upon further examination

2019 - 2020 Report of the Connecticut Domestic Violence Fatality Review Task Force



Connecticut Coalition Against Domestic Violence

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This report is dedicated to survivors of intimate partner violence and victims of fatal intimate partner violence, including the family and friends left behind.

This report is a product of the Connecticut Domestic Violence Fatality Review Task Force, a collaboration of private, public and nonprofit organizations.

Written by Connecticut Coalition Against Domestic Violence Glastonbury, CT

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INTRODUCTION

For twenty years, the Connecticut Domestic Violence Fatality Review Task Force ("task force") has worked to impact policy and practice with the goal of preventing future intimate partner homicides. The task force brings together key stakeholders in the areas of domestic violence advocacy, law enforcement, judicial proceedings and response, healthcare, child protection, and offender services to review intimate partner homicides and nearfatalities, conducting over 100 such reviews since its inception in 2000. Their collective knowledge and expertise lend themselves to meaningful assessments of key points of intimate prevention and/or intervention that could be strengthened within the state's domestic violence service and response system.

During the 2019 - 2020 review period, the task force reviewed thirteen (13) cases, including nine (9) homicides, two (2) near-fatal cases, and two (2) murder-suicides. Of these cases, seven (7) involved firearms, three (3) involved strangulation, and three (3) involved knives or edged weapons. There were a total of nine (9) female victims and four (4) male victims.

Nearly half (6) of the cases involved victims who had recently or at the time of the incident divorced, separated from, or attempted to leave the offender (whether married or dating). It is important to note that, for two reasons, the task force only reviews fully adjudicated cases. First, the task force is an independent body and our reviews cannot disrupt an ongoing investigation or prosecution. Second, the task force seeks to have a complete picture, which includes both the prosecution and disposition of a case. The cases included in this particular review cycle occurred between the years of 2012 and 2016.

Since 2000, Connecticut has averaged approximately 14 intimate partner homicides annually. Two of the most common trends that have emerged over the years are the presence of addiction/mental illness in the relationship and recent attempts by the victim to end the relationship. A new trend seen over the last two years (2018 - 2019) is the increased use of edged weapons or knives in intimate partner homicides. As we explore these common findings and the recommendations of the task force, we hope that this report will continue to serve as a reminder about the substantial consequences of intimate partner violence and provide guidance for key systems to strengthen victim safety and offender accountability.

OUR COMMITMENT TO RACIAL EQUITY & JUSTICE

While domestic violence is an issue that impacts people of all backgrounds, we know that communities of color report experiencing intimate partner violence during their lifetime at higher rates when compared to White individuals.¹ Survivors from marginalized communities, particularly communities of color, face profound barriers in accessing the culturally-relevant advocacy, services and resources they need to be safe. Biases, whether implicit or explicit, impact how individuals experience violence and how systems respond to their needs. Both CCADV and the Connecticut Domestic Violence Fatality Review Task Force are committed to uplifting the voices and experiences of survivors of color to understand how we can strengthen our response and make services to these survivors more accessible.

To that end, over the coming year CCADV will...

- Ensure that the task force reviews each case through a racial equity lens to identify specific barriers that intimate partner homicide or near-fatal victims of color experience and how those barriers impact the ability of that victim to be safe.
- Through the task force, review all intimate partner homicides since 2000 to identify the race of each victim and determine any resulting trends.
- Establish a working group with CCADV member organizations to develop a strategic plan to improve bilingual/multicultural advocacy and administrative leadership, as well as to assess our advocacy capabilities and identify strategies for sustainable improvements in how we serve families from communities of color whether residing in shelter or in the community.

homicic

annual

Mission

The Connecticut Domestic Violence Fatality Review Task Force seeks to prevent future deaths by conducting multi-disciplinary, systemic examinations of intimate partner fatalities and near-fatalities in a confidential, reflective, and culturally-sensitive environment that will lead to recommendations for positive social and systems change.

Purpose of Report

The purpose of the report is to:

- Promote safety and justice for victims and accountability for offenders
- Give a voice to the victims and their loved ones so that we may learn from their experiences
- Raise awareness and promote critical thinking about the problem of domestic violence
- Serve as a practical tool to inspire and drive change in our service system and in our community

Objectives

The task force's objectives are to:

- Enhance the safety of victims and accountability of offenders
- Identify systemic gaps and barriers to service
- Implement coordinated community responses
- Influence public policy related to prevention and intervention

Definitions

The homicides that are considered "intimate partner homicides" by the task force and are included in the statistics throughout the report are those individuals who are killed by a current or former intimate partner, such as a spouse, dating partner or someone with whom they shared a child in common.

For purposes of this task force, near-fatalities are defined as those incidents of intimate partner violence resulting in the "serious physical injury" of the victim. "Serious physical injury" is defined in Connecticut General Statutes § 53a-3(4) as a "physical injury which creates a substantial risk of death, or which causes serious disfigurement, serious impairment of health or serious loss or impairment of the function of any bodily organ."

The homicide and near-fatality statistics found in the report do not include bystanders, such as other family members who may also have been killed or injured, nor do they include perpetrators of intimate partner violence who later take their own lives. However, these deaths are meaningful and discussed as part of the review process.

Methodology

The task force identifies fatalities and near-fatalities to review which resulted in murder-suicides or which have been adjudicated. Once the cases are selected, the task force conducts a detailed review of all available public records and other documentation related to these incidents and, when possible, meets with family, friends and professionals who came into contact with the victim.

By focusing on the principal markers of each case, the task force is able to:

- Understand how and when the offender's behaviors escalated;
- Examine the risk factors as they pertain to both the offender and the victim;
- Review the community's involvement in the case; and,
- Develop recommendations to community stakeholders.

Viewing the cases through a lens of preventive accountability, over the past twenty years the task force has developed nearly 50 recommendations designed to strengthen a coordinated community response to survivors of intimate partner violence.

HONORING VICTIMS

The following women and men lost their lives as a result of intimate partner violence between 2018 and 2019. These are the last two available years of homicide data compiled by the State Police since the task force released its 2017 - 2018 report.

2018 Intimate Partner Homicides

Antonietta SuppaMay 11, 2018North HavenTahnesia WattsMay 12, 2018WaterburyMichelle BarrettJune 3, 2018SouthingtonEden ClaxtonJune 11, 2018StamfordSolita BillupsAugust 28, 2018WaterburyLoretta ConnersSeptember 6, 2018WestbrookDanielle FascioccoSeptember 8, 2018MiddletownAngeanett Martinez-AcevedoOctober 2, 2018WillimanticRobert PariseOctober 4, 2018New LondonPatricia WayNovember 24, 2018WaterburyOlga LopezNovember 27, 2018Stamford	n n
Olga Lopez•November 27, 2018•StamfordEmily Todd•December 8, 2018•BridgeportCorina Zukowski•December 10, 2018•East Lyme	

2019 Intimate Partner Homicides

Catherine Taylor	•	February 3, 2019	•	Fairfield
,		,		
Alice Figueroa	•	February 4, 2019	•	New Britain
Gadiel Perez	•	March 18 2019	•	Rocky Hill
Thomas Conley	٠	March 20, 2019	•	Sherman
Michael Ciorra	٠	April 15, 2019	•	New Fairfield
Nathalie Feliciano	•	April 29, 2019	•	Waterbury
Jennifer Dulos	•	May 24, 2019	•	New Canaan
Dathan Gray	٠	July 27, 2019	•	Bridgeport
Perrie Mason	•	August 16, 2019	•	Meriden
Elizabeth Taylor	•	August 24, 2019	•	Bethel
Monica Dominguez	٠	September 11, 2019	•	Cheshire
Janet Avalo-Alvarez	•	November 12, 2019	•	Waterbury
LaRhonda Jones	•	November 21, 2019	•	Waterbury
Brandia Irvin	•	November 30, 2019	•	Stonington
Christine Holloway	•	December 2, 2019	٠	Ansonia

COMMON FINDINGS

During the review cycle, the task force reviewed post-adjudicated cases that spanned a timeframe between 2012 and 2016. Within these cases were certain common findings that have been highlighted in past fatality review reports. Among them are unmet or undiagnosed mental health concerns and substance abuse/addiction. Of the 13 cases reviewed, 11 indicated evidence of a history of mental illness involving the victim or the offender. There is a direct correlation between intimate partner domestic violence and mental health consequences for victims, which include posttraumatic stress disorders (PTSD), depression, and suicidality.² Children who witness intimate partner violence also experience a wide range of physical, mental health, and social consequences.³ One or more children were present or witnessed the violence that preceded the homicide in four of the cases reviewed.

While firearms remain the single most commonly used weapon in intimate partner homicides in Connecticut (39%), there has been a notable increase in the use of knives or edged weapons in recent years (6 in 2019 and 7 in 2018 compared to 1 in 2017, 3 in 2016, 1 in 2015 and 4 in 2014).⁴ As cases are adjudicated, the task force will examine the circumstances found in this most recent trend.

In nearly half the cases reviewed, the victim told the offender they were ending the relationship or starting divorce proceedings at the time of the incident or recently before the incident. Separation has long been identified as a risk factor for lethality and injury in intimate partner relationships where abuse occurs. The Lethality Assessment Program (LAP), developed by Dr. Jacquelyn Campbell also identified this risk factor in her study of 2500 intimate partner homicides. The screening tool she developed for first responders contains a question on separation or attempted separation as one of the eleven screening questions. In Connecticut, 100% of law enforcement voluntarily engage in the Lethality Assessment Program. In the 2020 Lethality Assessment Report, 36% of the victims answered yes to the separated or attempted to separate question (2018 - 2019 n= 13,710).⁵



Connecticut LAP 11 Risk Factors and Rate of Positive Responses (2018 - 2019)

RECOMMENDATIONS

In reviewing intimate partner homicides and near-fatal incidents, one of the primary goals of the task force is to identify potential points of prevention and intervention for individuals experiencing or using abusive behaviors based on the common findings across cases. Given the continued common finding that these incidents often follow victims' attempts to divorce, separate from, or break-up with their abuser, it is critical to partner with systems in which a victim may come into contact when attempting to leave. The heightened risk that victims face when attempting to end an abusive relationship should be an omnipresent factor for stakeholders within the divorce and child custody systems. Family law attorneys should be able to identify abusive behaviors, particularly escalating behaviors that may indicate a likelihood of fatal violence. And while the task force has learned across reviews that some victims had acknowledged to their family and friends that their relationship was unhealthy, they never-the-less believed that the abuser's actions would not escalate to homicide. While this is an understandable perspective of a person who has likely lived with the abusive behavior for a significant period of time, it should not diminish the role of a family law attorney to discuss the escalating behaviors and risk with their client and provide domestic violence advocacy resources.

In addition to addressing intervention points for victims, it is also critical that systems working with abusers have the knowledge and tools to positively impact the behaviors and choices of these individuals. Research has soundly pointed to the intergenerational nature of domestic violence – offenders often witnessed and/or experienced abuse as a child.⁶ We also know that while not a cause of domestic violence, addiction can certainly exacerbate abusive behavior and that, "as with criminality in general, there is a high correlation between alcohol and substance abuse and domestic violence for abusers."⁷ Abusers need access to the supports and services that will allow them to recover from their own experiences with trauma so that they can make better choices in their interpersonal relationships. Some survivors, particularly those who choose to remain in a relationship with their abuser, express a desire for more effective treatment and support options for abusers that will allow their family to remain intact safely.

To that end, the task force makes the following recommendations:

1) Work with criminal justice/family court partners to increase education and awareness for victims and offenders:

1.1 Work with the Judicial Branch to ensure that self-help divorce tools provided by the Branch include warning signs of domestic violence and escalating behaviors, as well as contact information for the statewide domestic violence advocacy services provided by CT Safe Connect and CCADV's 18 member organizations.

1.2 Enhance partnerships with private family attorneys and bar associations to strengthen their understanding of domestic violence and escalating behaviors so that they may identify heightened risk experienced by their clients and connect them to domestic violence advocacy services.

1.3 Increase training and tools provided to law enforcement statewide regarding the statutory requirement that they provide each victim of crime with the contact information for the Judicial Branch Office of Victim Services, which can advise them of their rights as crime victims, how to access advocacy services including those offered to domestic violence victims through CT Safe Connect and CCADV's 18 member organizations, and the state's victim compensation program.

1.4 Work with the CT Department of Correction to bolster support options for offenders including education and counseling related to domestic violence and treatment programs for addiction and mental illness.

2) Work with various state and community-based stakeholders to improve mental health, addiction, and traumarelated services:

2.1 Leverage CCADV's Health Professional Outreach Project to identify additional opportunities to strengthen collaborations between Connecticut's Department of Mental Health and Addiction Services, local service providers, and domestic violence member organizations.

2.2 Enhance the awareness of the interventions for children who experience intimate partner violence and trauma between service providers, stakeholders, law enforcement, and domestic violence member organizations.

2.3 Work in partnership with Judicial Branch Court Support Services Division Probation Services to expand probation officers' awareness of the correlation between substance abuse and domestic violence while supervising non-domestic violence clients with a history of substance abuse.

IPV HOMICIDE DATA 2000 - 2019

278 INTIMATE PARTNER HOMICIDES

WOMEN VICTIM 240 OFFENDER 29

	/ \	/ \	/ \	/ \	/ \	/ \	/ \		
Π	Τ	Π	Τ	Τ	Τ	Τ	Τ	Τ	

MEN 38 VICTIM 249 OFFENDER

86%

OF IPV HOMICIDE VICTIMS IN CONNECTICUT ARE WOMEN







CONNECTICUT INTIMATE PARTNER HOMICIDE TRENDS:

- FEMALE VICTIMS are most often MARRIED to MALE OFFENDERS
- FIREARMS are the single MOST COMMONLY USED WEAPON
- Victims between the AGES OF 25 & 44 make up NEARLY 1/2 of all victims

All data on pages 6-7 include all intimate partner homicides recorded by Connecticut Department of Emergency Services & Public Protection/Connecticut State Police between 2000 and 2019.

IPV HOMICIDE MAP 2000 - 2019



10

2000 (15)

2001 (13)

2002 (14)

2003(16)

2004 (21)

2005 (13)

2006 (17)

2007 (12)

2008 (13)

2009 (12)

2010(17)

2011 (15)

2012(11)

2013(12)

2014 (13)

2019 (15)

2016(12)

2017 (10)

2018(18)

2015(9)

HOMICIDES

ANNUALLY

PRIOR REPORT RECOMMENDATION STATUS

The 2017 - 2018 task force report recommended the development of an investigative toolkit for law enforcement to assist in the process of investigating these unique cases with a focus on prevention, which coincided with the desire of the CT Division of Criminal Justice to develop a standard investigative resource:

The task force, in partnership with law enforcement, the CT Division of Criminal Justice, and the Chief States Attorney's Office, will develop the Intimate Partner Homicide Investigative Toolkit to encompass the combined experience and best investigative techniques specific to Connecticut. The toolkit will serve as a guide and provide adaptable forms, checklists, and examples for law enforcement agencies to incorporate into their established protocols.

STATUS: The Intimate Partner Domestic Violence Homicide Investigative Toolkit has been completed and law enforcement and state's attorneys are being trained in the use of the toolkit. The toolkit, developed in partnership with law enforcement, the CT Division of Criminal Justice, various victim services and advocacy agencies, and medical professionals, serves as a guide and provides adaptable forms, checklists, and examples for law enforcement agencies to incorporate into their own established protocols. We recognize few law enforcement agencies have dedicated homicide divisions with enhanced processes developed over years of experience. Because these cases occur across the state in communities with varying resources, this investigative toolkit developed with law enforcement, for law enforcement will aid all agencies tasked with investigating these complex cases as well as supplement non-intimate partner serious injury or homicide investigations.

Each chapter is specific to a stage within a typical investigation (i.e. Initial Response, Investigations, Scene Processing, etc.). Each chapter contains at least one introductory document explaining what will be contained in that specific folder. Adaptable forms and checklists associated with the specific investigative stage are also included in



each chapter. Some of these forms are a culmination of several forms submitted by participating agencies combined into one Master Form, and some of the forms, such as the Domestic Violence Lethality Screen for First Responders, will be original stand-alone forms.

The toolkit is designed to be dynamic and adaptable to changes in policies and procedures as well as investigative and crime scene processing techniques. This toolkit will also be flexible to address current social and criminal trends as well as technological advances to ensure the proper information is being collected to aid in both the investigation, as well as prevention of such incidents. The task force will be responsible for submitting updates yearly to the Intimate Partner Domestic Violence Homicide Investigative Toolkit Task Force for approval and incorporation.

ENDNOTES

¹ Smith, S.G., et. al. (2017) The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 – 2012 State Report. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

² Warshaw, C., Brashler, P., & Gil, J. (2009). "Mental health consequences of intimate partner violence." In C. Mitchell & D. Anglin (Eds.), *Intimate Partner Violence: A Health-Based Perspective*. New York: Oxford University Press. p. 149.

³ Gilbert DG, Connolly JJ. Personality, social skills, and psychopathology. New York: Plenum Press; 1991.

⁴ Connecticut Department of Emergency Services and Public Protection. *Family Violence Homicide Report 2000 – 2019*. Available at https://portal.ct.gov/DESPP/Division-of-State-Police/Crimes-Analysis-Unit/Crimes-Analysis-Unit.

⁵ Connecticut Coalition Against Domestic Violence. 2020 Lethality Assessment Program Report. Available at http://www. ctcadv.org/files/8316/0496/0871/LAP2018-2019Update.pdf.

⁶ Murrell, A., et al. (2007). "Characteristics of domestic violence offenders: Associations with childhood exposure to violence." *Journal of Family Violence*. 22:523-532. Available at https://www.researchgate.net/publication/225746574.

⁷ U.S. Department of Justice, Office of Justice Programs, National Institute of Justice. (2009). *Practical implications of current domestic violence research for law enforcement, prosecutors and judges.* Available at https://www.ncjrs.gov/pdffiles1/nij/225722.pdf.

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To the members of the task force, we are eternally grateful for your continued dedication and commitment to preventing future deaths.

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