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OUR PATIENTS. OUR UNION. OUR VOICE.

June 14, 2022

The Honorable Steven Bradford
Chair, Senate Public Safety Committee
1020 N Street, Room 545
Sacramento, California 94249

Re: AB 2790 (Wicks) – Support

Dear Senator Bradford,

The California Nurses Association/National Nurses United (CNA), representing more than 100,000 California registered nurses, write today in support of Assembly Bill 2790 (Wicks), Centering Survivor Safety and Health Act, which would modernize California’s medical mandatory reporting statute in order to better protect survivors of domestic and sexual violence, and ensure their ability to access vital health care services.

Registered nurses see the health impacts of the trauma of domestic and sexual violence in our patients and believe this revision to mandatory reporting is critically important to improving the safety and well-being of survivors of violence.

Medical Mandated Reporting of Adult Violence Injuries in California

California law currently mandates that health professionals report to law enforcement when treating patients for physical injuries known or suspected to have been a result of firearm injuries *or* “assaultive or abusive conduct”, including domestic and sexual violence.ⁱ This law was passed in 1993, during a time when domestic violence was first starting to be recognized as a critical health issue. Although a well-intentioned attempt to ensure health care providers take domestic violence seriously and address it with their patients, mandatory reporting to law enforcement by health providers has no evidence of positive outcomes for survivors and research shows the vast majority of survivors have found this intervention to be harmful or not helpful.ⁱⁱ

Arguments in favor of medical mandated reporting for domestic and sexual violence suggest that it could help identify and treat survivors and increase patients’ safety through law enforcement intervention.^{iii,iv} The evidence suggests, however, that medical mandated reporting puts survivors in more danger, decreases survivor autonomy, and makes health providers reluctant to address domestic and sexual violence with their patients.^{v,vi}

While medical mandated reporting to law enforcement for firearm wounds is common in many states, **California is one of only three states that still have such broad and harmful requirements** to explicitly report for domestic and sexual violence-related injuries without patient consent.^{vii,viii} Around the time that the 1993 law was enacted, several other states had mandated reporting for domestic violence-related injuries.^{ix} Since that time, many have amended their laws to be safer for domestic and sexual violence survivors or have repealed all medical mandated reporting for adult violence.^x

Medical Mandated Reporting for Adult Violence Puts Survivors in Danger

Although the intent of the medical mandatory reporting law was to reduce domestic violence assaults and homicides, the last three decades since California's medical mandatory reporting was passed have not yielded these results. In fact, survivors of domestic and sexual violence report that mandatory reporting has decreased their safety and self-determination. In a survey done by the National Domestic Violence Hotline, of survivors who have experienced mandatory reporting, when asked how it impacted them, **83.3% of survivors stated that mandatory reporting made their experience much worse, somewhat worse, or did nothing to improve the situation.**^{xi}

Domestic and sexual violence can have long term negative health outcomes,^{xii,xiii,xiv} so it is crucial that survivors are able to access health care. Fears of mandatory reporting limits trust between patients and providers and results in survivors not receiving referrals to supportive victim advocacy services. Mandatory reporting laws have been shown to keep survivors from seeking care,^{xv,xvi} and when survivors *do* see a health provider, they often don't feel comfortable bringing up their experiences of violence.^{xvii, xviii}

“Things got bad when he found out police were involved”^{xix}

Fear of involving law enforcement is a main reason survivors decide not to tell their health provider about domestic violence, or even seek care in the first place.^{xx} According to a survey by the [National Domestic Violence Hotline](#) that documented survivors' experiences with law enforcement, of survivors who chose to involve law enforcement by calling 911, only 20% said they felt safer - **80% said they had no change in safety or felt even less safe.**^{xxi} There are many reasons why survivors don't want to involve police: fear of angering their partner and increasing severity of violence, not wanting their partner to be arrested, being arrested for defending themselves, exposing themselves and their families to involvement with child welfare systems, and more. Mandatory reporting laws also discourage immigrant survivors from seeking health care; research has shown that contact with law enforcement produces a chilling effect in asking for help or fear of reprisal from federal immigration authorities.^{xxii} If a survivor or their family members lack protected status, mandatory reporting to law enforcement could lead to deportation or detention if ICE is notified.^{xxiii}

California Survivors Deserve Safety, Health, and Self-Determination

AB 2790 will ensure that survivors can seek health care without fear of non-consensual law enforcement involvement and with the assurance that their health provider will be able to prioritize their wellness, healing, safety, and self-determination. Health providers will be able to address domestic and sexual violence in a confidential and trusting manner, and ensure access to advocacy services. This bill promotes ***mandatory supporting, rather than mandatory reporting.*** Survivors will be offered a warm connection to a trained, confidential advocate who will work with them to address their different safety needs such as emergency safety planning, housing, legal support, counseling, restraining orders, *and* safer access to the legal system.

CNA is committed to deepening partnerships between health care and survivor advocacy organizations and looks forward to supporting health care providers in California to address violence in a trauma-informed way.

For these reasons we are pleased to support AB 2790 (Wicks) and respectfully urge your support.

Respectfully,



Curtis Lang, Jr.
Legislative Advocate
California Nurses Association/ National Nurses United

cc: Members, Senate Public Safety Committee
Assemblymember Buffy Wicks

https://leginfo.ca.gov/faces/codes_displayText.xhtml?lawCode=PEN&division=&title=1.&part=4.&chapter=2.&article=2

ⁱⁱ Donna Mooney and Michael Rodriguez M.D., California Healthcare Workers and Mandatory Reporting of Intimate Violence, 7 Hastings Women's L.J. 85 (1996). Available at: <https://repository.uchastings.edu/hwlj/vol17/iss1/2>

ⁱⁱⁱ Bauer, Heidi & Mooney, D & Larkin, Hillary & O'Malley, N & Schillinger, D & Hyman, A & Rodriguez, Michael. (1999). California's mandatory reporting of domestic violence injuries: does the law go too far or not far enough?. The Western journal of medicine. 171. 118-24.

^{iv} Roan, Shari. "Law Against Domestic Abuse May Be Backfiring." Los Angeles Times, Dec. 31, 1996.

^v Ibid.

^{vi} Glass N, Campbell JC. Mandatory reporting of intimate partner violence by health care professionals: a policy review. Nurs Outlook. 1998 Nov-Dec;46(6):279-83. doi: 10.1016/s0029-6554(98)90084-7. PMID: 9879086.

^{vii} Futures Without Violence, 2019. "Compendium of State and U.S. Territory Statutes and Policies on Domestic Violence and Health Care: Fourth Edition."

<https://ipvhealth.org/wp-content/uploads/2019/09/Compendium-4th-Edition-2019-Final-small-file.pdf>

^{viii} Nebraska and North Dakota are the other states which have a similar mandated reporting law for physical injuries resulting from a criminal offense. See more here: <https://ipvhealth.org/wp-content/uploads/2019/09/Compendium-4th-Edition-2019-Final-small-file.pdf>

^{ix} Bauer, Heidi & Mooney, D & Larkin, Hillary & O'Malley, N & Schillinger, D & Hyman, A & Rodriguez, Michael. (1999). California's mandatory reporting of domestic violence injuries: does the law go too far or not far enough?. The Western journal of medicine. 171. 118-24.

^x <https://ipvhealth.org/wp-content/uploads/2019/09/Compendium-4th-Edition-2019-Final-small-file.pdf>

^{xi} Lippy C, Jumarali SN, Nnawulezi NA, et al. The Impact of Mandatory Reporting Laws on Survivors of Intimate Partner Violence: Intersectionality, Help-Seeking and the Need for Change. J Fam Viol 35, 255–267 (2020). <https://doi.org/10.1007/s10896-019-00103-w>

^{xii} Stubbs A, Szoek C. The Effect of Intimate Partner Violence on the Physical Health and Health-Related Behaviors of Women: A Systematic Review of the Literature. Trauma Violence Abuse. 2021 Feb 5:1524838020985541. doi: 10.1177/1524838020985541. Epub ahead of print. PMID: 33541243.

^{xiii} Coker AL, Smith PH, Bethea L, King MR, McKeown RE. Physical health consequences of physical and psychological intimate partner violence. Arch Fam Med 2000;9:451–457

^{xiv} Campbell JC. Health consequences of intimate partner violence. Lancet 2002;359:1331–1336

^{xv} Lippy C, Jumarali SN, Nnawulezi NA, et al. The Impact of Mandatory Reporting Laws on Survivors of Intimate Partner Violence: Intersectionality, Help-Seeking and the Need for Change. J Fam Viol 35, 255–267 (2020). <https://doi.org/10.1007/s10896-019-00103-w>

^{xvi} Jordan, C. E., & Pritchard, A. J. (2018). Mandatory reporting of domestic violence: What do abuse survivors think and what variables influence those opinions? Journal of Interpersonal Violence. <https://doi.org/10.1177/0886260518787206>.

^{xvii} Lippy C, Jumarali SN, Nnawulezi NA, et al. The Impact of Mandatory Reporting Laws on Survivors of Intimate Partner Violence: Intersectionality, Help-Seeking and the Need for Change. J Fam Viol 35, 255–267 (2020). <https://doi.org/10.1007/s10896-019-00103-w>

^{xviii} Jordan, C. E., & Pritchard, A. J. (2018). Mandatory reporting of domestic violence: What do abuse survivors think and what variables influence those opinions? Journal of Interpersonal Violence. <https://doi.org/10.1177/0886260518787206>.

^{xix} Lippy C, Jumarali SN, Nnawulezi NA, et al. The Impact of Mandatory Reporting Laws on Survivors of Intimate Partner Violence: Intersectionality, Help-Seeking and the Need for Change. J Fam Viol 35, 255–267 (2020). <https://doi.org/10.1007/s10896-019-00103-w>

^{xx} Kimberg L, Vasquez JA, Sun J, et al. Fears of disclosure and misconceptions regarding domestic violence reporting amongst patients in two US emergency departments. PLoS One. 2021;16(12):e0260467. Published 2021 Dec 2. doi:10.1371/journal.pone.0260467

^{xxi} National Domestic Violence Hotline, Who Will Help Me? Domestic Violence Survivors Speak Out About Law Enforcement Responses. Washington, DC (2015). <http://www.thehotline.org/resources/law-enforcement-responses>

^{xxii} Ammar, Nawal & Orloff, Lesley & Dutton, Mary & Hass, Giselle. (2005). Calls to Police and Police Response: A Case Study of Latina Immigrant Women in the USA. International Journal of Police Science and Management. 7. 230-244. 10.1350/ijps.2005.7.4.230.

^{xxiii} Stoever J. "Op-Ed: Domestic Violence Victims Shouldn't Have to Choose between Deportation and Medical Care." Los Angeles Times, 17 July 2017. <https://www.latimes.com/opinion/op-ed/la-oe-stoever-mandatory-reporting-domestic-violence-20170717-story.html>.