

Virginia Department of Health: Office of the Chief Medical Examiner

Virginia Domestic Violence Fatality Review Newsletter

Update: Virginia DVFR Information System

The web-based database under development by the Office of the Chief Medical Examiner (OCME) for use by Virginia's Domestic Violence Fatality Review (DVFR) teams in collecting and reporting case review data is reaching the final stages of development. Now formally named the Virginia Domestic Violence Fatality Review Information System (VAFRIS), OCME staff and project partners are working to finalize data elements and design aspects of the web-based system. Also in development are supporting documents such as a user manual, data use agreements, and data collection forms. The VAFRIS is due to be released for statewide use this Fall. A draft of the data collection form is available for team's use now by contacting Emma Duer (see back page for contact info).

www.CommunitySolutionsVA.org

Virginia's resource clearinghouse for sexual assault, domestic violence, and stalking.

Know it.

Use it.

Share it.

State Partnership Launches Online Resource Center

Attorney General Ken Cuccinelli, along with other members of the Virginia Partnership for Community Defined Solutions to Violence Against Women, debuted an online clearinghouse for Virginia professionals working on the front lines of sexual and domestic violence. The website, CommunitySolutionsVA.org is designed to provide resources that help prosecutors, victim advocates, law enforcement officers, health care professionals, court officials, and others in the

field of sexual and domestic violence. Content includes training materials, evaluation tools, conference announcements, print-ready brochures, model policies, data reports, health care guidelines, lethality assessment tools, military resource handbooks, and many other resources for individual professionals and community task forces to enhance their community responses.

Local Team Members Attend National DVFR Conference

The *National Domestic Violence Fatality Review Initiative's National Conference: Global Possibilities*, was held in May in Phoenix. Local DVFR team members Linda Bryant (Norfolk) and Melissa Harper (Roanoke) attended the conference, along with state coordinator Emma Duer. Norfolk Team Co-chair Linda Bryant represented her team as a panelist during a session titled "Difficult Junctures/Thorny Issues" to discuss challenges faced by teams across the country. Melissa Harper had this to say about the outstanding keynote addresses:

The conference was incredibly moving and touched my heart! Mark Wynn's "Law Enforcement Challenges and Changes in the Response to Violence Against Women Worldwide" was powerful, and many attendees were so moved as he presented

how victims/survivors must be responded to in a violent situation. He is a shining example of an appropriate, non-judgmental response to violence victims. Dr. Campbell was wonderful as always with her keynote "Global Intimate Partner Homicide-Risk for Women Worldwide". Dr. Marilyn Armour's keynote "Working with Surviving Children" was very striking. It again made me realize that if we are going to have any impact on rates of violence-related events, we must place maximum emphasis on child witnesses and subsequent aftermath, as well as community plans for assisting the surviving family who must then raise the children left behind.

Materials from the conference are now available at www.ndvfri.org.

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New Legal Advocacy Resource

The [Legal Advocacy Manual](#), presented by the Virginia Poverty Law Center, provides victim advocates (as well as victims) with a comprehensive guide to help domestic and sexual violence victims in Virginia through some of the legal processes in which they may become involved. It provides both basic and intermediate levels of information about legal advocacy—what it is, the difference between civil and criminal justice systems, definitions of commonly used legal terms, and how to avoid the unauthorized practice of law, among other topics. The manual offers context for the emotional, logistical, and legal hurdles involved in protective orders, criminal prosecutions, visa applications, and divorces. See the link



Virginia Sexual and Domestic Violence
ACTION ALLIANCE

Action Alliance Unveils New Website and LGBTQ Helpline

The Virginia Sexual and Domestic Violence Action Alliance recently introduced a newly designed website (www.vsdvalliance.org), and a new service called the LGBTQ Partner Abuse and Sexual Assault Helpline. The new helpline provides a free and confidential telephone service for lesbian, gay, bisexual, trans, and queer or questioning callers in Virginia looking for information or help regarding intimate partner abuse, sexual assault, and stalking.

Domestic Violence Fatalities in the Military

Emma Duer, Virginia's state coordinator for Domestic Violence Fatality Review, was invited by the National Center for Child Death Review Policy and Practice to help facilitate a training on best practices in fatality review at the Department of Defense's Annual Fatality Review Summit in June. The Department of Defense (DoD) implements an annual review of all domestic violence and child abuse-related deaths involving active duty military, and identified at their last summit a need for additional training in fatality review concepts and best practices to improve their efforts.

In 2011, the [Virginia Family and](#)

[Intimate Partner Homicide Surveillance Project](#) recorded 20 domestic violence-related homicides that involved either an active duty military or their dependent spouse or child. This number represents 14.9% of all domestic violence homicides in Virginia in 2011, representing a substantial need for increased collaboration between military and civilian agencies and programs to better understand these deaths—and ultimately to prevent them. Military and civilian teams can be a resource to each other in reviewing cases where active duty military are involved.

Because Virginia is home to many military bases and installa-

tions, the Commonwealth is in a unique position to facilitate improved partnerships between civilian and military fatality review teams.

Shortly after the DoD's Annual Summit, the National Resource Center on Domestic Violence released several [new resources](#) on domestic and sexual violence in the military. The DoD has also announced the establishment of a Prevention and Coordinated Community Response to Child Abuse, Neglect, and Domestic Abuse Working Group to strengthen awareness and prevention efforts.

New in Research

Few Doctors Asking About IPV

A study from [McMaster University in Ontario](#) of fracture clinics around the world found that although one in 50 women being treated for broken bones stated they were seeking treatment as a direct result of domestic abuse, only a handful had ever been asked by a healthcare provider about abuse. The study also found that of those with the most serious injuries, as many as two-thirds were a result of domestic violence.

IPV Screening Not Helpful?

A [study of women in Australia](#) found that routine screening and counseling for intimate partner violence in the primary care setting did not improve quality

of life, safety, or mental health for abused women. However, the same women did show significantly lower levels of depression. The authors urge that more research is needed to determine what interventions would be helpful to victims.

Global Prevalence of Intimate Partner Homicide

A June article in the [Lancet Journal](#) gave a systematic review of existing research to estimate the global and regional prevalence of intimate partner homicide; overall, 13.5% of all homicides were committed by an intimate partner, with 38.6% of female victims and 6.3% of male victims having been killed by an intimate partner. The study notes that these findings are

most likely conservative, considering the number of homicides committed where the relationship is unknown.

Global Attitudes Toward DV Shifting

A [survey conducted in 26 countries](#) found that, compared to 5 years ago, significantly more people said they found domestic violence unacceptable. Women and men responded to the question "Is it okay for a man to hit or beat his wife under certain circumstances?" followed by 5 hypothetical circumstances such as, "if she argues with him". The largest shifts in attitudes against DV were found in countries such as Zambia and Kenya, with the smallest changes seen in India and Bolivia.

What the Numbers are Telling Us: New report from the WHO highlights Violence Against Women

In June, the World Health Organization (WHO) released a new report titled “[Global and regional estimates of violence against women: Prevalence and health effects of intimate partner violence and non-partner sexual violence](#).” The report represents the first systematic study of global data on the prevalence of violence against women and highlights the need for all sectors to engage in eliminating tolerance for violence against women and providing better support for women who experience such violence. Highlights from the report’s findings include:

- Overall, 35% of women worldwide have experienced either physical and/or sexual intimate partner violence (IPV) or non-partner sexual violence.
- Almost one third (30%) of all women who have been in a relationship have experienced physical and/or sexual violence by their intimate partner. In some regions, 38% of

women have experienced intimate partner violence.

- Globally, as many as 38% of all murders of women are committed by intimate partners.
- Women who have been physically or sexually abused by their partners are 16% more likely to have a low-birth-weight baby, and twice as likely to have an abortion or experience depression. In some regions, women who have experienced IPV are 1.5 times more likely to acquire HIV.

This report was accompanied by another offering guidelines to healthcare staff on helping women. “These findings send a powerful message that violence against women is a global health problem of epidemic proportions,” said Dr. Margaret Chan, director general of the WHO. “We also see that the world’s health systems can and must do more for women who experience violence.”

What’s in the News: Recent State and National Headlines

New Program Brings together DV Prevention and Environmentalism

The National Coalition Against Domestic Violence (NCADV) recently announced a new partnership that allows them to collect used or non-working electronics for re-use and recycling. Accepted items include any cell phone and their accessories, laptops, MP3 players, digital cameras, and video game systems. NCADV receives a portion of the monies from sale of refurbished electronics to support their programming against domestic violence. More informa-

tion and free shipping labels are available [here](#).

Facebook Increases Efforts to Ban Posts Promoting Violence Against Women

Facebook [announced in May](#) they would be updating their guidelines for evaluating content, after several companies withdrew their ads from the site. The changes were in response to an online campaign by Women, Action & the Media criticizing Facebook’s poor response to complaints about “groups, pages and images that explicitly condone or encourage rape or domestic violence or suggest that

they are something to laugh or boast about.”

Texas House Passes Bill to Create “DV Registry”

[Texas House Bill 21](#) would create a public domestic violence registry similar to the state’s sexual predator registry. The proposed registry would hold the names, pictures, and list of offenses of those who have been convicted of domestic violence crimes three or more times. Some local advocates say the database may not be as useful as intended and worry it would risk revealing victim identities.

New Resources from CDC

The Centers for Disease Control and Prevention (CDC) developed a variety of materials to help partners, grantees, and other groups educate their communities about the National Intimate Partner and Sexual Violence Survey (NISVS) and Intimate Partner Violence, Sexual Violence, and stalking. These materials are available for download below:

- [Communications Toolkit](#)
- [Brochure](#)
- [Fact Sheet – NISVS 2010 Summary Report](#)
- [Fact Sheet – NISVS 2010 Findings on Victimization by Sexual Orientation](#)
- [Customizable Fact Sheet \(Click here for instructions\)](#)
- [FAQs – NISVS 2010 Findings on Victimization by Sexual Orientation](#)

Upcoming Conferences, Trainings, and Events

Webinar: [The Intersection of Suicide and Homicide as it Relates to Domestic Violence](#)
September 11

[Intervening at the Crossroad: Child Abuse and Juvenile Justice Conference](#)
Sept 17-19, Hampton, VA

[National Domestic Violence Awareness Month](#)
October

[Southwest VA Regional Conference on Domestic Violence](#)
Oct 3 (Christianburg, VA) & Oct 4 (Abingdon, VA)

[VA Governor’s Summit on Human Trafficking](#)
Oct 3-4, Richmond, VA

[Mental Illness Awareness Week](#)
October 6-12

Domestic Violence Homicide-Suicide in Virginia

In June, the Virginia Office of the Chief Medical Examiner released a new report titled, "[Homicide-Suicide in Virginia 2006-2010: Who is at risk?](#)" This report describes the 128 separate homicide-suicide events that occurred in Virginia over the 5-year period, and demonstrates the overwhelming role of Domestic Violence—specifically, Intimate Partner Violence (IPV)—in these fatal events. Of the 128 events examined, 109 (85.2%) were related to problems between intimate partners. Highlights from the report include further details about these 109 cases of Intimate Partner Related Homicide-Suicide:

- The majority (52%) of homicide victims were female and White; however, Blacks remain disproportionately impacted by fatal IPV with higher rates among both men and women.
- The majority of suicide decedents were White males (56%), followed by Black

males. Men were at more than 27 times greater risk of committing a homicide-suicide than women.

- Nearly 90% of deaths resulting from a homicide-suicide event were caused by a firearm.
- Female homicide victims were most often in an intimate partner relationship with the suicide decedent (88.5%); however, male homicide victims were more likely to be caught in the crossfire of IPV (68.4%).
- In 29.4% of cases, the suicide decedent and/or homicide victim were found to have a positive Blood Alcohol Content at the time of death.
- The most common precipitating factor for these fatal events was the end or ending of the relationship, which was identified in 49.5% of all cases.

For more information on Virginia DVFR:

Emma Duer, State Coordinator
Virginia Department of Health,
Office of the Chief Medical Examiner
737 North 5th Street, Suite 301
Richmond, VA 23219
(804) 205-3858

Emma.Duer@vdh.virginia.gov

www.vdh.state.va.us/medExam/dvfr



In 1999, the Virginia General Assembly enacted legislation authorizing family and intimate partner fatality review. The [Code of Virginia §32.1-283.3](#) provides for the establishment of local and regional DVFRs. It provides important statutory confidentiality protection, and directs the Office of the Chief Medical Examiner to provide technical assistance and training.

New in Research: Spotlight on Child Abuse

Connection Between IPV and Child Abuse

An [issue paper published in New Zealand's Family Violence Clearinghouse](#) outlined current evidence from the United States National Survey of Children's Exposure to Violence study on the link between intimate partner violence and child maltreatment. This study showed 34% of children who witnessed IPV had also been abused or neglected in the past year, and 57% were maltreated over their lifetime (compared to 11% of children who did not witness IPV).

Childhood Abuse Linked to Food Addiction in Adult Women

A [new study](#) in the journal *Obesity* found that women who experienced severe physical or sexual abuse during childhood are much more likely to have a food addiction as adults. The

likelihood of food addiction was increased even further for women who had experienced both physical and sexual abuse in childhood. This study adds to our understanding of the lasting health impact of childhood abuse.

Negative Attitudes Linked to Child Maltreatment

[Researchers from University of Maryland](#) demonstrated recently that mothers-to-be who believe infants dirty their diapers to bother their parents or purposefully ignore them may be more likely to abuse or neglect their young children. Said one researcher in the field, "I think abusive parents often see (hostile intent) when it's not there. They can misperceive the child's behavior as being intentionally annoying. When people are annoying us...we tend to be hostile and aggressive in return." The study found that women with the most hostile

attributions for babies were more likely later to have a CPS report, and to report yelling at or spanking their child.

Specific Changes in Brain Structure After Different Forms of Child Abuse

Scientists have found a correlation between specific forms of maltreatment and thinning of the cortex in precisely those regions of the brain that are involved in the perception or processing of the type of abuse. The study, published in the [American Journal of Psychiatry](#), sheds light on the mechanisms behind the previously known association between childhood abuse and the development of psychiatric disorders later in life. The authors speculate that these changes in the brain may serve as a protective mechanism, but lay the groundwork for the development of behavioral problems in adulthood.