	Date	
MINUTES OF THE <u>SENATE</u> COMMITTEE ON _	PUBLIC HEALTH AND WELFARE	<u></u> .
The meeting was called to order bySenator	Jan Meyers Chairperson	at
a.m./pxxx on February 27	, 1 <u>\$4</u> in room <u>526-S</u> of the Capit	ol.
All members were present except:		
Senators Roitz and Vidricksen and Se	nator Francisco evoused	

March 13, 1984

Committee staff present:

Emalene Correll, Legislative Research Department Norman Furse, Revisor of Statutes office

Conferees appearing before the committee:

Dr. Robert Harder, SRS
Sylvia Hougland, Department on Aging
Susan Davis, Home Health Agency, Manhattan
Marianne Butler, Clinicare, Overland Park
Hattie Norman, Topeka, member Advisory Council on Aging
Ruth Wilkin, Governor's Advisory Council on Aging
Keith Landis, Christian Science Committee on Publication for Kansas
Senator Wint Winter
Anna Luhman, NW Kansas Family Shelter, Hays
Walter Buenning, Psychologist, Lawrence
Elizabeth Taylor, Kansas Association of Domestic Violence Programs
January Scott
Joyce Grover, Lawrence

Others present: see attached list

<u>SB 769</u> - Abuse and neglect of aged and disabled persons, investigation by social and rehabilitation services and protective custody

Dr. Robert Harder testified in support of SB 769, and distributed testimony giving a summary and background on this bill. He stated that SRS supports this legislation because it will provide legislative sanction to investigate cases regarding the aged and disabled. (Attachment #1).

Sylvia Hougland, Department on Aging, testified in support of SB 769, and distributed a background paper on Elderly Abuse, along with written testimony stating that this bill defines and mandates the provision of protective services by SRS to aged and disabled people not residing in institutions. ($\underline{\text{Attachment } \#2}$).

Susan Davis, Home Health Agency, Manhattan, testified in support of SB 769, and said that they are providers of in-home services to the elderly people. She described a situation in which a woman severely disabled by Parkinson's Disease was living at home with only her husband to care for her. She was not receiving adequate care from him and he refused to cooperate and would not let anyone from their agency intervene. The woman died. Another case history related to a woman who lived with her son. She was confused, disoriented, not cared for properly, and not dressed adequately. Ms. Davis stated that it was a dangerous situation, and the family refused to cooperate and were reluctant to use any adult care services. The woman is still living, but is now in the hospital.

Mary Ann Butler, Clinicare, Overland Park, testified in support of SB 769.

Hattie Norman, member of the State Advisory Council on Aging, testified in support of SB 769, and distributed testimony stating that child abuse laws have been strengthened, and there are laws to protect persons in nursing homes, and this bill would extend the protection to our non-institutional elderly. ($\underline{\text{Attachment } \#3}$).

CONTINUATION SHEET

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE room 526-S, Statehouse, at 10 a.m. pxx. on February 27 , 1984

Ruth Wilkin, Governor's Advisory Council on Aging, testified in support of SB 769, and distributed testimony stating that we need to discover whether abuse and neglect of the elderly exist in our state, and one way is to provide for investigation of reports of such abuse. This bill is not intended to intrude on the privacy of anyone and reports will be kept confidential. ($\underline{\text{Attachment } \#4}$).

Keith Landis, Christian Science Committee on Publication for Kansas, submitted a proposed amendment to SB 769. (Attachment #5).

SB 678 - Increase in marriage license fee to fund domestic abuse programs

Senator Wint Winter testified in support of SB 678 and explained that this bill would increase the marriage license fee by \$8.00. That money would be placed in a fund called Protection and Abuse Fund, and distributed by the Secretary of SRS to those facilities organized for the protection of the abused and victims of domestic violence, and their children. Senator Winter distributed to the committee two letters from Dr. Harder concerning funds available for programs relating to domestic violence, and a letter from Marjorie Van Buren, Executive Assistant to the Judicial Administrator, stating that their office has no objection to SB 678. (Attachment #6).

Dr. Robert Harder distributed to the committee a statement supporting SB 678, and said this bill will provide state monies to offset much of the cost incurred by domestic violence programs. (Attachment #7).

Anna Luhman, NW Kansas Family Shelter, Hays, testified in support of SB 678, and stated that they had grossly underestimated the number of clients they would be taking care of. They have had 116 clients since May 1, and there is a great need for establishing shelters, but the funds are not there.

Walter Buenning, Psychologist, Lawrence, testified in support of SB 678, and said this bill will provide immediate shelter, a treatment program, and a preventive facet.

Elizabeth Taylor, Kansas Association of Domestic Violence Programs, testified in support of SB 678, and distributed to the committee a list of Domestic Violence Services in Kansas. (Attachment #8). She stated that 12,000 women and children are being served at this time, and they have no place else to go. Funds are not only needed for the immediate programs, but to provide education.

January Scott testified in support of SB 678, and said she had nothing to add to what had already been said.

Joyce Grover, Lawrence, testified in support of SB 678, and said that there is an increase in client load each year. Their budget has decreased and stable funding is a real necessity.

In answer to questions concerning mill levy money to fund these services, several conferees responded that mill levy money was not available to them and the counties are reluctant to increase the tax base to fund these programs.

Senator Morris asked who determines where the money goes, and Dr. Harder replied that they would get representatives from various organizations together and work with them to establish guidelines, and this would be handled through grant programs.

Barbara Reinert, Women's Political Caucus, asked to be recorded as supporting SB 769 and SB 678, and written testimony was distributed from Ken Bahr, Executive Director, Crims Victims Reparations Board, in support of SB 678. (Attachment #9).

The meeting was adjourned.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE DATE 2-27-84

(PLEASE PRINT) NAME AND ADDRESS	ORGANIZATION
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Susan Havred	Riley Co. Health Homemake
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#1- 2-27-84

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

Statement Regarding House Bill 769

I. Short Title of Bill

An act concerning abuse and neglect; directing the investigation by the department of social and rehabilitation services of reports of abuse and neglect of aged and disabled persons; providing protective services. This bill does not amend any other statute.

II. <u>Background</u>

Currently there is no state law legislating SRS to investigate reports of abuse, neglect or exploitation of adults residing outside of adult care homes or other medical settings.

Social and Rehabilitation Services is receiving and investigating reports based upon the power and duties of the Secretary of Social and Rehabilitation Services (KSA 39-708c (w)).

III. Discussion

Without legal sanction, Social and Rehabilitation Services social workers are extremely vulnerable when investigating abuse, neglect, and exploitation reports outside of a nursing home or other medical settings.

The passing of this legislation will provide a legal sanction for SRS social workers to investigate reports of abuse, neglect, and exploitation of the aged and disabled adult living in the community.

IV. SRS Position

SRS supports this legislation because it will provide legislative sanction to investigate cases regarding the aged and disabled.

Robert C. Harder, Secretary Office of the Secretary Social and Rehabilitation Services 296-3271 February 24, 1984

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Atch. 1

TESTIMONY FOR SB-769 NON-INSTITUTIONAL PROTECTIVE SERVICES SENATE PUBLIC HEALTH AND WELFARE COMMITTEE February 27, 1984 - 10 AM

Bill Brief:

Defines and mandates the provision of protective services by SRS to aged and disabled people not residing in institutions.

Bill Provisions:

- Defines abuse, neglect, and exploitation.
- Defines eligibility to aged or disabled persons who are impaired to such an extent that they can't provide for their own care or protection.
- Defines the extent of the protective services that can be given, the limits and procedures for investigations, and the time frame for evaluations.
- Provides that no protective services can be provided unless the person consents. If the person withdraws consent, no protective services can be given.
- Non-consenting adults, who lack capacity to consent, can be provided protective services only when the court is petitioned for a guardian.
- Provides for petitioning of the court when the caretaker refuses service but the eligible adult gives consent.
- Provides that protective services be given in a manner least restrictive to an individual's liberty.

Testimony:

Elderly abuse, like child and spouse abuse, is very much a part of the issue of violence. The abused elderly person is dependent on the caregiver for his or her maintenance. There are similar parallels between battered children, and the elderly abused person who is residing outside of an institution with a caretaker. Both depend on the caretaker for basic survival needs; both reside in a family setting that is assumed to give love and caring protection; and both can be a source of stress to the family caretaker. In addition, the elderly abused person often is physically frail, physically ill or mentally impaired.

The number of abused in non-institutional settings is likely to increase in Kansas as it has done in nearby states. There are several factors contributing to what we see as an increase, in elder abuse by caretakers, usually family members.

- 1. Increase in elderly over 80 with increased caretaking needs.
- 2. Preference to remain at home and in the community.
- 3. Change in family roles and structures with caretakers often having other roles and work.

Atch. 2

While just 6.8% of all elderly are in nursing homes, an additional 17% are adjudged to have great or severe limitations in caring for themselves needing substantial assistance from families and friends.

Adult children and family members are providers of a significant amount of care to an increasingly larger, older, and frailer elderly population. There is a further possibility that the older person will be very old and quite frail, increasing the potential for abuse.

I certainly don't want to imply that all families abuse their elders, but the increased caretaking responsibilities and number of elderly that are frail and dependent will increase the potential for that abuse.

Profile of the Abused:

- 1. The abused person is most likely to be a woman over age 75.
- 2. The victim, in 75% of the cases reported, lived with the abuser; and in 84% of the cases, the abusing person was a relative of the victim (84%).
- 3. In most cases (75%) the elderly victim had a mental or physical disability which prevented him or her from taking care of basic daily needs e.g., eating, toiletting, bathing, dressing, taking medication. In most cases there was more than one disability.
- 4. Often the elderly victim had no or few other contacts outside the family and is completely dependent on the caretaker. The incidence of abuse tended to be recurring events and not single occurrences.

Profile of the Abuser:

- The abuser experienced some form of stress, e.g., of substance addiction (either alcohol or drugs), long term medical complaint, or long term financial difficulty.
- 2. Generally, the abuser tended to say that the victim was a source of stress because the elder required a high level of physical or emotional care or was financially dependent on the abuser.
- 3. In family order, the abuser is a son, another family member; e.g., grandchildren or nieces, and then daughters.

What we have then is an elderly victim, over 75, usually a woman, dependent on someone else, usually a family member, for life supporting maintenance.

Under the broad and general health and welfare provisions of SRS, protective services are provided to non-institutional elderly on a limited basis. Of the 1,133 abuse cases, 774 were non-institutional and 359 were non-institutional. Of the 774 non-institutional cases, 75% were confirmed or were potential risks; 25% were unconfirmed. Of the confirmed, 31% were by family or relatives, 10% were by others, and 59% were self-abuse or neglect.

But, like child abuse statutes prior to the passage of strong Kansas laws, the full magnitude of the problem is unknown.

Missouri passed a strengthened law in 1981. Prior to the passage of the law, there were 983 reported cases of non-institutional abuse. In 1983, there were 8,123 cases. 75% were substantiated, 13% were suspected. During State FY'84, Missouri is presently providing assistance in 800 cases per month.

One essential function of government is to insure the safety and welfare of the most dependent in society. Protective service is usually a temporary intervention much less severe than guardianship or other current protections. Kansas is the only state of the 25 states that we've reviewed that has an abuse statute that excludes those not in institutions. Current law has no specification as to the limits, procedures, or protections for the victims, caretakers, or for the workers. Kansas statute only provides protective services in nursing homes.

SB-769 was specifically drafted to insure and guard against the concerns expressed last year were addressed. We worked closely with Senator Pomeroy and others to work out a clearly drafted bill that:

- 1. Provides that the civil liberties of the individual and caretaker are protected.
- Provides strict limitations against provision of service when there is no consent.
- 3. Insures that the abused or neglected person can be protected.
- 4. That future abuse, to the greatest degree possible, is prevented.
- 5. That government has both limitations to its service but is also protected in carrying out its mandates.

SB-769 has a specific mandate in that it provides protective services by SRS to <u>defined individuals</u>: aged or disabled persons who are impaired to such an extent that they cannot provide for their own care or protection.

It also defines specifically:

- 1. What protective services are; and
- 2. The manner in which they are to be provided.

As significantly, it places certain limitations on provisions of protective services (Section 4).

- 1. If an adult has the capacity to consent, and does not consent, no protective services can be provided.
 - This provision was included to insure that government does not infringe on the rights of individuals or their families to have their own life styles.
- 2. Non-consenting aged or disabled adults may only be provided services within strict limitations and through use of the courts. If the Secretary does not believe the adult has the capacity to consent, the Secretary must file a petition with the court for a guardian for the purpose of obtaining such consent.
- 3. It prohibits further abuse by a caretaker, again within strict limitations. If the adult consents, and the caretaker refuses to allow, or interferes with that consent, the court may be petitioned; but only if a judge after being presented with facts finds that the caretaker has prevented the services, can he issue an order. This clause is vital to protect against further abuse.
- 4. Protective services are limited to assuring the health, safety and welfare of the adult within specific limitations.
- 5. A review must be done within 45 days and re-evaluations shall not be made less than every six months.

Finally, the bill specifically states that any action taken in providing protective services "must be no more restrictive of an individual's personal liberty and no more instrusive than necessary to achieve acceptable care."

In developing SB-769, the intent, which I believe has been achieved, was to balance the interests and responsibility of government to protect vulnerable and dependent people who are victims of abuse and neglect, with society's interest in protective the civil liberties of individuals and families and to guard the rights of self-determination and alternate lifestyles.

I strongly believe that people have the right to live as they choose, but that we also have a responsibility to protect those that cannot protect themselves from present and future abuse.

SB-769 is a good, strong bill worked out among many people that clearly balances the need for protection with the civil liberties and protection of individual rights and self-determination.

ELDERLY ABUSE FEBRUARY 1984

Background

Thank you Chairman Meyers and members of the committee, for giving me this oportunity to speak about one dimension of domestic violence and abuse: that of elderly abuse.

The abused elderly person is dependent on the caregiver for his/her maintenance. There are similar parallels between the battered child and the elderly person who is residing with a caretaker. Both depend on the caretaker for basic survival needs; both reside in a family setting that is assumed to give love and caring protection; and both can be a source of stress on the caretaker. In addition, the elderly abused person is often also physically frail, physically ill, or mentally impaired.

My topic is more inclusive than just the abuse of elders by family members in that it includes other caretakers, as well as self-neglect, the number of abuses in non-institutional settings is likely to increase in Kansas as it has done in nearby states.

There are several factors contributing to what we see as an increase in elder abuse and therefore an increased need for protective services.

- 1. The increased number of elderly (75+ and 85+) is especially significant. Percentage increases in those populations between 1970-1980 were: 65+ 15.2%; 75+ -18.6%; and 85+ 40%.
- 2. Preference to remain at home and in the community. It is a good policy to have community long term care (cost and a preference), but is means more people with care needs will be in the community.
- 3. Change in family roles and structures with caretakers often having other roles and work.

The increase in those 85+ is particularly significant, because they generally have greater limitations on the ability to maintain themselves, often they have multiple disabilities without some assistance personally from family and caretakers. I certainly do not want to imply that all families abuse their elders, but the increased caretaking responsibilities and numbers of elderly persons that are dependent on others have increased and will, we believe, cause an increase in elderly abuse in the future.

6.8% of the elderly are in nursing homes at one time in Kansas; yet, 17% are adjudged to have great or severe limitations to take care of themselves. It is estimated that 80% of the elderly's care is provided by families and family members. The middle-aged person today is more likely to have a living parent than ever before. This extended caretaking, rather than decreasing, is likely to increase into the future.

What this suggests is that adult children and other family members may be the providers of a significant amount of care to an increasingly larger and older elderly population. There is also a further possibility that the older person will be very old and quite frail, increasing the potential for abuse.

The changed physical and mental state also increases the potential for abuse. The elderly individual may not be as comfortable or feel as free as anticipated. The sense of control over his or her own life may decrease, and the sense of dependency increase along with physical and mental impairments.

There is a profile of abused elderly nationally that indicates the kind of older person who is most likely to be abused.

- 1. The abused person is most likely to be a woman over age 75; it is not the majority of the elderly who are well able to care for themselves.
- 2. The victim, in 75% of the cases reported, lived with the abuser; and in 84% of the cases, the abusing person was a relative of the victim (84%).
- 3. In most cases (75%) the elderly victim had a mental or physical disability which prevented him or her from taking care of basic daily needs e.g. eating, toiletting, bathing, dressing, taking medications. In most cases there was more than one disability.

Often the elderly victim had no or few other contacts outside the family and is completely dependent on the caretaker. The incidence of abuse tended to be recurring events and not single occurrences. The abuser also had a profile - the abuser experienced some form of stress, e.g., of substance addiction (either alcohol or drugs), long term medical complaint, or long term financial difficulty. Generally, the abuser tended to say that the victim was a source of stress because the elder required a high level of physical or emotional care or was financially dependent on the abuser.

In the family order, the abuser is a son, another family member; e.g. grandchildren or nieces, and then daughters.

What we have then is a elderly victim, over 75, usually a woman, dependent on someone else, usually a family member, for life supporting maintenance.

Let me just briefly outline some information about Kansas and what we currently do. Under SRS, General H&W Clause, although not specified in statute, the state does provide protective services to non-institutional elderly on a limited basis. There were 774 non-institutional abuse cases; 75% were confirmed or potential risks; 31% were by family or relations; 10% by others; and 59% were self-abuse. Not all were over 60 years of age.

774 Non-Institutional 359 In Institutions

Missouri passed a strengthened law in 1981 and we have some statistics. There were non-institutional elderly abuse cases in 1983 (60+); 75% were substantiated; 13% were suspected. Missouri reported they are presently at 800 cases per month.

Although we may have understanding of the abused and abuser, one essential function of government is to insure the safety and welfare of the most dependent in society. Kansas law provides for protective services for residents in nursing homes. But it makes no provisions for other elder abuse even though more reported abuse occurs in non-institutional setting.

Kansas is the only state of the 25 states that we reviewed that have an abuse statute that excludes non-institutional elderly in statute.

SRS presently serves these non-institutional clients under the broadest of mandate under its general health and welfare provisions. But there is no specification in law either to the limits, procedures, or to the protections for the vehicle, caretakers, or workers.

KDOA supports passage of this bill. It insures protective services under certain situations. In the development of SB 769, we attempted to address a variety of issues and concerns of the legislature.

- 1. That the civil liberties of this individual and caretakers be protected.
- That we do not unnecessarily interfer with people's lives but provide protective services only when essential.
- 3. That the abused and or neglected person be provided needed services.
- 4. That future abuse is, to the greatest degree possible, prevented.
- 5. That government also has protections in carrying out its mandates.

KDOA believed that SB 769 is based on sound principles that prevent non-institutional abuse and provides adequate protective services.

Such services should protect the <u>individual</u> who because of infirmities associated with age or disability and who is in <u>life threatening danger from abuse</u>, neglect, or exploitation should recive those services.

That the <u>protective services</u> of the state should be brought to bear to prevent further abuse or neglect.

That protective services should have strict limits in state law, and due process and assistance from the courts.

That there should be the least possible restriction of personal and civil liberty and the exercise of constitutional rights consistent with the due process.

KDOA supports SB 769. This bill includes the following protections:

- 1. Definition of eligibles, of services, and the problem to be addressed.
- 2. Mandates protective services in limited situations.
- 3. Has protections when a person does not want the service and is capable of giving informed consent.
- 4. Establishes the course of action with limited provisions when a person can not give informed consent.
- 5. Has a preference in any action taken under the law for the independent living and the least restrictive environment.
- 6. Established a course of action through the courts when the caretaker will not give consent.

It is possible to balance the interests in government's responsibility in protecting vulnerable dependent people who are victims of abuse and neglect, with our interest in protecting the civil liberties, of individuals and families, and the right to self determination and varied life styles.

I strongly believe that people have the right to live as they choose. I also believe that we do have a responsibility to protect those who can not protect themselves and prevent future abuse.

We are looking at a changing society, with many people living into older age. The aging of the older population - increase in old people with increased dependence, and a desire to stay in the community.

I hope this is a year when we can place these protections into law to protect those most vulnerable.

Mr. Chairman, Committee Members:

Good morning and thank you for this opportunity to appear before you today.

My name is Hattie Norman; I am a member of the State Advisory Council on Aging, an active member of the Topeka community and an older Kansas citizen.

For many years now I have been involved in the whole range of advocacy activities that affect older citizens such as myself. During that time one of my greatest concerns has been for our mentally and physically impaired elders. I have personally experienced and witnessed the slowing and deteriorating physical activities of my friends, relatives and co-workers.

I know how difficult it is for older persons who have known full and energetic lives to find themselves increasingly dependent on those around them to eat, bathe, walk or use the rest room.

We all have heard about the "greying" of America. More people are becoming seniors and more of our seniors are living past the age of 75. At that age we need help with simple things that younger people take for granted. Some of us may become dependent—and in most cases we come to depend on those that we have cared for, our children, or other close relations. Our physical and mental control over our own life becomes less as our sense of dependence increases. Our contacts with people outside of our immediate caretakers lessens. And just as caring for younger children who are also physically and mentally dependent causes stress to their caregivers so does the responsibility of caring for elders cause stress to caregivers.

Our American society through our government has always had a commitment to protect vulnerable and dependent people who are victims of abuse and neglect. When child abuse reporting laws have been strengthened reports have increased and consequently we have an increase in the state's ability to provide vital protection to children who are physically and mentally dependent on their caregivers. The state also has laws that protect persons who are in nursing homes and physically and mentally dependent on their caregivers.

Afch. 3

SB 769 would simply serve to extend the rights and protections available to every other group of mentally and physically dependent persons to our non-institutional elderly.

No one of us wants to unnecessarily interfere with other people's lives or to have the state unnecessarily interfere with our lives. However, we cannot ignore our responsibility to provide vulnerable members of our society with essential protective services. SB 769 admirably achieves that fine balance. Committee members, I strongly urge your support of this bill. If not for my present then for your future.

Thank you.

JVR:rd

#4-2-27-84

Feb. 27, 19c.

Madam Chairperson and Members of the Committee:

I am speaking today for the Governor's Advisory Council on Aging in support of SB 769. The Advisory Council is made up of representatives from all areas of Kansas. They met last week and voted to support SB 769 pertaining to non-institutionalized elderly abuse. We need to discover whether such abuse and neglect exists in our state, and one way to start is to provide for investigation of reports of such abuse. Reporting is not required, as in child abuse, but at least SRS would have authority to check into any reports they received.

As you know, Kansas was one of the very first states to become involved in reporting and investigating child abuse. It seemed to me at the time that it was a good idea to check into what I assumed to be a few cases around the state of abuse and neglect of children. No one could have been more surprised than I to watch the numbers grow, year by year, as confirmed cases of child abuse and neglect were reported. The amount of incest that has been discovered is appalling.

Then, about ten years ago I was asked to serve on a new Task Force being organized in Topeka to serve battered women. I soon learned what a sheltered life I had led, as I read the figures showing women and children housed and served by our shelter each month. Cities and towns across the state are trying to cope with this problem. Funds are very limited, and the number of women seeking shelter for safety's sake increases annually. I am convinced that we are a violent society. I don't know how to change that, but as human beings we should try to help the victims.

We hear from states that have started reports on the elderly, that abuse exists with them, also. Perhaps we can understand the stress family members are under when they must care for an old father, mother, grandparent, etc. Sometimes those people are a great burden;

Atch. 4

they are always there—never a moment when the family can be alone. Surely that kind of stress could lead to abuse. Surely neglect can occur simply because the person trying to give the care is physically unable to manage the situation. We don't really know how much elderly abuse exists out there in our state, but I think we should try to find out and to help those families where it might be found.

Senate Bill 769 is not a radical abuse bill. It is not intended to intrude upon the privacy of anyone needlessly, and reports will be confidential. SRS may not get many reports, but in view of the amount of child abuse and spouse abuse we have found, it seems reasonable that elderly abuse exists, also. Let us begin to provide for this possibility. Thank you for allowing me to testify.

Ruth Wilkin, Member State Advisory Council on Aging

45-2-27-84

Christian Science Committee on Publication For Kansas

820 Quincy Suite K Topeka, Kansas 66612 Office Phone 913/233-7483

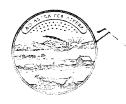
To: Senate Committee on Public Health and Welfare

Re: SB 769

It is requested that the following wording be added after line 0061 on page 2:

"No person shall be considered to be abused, neglected, exploited, or in need of protective services for the sole reason that such person relies upon spiritual means through prayer alone for treatment in accordance with the tenets and practices of a recognized church or religious denomination in lieu of medical treatment."

Atch. 5



STATE OF KANSAS

JOHN CAPLIN, GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

January 27, 1984

ROBERT C. HARDER, SECRETARY

E OFFICE BUILDING

The Honorable Wint Winter, Jr. State Representative State Capitol Building Room 143-N Topeka, Kansas 66612

Dear Senator Winter:

This is a follow-up to the testimony provided by Commissioner Anita Favors.

If the legislature agrees to some type of add on in relation to the marriage license and the money is used for the purpose of funding projects for women who have been in battered home situations, SRS would be in a position to administer the fund with a minimum of additional bureaucracy.

We already have workers in the field who are concerned about this same problem. They would view the grant money as a resource to them and to the communities to which they work. As you know, we have a granting and funding mechanism. These projects could be added on without additional manpower requirements within the agency.

If you have further questions, please let me hear from you.

Sincerely yours,

Robert C. Harder

Secretary

RCH:mo

cc: Senator Pomeroy

Commissioner Favors

2497E

ALLA. 6



STATE OF KANSAS

JOHN CARLIN. GOVERNOR

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

February 20, 1984

ROBERT C. HARDER, SECRETARY

STATE OFFICE BUILDING TOPEKA, KANSAS 66612

The Honorable Wint Winter, Jr. State Senator State Capitol Building Room 143-N Topeka, Kansas 66612

Dear Senator Winter:

This letter is in response to your inquiry in relation to money available for programs related to domestic violence.

I am enclosing our testimony related to House Bill 2886 which responds to some of the questions. I am also providing the information which was handed out at the hearing for House Bill 2886.

In response to your first questions as to funds available for operations of domestic abuse facilities including all funds administered through SRS. There was \$25,000 from the Social Service Block Grant which was spent in the Pittsburg, Manhattan and Great Bend areas for the purpose of day-to-day operations of domestic violence programs. There is also approximately \$7,500 from the Family and Children Trust Fund spent in Lawrence, \$7,400 from Manhattan from the same fund and \$3,700 from the Family and Children Trust Fund spent in Salina.

In relation to which Centers receive money I have answered that question in part in the above paragraph. The Social Service Block Grant money was spent in the following way: \$12,000 - Manhattan; \$10,000 - Pittsbuurg; \$3,000 - Great Bend.

In my opinion, we do not have sufficient funds to meet all the needs across the state as it relates to domestic violence and providing shelters for people who need service after some type of domestic violence situation.

Sincerely yours,

Robert C. Harder

Secretary

RCH:mo
Attachment
2612E



State of Kansas

Office of Judicial Administration

Kansas Judicial Center 301 West 10th Topeka, Kansas 66612

(913) 296-2256

February 27, 1984

Senator Wint Winter, Jr. Capitol Building Topeka, Kansas 66612

Dear Senator Winter:

As I indicated to you earlier, our office has no objection to Senate Bill No. 678.

Unlike the approach to funding in House Bill No. 2997, Senate Bill No. 678 does <u>not</u> cause additional clerical and accounting difficulties for the Clerks of the District Court: first, because collecting marriage license fees is already a discrete function, and second, because the separation of marriage license fees into the various funds is made at the state level rather than in each Clerk's office by dividing each fee received into several separate accounts.

If, as a matter of policy, the legislature chooses to provide a domestic abuse fund and/or to provide additional money for the family and children trust fund, the approach taken in Senate Bill No. 678 is preferable both philosophically and procedurally to any approach which undermines the uniform court docket fee by providing for an added charge only in certain types of cases.

If I am unable to attend the hearing on Senate Bill No. 678, I would appreciate your sharing this letter with the committee.

Marjorie J. Van Buren

Sincerely,

Executive Assistant to the

Judicial Administrator

MJVB:1fb

STATE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES

Statement Regarding House Bill 678

I. Short Title of Bill

An act concerning domestic abuse; increasing the marriage license registration fee and providing for moneys therefrom to be used for grants to certain domestic abuse programs; amending K.S.A. 23-108 and 23-109 and K.S.A. 1983 Supp. 23-110 and repealing the existing sections.

II. Background

Currently, there is no provision in the Kansas statutes to appropriate state funding for domestic violence programs. This legislation is being introduced to allow a percentage of the increase in the marriage license fee to be available to domestic violence programs. The legislation is needed to assure the continued operation of domestic violence programs.

III. Discussion

There is no permanent source of funding for domestic violence programs. Funding is derived from a variety of sources. The present economic situation and loss/decrease of funding sources threaten the domestic violence program's continued operation, while the demand and usage of the program increases at a time when funding sources are unstable.

IV. SRS Position

. We support this bill because it will provide state monies to offset much of the cost incurred by domestic violence programs.

Robert C. Harder, Secretary Office of the Secretary Social and Rehabilitation Services 296-3271 February 16, 1984

RJM: kb

Atch. 7

January, 1984

DOMESTIC VIOLENCE SERVICES in KANSAS Prepared by the Kansas Association of Domestic Violence Programs

SERVICES	Atchison	Concordia	Dodge City	Emporia	Garden City	Great Bend	Hutchinson	Lawrence
Shelter		Shelter	Shelter		***	She1ter	Shelter	Shelter
Safe Homes	Safe Homes	Safe Homes(2)		Safe Homes(9)	Safe Homes			
Support Groups	Support Group					Support Group	Support Group	Support Group
Counseling	Counseling	Counseling	Counseling	Counseling	Counseling	Counseling	Counseling	Counseling
Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals
Rape Counseling				Rape Counsel		Rape Counsel		
Hotline	Hotline	Hotline Hotline	Hotline	Hotline	Hotline	Hotline	Hotline	Hotline
Community Education	Education	·		Education		Education	Education	
Area Served	Atch. Co.	Cloud Co.	surrounding	8 Counties	Surrounding	28 Counties	Reno Co.	Northeast Ks
Capacity								
Limit of Stay				3 days	l night			30 days
Numbers Served 1983	NA	NA	NA	155		403		590
FUNDING	No Funding	No Staff			1		•	
United Way		100%	40%	90%	Primary	6%		25%
CDBG					·			
City Revenue Sharing								Some
Co. Revenue Sharing				•				Some
Donations			20-40%	10%	Some	40%		Some
Foundations								
Fund Raising								
Other			60% Alcohol			20%SRS 20%AT*		Alcohol Tax

***Uses Shelter 10%CVRP in Great Bend F & C Trust Fund

*Alcohol Tax

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SERVICES								.*
	Hays	Co1by	Leavenworth	McPherson	Manhattan	Pittsburg	Salina	Topeka
01 - 1	She1ter		A					
Shelter	Shercer		Shelter	<u> </u>	Shelter	Shel ter	\$ · · · ·	Shelter
Safe Homes		Safe Homes		Safe Homes			Safe Homes	Safe Hómes
•				• .				
Support Groups	Support Group				Support Group	Support Group		Support Group
Counseling	Counseling	Counseling	Counseling	Counseling	Counseling	Counseling -	Counseling	Counseling
Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals	Referrals
Rape Counseling	Rape Counsel		·				Rape Counsel	
Hotline	Hotline	Hotline	Hotline	Hotline	Hotline	Hotline	Hotline	Hotline
Community Education	Education		Education	Education	Education		Education	Education
Area Served	18 Counties	Surrounding	Surrounding	Surrounding	6 Counties	Southeast Ks	North Central	Surrounding
Capacity		·						20
Limit of Stay						3 days	3 days	30 days
					·			
Numbers Served 1983	97	Started 1/84	44 Families	NA	590	456	1045	500
		No Funding						
FUNDING		No Funding	:					
United Way			35%	50%	10%	35%	25%	24%
CDBG							`	
City Revenue Sharing								51% City/Co.
Co. Revenue Sharing				•				
Donations			к.	50%	90%		50%	8%
Foundations					·		,	11%
Fund Raising	65%							6%
Other	10%CVRP						SRS, F&CTF	0

25%Alcohol Tax

DOMESTIC VIOLENCE SERVICES in KANSAS Prepared by the Kansas Association of Domestic Violence Programs

SERVICES	Wichita	Johnson Co.	Wyandotte Co.	Goodland
Shelter	Shelter		Shelter	
Safe Homes	***	Safe Homes		
		•		
Support Groups	Support Gr	Support Group		
Counseling	Counseling	Counseling	Counseling	
Referrals	Referrals	Referrals	Referrals:	
Rape Counseling				
Hotline	Hotline	Hotline	Hotline	Hotline Only
Community Education	Education		Education	
Area Served	Surrounding	Johnson Co.	Wyandotte Co.	
Capacity			, ,	
Limit of Stay		3 day	30 days	
Numbers Served 1983	513	635	354	
		·	!	
FUNDING			d comments and the second seco	
United Way	4%	9%	100%	
CDBG	65%			
City Revenue Sharing				
Co. Revenue Sharing				
Donations	31%	16%		
Foundations				
Fund Raising		25%		
Other		50%Alcohol Tax		

TESTIMONY OF

KEN BAHR, EXECUTIVE DIRECTOR CRIME VICTIMS REPARATIONS BOARD

SENATE PUBLIC HEALTH & WELFARE COMMITTEE

S.B. 678

February 27, 1984

As director of the CVRB for the past two years I have become aware of an alarming increase in sexual assault and domestic violence cases during this Through the administration of the Federal Rape Prevention Grant authorized by the 1982 Legislative Session, I have had direct contact with many of the domestic violence centers in Kansas. The statistics show that in 1982 there were 1,000 reported cases of domestic violence per month, not including those reported to local law enforcement agencies. There were also 350 women and children sheltered per month by these centers due to domestic violence. However, it is estimated that only 10% of domestic violence cases are reported, meaning that there are 120,000 potential cases occurring in Kansas each year. Although the domestic violence centers do an excellent job of providing assistance to these victims, they are very limited in their ability to provide such assistance due to a lack of funding. Only seven of 21 domestic violence centers provide a shelter home for their clients. Other centers must rely on private housing, which may not always be accessible given the size of the family to be sheltered or the period of time for which they need this shelter.

My experience with these domestic violence centers indicates a very real need for shelter other than private housing. The financial assistance they receive from their respective communities and individual grants and donations are not enough. As I mentioned previously, much more domestic violence is occurring, which will only mean a greater taxing of the facilities and their personnel.

The intention of the CVRB in administering the Rape Prevention Grant has been to give rape crisis centers and domestic violence centers short-term grants of \$3,000-\$4,000 to provide assistance with their programs and to hopefully awaken the respective communities to the need for these centers. hope that once the community realizes the benefits of these centers they will gradually assume more of the necessary funding. I believe the same theory could be utilized in assisting domestic violence centers with their sheltering needs. Once the shelter has been established, hopefully the community will recognize the benefits of these shelters and make more of a financial commitment to them. As we all realize, the community benefits from these shelters as much as the individual victims do. To provide such assistance is not only to affirm the individual's right to safety and support, but also allows that individual a much better change to put her life back together and to be a contributing member of the community. Unfortunately, the awareness of this need and the financial assistance necessary are lacking in many communities. By providing this financial assistance to domestic violence centers, the 1984 Legislature would be addressing a very serious problem in the assistance of domestic violence victims as well as providing communities with facilities that they would hopefully continue once they realized the necessity and benefits of them.

If the members of the 1984 Legislature decide to recommend legislation to address this issue of sheltering victims of domestic violence, which I believe should be done, I would like you to know that the CVRB and I stand ready to administer such a program or to help in any way you deem fit.

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