

NJ Domestic Violence Fatality / Near Fatality

Review Board
2021 Annual Report



Introduction

In 2020, the New Jersey Domestic Violence Fatality-Near Fatality Review Board (NJDVFNFRB) decided to take a closer look at risk factors of domestic violence fatalities and the importance of preventing future violence. For the 2021 annual report, the NJDVFNFRB continued to look at these risk factors since statistics of intimate partner homicide remain stable: 1 in 3 female murder victims and 1 in 20 male murder victims are killed by intimate partners. Intimate partners are defined as both current and former spouses as well as dating partners¹. By understanding risk factors, we are better able to identify at-risk individuals, provide opportunities to intervene, and offer victims safety planning. For example, in instances where a victim experiences non-fatal strangulation, a victim is 10 times more likely to be killed by her partner². By informing systems, that work with both victims and perpetrators, about the specific risk factors with a high level of lethality, the complexities in the relationship where domestic violence is present and the need to assess the increased risk of harm in each unique situation, these systems can become better equipped to identify, intervene, and potentially prevent the next domestic violence tragedy.

In 2017, the CDC released a report that examined homicides from 18 states between 2003-2014. It found 55.3% of homicides committed against women were Intimate Partner Homicides (IPH)³. Globally the homicide rate has generally declined since the 1990's, however, IPH has continued at a steady rate⁴. According to the Bureau of Justice Statistics' annual victimization reports, approximately 691,000 nonfatal intimate partner violence (IPV) victimizations occurred annually in the United States between 2013 and 2017 with approximately 1400 intimate partner homicides occurring each year⁵. Research has shown certain factors increase the risk of IPH. These factors include but are not limited to the following: the escalation of violence; stalking/violating court orders; separation/ jealousy; substance abuse; and mental health. The more risk indicators present in a relationship, increases the chance that a person is more likely to be abused or killed. In our 2020 annual report we saw similar trends as we did in 2021 and decided it was necessary to dig deeper in the examination of factors that put individuals at a higher risk for IPH.

1 National Coalition Against Domestic Violence (2016). Domestic violence and firearms.

Retrieved from <http://ncadv.org/files/Gun%20Fact%20Sheet.pdf>

2 National Domestic Violence Hotline (2016). The dangers of strangulation.

Retrieved from <https://www.thehotline.org/2016/03/15/the-dangers-of-strangulation/>

3 Petrosky E, Blair JM, Betz CJ, Fowler KA, Jack SP, Lyons BH. Racial and Ethnic Differences in Homicides of Adult Women and the Role of Intimate Partner Violence—United States, 2003-2014. *MMWR Morb Mortal Wkly Rep* 2017;66:741-746 DOI

4 United Nations Office on Drugs and Crime [UNODC], 2013

5 Jennifer L. Truman and Lynn Langton, [Criminal Victimization, 2013](#), Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, September 2014, NCJ 247648; Jennifer L. Truman and Lynn Langton, [Criminal Victimization, 2014](#), Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, August 2015, NCJ 248973; Jennifer L. Truman and Rachel E. Morgan, [Criminal Victimization, 2015](#), Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, October 2016, NCJ 250180; Rachel E. Morgan and Grace Kena, [Criminal Victimization, 2016: Revised](#), Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, October 2018, NCJ 252121; and Rachel E. Morgan and Jennifer L. Truman, [Criminal Victimization, 2017](#), Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics, December 2018, NCJ 252472

Consideration on Race, Immigration Status and Gender/Sexual Orientation

The Board also realized with the killing of George Floyd in 2020 marked a renewed movement to acknowledge the importance of addressing the systemic factors that contribute to racial disproportionality and injustices in the U.S. Against this backdrop, the Board identified its own concerns of perceived institutional bias and cultural insensitivity during the 2020 – 2021 case reviews. This was not new territory for the Board. In 2013, the Board issued its annual report titled, Intimate Partner Violence in New Jersey's African American Community. It addressed themes of the lack of culturally competent services, racial loyalty based upon fear of the bias within the legal and justice systems, economic disadvantages, training needs within the criminal justice and social service systems, as well as other factors. While the case reviews indicated that challenges persist in these areas, recommendations were not issued as Board members were able to report on reformative systemic efforts already underway. The Office of the Attorney General is rolling out training on implicit bias. The Department of Children and Families trained all staff on race equity and created an internal Office of Equity and Inclusion. The NJ Coalition to End Domestic Violence has been hosting discussions on racism and bias with DV provider agencies statewide, with requests for Inclusion and Accessibility plans. While systemic work has begun, it must be continued and built upon to withstand the forces that will work to impede progress. Addressing implicit and explicit bias, and racism at all levels, continues to be vital to domestic violence prevention and intervention for communities of color.

Disproportionality and bias happen based not only on race but also to other marginalized populations based on immigration status and gender/sexual orientation. The 2020 – 2021 case reviews indicated continued challenges for survivors within in these populations as well. Immigrant survivors who reach out for assistance from law enforcement can face threats to their own freedom or experience differential treatment regardless of whether they have legal status within the country. LGBTQIA+ survivors experience prejudice that is a deterrent to seeking support or can negatively impact outcomes. As efforts are undertaken to address systemic racism, the institutions, agencies, and communities responsible for this work must also ensure that achieving equality for all marginalized communities is incorporated to universally address domestic violence.

To create change, the emphasis must be on the importance of systems and providers recognizing bias as it exists in our society and within their organizations and being pro-active to contribute to its demise. Some advocacy strategies that may help to reduce or eliminate biases can include engaging in active personal and institutional bias mitigation efforts, avoiding stereotypes and race-based misinformation in agency conversations and published materials, communicating effectively across racial, ethnic, religious and gender identities, and requiring ongoing training.

Work of the Board

The Board meets ten times a year. The Program Coordinator of the Board collects and compiles all the case material and data on domestic violence fatalities. The Board closely examines law enforcement and prosecutor reports, medical examiner / autopsy reports, witness statements, and when available criminal histories and restraining orders. Typically, one case is selected for review and discussed per the monthly meeting. Prior to the meeting, Board members review the case material, frequently consisting of hundreds of pages, in order to prepare for discussion of the case. Members share their professional knowledge about the many aspects of domestic violence to analyze the cases and offer recommendations to various government and community-based systems designed to increase victim awareness and safety with the ultimate goal of preventing future intimate partner violence.

Risk Assessment Tools

Identify trends in domestic violence deaths and intergrate an understanding of possible risk factors, derived from, fatalities and near fatalities, into various service systems functioning.

IDENTIFY



Engage in quantitative and qualitative reviews of statewide fatalities and near fatalities.

ENGAGE



Develop policy and system change recommendations from the review processes in order to promote victim safety, offender accountability and work toward prevention of domestic violence fatalities.

DEVELOP



In 2017, New Jersey experienced significant criminal justice reform and moved away from a monetary bail system to a non-monetary, risk-based system. This new system utilizes a risk assessment tool, the Public Safety Assessment (PSA), and a Decision-Making Framework (DMF) intended to identify high-risk offenders for pre-trial detention and to ultimately protect victims, families, and communities from potentially violent individuals. With intimate partner violence making up 15% of all violent crime, it is important to determine and consider the risk factors to promote safety and well-being for all. The PSA is an actuarial assessment that predicts failure to appear in court pretrial, new criminal arrest while on pretrial release, and new violent criminal arrest while on pretrial release. Use of the PSA, in combination with other pretrial improvements, is associated with improved outcomes. These include higher rates of pretrial release and less use of financial conditions of release. These outcomes do not negatively impact crime or court appearance rates, while the DMF provides other information to judges such as court history, juvenile record, history of violence, and probation indicators. These tools help to predict if an individual is likely to return to court, commit a new crime, or commit a new violent crime if not detained. This process varies from county to county and is tracked by New Jersey's Administrative Office of the Courts.

Regrettably the PSA does not account for certain risk factors present in domestic violence cases that are predictive of reoffending. Even the developer of the PSA suggested developing a supplemental tool to guide critical decision making in these cases⁶. The New Jersey Supreme Court's Ad Hoc Committee on Domestic Violence issued a report in 2016 which recommended that "New Jersey should develop a system wide, coordinated process for assessing risk and danger in domestic violence cases."⁷

⁶ NJ Attorney General Law Enforcement Directive 2016-6 v3.0 at 44.

https://www.nj.gov/lps/dcj/agguide/directives/ag-directive-2016-6_v3-0.pdf

⁷ Report of the Supreme Court Ad Hoc Committee on Domestic Violence, June 2016 at 28.

https://www.nj.gov/dcf/providers/boards/acdv/Report.of.the.Supreme.Court.Ad.Hoc.Committee.on.DV-June_2016.pdf

The Committee report further noted its objective in doing so was "... with the overriding goal of preventing domestic violence homicides and serious injury..."

There are other domestic violence-specific assessment tools that are used to assess risk for domestic violence incidents. These include the Danger Assessment and Ontario Domestic Assault Risk Assessment (ODARA) adopted by New Jersey's Office of the Attorney General and law enforcement. Many victim service agencies utilize The Danger Assessment developed by Jacquelyn Campbell (1986). This tool determines the level of danger and likelihood that a victim has of being killed by their abusive partner. It assesses the severity and frequency of abuse to help raise a victim's consciousness and reduce denial about the abuse⁸. The ODARA tool, developed by the Ontario Provincial Police and the Ontario Ministry of Health, identifies the risk of future assaults against intimate partners and recidivism of domestic violence offenses. This tool is to be used in any setting that responds to domestic violence victims and/or offenders⁹. According to the Judiciary the ODARA is administered primarily by emergency responders such as law enforcement, shelters and emergency room personnel to interview victims and review the offender's criminal history and related information. As an example, law enforcement use the ODARA scores to inform and guide decision making when seeking warrants determining if detention is appropriate, and providing any relevant information gleaned from ODARA to the presiding judicial officer. The Judiciary has not instituted ODARA yet they are in agreement a risk assessment tool is needed. ODARA does not fit the statutory requirements and has not been scientifically validated in New Jersey for the Judiciary to use, however they will continue to research and consult experts on finding the right tool for their risk assessment process.

The Case Selection Process

The Board identifies cases for review through its partnerships with the New Jersey State Police (NJSP). The NJSP reports on domestic violence homicides and homicide-suicides in its annual Uniform Crime Report (UCR). The Board's Steering Committee reviews data provided by the NJSP and the New Jersey Violent Death Reporting System (NJVDRS) and other sources to determine the cases to be selected for in-depth review. The Board uses case investigation data to formulate recommendations to the state agencies and other stakeholders based on the cases examined.

For the Board's 2021 reviews, the NJSP provided the 2019 UCR data to facilitate case selection. For the four years combined (2016 through 2019), there were 180 cases of domestic violence fatalities, of which 97 were intimate partner homicides. Of these, most victims were women (80.4%). Four cases were same sex relationships. In nearly all cases, perpetrators and victims are the same race: victims were identified as White (56.7%), Black (41.2%) or Asian (1%). The weapon or method used in these deaths are reported in the UCR as: firearms (37.1%) which includes various handguns, rifles, shotguns, and other firearms, knives/cutting instruments (30.9%), blunt objects (15.5%), strangulation (7.2%), personal weapons (5.2%) which include hands, arms, fists, etc., and in 5.2% the weapon or method was not in the data provided. A third (34%) of IPV homicide cases are murder-suicides.

⁸ Dr. Jacquelyn Campbell Danger Assessment: Campbell, J.C. (2007). *Assessing dangerousness: Violence by batterers and child abusers*. New York: Springer

⁹ Ontario Domestic Assault Risk Assessment: Hilton, N. Z., Harris, G. T., & Rice, M. E. (2010). *Risk Assessment for domestically violent men: Tools for criminal justice, offender intervention, and victim services*. Washington, DC: American Psychological Association

Analysis of Selected Cases

For 2020-2021, nine cases were selected for Board review for each year. After the Board's analysis of the nine cases selected for review in 2021, members of the Steering Committee decided to look again at the following well-known risk factors: 1) if the victim had left the perpetrator, was planning to leave or was in the process of leaving; 2) perpetrator's history of domestic violence; 3) perpetrator's criminal history; and, 4) past or present restraining orders against the perpetrator. It is well known that the first factor, when a victim leaves, is considered the most dangerous time for a victim, typically, a woman, because the man fears losing his power and control over her. These four factors were selected because they are most likely to be available in the data for review. The last annual report provides the analysis of these four risk factors for the nine cases reviewed in 2020 and with the 2021's review of cases, we report again on these risk factors. In addition, data on the restraining orders were captured from all 18 cases for the present report.

For the nine cases reviewed in 2020, members of the Steering Committee found that 8 of 9 (89%) of the fatalities occurred when the victim either planned on leaving or left the relationship. This factor continues to be considered a high-risk factor as recognized by NJ Supreme Court, *State v. Reyes*¹⁰, 172 N.J. 154 (2002), "'Domestic violence victims who leave their abusers are justified in their continued fear because of the many cases of victims who are assaulted or killed by former partners.' *Hoffman*, supra, 149 N.J. at 585. Often victims are at greatest risk when they leave their abuser because the violence may escalate as the abuser attempts to prevent the victim's escape". However, in our 2021 review, we found that only 3 of 9 (33%) victims left or had planned to leave the relationship. Since potential explanations for leaving or staying are not always available in the file and further exploration by the Board may be needed in order to determine the factors (e.g. COVID) that contributed to the difference between the two reviews.

In 2020, domestic violence histories were found in 8 of 9 (89%) cases, which is similar to this year's finding of 7 of 9 (78%) and reflects that a history of violence was seen in the majority of cases reviewed. The histories were documented from prior law enforcement reports and during homicide investigation interviews with family and/or friends. Offenders often engage in patterns of coercive control involving violent and non-violent strategies over the course of their relationships with victims thus fatalities are not isolated or impulsive incidents. The patterns of coercion and control are exemplified by stalking and harassment. The National Institute of Justice reported that perpetrators' criminal histories are a significant risk factor for re-abuse. Of the 9 cases reviewed, 4 (44%) of the offenders had criminal histories, which was similar to last year's analysis. Similarly, in both sets of reviews, we found that nearly half of the cases (44%) had restraining orders filed. In sum, our analysis demonstrates that high risk factors were often present and could have contributed to the fatalities in the cases reviewed by the Board.

In 2019, the Board approved to adopt a new process to get a better understanding of domestic violence victimization. This new process is modeled after other states' review board processes and includes

¹⁰ Supreme Court decision *State v. Reyes*, 172 N.J. 154 (2002)

interviews with victims' families and friends to obtain the perspective of those who were closest to them. By including the interviews into our process, the Board foresees obtaining more information to expand our perspective to address unanswered questions and gaps where systems' intervention could have prevented DV related tragedy. The Board completed monthly reviews in accordance with its usual process. However, this year it selected one case from the review pool and conducted interviews with family and community advocates in a fatality case. This new process is a modified version of other states' approaches including New York, Montana, and Georgia with respect to conducting their Board review processes. The interview process proved to be helpful in providing additional information one could not obtain through the routine case review. The insight provided by the family and community advocates allowed the Board to further understand and capture the victim's emotional state and feelings of going through this abusive relationship. It also allowed the Board to have a deeper discussion around prevention, intervention and awareness and address these through possible recommendations.

Risk Factors for Case Reviews of 2020 and 2021

2020	2021
89% of victims left or planned on leaving the relationship	33% of victims left or planned on leaving the relationship
78% of the cases had domestic violence histories	89% of the cases had domestic violence histories
44% of the offenders had criminal records	44% of the offenders had criminal records
44% of the victims filed for restraining orders	44% of the victims filed for restraining orders

Educating the Community on Our Work

Board members have continued to educate stakeholders and other interested parties through virtual workshops, forums and conferences at the municipal, county and state levels emphasizing the mission and purpose of the Board and highlighting how our work has impacted New Jersey communities.

NJDFNFRB 2020-2021 Presentation List	
Monmouth County Safety Accountability Team on High Risk Domestic Violence	New Jersey Culturally Specific Initiative
DOH-Office of Local Public Health and NY/NJ High Intensity Drug Trafficking Area Program, supporting Overdose Fatality Review Teams (OFRTs) in New Jersey	New Jersey Department of Health-Maternal Mortality Review Committee
New Jersey Coalition Against Sexual Assault (NJCASA)	

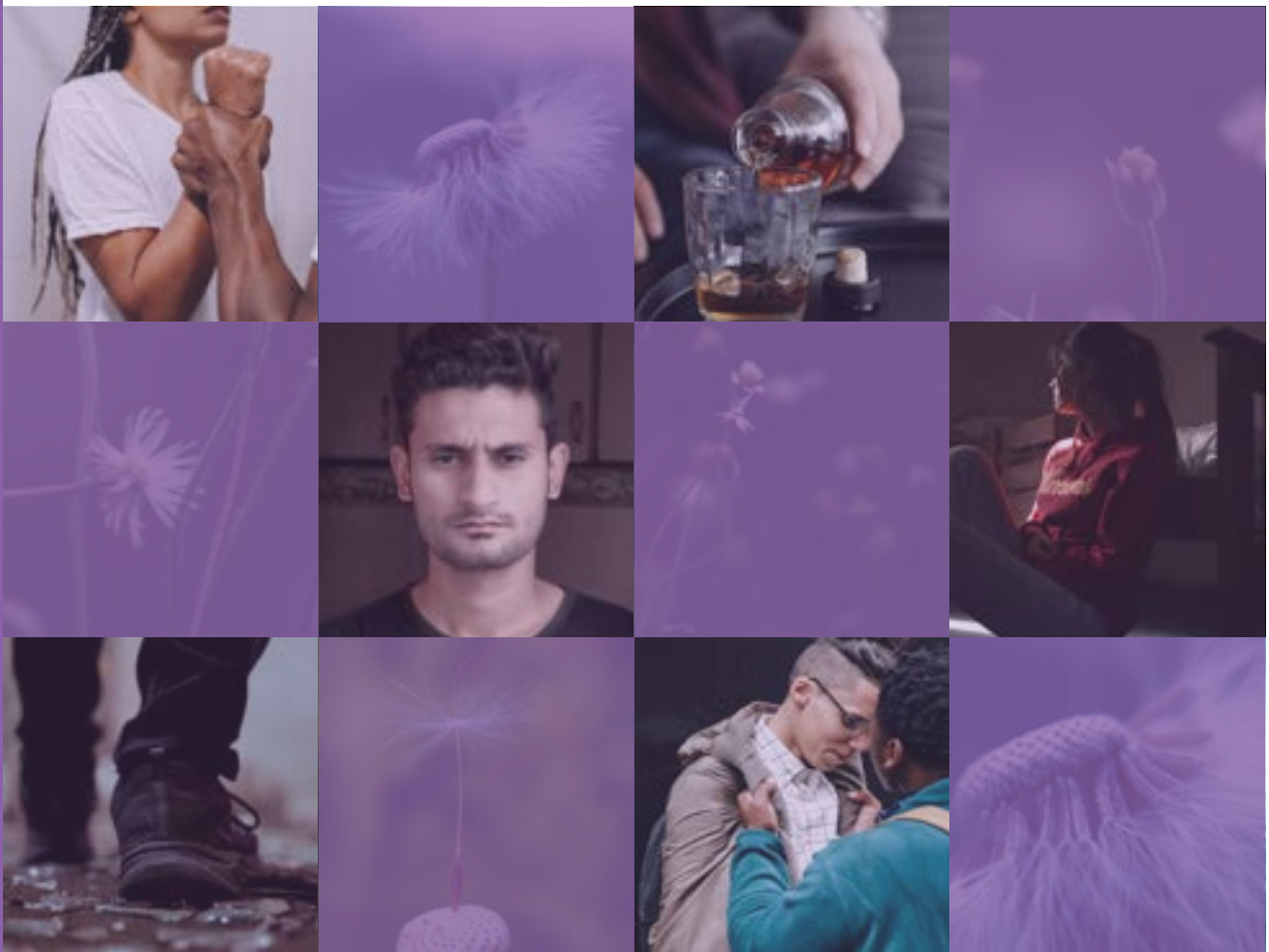
What's Next for the Board

New Jersey is one of six states approached by researchers Drs. Jill Messing, from Arizona State University and Jackie Campbell from Johns Hopkins University to participate in a study they are conducting, Preventing and Assessing Intimate Partner Homicide Risk (PAIR). The study aims to identify and update risk and protective factors for intimate partner homicide in order to develop prevention and intervention¹¹. The original Danger Assessment study was limited to females in twelve urban cities. The PAIR study has expanded the research to examine other communities such as, Latinos, Asian Americans, Indigenous People, LGBTQ in both urban and rural settings for male and female victims. Broadening the study should provide a more expansive and accurate analysis of risk and protective factors for intimate partner homicide both in New Jersey and globally. Currently, the Board along with New Jersey's Attorney General's Office, Administrative Office of the Courts and Medical Examiners are in discussion to finalize data agreements to move forward in the research.

Conclusion

New Jersey continues to be a leader in domestic violence awareness, prevention, and intervention by partnering with existing government and community-based systems and by forming new partnerships to better understand how to better serve and advocate for all communities effected by intimate partner violence and homicide.

¹¹ [PAIR Studies Handout II.pdf](#)



Recommendations

1. The Board recommends that the Division of Criminal Justice, the County Prosecutors Association, and the New Jersey Coalition to End Domestic Violence (NJCEDV) determine which domestic violence risk factors now contained in the Data Collection Form¹² should be included in the Preliminary Law Enforcement Incident Report.
2. The Board recommends that all training and education provided for law enforcement, the judiciary, community providers, and medical/mental health providers be trauma informed. This will increase the understanding of the dynamics of domestic violence, specifically on the pattern coercive control and the impact of trauma on victims. It is also recommended that trainings include information on victims' rights, services for all survivors including the undocumented, and opportunities for interventions.
3. The Board recommends that the identified New Jersey licensing boards for each healthcare specialty work in partnership with the NJ Coalition to End Domestic Violence (NJCEDV) identify domestic violence training requirements needed and ensure a minimum of 4 hours are completed in the continuing education of domestic violence for each renewal cycle. This includes: Physicians/ PAs- State Board of Marriage and Family Examiners- Licensing Board of Marriage and Family Therapists (LMFTs), Licensed Professional Counselors (LPCs), State Board of Medical Examiners NP/RN/LPNs-State Board of Nurses (CSW/LSW/LCSW)-State Board of Social Worker Examiners Psychologists all overseen by the Division of Consumer Affairs, also including (PhD)- NJ State Department of Health-Office of Emergency Medical Services.
4. The Board recommends that the Administrative Office of the Courts consider revising the Public Safety Assessment (PSA) to reflect high risk domestic violence indicators by adding one point if a gun, weapon or object is used in a threatening manner and another point if a gun, weapon or object is used to cause injury in a domestic violence incident.
5. The Board recommends that The Office of the Attorney General; Office of Emergency Telecommunications Services and the New Jersey Association of Chiefs of Police formulate a guideline and training program for 911 dispatchers on DV calls by providing certain current and historical information that could assist law enforcement when responding to domestic situation.
6. The Board recommends that police supervisory personnel ensure that police reports indicate a domestic violence incident has occurred by checking the designated DV box on the warrant/summons complaint. Proper identification of a DV incident will provide a truer account of domestic violence in New Jersey.
7. The Board recommends that the Office of the Attorney General consider a possible restructuring and provide additional funding to the Victim's Crimes Compensation Office. Providing regional offices or staff to assist victims and/or families of a victim in need of assistance affected by a violent crime.

¹² In 2015, the Board created and piloted a New Jersey Domestic Violence Data Collection tool for all New Jersey intimate partner homicides, the Board to use the data to evaluate and measure the success of prevention recommendations and strategies.

2021 Board Members

Asia Smith	Newark City Police Department	Chair
Hon. Thomas Dilts	Retired New Jersey Superior Court	Co-Chair
John Nardi	Division On Women - DCF	Program Coordinator
Mildred Mendez	Department of Health	Government Representative
SFC Willian Simonson / SFC Jamie Ann Champ	New Jersey State Police	Government Representative
Lauren Ira / Jason Chessman	Office of the Attorney General	Government Representative
Craig Robin	Office of the Public Defender	Government Representative
Dawn Roane	Div. of Child Protection & Permanency	Government Representative
Dr. Kevin Wilder, MD	Office of the State Medical Examiner	Government Representative
Monthly Representation	Child Fatality & Near Fatality Review	Government Representative
Anna Martinez	Division on Women - DCF	Government Representative
Nelson Troché	Department of Human Services	Government Representative
Hon. Robert Zane	Retired Municipal Court Judge	Government Representative
Robert Laurino	County Prosecutor's Association	Public Member
Patricia Baitinger	Deputy Chief County Probation Officer	Public Member
Cpt. John Stollsteimer Lt. Dan Long	Gloucester Twp. Police Department	Public Member
Dr. Cynthia Lischick, PhD	Forensic Psychologist and Licensed Professional Counselor	Public Member
Nicole Morella	NJ Coalition to End Domestic Violence	Public Member
Christine Ruggiero	Licensed Health Care Provider	Public Member
Sue Rovi, PhD	Rutgers - NJ Med School-Ret Researcher	Resource Member
William Zaorski	Retired Deputy Attorney General	Resource Member
Will DuBose	NJ Coalition to End Domestic Violence	Resource Member
Beatriz Oesterheld	Comm. Affairs and Resource Center CEO	Resource Member
Trish Perlmutter	Partners - Policy Legal Counsel	Resource Member