



# FAQs: Privacy Laws Impacting Survivors

## New Hampshire

This FAQ card provides attorneys and advocates with a starting point for researching common privacy issues that impact victims of domestic violence, sexual assault, and stalking, and includes citations to laws that affect victims' privacy rights. Depending on the facts of a specific case, such as a victim's age or occupation, there may be additional laws that expand or limit a victim's privacy. This card is intended as a summary of relevant laws and was last revised in August 2018. We do not guarantee that all relevant laws are included and the information provided does not constitute legal advice. If you are dealing with a privacy-related situation, we recommend that you contact a local attorney. If you need help finding an attorney, visit the ABA's Lawyer Referral Directory at [https://www.americanbar.org/groups/legal\\_services/flh-home/flh-hire-a-lawyer/](https://www.americanbar.org/groups/legal_services/flh-home/flh-hire-a-lawyer/) or contact your state coalition. We encourage you to contact the VRLC with your privacy-related questions at [privacyTA@victimrights.org](mailto:privacyTA@victimrights.org) or 503-274-5477.

# 1

**What mandatory reporting laws should I be aware of in my jurisdiction?** New Hampshire law requires any person to report child abuse or incapacitated adult abuse to the Department of Health and Human Services or law enforcement. Also, any person who knowingly treats or assists another for a gunshot wound, or for any other injury believed to be caused by a criminal act, has a duty to report the injury. Certain exceptions apply. Additionally, mental health professionals have a duty to report where their patients make certain violent threats. Read the statutes below for definitions of abuse, reporting procedures, and any exceptions to mandatory reporting obligations.

### What must be reported?

### Who is REQUIRED to report?

|  | Any person | Health care provider | Mental health professional | Citation                                   |
|--|------------|----------------------|----------------------------|--|
| Child abuse  | ✓          | ✓                    | ✓                          | N.H. Rev. Stat. Ann. § 169-C:29            |
| Incapacitated adult abuse                              | ✓          | ✓                    | ✓                          | N.H. Rev. Stat. Ann. § 161-F:46            |
| Client is danger to others                             |            |                      | ✓                          | N.H. Rev. Stat. Ann. §§ 329-B:29, 330-A:35 |
| Gunshot wound or injury from criminal act <sup>1</sup> |            | ✓                    | ✓                          | N.H. Rev. Stat. Ann. § 631:6               |

# 2

**If I am working in Indian Country or on federal property, what authorities should I consult to determine my mandatory reporting obligations?**<sup>2</sup> Several laws govern mandatory reporting obligations in Indian Country<sup>3</sup> and on federal property. Tribal codes may require certain individuals to report child abuse and elder abuse to tribal officials, law enforcement, or tribal social services. Federal laws also address mandatory reporting. These laws apply to certain professionals who work in federal facilities or lands,<sup>4</sup> or who suspect that child abuse has occurred or will occur in Indian Country.<sup>5</sup> Additionally, state laws (discussed in Question 1), licensing regulations, and ethical obligations may require certain professionals to report abuse. Determining how these laws interact is complicated. Programs should contact attorneys and technical assistance providers for more information.<sup>6</sup>

**3**

**May a victim counselor be present during a victim’s privileged communications with an attorney, mental health professional, or physician without waiving the victim’s right to keep those communications confidential?** Yes, if the counselor is covered by New Hampshire’s victim counselor privilege,<sup>7</sup> and the other provider’s communications with the victim are also privileged. Under New Hampshire law, privilege is not waived where confidential information regarding an individual is shared between parties who have a privileged relationship with the individual.<sup>8</sup> The presence of a victim counselor during a victim’s communications with an attorney,<sup>9</sup> psychologist,<sup>10</sup> certified pastoral counselor,<sup>11</sup> mental health professional,<sup>12</sup> or physician<sup>13</sup> will not waive the victim’s rights to confidentiality because all parties have privilege.

**4**

**May an interpreter be present during a victim’s privileged communications with a victim counselor, attorney, mental health professional, or physician without waiving the victim’s privilege to keep those communications confidential?** Yes, if the interpreter is needed to relay the communications. In New Hampshire, privileged communications (such as those discussed in Question 3) are still considered confidential if a third party’s presence is reasonably necessary for transmission of the communications.<sup>14</sup> Additionally, whenever a Deaf person communicates through an interpreter to any person under such circumstances that the communication would be privileged, the privilege applies to the interpreter as well.<sup>15</sup>

**5**

**Are a victim’s privileged communications with a victim counselor, attorney, mental health professional, or physician protected from disclosure after the victim’s death?** It depends. A client’s communications with an attorney will remain privileged, because New Hampshire law indicates that this privilege survives the client’s death.<sup>16</sup> By contrast, New Hampshire law explicitly states that the victim counselor privilege terminates upon the victim’s death.<sup>17</sup> The physician and mental health professional privileges are silent as to this issue.

**6**

**Are communications between a victim and a prosecutor’s office or law enforcement agency confidential?** No. Communications between a victim and employees of a law enforcement agency or prosecutor’s office are not confidential because the government has a duty to turn over exculpatory evidence to the defendant. Exculpatory evidence is information that tends to prove the defendant’s innocence and could include statements or personal records the victim gave to an advocate employed by a prosecutor’s office, law enforcement, or other government agency. By contrast, advocates with non-profit agencies typically are not subject to these rules, as they are not part of the prosecution team or a party to the criminal case.

**7**

**When must school employees report gender-based violence against adult victims to the school’s Title IX Coordinator?** An employee’s role determines when a report of gender-based violence, e.g., sexual assault, domestic violence, dating violence, or sexually motivated stalking, must be made to a Title IX Coordinator. Under Title IX, a “responsible employee” has a duty to report such violence if they “knew, or in the exercise of reasonable care should have known, about the harassment.” Responsible employees include anyone who has authority to address the violence; who has a duty to report other misconduct that violates school policy; or whom a student could reasonably believe has this authority or duty. In 2017, the Office for Civil Rights retracted the 2011 Dear Colleague Letter and companion guidance. The federal requirements for what a

responsible employee must disclose to a Title IX Coordinator are currently unclear. If an employee’s communication with the survivor are privileged, e.g., communications discussed in Question 3, they have no duty to report the violence unless other mandatory reporting obligations are in effect, e.g. reporting abuse of a minor or of an adult with a disability.

# 8

**May law enforcement access an adult victim’s health information without the victim’s consent?** It depends on the type of information that is requested. The chart below summarizes some of the common situations in which law enforcement (LE) may access health information from health care providers *without* patient consent under Health Insurance Portability and Accountability Act (HIPAA) regulations.<sup>18</sup> Additionally, health care providers may be required by law to report certain injuries to LE, as discussed in Question 1.

| Scenario   | What may be disclosed?   | Limitations on what may be disclosed  |
|--|--|---|
| Health care provider receives court order, court-ordered warrant, subpoena or summons issued by a judicial officer, or grand jury subpoena | Information authorized by the court order, court-ordered warrant, subpoena, or summons                                       | Warrants for documents protected by New Hampshire’s physician-patient privilege must comply with several procedural requirements <sup>19</sup>                        |
| Provider receives administrative subpoena, summons, investigative demand, or other non-judicial process authorized by law                  | Information authorized by the administrative demand  | LE must certify that the information requested is relevant, material, specific, and limited in scope, and that de-identified information could not reasonably be used |
| LE asks about a patient by name  | The patient’s location in the health care facility and general medical condition   | Information must not be released if the patient has opted out   |
| LE requests information to identify or locate a suspect, fugitive, witness, or missing person  | Name; address; birth date; SSN; blood type; injury; date and time of treatment; date and time of death; physical description | Provider cannot disclose information related to the patient’s DNA; dental records; or typing, samples, or analysis of body fluids or tissue                           |
| LE requests information about a crime victim who cannot consent due to incapacity or emergency   | Information that LE states is needed to determine whether a crime has occurred   | Information cannot be intended to be used against the victim; LE’s need must be immediate; disclosure must be in the victim’s best interests                          |

## 9

**How can I determine the privacy rights of minors and whether minors may legally consent to domestic violence, dating violence, sexual assault, or stalking services?** The laws that govern a minor’s right to privacy and right to consent to services are varied and complex. A program may need to consult several different laws, including the jurisdiction’s laws regarding mandatory reporting (discussed in Question 1), emancipation, a minor’s right to consent to medical and mental health services, and a parent or guardian’s right to access a child’s medical, counseling, or other personal records. Contact your state coalition or the Victim Rights Law Center for more information on how to approach this question.

## 10

**Does a victim whose private information or photographs have been posted online without consent have any civil legal remedies?** Likely yes, but legal and practical success and the victim’s options will vary greatly depending on the facts of the case. Consult an attorney familiar with these issues before advising victims. Civil causes of action against the person who posted the content may include invasion of privacy and negligent or intentional infliction of emotional distress. If the website hosting the content has policies regarding harassment or sexually explicit content, the victim should use these policies to request removal. Additionally, if the victim took the photo, video, or other content at issue, the victim may submit a Digital Millennium Copyright Act notice requesting that the website remove it.

<sup>1</sup> N.H. Rev. Stat. Ann. § 631:6 provides that a person who has rendered treatment or assistance for an injury is exempted from this reporting requirement if the person seeking or receiving treatment or other assistance: (a) is age 18 or older, (b) has been a victim of a sexual assault offense or abuse, and (c) objects to the release of information to law enforcement. The exception does not apply if the victim is also being treated for a gunshot wound or serious bodily injury other than the sexual assault or abuse itself.

<sup>2</sup> We have included this information for all jurisdictions because it may aid professionals who work across state lines or in federal lands or facilities.

<sup>3</sup> Federal law defines “Indian Country” as all land within the limits of an Indian reservation under the jurisdiction of the U.S. government; all dependent Indian communities; and all Indian allotments still in trust. 18 U.S.C. § 1151.

<sup>4</sup> Victims of Child Abuse Act: 42 U.S.C. § 13031 *et seq.* & 18 U.S.C. § 2258.

<sup>5</sup> Indian Child Protection & Family Violence Prevention Act: 25 U.S.C. § 3201 *et seq.* & 18 U.S.C. § 1169.

<sup>6</sup> A list of OVW technical assistance (TA) providers, including tribal TA providers, is available at <https://ta2ta.org/directory.html>.

<sup>7</sup> N.H. Rev. Stat. Ann. § 173-C:2.

<sup>8</sup> N.H. R. Evid. 510.

<sup>9</sup> N.H. R. Evid. 502.

<sup>10</sup> N.H. R. Evid. 503.

<sup>11</sup> *Id.*

<sup>12</sup> N.H. Rev. Stat. Ann. § 330-A:32.

<sup>13</sup> N.H. R. Evid. 503.

<sup>14</sup> N.H. Rev. Stat. Ann. § 173-C:2; N.H. R. Evid. 502; N.H. Rev. Stat. Ann. § 330-A:32 (stating that confidential communications between mental health professionals and their clients are placed on the same basis as those between attorney and client); N.H. R. Evid. 503 (stating that confidential communications of physicians and psychotherapists are placed on the same basis as those between attorney and client).

<sup>15</sup> N.H. Rev. Stat. Ann. § 521-A:11.

<sup>16</sup> N.H. R. Evid. 502.

<sup>17</sup> N.H. Rev. Stat. Ann. § 173-C:2.

<sup>18</sup> 45 C.F.R. § 164.512. The regulations define “law enforcement official” as “an officer or employee of any agency or authority of the United States, a State, a territory, a political subdivision of a State or territory, or an Indian tribe, who is empowered by law to: (1) Investigate or conduct an official inquiry into a potential violation of law; or (2) Prosecute or otherwise conduct a criminal, civil, or administrative proceeding arising from an alleged violation of law.” 45 C.F.R. § 164.103.

<sup>19</sup> *In re Search Warrant for Medical Records of C.T.*, 999 A.2d 210 (N.H. 2010).