

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current and previously issued FIRs are available on the NM Legislative Website (www.nmlegis.gov) and may also be obtained from the LFC in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

ORIGINAL DATE 2/16/2017

SPONSOR Stewart LAST UPDATED _____ HB _____

SHORT TITLE Domestic Violence Task Force SM 38

ANALYST Rogers

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY17	FY18	FY19	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		Minimal			Nonrecurring	Agency Operating Budget

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

New Mexico Coalition Against Domestic Violence (NMCADV)

NM Coalition of Sexual Assault Programs (NMCSAP)

SUMMARY

Synopsis of Memorial

Senate Memorial 38 requests that the New Mexico Coalition Against Domestic Violence (NMCADV) and the NM Coalition of Sexual Assault Programs (NMCSAP) convene a task force to create a statewide health plan to reduce the incidence of interpersonal violence strangulation and to address the its long-term health implications.

The memorial also tasks the secretary of the Department of Health be requested to appoint a member of the Epidemiology and Response Division of the DOH to the task force. Additionally, the task force shall include participants from NMCADV, the NMCSAP, the Coalition to Stop Violence Against Native Women, the Crime Victims' Reparation Commission, the Santa Fe Coordinated Community Response Council, the University of New Mexico Health Sciences Center, the Indian Health Services and a medical first responder agency.

Additional task force members shall include participation from a sexual assault nurse examiner, a law enforcement officer with expertise in domestic violence, a medical professional with expertise in the area of anoxic grain injury cause by strangulation and other appropriate entities.

The memorial mandates the task force its recommendations to the Legislative Health and Human Services Committee and the Legislative Finance Committee by November 30, 2017 and that copies of this memorial be transmitted to the chair of the Legislative Finance Committee, the chair of the Legislative Health and Humans Services Committee, the Secretary of Health, the Executive Director of the NM Coalition Against Domestic Violence and the Executive Director of the NM Coalition or Sexual Assault Programs.

FISCAL IMPLICATIONS

Task Force participates with need to by individual member expenses.

SIGNIFICANT ISSUES

DOH states domestic violence disproportionately impacts women in New Mexico; in 2015, 70 percent of the domestic violence victims identified by law enforcement were female. Black survivors (5 percent) and Native American survivors (15 percent) are represented significantly more among victims than their representation in the state population (2 percent and 9 percent, respectively). Similarly, adult victims, as reported by domestic violence service providers, were predominantly Hispanic (54 percent).

NMCSAP analysis shows 1 in 3 women and 1 in 7 men in New Mexico have experienced domestic violence in their lifetime. In 2015, there were 17,757 domestic violence incidents reported to statewide law enforcement agencies in New Mexico, and 44% of these incidents involved injury to the victim.

DOH references the National Intimate Partner and Sexual Violence Survey (NISVS) which found that nationally 1 in 4 women in the U.S. has experienced severe physical violence by an intimate partner in her lifetime, and 1 in 3 experienced being pushed, slapped or shoved by an intimate partner. Similarly, the NISVS found that 1 in 7 men in the U.S. has experienced severe physical violence by an intimate partner in his lifetime, and 1 in 4 has been slapped, pushed or shoved by an intimate partner.

DOH analysis of a study by Glass et al. (2008) shows non-fatal strangulation is a predictive risk factor for homicide of women and found that prior non-fatal strangulation was associated with greater than six-fold odds of becoming an attempted homicide, and over seven-fold odds of becoming a completed homicide.

DOH states SM 38 is comprehensive in the members proposed to participate on the task force.

NMCADV states:

Interpersonal violence strangulation is a significant public health issue. Strangulation is one of the most lethal forms of domestic violence: unconsciousness may occur within seconds and death within minutes and it is one of the best predictors for the subsequent homicide of victims of domestic violence. NM has the second highest rate of DV in the country and, nationally, strangulation affects 68% of all domestic violence victims.

It has long been known that strangulation can cause death and serious injury. Only recently, has it become apparent that strangulation (sometimes called choking) causes Traumatic Brain

Injury (TBI). Brain damage can be minimized if law enforcement, EMT's and ER staff recognize the signs of strangulation and use evidence-based medical procedures to address the injury early on. The Task Force will be guided by local public health experts and law enforcement personnel who have already received training from the nationally recognized Training Institute for Strangulation Prevention. The goal of the task force is to identify law enforcement procedures and best medical practices that can be implemented statewide to ensure the highest level of care, regardless of the victim's geographic location.

New Mexico is one of the few states that does not specifically criminalize strangulation and has no legal definition of strangulation. The information gathered by the task force will be available in the future if a criminal bill is introduced to address strangulation.

It is difficult for prosecutors to get convictions in serious DV cases, in part because it is difficult for prosecutors to work with DV victims. Experts now believe that one reason for this difficulty may be undiagnosed and untreated TBI. TBI makes it difficult for victims to tell their story in a cohesive, consistent manner and makes it difficult for them to recall specific facts, which can make victims appear dishonest or unreliable. When brain injury is appropriately addressed, prosecutions are more successful.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

SM 38 is related to HJM 11, which requests that the NM Department of health convene a task force to create a statewide health plan to reduce intimate partner violence strangulation and its consequences. Also, SM 38 is more comprehensive than HJM11 in the members it seeks to be a part of the task force.

TR/al/jle