, be maintained in all current or future iterations of the reauthorization bill.

We urge the House to approve the VAWA Reauthorization Act of 2019 that authorizes additional resources to improve the health and safety of women and their families impacted by violence. Should you have any questions regarding this letter, please do not hesitate to contact Brian Buckley at bbuckley@acponline.org.

Sincerely,

Ana María López, MD, MPH, MACP
President

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