DALLAS COUNTY Adult intimate partner violence Fatality review team



OCTOBER 2017











Dallas Children's Advocacy Center

Providing justice and restoring hope



COMMUNITY SUPERVISION & CORRECTIONS DEPARTMENT















GLENN HEIGHTS POLICE DEPARTMENT

















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INTRODUCTION

The Dallas County Intimate Partner Violence Fatality Review Team (IPVFRT) was established on June 1, 2010 by unanimous resolution of the Commissioners Court of Dallas County. The team operates in accordance with Chapter 672 of the Texas Health and Safety Code to conduct a system-wide review of adult intimate partner violence (IPV) fatalities in Dallas County. The IPVFRT conducts confidential, system-wide reviews of adjudicated (resolved) cases resulting from IPV homicides and murder-suicides of adults over the age of 17, with the purpose of improving prevention and intervention services that will lead to a decrease in the incidence of IPV deaths in Dallas County.

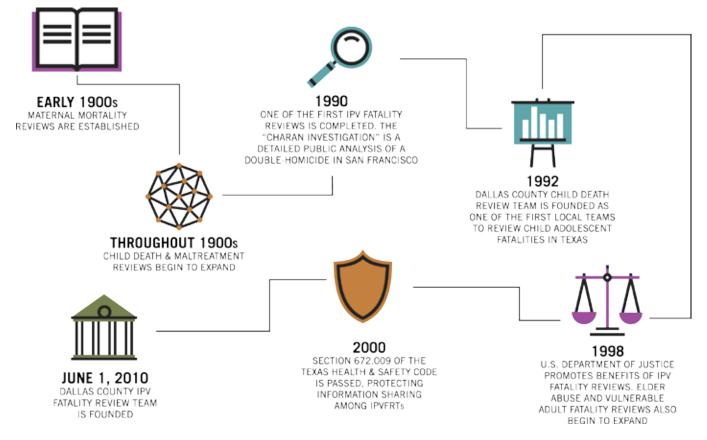
Each review focuses on the flow of each case through agencies within the system to identify areas for improvement and strengthen interagency response. The team consists of designated individuals and organizations who conduct reviews based upon the facts and circumstances of each case. The parties are vested with the authority to promote and protect public health and safety and to provide services that improve the well-being of Dallas County and its inhabitants. Using a multi-disciplinary approach, the IPVFRT seeks to provide accountability without assigning blame; it serves to promote cooperation, communication, and coordination among agencies involved in responding to these deaths.



OBJECTIVES

- To conduct formal, confidential, and systematic evaluation and analyses of adjudicated cases of IPV homicides occurring in Dallas County;
- To evaluate policies, protocol, and practices to identify gaps in services within agencies and the community;
- To build a database for analysis of aggregate population of deceased persons and perpetrators;
- To disseminate information on prevention strategies through periodic quantitative and qualitative reports of aggregate data;
- To promote cooperation, communication, and coordination among agencies involved in responding to IPV-related deaths;
- To develop an understanding of the causes and incidence of IPV-related deaths in Dallas County; and
- To advise the legislature, appropriate state agencies, and local law enforcement agencies on changes to law, policy, or practice that will reduce the number of IPV fatalities.

HISTORY OF FATALITY REVIEWS IN THE U.S.



PROCESS

From 2012-2016, the IPVFRT reviewed 76 total fatalities. The team operates on a time lag to allow cases to be adjudicated before review. Cases were reviewed on the following timeline:

CASE YEAR	REVIEW YEAR	IN-PERSON REVIEWS	EXPEDITED REVIEWS	TOTAL CASES REVIEWED
2009	2012	3	9	12
2010	2013	4	12	16
2011	2014	5	4	9
2012	2015	8	9	17
2013	2016	6	16	22
	TOTAL CASES:	26	50	76

IDENTIFYING CASES

Each year, the Dallas County Medical Examiner's office provides the investigative and autopsy reports of all cases coded as possible domestic violence deaths. After cross-checking with the Texas Council on Family Violence (TCFV) Honoring Texas Victims Reports¹, confirming adjudication of each case, and collecting demographic information of all primary and secondary victims, perpetrators, and children from the Dallas Police Department and the Dallas County District Attorney's Office, the Review Team Coordinator compiles a full list of cases for the team's review.

CONFIDENTIALITY

The information shared between team members is highly confidential and protected by Section 672.009 of the Texas Health and Safety Code. Records acquired by the team "are confidential and exempt from disclosure under the open records law... may only be disclosed as necessary to carry out the review team's purpose and duties... [and] are not subject to subpoena or discovery and may not be introduced into evidence in any civil or criminal proceeding."² It is a Class A misdemeanor for any team member to disclose information made confidential by this section.

LIMITATIONS

The findings of this report have wide-reaching implications and closely align with national and statewide data regarding intimate partner violence fatalities. However, there are some limitations within the IPVFRT review process.

Cases must be adjudicated. The team only reviews cases that have been adjudicated for two reasons: 1) all team members are able to fully share and discuss case details, and 2) the team can say with confidence that each reviewed case was, in fact, a result of IPV. Due to this limitation, the team must operate on a time lag, meaning the data is not as current as other statistics and reports that do not have this same limitation.

At least 11 cases of IPV homicide were not able to be included in this report because they were not adjudicated at the time of review. There are also deaths that occurred in Dallas County that are, based on investigative details, likely related to IPV, but the suspect is still at large. Finally, the team acknowledges that there may be some IPV deaths that were overlooked during case identification process.

Varied data retention methods. There is no standardized data collection method used throughout Dallas County's systemic response to IPV. All agencies have various funding requirements, confidentiality standards, and internal policies that dictate the amount and type of data they are able to collect. Due to these discrepancies, it can be a challenge to aggregate certain data. The data presented in this report represents the most conclusive data points available at time of review.

Limits of data collection process. The IPVFRT has no dedicated staff; all team members' participation is a voluntary addition to their job duties. Due to time and resource limitations, it is impossible to ensure that the team can collect every data point for every case; the 'unknown' answers throughout the report are a result of this limitation.

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IN-PERSON REVIEWS

The IPVFRT meets in-person once a quarter at the Dallas County Medical Examiner's Office to conduct in-depth reviews of two IPV cases*. Cases for in-person review are selected based on a variety of criteria, including degree of system interaction prior to death and known background/media coverage of the case. Efforts are also made to group cases that are similar in nature (for example: two cases involving strangulation). Case information is sent to the team prior to the meeting; all members search their databases for any intersection with the victim(s), perpetrator, and/or involved children.

Each selected case is reviewed in the following way:

- The lead detective (or designated representative) from the investigating police department presents the investigation details of the case.
- The prosecuting attorney (or designated representative) presents the prosecution details of the case.
- The Medical Examiner presents autopsy findings.
- The Review Team Chair facilitates a round-table discussion. Each agency representative reports any prior intersection with the parties in the case, and the team discusses red flags, missed opportunities for intersection, and any identified system gaps.

A total of 26 cases were reviewed in-person throughout the five-year period of this report.



For all cases that are not selected for in-person review, the team conducts "expedited reviews". As with in-person reviews, all members search their databases for intersection. Data forms are completed for any intersection found, which are then sent to the Coordinator and Data Analyst for aggregation. Expedited reviews were conducted for 50 cases throughout the five-year period of this report.

CONTINUING EDUCATION

A brief educational training is typically provided at the beginning of each meeting, the content of which is based on the cases to be reviewed or current events within Dallas County's IPV systemic response. From 2012-2016, the following educational content was provided:



^{*} Prior to September 2013, only one case was reviewed at each in-person meeting. Following that date, the team has occasionally reviewed only one case if there was significant history and intersection with the system.

CASE DATA

RISK FACTORS

In violent intimate partner relationships, there are often a variety of "red flags", or risk factors, present. Years of research have produced several instruments to measure IPV risk, which generally fall into two categories:

1) identifying risk of re-assault and 2) identifying risk of lethality to the victim. While there is much overlap of risk factors between the two categories, this report will focus on those that are indicators of lethality. Jacquelyn

Campbell, PhD, RN, FAAN, a national leader in domestic violence and advocacy research, produced the Danger Assessment, one of the foremost tools used to predict risk of lethality in the United States. The tool is used to help the victim identify evidence-based risk factors that are present in their relationship*. It includes questions regarding:³

- Frequency & severity of abuse
- Access to guns
- Attempts to leave the relationship after living with the abuser
- Unemployment of abuser
- Past use of weapons toward victim
- Threats of death toward victim, including strangulation
- Presence of children who are not biological offspring of abuser

- Substance abuse by abuser
- Controlling, possessive, & stalking behavior by abuser
- Physical abuse while victim was pregnant
- Threats to commit suicide
- Threats of harm towards children
- Victim's belief that abuser is capable of killing him/her

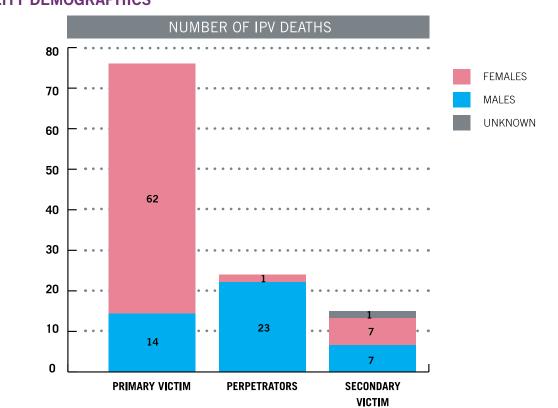
The IPVFRT collects data regarding the above risk factors on each case it reviews; however, there are often several unknown data points on each case (for example: it is very difficult to gather data that relies on the victim's own beliefs and observations). Throughout this report, risk factors will be addressed in instances when the team collected enough data to provide an aggregate overview.

IPVFRT is not an academic research body. Data collected is for the purpose of general review, dissemination, and discussion.

DEFINITIONS

- Adjudicated: A final judgment has been made on the case.
- **Familicide**: A homicide in which at least one or more family members, in addition to the intimate partner, are killed.
- **Intimate Partner**: Spouse, significant other, date, or any acquaintance that has or previously had a sexual and/or intimate relationship with the other.
- (IPV) Intimate Partner Violence: Violence perpetrated by a spouse, significant other, date, or any acquaintance that has or previously had a sexual and/or intimate relationship with the victim.
- **Percentages**: Percentages represent a proportion in relation to a whole.
- Perpetrator: The person who killed their intimate partner.
- **Predominant Aggressor**: The most significant and principal aggressor throughout the intimate partner relationship; the partner who exerts systematic power and control over the other.
- Primary Victim: The person who was killed by their intimate partner.
- **Rates**: Rates represent a proportion in relation to a whole and provide a common time frame and/or unit of population. Unlike percentages, standardized rates allow for a specific comparison amongst known populations.
- **Secondary Victim**: A person who was killed during an intimate partner violence incident but was not the primary victim or perpetrator. (Examples: child, current boyfriend, family friend)

^{*} The Danger Assessment has been revised twice: once to apply to the unique dynamics of female same-sex relationships (this report includes no female samesex homicides) and once to apply to immigrant women (the DA-I is not yet available for publication, and therefore cannot be referenced). More information regarding the Danger Assessment, including a copy of the tool, can be found at www.dangerassessment.org.

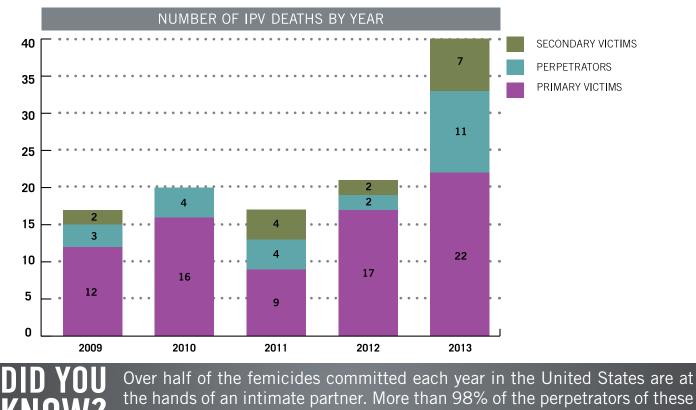


FATALITY DEMOGRAPHICS

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From 2009-2013, 115 individuals* in Dallas County died as a direct result of intimate partner

violence. An average of 15 fatal incidents occurred each year in Dallas County, and 42% of these cases resulted in the loss of more than one life.

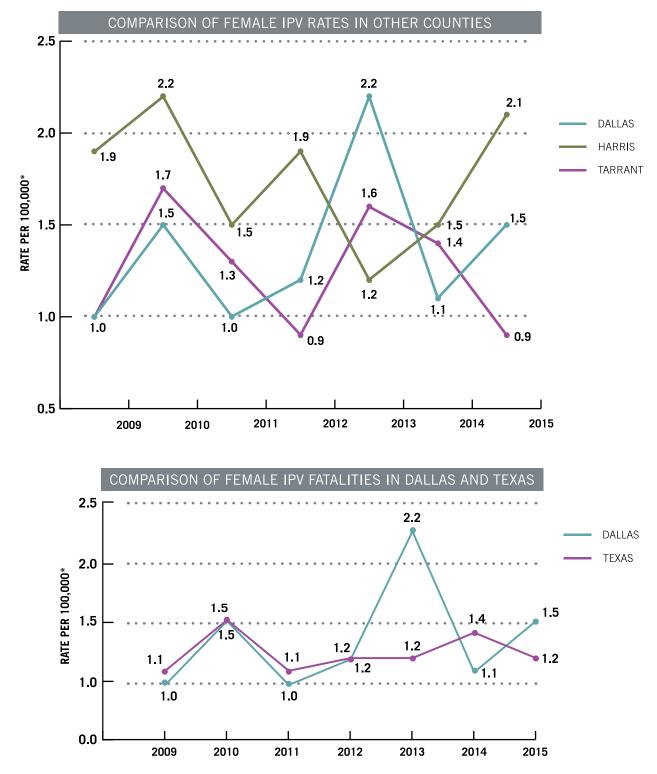


crimes are male.⁴

* Two secondary victims were unborn children who died as a result of their mothers' murders.

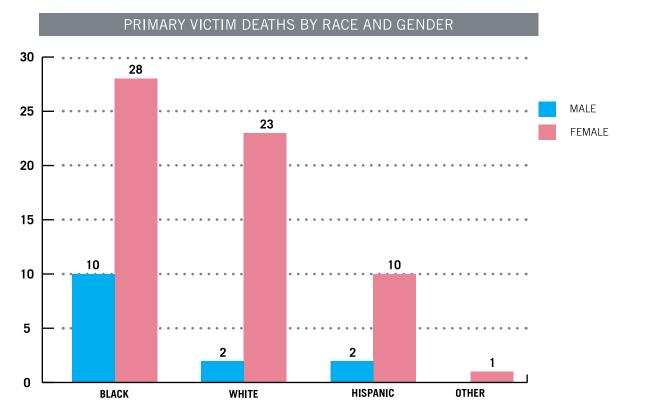
Since 2009, Dallas County has been in the top three counties with the highest number of IPV fatalities in the state, and in 2013, Dallas County led the state in highest number of IPV fatalities for the first time.¹ Murder-suicides doubled, and two familicides led to an increased number of secondary victims.

It is important to know that 2013 was an outlier, not a trend. Incident rates fluctuate from year to year; preliminary data from more recent years indicate that the number of IPV incidents in Dallas County has once again decreased. However, **Dallas County continues to remain one of the top Texas counties in overall number of IPV** fatalities. In 2014 and 2015, Dallas County ranked second in the state in number of IPV deaths.¹

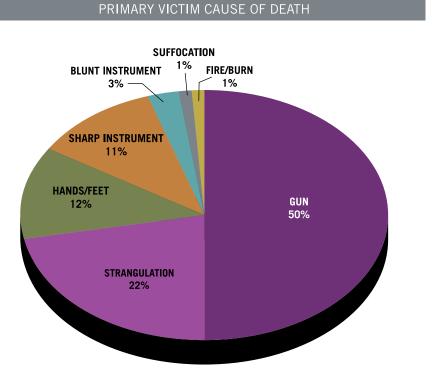


^{*} Rates are per 100,000 and based on 2010 county population data from the Department of State Health Services. Number of female IPV deaths were pulled from the Texas Council on Family Violence Honoring Texas Victim reports. The IPVFRT has not yet reviewed 2014-2015 fatalities.

Primary Victim Demographics



From 2009-2013 in Dallas County, 76 individuals were killed by their intimate partner.



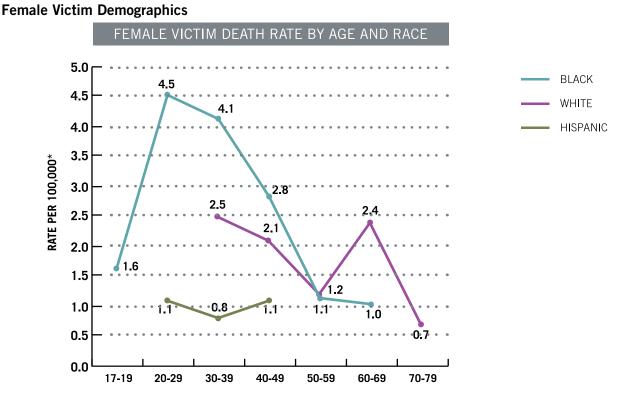
YUU The presence of a gun

during an IPV incident increases risk of homicide by 500%, and individuals with a history of domestic violence are five times more likely to kill an intimate partner if there is a gun in the home.⁵

Of the 76 incidents, 39 (51%) used a gun as the primary murder weapon. 20 incidents involved more than one weapon (for example, a gun and strangulation or fire and a blunt instrument).

^{*} Rates are per 100,000 and based on 2010 county population data from the Department of State Health Services. Number of female IPV deaths were pulled from the Texas Council on Family Violence Honoring Texas Victim reports. The IPVFRT has not yet reviewed 2014-2015 fatalities.

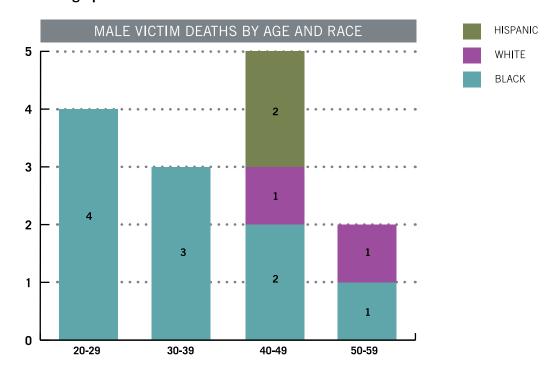
^{*} Hands/feet can be beating, kicking, punching, etc.



05

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82% of individuals killed were female. African-American women were 1.9 times more likely to die due to IPV than White women, 3.9 times more likely than Hispanic women, and 9 times more likely than Asian women[†]. The average age of the victims was 39 years old, with a range in age between 19-71. African-American women and women ages 20-29 had the highest rate of IPV fatality.

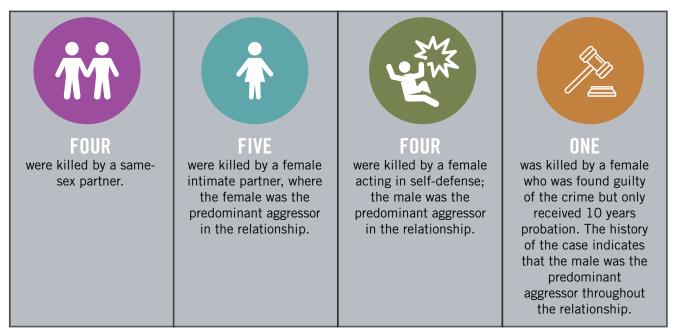


Male Victim Demographics

* Rates are per 100,000 and based on 2010 county population data from the Department of State Health Services.

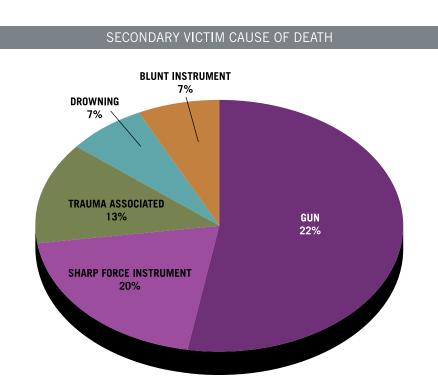
[†] One Asian woman in the 20-29 age range was killed.

Of the 14 men who were primary victims of IPV from 2009-2013:

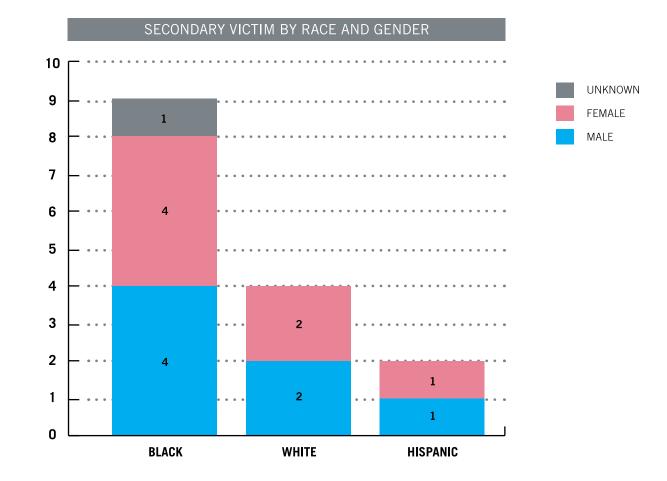


Secondary Victim Demographics

15 secondary victims were killed during 12 intimate partner violence incidents, of which, 53% were killed with a gun. Additionally, 10 individuals were harmed during an incident, but survived.





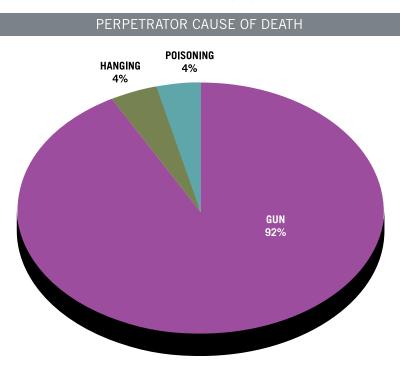


The Dallas County Intimate Partner Violence Fatality Review Team honors the loss of each of these secondary victims' lives.

Tasmia Allen, Daughter (17yo) of Toya Smith Kelsie Davis, Daughter (13yo) of Jennifer Krieger Mary Jane Davis, Mother of Donya Palmer Raymond Davis, Father of Donya Palmer James Doyle, Boyfriend of Jenea James Desaree Hopkins, Daughter (18yo) of Mischell Fuller Adrian Jessie, Family Friend of Autumn Carey Gerald Malone, Father of Autumn Carey Jazzman Montgomery, Daughter (6yo) of Lovetta Armstead Damon Spoon, Boyfriend of Amber Doyle Alejandro Vazquez, Son (18yo) of Marcelo Vazquez Paulina Vazquez, Daughter (21yo) of Marcelo Vazquez Unborn child (7mo in utero) of Decia Hartfield Unborn child (8mo in utero) of Breshauna Jackson Neima Williams, Daughter (28yo) of Zina Bowser

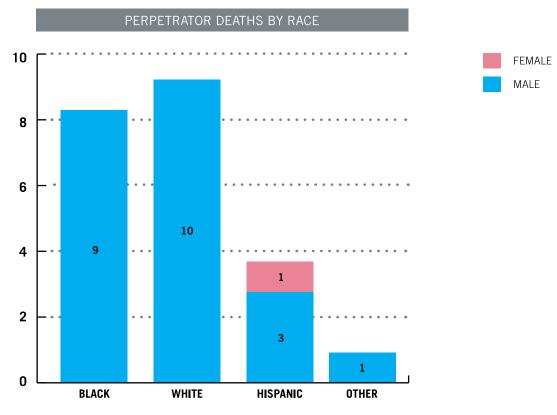
Deceased Perpetrator Demographics

Twenty-three perpetrators (30%) committed suicide immediately following the homicide. Three perpetrators attempted suicide by pill overdose but were unsuccessful. One perpetrator was killed during a shootout with police.





All but two suicides were completed using a gun, and all but one murder-suicide involved a male as the perpetrator.*



* One perpetrator committed suicide by carbon monoxide poisoning, and another committed suicide by hanging himself. One female perpetrator committed suicide by gun after shooting her husband and children.

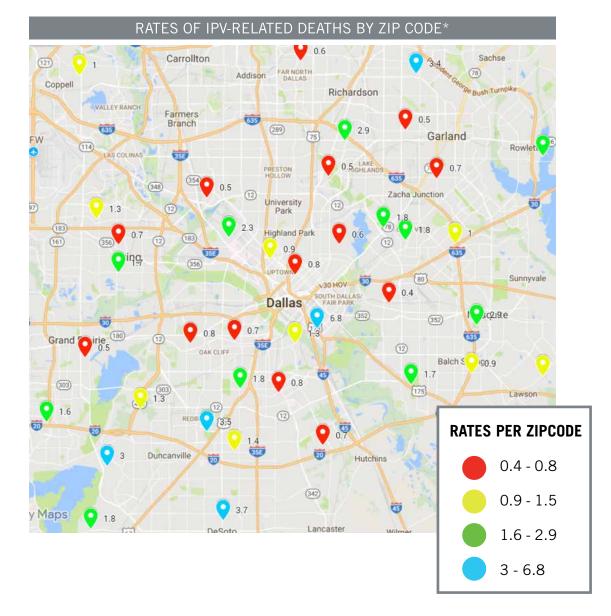
CASE DETAILS

Location

Ten of Dallas County's 31 cities experienced a fatal IPV incident during the five-year period of this report. The majority of incidents (59%) occurred in the City of Dallas. The remaining incidents occurred in:

- Mesquite, seven incidents
- Irving, six
- Garland, five
- Grand Prairie, four
- Desoto, four

- Cedar Hill, two
- Balch Springs, one
- Coppell, one
- Rowlett, one

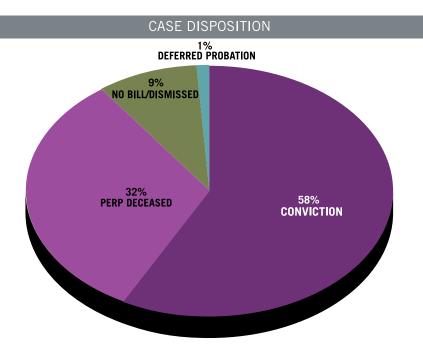


IPV fatalities occurred across 41 zip codes. 64 incidents (84%) occurred inside a home. Additional locations included a street or parking lot (11), motor vehicles (5), hotel/motel (2), natural area (3), office building (1), bar (1), and construction area (1).



^{*} Rates are per 100,000 and based on 2010 zipcode population data from the United States Census Bureau. Number of deaths in zipcode is the numerator for the rates. Due to the small numbers within each zip code, these rates are not stable and are used to demonstrate that IPV deaths occur throughout the county.

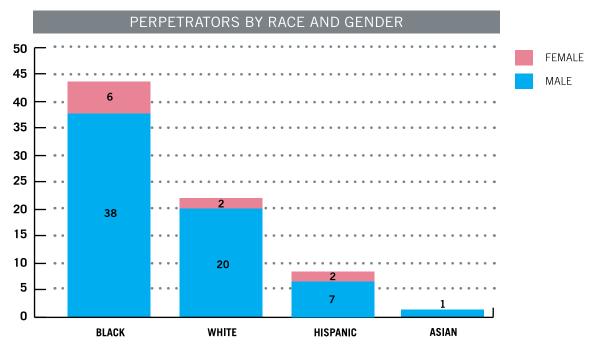
Disposition of Case



A case is "no billed" by the Grand Jury or dismissed if the homicide was determined to be self-defense or if there is otherwise not enough information to pursue prosecution.



"Deferred adjudication" means that the defendant receives probation for a certain period of time. If the probation is successfully completed, the case is dismissed.



PERPETRATOR DETAILS

Males made up 87% of perpetrators, with 94% killing a female intimate partner. Four male perpetrators killed a same sex-partner*. Five female perpetrators who killed their male intimate partners were identified as the predominant aggressor in the relationship. Four female perpetrators were found to be acting in self-defense, and one other was found guilty of the crime but had a history of being victimized in the relationship.

^{*} There were no female same-sex homicides identified and/or able to be reviewed by the IPVFRT from 2009-2013.

Unemployment

In at least 16 cases reviewed (21%), the perpetrator was unemployed at the time of death. In 30 cases reviewed, employment data was unavailable; therefore, the number of unemployed perpetrators is likely higher.

Substance Abuse

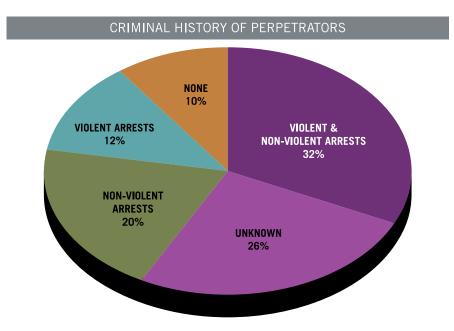
In 38 cases (50%), a history of substance abuse by the perpetrator was reported. In at least ten cases (13%), substance abuse was identified as being a contributing factor to the murder. However, it can be difficult to determine if a perpetrator was under the influence of drugs or alcohol at the time of a homicide, as they are often not apprehended until some time later; as such, there is a high likelihood that additional perpetrators were under the influence at the time of the murder.

In no cases was substance abuse the primary reason for the IPV homicide; all but one of the couples had a reported history of previous abusive behavior.

Criminal History

33 perpetrators (43%) had a history of violent arrests (including assaults, domestic violence offenses, and/or previous homicides) before the homicide. 20 perpetrators' (26%) criminal history is unknown, due to the fact that the IPVFRT is only able to collect criminal history data as recorded during the homicide investigation; criminal records searches are only allowed by law to be conducted during open criminal investigations.



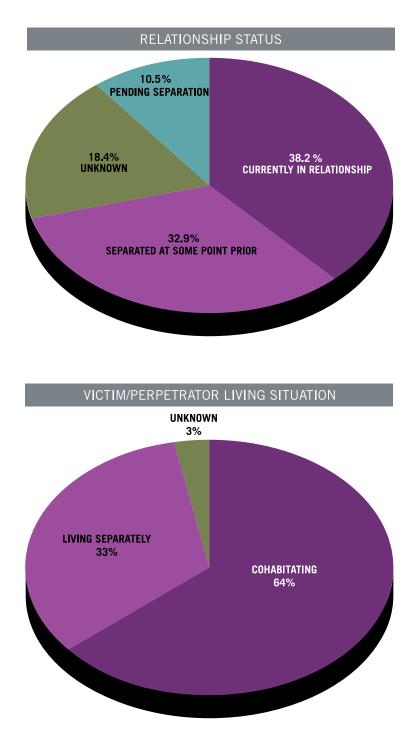


DID YOU KNOW?

Unemployment of the perpetrator increases the risk of IPV homicide fourfold.⁵ Substance abuse is present in 40-60% of IPV incidents, and physical violence is 11 times more likely to occur on days of heavy alcohol and/or drug use.⁶

Previous IPV has occurred in 70% of murder-suicides, but only 25% of these perpetrators had previous arrest records.⁷

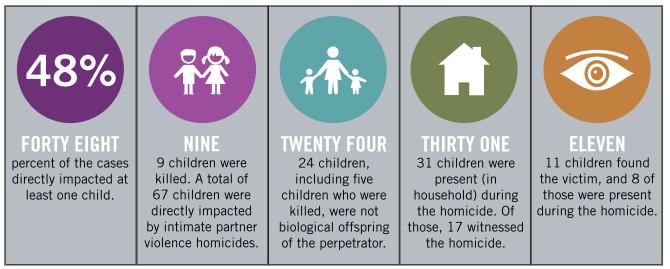
RELATIONSHIP DETAILS



DID YOU KNOW?

Women who have never lived with their intimate partner are significantly less likely to be killed. A woman who attempts to leave a partner she lives with who also exhibits controlling behavior is 9 times more likely to be killed.⁵

CHILDREN AFFECTED



Two women were pregnant at the time of their murders. One woman was shot by her current boyfriend and father of her child, and the baby died as a result of the mother's murder. One woman was shot by her ex-boyfriend and father of her child. She died after delivering her stillborn baby.



DID YOU KNOW?

The presence of a child who is not the biological offspring of the perpetrator more than doubles the risk of IPV homicide.⁵

40% of children who are abused also report witnessing violence between parents.⁸

Children who witness IPV are twice as likely to become perpetrators as adults.⁹ One woman was killed five months after giving birth to her third child. At the time of the homicide, the perpetrator was on parole and had a no-contact order with the victim due to an IPV incident a year and a half earlier.

ELDER ABUSE

Elder abuse has historically been difficult to study due to varying definitions, life stressors unique to this population, and the common co-occurrence of different types of abuse; however, it is increasingly important to understand elder abuse due to the aging baby boomer population. For the purposes of this report, elder abuse is defined as abuse between intimate partners that occurs when one or more partners is 65 years of age or older. Five cases fell under this definition.

It is important to note that elder abuse can be "typical" IPV that began long before the victim or perpetrator reached the age of 65 (as was the case of the 68-year-old woman who was shot in the face by her 47-year-old boyfriend after a struggle in which he attempted to strangle and smother her); however, there are also several confounding factors that present themselves in older age, such as declining physical and mental health. Impairment of functioning and deteriorating health are associated with greater risk of elder abuse¹¹, as was the case in four of the five IPV incidents reviewed by IPVFRT.

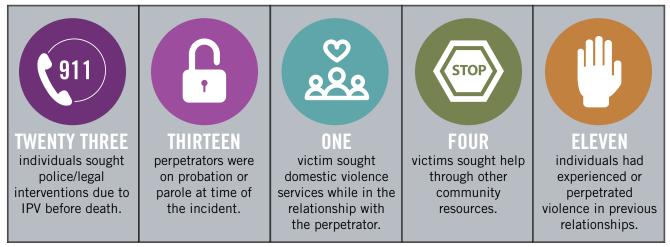
Physical Health Factors:

- A 65-year-old man shot his 61-year-old wife, then himself, after texting a friend that he "can't let her suffer anymore." The wife suffered from Hepatitis C and was reported to be in severe pain.
- A 71-year-old man shot his 71-year-old wife and then himself. He left a note indicating that the murder-suicide was a result of feeling overwhelmed by his wife's ongoing mental and physical health problems.

Mental Health Factors:

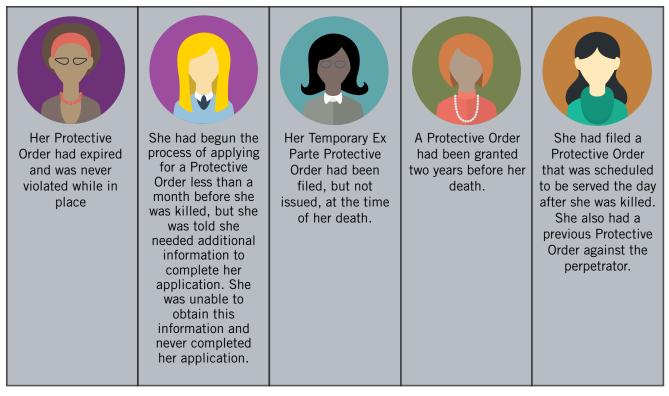
- A 66-year-old woman who suffered from schizophrenia with psychosis was killed by her 68-year-old husband as he attempted to restrain her during an episode. The husband had also previously shown symptoms of anxiety and mood disorders.
- A 66-year-old woman was strangled to death by her 68-year-old husband. The husband had a history of mental health issues, including a diagnosis of schizophrenia that involved hearing voices. He was found not guilty by reason of insanity.

RESOURCE UTILIZATION



Criminal Justice System. In 23 cases (30%), the couple had previous intersection with law enforcement and/ or the legal system as a direct result of intimate partner violence. In addition, 13 individuals were on probation or parole at the time of the incident.

In five cases, a female victim had sought a Protective Order against her perpetrator.



Police had responded to IPV between the victim and perpetrator in 16 cases (21%), and in at least six cases they responded to an IPV call more than once.

In three cases, an Affidavit of Non-Prosecution (ANP) had previously been filed within the relationship, meaning the victim or perpetrator had reported violence from their partner to the police, but later decided not they did not want to press criminal charges. If an ANP is signed, the District Attorney can choose to move forward with the case if there is enough evidence of the crime without the victim's testimony. Prosecution did not progress after an ANP was signed in any of the cases reviewed.

Domestic Violence Services. In only one case reviewed, the IPVFRT found that the victim had previously accessed support services at a domestic violence organization.

No victims had stayed in a domestic violence shelter while in a relationship with the perpetrator.

One woman had made an appointment for sexual assault services in the months prior to her death but was a noshow.

Other Intervention. There are often "unofficial" opportunities for victims or perpetrators to be connected with Dallas County's coordinated community response (CCR) to IPV. For example, a victim may disclose abuse at a hospital, in their faith community, or to a trusted individual (professor, hairdresser, etc.). Ideally, the person or organization receiving such a disclosure is equipped to then connect the victim with domestic violence services and other resources to ensure safety; however, due to a widespread lack of knowledge regarding the dynamics of IPV, these opportunities often fall through the cracks.

For example, one victim had discussed being abused with a hospital social worker, but was not given further referrals. Another woman sought counsel in her faith community regarding her abusive husband but was told to try and make her marriage work. In almost every case reviewed, the victim and/or perpetrator came into contact with various social services unrelated to IPV, from food banks to homeless shelters to routine hospital visits. It is likely that during many of these intersections, some "red flags" surfaced but were unidentified by staff who had not been trained in recognizing the signs of IPV. Community education is a vital piece of IPV prevention.

Previous Relationship Intervention. In 11 cases, the victim and/or perpetrator had intersection with Dallas County's criminal justice system; six victims were in previously violent relationships, and six perpetrators had committed violence against a different intimate partner.



IDENTIFIED TRENDS

Much of the insight gained from case reviews comes from discussions and data points that are not easily quantified. It is important to consider the trends found through these more nuanced methods of data collection.

PRIOR IPV & LACK OF OFFICIAL INTERVENTION

In 35 of the 76 cases reviewed (46%), prior signs and/or reports of IPV were identified through case review. (This number is likely higher, as much IPV happens behind closed doors and is not disclosed to anyone, even family and friends); however, of those with prior violence, 63% had no intersection with domestic violence services, law enforcement, or the criminal justice system.

There are many reasons victims and their family may not officially report abuse. In many cases, family and friends may not recognize "marital problems" as abusive behavior; several reported behaviors of withdrawal, acting "differently", or excessive calling/texting, all of which can be red flags for abuse. In other cases, there is a general mistrust of the system or a belief that the victim will cause more harm than good by contacting the police. For example, one woman told her family and friends that her common-law husband abused her and that she slept with a knife under her pillow, but it is speculated that she did not call the police because her husband was in the country illegally. Another woman told her friend that her extremely jealous boyfriend had pointed a gun at her, but the couple sold drugs and she did not want to get the police involved.

Regardless of official reports, many women instinctively knew that the perpetrator was capable of murder. One victim purchased a gun because she was worried about what the perpetrator might do, and another sent emails to his coworkers stating that he did not feel safe in his relationship.

When victims report IPV, believe them.

LACK OF CULTURALLY SENSITIVE CONSIDERATIONS

IPV can touch anyone, at any point in their life. It is an equal opportunity epidemic—it knows no ethnic, socioeconomic, religious, or cultural bounds. However, there are certain groups who are more vulnerable to IPV homicide, due in part to a lack of culturally sensitive services available to them and/or awareness of the risk factors that are unique to their population. While the list of these special populations can be exhaustive, a few became particularly evident during the past five years of case reviews.

African-American Women

During the five-year duration of this report, African-American women were:



more likely to die due to IPV than White women



more likely to die than Hispanic women



more likely to die than Asian women*

African-American women are also "less likely than white women to use social services, [domestic violence] programs, or to go to the hospital because of domestic violence."¹² This is especially concerning for lethality risk, as that the use of social services, domestic violence programs, and screening at hospitals are some of the primary ways that victims of IPV get help and, therefore, are significantly less likely to die at the hands of their intimate partner.



Prior physical violence is the primary risk factor for women being killed by an intimate partner.⁵ Perpetrators of IPV homicide do not "just snap".

In the United States, African-American women experience IPV at a rate of almost three times higher than White women and almost two times higher than Hispanic women.⁴

^{*} One Asian woman in the 20-29 age range was killed.

LGBTQ Community

Throughout the five-year duration of this report, four males were killed by a same-sex partner, and one trans woman was killed by her male partner. IPV in the LGBTQ community is, sadly, often overlooked or unsubstantiated for various reasons. The following highlights a few issues that surfaced during our case reviews:

- It is initially assumed that two same-sex individuals who live together are roommates. If the couple was not out to their social circle, it can be difficult to determine, even with investigation, if the violence was IPV or simple assault between two adults.
- The victim does not come forward because they are not out to all of their friends and family. The perpetrator may also threaten to out the victim if they call the police.
- The dynamics of IPV between two same-sex partners can be difficult to determine for an untrained first responder. If a predominant aggressor is unable to be identified, both partners may be arrested as "mutual aggressors".
- Trans individuals who become involved in the system due to IPV are often further victimized by being referred to as the wrong gender in the media or in official police reports and are often called by the name assigned to them at birth, which is not the name they go by.
- Lack of training in LGBTQ issues is very common among first responders and advocacy agencies alike. When discussing the case of a trans woman who was killed by her partner, the IPVFRT discovered that only a handful of agencies on the team offered official training on LGBTQ issues.

DID YOU KNOW?

IPV is twice as prevalent in the LGBTQ community than in heterosexual couples.¹³

Undocumented Immigrants

While it was not possible for the IPVFRT to collect consistent data regarding the immigration status of all victims and perpetrators, issues surrounding lack of documentation came up frequently in discussion. These issues are the same ones seen throughout the United States:

- The victim is unwilling to report the perpetrator because he/she is undocumented and would get deported for breaking the law.
- The perpetrator threatens an undocumented victim with deportation. If the victim does not speak English, the perpetrator is often her/his only source of information.
- There is a general mistrust of law enforcement because someone in the victim or perpetrator's family or social circle is undocumented and has had a previous negative experience.

The above populations and additional marginalized groups require and deserve a systemic response that is nuanced, culturally aware, and respectful.

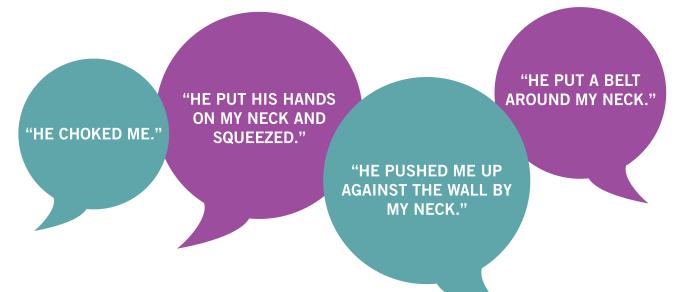
Stakeholders must listen to these communities to learn more about their cultural and systemic barriers to safety and work together to remove obstacles.



STRANGULATION

In eight cases, strangulation was the primary cause of death. In at least seven additional cases, the victim had suffered non-fatal strangulation by the perpetrator at some point prior to the murder, and in one case, the perpetrator had strangled a previous intimate partner. It is highly likely that the number of previous strangulation are higher, as this particular form of abuse is often unreported due to a misunderstanding of the term "strangulation".

Strangulation is defined as the restriction of airflow cause by external pressure (such as hands or ligature around a neck). The oft confused term "choking" refers to an internal obstruction that blocks air flow (such as a choking on a chicken bone). Many victims are unaware of the difference between these two acts, and they may view strangulation as an extreme incident that results in passing out or death. As such, they will answer "no" if asked, "Did he/she strangle you?" Instead, they might describe a non-fatal strangulation incident in one of the following ways:



Strangulation is one of the leading indicators of lethality, but too often goes unreported. First responders must ask the right questions to accurately assess the level of risk to a victim.



DID YOU KNOW?

Women who are strangled by their intimate partner are 7.5 times more likely to be killed.¹⁴

DALLAS COUNTY'S SYSTEMIC RESPONSE

Dallas County is dedicated to providing a comprehensive, systemic response to domestic violence. Several programs and coordinated community responses currently exist to provide justice and safety for victims while holding offenders accountable.

VICTIM & FAMILY SERVICES

BEDS AVAILABLE IN DALLAS COUNTY



Domestic Violence Services. Dallas County is fortunate to have a robust network of domestic violence advocacy organizations that provide shelter, transitional housing, case management, legal help, and other victim support services. Although the need is often greater than the available resources, the below organizations tirelessly work to ensure that no victim is left without help and hope.

Dallas

The Family Place

Mission: Empower victims of family violence by providing safe housing, counseling and skills that create independence while building community engagement and advocating for social change to stop family violence

Services: Emergency services, counseling, transitional housing, support services, children's services 214-941-1991

Genesis Women's Shelter & Support

Mission: To provide safety, shelter and support for women who have experienced domestic violence and to raise awareness regarding its cause, prevalence, and impact

Services: Emergency services, counseling, transitional housing, legal services, case management, children's services, community education

214-946-4357

Mosaic Family Services

Mission: To support, educate, and empower the multicultural individuals and families of North Texas **Services:** Emergency services, legal and financial assistance Services, counseling Services, housing services, support services, children's services, community educational services **214-823-4434**

Salvation Army Domestic Violence Program

Mission: To provide immediate, safe, and secure shelter **Services:** Emergency services, legal and financial assistance service, counseling services, housing services, support services, children's services, community educational services **214-424-7208**

Women Called Moses

Mission: To educate and provide support for abused women and children **Services:** Emergency services, counseling, transitional housing, legal services, support services, children's services, community education **972-298-1155**



Garland/Plano

Hope's Door New Beginning Center

Mission: To mobilize community awareness and action to end domestic violence **Services:** Emergency shelter, support groups, resources for child care, and legal clinic **972-276-0057**

Grand Prairie

Brighter Tomorrows

Mission: To empower victims of domestic violence and sexual assault by providing emergency safe shelter **Services:** Emergency shelter, transitional housing, support services, counseling **972-236-0506**

Irving

Irving Family Advocacy Center

Mission: To offer free counseling services for victims of crime, domestic violence, and families with highrisk juveniles, as well as education classes **Services:** Case management, counseling **972-721-6560**

Battering Intervention & Prevention Programs. BIPP services through accredited agencies is the only intervention that has shown promising results in changing batterer behavior. BIPP participants complete 18 weeks (minimum required) to 52 weeks (national best practice) of group classes that teach perpetrators how to change their behavior and thought processes and ultimately have healthy relationships. Courts often mandate BIPP for offenders upon conviction of an IPV offense or after CPS involvement due to IPV. Individuals who are concerned about their own abusive behavior can also choose to participate voluntarily. There are multiple accredited BIPP providers in Dallas County, including Brighter Tomorrows, The Family Place, and Hope's Door New Beginning Center. For a full list of accredited BIPP programs and contact information, visit www.tdcj.state.tx.us/documents/ BIPP_Accreditation_Approved.pdf.

Faith & Liberty's Place Family Center. In May 2011, John Battaglia murdered his two daughters, Faith and Liberty, during one of his unsupervised weekly visits. Battaglia, who at the time was on probation for assaulting his wife and the mother of his children, took the girls to his apartment, called their mother, and shot them while she was on the phone, hearing her girls beg for their lives. In response to this horrific crime, The Family Place created Faith & Liberty's Place Family Center (FLP), a supervised visitation center that facilitates court-ordered parental visits in a safe, secure setting. FLP also serves as a safe place for exchange of children in cases where there is a concern of continued violence against one of the parents by the other.

Sexual Assault Nurse Examiners. Intersectionality is common between IPV and sexual assault, and all hospitals in Texas have been mandated by law to have a professional on site to perform sexual assault exams. However, very few have sexual assault nurse examiners (SANEs) who are specially trained to complete these exams. A SANE collects forensic DNA evidence during an exam on a victim of sexual assault in a hospital setting. This evidence is then entered into the national Combined DNA Index System (CODIS) and used for prosecution purposes or to match victims of sexual violence to the perpetrators.

Four hospitals in Dallas County are currently in various stages of a SANE program. Parkland County Hospital, Texas Health Presbyterian Hospital, and Methodist Hospital have specialized SANE suites. Baylor Scott & White Hospital has SANEs on-staff to provide exams.

Dallas Children's Advocacy Center. DCAC coordinates the investigation and prosecution of the most severe cases of child abuse in Dallas County, which includes those that have witnessed a violent crime such as an IPV homicide. After a child is referred to DCAC by law enforcement or CPS, the child completes an interview with a DCAC forensic interviewer. DCAC has a team of Family Advocates who help each family navigate the complex systems they enter when a child makes an outcry of abuse or witnessed a violent crime. As each case moves through the system, the team helps the family understand the process, learn about their rights, and successfully access resources that will help their family during crisis. DCAC also provides a team of Master's-level therapists and clinical social workers to provide long-term, trauma-informed therapy to children of every age. These services are provided at no cost to every child and their non-offending family members.



Texas Department of Family Protective Services

Child Protective Services (CPS) and Adult Protective Services (APS) fall under the broad umbrella of TDFPS*. Both CPS and APS intervene when violence within a household is reported, which can be at the time of the IPV homicide or during previous incidents. The violence does not have to physically harm a child or vulnerable adult[†] to necessitate intervention; only the exposure to violence, and the potential for harm due to violence, must be present. When CPS intervention is determined to be necessary and there is IPV in the home, an "alleged perpetrator" and "other adult" is established. The alleged perpetrator is required to complete a service plan that addresses the abuse and/or neglect. CPS works with other adult to establish safety and stability for the parent and the child.

TDFPS and family violence agencies in the North Texas area have been meeting collectively for 12 years to provide interagency education and enhance communication, cooperation, and coordination of services to children, adults, and families. Family violence is prevalent in the majority of CPS cases and a growing concern in APS cases.

CRIMINAL JUSTICE SYSTEM RESPONSE

Specialized Law Enforcement Response

Dallas County is home to 30 police departments and the Dallas County Sheriff's Department. Nine of these departments have an advocate on staff to assist victims of IPV. Dallas, DeSoto, Grand Prairie, and Grapevine Police Departments have specialized Family Violence Units.

Lethality Assessment Program

The Lethality Assessment Program (LAP) was created in 2005 by the Maryland Network Against Domestic Violence. Adapted from Dr. Jacquelyn Campbell's evidence-based Danger Assessment (discussed on pg. 7), the LAP is an efficient and effective intervention that allows law enforcement officers to determine risk of IPV lethality at the scene and immediately connect victims with support services.

When responding to an IPV call, the officer verbally completes an 11-question form with the victim. If the victim's responses indicate that they are at high risk of being killed by the offender, the LAP protocol is triggered, and the officer immediately calls a partner domestic violence services agency. The officer speaks with an advocate at the agency to inform them of the situation and encourages the victim to speak with the advocate directly. If the victim wishes to speak with the advocate and requests shelter, the partner agency prioritizes their entry into the shelter and makes arrangements to bring the high-risk victim in as soon as possible. Upon arrival at the shelter, the victim receives specialized, high-risk case management services. If the victim does not want shelter, the advocate informs them of available services and encourages them to call back in the future.

In Dallas county, the LAP is currently used by Dallas, Grand Prairie, and Grapevine Police Departments. All departments utilizing the LAP within Dallas County partner with one or more local domestic violence organizations to provide services to high-risk victims.



Dallas County District Attorney Response

The Family Violence Unit of the Dallas County District Attorney's Office is comprised of 18 prosecutors, 15 victim advocates, nine investigators, and eight support staff. The Family Violence Unit prosecutes IPV in 17 Felony District Courts and represents victims in Protective Order Court. An additional seven prosecutors and two support staff are assigned to misdemeanor family violence cases in County Court 10 and 11. Representatives from the Family Violence Unit are also involved in various coordinated community responses to IPV.

In 2017, the District Attorney's Office opened 11 *Satellite Offices* throughout Dallas County to make services more accessible to victims. Each office, housed within City of Dallas Community Courts or Dallas Police Department patrol stations, provides screening for Protective Orders, intimate crime resources, and case information. Future satellite locations will include The Family Place and Genesis Women's Shelter & Support. This is expected to increase Protective Order filings and meaningful victim interaction with the criminal justice system.

^{*} Effective Sept 1, the Texas Department of Family and Protective Services (DFPS) is no longer a part of the Health and Human Services Commission. The Department now reports directly to the Governor's Office.

[†] Any person 65 and older, or any person 18-64 that have a severe impairment that prevents them from performing their activities of daily living.

Specialized Court Response

A specialized **Domestic Violence Court** was established in Dallas County in 1995, when the Family Violence Unit of the District Attorney's office recognized that prosecution could be more efficient and effective by having a dedicated family violence court and judge. Dallas County Criminal Court 10 began to hear only family violence cases, which were accepted from the other nine misdemeanor courts. With the enormous docket and complex nature of these cases, it was soon realized that a new court would be necessary to hear these cases. In 1999, the Dallas County Commissioners Court created Criminal Court 11 to hear overflow cases. These dedicated courts continue to work to ensure consistent, correct, and expedited disposition of family violence cases. Dallas County also has a dedicated **Protective Order Court** that hears all protective order applications.

The *Felony Domestic Violence Court Program (FDVC)* was established in January 2014 with the goal of increasing the safety of the most vulnerable female adult victims of IPV through close monitoring and accountability of their offenders, who have been placed in the community for supervision. The FDVC team consists of Judge Brandon Birmingham of the 292nd Judicial District Court presiding, public defender, prosecutor, probation officer, domestic violence detective, clinical assessors, monitoring company, Battering Intervention & Prevention Program (BIPP provider), victim advocate, substance abuse treatment provider, research assistant, and Community Supervision & Corrections Department (CSCD) management staff.

High-risk felony IPV offenders are identified through the presentence investigation process or as a result of a probation violation, and they are referred to the FDVC after completing a specialized domestic violence assessment, including the Danger Assessment. During the 9 to 16 months that the offender participates in the FDVC, the team utilizes swift and progressive interventions and sanctions for infractions. The victim advocate stays in contact with and offers resources to the victim throughout the process to ensure her safety. Interventions with the offender include participation in specialized high-risk BIPP, regular appearances in court, GPS monitoring, and other requirements that are specific to each case (for example, no-contact orders or substance abuse treatment). Upon graduation from the program, probationers have quarterly group and individual BIPP, as well as court check-ins, for one year. There has been a downward trend since 2014 when this program was implemented; the percentage of probation revocations due to a new assaultive case has decreased from 29% in 2014 to 21% in 2016.



DALLAS COUNTY COORDINATED COMMUNITY RESPONSE



Domestic Violence Awareness Coalition. DVAC shares resources and information with community members who are passionate about ending domestic violence. The Coalition meets monthly to hear from representatives from shelters, community agencies, law enforcement, attorneys, and judges. Each meeting brings about new ideas, issues, and problems to be addressed, ultimately opening communication lines with diverse agencies.

Domestic Violence Task Force. In 1987, settlement of a class action lawsuit against the City of Dallas alleged that police "denied women equal protection under the law because of an unofficial policy for officers not to intervene or make arrests in family violence cases". The settlement of this lawsuit decreed that a Domestic Violence Taskforce be created to "monitor the City's response to domestic violence for two years;"¹⁵ however, after the two years, the involved parties quickly realized the benefits of

continuing to coordinate their efforts. As such, the DV Taskforce has continued to meet for the past 30 years. It is chaired by Councilmember Jennifer Staubach Gates, and members include family violence organizations and the Dallas Police Department, among others. "The objectives and initiatives of the Taskforce have changed over the years depending on leadership and the needs of the community. Currently, the Taskforce holds general meetings, open to the public, on a quarterly basis. Additionally, a small number of partners comprise the executive committee, which meets monthly to provide detailed metrics and guidance for city policy."¹⁵

Family Violence Prevention Council. In order to expand the reach of the Domestic Violence Task Force, the Family Violence Prevention Council (FVPC) was formed. Charged with the task of sharing information and resources with concerned community members, the FVPC focuses on abuse and violence not only between intimate partners but throughout the age span. The council recognizes that abuse does not occur in a silo but impacts the entire family structure. From child abuse to elder abuse, the council works to inform the community of programs, agendas, policies, and policy makers that combat violence throughout the community.

Domestic Violence High Risk Team. The DVHRT, led by The Family Place, works with community partners to identify and address the most high-risk cases of IPV in Dallas County. The DVHRT uses evidence-based risk assessment tools, as well as various methods identified in meetings, to ascertain which cases pose the greatest risk

of serious re-assault or lethal violence to victims. Once a high-risk case is identified and accepted by the DVHRT, the team develops an individualized intervention plan to interrupt the cycle of escalating violence and close the systemic gaps that may exist between collaborative agencies. The containment and monitoring of these potentially lethal offenders is increased, and information is dispersed to ensure that these dangerous cases do not slip through cracks in the system.

Sexual Assault Response Team. The Dallas County SART is a multi-disciplinary team that includes stakeholders such as sexual assault & domestic violence providers, advocates, SANEs, law enforcement, district attorneys, and the forensic team. SART members work together to ensure a functional community response for sexual violence victims.



Prior arrests for domestic violence decrease the likelihood of homicide if there is a coordinated community response in place.⁵

RECOMMENDATIONS

The following recommendations have been developed by the IPVFRT, based on data analysis and the collective expertise of the team, to implore organizations and individuals within Dallas County to take steps that will continue improving the systemic response to IPV. This list is not comprehensive; instead, it highlights tangible action items that can reasonably be undertaken considering the county's current resources.

ALL POLICE DEPARTMENTS IN DALLAS COUNTY SHOULD IMPLEMENT THE LETHALITY ASSESSMENT PROGRAM.

The LAP, discussed on page 27, is an evidence-based, efficient tool that has shown promising results across the country and is a "supported intervention" on the Centers for Disease Control (CDC) Continuum of Evidence Effectiveness. Of particular note, a statewide study conducted in Oklahoma found that "participants in the LAP were significantly more satisfied with the police response."¹⁶

In at least 16 cases (21%) reviewed by the IPVFRT, had the LAP had been in place before the homicide occurred, the victim would have been screened for lethality when police responded to the scene. The details of these cases suggest that many victims would have been identified as high-risk and been given the opportunity for immediate shelter and advocacy services.

The IPVFRT recommends full implementation of the LAP across all police departments in Dallas County. LAP training and technical assistance is available through the Maryland Network Against Domestic Violence. Email LAPInfo@mnadv.org for more information.

HOSPITALS SHOULD CONSISTENTLY, SAFELY, AND EFFECTIVELY SCREEN FOR INTIMATE PARTNER VIOLENCE.

Across all cases reviewed from 2009-2013, hospitals were the only consistent point of systemic intervention for victims and their families. Whether through illness, injury, or childbirth, almost all adults visit a hospital at certain points in their life.

In 2016, as a result of a joint case review, the Dallas and Tarrant County IPVFRTs created the **Dallas-Fort Worth Intimate Partner Violence Coalition**, with the purpose of surveying hospitals about their domestic violence screening processes during patient intake and offering solutions for more standardized, consistent, and safe screenings. The large majority of hospitals have at least one question regarding IPV on their intake forms, but the staff completing intakes may not have had training on how best to approach this topic and what to do if someone does disclose abuse. Further, these sensitive questions are often asked while the patient's significant other, and possible abuser, is sitting next to him/her. It is crucial that IPV screening questions are completed confidentially, sensitively, and with sufficient follow-through so that victims can be immediately connected with resources.

Results from the initial survey will be forthcoming, as well as recommendations for hospitals that wish to receive training.

DALLAS COUNTY'S GUN SURRENDER PROGRAM MUST BE STRENGTHENED.

Of the 115 individuals who died a direct result of IPV, 68 (59%) were killed with a gun.

As evidenced throughout this report, the presence of a gun during an IPV situation exponentially increases the lethality risk for everyone involved. Although state and federal laws prohibit convicted IPV offenders and individuals with an active Protective Order from possessing firearms, the process for identifying and removing prohibited weapons is complicated.

The Dallas County Gun Surrender Program, launched in 2015, aimed to close the gap between law and practice by creating a protocol for collecting guns from offenders; however, after two years of operation, the Program remains dramatically underutilized, having only collected 60 of the 1,600 firearms originally estimated.

Taking Aim at Family Violence: A Report on the Dallas County Gun Surrender Program, published

by the SMU Dedman School of Law, suggests that the following steps be taken to improve this life-saving program:

- Implementing a Memorandum of Understanding between community stakeholders
- Offering training for Dallas County judges on how best to utilize the program
- Creating an office and staff dedicated specifically to Program administration
- Securing additional Program funding to ensure long-term viability
- Increasing accountability for non-complaint offenders
- Increasing community awareness of the Program
- Considering collaboration with other community advocates, including probation, U.S. Attorney's Office, and batterer intervention programs"¹⁷

The IPVFRT supports the above recommendations and commends the Dallas County community for the collaborative work that has already been done to protect its citizens from IPV-related gun violence.

COMMUNITY STAKEHOLDERS SHOULD ADVOCATE FOR LEGISLATION THAT WILL ULTIMATELY PREVENT IPV HOMICIDES FROM OCCURRING.

Law enforcement, prosecutors, and advocates work diligently on the ground to prevent and respond to IPV homicides, but they must also advocate for legislation that will provide justice for victims, hold offenders accountable, and reduce lethality risks.

Each legislative session, the Texas Council on Family Violence (TCFV) convenes a Public Policy Committee, consisting of representatives from domestic violence agencies throughout the state, to create a legislative agenda that addresses current gaps in the system and allows for the provision of more comprehensive IPV services. Community stakeholders can support the important legislative work of TCFV by participating in the "Purple Postcard Campaign" during each legislative session, which lets legislators know that the agenda items developed by the Public Policy Committee are fully supported by constituents. Through such advocacy, bills were most recently passed in the 85th Legislative Session addressing:

- Funding core family violence services and battering prevention services
- Child custody and mediation training
- Expanding eligibility of long term protective orders
- Enhancing privacy and confidentiality of victim information, including address safety protection
- Confidentiality within the Crime Victims' Compensation (CVC) process

Visit www.tcfv.org/purplepostcard to add your voice to the call for life-saving services in Texas.

AGENCIES SHOULD DILIGENTLY WORK TOGETHER TO INVESTIGATE AND PROSECUTE CASES BEFORE A HOMICIDE OCCURS.

The IPVFRT believes that the most comprehensive solution for ending IPV homicides is a robust coordinated community response (CCR) that brings together all relevant stakeholders in Dallas County to end the epidemic of violence against women. A CCR is a systemic response that employs collaborative and integrated service delivery to address a public health concern, such as IPV. The format and functions of a CCR vary, but the ultimate goal remains the same: intervening before a homicidal IPV incident to provide safety for the victim and accountability for the offender.



Prior IPV is the number one indicator of lethality for victims. Early intervention is vitally important.

Dallas County is fortunate to have a well-established, multi-faceted CCR, but as with any multi-dimensional solution, there is always room for improvement. In particular, the following areas for growth were identified through the IPVFRT's case review and discussion:

- **Community education** regarding the prevention of IPV, how to respond when a loved one is in an abusive relationship and how to ensure our children do not grow up to abuse or be abused. Individuals and agencies wishing to receive training may reach out to any of the domestic violence service agencies listed on pages 25-26.
- Use of Expert Witnesses during IPV-related court proceedings, especially when strangulation is involved. IPV and strangulation are nuanced issues that are easily misunderstood, and the introduction of expert witnesses to help explain general dynamics and counter-intuitive victim behavior can be crucial to the successful prosecution of a case. If a perpetrator is found guilty, appropriately sentenced, and receives evidence-based interventions to reduce recidivism, future IPV homicides will be reduced.
- **Development of an integrated case tracking/reporting system** that allows for seamless information sharing between agencies. This includes a more streamlined process for sending Protective Order information from the District Attorney's Office to police departments.

NEXT STEPS

The IPVFRT will continue reviewing fatalities in order to improve Dallas County's response to IPV and will seek grant funding to support the expanding scope of team, including:

Growing team membership and data collection. In the past year alone, the IPVFRT has welcomed new representatives from the Dallas Children's Advocacy Center, hospital sexual assault units, and several police departments in addition to the City of Dallas. The team will also work towards collecting aggregate data when individualized data is not available. An example of this may be Crime Victim Compensation data, which would allow the team to have a more thorough understanding of how family survivors seek recovery services.

Additional team functions. Fatality Review Teams across the country have developed various policies and procedures that may be beneficial for the Dallas County IPVFRT to adopt. In particular, the team will consider interviewing surviving family members and reviewing near-death IPV incidents.

Partnership efforts. In 2016, the Dallas County IPVFRT partnered with the Tarrant County IPVFRT to review two cases in which the victims and perpetrators had spent time in both locations. The discussion during this in-person meeting led to the creation of the Dallas-Fort Worth Intimate Partner Violence Coalition (discussed on page 30). Recognizing the transient nature of IPV and the vast benefits of partnership with our neighboring counties, the Dallas County IPVFRT will continue to partner with Tarrant and other surrounding counties when relevant.

The Texas Council on Family Violence (TCFV) has begun the process of creating a collaborative team made up of all Fatality Review Teams in Texas. The structure and functions of this team will be forthcoming.

Reporting. Statistical reports will be produced every other year going forward. Comprehensive reports containing aggregate data and systemic recommendations will be published every four years.



IN MEMORIAM

This report is dedicated to the women, men, and children in Dallas County who have lost their lives as a result of intimate partner violence. The Dallas County Intimate Partner Violence Fatality Review Team honors each of their lives and unique stories.*

2009

Lovetta Armstead, 32

September 22, 2009

Gary Green, 38, stabbed his estranged wife Lovetta to death. Green also drowned their 6-year-old daughter, Jazzmen Montgomery, and injured their 9-year-old son. Lovetta had recently filed for divorce from Green. Green was charged with the two murders.

Mary Louise Cleveland, 68

February 27, 2009 Danny Hollis, 49, shot and strangled his girlfriend Mary to death. Hollis was convicted and sentenced to life in prison for Mary's death.

Amber Goodman Doyle, 30

September 28, 2009 Denny Doyle, 37, shot his wife Amber and Damon Spoon, 31, before shooting and killing killed himself.

Shawn Henderson, 28

October 24, 2009 Terry Williams, 28, stabbed his boyfriend Shawn at least 17 times with a kitchen knife after a physical altercation. Williams was sentenced to 31 years in prison.

Barbara Gail Lewis-Miles, 66

September 21, 2009 Myron Miles, 68, killed his wife while attempting to restrain her during an apparent schizophrenic episode. Barbara had been violent towards Miles in the past. The charge was No Billed.

Mary Dorsch McGuire, 71

August 20, 2009 Melvin McGuire, 71, shot his wife Mary in the head and chest, killing her. McGuire then shot and killed himself.

Raney Potter, Jr., 21

June 24, 2009 Lanette Collins, 29, stabbed her boyfriend Raney in the chest. Raney died after two months in the hospital. Collins accepted a plea bargain of five years in prison.

Celia Shannelle Mbaka, 20

September 17, 2009

Justice Mbaka, 23, shot his wife Celia to death. Mbaka then doused their apartment with gasoline and killed himself.

Lashalyn Dychelle Robinson, 29

November 11, 2009

Quenturus Robinson, 31, killed his wife, Lashalyn. Lashalyn is survived by her two children, who were found in the home unharmed. Robinson accepted a plea agreement of 40 years in prison.



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^{*} The majority of this information was obtained directly from the 2009-2013 Texas Council on Family Violence Honoring Texas Victim Reports.¹

Zulma Salmeron, 35

December 1, 2009

Jose Gonzalez, 46, beat his former girlfriend Zulma to death in a Dallas motel. Gonzalez then tried to commit suicide, but police apprehended him before he did so. Her 2-year-old grandson witnessed the incident. Gonzalez was sentenced to 99 years in prison.

Ruben Valladarez, 47

March 15, 2009

Maria De La Rosa, 40, fatally stabbed her ex-husband Ruben following an argument in which she was strangled. The case was No Billed by a Grand Jury.

Carolyn Ann Williams-Cleary, 48

May 14, 2009

Marvin Cleary, 59, killed his wife Carolyn and assaulted Carolyn's brother as he tried to protect her. At the time of this report, it was not clear if strangulation or blunt force trauma caused Carolyn's death. Cleary, who had previously been incarcerated for family violence, was on parole at the time of the incident. Cleary confessed and was sentenced to life without parole

2010

Alma Alonso, 48

February 19, 2010

Felipe Alonso, 49, killed his wife Alma in her bedroom. Alonso called the police and admitted to Alma's murder. Alonso received a 45-year prison sentence.

Queen Esther LaShay Brown, 30

March 3, 2010

Quantevious Slaughter, 20, shot and killed his girlfriend Queen while she was driving with her sister. Slaughter shot both Queen and her sister. Queen died at the hospital. As Slaughter fled from the police, he had a wreck and then committed suicide.

Richard William Carter, 43

September 25, 2010

Kathy Crittenden, 43, stabbed her boyfriend Richard in the chest following an altercation between the two. Witnesses reported Richard had "jumped" on Crittenden before she stabbed him. Crittenden was sentenced to 10 years of probation and sent to a substance abuse facility.

Christina Garcia, 22

February 10, 2010 Jesus Diaz, 32, shot and killed his girlfriend Christina. Diaz was sentenced to 50 years in prison.

Irene Haggerty, 46

July 19, 2010 Godfrey Spain, 52, beat his wife Irene to death in their home. Spain then committed suicide. Irene is survived by their two children.

Hazel Ruth Kennard, 42

May 29, 2010 John Herrin, 41, shot and killed his ex-girlfriend Hazel. At the time of the murder, Hazel was collecting her belongings and attempting to leave in her vehicle. Herrin was sentenced to 15 years in prison for murder.



Shawana Surae Lane, 22

February 28, 2010

Marcus Johnson, 35, fatally stabbed his ex-wife Shawana. As part of his probation, Johnson was ordered to have no contact with Shawana. Shawana's three-year-old son witnessed the stabbing. Shawana died at the hospital shortly after the stabbing. Johnson received a sentence of 40 years in prison. Shawana is survived by her three children.

Belinda Ann Loveland, 52

June 20, 2010

Richard Loveland, 59, shot and killed his wife Belinda in their home and then committed suicide. Belinda was a municipal judge working with at risk youth. Richard Loveland sent a text informing their son of his plans. The son contacted emergency services. Belinda is survived by their son.

Annie Ruth Mauldin, 24

June 26, 2010

Kevin Allison, 30, shot and killed his girlfriend Annie in her apartment. Allison was sentenced to 40 years in prison.

Amy Renea Mayfield, 37

March 9, 2010 Jerry Mayfield, 45, shot and killed his wife Amy in the garage of their home and then killed himself. Mayfield left notes and emails detailing the deaths.

Harold Eugene Miles, 47

October 11, 2010

Dejon Turner, 21, strangled and suffocated his boyfriend Harold, killing him. Turner confessed to the murder and was sentenced to 25 years in prison.

Betty Miller, 66

January 13, 2010

Calvin Miller, 68, strangled his wife Betty. Police found Betty unconscious and transported her to Baylor Hospital where she underwent surgery. Betty died shortly afterwards. Miller was found not guilty by reason of insanity.

Pearl Ramos Hernandez, 31

June 24, 2010

Julio Trevino, 36, strangled his wife Pearl to death in their home. The following morning, Pearl's body was found inside a car at a church parking lot. Trevino plead guilty to murder and was sentenced to 62 years in prison.

Jason Benjamin Turner, 38

July 7, 2010

Margaret Coumpy, 48, shot and killed her husband Jason in the parking lot of a pool hall after a physical altercation. As they were fighting and Jason was hitting and punching Coumpy, she pulled a gun from the car. During the struggle, the gun fired and hit the victim in the chest. There were previous reports of altercations between the couple in which a predominant aggressor was unable to be determined. Jason is survived by two adult children. Coumpy was arrested for murder, but charges were later dismissed.

Kizzy Richardson-Walker, 32

October 17, 2010

Greg Walker, 38, killed his wife Kizzy at their apartment. Kizzy went to their apartment to get her belongings and to leave him. Kizzy and Walker had been married for six months. After family members filed a missing person report, her burned body was found near Lake, Mississippi. Walker received 45 years in prison.

Tara Lynne Starling, 43

February 13, 2010 Michael Parker, 53, beat his girlfriend Tara to death at a motel. Parker was sentenced to life in prison.



35

2011

Autumn Trivon Carey, 25

November 25, 2011

Almonzo Henderson, 28, shot and killed his ex-girlfriend Autumn at her home. Henderson also shot and killed Autumn's stepfather, Gerald Malone, and her sister's boyfriend, Adrian Jesse. Autumn's two children were present during the shooting. Afterward, Henderson shot and killed himself. Henderson had previously been charged with domestic assault and strangulation, but the case was later dismissed. Autumn is survived by her son and daughter.

Stephanie Yvonne Cathcart, 50

November 22, 2011

Calvin Cathcart, 51, bludgeoned his wife Stephanie in the head several times with a sledgehammer in their apartment, killing her. Cathcart settled for a sentence of 45 years. Stephanie is survived by four children and 13 grandchildren.

Mischell Fuller, 37

March 27, 2011

Tyrone Cade, 38, stabbed and killed his girlfriend Mischell. Cade also killed Mischell's 18-year-old daughter, Desaree Hopkins. Records indicate Mischell asked Cade to move out of her apartment. Cade was sentenced to death.

Decia Latrese Hartfield, 19

July 7, 2011

Ronnie Bass, 19, shot and killed his girlfriend Decia in her car. Decia was a graduate of the South Garland High School, class of 2010. She was pregnant at the time of her death. Bass and a female accomplice, Georgina Bolin, conspired to kill their respective dating partners, but Bolin's partner was not killed. Bass received an automatic life sentence for capital murder of his unborn child and a 30-year sentence for Decia's murder. Bolin received 30 years for her involvement.

Shirley Kelly, 47

June 19, 2011

Steven Robinson, 48, shot his girlfriend Shirley multiple times in the head and neck, killing her. Robinson was on parole at the time of the incident. He was sentenced to 99 years in prison.

Jacqueline Michelle Lewis, 43

October 22, 2011

Michael Newby, 40, shot and killed his girlfriend in their home. Subsequently, Newby shot and killed himself. Jacqueline is survived by her two sons.

Zulema McColgan, 45

June 28, 2011

Sisro Johnson, 39, beat and killed his girlfriend Zulema in her apartment. Zulema died of blunt force trauma. Johnson accepted a plea of 50 years.

Martha Elena Rivera de Garcia, 29

June 10, 2011 Jalmar Garcia, 31, shot and killed his wife Martha in the middle of the street. Martha had recently separated from him. Garcia hijacked a car and subsequently shot and killed himself.

Sara Carter Schuster, 57

September 13, 2011 William Schuster Sr., 58, shot and killed his wife Sara in their home. Schuster then shot and killed himself. Sara is survived by her teenage son.



2012

Cicely Bolden, 28

December 20, 2012

Larry Dunn Jr., 36, stabbed and killed his girlfriend Cicely in the bedroom of her home. Cicely's two young children returned from school and found her body. Dunn was on probation at the time of the incident and confessed to authorities that he killed Cicely. He received a 40-year prison sentence. Cicely is survived by her 7-year-old son and 8-year-old daughter.

Sharletha Carey, 29

February 18, 2012

Ronnie Carey, 26, shot and killed his ex-girlfriend Sharletha before shooting and killing himself. Sharletha's children found their bodies.

Patrick Coleman, 58

November 26, 2012

Kendall Polasek, 50, shot and killed her boyfriend Patrick. Witnesses stated that there had been a verbal altercation, after which Polasek went into the bedroom and returned with a gun. Polasek was charged with First Degree murder sentenced to 25 years in prison.

Deanna Cook, 32

August 9, 2012

Delvecchio Patrick, 35, strangled and killed his ex-wife Deanna in the bathroom of her home. While being attacked, Deanna called 911 for help. The police arrived at Deanna's home an hour after the call and after hearing no response or seeing anything at the house, they left the home. Deanna's sister and mother found Deanna's body two days later. Patrick had a history of violence against Deanna. He was sentenced to life in prison. Deanna is survived by her two teenage daughters.

Becky Ann Gee, 51

May 22, 2012

Christopher Worley, 40, strangled his girlfriend Becky to death in her home. Worley confessed and was sentenced to 35 years in prison. Becky is survived by her four adult children.

Sharon Gooden, 55

December 28, 2012

Roy Gooden, 47, stabbed his wife Sharon to death at a food pantry. Gooden had a history of violence and had served time in jail for assaulting his daughter and another female with a knife. Gooden was sentenced to 40 years in prison. Sharon is survived by an adult daughter and two adult sons.

Michael Hafford, 24

April 11, 2012

Roshana Carter, 26, stabbed and killed Michael following an altercation about child support in which Michael punched Carter in the face. Michael had six prior convictions of family violence assaults. The case was determined to be justifiable homicide, and Carter was not charged.

Arthur Keels, 50

December 25, 2012

Mandel Millender, 50, killed his boyfriend Arthur in the course of a physical altercation. Arthur's cause of death was ruled as homicidal violence including blunt force trauma and possible strangulation. No charges were filed on Millender.

Tonia Lopez-Serrato, 25

October 7, 2012

37

Ediberto Gaona, 27, shot and killed his wife Tonia at her relative's home. A neighbor reported hearing arguing in the street and seeing Gaona point a weapon at Tonia. Gaona threatened witnesses with the gun before shooting and killing himself.

James Marek, 55

July 4, 2012

Darlene Pignataro, 47, stabbed and killed her boyfriend James following an argument. Pignataro plead guilty and was sentenced to 10 years in prison.

Jerie Ann McCloud, 36

December 20, 2012

Mark Guida, 43, strangled his girlfriend Jerie to death in a vehicle. Police found Jerie's body inside the burning vehicle left in a vacant field. Guida was sentenced to 99 years in prison. Jerie is survived by her three sons, ages 6, 8, and 12.

Beverly Murphy, 61

December 26, 2012

John Murphy, 62, put his wife Beverly in the hospital by punching, kicking, and assaulting her with a cane. The attack led to a seizure, which led to traumatic brain injuries. Beverly passed away two months later, after Murphy had been charged with assault and was sentenced to prison for two years. Due to double jeopardy, Murphy could not be charged with Beverly's murder.

Donya Palmer, 48

January 26, 2012

William Palmer, 50, stabbed and killed his wife Donya in the living room of her parents' home. Palmer chased Donya inside the house and fatally stabbed her. Palmer also stabbed and killed Donya's parents, Raymond Davis, 69, and Mary Jane Davis, 67. Donya's sister and niece heard the attacks, hid in a closet, and called authorities. Donya had recently separated from Palmer and moved into her parents' home. Palmer had a history of violence. Palmer was sentenced to life in prison without parole. Donya is survived by her adult son and two adult daughters.

Broderick Reynolds, 29

June 29, 2012

Leslie Jones stabbed her former common law husband Broderick multiple times, killing him. The two had recently separated, and a fight began when Jones returned to the house to pick up some clothing. Jones was not charged.

James Stevens, 40

April 28, 2012

Letisha Morgan, 34, shot her boyfriend James 11 times, killing him. After being arrested, Morgan admitted to a murder in South Dakota in which she stabbed a man multiple times. Morgan reported being diagnosed with depression, schizophrenia, and bipolar disorder. Morgan was sentenced to 40 years in prison.

Janet Tovar-Rivera, 43

October 15, 2012

Jonathon Kenney, 26, slammed his girlfriend Janet's head into the sidewalk outside of a bar during an argument. Kenney continued to assault Janet in their apartment later that night. The next day, Kenney called 911 and reported that Janet was unresponsive. Janet died of blunt force injury to the head. The apartment manager reported that Kenney had assaulted Janet before. Kenney confessed to assaulting Janet. He was charged with aggravated assault first degree and received 10 years deferred adjudication. Janet was a trans woman.

Evangeline Watkins, 35

June 28, 2012

Alan Washington, 48, shot his ex-wife Evangeline in a vehicle parked behind a restaurant. Washington also shot her friend David Stevenson, 53. David survived and Evangeline was transported to the local hospital where she later died. Watkins was convicted of murder and received a 60-year prison sentence.



2013

Cindy Benitez, 20

May 17, 2013

Hector Flores, 22, killed his ex-partner Cindy. Flores forced Cindy into his car after assaulting her. Cindy jumped out of the car while it was moving and hit her head. Flores continued assaulting Cindy at a motel, and noticed she was unresponsive. Flores was sentenced to 20 years in jail. A Temporary Ex Parte Protective Order had been filed, but not issued, at the time of death.

Zina Bowser, 47

August 7, 2013

Erbie Bowser, 44, shot and killed his wife Zina in her home. Bowser also shot and killed Zina's daughter, Neima Williams, 28, and injured her two sons, ages 11 and 13 years. Zina's 3-year-old grandson was at the home but was not physically injured. Bowser attacked Zina and her family hours after also killing his girlfriend, Toya Smith (also named in this report) and her daughter and injuring her 14-year-old son and her daughter's 17-year old friend. In 2011, Zina had begun divorce proceedings. During that time and after Bowser threatened her and the children, Zina obtained a protective order. Authorities charged Bowser with multiple counts of capital murder and assault. Bowser was sentenced to life in prison. Zina is survived by four children including her sons, ages 11 and 13.

Karen Cox Smith, 40

January 8, 2013

Ferdinand Smith, 41, shot and killed his wife Karen in the parking garage where she worked. Smith abused Karen for many years. In the months leading up to murder, Karen reported Smith's violent behavior and obtained a protective order. Authorities charged Smith with murder and he plead guilty to 50 years in prison. Karen is survived by her five children.

Esmerelda Gonzalez, 34

October 7, 2013

Efrain Gonzalez, 39, shot and killed his wife Esmerelda in the front yard of their home. Gonzalez then shot and killed himself. Esmerelda's children were home at the time of the murder. Esmerelda is survived by her son and daughter, 10 and 15 years of age.

Dollie Hancock, 61

November 18, 2013

Gary Hancock, 65, shot and killed his wife Dollie in their home. Hancock then shot and killed himself. That morning, Hancock sent a text message to a family friend apologizing for what he was about to do. After going to the home and discovering the couple and a suicide note, the friend alerted authorities.

Bre'Auna Hill, 22

January 11, 2013

Ismael Vergara, 26, stabbed and killed his wife Bre'Auna in the bedroom of their home. Bre'Auna's two young children were in the living room at the time of the murder. When law enforcement responded to the family violence call, they discovered Bre'Auna and Vergara with self-inflicted stab wounds. Vergara was sentenced to life in prison. Bre'Auna is survived by her two children.

Breshauna Jackson, 28

April 15, 2013

Tyrone Allen, 26, shot and killed his pregnant girlfriend Breshauna at her mother's home. A witness in the home heard Breshauna yell and say that Allen shot her. Allen then led authorities on a vehicle chase. During the chase, Allen fired upon officers and shot Officer Daniel Malouf, who survived the injuries. Allen then barricaded himself in a nearby home, and after an hours-long standoff, he surrendered to police. Allen has a history of family violence, and at the time of Breshauna's murder, Allen had an upcoming court date for assaulting a previous girlfriend. Breshauna obtained a protective order against Allen a few weeks prior to her murder. Allen was sentenced to life in prison. Breshauna is survived by her five children, ages 2 to 10.



Jenea James, 37

June 30, 2013

Dashun Atkins, 39, shot and killed his ex-wife Jenea in her neighbor's yard. Atkins also shot and killed Jenea's boyfriend, James Doyle, 41. Jenea's two children were home at the time of the murders. Atkins later shot and killed himself at his home. The day of the murders, Jenea called law enforcement twice to report that Atkins was stalking her. Police increased patrol of Jenea's home and interviewed Atkins and determined that he was not a threat to himself or others. Jenea planned to apply for a protective order the following Monday. Jenea is survived by her son and daughter, 3 and 5 years of age.

Jennifer Lynn Krieger, 44

May 19, 2013

Kirkland Reed, 45, killed his girlfriend Jennifer in their home. Reed also killed one of Jennifer's daughters, age 14 years. Jennifer's family members became concerned after being unable to reach Jennifer. Authorities performed a welfare check and discovered their bodies. Reed fled to New Mexico to a family member's home. He was later extradited and received a life sentence. Jennifer is survived by her daughter.

Corrine Marsters, 52

October 18, 2013

Brian Marsters, 54, shot and killed his wife Corrine in their home. Marsters then shot and killed himself. Marsters' co-workers called to request a welfare check. Authorities discovered Corrine and Marsters' bodies.

Demetrious Matthews, 36

April 30, 2013

Patrick Adger, 39, killed his girlfriend Demetrious by running her over with her vehicle. The next day, Adger reported to Demetrious' family that she was missing. Later, Demetrious' body was found in the woods near the Trinity River. Adger was sentenced to life in prison. Demetrious is survived by her daughter.

Latoya McGowan, 24

January 29, 2013

Christopher Jefferson, 31, shot and killed his ex-girlfriend Latoya in her home. Jefferson also shot and injured Latoya's mother, Terrance Dashelle Brown. Latoya's three small children were present during the shootings. Jefferson was sentenced to life in prison. Latoya is survived by her two daughters and her son, 3 to 6 years of age.

Sandra Supina Middlebrook, 42

November 26, 2013

Clinton Scott, 35, shot and killed his girlfriend Sandra in her home. Scott then shot and killed himself. Authorities responded to a welfare check and discovered Sandra and Scott's bodies.

Catina Murphy, 37

March 19, 2013

Andre Murphy, 40, shot and killed his ex-wife Catina in her mother's home. Murphy then shot and killed himself. While Murphy was forcing his way into the home, Catina called 911 for help. When officers arrived, they discovered Catina and Murphy's bodies. Catina ended the relationship in September 2012 and had filed for divorce. The divorce was finalized in February, and Catina received sole custody of her daughter. Catina had reported that Murphy stalked her. Catina is survived by her daughter, age 7.

Ha Thi Nguyen, 27

February 3, 2013

Luke Sy Dinh, 44, shot and killed his wife Ha in the home they shared. Dinh then shot and killed himself. According to reports, Dinh walked their daughter to a neighbor's house before killing Ha and himself. Ha is survived by her daughter, age 5 years.



Samantha Rasmus, 37

February 7, 2013

Stoney Rawlinson, 39, assaulted and killed his girlfriend Samantha at the home they shared. Samantha's uncle discovered her body in a plastic container in the home. Rawlinson agreed to turn himself in at a shopping center; however, when officers arrived Rawlinson was sitting in his truck with a gun. Officers then ordered him to put down the gun. When Rawlinson aimed the gun at them, law enforcement shot Rawlinson at the scene. The week before the murder, neighbors observed Rawlinson grab and pull Samantha.

Donna Sanford, 60

July 1, 2013

Tommy Esquibel, 62, shot and killed his girlfriend Donna in the home they shared. After killing Donna, Esquibel shot and killed himself. During the attack, Donna called 911. When police arrived, they found Donna and Esquibel's bodies. Donna is survived by her two adult daughters and her adult son.

Toya Smith, 43

August 7, 2013

Erbie Bowser, 44, shot and killed his girlfriend Toya in her home. Bowser also shot and killed Toya's 17-year-old daughter and shot and injured her 14-year-old son and her daughter's 17-year-old friend. After killing Toya and the other victims, Bowser went to his wife Zina Bowser's home (also included in this report). Bowser killed his wife and her daughter and injured two more boys at that scene. Bowser was apprehended in DeSoto and sentenced to life in prison. Toya is survived by her son, age 14.

Marcelo Vazquez, 44

March 13, 2013

Angelica Vazquez, 43, shot and killed her husband Marcelo, 21-year-old daughter Paulina, and 18-year-old son Alejandro with a semi-automatic in their home. Angelica also died of a self- inflicted gunshot wound. Marcelo was a truck driver, Paulina was a sophomore at the University of North Texas, and Alejandro was in his second semester at Eastfield College. Angelica had recently been diagnosed with cancer.

Sherry Whitacre, 60

April 17, 2013

Sharon Brown, 61, assaulted his girlfriend Sherry in a motel where the couple was staying. Sherry was in a frail condition at the time due to recent medical treatments and died several days after the assault. During this time, authorities arrested and charged Brown for aggravated assault against Sherry. Brown pleaded guilty and served his sentence before prosecutors knew of Sherry's death. Due to legal protections against double jeopardy, prosecutors did not pursue murder charges.

Lakeitha Wilkerson, 33

February 11, 2013

Eric Thompson, 32, strangled and killed his ex-girlfriend LaKeitha in her home. Several hours after killing LaKeitha, Thompson shot and killed himself. Two weeks prior to LaKeitha's murder, police responded when she called for help; however, Thompson had left, and law enforcement took no further action.

Kevin Williams, 46

November 10, 2013

Kenneth Davis, 36, stabbed and killed his boyfriend Kevin in their apartment complex parking lot during an altercation. The couple had been arguing about their relationship in the days prior to the death. Kevin was a professor at Mountainview Community College. Davis was sentenced to three years in prison.

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