

DOMESTIC VIOLENCE HIGH-RISK TEAMS (DVHRTs)

2020 Statewide Data Report

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TCFV thanks all of the Domestic Violence High Risk Team sites who stand with survivors and contributed data to this report. Data analysis and report completed by Dr. David Scott, TCFV DVHRT Policy Coordinator.

INTRODUCTION AND OVERVIEW OF THE DVHRT PROGRAM

In Texas, nearly 1,400 women were murdered by their intimate partners in the last 10 years, according to the Texas Council on Family Violence's (TCFV) Honoring Texas Victims Reports. Domestic Violence High-Risk Teams (DVHRTs) create a community-coordinated initiative in which survivors at the highest lethality risk get enhanced support from law enforcement, advocates, prosecutors, and others. This wraparound model holds offenders accountable and is a trauma-informed approach to maximize victim safety. This report serves as the 2020 DVHRT Statewide Data Report for sites funded by TCFV with support from the Office of the Attorney General and the Criminal Justice Division at the Office of the Governor.

As a result of their support, in Fiscal Year (FY) 2020, TCFV funded the following communities in Texas:

- » ABILENE (*Taylor and Jones Counties*)
- » BEXAR COUNTY
- » BRYAN COUNTY, ERATH COUNTY
- » FORT BEND COUNTY
- » GRAYSON COUNTY
- » HARRIS COUNTY
- » HAYS COUNTY
- » WILBARGER COUNTY

Each site used the appropriations from either the Office of the Attorney General (OAG) and the Criminal Justice Division of the Governor (CJD) (both in the case of one site) to provide a salary based DVHRT coordinator position and in some cases a support staff to spearhead those cases that met the criteria for high-risk domestic violence. The criteria to activate a DVHRT response was left up to the consensus of each set of community partners and best practices that have been empirically tested and would stand the scrutiny of both the Daubert Test and Frye Test for admissibility in court for the State of Texas. The four prevailing choices for the DVHRT risk assessment tools chosen by the funded sites included the Danger Assessment (DA) by Dr. Jacquelyn Campbell, the Danger Assessment for Law Enforcement (DA-LE) also by Dr. Jacquelyn Campbell, and the Lethality Assessment Program (LAP) created by the Maryland Network Against Domestic Violence (MNADV). One site, located in Grayson County, created a hybrid risk assess-

ment for their first use in the field consisting of four questions to ascertain high risk or high lethality on domestic violence investigations.

The DVHRT, when properly implemented, focuses on the most lethal (10-15%) of domestic violence cases in a particular jurisdiction. The DVHRT is then able to provide a team approach of direct interdiction to maximize all available resources to a victim while using those same resources to provide real-time or continual attention to the actions of a suspect. For this report, the data collected (n=351) was during 2020 from January 1st to December 31st. The cases presented in this report met the local DVHRT criteria for high-risk intervention. At no time during the reporting by the DVHRT sites was personal information or any type of identifier submitted to the author. Survivor confidentiality was never compromised.

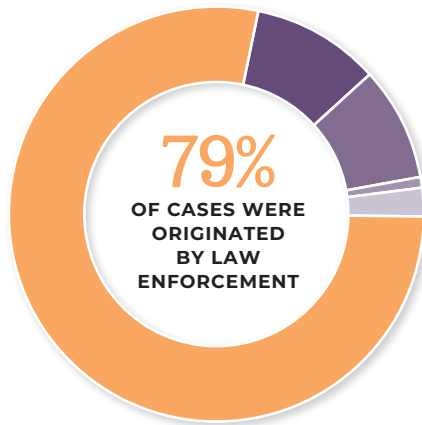
AGE COMPARISON

This data analysis began with analyzing the reported ages at the time of the offense to the police or first responders at the time a high-risk domestic violence incident occurred. The ages were collapsed into age groups to provide a better visual representation as to the comparisons and commonalities with age in these types of investigations. To explain the age range distribution for this funding year, the youngest individual victim in the program was reported to have been a fourteen-year-old female. The oldest reported victim for this funding period was seventy-three years of age at the time of the reported assault to authorities. Conversely, the reported age ranges of offenders for this project spanned from fourteen years of age to seventy-three years of age, and there was no observed statistical significance in the category of age for this report.

DVHRT VICTIM & OFFENDER AGE COMPARISON - 2020



ORIGINS OF DVHRT CASES

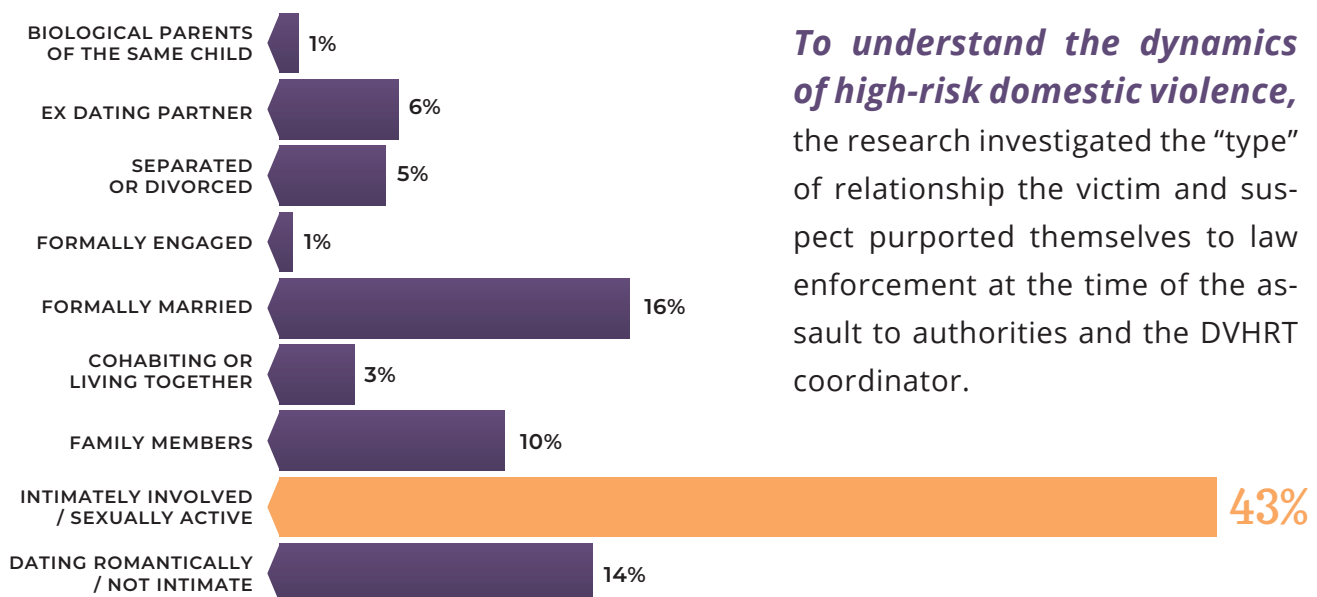


- DISTRICT ATTORNEY'S OFFICE (10%)
- ADVOCACY OR HOTLINE (9%)
- MEDICAL PROFESSIONALS (1%)
- OTHERS OR THIRD PARTY (2%)

The origins of DVHRT cases were analyzed to ascertain where and who had initial contact with a victim. Overwhelmingly, a vast majority of the high-risk cases (79%) were activated by law enforcement using a risk assessment in the field. The remaining cases originated from the district attorney's office (10%); advocacy or hotline (9%) at a victim service provider; medical professionals (1%); and others or third party-initiated cases (2%).

Of those 79% of high-risk cases initiated from law enforcement, the risk assessments that were adopted, trained, and used in the field were the Danger Assessment (DA) and the Danger Assessment for Law-Enforcement (DALE) by Dr. Jacquelyn Campbell, the Maryland Network Lethality Assessment Protocol (LAP), and a hybrid assessment composed of questions to determine high-risk or lethality.

RELATIONSHIP STATUS AT TIME OF ASSAULT

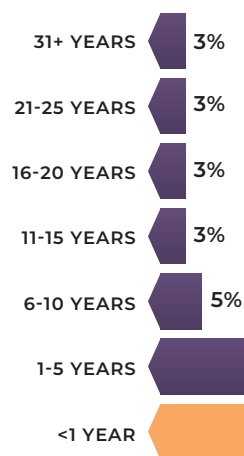


To understand the dynamics of high-risk domestic violence, the research investigated the "type" of relationship the victim and suspect purported themselves to law enforcement at the time of the assault to authorities and the DVHRT coordinator.

The highest reported victims in this category were those who identified as the following:

- » Intimately involved (43%) at the time of the assault.
- » Formally married (16%).
- » Dating Romantically (14%) and not sexually active or intimate at the time of the assault.
- » Separated, divorced or an ex dating partner were between 5-6% of the responses.
- » Family members assaulting one another consisted of 10% of the assaults.
- » The remaining types of relationships reported 1% of biological parents of the same child or formally engaged to one another and 3% roommates or cohabitating together only.

DURATION OF THE RELATIONSHIP AT TIME OF ASSAULT

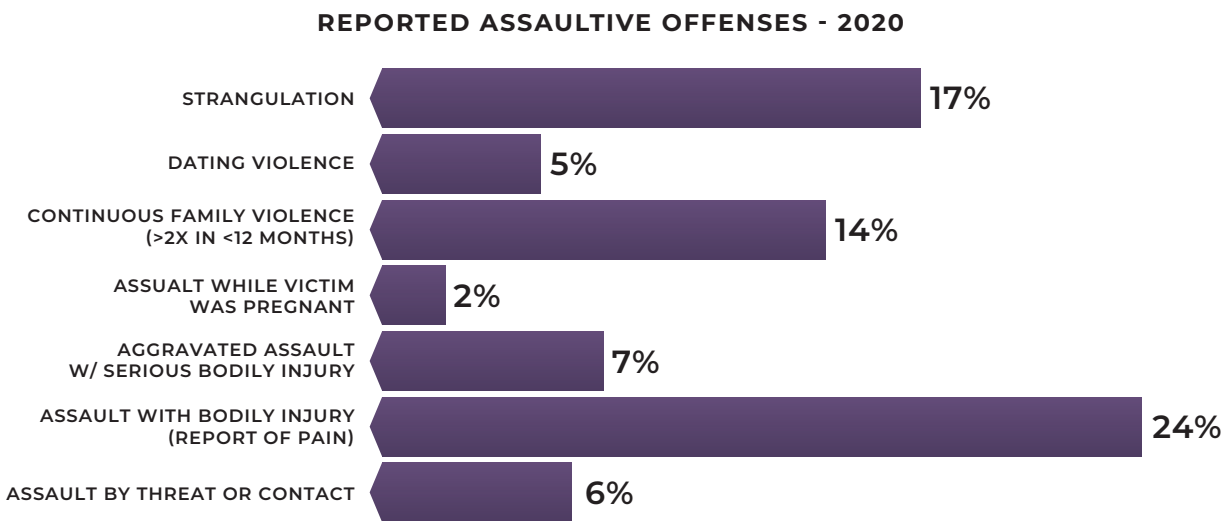


The duration or length of the relationship at the time of the assault is another aspect of the data analyzed. The period that was most consistently reported as to how long a victim and offender were together or involved during the year 2020 was less than one year (46%). The second highest length of time reported was between 1-5 years (22%). The third highest reported was between 6-10 years (5%), while the four remaining categories—11-15 years, 16-20 years, 21-25 years, and 31 years or more—all reported 3% respectively for 2020.

REPORTED DVHRT CRIMINAL OFFENSES

The reported criminal offenses that were accepted to the DVHRT sites in 2020 were coded and analyzed. The largest category was the offense of Assault (59%) causing bodily injury, serious bodily injury, or injury to a victim while pregnant. The offense of strangulation (16%) in which there was a report of impeding the airway or constricting the blood flow on the neck region ranked second. The third highest category was threats and stalking or harassment (6%) related to the offenses of terroristic threats that activated an emergency response or threats to harm another or oneself during a domestic violence incident.

Upon deeper examination, the offense category of assault was stratified to obtain a deeper understanding of the types of assaults that were being committed during 2020. The category of assault was investigated in the following subcategories: Assault by Threat; Assault Causing Bodily Injury; Aggravated Assault Causing Serious Bodily Injury; Assault While the Victim was Pregnant; Continuous Family Violence; Dating Violence; and Strangulation.

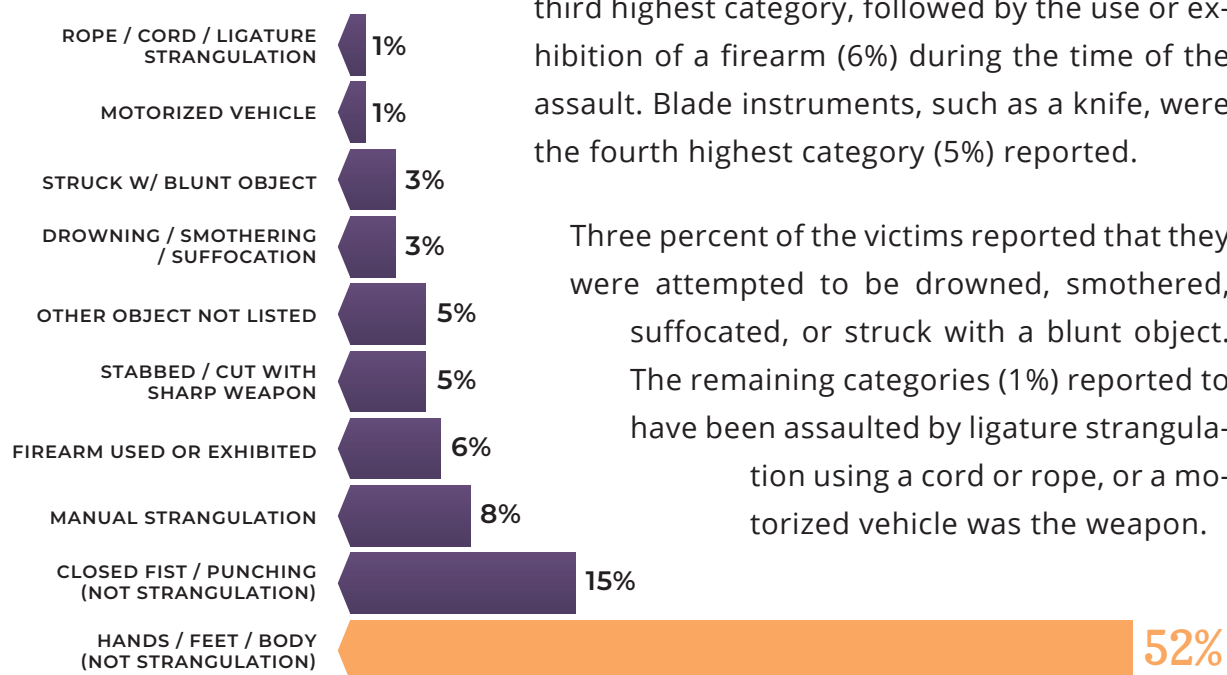


Of the subcategories of Assault, the offense of Assault causing bodily injury (24%) was the highest reported offense. The offense of strangulation (17%) causing the obstruction of blood flow to the brain or impeding the airway was the second-highest assaultive subcategory. The offense of Continuous Family Violence occurring two or more times in less than 12 months was reported at 14% of the reported offenses. Seven percent of the high-risk domestic violence incidents reported aggravated circumstances during the assault. This meant the abused inflicted serious bodily injury, attempted murder, or used or exhibited a firearm during the commission of the assault. There was a 6% report of an assault by threat or contact and 5% reported being in just a dating relationship at the time of the incident to authorities. There was a 2% report of the victims being pregnant during the abuse.

REPORTED TYPES OF WEAPONS USED BY AN OFFENDER

There were various types of weapons used to harm, inflict serious bodily injury, or death to the victims identified as high-risk by the DVHRTs. The most reported type of weapon (52%) was the use of the offender’s hands, feet, or body (not strangulation). The second highest category reported was how the actor used a closed fist

TYPE OF WEAPON USED DURING THE ASSAULT - 2020

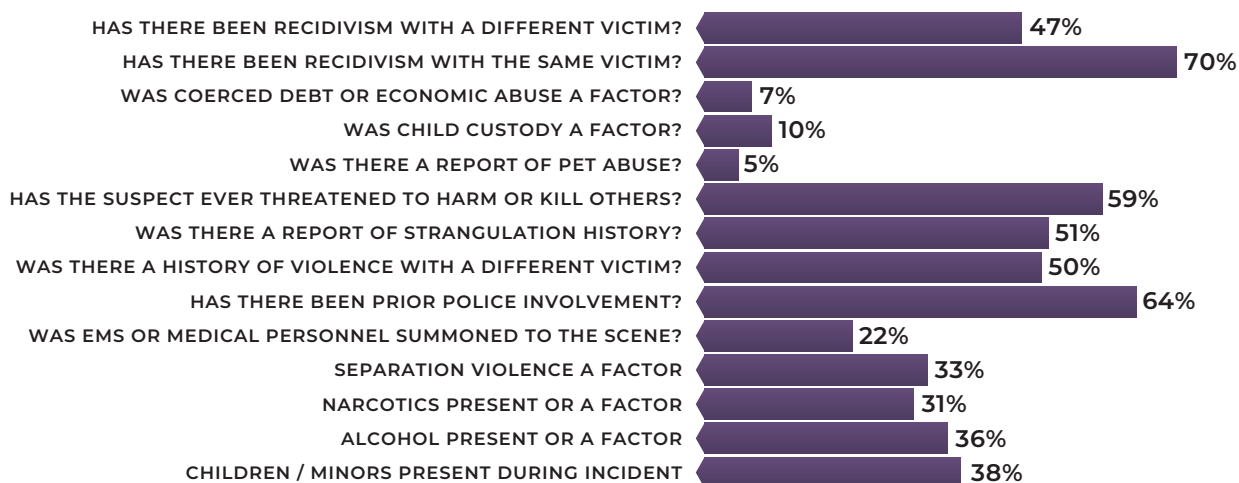


or punched (15%) the victim during the assault. Manual strangulation or “choking” (8%) was the third highest category, followed by the use or exhibition of a firearm (6%) during the time of the assault. Blade instruments, such as a knife, were the fourth highest category (5%) reported.

Three percent of the victims reported that they were attempted to be drowned, smothered, suffocated, or struck with a blunt object. The remaining categories (1%) reported to have been assaulted by ligature strangulation using a cord or rope, or a motorized vehicle was the weapon.

OTHER INDICATORS OF HIGH-RISK DOMESTIC VIOLENCE

During 2020, the DVHRT sites continued to seek out and develop best practices in identifying indicators of high-risk domestic violence. Therefore, additional questions outside of the criminal offenses were asked by first responders in the field.



One of the new categories created during this period was the issue of recidivism with the offender. There was a 70% response rate to victims reporting ongoing recidivism with the offender after the first contact was made with the DVHRT. This new category indicated that even after the offender was told to stay away from the victim by a verbal warning from authorities or by way of a protective order, the suspect did not comply.

Forty-seven percent of victims were able to report that they knew of the actor committing similar crimes with past or different victims. In 64% of the cases, there was a report of prior police involvement with the victims and suspect. Fifty-nine percent of the victims reported that the offender had threatened to harm or kill the victim or someone else or commit suicide. Interestingly, over half (51%) of the victims reported a history of strangulation during the relationship prior to DVHRT involvement. Fifty percent of the victims reported knowledge of violence involving the suspect with another victim.

The remaining questions that were asked were to inquire as to whether children were present during the assault, was alcohol (ethanol) or controlled substances a factor, and was separation violence a contributing factor in the assault. Of the respondents 38% reported that children or minors witnessed the assault, 36% reported that alcohol was a factor, 31% controlled substances, and 33% reported separation violence as a factor. Additional questions asked revealed that of the DVHRT cases, 10% reported violence was due to a child custody dispute, 7% reported suffering some type of coerced or financial debt, and 5% were threatened or suffered some level of pet or companion animal abuse during the incident. Medical services or emergency medical technicians (EMT) were summoned in only 22% of the high-risk incidents.

SUCCESS STORIES FROM THE DVHRT SITES

As a result of these funds, many victims received support and safety at a critical juncture for high risk in their lives and that of their families. Please see below for a snapshot of some of these successes.

Brazos County (2020):

Our coordinator was contacted by a team member of an offender and victim that needed to be staffed immediately. The case was still under investigation but there were major concerns for the victim's safety. The DVHRT was able to work with the courts and get the offender arrested and ultimately held without bond as he was continuing to stalk the victim and their children.

A high-risk offender from the Houston area was arrested with charges in this area and the team was notified of gang affiliation as well as weapon concerns. The DVHRT was able to coordinate services to get the victim to a safe area, provide a forensic exam and ultimately make an arrest in the case.

Fort Bend County (2020):

One of the first cases was not a law enforcement referral but a grand jury indictment. The victim went through significant trauma with the abuser in this case and an abuser from the previous relationship. This case was strangulation that occurred while the victim was recovering from a concussion caused by the defendant. She has permanent vision loss and PTSD from the abuse.

The victim received a two-year protective order against the abuser. She received information about applying for social security disability benefits and CVC and contacted the domestic violence service program. The victim continues to have communication with our DVHRT coordinator. The defendant is currently under monthly county supervision while his criminal case is pending resolution.

Bexar County (2020):

This victim was 8 months pregnant with the abuser's child and out of fear was trying to leave the abuser's apartment. In attempting to leave, she bumped a table that caused the abuser's drink to spill. The abuser pushed the applicant causing her to trip over some tools and fall on her stomach. Her abdomen began cramping and she felt a fluid leaking from her private area.

She went to her doctor due to concern about a possible miscarriage. She told her doctor that the abuser had pushed her causing her to fall on her stomach. The police were contacted and she filed criminal charges for assault of a pregnant person. The victim then requested assistance with a protective order.

The DVHRT coordinator determined that the abuser was currently out on bond for aggravated kidnapping in Bexar County and the Interstate Compact Offender Tracking System (ICOTS) parole. The DVHRT successfully assisted the victim with the protective order application process, as well as contacted the criminal district attorney that was handling the aggravated kidnapping case to make them aware of the new assault of a pregnant person case and the pre-trial officer so that victim's residence could be listed as a restricted location on the offender's GPS.

The DVHRT coordinator contacted the managing parole office since the abuser was also an ICOTS parolee to make them aware of the new violation for possible revocation. The victim was granted a final protective order.

CONCLUSIONS

This program would not have been possible had it not been for the continuous funding and support from the Office of the Attorney General and the Criminal Justice Division of the Office of the Governor.

Emerging patterns that have presented themselves as it relates to high-risk domestic violence in 2020 in the State of Texas are as follows:

- » The highest age range for victims of high-risk domestic violence was in the **21-30-year-old** category.
- » The highest range for suspects committing high-risk domestic violence was in the **31-40-year-old** age range, however, the 21-30 age range was significantly close.
- » **Males were the perpetrator** in 90.4% of the reported offenses to the DVHRTs.
- » **First-responders** were responsible for 79% of the identification of high-risk domestic violence cases in the field.
- » The highest reported type of relationship in the high-risk domestic violence category were those individuals who reported to have been **intimately involved**.
- » The largest category of high-risk domestic violence was found to be in relationships of **less than one year**.
- » Of the reported offenses, the collapsed category of **Assault Causing Bodily Injury** (24%) was the largest reported offense. **Strangulation** was the second-highest category at 17%.

These figures only begin to reveal the factors and characteristics involving those domestic violence cases in which high lethality or attempted murder occur in the State of Texas. The TCFV DVHRT policy coordinator's role in this program identifies jurisdictions with the potential to implement and sustain a DVHRT. The policy coordinator provides

both onsite and remote training on best practices in identifying high risk domestic violence cases. The policy coordinator assists with implementing risk assessments for law enforcement, creating a coordinated response with existing resources, and while emphasizing a victim-centered approach at the nexus of the training.

As TCFV and the DVHRT sites move forward in 2021, there is consideration of additional offenses from the Texas Legislature. Moreover, a higher level of analysis will be considered when reviewing reportable offenses, strangulation-related crimes, bond amounts, access to firearms during an active protective order(s), and final trial dispositions.

TEXAS COUNCIL ON FAMILY VIOLENCE PROMOTES SAFE AND
HEALTHY RELATIONSHIPS BY SUPPORTING SERVICE PROVIDERS,
FACILITATING STRATEGIC PREVENTION EFFORTS, AND CREATING
OPPORTUNITIES FOR FREEDOM FROM DOMESTIC VIOLENCE.

