

February 28, 2008

The Honorable (name)
United States House of Representatives
(Address)
Washington, DC 20515

Dear (name):

We, the undersigned organizations, strongly urge you to provide \$13 million in full funding for the Health programs in the Violence Against Women Act (VAWA) in FY 2009. This funding is critical to improving the health care system's response to domestic and sexual violence and increasing the number of women who are properly identified and treated for lifetime exposure to violence. Despite the success of VAWA, the epidemic of violence continues. Not only does this come at tremendous cost to the victim, but also staggering societal costs. The CDC estimates that IPV costs over \$8 billion per year, a substantial portion of which includes health care and mental health services.

The VAWA of 2005 includes three health programs designed to work together to reduce the incidence of domestic violence, provide victims with the help they need, and reduce the costs associated with domestic violence. The programs include funding for a coordinated public health response, training and education of health professionals, and funding for research on effective interventions in health care settings.

The enormity of the domestic violence crises requires a coordinated public health response. Such a response encourages collaborations between health care providers, public health programs, and domestic violence programs. VAWA collaboration grants are an integral part of breaking the costly cycle of abuse

Funding is needed to train health professionals how to properly identify, treat, and refer victims. Research shows that victims have increased healthcare needs and are at greater risk of diabetes, hypertension, obesity, and substance abuse. A victim's increased health needs puts her providers in a unique position to identify, screen, and assist victims. Research supports that provider interventions are successful. Additional studies have found that 10 minute interventions are highly effective in increasing pregnant women's safety. Unfortunately, less than 10 percent of primary care physicians routinely screen patients for domestic violence.

Research is critical to obtaining and sustaining the Nation's target health outcomes. Domestic violence is associated with 8 out of 10 leading health indicators in the Department of Health and Human Services Healthy People 2010 goals, including: obesity and substance abuse prevention, access to care, and mental health goals. In addition, victimization has been associated with poorly managed chronic illnesses such as diabetes and hypertension, increased risk for sexually transmitted infections, and poor birth outcomes. Not surprisingly, health care costs for victims of intimate partner violence are 20 percent higher than those of non-abused women.

As leaders committed to both the prevention of intimate partner violence and to the health and safety of victims, we urge you to fully fund critical VAWA Health programs.
Thank you for your attention to this request.