New Orleans Domestic Abuse Fatality Review

2021 Incidents





August 2024



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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 а fatality review with team representation from over 20 community. government, and criminal justice organizations to continue analyzing domestic fatalities in New Orleans, identify gaps in systemic interventions, recommendations and determine 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 conflict with a family member (other than an intimate partner) that appears 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 serious mental illness (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 violence 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 2021 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.

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- 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.
- **Objectives** 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
- 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 Family Justice Center
- New Orleans Health Department
- New Orleans Office of Criminal Justice Coordination

- 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

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 twenty-two domestic abuse fatalities that occurred in Orleans Parish in 2021. 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, 911 call records, media reports, civil and criminal court records, and the LCADV 2021 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 twenty-two de-identified case summaries for NODAFR review.
Review Process	NOHD held two 4-hour domestic abuse fatality review sessions in June and December 2023. 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 Report⁵ 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.

This data was used to characterize each fatality that was documented as domestic abuse in Orleans Parish in 2021. It was also used to provide recommendations on how improvements could be **Generalizability** 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.

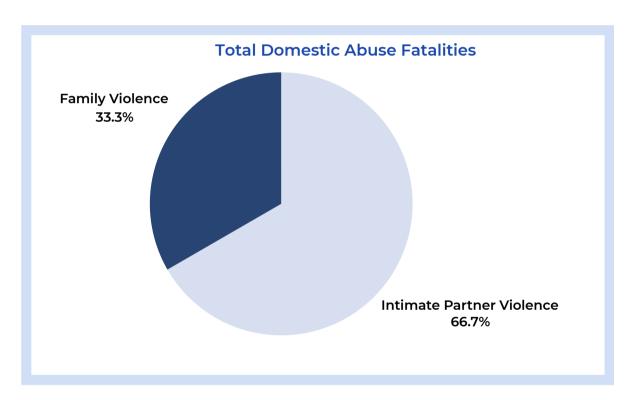
Missing Cases

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 2021. 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.

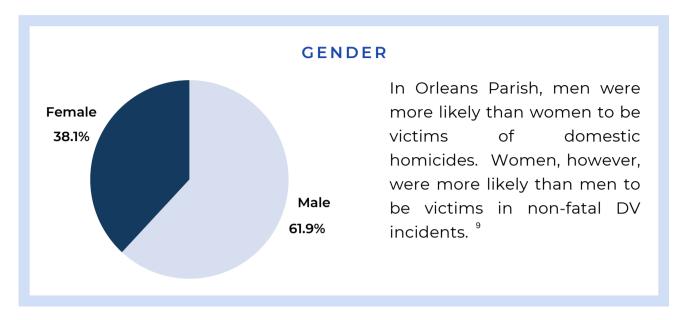
In 2021, there were a total of twenty-two domestic abuse fatalities that occurred in New Orleans. One of the fatalities was labeled as a suicide, three were deemed justifiable homicides, and the remaining eighteen fatalities were identified as homicides. These twenty-one homicides accounted for 9.6% of all homicides that occurred in New Orleans in 2021. Of the twenty-one domestic related homicides, 14 incidents were identified as intimate partner violence fatalities and 7 were identified as family violence fatalities. Overall, domestic homicides in New Orleans increased by 210% since 2020.



TAKEAWAY DOMESTIC ABUSE FATALITY CHARACTERISTICS

- Children were present at at least 29% of domestic homicide scenes.
- In 20% of fatal incidents, the victim and suspect shared a child under the age of one.
- Two-thirds (62%) of domestic homicide victims were killed by an individual using a firearm, compared to 19% of victims who were stabbed and 14% of victims who died by blunt force trauma. Handguns were used in 93% of the homicides committed with a firearm.
- Men were more likely to be both the victim (66.7%) and the suspect (64%) in domestic abuse fatalities.

VICTIM DEMOGRAPHICS



Nationally, the overwhelming majority of victims of non-fatal and fatal domestic violence are women. ⁷ In 2021, 34% of all female victims of murder and non-negligent manslaughter were killed by an intimate partner as compared to 6% of male victims. Women were also more likely to be victims of fatal family violence. In 2021, about 16% of female murder victims in the US were killed by a non-intimate family member compared to 10% of male murder victims. ⁸

In New Orleans, non-fatal domestic violence follows the national trend, with women representing the overwhelming majority of victims. However, in 2021, 62% of domestic homicide victims were men, who were more likely to be victims of both family and intimate partner violence fatalities. This follows a trend first identified in the 2020 DAFR Report, which noted that 70% of DV fatality victims were male. Additionally, it is of note that the majority of suspects in DV fatalities were also male, making up 70% in 2020 and 64% in 2021.

While additional research is required to speak to local context, New Orleans statistics contradicting national DV fatality trends is likely due to compounding factors. Women who use lethal force are often isolated from practical support, have been victims of long-term child abuse or domestic violence, and have previously sought assistance from law enforcement or protective systems, who have failed to provide helpful interventions. ^{11,12}

VICTIM DEMOGRAPHICS

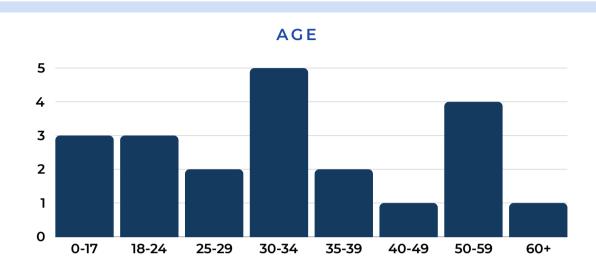
RACE AND ETHNICITY White In New Orleans, victim race and ethnicity percentages are not consistent with demographic data for the general population. Most notably, while Black/ African American residents make up 59% of the population, 3 90% of domestic homicide victims identified as Black/ African American. 90.5%

Violence is a public health crisis and the legacy of systemized and institutionalized racism and racist violence have disproportionately magnified the impact of public health crises in the Black community. Nationally, Black Americans experience higher rates of homicide victimization than any other race and a seven times higher rate than their white counterparts. Furthermore, over the last two decades, homicide rates have consistently been at least ten times higher for Black youth, aged 10—34 years, than their white peers in the same age group.¹⁵

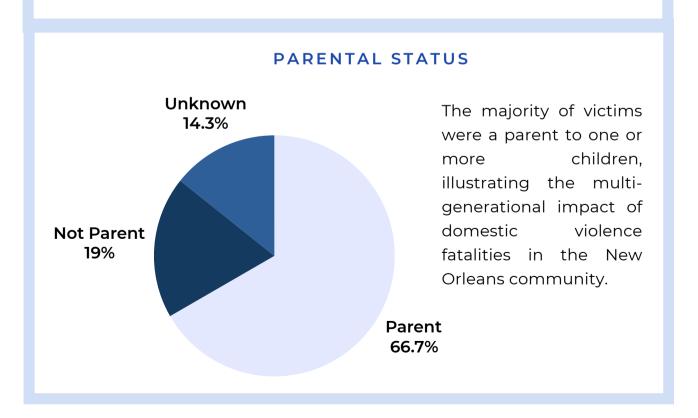
The disproportionate impact of violence in the US against the Black community is magnified in Louisiana. In 2021, the rate of homicide victimization against Black Louisianans was 51 homicides per 100,000 Black residents, 10 times than the rate of victimization against white Louisianans. ¹⁶

Black/African American

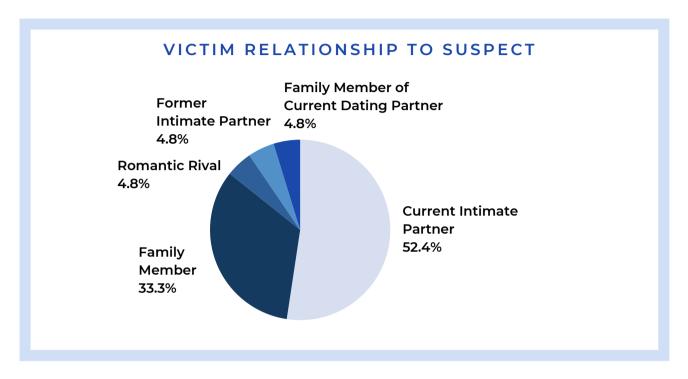
VICTIM DEMOGRAPHICS



The age of 2021 DV fatality victims in New Orleans follow national trends. In the United States, most domestic violence victims (65.7%) were between ages 25 and 54. ¹⁷ In New Orleans in 2021, 76% of DV homicide victims were in the 25-54 age range.

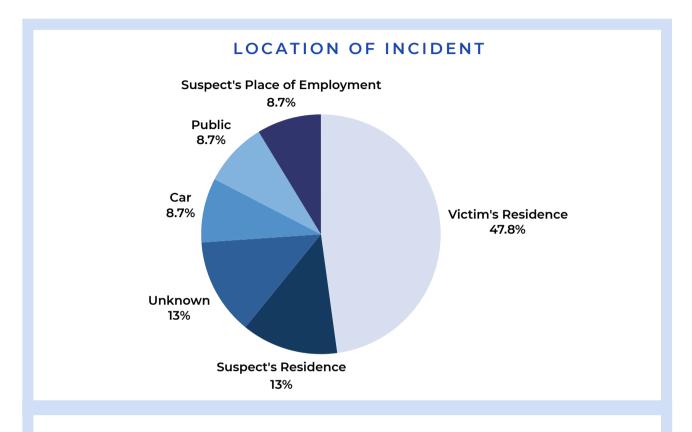


VICTIM DEMOGRAPHICS

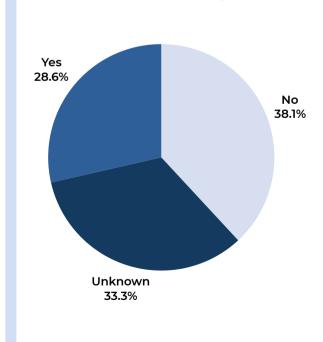


- Current Intimate Partner includes spouses, dating partners, and casual intimate or romantic partners. In over half of 2021 DV homicides, the victim and suspect were current intimate partners.
- Family Member refers to cases in which the suspect and victim were related through biology, adoption, and marriage (not including married partners). The relationships in this data set are overwhelming parents and their children, with over a third (37%) of homicides involving an adult son who was suspected of killing his father.
- Former Intimate Partner includes former spouses, dating partners, and casual intimate or romantic partners.
- Romantic Rival includes individuals who are not related or romantically involved but who share, or are perceived by the suspect as sharing, a romantic interest as a the primary characteristic of their relationship.
- Family Member of Current Dating Partner includes a fatality committed not by a victim's romantic partner but rather by the family member of a victim's romantic partner.

INCIDENT CHARACTERISTICS

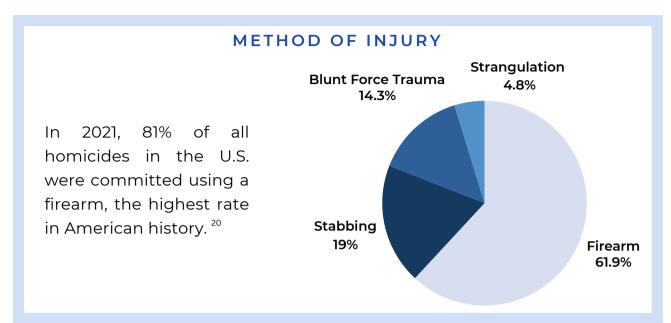


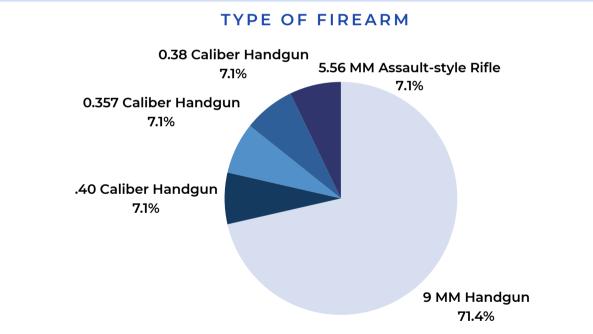
CHILDREN PRESENT



Children in New Orleans experience rates of Post Traumatic Stress Disorder (PTSD) at 3x the national average. The DOJ found that, "a child's exposure to one type of violence increases the likelihood that the child will be exposed to other types of violence and exposed multiple times over their lifetimes. They are also at a higher risk of engaging in criminal behavior later in life and becoming part of a cycle of violence."

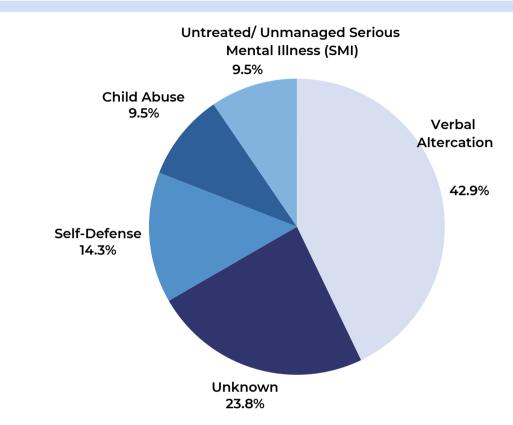
INCIDENT CHARACTERISTICS





In our data set, the suspect in 62% of cases used a firearm as the agent of injury in the fatal incident. It is of note that the type of firearm used in almost 93% of domestic fatalities was a handgun. While assault rifles are often centered in media and public conversations about public safety, victims of domestic homicides in New Orleans are overwhelming killed using handguns.

PRECURSORS TO HOMICIDE



- Verbal Altercation: a verbal altercation escalated and immediately preceded the fatal incident. In almost half (43%) of the domestic fatalities reviewed, the suspect and victim were in an active verbal or physical altercation at the time of the fatal incident. In many cases, family members or friends noted a pattern of escalating conflict or violence leading up to the fatal event.
- Unknown: any precursor to the homicide remains unknown.
- Self-defense: law enforcement determined that the fatality was a justifiable homicide committed in self-defense
- Untreated/Unmanaged Serious Mental Illness (SMI): the suspect was exhibiting behaviors and characteristics related to untreated or unmanaged SMI prior to the homicide.
- Child Abuse: characteristics of child abuse precipitated by a caregiver were identified as a precursor to the child's death.

CONTRIBUTING FACTORS

Contributing factors include any behavior or systems issue that increased the 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 seven contributing factors were identified in four or more cases: repeated law enforcement intervention, history and escalation of violence, the presence of a child under the age of one, previous strangulation committed by the suspect, history of refused or reduced charges, access to firearms, and untreated or unmanaged serious mental illness.

FINDING #1: 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. Offenders of FV and IPV are more likely than offenders of non-IPV/FV violence to have prior arrests and for those arrests to be for felonies.

Twelve of the twenty-five suspects implicated in the 2021 DV fatalities had prior criminal histories of two or more domestic violence related charges. Four suspects had active open warrants for DV related charges at the time of the fatal Incident. An additional five suspects were out on bond, four of whom for DV related charges.

In one IPV incident, at the time of the fatal event, the suspect was out on

CONTRIBUTING FACTORS

bond for previously committing domestic violence against the victim she was later accused of killing. In a second IPV incident reviewed, the suspect was previously charged with at least three counts of aggravated battery against two victims before later being accused of killing a third victim. At the time of the fatal incident, all three aggravated battery charges were unadjudicated. In a third IPV incident, prior to the fatal incident, the suspect was charged with attempted second-degree murder and aggravated domestic battery stemming from two separate incidents with two different victims.

FINDING #2: HISTORY AND ESCALATION OF VIOLENCE

Almost thirty years of research has demonstrated that the most common risk factor for domestic violence homicide is prior domestic violence incidents.²³ History and escalation of violence was documented through court records, police reports, 911 calls, and family testimony in over half of the fatalities reviewed.

For example, while reviewing one IPV fatal incident, NOPD records demonstrated increasing and escalating physical abuse committed by a suspect who was violent over the course of a series of relationships. This suspect attacked a former dating partner striking her unconscious and a month later attacked a different dating partner with a firearm. Warrants for both incidents were open and active at the time of the fatal event. In a second IPV fatality, 911 and police records noted NOPD responded to the shared residence for a domestic disturbance between the victim and suspect less than a month before the fatal incident.

History of escalating violence is also a risk factor for becoming a victim of

CONTRIBUTING FACTORS

a justifiable homicide. Three of the fatalities reviewed were found to be justifiable homicides and in each case the victim had a history of committing escalating domestic violence against one or more romantic partners. One IPV fatality victim had been convicted of first-degree murder thirty years before he was killed and at the time of his homicide had four protection orders against him by four different protected individuals in Orleans Parish.

FINDING #3: VERY YOUNG CHILDREN IN THE HOME

Considerable research has examined fatal child abuse, the impact on young children of witnessing IPV, and the increased risk of experiencing IPV during the post-partum period. However, very little research exists that explores the impact of very young children within the ecosystem of a family who experience a fatal DV event. The 2021 NODAFR identifies this as an area requiring further research and consideration.

In eight fatal incidents (38%), a child under the age of one was present in the family context of the fatal relationship. In four incidents, the victim and suspect shared a child or children under the age of one. In three additional cases, the victim of the fatal incident was a child less than one-year-old, with a biological parent identified as a suspect in two of the three cases. In five of the twenty-one cases, the victim had a biological child born within 12 months of their death. Three of these victims were postpartum mothers and two were fathers with newborns. While it is difficult to find a pattern amongst these case, it is clear that DV homicides in Orleans Parish are impacting very young children and their surviving family members, who will require long-term support and care.

CONTRIBUTING FACTORS

FINDING #4: PREVIOUS STRANGULATION

Prior non-fatal strangulations are associated with higher rates of becoming a completed homicide in the future.²⁴ Women who experience nonfatal strangulation by a partner are 750% more likely to experience homicide by that same partner.²⁵ Additionally, research has demonstrated that a majority of law enforcement officers killed in this country are killed by men with a history of strangulation assault against women.²⁶

In our data set, 28% of suspects had a documented history of committing non-fatal strangulation against one or more intimate partner. In one IPV incident, the suspect committed non-fatal strangulation on a prior dating partner before later committing strangulation against her current dating partner in the fatal incident. In another IPV incident reviewed, prior to the fatal incident, the suspect was arrested twice in one year for strangulation against different dating partners.

While we were unable to document prior non-fatal strangulation by the suspect against the fatality victim in this data set, there is a clear pattern of 2021 fatality suspects using strangulation as a tactic of abuse against family members and intimate partners. This pattern might indicate that committing strangulation is a risk indicator for committing lethal violence in the future.

CONTRIBUTING FACTORS

FINDING #5: REDUCED OR REFUSED CHARGES

A recent study by the Metro Crime Commission found that in 2021, the Orleans Parish District Attorney refused a third (32%) of all felony DV cases. An additional 20% were pled down to misdemeanor charges, such as simple assault. ²⁷ This pattern is reflected in the criminal histories of suspects in domestic violence fatalities reviewed for 2021.

In almost a third of reviewed incidents (29%), the suspect was previously charged for violent crimes that were later refused. In one FV incident reviewed, over the course of one year, the suspect was arrested four separate times for seven domestic violence related charges. All but two charges were refused. Less than a year later, he was accused of killing his current dating partner's child.

Another identifiable pattern is more serious charges pled down to misdemeanors. In four of the fatal incidents, suspects has previous felony domestic violence charges pled down to misdemeanors. In one FV incident, a suspect was arrested in the same year for two separate incidents of aggravated domestic battery and the charges were pled down to simple battery in both cases. By pleading down DV charges to non-DV related misdemeanors, suspects avoid enhancements that empower courts to require additional sentencing terms including firearms transfers, enrollment in DV monitoring court, and completion of DV intervention programs. These enhancements can prevent escalating violence by ensuring victims are protected by Stay Away Orders, suspects do not have access to firearms, and court systems are empowered to monitor the progress of suspects through DV intervention programs.

CONTRIBUTING FACTORS

FINDING #6: ACCESS TO FIREARMS

2021 saw the greatest number of homicides ever recorded in the United States, with 81% of those deaths resulting from a firearm-related injury. That same year, Louisiana had the second highest rate of gun death in the country. As a recent report from John Hopkins noted, "coincident with the rise in gun-related deaths were record gun sales. Millions of first-time purchasers, including Black and Hispanic/Latino people, and women of all races and ethnicities, bought guns during the pandemic at unprecedented levels. Many of these purchasers were motivated by gun industry marketing claims that guns make you safer." ²⁸

Over the last decade, surveys have shown opinions remain consistent with between 63-64% of Americans believing that "having a gun in the house makes it a safer place to be." ²⁹ Firearms in the home, however, do not make people safer. Decades of research has demonstrated living in a home with a firearm significantly increases the risk of dying from homicide, suicide, or accidental firearm related deaths, with one study finding that in domestic abuse situations, the risk of death is five times greater when a gun is present.

In fact, research has found that guns in the home are used more often to intimidate intimate partners than to thwart crime, ³² with the Department of Justice finding that intended victims of violent crimes engaged in self-protective behavior that involved a firearm in only 1.7% of incidents. ³³

CONTRIBUTING FACTORS

In 2021, 62% of all domestic abuse fatalities in New Orleans were committed using firearms. In four of the 2021 fatal incidents involving a firearm, the suspects had prior criminal charges that precluded the possession of a firearm or weapon by felon.

Additionally, of the firearm-associated homicides, 71% were committed with an 9MM handgun. 9MM caliber firearms are the most common guns in the United States. Popular with both the U.S. military and law enforcement, 9MM handguns are commonly marketed as home defense or concealed carry firearms. In three fatalities reviewed, the victim or suspect were in possession of a 9 MM caliber handgun at the time of a physical altercation during which the firearm unintentionally discharged striking either the victim, suspect, or both.

FINDING #7: UNTREATED/ UNMANAGED SERIOUS MENTAL ILLNESS

Individuals living with untreated or unmanaged SMI are more likely to be victims of violent crime than their peers living without SMI. In fact, research shows that they are two and half times more likely to be a victim of violent crime than those not living with SMI. Conversely, individuals living with SMI are *no more* likely to commit acts of violence than peers without SMI.³⁴

The 2021 DAFR Report identifies untreated and unmanaged SMI as a contributing factor because it represents a missed intervention opportunity through which circumstances that do contribute to

CONTRIBUTING FACTORS

homicides may have been addressed. Treating and managing SMI is an access point to systems of community care that address a wide range of protective and risk factors related to domestic violence, including access to basic needs, substance misuse treatment, and safe housing.

In one FV fatality, records demonstrated that a suspect was struggling with substance misuse and instable housing, as well as serious mental illness, for years preceding the fatal event. Concerned family members attempted to help the suspect manage and treat his mental illness through an inpatient psychiatric program just days before the fatal incident occurred. In another FV incident reviewed, at the time of the incident, the suspect was unhoused and struggling to take care of an infant. The suspect's illness was so severe that prosecutors joined defense's requests to find the offender not guilty by reason of mental incompetence.

While many contributing factors remain consistent between reviews, the 2021 DAFR report identified several emerging trends amongst this year's data set. Based on these emerging trends, the 2021 Domestic Abuse Fatality Review offers eight additional recommendations.

New 2021 DAFR Recommendations:

- Focus intervention on Repeat Offenders
- Intervene in Domestic Disturbances
- Teach Social Fmotional Skills in K-12 Schools
- Support Infants and their Parents
- Prioritize Prosecution of Non-Fatal Strangulation Crimes
- Increase Awareness of Non-Fatal Strangulation lethality
- Increase Prosecution of DV related crimes

FINDING #1: REPEATED LAW ENFORCEMENT INTERVENTION

FOCUS INTERVENTION ON REPEAT OFFENDERS

Background

Two lethality risk factors associated with those who have a history of committing repeat DV offenses include an increase in the frequency and severity of violence and repeated law enforcement intervention. ³⁵ The New Orleans DV Multi-disciplinary Team has continually identified cases in which survivors no longer trusted law enforcement due to their abuser's ability to evade arrest for DV offenses. Furthermore, survivors note that a lack of arrest for repeat domestic violence offenses both emboldened abusers and negatively impacted their trust in law enforcement. ³⁶

Progress on Issue

In 2022, the NOHD reviewed a sample set of cases in which an individual was charged with more than one DV offense. In this data set, 41% of individuals still have active warrants for their arrest. Of those arrested for repeat DV offenses in 2022, over half of individuals also had been previously charged with DV offenses prior to 2022. Only 11.3% of offenders were sentenced to a DV-related charge, making them eligible for DV enhancements. ³⁶

- Flag individuals who have five or more open and active DV warrants to initiate NOPD's Violent Offender Warrant Squad to arrest those individuals.
- Apply DV sentencing enhancements in cases where an individual has previously been sentenced for Domestic Abuse Battery or Battery of a Dating Partner.
- Increase utilization of Gwen's Law Hearings. Gwen's Law Hearings can help to increase victim safety and engagement to support improved prosecution rates.
- Create an advocate position in Criminal District Court to help victims navigate Criminal Protection Order processes.

FINDING 2: HISTORY AND ESCALATION OF VIOLENCE

INTERVENE IN DOMESTIC DISTURBANCES

Background

Most domestic violence incidents occur within a pattern of escalating and intensifying conflict. Conducting early intervention to provide victims with information, resources, and support to seek safety and make informed decisions about their wellbeing has the potential to offer a crucial intervention for preventing future violence.

Progress on Issue

In May 2022, NOHD, in partnership with the New Orleans Family Justice Center (NOFJC), NOPD, and Orleans Parish Communication District (OPCD) launched the Advocacy-Initiated Response (AIR) Program. Through the AIR Program, Community-based AIR Triage Advocates from the NOFJC contact victims directly after law enforcement responds to a domestic incident or disturbance with the goals of providing critical linkages to services and resources, enhancing victim safety, and preventing repeat incidents. AIR Advocates provide services and referrals regardless of if an incident is deemed a crime, allowing for early intervention in potentially escalating situations.

- Increase funding for AIR program to decrease the time between incident and victim outreach by expanding the number of AIR staff conducting outreach.
- Support community-based programs that provide early intervention to families and relationships in conflict through safety planning, case management, and resource referrals.
- Expand programs that provide low-cost, safe housing to ensure that when leaving unsafe living situations people have alternative housing options available.

FINDING 2: HISTORY AND ESCALATION OF VIOLENCE

TEACH SOCIAL EMOTIONAL SKILLS IN K-12 SCHOOLS

Background

Emotion management, decision-making, healthy relationship skills, and sense of self are all important social emotional skills for reducing conflict and the escalation of conflict into violence. Research clearly demonstrates the impact of socio-emotional learning (SEL) as in early education settings as a meaningful intervention for reducing conflict and violence in school settings. ³⁷

Strategies in Progress

In 2023, the NOHD's Children and Youth Prevention Committee identified standardizing violence prevention education in Grades 1-5 as the next vital step for preventing power based violence and its impact on New Orleans youth. Based on this recommendation, the NOHD's DV/SA Program began work with community partners, government agencies, and local schools to identify current prevention education efforts in Orleans schools. This process demonstrated that while violence prevention education is used, the application is unstandardized, not formally recorded, and based on a variety of variables like organization capacity and school enthusiasm.

- Create a comprehensive report on the state of violence prevention education in Orleans Parish across charter, private, and public systems to to inform universal implementation and evaluation efforts.
- Expand funding for schools seeking to implement evidence-based violence prevention curriculum and educator training on their campuses.
- Fund community-based programs providing evidence-based violence prevention education and interventions in New Orleans schools.
- Develop an evaluation and assessment tool to determine impact and efficacy
 of SEL programs as a violence prevention intervention in Orleans Parish
 schools.

FINDING 3: VERY YOUNG CHILDREN IN THE HOME

SUPPORT INFANTS AND THEIR PARENTS

Background

Protective factors are aspects of a person's identity, family life, community, and environment that are supportive of health and wellbeing and, reduce the risk of experiencing harm. One evidence-based protective factor for reducing child abuse and neglect is concrete support for parents. Support that has been found to decrease child maltreatment includes access to affordable and subsidized child care, increasing access to safe, affordable housing, and expanding Medicaid coverage, amongst other programs that support family financial security. Research has demonstrated that economic and other concrete supports improve parents' ability to provide for their children's basic needs, help caregivers secure appropriate child care, and reduce stress and depression. ³⁸

Progress on Issue

NOHD has made progress in offering concrete support to families with infants through several initiatives. In 2021, NOHD was awarded a grant of \$500K from the Office on Violence Against Women's Grants to Prevent and Respond to Domestic Violence, Dating Violence, Sexual Assault, and Stalking Against Children and Youth. In the succeeding three years, NOHD used this grant to increase the accessibility and skill set of mental health professionals in Orleans Parish who work with children 0-5 years old and their caregivers.

In 2023, the NOHD implemented the Family Connects New Orleans (FCNO) program, expanding its direct support programs for infants and their parents. FCNO provides one to three in-home nurse visits, free of charge, to parents of newborns up to 12 weeks old residing in Orleans Parish who give birth at one of partnering hospitals. The mission of FCNO is to link experienced nurses to families and families to community resources to provide infants and their parents with tools for safety and well-being.

2021 DAFR Recommendation

- Increase funding and support for low-cost or sliding scale daycare and respite care options.
- Institute universal prevention education about healthy relationships, domestic violence, parenting skills, and available resources at all agencies that provide services for new parents.
- Allocate funding to improve and make more accessible support services for families with young children, including early intervention mental health care.
 Integrating together program processes and housing services in one place is also recommended.
- Expand support for Maternal and Child Health programs like Healthy Start and Family Connects, which provide concrete support for very young children and their caregivers

FINDING 4: PREVIOUS STRANGULATION

PRIORITIZE PROSECUTION OF NON-FATAL STRANGULATION CRIMES

Background

Non-fatal strangulation is one of the most lethal forms of domestic and sexual violence experienced by those who are victimized in their intimate relationships. In Orleans Parish, however, non-fatal strangulation is rarely prosecuted in domestic violence incidents. The NOHD's DV & SA Program found that in 2022, 349 individuals were charged with domestic abuse battery involving strangulation (L.S. 14.35.3(L)) or relative to battery of a dating partner (strangulation) (14.34.9(B)5).

Of those 349 individual arrests, nearly half had their charges refused or dismissed. Less than 15% plead guilty to any charge and very few individuals were ultimately convicted of committing strangulation (3.3%). 86% of individuals sentenced for strangulation-related charges had their sentences suspended. ³⁹

Progress on Recommendation

Various agencies in Orleans Parish have worked for over a decade to increase awareness and skill around identifying and responding to non-fatal strangulation cases. Some initiatives from NOHD have included first responder trainings, technical assistance for healthcare providers, and analyses of criminal legal processes for victims and prosecution outcomes for defendants. However, arrest and prosecution rates for non-fatal strangulation remain low.

2021 DAFR Recommendation

- Conduct comprehensive risk assessments (including history of strangulation) at charge conferences and arraignments of offenders as a means of assessing bail amounts
- Establish immediate contact with victims who can provide accurate and comprehensive account of strangulation history to prosecution and judges to assess risk level of offenders
- Increase training to criminal legal professionals on strong correlation between those who strangle and those who kill— both their victims and also law enforcement responding to calls.
- Increase use of forensic evidence to decrease dependence on victim cooperation to prosecute strangulation.

FINDING 4: PREVIOUS STRANGULATION

INCREASE AWARENESS OF NON-FATAL STRANGULATION LETHALITY

Background

Women who experience nonfatal strangulation by their partner are 750% more likely to be murdered by that same person. Those who experience strangulation may also experience significant long-term consequences including traumatic brain injury, psychological injury, and memory problems. Death from strangulation can occur days or weeks after the attack due to carotid artery

dissection and respiratory complications. Oftentimes, even in fatal cases, there are no external signs of injury. 40

2021 DAFR Recommendation

- Require Roll Call trainings to instruct NOPD officers on the signs of non-fatal strangulation, documenting related evidence, and appropriate charging so that officers are equipped with the knowledge and skills to handle those scenes using the appropriate interventions.
- Provide strangulation training for EMT and Paramedic teams so that they are able to identify signs and symptoms of injuries that may otherwise be overlooked or minimized.
- Create public service awareness campaigns to educate the general public about the risk associated with non-fatal strangulation and the importance of seeking medical assistance after an event.

FINDING 5: REDUCED AND REFUSED CHARGES

INCREASE PROSECUTION OF DV RELATED CRIMES

Background

The Metro Crime Commission found that in 2021 Orleans Parish had a felony arrest to felony conviction rate of only 15%. The DA's office refused, dismissed or pled down to misdemeanor charges the vast majority of charges for violent crime. DV crimes were no exception. That year, 43% of all open felony domestic violence charges were dismissed and 32% were refused. An additional 20% of cases were pled down to a misdemeanor. ²⁷

Of note is the significant impact of pled down charges. Felony DV charges that are pled down to non-DV misdemeanors, like simple assault, are not eligible for victim protections or sentencing enhancements for repeat offenders. Since 2018, NOHD has found 10% of individuals who are charged with a DV crime will recommit another DV offense within the same year. Prosecuting for DV related crimes is imperative to enhance punishments for those who continue to reoffend

and commit DV crimes and to provide appropriate services and safety measures to victims. ³⁶

- Prioritize evidence-based prosecution that deemphasizes the role and participation of the victim when determining case disposition.
- Use DV enhancements in cases where an individual has previously been sentenced for Domestic Abuse Battery or Battery of a Dating Partner.
- Increase requests for Gwen's Law Hearings to empower the court system to review, before a bail hearing, factors that may demonstrate defendants are an imminent danger to any other person or the community.



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 policymakers, 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. These recommendations were first offered in the 2020 NODAFR Report and continue to be important strategies for preventing future DV fatalities.

Recommendation in progress:

- Prioritize Protection Orders
- Centralize Criminal Legal Information
- Provide Conflict Resolution Skills as Violence Prevention Programming
- Support Families Experiencing Violence
- Promote Firearm Safety and Storage
- Support People Living with Serious Mental Illness

FINDING #1: REPEATED LAW ENFORCEMENT INTERVENTION

PRIORITIZE PROTECTION ORDERS

Background

Criminal protection orders are a crucial tool used by victims of domestic abuse to enhance safety, prevent escalating violence, and prevent those who caused them harm from causing further harm. In additional to being a deterrent to abusers, protection orders empower law enforcement to make arrests for menacing or harassing behavior towards victims of domestic violence, that might otherwise not rise to the level of a crime. In order for protection orders to be effective, however, it is crucial for law enforcement to respond quickly to violations and for courts to take violations seriously.

2020 DAFR Recommendation

- Enhance follow-up protocols and enforcement mechanisms to ensure the effectiveness of protection orders in protecting those experiencing domestic abuse. those experiencing domestic abuse.
- Collaborate with legal and mental health professionals to create opportunities for providing access to mental health resources and needs at the time of issuing protection orders.

Strategies Implemented

In 2020, NOHD convened a series of meetings exploring protection order processes to identify strengths and challenges of the current system. Over a multi-year period, government agencies in Orleans Parish identified and intervened in several issues related to the enforcement of protection orders. Issues identified for mitigation included improving the quality of POs submitted by Criminal District Court, increasing the percentage of offenders served POs before OPSO release, and decreasing the lag time between when a PO is issued and when it is available in law enforcement electronic records systems.

2021 DAFR Recommendation

- Embed an advocate in Criminal District Court to support victims seeking protection orders or participating in court proceedings related to DV.
- Leverage the Justice Tech Overhaul to improve electronic systems related to PO enforcement so that criminal court, civil court, NOPD, and OPSO systems communicate real-time updates when orders are served, dissolved, violated, or prohibit possession of firearms.
- Leverage criminal court appearances to arrest offenders who are charged with violation of protection order but are not arrested at time of the charge.
- Ensure defendants receive a copy of any protection orders to which they are subject prior to release from OPSO.
- Increase the number of victims who have paper copies of TRO and POs to decrease law enforcement reliance on registry verifications.

FINDING #1: REPEATED LAW ENFORCEMENT INTERVENTION

CENTRALIZE CRIMINAL LEGAL INFORMATION

Background

The New Orleans Criminal Justice system has multiple databases used by various agencies to house data, leading to a scattered law enforcement response. Lack of coordination impacts agencies' abilities to efficiently and effectively execute warrants, identify repeat law enforcement interactions, and determine probation violations opportunities for providing access to mental health resources and needs at the time of issuing protection orders.

2020 DAFR Recommendation

- 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.

Strategies Implemented

In 2022, the City of New Orleans embarked on the "Justice Tech Overhaul" to update justice technology with the objective of providing timely and accurate information, improving confidentiality, and supporting evaluation processes. The overhaul project is scheduled to be completed by 2026.

2021 DAFR Recommendation

- Replace legacy systems currently employed by the criminal legal system including the Police Records Management System, Criminal Court Case management, and Jail Management System to reduce redundant data entry and increase system-to-system communication.
- Link key records for cross-system defendant/charge tracking to ensure NOPD is able to track outcome of arrest charges.

FINDING #2: HISTORY AND ESCALATION OF VIOLENCE

PROVIDE CONFLICT RESOLUTION PROGRAMMING

Background

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." 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.

2020 DAFR Recommendations

- 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.

Strategies Implemented

Several community-based organizations have made significant progress creating programs that prevent violence by de-escalating conflict. NOHD has also worked to expand its impact on violence prevention. In 2023, NOHD created the Office of Violence Prevention to lead the city's response by coordinating partnerships with health care institutions, community organizations, service providers, and academic expertise to implement evidence-based strategies to prevent violence and promote peace. These strategies include programs like Ubuntu Village, UMC's Hospital-based Violence Interrupter Program, and a partnership with the Trauma Recovery Center.

2021 DAFR Recommendations

- Invest in the Hospital-based Violence Interrupters program designed to interrupt cycles of violence and support victims who are healing from trauma.
- Increase funding and support for community-based organizations implementing comprehensive evidence-based conflict resolution programs that include community mediation.
- Expand previously implemented strategies by increasing collaboration and coordination between community and government based interventions.

SUPPORT FAMILIES EXPERIENCING VIOLENCE

Background

Children in New Orleans experience rates of post traumatic stress disorder

(PTSD) at 3x the national average. 42 Exposure to complex trauma can impact children's brain development, immune system, and stress-response systems and increases a child's risk of developing in adulthood chronic health issues like depression, diabetes, heart disease, and cancer. 43

While the lasting impact of violence is clear, there are limited resources available for families who are experiencing violence within their homes outside of the context of IPV. This is because agencies dependent on certain funding streams often are restricted from providing services to those experiencing family violence that does not qualify as IPV.

2020 DAFR Recommendation

- 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.
- Encourage collaboration between 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.

Strategies Implemented

In 2024, the City of New Orleans through the Office of Criminal Justice Coordination created the Victims and Survivors Assistance project and funded it through a \$225,000 of the City's American Rescue Plan Act (ARPA) allocation. The goal of this funding is to develop and/or expand programs that improve access to services, promote well-being, and support trauma-informed approaches to support victims and survivors of violent and non-violent crimes. Several programs were selected to receive a grant between \$50,000 and \$175,000; funding programs that are to be implemented by 2026 and that will serve no less than 500 residents each.

2021 DAFR Recommendation

- Expand low-cost therapeutic services for children, adults, and families experiencing violence.
- Create robust referrals networks that screen for PTSD in children and refer to agencies providing trauma informed care and trauma recovery support.
- Create public awareness campaigns that educate about the association between PTSD and living in a home characterized by domestic violence.
- Train law enforcement about the impact DV has on children and strategies they can use to respond to the incident in a trauma informed manner.
- Continue to 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.

FINDING 6: ACCESS TO FIREARMS

PROMOTE FIREARM SAFETY AND STORAGE

Background

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. ⁴⁴ Firearm storage can also prevent those who legally can't have guns from accessing them, as well as prevent unintended discharges from causing injury or death. ⁴⁵

2020 DAFR Recommendation

- Strengthen and enforce firearm transfers from prohibited possessors of firearms.
- Promote safe firearm storage, including 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.

Strategies Implemented

Beginning in 2018, the New Orleans Health Department convened a task force to coordinate the implementation of new state legislation on transferring firearms away from people who are prohibited from possessing firearms due to domestic violence charges. In 2023, the taskforce completed a guide for criminal legal agencies to establish a standardized process for firearm transfers.

The New Orleans Health Department's Office of Violence Prevention has also developed a firearm storage and safety program designed to provide gun safes, cable locks, and educational materials to promote gun safety and secure gun storage to prevent injury and death. Since its inception in 2023, the program has distributed 900 biometric firearm safes to individuals along with brief firearm safety training. NOHD followed up after 6-12 weeks and 83% of safe recipients reported using the lockbox to store their firearms.

2021 DAFR Recommendation

- Increase literacy in and use of the Firearm Transfer Process Guide to achieve standard and universal application of firearm transfer processes.
- Fund public awareness campaigns that combat the false belief that guns make homes safer and educate the public on the risks associated with gun ownership.
- Overhaul electronic systems related to protective order enforcement so that criminal court, civil court, NOPD, and OPSO systems communicate real-time updates allowing law enforcement to efficiently identify if a suspect is prohibit from possessing a firearm due to an active PO.
- Expand funding for gun safety education and safe storage programs to increase number of Orleans Parish residents storing firearms safely.

FINDING 7: UNTREATED/ UNMANAGED SERIOUS MENTAL ILLNESS

SUPPORT PEOPLE LIVING WITH SERIOUS MENTAL ILLNESS

Background

People 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. 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.

2020 DAFR Recommendation

- 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.
- Invest in community-based mobile crisis units to provide immediate on-site assistance and connect individuals to care.

Strategies Implemented

The City of New Orleans, through NOHD has partnered with Resources for Human Development (RHD) Inc., a non-profit organization, to operate a Community Responder Model (CRM) program integrated within the existing City of New Orleans' local 9-1-1 emergency response dispatch system. When someone in Orleans Parish calls 9-1-1 to report a nonviolent behavioral health crisis, the call is diverted to the Mobile Crisis Intervention Unit (MCIU) and answered by a professional trained in community behavioral health crisis care response 24

hours a day, seven days a week, 365 days a year. The MCIU expert will assess the call to determine the severity of the crisis. If the concern or crisis cannot be resolved over the phone, a MCIU team will be already dispatched and on the way to the location of the crisis.

2021 DAFR Recommendation

- Expand quantity and capacity of inpatient psychiatric care centers to meet community need for extended care stays.
- Increase collaboration between caregivers and hospital staff to ensure outpatient care is scheduled before an individual is discharged from inpatient care.
- For caretakers of individuals with SMI who have not been compliant with regular medication management and have been hospitalized multiple times for psychiatric needs, utilize the Assisted Outpatient Treatment (AOT) program: a civil court order for outpatient mental health treatment.
- Support programs that prevent escalation and provide early intervention though safety planning, psychotropic medicine management, case management, and capacity building.
- Reduce number of programs and touchpoints required to provide comprehensive mental health care for individuals moving from inpatient to long-term outpatient care.
- For caretakers of individuals who are experiencing psychosis for the first time, connect with Tulane's Early Psychosis Intervention Program (EPIC-NOLA) to improve long-term mental health outcomes with early intervention.

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APPENDIX

Preventing fatal and non-fatal domestic violence in Orleans Parish requires a comprehensive, coordinated response from all entities that support victims, hold offenders accountable, and work to prevent violence before it occurs. Based on 2021 key findings, the NODAFR Team offers recommendations for the criminal legal system, policymakers, government agencies, community organizations, and for improving the NODAFR.

Recommendation One-Pagers:

- Recommendations for Criminal Legal System
- Recommendations for Policymakers
- Recommendations for Government Agencies
- Recommendations for Community Organizations
- Recommendations for Improving the NODAFR



RECOMMENDATIONS FOR THE CRIMINAL LEGAL SYSTEM

The Criminal Legal System plays a central role in disrupting cycles of escalating family and intimate partner violence by protecting victims and holding offenders accountable. By improving procedures, increasing training, and expanding crossagency collaboration, the criminal legal system can ensure citizens have effective and efficient systems to keep their communities safe.

Issue

Recommendations

48% of suspects had prior criminal histories of two or more domestic violence related charges.

- Apply DV sentencing enhancements in cases where an individual has previously been sentenced for Domestic Abuse Battery or Battery of a Dating Partner.
- Increase utilization of Gwen's Law Hearings. Gwen's Law Hearings can help to increase victim safety and engagement to support improved prosecution rates.
- Prioritize evidence-based prosecution that deemphasizes the role and participation of the victim when determining case disposition.

In 28% of fatalities, the suspect had previously committed non-fatal strangulation against a dating partner or family member.

- Conduct comprehensive risk assessments (including history of strangulation) at charge conferences and arraignments of offenders as a means of assessing bail amounts.
- Establish immediate contact with victims who can provide accurate and comprehensive account of strangulation history to prosecution and judges to assess risk level of offenders.
- Increase training to prosecution on strong correlation between those who strangle and those who kill— both their victims and also law enforcement responding to calls.
- Require Roll Call trainings to instruct NOPD officers on the signs of non-fatal strangulation, documenting related evidence, and appropriate charging so that officers are equipped with the knowledge and skills to handle those scenes using the appropriate interventions.

RECOMMENDATIONS FOR CRIMINAL LEGAL SYSTEM

Issue	Recommendations
20% of suspects had one or more active protection orders against them.	 Create an advocate position in Criminal District Court to help victims navigate Criminal Protection Order processes. Leverage Criminal District Court appearances to arrest offenders who are charged with violation of protection order but are not arrested at time of the charge. Ensure defendants receive a copy of any protection orders to which they are subject prior to release from OPSO. Increase the number of victims who have paper copies of TRO and POs to decrease law enforcement reliance on registry verifications.
62% of the domestic abuse fatalities were committed using a firearm.	 Overhaul electronic systems related to protectiv order enforcement so that criminal court, civil court, NOPD, and OPSO systems communicate real-time updates allowing law enforcement to efficiently identify if a suspect is prohibit from possessing a firearm due to an active PO.
4 suspects had one or more active warrant at the time of the fatal event.	 Flag individuals who have five or more open and active DV warrants to initiate NOPD's Violent Offender Warrant Squad to arrest those individuals. Link key records for cross-system defendant/charge tracking to ensure NOPD is able to track outcome of arrest charges.

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, policymakers 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 Allocate funding to improve and make more accessible In 38% of fatalities. support services for families with young children, there were one or including Healthy Start, Family Connects, and early more children in the intervention mental health care. home under the age • Support programs that offer low-cost or sliding scale of one. daycare and respite care options. • Increase funding for AIR program to decrease the time between incident and victim outreach by expanding the number of AIR staff conducting outreach. History and • Support community-based programs that provide early escalation of violence intervention to families and relationships in conflict was documented in through safety planning, case management, and over half of the 2021 resource referrals. fatalities. • Expand programs that provide low-cost, safe housing to ensure that when leaving unsafe living situations people have alternative housing options available. • Support programs that prevent escalation and provide early intervention though safety planning, psychotropic In 20% of fatalities. medicine management, case management, and the suspect lived capacity building. with untreated and • Expand quantity and capacity of inpatient psychiatric unmanaged SMI. care centers to meet community need for extended

care stays.

RECOMMENDATIONS FOR POLICYMAKERS

mediation.

Recommendations Issue • Expand funding for schools seeking to implement evidence-based violence prevention curriculum and educator training on their campuses. In 62% of fatalities, an • Invest in the Hospital-based Violence Interrupters immediate program designed to interrupt cycles of violence and argument support victims who are healing from trauma. precipitated the • Increase funding and support for community-based lethal event. organizations implementing comprehensive evidencebased violence prevention education and conflict resolution programs that include community

RECOMMENDATIONS FOR GOVERNMENT AGENCIES

Government agencies, including criminal legal 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

In 38% of incidents, a child under the age of one was within the family unit.

- Institute universal prevention education about healthy relationships, domestic violence, parenting skills, and available resources at all agencies that provide services for new parents.
- Create robust referrals networks that screen for PTSD in children and refer to agencies providing trauma informed care and trauma recovery support.
- Create public awareness campaigns that educate about the association between PTSD and living in a home characterized by domestic violence.
- Continue to 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.

In 62% of fatalities, an immediate argument precipitated the lethal event.

- Create a comprehensive report on the state of violence prevention education in Orleans Parish across charter, private, and public systems to to inform universal implementation and evaluation efforts.
- Develop an evaluation and assessment tool to determine impact and efficacy of social emotional learning programs as a violence prevention intervention in Orleans Parish schools.

RECOMMENDATIONS FOR GOVERNMENT AGENCIES

Issue

Recommendations

In 28% of fatalities, the suspect had previously committed non-fatal strangulation against a dating partner or family member.

- Provide strangulations training for EMT and paramedic teams so that they are able to identify signs and symptoms of injuries that may otherwise be overlooked or minimized.
- Create public service awareness campaigns to educate the general public about the risk associated with nonfatal strangulation and the importance of seeking medical assistance after an event.

62% of the domestic abuse fatalities were committed using a firearm.

- Increase literacy in and use of the Firearm Transfer Process Guide to achieve standard and universal application of firearm transfer processes.
- Fund public awareness campaigns that combat the false belief that guns make homes safer and educate the public on the risks associated with gun ownership.
- Expand funding for gun safety education and safe storage programs to increase number of Orleans Parish residents storing firearms safely.

RECOMMENDATIONS FOR COMMUNITY 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 supportive services, advocating for best interests and needs, and challenging barriers.

Issue

Recommendations

In 62% of fatalities, an immediate argument precipitated the lethal event.

- Implement comprehensive evidence-based conflict resolution programs that include community mediation.
- Develop socio-emotional skill building curriculum to be implemented in primary and secondary schools.

In 38% of incidents, a child under the age of one was within the family unit.

- Institute universal prevention education about healthy relationships, domestic violence, parenting skills, and available resources at all agencies that provide services new parents.
- Create robust referrals networks that screen for PTSD in children and refer to agencies providing trauma informed care and trauma recovery support.
- Expand support programs for family members caring for young children, including counseling services, case management services that offer family safety planning, low-cost childcare, and respite care for caregivers.

In 20% of fatalities. the suspect lived with untreated and unmanaged SMI.

- Increase collaboration between caregivers and hospital staff to ensure outpatient care is scheduled before an individual is discharged from inpatient care.
- Reduce number of programs and touchpoints required to provide comprehensive mental health care for individuals moving from inpatient to long-term outpatient care.
- Provide support in the form of counseling, financial assistance, and case management to family members who are caretakers of adults living with SMI.

RECOMMENDATIONS FOR IMPROVING THE NODAFR

After a second year of implementing the NODAFR, several areas for growth continue to be central to improving 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	 Autopsy reports: can assist with determining the cause and manner of death. They can also confirm if a victim was pregnant at the time 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	 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.



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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