

Virginia Department of Health: Office of the Chief Medical Examiner

# Virginia Domestic Violence Fatality Review Newsletter

## Virginia Beach To Implement Fatality Review

The Virginia Beach Domestic Violence Fatality Review Team became the newest local team in Virginia to receive government endorsement in September. The team will review family and intimate partner violence-related homicides, and currently consists of 11 members representing:

- Child Protective Services
- CHKD Child Abuse Program
- Community Corrections and Pretrial
- DHS, Mental Health and Substance Abuse
- Navy Fleet and Family Support Center
- Office of the Chief Magistrate
- Office of the Chief Medical Examiner
- Office of the Commonwealth's Attorney

- Samaritan House
- Victim/Witness Program
- Virginia Beach Police Department

Team co-chair Larissa Sutherland said this about the team's challenges and mission:

**“We’ve had very little difficulty in the formation of our team, though the challenges have been the time-consuming process of creating the requisite paperwork that defines our protocols and team structure, and the coordination of many schedules for our planning committee meetings.**

**Everyone is looking forward to exploring our collective process in a very detailed way. Most of the agencies participating on our fatality review team have representa-**

**tives attending our bi-monthly CCRT. The hope is that our teams can work together to be better informed of ways we can strengthen communication among the agencies and create clear objectives that will ameliorate our overall response.”**

The group is meeting regularly to finalize the details of the team structure and protocols, in hopes of undertaking their first case review early in 2015.



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## Monticello Area Team Issues First Report

The Monticello Area Domestic Violence Fatality Review Team (DVFRT) issued its first report in October. The report covers findings from five fatalities occurring in the City of Charlottesville and Albemarle County from 1999-2007. Highlights from the report include:

- In four cases, minor or adult children were present during the fatal attack
- A protective order was not sought in any case, even though the victim expressed concern or fear about the behavior or her killer to law enforcement or family members prior to the homicide in three cases
- Four perpetrators had a known criminal history at the time of the killing, including one with a history of domestic assault and battery against the homicide victim

- Four out of five perpetrators were known to abuse drugs and/or alcohol

Among recommendations for best practices in identifying high risk cases, the team drew the following conclusion:

**“As none of the victims in the reviewed cases contacted local intimate partner violence resources for assistance, we must conclude they or their family and friends were not aware of the availability of such resources. As those services can be critical for victim safety, the team recommends the Charlottesville City Council and the Albemarle Board of Supervisors consider launching a strategic public information campaign to raise the profile of local resources and the impact of intimate partner violence on the community through public service announcements and the use of social media.”**

The full report can be viewed [here](#).

**City of Roanoke Launches the Domestic Violence Initiative**

This program involves entering domestic violence offenders into a database which tracks criminal history and other factors and then triggers interventions targeted at the offender based on that information. Roanoke City Police Department received training on the Initiative from Michigan State University, and is modeling the protocol after the High Point, NC program.

**New Resources Available**

National Coalition Against Domestic Violence launched a new searchable directory of domestic violence service providers in the U.S.: [domestic-shelters.org](http://domestic-shelters.org)

The YWCA of Richmond has joined with other agencies and combined area hotlines to form a single new domestic violence hotline serving Richmond, the Tri-Cities, and the counties of Chesterfield, Hanover, Henrico, Powhatan, Goochland, King William, King and Queen, New Kent, and Charles City: [Greater Richmond Regional Hotline](#)

The Centers for Disease Control and Prevention (CDC) issued a new fact sheet identifying the “What, Why, Who, and How” of elder abuse: [Understanding Elder Abuse](#)

The CDC also launched a new online resource which includes free online training courses on the public health approach to violence prevention: [VetoViolence](#)

**New Reports on National Data Trends**

The following reports were published last quarter, detailing findings from surveys and other projects pertaining to national trends in the prevalence and characteristics of domestic violence:

- The [National Intimate Partner and Sexual Violence Survey](#) (U.S., 2011) found that 22.3% of women and 14.0% of men experienced severe physical violence by an intimate partner in their lifetime. The survey also examined the various impacts of intimate partner violence, the most common of which were fear, concern for one’s safety, PTSD symptoms, and injury.
- The U.S. Department of Justice issued its report on 2013 data from the [National Crime Victimization Survey](#) (NCVS). From 2012-2013, the survey showed no significant change in the rate of domestic violence, even though

the overall rate of violent crime decreased slightly. In 2013, there were 464,730 instances of serious domestic violence, with 360,820 involving an intimate partner at a rate of 1.4 per 1,000.

- From the Violence Policy Center, [When Men Murder Women: Analysis of 2012 Homicide Data](#) examined 1,706 females murdered by males in 2012. Ninety-three percent were murdered by a male they knew, with 62% murdered by a spouse or intimate partner. Fifty-two percent of females were killed with a fire-arm. Nationwide, the homicide rate among women murdered by men was 1.16 per 100,000. The table below shows the top ten states, ranked by homicide rate as published in the report:

*Number and Rate of Female Homicide Victims Killed by Men for Top Ten States: 2012*

Ranking	State	Number of Female Homicide Victims	Homicide Rate per 100,000 Females
1	Alaska	9	2.57
2	South Carolina	50	2.06
3	Oklahoma	39	2.03
4	Louisiana	45	1.92
5	Mississippi	29	1.89
6	Nevada	25	1.83
7	Missouri	53	1.73
8	Arizona	56	1.70
9	Georgia	84	1.66
10	Tennessee	53	1.60

**National DVFRI Conference Announcement**

The National Domestic Violence Fatality Review Initiative (NDVfri) will host a conference event May 17-19 in St. Petersburg, Florida, bringing together team members and stakeholders from across the country to learn about fatality review and to advance efforts in the field.

Office on Violence Against Women (OVW) grantees are eligible to apply for a limited number of travel scholarships. Go to [www.ndvfri.org/conference-2015.php](http://www.ndvfri.org/conference-2015.php) for more information or to register.

## Spotlight on Domestic Violence Homicide in Special Populations

### IPV Homicide In LGBTQ and HIV-Affected Communities

The National Coalition of Anti-Violence Programs' (NCAVP) [annual report](#) summarizes data from their surveillance of intimate partner violence (IPV) among LGBTQ and HIV-affected individuals. The report identified an increase of 1.1% in reports of IPV against these special populations from 2012 to 2013, totaling 2,697 reports in 2013. NCAVP also noted a parallel upward trend in IPV homicide, documenting 21 homicides in 2013, the highest recorded number since the organization began tracking these homicides. The number for 2013 was the same as in 2012, up from 19 in 2011, and more than three times the six deaths recorded in 2010.

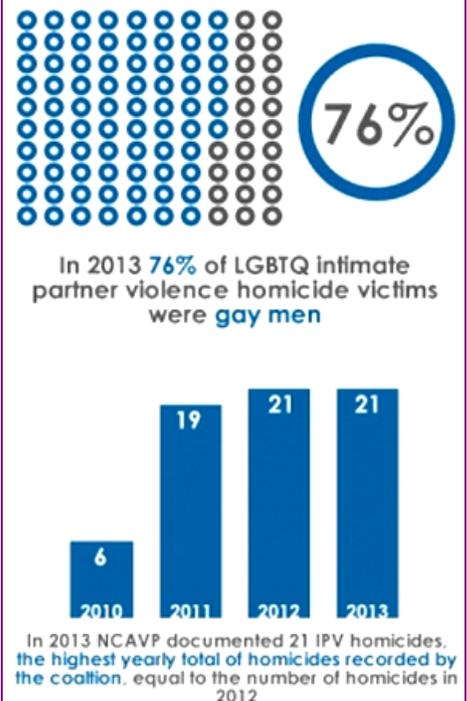
In Virginia, a total of 23 intimate partner violence related homicides that were known to involve a same-sex intimate partner relationship have occurred in the 15 years since the beginning of surveillance in 1999. In line with NCAVP's calculation that 76.2% of LGBTQ victims in the U.S. in 2013 were gay men, victims of same-sex intimate partner homicide in Virginia were 73.9% male. Same-sex relationships accounted for 1.7% of the intimate partner violence related homicides in Virginia, likely an underestimate of the burden of fatal intimate partner violence among LGBTQ individuals.<sup>1</sup>

Virginia does not currently have a standardized method for identifying whether a victim identifies as LGBTQ or is HIV-affected, nor is reliable information on such personal and complex subjects typically available in news articles and other records used in surveillance. In the absence of changes to how information is gathered during death investigations and surveillance to better identify LGBTQ and HIV-affected victims, domestic violence fatality review teams are Virginia's best resource for understanding the scope of fatal domestic violence impacting these communities. Through the contributions of service providers who may have had contact with homicide victims before their deaths and interviews with or testimony from friends and family members, fatality review has the potential to capture a much more complete picture of the lives and deaths of victims who were LGBTQ or HIV-affected.

In addition to better accounting for these individuals in our review of fatal domestic violence in Virginia, there is potential for even greater sensitivity and understanding of the interplay between sexual orientation, HIV/AIDS, and domestic violence. The Georgia Coalition Against Domestic Violence (GCADV) [recently recommended](#) that DVFR teams in their state consider broadening their scope to include the review of HIV/AIDS deaths where the victim may have been knowingly infected by their partner as an abuse tactic. They quote a study by Neil Websdale of the [National Domestic Violence Fatality Review Initiative](#) that found battered women may be more vulnerable to HIV infection than other women for a variety of reasons, including forced sex and the inability to negotiate condom use. As a result, Websdale notes that "Some deaths of women currently attributed to HIV or its complications might be traced to a woman's status as battered" and therefore potentially eligible for review under Virginia's [domestic violence fatality review statute](#).

While teams may not be prepared to broaden their case criteria in this way (and indeed, no Georgia DVFR teams have reviewed a domestic violence-related HIV/AIDS death to date), the consideration of such an endeavor or the addition of gender identity, sexual orientation, or HIV status to the list of topics routinely visited during case review represents a best practice in ensuring culturally competent handling of the complex factors at play where these characteristics intersect with domestic violence in some of Virginia's most vulnerable populations.

*Figures from the 2013 NCAVP Report*



### OVW Funds LED Cameras for Law Enforcement

The Indianapolis Metropolitan Police Department recently utilized grant funds from the Office on Violence Against Women (OVW) to purchase Illumicams for use on domestic and sexual violence response calls. The special LED cameras can be used to detect marks and bruises before they become visible, as well as bodily fluids in sexual assault cases. One of just a handful of communities in the country using Illumicams, authorities in Indianapolis hope that the cameras will support stronger cases against domestic and sexual violence perpetrators while reducing safety issues associated with victim testimony.

<sup>1</sup> Data from the Virginia Office of the Chief Medical Examiner, [Family and Intimate Partner Homicide Surveillance Project, 1999-2013](#).

## New in Research

The following list highlights research articles related to family and intimate partner violence published in peer-reviewed journals during the last quarter:

- The majority of boys and girls who date describe themselves as both victims and perpetrators of dating violence.
- Integrating prevention strategies for intimate partner violence (IPV) with HIV prevention programming may result in a reduction in HIV incidence as well as women's experience of physical and sexual violence.
- Parents and children in families where violence and verbal aggression are common tend to have more cavities and missing teeth.
- As many as one in 20 older adults in the United States may be financially exploited.
- One in five men surveyed in the U.S. reported having ever committed violence toward their spouse or significant other.
- Couples using marijuana frequently are at the lowest risk for intimate partner violence (IPV).
- One in every 100 women in the general population across eight countries including the U.S. have ever been strangled by an intimate partner.

## Upcoming Events

Selected upcoming campaigns, webinars, conferences, trainings, and other events pertaining to domestic violence prevention and fatality review. If you have information about an upcoming event and would like to see it listed here, please contact [Emma Duer](#).

### January

*National Stalking Awareness Month*

January 7-9, Washington, DC: *Healthy Masculinity Training Institute*

January 20-22, Charlotte, NC: *Mentors in Violence Prevention Training Institute*

### February

*Teen Dating Violence Prevention Awareness Month*

February 2-4, Winston-Salem, NC: *Creating a Process of Change for Men Who Batter: Comprehensive Domestic Abuse Intervention Programs*

February 14 (multiple locations): *One Billion Rising*

February 25 (webinar): *Partnering with Other Systems: National Center on Domestic Violence, Trauma, and Mental Health*

### For more information on Virginia DVFR:

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*In 1999, the Virginia General Assembly enacted legislation authorizing family and intimate partner fatality review. The Code of Virginia §32.1-283.3 allows for the establishment of local and regional DVFRs. The statute includes important confidentiality protection and directs the Office of the Chief Medical Examiner to provide technical assistance and training.*

### **Save the Date!**

***Building Health Futures  
2015 Conference***

***“Re-imagining Men’s Role in the Movement to End Sexual and Intimate Partner Violence”***

***April 22-23  
Richmond, VA***

***Sheraton Park South***

***Featuring Men Stopping Violence, a national training institute dedicated to mobilizing men to prevent violence against women and girls.***

**Click [here](#) to view the announcement and a preview of the featured speaker:**

***Ulester Douglas,  
Men Stopping Violence***