upon further examination

2013 Findings & Recommendations
Connecticut Domestic Violence
Fatality Review Committee

CCADV
Connecticut Coalition Against Domestic Violence

upon further examination

2013 Findings and Recommendations of the Connecticut Domestic Violence Fatality Review Committee

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

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Wethersfield, CT

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This report is dedicated to the 14 victims who lost their lives in 2011 due to intimate partner violence.

Introduction

Since 2001 the Connecticut Domestic Violence Fatality Review Committee ("Committee") has been working to prevent future deaths by conducting multi-disciplinary, systemic examinations of intimate partner homicides in our state. Between 2000 and 2011, 175 people were killed as a result of intimate partner violence. That includes fourteen (14) intimate partner homicides between January 1, 2011 and December 31, 2011, which is the period this report covers.[1]

Led by the Connecticut Coalition Against Domestic Violence (CCADV), the Committee has examined more than three (3) dozen deaths since its work began. This year, the Committee examined several intimate partner homicides that occurred in 2011. Each life lost is a painful reminder that domestic violence remains a pervasive public health and criminal justice problem in Connecticut and that its victims are all too often invisible to those around them.

Domestic violence is a pattern of coercive, controlling behavior that can include physical abuse, emotional or psychological abuse, sexual abuse or financial abuse. It can impact a person regardless of age, gender, economic status, race, ethnicity, religion, sexual orientation or education. The Committee defines domestic violence fatalities as those deaths that arise from an individual's efforts to assert power and control over his/her current or former intimate partner.

According to the U.S. Dept. of Justice, an average of

3 WOMEN

are killed by a current or former boyfriend

EACH DAY IN THE U.S.

A retrospective examination of individual fatalities allows the Committee to comprehensively analyze the strengths and challenges of the community's response to domestic violence. This is done without assigning blame to those individuals, agencies or institutions with which the victim or perpetrator had contact. Instead, it is a reflective review of existing gaps in services, policies, training, and resources that may have played a role in the fatality, with the goal of eliminating those gaps so that future deaths may be prevented.

While much progress has been made in our efforts to improve Connecticut's response to domestic violence, more work lies ahead. This report will provide findings based on the 2011 deaths that were reviewed, as well as highlight some trends present in the Committee's findings over the years. We offer several recommendations that we hope will compliment those previously reported and assist key stakeholders in enhancing their own work with victims, survivors and their families.

Mission

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

Objectives

The Committee's objectives are to:

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

Methodology

The Committee selects deaths to review in which all criminal and civil cases pertaining to the victim and perpetrator are closed with no pending appeals. Once the cases are identified, the Committee conducts a detailed review of all public records and other available documentation related to these homicides, and, when possible, meets with family, friends and individuals who came into contact with the victim.

A timeline is then constructed that focuses on the principal markers of the case and enables the Committee to:

- See how and when the batterer's tactics escalated
- Look at the red flags as they pertain to both the batterer and the victim
- Review community involvement in the case
- Make recommendations to community stakeholders

The following collection tools are employed by the Committee during a case review:

Medical Examiner Reports	Gathered to determine cause and manner of death, as well as age, gender and race of victim.
Police Reports	Used to determine if known circumstances of domestic violence existed prior to the fatality and to gather data regarding the circumstances surrounding the homicide.
Criminal Justice Inquiry	Public information is gathered from both the CT Judicial Branch, pertaining to past restraining orders, pending divorce proceedings, child custody motions, etc., and the CT Department of Correction, pertaining to the sentencing status of an offender.
Interviews	Although not required, interviews with friends and family members of the victims are conducted when possible. These individuals are contacted in advance to explain the fatality review process and invite them to meet with Committee representatives. The Committee recognizes that their insights are unique and can be an important part of making the victim's voice heard.
Media Reports	CCADV maintains an inventory of all domestic violence related articles and those related to fatalities are cataloged for use in the review process.

Overview

Purpose of Report

The purpose of the report is to:

- Strengthen safety and justice for victims and accountability for offenders
- Give a voice to the victims and their loved ones so that we may learn from their circumstances
- Increase awareness and promote critical thinking about the problem of domestic violence
- Serve as a practical tool to facilitate change in our service system, our communities and our culture

Definitions

The homicides that are considered "intimate partner homicides" by the Committee and included in the statistics throughout this report are those individuals that are killed by a current or former intimate partner.

The homicide statistics found in the report do not include bystanders, such as other family members who may also have been killed, nor do they include perpetrators of intimate partner homicide who later take their own lives. While these deaths are very meaningful, the Committee focuses its reviews on the primary victim.

Trends

Over the years, the CT Domestic Violence Fatality Review Committee has identified several recurring themes in the cases reviewed:

- **Stalking often precedes the final fatal act.**
- **Victims are at high risk for fatality when attempting to end a violent relationship.**
- **Firearms remain the most frequently used weapon in intimate partner homicides.**
- **Children often witness much of the abuse and too often are present for the final violent act.**
- **Victims and their family, friends and co-workers often do not know where to turn for help.**
- **Victim-blaming remains common in the systemic response to domestic violence.**
- **There is need for greater public awareness about domestic violence and, in particular, bystander intervention strategies.**

175

intimate partner homicides

in Connecticut between 2000 - 2011

2011 Homicides

The following fourteen (14) women senselessly lost their lives due to intimate partner violence in 2011[2]:

Jocelyn Rodriguez	February 14, 2011	New Haven
Jaclyn Fitzgerald	February 24, 2011	East Hampton
Lynda Sanon	March 19, 2011	New London
Wendy Warzeniak	June 8, 2011	Wallingford
Saudina Mehovic	June 11, 2011	Southington
Susan Mazzarella	July 4, 2011	Wallingford
Natalie Ramirez	August 22, 2011	Danbury
Sharon Detlefsen	September 23, 2011	Southbury
Catherine Fox	September 23, 2011	Milford
Christine Jeffreys	September 29, 2011	Bridgeport
Linda Graveline	October 4, 2011	Waterbury
Frances Piscitelli	October 8, 2011	Hamden
Suzete Berrincha	November 3, 2011	West Hartford
Alyceson Archer Williams	December 15, 2011	Hartford

Findings & Recommendations

Meeting the Needs of Children

Intimate partner violence has far-reaching implications for the family and friends of those involved. This is especially true when the couple has children. Children often see, hear and remember more than adults suspect. Witnessing domestic violence can have a devastating impact on children, even more so for those either present at a homicide or left behind after the death of a parent.

According to the Attorney General's National Task Force on Children Exposed to Violence, an estimated 3,500 – 4,000 children witness fatal family violence each year in the United States.[3] Here in Connecticut, approximately 63 children were present at the scene during 33 fatal family violence incidents between 2000 and 2011.[4] Children who witness one parent kill another parent suffer unique and severe trauma.[5] How they are treated in the immediate aftermath of the fatality, as well as the weeks and months that follow, has a significant impact on their future well-being.

Of the four (4) cases reviewed this year, children were present in the home during two (2) of the homicides while in another case children had witnessed years of violence leading up to the homicide. Following the homicide of a parent, meeting the needs of law enforcement and child protective services can be complicated, and while we must recognize that time is of the essence when the perpetrator is at-large, we must also be cognizant of the trauma suffered by the children of the deceased parent and how the subsequent investigation can amplify that trauma. It is critical that Connecticut develop comprehensive strategies and consistent policies that address the emotional needs of child witnesses during a homicide investigation.

Research shows that reducing the number of times a child is interviewed can minimize the psychological harm done to them.[6] In one case reviewed this year, a child was interviewed three separate times in the hours immediately following the death of a parent despite asking not to have to tell the story again and asking for permission to go to sleep. All of this while the perpetrator, having already confessed to the crime, was in custody. It is critical that children not only be interviewed by professionals trained in trauma-informed forensic interviewing techniques, but also that systems be coordinated so that the number of interviews can be minimized.

Recommendations:

1.1 Connecticut should implement for use by health and human service professionals a validated, evidence-based screening tool to identify the traumatic effects that witnessing violence, in particular family violence, has on children and increased funding must be prioritized to provide on-going support to these children.

1.2 Connecticut's Family Violence Model Policy Governing Council should consider the following additions to the statewide model law enforcement policy on family violence:

1.2.1 Law enforcement, including homicide detectives, responding to a domestic violence fatality where children are present should, unless necessary because the perpetrator is a flight risk or a risk to community safety, delay interviewing children at the scene until an Emergency Mobile Psychiatric Services Unit (EMPS) is called via the state's 211 system and has arrived at the scene. EMPS staff is funded through the CT Department of Children and Families (DCF) and is trained to assist children experiencing trauma.

1.2.2 Unless the perpetrator is a risk to community safety, first responders at the scene of a domestic violence fatality who need to interview a child should only conduct a minimal facts interview that will not jeopardize the integrity of the subsequent forensic interview.

1.2.3 Only forensic interviewers trained in non-leading, legally defensible interviews (e.g., *ChildFirst*, which is currently used in Connecticut) should interview children following a domestic violence-related homicide.

1.2.4 When interviewing children following a domestic violence fatality, law enforcement should coordinate with DCF and any other relevant members of the criminal justice system to ensure that, when possible, only one forensic interview is conducted and that it is done in a child-friendly environment.

1.3 The CT Police Officer Standards and Training Council should include training on minimal facts interviewing as part of law enforcement recertification training for domestic violence.

1.4 CCADV should provide increased training opportunities for law enforcement related to children and trauma.

Findings & Recommendations

Judicial System Response

The criminal justice system plays a considerable role in the lives of many domestic violence victims. Last year CCADV member program staff known as Family Violence Victim Advocates (FVVAs), located in courts throughout the state, worked on more than 43,000 domestic violence-related criminal cases. FVVAs engage in critical safety planning with victims and assist them with understanding the legal process and methods for presenting their cases effectively to a judge. The parties involved with all fatalities reviewed this year had prior exposure to the justice system either through previous arrests or the acquisition of restraining orders by the victim.

Connecticut's Judicial Branch is committed to its role of reducing domestic violence crimes. Though often challenged by the enormous volume and competing needs of various types of cases, it is vital that all Judicial Branch staff be trained on the dynamics of domestic violence and methods for enhancing victim safety and increasing offender accountability. Judges have a unique opportunity to alter the dynamic of power and control abusers hold over their victims, while many other court personnel, such as clerks, are often in a position to pass along essential information to aid victims.

In one year

FVVAs

were involved in

43,000

DOMESTIC VIOLENCE cases in CT's criminal courts

Recommendations:

2.1 Judicial Branch staff and FVVAs should ensure that policies are in place to increase victim awareness of the fact that, pursuant to Connecticut General Statutes § 46b-15c, court hearings in family relations matters can be conducted through the use of closed circuit television when one party is subject to a restraining order, protective order or standing criminal protective order.

2.2 The CT General Assembly should allocate funding to make FVVAs available in all courts that issue civil restraining orders.

2.3 The Judicial and Executive Branches should continue to bolster training for judges and prosecutors regarding the dynamics of domestic violence and the lethal risk factors often present for those victims who have become involved in the criminal justice system. Training should address the seriousness of any violation of a court order, whether or not that violation included violence, and the immediate danger a victim faces when a violation occurs.

2.4 CCADV should conduct research on the feasibility, including the potential benefits and consequences of incorporating domestic violence-specific offenses into the state's penal code.

Findings & Recommendations

Impact of Technology

Technology has played an increasingly prominent role in intimate partner violence (IPV) over the years. While it can certainly be used to benefit victims, more often than not technology is used by offenders to control, coerce and stalk their victims. This year, the use of technology was present in all cases reviewed.

Some manners in which the use of technology impacts abusive relationships include harassing a victim (e.g., sending unwanted text messages), stalking a victim (e.g., tracking software that can be discretely downloaded onto the victim's phone without his/her knowledge) and coercing a victim into talking to the offender (e.g., using caller-ID spoofing to alter the way the offender's phone number appears on the victim's caller-ID so that the victim thinks someone else is calling).

Social media is also a frequent factor in abusive relationships. Individuals may innocently report information online that can either be used to harm them (e.g.: their location) or, with or without intention, anger/trigger an abusive person. Increased understanding about the permanency, public availability and potential impact of information placed online is critical to overall victim safety.

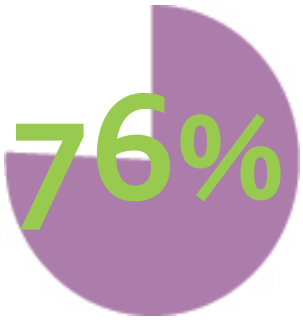
Rapid advancements in technology have also left many in the law enforcement and criminal justice systems scrambling to keep up as they work to investigate technology-assisted crimes. Regular and consistent training on this ever-changing issue will be an important component to offender accountability.

Recommendations:

3.1 Connecticut's Family Violence Model Policy Governing Council should consider for inclusion in the statewide model law enforcement policy on family violence any existing best practices for evidence preservation in technology-assisted crimes.

3.2 CCADV should, through member program standards, implement enhanced safety planning strategies that incorporate comprehensive electronic evidence preservation techniques in order to empower advocates and victims to collect and preserve critical evidence for criminal proceedings.

3.3 Law enforcement, judges, prosecutors, and Judicial Branch Family Services staff that work with victims of domestic violence, as well as all domestic violence victim advocates, should receive regular, up-to-date training on the role of technology in abusive relationships, how to identify it, and evidence preservation techniques in technology-assisted crimes. This should include periodic cross-training so that all parties can have an active dialogue and understanding about evidence preservation techniques that will facilitate arrests and successful prosecutions.



OF FEMALE IPV HOMICIDE VICTIMS WERE STALKED BY THEIR INTIMATE PARTNER[7]

To learn more about technology safety visit the National Network to End Domestic Violence Safety Net Project at www.nnedv.org/projects/safetynet.

RAISING PUBLIC AWARENESS

The need for increased public awareness remains a consistent recommendation of the Committee. Sadly, many victims do not realize the vast services and supports available to them. This is also true for the family, friends and co-workers of victims. Additionally, it has been noted by family and friends of perpetrators of intimate partner homicide that they recognized mental illness or substance abuse issues prior to the fatality but did not know how to help.

CCADV has increased training regarding the dynamics of domestic violence considerably in recent years with the establishment of the CCADV Training Institute and the addition of a full-time law enforcement coordinator who provides training to police officers. There have also been significant efforts to strengthen partnerships with key stakeholders that promote training and awareness, such as the Division of Criminal Justice and local hospitals. However, more work is needed.

Education is a key element in changing attitudes and behaviors. Public funding must be prioritized to increase public awareness about domestic violence. Money spent on consistent messaging that impacts behaviors and attitudes increase the likelihood that fewer dollars will be needed for intervention services after the violence has begun. Additionally, it is incumbent on all professionals who may come into contact with victims to learn about the nature and impact of domestic violence.

RECOMMENDATIONS:

4.1 The CT General Assembly must allocate funding to the CT Department of Public Health for a biennial, statewide public awareness campaign aimed at the prevention of domestic violence.

4.2 CCADV should develop tools for employers to use in the workplace so that they can create safe, supportive environments and easily link victims to community-based services and resources.

4.3 CCADV should, through member program standards, require that all members demonstrate a comprehensive support system for domestic violence victims that incorporates both traditional and non-traditional community-based support services for a range of ancillary issues experienced by victims (e.g., addiction, gambling, etc.).

4.4 CCADV should partner with the CT Department of Public Health, the CT Medical Society, and the CT Chapters of the National Association of Social Workers and the American Association of Marriage and Family Therapy to enhance continuing education requirements for medical professionals and therapists, identify opportunities for cross-training, and research the availability and potential use of evidence-based screening tools to identify victims or individuals at risk of perpetrating intimate partner violence.

STATISTICS

In 2011:

14 WOMEN

were ***MURDERED*** by a current or former ***BOYFRIEND*** or ***HUSBAND***

(accounts for all of the 2011 initmate partner homicides)

GUNS were used in

4 HOMICIDES

KNIVES were used in

7 HOMICIDES

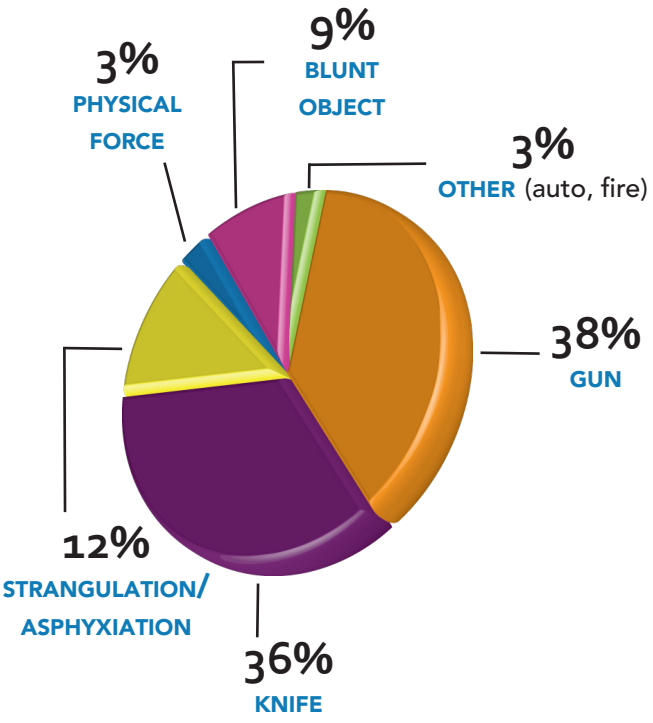
3 HOMICIDES

were committed by either ***STRANGULATION*** or a ***BLUNT OBJECT***

Between 2000 - 2011:

175

INTIMATE PARTNER HOMICIDES



153 FEMALE VICTIMS

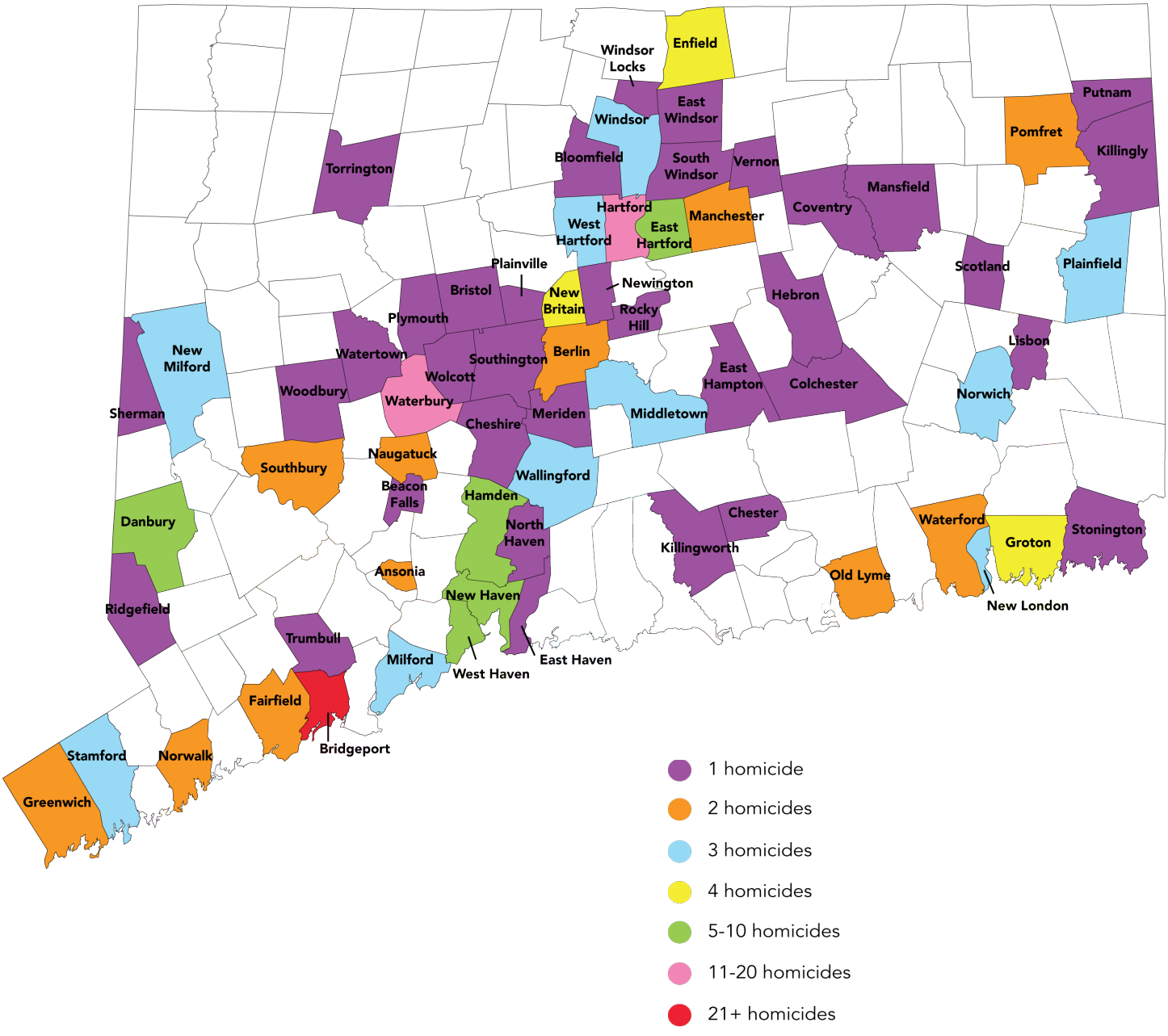
19 FEMALE PERPETRATORS

22 MALE VICTIMS

156 MALE PERPETRATORS

*Percent total does not equal 100 due to rounding.

Intimate Partner Homicides
2000 - 2011



Guns & Domestic Violence

> *"The President and I believe we have an obligation as a country to do more to end this violence. We can't just stand by while these murders keep happening year after year. . . .The issues of domestic violence and efforts to reduce gun violence are connected. And they both require urgent action."*
>
> *Vice President Joseph Biden*
> *March 13, 2013*

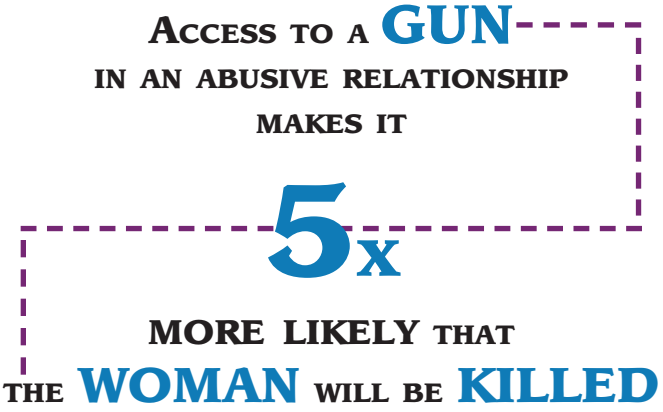
Guns are the number one weapon used in intimate partner homicides in Connecticut. Between 2000 and 2011, 66 people in Connecticut were killed by an intimate partner who used a gun. Of all women killed with a firearm in the United States in 2010, more than two-thirds of them were killed by an intimate partner.[8]

The presence of firearms drastically increases the likelihood that a violent relationship will turn fatal. Research by national expert Dr. Jacqueline Campbell demonstrates that access to firearms increases the risk of intimate partner homicide more than five times compared to instances where there are no weapons. Those abusers who possess guns also tend to inflict the most severe abuse on their partners.[9]

Beginning in 2012, CCADV and our member agencies partnered with the CT Police Officer Standards & Training Council and several state and local law enforcement agencies to pilot the Lethality Assessment Program (LAP). By utilizing a nationally recognized risk assessment tool and strengthening partnerships between law enforcement and local domestic violence providers, LAP seeks to ensure that those victims facing the greatest risk of lethal violence are immediately connected with services. The top indicator used by law enforcement to predict high danger is whether the abuser has ever used or threatened to use a weapon against the victim.

It is important for individuals who safety plan with domestic violence victims to consider an abuser's access to firearms. This includes potential access to firearms owned by the victim. A 2003 study of female domestic violence victims residing in California who purchased handguns demonstrated that "purchasing a handgun provides no protection against homicide among women and is associated with an increase in their risk for intimate partner homicide."[10]

Connecticut law prohibits individuals subject to restraining or protective orders (excluding ex parte restraining orders) from possessing firearms. Those individuals must either surrender their firearms to law enforcement or sell them to a federally-licensed firearms dealer. While recently enacted gun safety laws in Connecticut will make it more difficult for prohibited persons to obtain firearms from private sellers, more work must be done at the federal level to implement universal background checks to keep guns out of the hands of domestic abusers.



Kids & Domestic Violence

Over 15 million children witness domestic violence each year across the country.[11] As previously mentioned, at least 63 children were present at the scene during 33 fatal family violence incidents in Connecticut between 2000 and 2011. Children who witness intimate partner violence within their family face a greater risk of developing severe and potentially lifelong problems with physical health, mental health, and school and peer relationships, as well as disruptive behavior. According to the U.S. Attorney General's National Task Force on Children Exposed to Violence, witnessing domestic violence can destroy a child's core sense of security and trust and create deep feelings of helplessness, guilt and shame when they cannot make the violence stop or protect the non-offending parent.

The Child Witness to Violence Project (CWVP) is a therapeutic, advocacy, and outreach project that focuses on the growing number of young children who are hidden victims of domestic and community violence and other trauma-related events. It is run under the auspices of the Department of Developmental and Behavioral Pediatrics at Boston Medical Center.

CWVP offers some important tips for parents and caregivers of children exposed to violence:

What you may see if a child is having trouble:

- Sleep troubles, nightmares, fear of falling asleep
- Headaches, stomach aches, aches and pains
- Increased aggressive behavior and angry feelings
- Constant worry about possible danger
- Loss of skills learned earlier, such as toilet training
- Withdrawing from friends and activities
- Not showing feelings about anything
- Having trouble concentrating

How you can support children:

- A helpful, supportive adult is the most powerful tool to help children feel safe.
- Give children permission to tell their story – it helps children to tell their story to a trusted adult.
- Give clear, simple explanations about scary events. Young children do not really understand the true causes of violence and will often blame themselves.
- Build self-esteem in children. Children who live with violence need daily reminders that they are loveable, competent and important.
- Teach alternatives to violence. Help children learn to solve problems and play in non-violent ways.

Visit www.childwitnesstoviolence.org to learn more about CWVP and access additional resources.

Reflections

Where We've Been

Two years ago the Committee published its first set of recommendations aimed at improving Connecticut's systemic approach to domestic violence prevention and intervention. The 2012 report closely examined the state's response to both underserved and not-served populations of victims. Findings stressed the need for more culturally and linguistically appropriate responses that meet the diverse needs and experiences of victims based on their culture and whether or not they have Limited English Proficiency (LEP). To that end, CCADV has undertaken a number of initiatives aimed at improving victim services.

CCADV has hired a full-time Diversity & Accessibility Coordinator who is working with member programs, state and local leaders, and both community and faith-based organizations to improve outreach to underserved and not-served communities. Under the leadership and consultation of a national expert, a series of community conversations were hosted earlier this year to examine the recruitment, engagement and retention of community partners within underserved and not-served populations. These conversations allowed CCADV to assess where victims are receiving services outside of the traditional domestic violence provider system and develop proactive measures for outreach to these victims.

With a focus on creating accessible environments for all victims of domestic violence, CCADV has completed an assessment of all member program facilities to ensure compliance with the Americans with Disabilities Act (ADA). Furthermore, in an effort to develop a comprehensive "state-of-the-state" with respect to diversity and accessibility of domestic violence programs in Connecticut, CCADV will also initiate assessments on accessibility for victims with cognitive disabilities and LEP. Having a complete picture of gaps in the service system will enable CCADV and our member programs to enhance services to traditionally underserved and not-served victims of domestic violence.

Where We're Going

In the coming year CCADV has some exciting new initiatives getting underway. First, the CT Domestic Violence Fatality Review Committee will seek to expand its capacity to conduct multi-disciplinary, systemic reviews by adopting a new sub-committee structure that will allow for the review of near-fatal acts of intimate partner violence. The Near Fatality Domestic Violence Case Review subcommittee will examine the facts and circumstances surrounding near fatal incidents of intimate partner violence. The goal is to inform the Committee's efforts to serve victims of domestic violence by hearing directly from survivors of attempted homicides. This will allow the Committee to learn first-hand what policies or practices survivors feel increased or decreased their safety leading up to the near-fatal incident.

The Committee will continue to review adjudicated intimate partner homicide cases, as well as murder-suicides through the Domestic Violence Fatality Case Review subcommittee. Additionally, a subcommittee focused on research and recommendations will provide critical support to the case review subcommittees through information gathering that will inform Committee deliberations and assist in the development of recommendations. This subcommittee will also revisit past Committee recommendations to review current progress and provide ideas and support for implementation as appropriate.

Also, CCADV will unveil Connecticut's Statewide Plan for the Prevention of Intimate Partner Violence. This is the first effort of this scale in Connecticut to address factors that increase the risk of intimate partner violence and to promote methods for creating healthy, sustainable families and communities. The plan reflects CCADV's commitment to reach out to every resident of Connecticut, including underserved and not-served communities, to help foster the attitudes, skills, behaviors and norms that lead to healthy relationships. The plan targets five strategic areas that impact violence prevention: 1) youth engagement, 2) involving men and boys, 3) public awareness, 4) strengthening and increasing the number of intimate partner violence primary prevention programs, and 5) enhancing results-based accountability of primary prevention initiatives. The plan will be released during the fall of 2013.

For more information, please visit www.ctcadv.org.

Aknowledgements

This report is being issued by Connecticut Coalition Against Domestic Violence (CCADV) and its Domestic Violence Fatality Review Committee.

A special thank you to the family members of the homicide victims who were willing to talk with us about their experiences and those of the victims. We are also grateful to the many professionals in law enforcement and human services who took the time to share their unique experience with, and perspective of, the state's systemic response to domestic violence. And many thanks to interns Lauren Dynia and Tiffany Trowbridge-Bernard for their tireless work to gather the critical data necessary to review these fatalities.

Finally, our deepest gratitude to those who serve on the Committee for their commitment and dedication to preventing future deaths. Their time and expertise is invaluable.

Committee Members

ENDNOTES

[1] For the official homicide tally, the Committee uses the State of Connecticut Family Violence Homicide Report prepared by the CT Department of Emergency Services and Public Protection (DESPP) Crimes Analysis Unit. However, one homicide occurred in 2011 that was identified by the Committee as a clear domestic violence homicide even though it was not included in the DESPP Crimes Analysis Unit report. That homicide is included in this number.
[2] Ibid
[3] National Task Force on Children Exposed to Violence. *Defending Childhood: Final Report & Recommendations*. December 2012; p. 63.
[4] As indicated on page 3 of the report, this data is compiled through police and media reports, as well as the DESPP Crimes Analysis Unit's Family Violence Reporting Program. "Present at the scene" means that children were in close proximity to the homicide (e.g.: in the house), but does not necessarily mean that they visually witnessed the homicide.
[5] Supra note 3, at p. 63.
[6] Tedesco, J.F., & Schnell, S. Children's Reaction to Sex Abuse Investigation and Litigation. *Child Abuse & Neglect* 11. 1987.
[7] McFarlane, Judith, et al. *S*talking and Intimate Partner Femicide. *Homicide Studies* 3, no. 4. 1999.
[8] Violence Policy Center. *When Men Murder Women: An Analysis of 2010 Homicide Data*. September 2012; p. 7.
[9] Campbell, Jacquelyn C., et al. Risk Factors for Femicide in Abusive Relationships: Results from a Multistate Case Control Study. *American Journal of Public Health* 93, No. 7, July 2003, pp. 1089-1097.
[10] Wintemute, Garen, et. al. Increased Risk of Intimate Partner Homicide Among California Women Who Purchased Handguns. *Annals of Emergency Medicine* 41, No. 2, 2003, p. 282.
[11] McDonald, R., et al. Estimating the Number of American Children Living in Partner-Violent Families. Journal of Family Psychology 20, 2006, pp. 137-142.

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