

New Jersey Domestic Violence Fatality and Near Fatality Review Board

Annual Report 2018



Intimate Partner Homicide in Immigrant Communities

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Intimate Partner Homicide in Immigrant Communities

History of the Board

The Domestic Violence Fatality and Near Fatality Review Board was founded in 2000 pursuant former Gov. Christine Todd Whitman’s Executive Order No. 110 The Board allows the community to honor victims of domestic violence-related fatalities and learn from their deaths to improve systemic and community responses to domestic violence. In previous years, the board has examined intimate partner homicides of African-American women, partners of law enforcement officers, and teenagers as well accounts of incidences of near fatality due to domestic violence.

For more information and to see previous board reports please visit <http://www.nj.gov/dcf/providers/boards/dvfnfrb/>

Objectives

Identify domestic violence related fatalities and near fatalities	Engage in quantitative and qualitative reviews of statewide fatalities	Recommend system changes in order to promote victim safety, offender accountability, and work toward prevention of domestic violence fatalities.
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The Case Review Process

The Board identifies cases for review through its partnerships with the New Jersey State Police (NJSP) and the New Jersey Violent Death Reporting System (NJVDRS). 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 NJVDRS and other sources to determine what cases will be selected for in-depth review. The Board uses case investigation data to formulate recommendations to the state agencies based on the cases examined.

Definitions and Terms

- **Domestic Violence-** a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone. ¹
- **Domestic Violence Fatality (DVF)**— Refers to any death, whether intended or un-intended, of a party that is the result of an act of domestic violence. Domestic Violence Fatality can refer to the death of the victim or perpetrator (in the case of murder/suicide).
- **Foreign Born**— Refers to any person residing in the US who was born outside of the 50 United States, Puerto Rico, and U.S. Island Area. ²
- **Intimate Partner Violence (IPV)** - physical, sexual, or psychological harm by a current or former partner or spouse. This type of violence can occur among heterosexual or same-sex couples and does not require sexual intimacy. ³
- **IPV Homicide or Intimate Partner Homicide (IPH)**— Refers to the killing of a person who is in, or was previously involved in, an intimate relationship with the killer. This includes: marriage, dating relationships, common-law relationships, and ongoing sexual relationships.
- **Native Born**— Refers to any person who is a United States citizen at birth including those born in the United States, Puerto Rico, U.S. Island Area, or abroad to a U.S. citizen parent. ⁴

¹ United States Department of Justice (2017). *What is Domestic Violence*. Retrieved from <https://www.justice.gov/ovw/domesticviolence>

² United States Census Bureau (2016). *About Foreign-Born Population*. Retrieved from https://www.census.gov/topics/population/foreign-born/about.html#par_textimage

³ Centers for Disease Control and Prevention (2017). *Intimate Partner Violence: Definitions*. Retrieved from <https://www.cdc.gov/violenceprevention/intimatepartnerviolence/definitions.html>

Methods Used to Compile This Report

Although intimate partner violence occurs across all ethnic and racial groups, regardless of age, socioeconomic status, educational background, religion, and sexual or gender identity, immigrant populations face unique contextual challenges when victimized. The continuous growth of foreign-born populations in New Jersey and the United States makes the investigation of domestic violence fatalities in NJ foreign-born communities particularly relevant to the Board.

The Board began its focus on domestic violence deaths among foreign born and immigrant community in March 2015 and completed its review in December 2016. After selecting nine IPH cases for review in 2015 and 2016, the Board gathered background information, research, and consulted with experts on domestic violence in immigrant and foreign-born communities in New Jersey.

The Board also received a statistical analysis from the Department of Health and Senior Services on IPV resulting in deaths in New Jersey from 2004 - 2008 based on data from the Violent Death Registry System.

The Board then used this information to create eight policy recommendations with the goal of understanding IPH as it relates to foreign-born peoples in New Jersey and, ultimately, reducing further incidences of DV and IPH in these communities and in general.



Immigrant communities in the United States represent a multitude of backgrounds, ethnicities, religions, and cultures and it is important to keep in mind that each community brings its own strengths, and challenges. Many foreign-born persons who now reside in the United States have fled their home countries to escape persecution, seek economic stability, and/or secure future educational opportunities for their children. A large body of research on immigrants and refugees highlights the strength and resilience often found in immigrant families,⁴ but it is important to also acknowledge that immigrant women's cultures, contexts, and legal status frequently increase their vulnerability to abuse and violence. Immigrant women may experience additional barriers that impact their help-seeking behaviors, including lack of language proficiency, economic insecurity, cultures of family privacy and shame, and lack of knowledge and/or access to culturally appropriate services. Perceived and actual discrimination and negative stereotypes may add to an immigrant woman's reluctance to report violence. These factors are compounded by increased incidences of deportation, which may make immigrant victims and survivors of interpersonal violence wary of involving law enforcement in high-risk situations.

Immigrant women's cultures, contexts, and legal status frequently increase their vulnerability to abuse and violence.



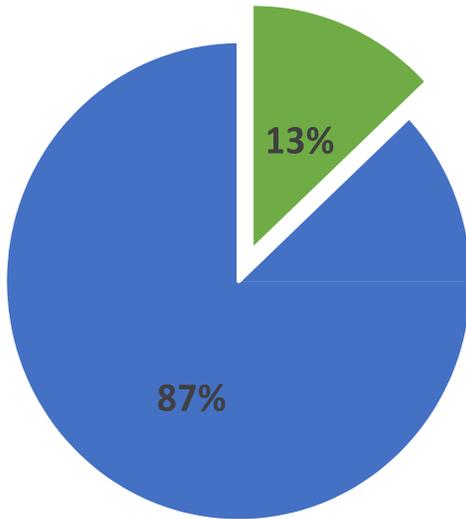
⁴ Walsh, F. (2003). Family resilience: A framework for clinical practice. *Family process* 42.1 (2003): 1-18.

Foreign-Born Populations in the US and NJ

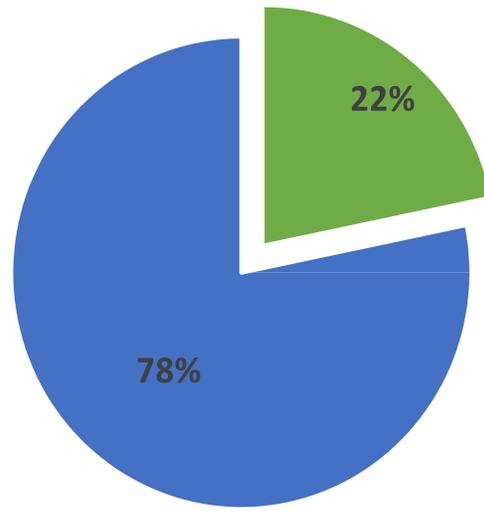
About 4% of the entire foreign-born population of the United States resides in New Jersey, making up 21.7% of the state population. New Jersey is one of three states where the foreign-born population accounts for more than 20% of the population.

The largest foreign-born populations in New Jersey are from India, the Dominican Republic, and Mexico. ⁵

U.S. Foreign Born Population



NJ Foreign Born Population



■ Foreign Born ■ US Born

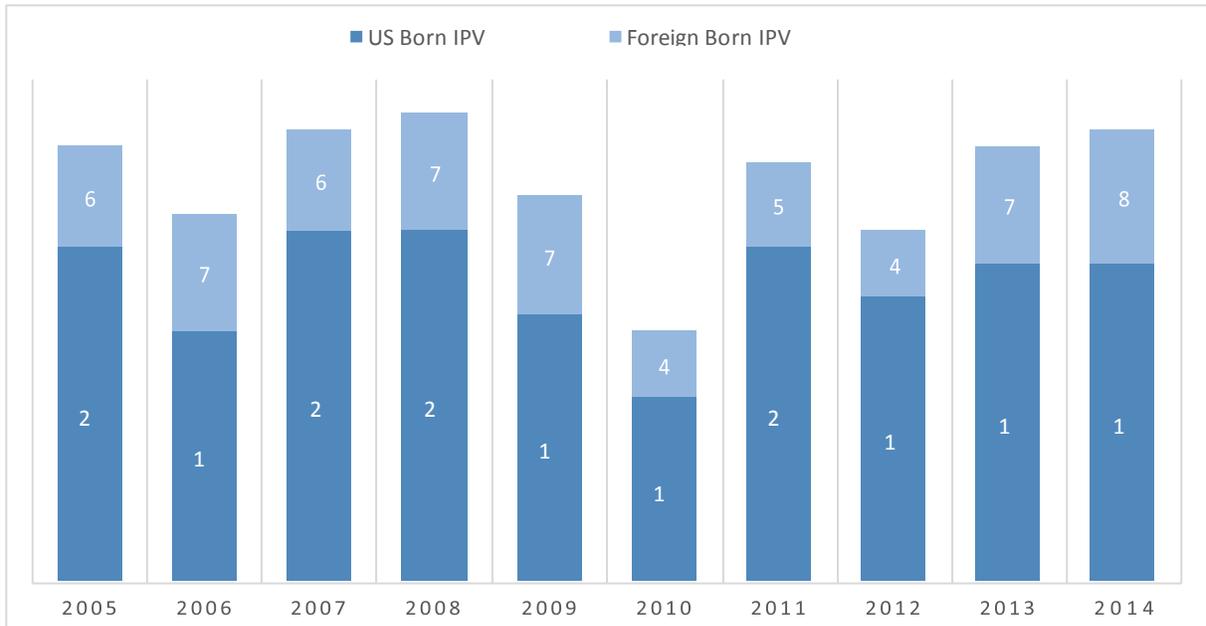
In 2060, one in five Americans (19%) will be foreign born/immigrant, the Hispanic population will more than double in size, constituting 29 % of the US population, and Asians will constitute slightly more than 9% of the US population.

⁵ United States Census Bureau (2010). American Community Survey, 2010

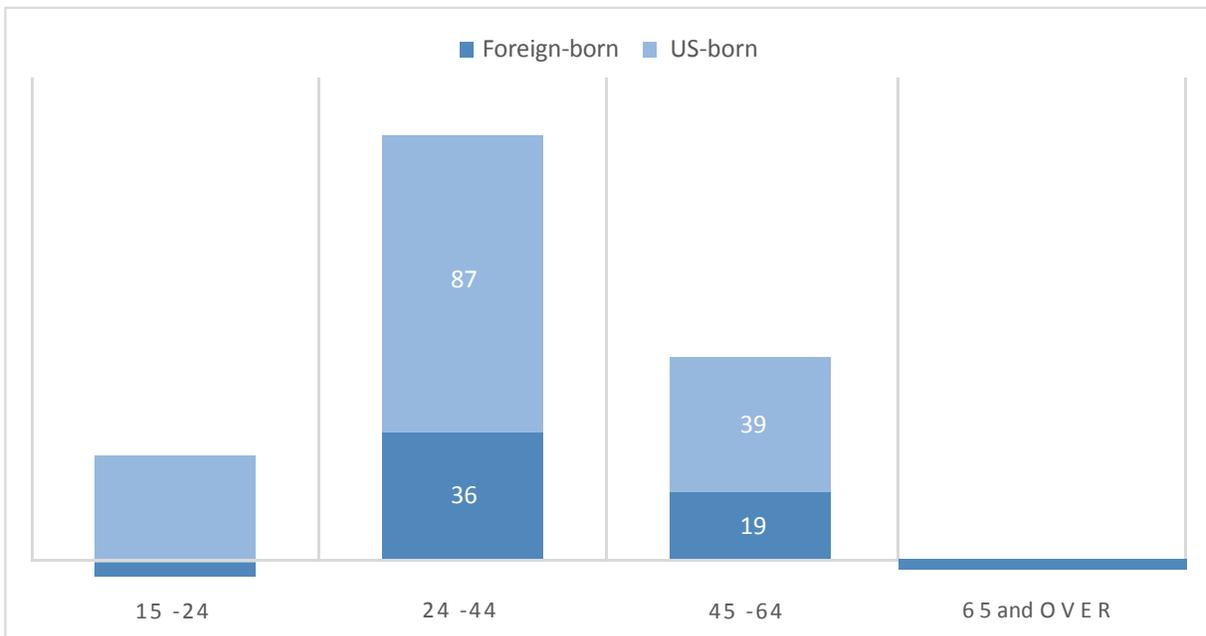
Intimate Partner Homicide in New Jersey, 2005-2014

The following charts represent the number of deaths due to IPV per year in the state of New Jersey from 2005-2014 and the age range of the victims. The lighter colored sections of the bar represent the number of foreign-born victims, while the darker sections represent victims born in the U.S.

Number of IPV Deaths by Year



Age Range of Victims

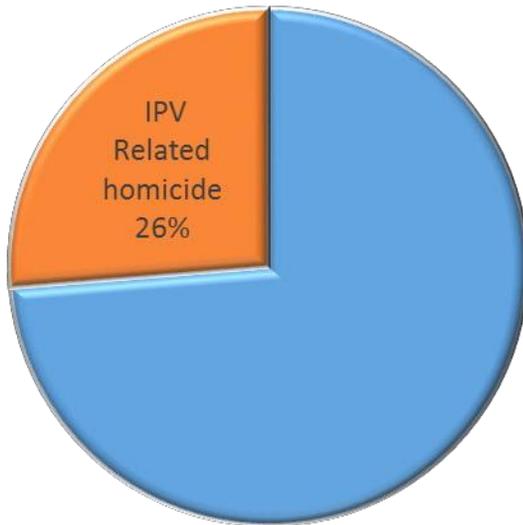


Data Source: New Jersey Violent Death Reporting System (NJDVRS), Center for Health Statistics and Information

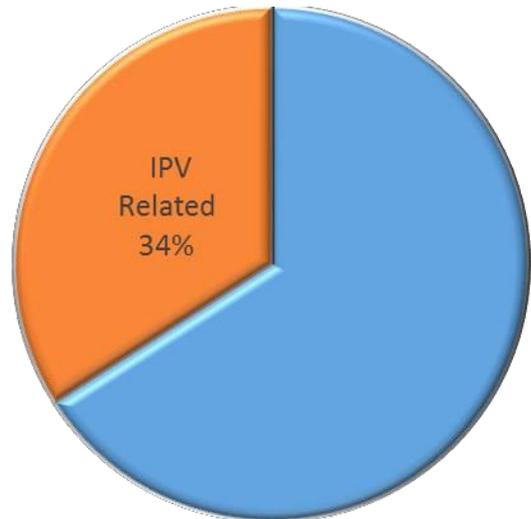
Intimate Partner Homicide in New Jersey's Foreign-Born Population Statistical Facts and Findings*

Though homicide rates of foreign-born females in New Jersey are significantly lower than those of US-born females in New Jersey, a higher percentage of homicides of foreign-born women are IPV related.

**Total Homicides of
U.S. born Women in NJ,
2005-2014: 502**

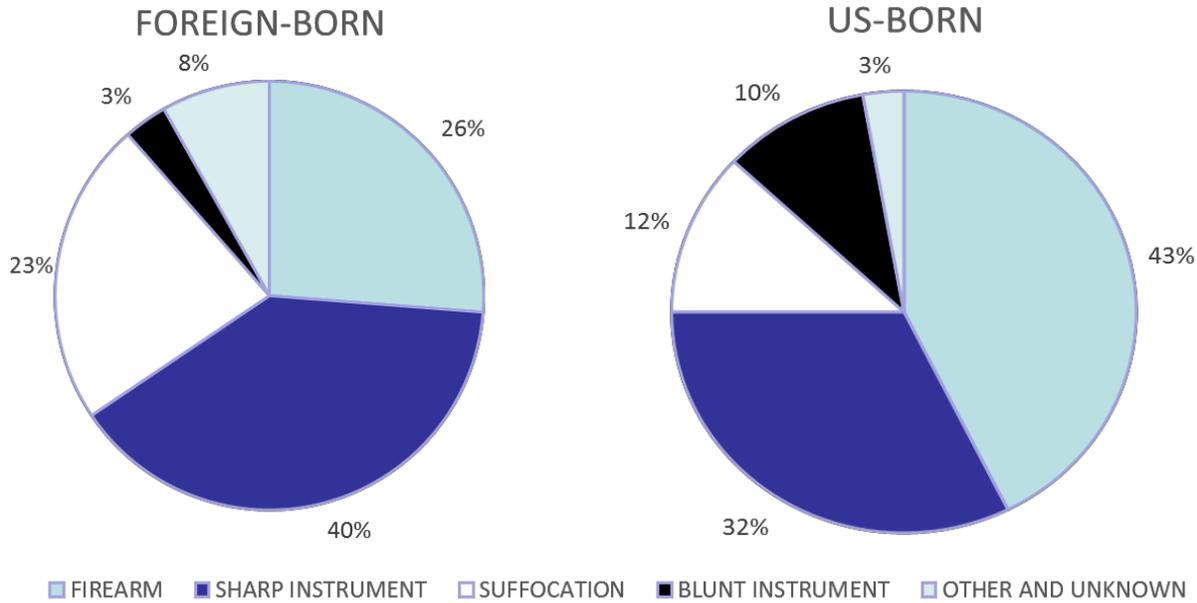


**Total Homicides of
Foreign Born Women in NJ,
2005-2014: 118**



- Among the foreign-born female population in New Jersey, Latin American women are overrepresented as both homicide victims and IPV homicide victims.
- Homicides of Hispanic women make up 16.3% of all homicides of women in New Jersey. Of Hispanic women who are victims of homicide, 50.5% are foreign-born.
- While around 18% of the female Latin American-born population in New Jersey is from the Dominican Republic, Dominican-born women represent about 31% of IPV homicides of foreign-born women.

Weapons Used in Intimate Partner Homicide by Origin



- In 40% of intimate partner homicides of foreign-born women a sharp instrument was used as the murder weapon.
- Homicide by firearm represents 43% of IPV homicides of U.S.-born women, but only 26% of IPV homicides of foreign-born women in New Jersey
- The percentage of intimate partner homicide by suffocation* among foreign-born women is nearly double that of U.S.-born women.

*Suffocation is defined as any method that effectively blocks the flow of oxygen such as hanging, strangling, and covering of the mouth and nasal passages.

A Note on the Data in This Report

The United States Census Bureau defines the “foreign-born population” as including anyone who is not a U.S. Citizen at birth. This includes those who have become U.S. citizens through naturalization, lawful permanent residents, temporary migrants (such as foreign students), humanitarian migrants, and unauthorized immigrant. Thus, while population estimates in this report gathered from the American Community Survey include data on unauthorized immigrant populations, data gathered from the New Jersey Violent Death Reporting System does not account for immigration status. Furthermore, the data in this report reflects statistics from the years 2001 to 2014.

In formulating recommendations based on investigations of IPH in immigrant communities, the Board felt strongly that the lack of data specifically addressing incidents in unauthorized immigrant communities represents a large disparity in information that may reflect an even larger disparity in services and interventions readily available to the most vulnerable populations.

At any point in time, immigrants with undocumented status who are experiencing domestic violence may feel hesitant to seek assistance from law enforcement or the criminal justice system for a variety of reasons. Language barriers and the isolation of the unauthorized immigrant may further prevent a victim from seeking help. However, according to the 2017 Advocate and Legal Service Survey Regarding Immigrant Survivors and a survey conducted by the NJ Coalition to End Domestic Violence, the numbers of undocumented victims seeking legal and mental health services have declined since 2017. Attorneys and advocates who work with survivors say that this reflects the heightened fear that involvement with law enforcement or criminal justice systems will lead to deportation of themselves or their abuser since the increase of ICE raids and deportations in communities throughout New Jersey and the United States.

Board Recommendations

Based on the Board's review of the literature, immigrant-specific cases, interviews with experts in the field, and analysis of statewide homicide data, the following recommendations are provided. These include both general as well as immigrant-specific recommendations about IPH.

General

- In order to conduct more thorough case reviews, the Board recommends the Division of Criminal Justice educate law enforcement on the need for data collection and the use of the data collection form created by the Board. Collateral information would assist in providing information to determine the cause of deaths and identify signs that were missed prior to the incident for all DV related homicides.
- The Board recommends that all training and education provided for law enforcement, the judiciary, community, mental health, and medical providers be trauma-informed to increase understanding of the dynamics of domestic violence on victims with a focus on coercive control, the impact of violence on victims, victims' rights and services (including immigration rights) and opportunities for interventions.
- The Board recommends NJ licensing boards for each healthcare specialty be tasked with requiring a minimum of two hours of continuing education on domestic violence for each renewal cycle:
 - Physicians/ PAs- NJ Division of Consumer Affairs-State Board of Medical Examiners
 - NP/RN/LPNs- NJ Division of Consumer Affairs-State Board of Nurses
 - CSW/LSW/LCSW- NJ Division of Consumer Affairs-State Board of Social Worker Examiners
 - LAC/LPC- NJ Division of Consumer Affairs-State Board of Marriage and Family Therapy Examiners
- The Board recommends New Jersey Coalition to End Domestic Violence conduct public awareness education that domestic violence does not always involve physical abuse and that psychological abuse and coercive control are all forms of violence.

Board Recommendations

Immigration Specific

- The Board recommends the New Jersey Coalition to End Domestic Violence partner with local communities to develop bystander awareness education. The focus of the education should be safe methods of intervention in situations where a person demonstrates signs of behaviors of potential violence and/or control against an intimate partner. The programs should be tailored to meet the norms of various communities and involve community leaders in the design and implementation to assure culturally and linguistically appropriate information.
- The Board recommends that the New Jersey Coalition to End Domestic Violence partner with community providers and service providers as well as faith-based organizations to provide domestic violence training to leaders and concerned members on creating safe places and access points for victims to receive information about their rights and services available.
- The Board recommends that the Division of Criminal Justice and Institute for Continuing Legal Education educate law enforcement and legal practitioners on the unique concerns of domestic violence victims with immigrant status that may deter them from voluntarily involving the criminal justice system. The training should also include information about the protections and rights available to immigrant victims and survivors.
- The Board recommends that the Division of Criminal Justice and the Department of Health provide training for law enforcement departments and health care agencies/facilities in communities with large foreign-born populations on culturally related domestic violence behavioral practices. These practices include but are not limited to: violence against women, forced marriage, human trafficking for purposes of marriage or labor, and honor violence.
- The Board recommends that the NJ Coalition to End Domestic Violence partner with communities with substantial foreign-born populations to create elevated community coordinated response teams that include members of foreign-born communities who are familiar with and trusted by the communities.