Domestic Violence Homicide in Oklahoma

Oklahoma Domestic Violence Fatality Review Board
Annual Report 2009

The 2009 Annual Report is condensed this year in an effort to reduce costs of publication as well as to simply focus on the recommendations of the Domestic Violence Fatality Review Board (DVFRB). The recommendations are based on the review of deaths that occur in Oklahoma as a result of domestic violence. The primary identified needs among all systems emphasizes education and training, as well as awareness and prevention efforts in order to ultimately prevent fatalities associated with domestic violence in the state of Oklahoma. Thank you for your time and attention to this important issue.

Fast Facts:
- There were 80 domestic violence homicide cases in 2009, resulting in the death of 87 victims and 15 perpetrators
- 54% of victims are female
- 71% of perpetrators are male
- 52% were current or former intimate partners
- 43% of intimate partner homicide victims were in the process of leaving the perpetrator
- 15% of intimate partner homicide relationships began when the victim was 17 or younger

Recommendations

Oklahoma Domestic Violence Fatality Review Board

- Fully fund legislated mandates of the DVFRB with state appropriations.

Courts
- Train judges on how to utilize bench cards on protective order cases to assist them in recognizing red flag indicators and potential danger.
- Mandate continuing domestic violence training for all judges.

Department of Corrections:
- Train Parole and Probation (P&P) officers on usage of domestic violence danger assessment tools and protocols to assess referral needs for perpetrators and their victims.
- Educate P&P officers of available referral options.

District Attorneys
- Victim-witness coordinators should work more closely with surviving families in homicide cases, especially, in helping them to understand the trial process.

Domestic Violence Advocates
- Research new venues for providing effective public awareness of resources available (i.e., SAFELINE number) for those who witness domestic violence or stalking, but are unsure who to report to or how to help victim.
- Oklahoma Coalition Against Domestic Violence and Sexual Assault (OCADVSA) should support local victim service providers in community outreach efforts, including the faith community response to victims and perpetrators, domestic violence in the work place, and natural listeners.
Recommendations

Education
- Mandate healthy relationship education in intermediate and middle schools and provide comprehensive education programs on teen dating violence.
- Educate teachers and counselors about repeated behavioral problems that may indicate family violence at home or dating relationship abuse.

Health Care
- Mandate domestic violence training, including recognition, reporting and appropriate referral for treatment, for health care providers, specifically physicians, dentists, physician assistants, nurse practitioners, nurses, emergency medical technicians and paramedics, medical assistants and medical social workers.
- All healthcare providers should be familiar with and implement the current National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings. (http://www.endabuse.org/userfiles/file/Consensus.pdf)

Law Enforcement
- Mandate that CLEET formulate and establish an eight hour, mandatory, continuing education curriculum on domestic violence and stalking for all certifying full-time and reserve peace officers. Mandate that all currently certified full-time and reserve peace officers are to complete the training within a four-year time frame. The training should include, at a minimum, the importance of reporting domestic violence incidents, determining the predominant aggressor, evidence based investigation of domestic violence and stalking, and lethality assessment.

Legal
- Include law school courses on adult and child victims of family violence to assist practitioners going into divorce, family and juvenile law and require continuing legal education.

Mental Health & Substance Abuse Providers
- Train providers and advocates to refer children and adult witnesses of domestic violence to appropriate trauma counseling.

All Systems
- All systems should be involved to some degree in the prevention of domestic violence before it occurs (e.g., healthy relationship education in classrooms, anticipatory guidance for health care providers, services to young children impacted by family violence).
**DVFRB Activities**

**Presentations/Training**


♦ The DVFRB partnered with the Western District U.S. Attorney’s Office and the Oklahoma Office of Attorney General to conduct five trainings on the federal firearm restrictions. Board members Susan Krug and Tamatha Mosier and staff member Brandi Woods-Littlejohn participated in these trainings.

♦ Gail Stricklin presented continuing legal education to the Family Law Section's Annual family law seminar in September, 2009 (with Donna Mathews of Domestic Violence Intervention Services of Tulsa).

♦ The Office of Attorney General (OAG) seeks VAWA funds and provides dedicated staff to coordinate an annual Partnership Conference focused on domestic violence, sexual violence and stalking every year. Board entities that are partners for this conference include the District Attorneys Council, OCADVSA, Oklahoma State Department of Health (OSDH), and the DVFRB.

♦ Staff member Brandi Woods-Littlejohn presented on the DVFRB in six classes for the Crime Victim and Survivor Services division at Oklahoma State University-Oklahoma City.

**Other Activities**

♦ The DVFRB sent two letters to federal and state probation offices recommending increased communication with local law enforcement when violent offenders are relocated into their communities.

♦ The DVFRB sent one letter to the Child Abuse Training Coordination Council requesting they explore the use of Multi-disciplinary Teams (MDT) and Child Abuse Centers (CAC) as a contact point for children who witness domestic violence homicides.

♦ The DVFRB consulted with the Oklahoma Association of Chiefs of Police and the Oklahoma Sheriffs Association to send an email to law enforcement agencies reminding them to document in their reports when SAFELINE cards are provided to victims.

♦ The DVFRB met and jointly reviewed cases twice with the Child Death Review Board.

♦ Susan Krug and the OAG Victim Services Unit hosted and participated in the advisory committees meetings for the Native American Social Services, Law Enforcement, and the Lethality Assessment NIJ Research Project.

♦ Susan Krug attended Project Safe Neighborhood Meetings.

♦ Susan Krug and Gail Stricklin served on committee to revise model protective order forms.

♦ Susan Krug, Janet Wilson, Sheryll Brown and Marcia Smith attended the Summit on Violence Against Native American Women.

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**Fast Facts—Intimate Partner Red Flags:**

- 28% of perpetrators had been violent toward the victim in a public setting where others witnessed the violence
- 16% of perpetrators told somebody besides the victim that they were going to kill the victim
- 38% of victims had children with the perpetrator and in one-third of those cases, custody was an issue between the victim and perpetrator
- 43% of victims had children with a former partner
- 32% of intimate partner homicides are murder/suicides
Gail Stricklin worked with legislators to support the HB 1739 which emphasizes the safety of the victim and children in title 43 matters, providing for a rebuttable presumption, and safe visitation practices. This law evolved from DVFRB case reviews and was endorsed by the board.

As a result of DVFRB data analysis and a lethality assessment subcommittee created by the DVFRB, Janet Wilson (OUHSC) and Sheryll Brown (OSDH) received and began implementation of the Police Use of Lethality Assessments During Domestic Violence Calls: An Experimental Evaluation Grant, sponsored by National Institute of Justice, in partnership with Johns Hopkins University and Arizona State University.

Martina Jelley continues to participate in the Screen to Save educational program for domestic violence training for health care professionals and presented at grand rounds at the University of Oklahoma-Tulsa and presented at the Indian Hospital in Jay, OK.

Martina Jelley continued teaching about caring for victims of violence and abuse in the 4th year medical school ambulatory medicine course at the University of Oklahoma, School of Community Medicine.

Martina Jelley attended the 5th National Conference on Health and Domestic Violence in New Orleans in October and the Academy on Violence and Abuse Biennial Scientific Assembly in Minneapolis in April.

Sheriff Mike Booth established a Violence Against Women Program by creating a VAWA Deputy position. The VAWA Deputy attended and continues to attend specialized training in domestic violence and pass that on to the rest of the Sheriff’s office through periodic training sessions.

The Pottawatomie County Sheriff’s Office, through the VAWA deputy has begun to develop, organize and implement a CCR, Community Coordinated Response team, for the purpose of implementing a community prevention and intervention program.

The OCADVSA incorporated DVFRB recommendations into the OCADVSA State Office Plan of Work and the OCADVSA Certified Domestic and Sexual Violence Response Professional (CDSVRP) training curriculum.

The OCADVSA obtained Recovery Act funding for a Family and Friends media campaign that is currently being developed and scheduled to air by Feb 2011.

The OCADVSA purchased and distributed materials marketing the Oklahoma SAFELINE.

The OCADVSA served on the Native American Summit Planning Committee, trained facilitators in responding to individuals with disabilities, and provided American Sign Language interpreters at the Summit.

The OCADVSA incorporated Battered Immigrant Women training into the OCADVSA CDSVRP training curriculum; sponsored 3 members of the Battered Immigrant Women Summit team to attend a national training summit; provided workshops on working with immigrant victims at the OCADVSA Annual Conference.

Fast Facts:
- 57% of the homicides were committed with a firearm
- 57% of cases are witnessed by another person
- 30% are witnessed by children
- A Victim Protection Order existed in 20% of the cases, 24% of IP cases

*All statistics are based on the 321 cases entered in the DVFRB database at the time of analysis.*

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