

New Orleans Domestic Abuse Fatality Review

2020 Incidents



October 2023

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BACKGROUND

Capturing the most extreme outcomes, domestic fatalities make up only a small fraction of all domestic abuse incidents. However, the impact that domestic fatalities have on families and communities is devastating. Starting in 2019, the New Orleans Health Department's (NOHD) Domestic Violence & Sexual Assault Program (DV & SA Program) began reviewing domestic fatality characteristics to contextualize and document this issue in Orleans Parish. The first New Orleans Domestic Violence Fatality Report was published in 2020 and documented incidents that occurred from 2012-2018.

In 2021 NOHD's DV & SA Program began creating a fatality review team with representation from over 20 community, government, and criminal justice organizations to continue analyzing domestic fatalities in New Orleans, identify gaps in systemic interventions, and determine recommendations for preventing incidents. In 2022, the New Orleans City Council and the Mayor of New Orleans established a formal Domestic Abuse Fatality Review Team with the passage of an ordinance to ordain [Article XIV of Chapter 82 of the Code of the City of New Orleans](#) and designated NOHD to coordinate this effort.

In January 2023, the Louisiana Domestic Abuse Fatality Review Panel voted to include the New Orleans Domestic Abuse Fatality Review Team ("NODAFR" or "the team") as a local domestic abuse fatality review panel for the state of Louisiana per [Louisiana Revised Statute 40:2024.1-6](#).

DEFINITIONS

Domestic Abuse Fatality Review (DAFR)¹ is a process that works to identify and characterize the scope and nature of domestic abuse fatalities through a comprehensive and multidisciplinary review of domestic abuse fatalities at the state and local levels in order to take action to prevent future fatalities.

Domestic abuse is physical or sexual abuse and any offense against the person, physical or non-physical, as defined in the Louisiana Criminal Code, except negligent injury and defamation, committed by one family member, household member, or dating partner against another.

The NODAFR categorized domestic abuse fatalities (or "domestic fatalities") into two categories: family violence and intimate partner violence.

A **domestic abuse fatality rooted in family violence**² ("family violence fatality" or "FV fatality") is when a victim was having relationship problems with a family member (other than an intimate partner) that appear to have contributed to the death. Family members can include parents and step-parents, children and step-children, siblings, grandparents, and extended family. While some FV fatalities may have been rooted in coercive control or abuse committed by one family member, not all FV fatalities are rooted in histories of abuse or violence. Some examples of precursors to FV fatalities may include a family member's history of untreated or unmanaged SMI or substance use, historical disagreements or altercations, or financial issues. Although many FV incidents do not follow typical patterns associated with intimate partner violence, it is important to review these incidents to better understand what the patterns of family violence are and how to prevent FV fatality incidents from occurring in the future.

Intimate partner violence³ includes physical violence, sexual violence, stalking and psychological aggression (including coercive tactics) by a current or former intimate partner. Intimate partners can include spouses, boyfriends/girlfriends, dating partners, or ongoing sexual partners. Intimate partner violence occurs within the context of **coercive control**, which describes the purposeful and systematic pattern of behaviors a partner who is abusive uses with the goal of maintaining control and power over their intimate partner. Those who cause abuse in intimate relationships often do so because they believe it is their right and entitlement to maintain the power and control in their relationship.

DEFINITIONS

Domestic abuse fatalities rooted in intimate partner violence ("intimate partner violence fatality" or "IPV fatality") include:

- Homicides in which the victim was a current or former intimate partner of the suspect.
- Homicides in which the victim was someone other than the suspect's intimate partner, but which occur in the context of domestic abuse or in the context of a suspect attempting to kill an intimate partner (i.e. friend, family member, new intimate partner, law enforcement).
- Homicides occurring as an extension of or in response to ongoing intimate partner abuse.
- Suicides, other than the abuser's, which may be a response to a current or past experience with domestic abuse.

Victim² is defined as the person who is the victim of the homicide.

Suspect² is the person who is the suspected perpetrator of the homicide.



OVERVIEW

Scope

The NODAFR reviewed all identified domestic fatalities that occurred in Orleans Parish within the 2020 calendar year.

Statutory Authority

The NODAFR was established by the New Orleans Health Department under the authorization of Article XIV of Chapter 82 of the Code of the City of New Orleans. Additionally, the Louisiana Domestic Abuse Fatality Review Panel voted to include the NODAFR as a local domestic abuse fatality review panel in January 2023.

Mission

The mission of the NODAFR is to conduct detailed reviews of domestic fatalities in a multidisciplinary, confidential, and culturally sensitive manner, using the information learned to develop comprehensive recommendations for improved system and social structural responses with the goals of enhancing safety for survivors and the community, while holding offenders accountable.

Objectives

- Promote cooperation, communication and coordination among agencies involved in responding to domestic abuse.
- Identify systemic gaps and barriers to services and advocate for policy change to increase equitable and safe outcomes.
- Increase community awareness by educating the public, service providers, and policymakers about family and intimate partner-related fatalities.
- Initiate strategies for intervention and prevention of family and intimate partner violence.

Leadership Team

The leadership team is responsible for acting as spokespeople for the NODAFR, coordinating and facilitating team meetings, recording and maintaining records of all team activities, and leading report production. NOHD assumes leadership positions to ensure continuity and sustainability of the project as designated in Article XIV of Chapter 82 of the Code of the City of New Orleans.

TEAM MEMBERS

Team Members included both agency representatives and independent contributors who had expertise in working in the field of domestic abuse, with most members specializing in intimate partner violence. Team members were required to complete mandatory introductory NODAFR training and sign confidentiality agreements in order to participate in review sessions.

- Arin's Nesting Place
- Beyond Harm
- Catholic Charities
- Julie Ford, PhD Student, Tulane University
- Louisiana Coalition Against Domestic Violence
- Louisiana Department of Children and Family Services
- Louisiana Department of Health
- Louisiana Department of Public Safety and Corrections
- New Orleans Emergency Medical Services
- New Orleans Family Justice Center
- New Orleans Health Department
- New Orleans Office of Criminal Justice Coordination
- New Orleans Office of Gun Violence Prevention
- Orleans Parish Communications District
- Orleans Parish Coroner's Office
- Orleans Parish Criminal District Court
- Orleans Parish District Attorney's Office
- Orleans Parish Public Defender's Office
- Orleans Parish Sheriff's Office
- Rae Taylor, PhD, Director of the Gender Based Violence Research Project, Loyola University New Orleans
- Silence is Violence
- Southeast Louisiana Legal Services
- Tulane University's Domestic Violence Clinic
- University Medical Center
- Women With a Vision

CASE REVIEW PROCESS

Criteria	Domestic abuse fatalities rooted in family violence (FV) and intimate partner violence (IPV) as defined on pages 2 and 3 are eligible for NODAFR review.
Selection	Based upon the criteria above, NOHD identified ten domestic abuse fatalities that occurred in Orleans Parish in 2020. These fatalities were first flagged as domestic in nature by the Louisiana Coalition Against Domestic Violence (LCADV) and New Orleans Police Department (NOPD).
Abstraction	NOHD reviewed police reports details, media reports, civil and criminal court records, and the LCADV 2020 domestic abuse fatality list to compile data points used for the purposes of this review.
Compilation	NOHD compiled all pertinent domestic abuse fatality data points into ten de-identified case summaries for NODAFR review.
Review Process	NOHD held two 3-hour domestic abuse fatality review sessions in October and December 2022. During each session, the NODAFR was split into 3 groups of 5-8 members each. Each group identified a facilitator and notetaker. After reviewing each case summary, groups identified contributing risk factors and determined recommendations.
Discussion	After the completion of group reviews, NOHD led a recommendation discussion with the whole NODAFR. A NOHD notetaker documented group findings and recommendations. All documents were returned to NOHD and are stored in accordance with NODAFR policy.

LIMITATIONS

Child Deaths

Some child fatality incidents are included in this summary as these cases were reported as domestic by NOPD or LCADV and reviewed by the NODAFR to provide local recommendations. Due to data limitations, this report may not reflect every child fatality rooted in domestic abuse that occurred in New Orleans. For more comprehensive information related to unexpected child deaths in Louisiana, the Louisiana Child Death Review Report⁴ is recommended for review.

Compilation

Much of the incident-related data summarized in this report was gathered from publicly available records and media reports. Unless it was noted in a media report, data on victim and suspect criminal and civil legal histories outside of Orleans Parish are not included in this summary. Other sources, such as Orleans Parish Municipal and Traffic Court and Department of Children and Family Service records, are also excluded from this report as the team is still working to develop record sharing agreements to access this data.

Generalizability

This data was used to characterize each fatality that was documented as domestic abuse in Orleans Parish in 2020. It was also used to provide recommendations on how improvements could be made to prevent fatalities in the future. However, due to the limited number of cases, it is important to note that this data is not representative of all domestic abuse that occurs in New Orleans and is not generalizable.

Missing Cases

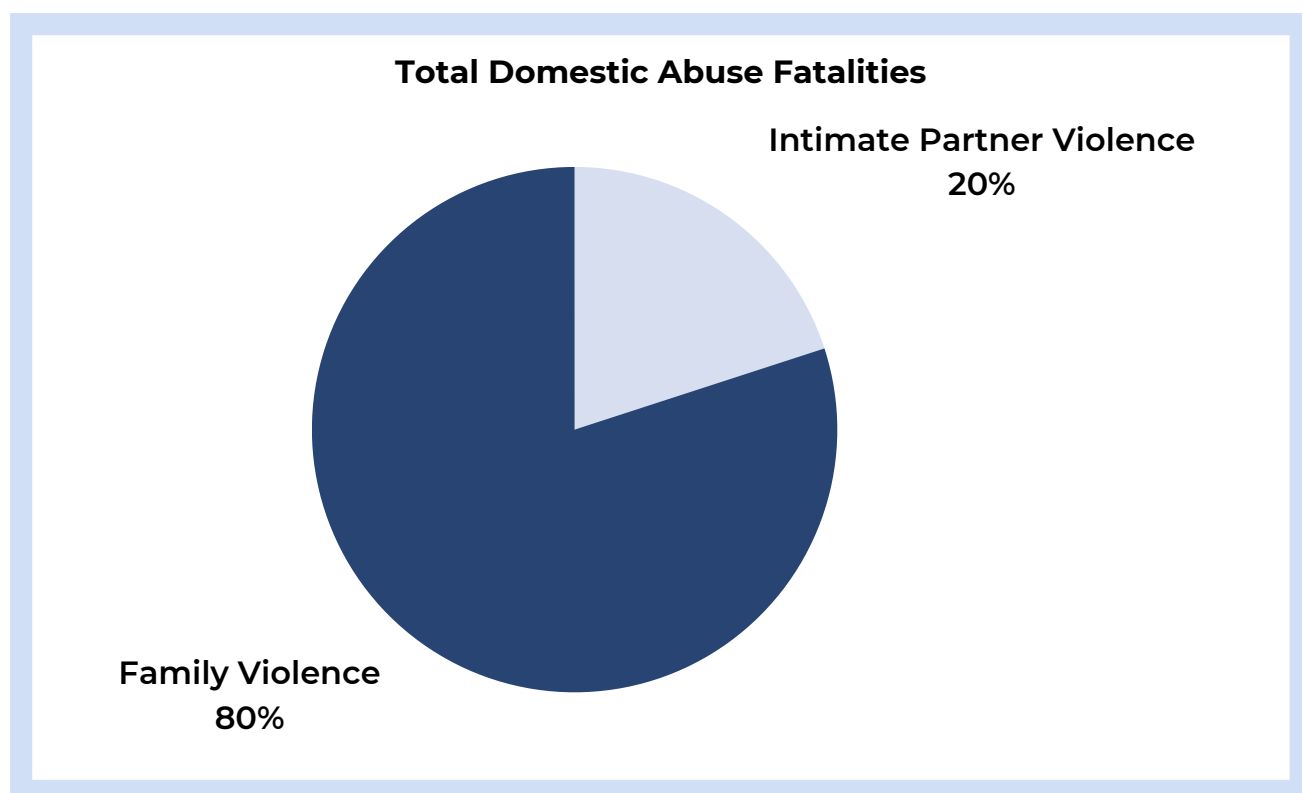
Due to the nature of domestic abuse, it is likely that this is not an extensive list of all fatalities rooted in domestic abuse that occurred in New Orleans in 2020. It is possible that other fatalities, in which the relationships between the victims and suspects were unknown, were not classified as domestic at the time of the incident and were therefore unknowingly excluded from this report.

Victim and Suspect Identity

Victim demographic data obtained from law enforcement, the media, and court reports may not accurately reflect how individual victims or suspects would self-identify their gender, race/ethnicity, or relationship status.

FINDINGS: 2020 INCIDENTS

In New Orleans, there were a total of ten domestic abuse fatalities that occurred in 2020. All ten fatalities were identified as homicides, which accounted for 5% of all homicides that occurred in New Orleans.⁵ Of the ten domestic homicides, there were 8 incidents identified as family violence fatalities and 2 incidents identified as intimate partner violence fatalities. Overall, domestic homicides in New Orleans increased by 50% since 2019.



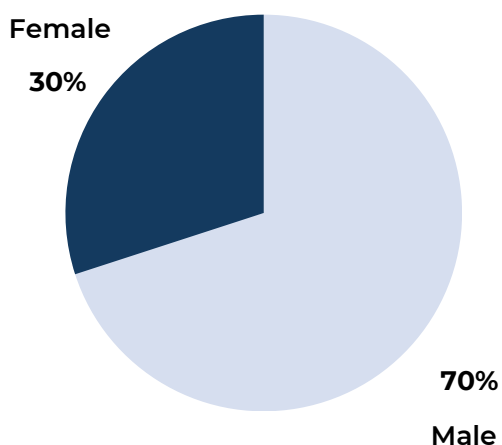
TAKEAWAY DOMESTIC ABUSE FATALITY CHARACTERISTICS

- Half of domestic homicide victims were killed by an individual using a firearm, compared to 30% of victims who were stabbed and 20% of victims who died by blunt force trauma.
- A majority (70%) of domestic homicides occurred in the victim's residence or at the residence of a family member, and 30% occurred in public.
- Children were present at 30% of domestic homicide scenes.
- In addition to the homicide victim(s), other individuals were injured at the scene in 30% of incidents.
- The 5th District had the highest amount of homicides (3) followed by the 4th District (2).

FINDINGS: 2020 INCIDENTS

VICTIM DEMOGRAPHICS

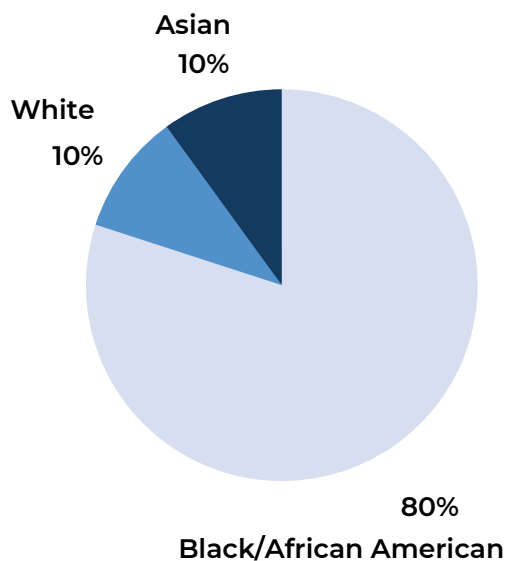
GENDER



Men were more likely than women to be victims as a result of domestic homicides.

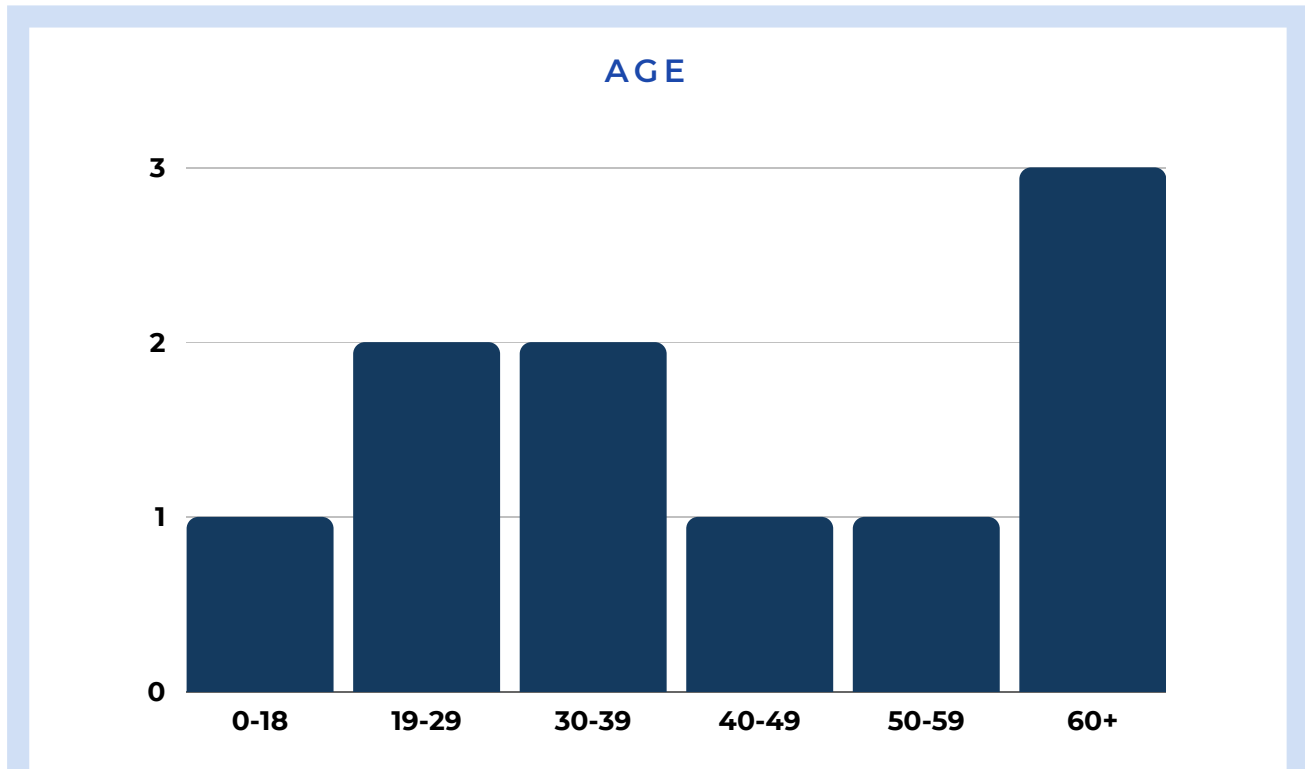
RACE AND ETHNICITY

In New Orleans victim race and ethnicity percentages are not consistent with demographic data for the general population. Most notably, while Black/African American residents make up 59% of the population,⁶ 80% of domestic homicide victims were identified as Black/African American.

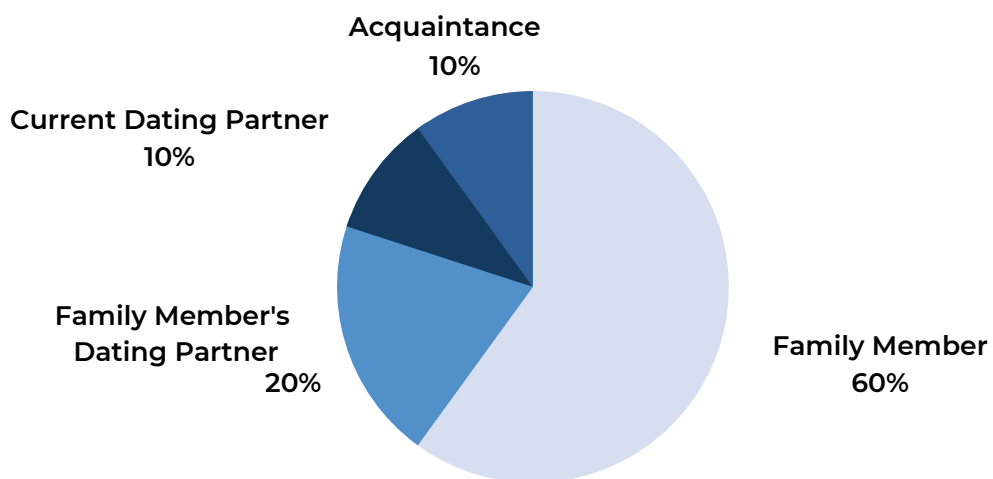


FINDINGS: 2020 INCIDENTS

VICTIM DEMOGRAPHICS



VICTIM RELATIONSHIP TO SUSPECT

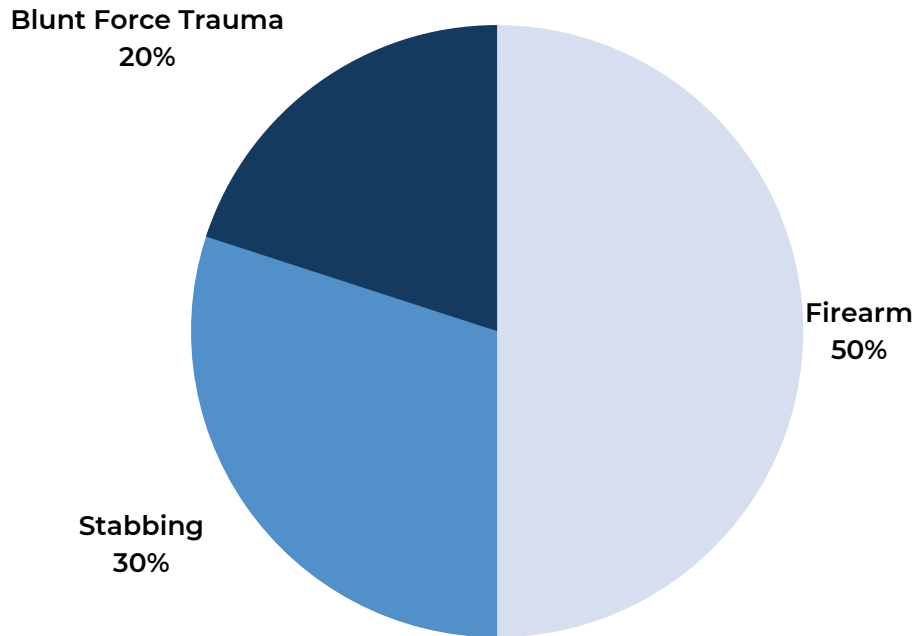


In 2/3 of cases involving a family member, an adult child was suspected of committing the homicide of their parent/step-parent.

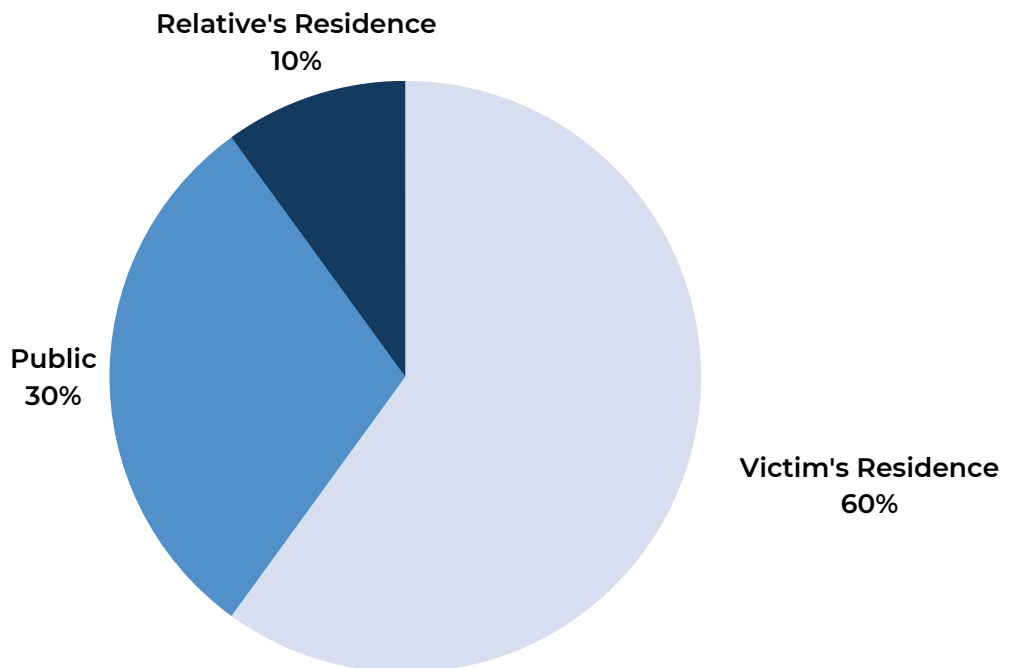
FINDINGS: 2020 INCIDENTS

INCIDENT CHARACTERISTICS

METHOD OF INJURY

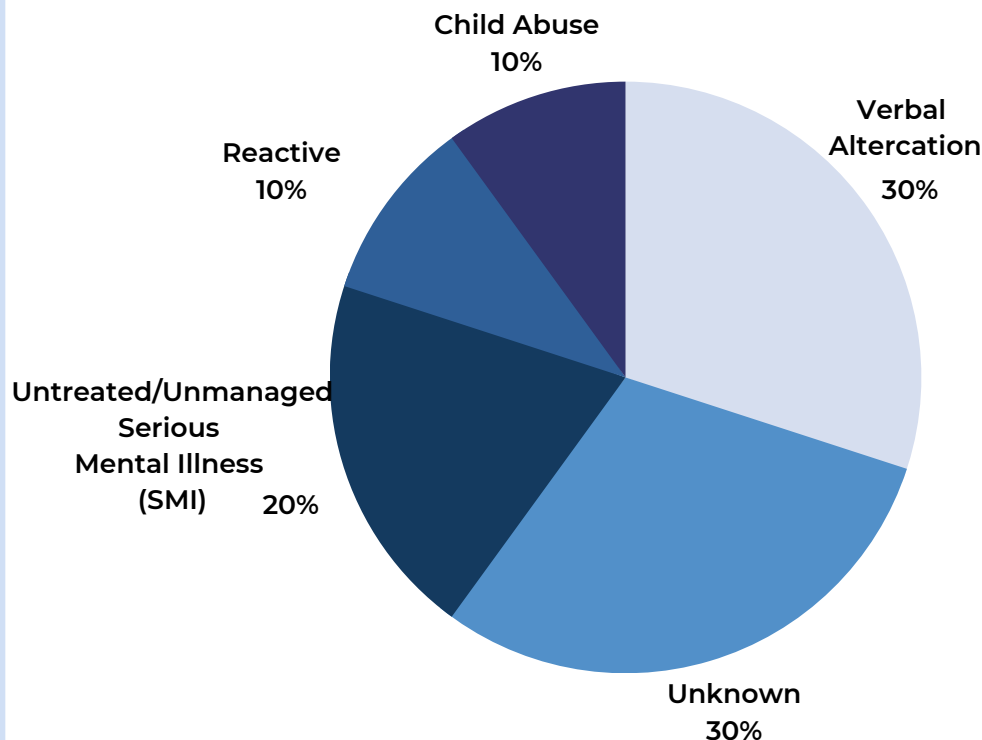


PLACE OF INCIDENT



FINDINGS: 2020 INCIDENTS

PRECURSORS TO HOMICIDE



DEFINING PRECURSORS TO HOMICIDE

- **Verbal Altercation:** a verbal altercation escalated and immediately preceded the fatal incident. In one FV fatality and one IPV fatality, there was no documented history of abuse that preceded the verbal altercation. In a second FV fatality, two family members had previously had a “falling out” prior to the incident.
- **Unknown:** any precursor to the homicide remains unknown.
- **Untreated/Unmanaged Serious Mental Illness (SMI):** the suspect was exhibiting behaviors and characteristics related to their untreated or unmanaged SMI prior to the homicide.
- **Reactive:** the homicide occurred by a third party as a reaction to violence against a victim of IPV. In this case, a precursor to the homicide was that the homicide victim was accused of committing IPV against the suspect's family member.
- **Child Abuse:** characteristics of child abuse precipitated by the caregiver was identified as a precursor to the child’s death.

FINDINGS: 2020 INCIDENTS

CONTRIBUTING FACTORS

Contributing factors include any behavior or systems issue that increased the severity of morbidity or the likelihood of fatality. These factors did not necessarily cause the fatal outcome, but may have been among a number of factors that led to the fatality. Contributing factors were analyzed to develop and guide recommendations. For the purposes of this summary, the following contributing factors were identified in at least one case during review: escalating violence and history of violence, access to firearms, untreated or unmanaged SMI, substance abuse, repeated intervention by law enforcement, previous strangulation, and housing instability.

HISTORY AND ESCALATION OF VIOLENCE

History and escalation of violence in a relationship has been identified as a risk factor for later fatalities. While reviewing one IPV fatality incident, it was found there was a record of increasing and escalating physical abuse being committed by the partner who was abusive over the course of that relationship. Prior to one FV fatality incident, records indicated the family of a suspect with untreated and unmanaged SMI had previously reached out to law enforcement for assistance with physically violent incidents. In a second FV fatality incident, records noted the two family members who were involved previously had a “falling out” prior to the incident, although the severity of the “falling out” is unknown.

ACCESS TO FIREARMS

The presence of firearms in a household significantly increases the risk of homicide,⁸ with one study finding that in domestic abuse situations, the risk of death is five times greater when a gun is present.⁹ In 50% of cases, the suspect had access to a firearm. In one case, the suspect was able to access another family member's firearm as it was not securely stored. In another case, the suspect had been formerly convicted of a felony and had access to an illegal firearm.

FINDINGS: 2020 INCIDENTS

CONTRIBUTING FACTORS

UNTREATED OR UNMANAGED SMI

Most individuals living with untreated or unmanaged serious mental illnesses are not dangerous and will not commit acts of violence. In fact, most individuals living with untreated or unmanaged SMI are more likely to experience violence against themselves.¹⁰ Only a small number of individuals living with untreated or unmanaged SMI have been found to commit violent acts. In cases where a person was living with SMI, lack of SMI treatment and management options may have contributed to an individual's capacity for emotional regulation or problem solving,¹¹ leading to circumstances that contributed to homicides. In 20% of cases, it was found that the suspect was not being actively treated for their SMI. Histories in both cases indicated that family members had been trying to support the suspects in treating and managing their SMI.

SUBSTANCE ABUSE

Alcohol and drug use have been found to be associated with an increased risk of homicide.¹² In one IPV case, it was noted that the homicide victim, who was the IPV survivor's abusive partner, was living with alcohol abuse prior to the precipitating event.

REPEATED LAW ENFORCEMENT INTERVENTION

Law enforcement is often the first response called to intervene in situations of escalating family and intimate partner violence. Studies have found that 22-92% of those involved in a domestic abuse homicide are known in the criminal justice system prior to a homicide occurring.¹³ In one case of FV and one case of IPV, law enforcement had been involved and called for service multiple times prior to the homicide.

FINDINGS: 2020 INCIDENTS

CONTRIBUTING FACTORS

PREVIOUS STRANGULATION

Prior nonfatal strangulations are associated with higher rates of becoming a completed homicide in the future.¹⁴ Women who experience nonfatal strangulation by a partner are 750% more likely to experience homicide by that same partner.¹⁵ In one of the two IPV homicides, the IPV survivor had survived a previous non-fatal strangulation by their partner who was abusive.

HOUSING INSTABILITY

Lack of affordable housing can create stressors that may exacerbate existing tensions in relationships and escalate violence. In 20% of cases, lack of accessible or appropriate housing options forced family members, known to have histories of conflict together, in one household.



DISCUSSION

HOW CAN WE PREVENT FUTURE FATALITIES?

While there is no one-sized fits all solution for preventing domestic abuse fatalities from occurring in the future, the NODAFR has identified several areas that policy-makers, government agencies, community-based organizations, and community members can target to intervene and provide critical resources to those experiencing violence in their homes, and in turn prevent these types of fatalities from occurring in the future.

PROVIDING CONFLICT RESOLUTION PROGRAMMING AS PREVENTION

Various conflict resolution programs have been implemented throughout the United States to address violence in communities. Some programs use methods, such as community mediation, to help facilitate neutral conversations between people in conflict, with one study finding conflict resolution programming "appear[ing] to be related to modest reductions in individual criminal recidivism for participants, when compared with standard criminal justice system treatment."¹⁶ While conflict resolution programming would not be an appropriate intervention for cases with histories of abuse or intimate partner violence, this type of programming could benefit community members by providing them with the necessary tools and skills to mitigate and deescalate conflict in their families, friendships, and neighborhoods.

Funding to support community-based conflict resolution programming and education, with a focus on community mediation and de-escalation techniques, would be incredibly useful in helping to prevent conflicts from escalating into physical violence or homicide. Evidence-based programs could be implemented within schools, community-based settings, faith-based communities, and potentially provided as an alternative or supplement to criminal justice interventions.

DISCUSSION

HOW CAN WE PREVENT FUTURE FATALITIES?

PROMOTING FIREARM SAFETY AND STORAGE

Researchers, healthcare professionals, and gun owners all support safe and secure firearm storage practices, such as securing firearms locked, unloaded, and separated from ammunition, as a method for reducing injuries and deaths caused by firearms.¹⁷ Firearm storage can also prevent those who legally can't have guns from accessing them.¹⁸ Two strategies that could be used to promote safe firearm storage include promoting public awareness campaigns aimed at highlighting the importance of secure firearm storage and enhancing access to gun locks for gun owners in New Orleans.

SUPPORTING THOSE WITH MENTAL ILLNESS

Those who have been living with SMI and their caretakers often face significant barriers when trying to access care for treatment. Over the years, several gaps have been identified in the City's response to support those living with mental illness, including the need to ensure residents have access to hospital and integrative community services for treatment and the need to ensure residents have access to essential psychotropic medications.¹⁹ Supporting efforts to improve equitable access to mental health services should include increased resources for mental health, coordinated case management and counseling, medication management, and expanding telehealth services. At the time of review, it was also recommended to establish community-based mobile crisis units to provide immediate on-site assistance and connect individuals to care.

DISCUSSION

HOW CAN WE PREVENT FUTURE FATALITIES?

SUPPORTING FAMILIES

There are limited resources available for families who are experiencing violence within their homes outside of the context of IPV. Sometimes, agencies dependent on Office of Violence Against Women funding are restricted from providing services to those experiencing family violence that does not qualify as IPV. It is crucial for New Orleans to expand social service resources for family members experiencing violence by other non-intimate partner family members. Funding could support programs that offer restorative approaches to conflict, counseling services, case management services that offer family safety planning, and resources to support housing and financial stability. Families with children experiencing violence in the home would also benefit from proactive interventions from services, such as the Department of Children and Family Services, to assess for risk and provide critical follow-up resources and care, including access to childcare and respite care.

ADVOCATING FOR HOUSING ACCESSIBILITY

The lack of safe and affordable housing, along with sustained urban poverty and lack of economic opportunity, can often exacerbate violence in relationships and in the home.²⁰ These factors can make it incredibly difficult for those in violent relationships to leave and to report violence when they face the possibility of eviction.²¹ These factors can also put family members and intimate partners in a difficult place when those who cause harm return to the home when they do not have any alternative options for housing, even if protective orders are in place. Funding for alternative housing resources and services for those accused of violence would alleviate the burden often shouldered by family members or intimate partners and reduce the risk of further violence. Additionally, enhanced funding for those experiencing domestic abuse would help some individuals leave violent homes.

DISCUSSION

HOW CAN WE PREVENT FATALITIES?

ENHANCING THE JUSTICE SYSTEM RESPONSE

Law enforcement is often called to respond to incidents of domestic abuse and have many tools available to assist those experiencing violence in enhancing safety.

Protection Orders

Protection orders are a crucial tool utilized by victims of domestic abuse to enhance safety, prevent escalating violence, and prevent those who caused them harm from causing further harm. In order for protection orders to be effective, it is crucial for law enforcement to respond quickly to violations and for courts to take violations seriously. It would also be beneficial for systems to communicate with survivors on violations issues. Civil protective order processes also allow an opportunity to intervene in cases with an individual living with mental illness and could also be improved to facilitate appropriate treatment and interventions.

Centralizing Criminal Justice Information

Currently, the New Orleans Criminal Justice system has multiple databases used by various agencies to house data, leading to a scattered law enforcement response. At the time of this review, it was recommended that the City establish a centralized comprehensive database system so system actors can see full criminal histories, protection order information, and prohibited access to firearms information to make informed decisions related to domestic abuse cases and improve coordination among agencies.

Strengthen Mental Health Training for NOPD

Some domestic abuse scenes involve individuals who are living with untreated and unmanaged SMI. It is crucial for all NOPD patrol to receive training related to crisis intervention so that officers are equipped with the knowledge and skills to handle those scenes using the appropriate interventions.

RECOMMENDATIONS FOR POLICYMAKERS

Policymakers play a critical role in improving the City of New Orleans' response to domestic abuse, and in turn preventing domestic abuse fatalities from occurring in the future. By prioritizing domestic abuse prevention and intervention, policy makers can allocate funding and resources to enhance education and awareness programs, ensuring that individuals are equipped with the knowledge and skills to recognize and address abusive situations.

Issue	Recommendations
<p>In 30% of fatalities an immediate argument precipitated the lethal event</p>	<ul style="list-style-type: none"> • Increase funding and support for conflict resolution programs, including community mediation and de-escalation training, to be implemented as a prevention effort within schools and community organizations. • Support public awareness efforts related to promoting conflict resolution programming.
<p>In 20% of fatalities the suspect lived with untreated and unmanaged SMI</p>	<ul style="list-style-type: none"> • Allocate resources to improve access to mental health services, including early intervention at the time of the first reported case. • Support policies that encourage proactive responses to mental health concerns related to domestic abuse, such as community-based mental health first responses.
<p>20% of suspects had previously returned to a home with a family member they had a violent relationship with</p>	<ul style="list-style-type: none"> • Develop policies and programs that provide housing options for those experiencing violence in the home, including the person accused of harm to ensure their separation from potential victims. • Support short and long-term stability initiatives that address housing needs for individuals affected by domestic abuse, including rental assistance, hotel stipends, and transitional housing programs.

RECOMMENDATIONS FOR GOVERNMENT AGENCIES

Government agencies, including criminal justice and state agencies, have the power to implement policies, allocate resources, and coordinate efforts to address domestic abuse effectively. This includes implementing policies that enhance access to resources and services and collaborating with community organizations and healthcare providers to develop comprehensive strategies for intervention and prevention. By actively supporting and implementing the recommendations from the NODAFR, government agencies can play a crucial role in preventing future fatalities, enhancing survivor safety, and promoting healthier communities.

Issue	Recommendations
50% of fatalities involved a suspect who used a firearm	<ul style="list-style-type: none"> • Strengthen and enforce firearm transfers from prohibited possessors of firearms. • Promote safe storage practices, particularly through public awareness campaigns and gun lock giveaway initiatives.
Protective order processes would benefit from enhancements	<ul style="list-style-type: none"> • Collaborate with legal and mental health professionals to create opportunities for providing access to mental health resources and needs at the time of issuing protective orders. • Enhance follow-up protocols and enforcement mechanisms to ensure the effectiveness of protective orders in protecting those experiencing domestic abuse.
Decentralized criminal justice databases	<ul style="list-style-type: none"> • Centralize criminal history information through the "Justice Tech Overhaul" to ensure comprehensive and efficient assessment of individuals involved in domestic abuse cases. • Implement strategies to increase the speed of addressing domestic abuse cases within the justice system, including dedicated court dockets, intervention courts, units, and streamlined processes.

RECOMMENDATIONS FOR GOVERNMENT AGENCIES

Issue	Recommendations
Lack of appropriate treatment for those living with substance abuse	<ul style="list-style-type: none">• Provide assistance for individuals living with substance abuse, including access to treatment and counseling services.
Families with children would benefit from increased support	<ul style="list-style-type: none">• Encourage collaboration between domestic violence (DV) service providers and the Department of Children and Family Services (DCFS) to ensure the safety and well-being of children in domestic violence situations.• Advocate for enhanced resources for families with children experiencing domestic abuse, including access to affordable childcare and respite care.



RECOMMENDATIONS: FOR COMMUNITY-BASED ORGANIZATIONS

Community-based organizations are crucial in supporting violence prevention and intervention efforts across the New Orleans. Community-based organizations have worked to support their neighborhoods and community members by providing essential supportive services, advocating for best interests and needs, and challenging barriers. It is essential that community-based organizations are funded to implement violence prevention and intervention strategies.

Issue	Recommendations
<p>Limited programming available to implement conflict resolution prevention programming</p>	<ul style="list-style-type: none"> • Implement comprehensive evidence-based conflict resolution programs that include community mediation. • Offer conflict resolution training, that includes information on de-escalation techniques, and resources specifically tailored for community members trying to navigate conflict.
<p>Limited resources available to provide non-criminal responses to mental health crises</p>	<ul style="list-style-type: none"> • Support community-based interventions that respond to mental health crises and increase funding for providing direct services to those with untreated or unmanaged SMI. • Provide support in the form of counseling, financial assistance, and case management to family members who are caretakers of adults living with SMI.
<p>Limited resources available to provide services for those experiencing FV</p>	<ul style="list-style-type: none"> • Expand support programs for adult family members experiencing FV that offer training on skills to navigate conflict, counseling services, case management services that offer family safety planning, and resources to support housing stability.

RECOMMENDATIONS FOR IMPROVING THE NODAFR

Throughout the first year of implementing the NODAFR, various areas for improvement were identified to improve processes and report writing.

ACCESS TO RECORDS

Record access is crucial for fatality reviews as it allows for a comprehensive understanding of the incident and the factors contributing to the fatality. The NODAFR needs access to additional records in order to make recommendations in the future. The following list includes some of the essential records needed for a thorough review:

Type of Record	Reason Needed
Records related to the fatality	<ul style="list-style-type: none"> • Autopsy reports: can assist with determining the cause and manner of death. • Toxicology reports: can assist with determining if substance abuse or involvement played a role in the incident.
Records related to history of suspect and victim	<ul style="list-style-type: none"> • Criminal histories outside of Orleans Parish: exploring any criminal history or interactions with the justice system outside of Orleans Parish would help create timelines of escalating violence. • DCFS: reviewing any previous involvement or reports with DCFS regarding the victim, suspect, or their children could provide insight into potential gaps in services. • Housing information: can provide insight into housing statuses for the victim and survivor. • Mental health history, treatment, and medication records: can provide insights into gaps in services and help create recommendations for improved responses to mental health. • New Orleans Municipal and Traffic Court records: prior to 2019, misdemeanor domestic abuse cases were held in Municipal and Traffic Court. Access to these records would help create timelines of escalating violence.

RECOMMENDATIONS FOR IMPROVING THE NODAFR

INTERVIEWS WITH RELEVANT INDIVIDUALS

Domestic abuse fatality review teams across the country utilize trauma-informed interview processes to gather firsthand accounts and additional insights into relationship dynamics and events that precipitated the fatality. The NODAFR will explore best practices for using interviews for future fatality review sessions.

LANGUAGE IMPROVEMENTS

To maintain consistency with other violent death and fatality review teams across the state, the NODAFR often used definitions from the Center for Disease Control's National Violent Death Reporting System Web Coding Manual Version 6. One limitation to using this coding system is that language is often not inclusive nor does it center person-first language. The NODAFR will work with the LADAFR to determine updated definitions that are inclusive and use person-first language.

IMPROVING IDENTIFICATION OF CONTRIBUTING FACTORS

The NODAFR is working with the LADAFR to improve identification of contributing factors in all domestic abuse cases. Since the first review session, the LADAFR created an updated recommendations form highlighting common contributing individual, relationship, community, and societal factors. The NODAFR and LADAFR will continue to make improvements to the form so that information is accurately captured.



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The New Orleans Domestic Abuse Fatality Review Team honors the lives of individuals whose lives have been lost because of domestic abuse and the experiences of survivors of domestic abuse in New Orleans. It is our hope that this initiative will help eradicate domestic abuse in our community and prevent fatalities from occurring in the future.



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