

Getting away with murder II

Violence Against Women Homicide Deaths in 1997–1998

**The New Mexico Female Intimate Partner Violence
Death Review Team**

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Executive Summary

Intimate partner violence is a major public health, social, and criminal justice problem in New Mexico. Every year in our state, an average of 15 women are killed by their intimate partner. The New Mexico Female Intimate Partner Violence Death Review Team (NMIPVDRT) was established in 1997 to review female homicide deaths that resulted from intimate partner violence against women. The findings of the first report, *Getting away with murder*, published in 1998, covered deaths that occurred between 1993 and 1996. This latest report, *Getting away with murder II*, summarizes the team's findings from the 27 female intimate partner violence and 2 sexual assault homicide deaths that occurred in 1997 and 1998.

The NMIPVDRT uses a multidisciplinary model, similar to child fatality review teams, to review violence against women homicide deaths. The goals of the team are to identify factors associated with lethality, to identify failures in the systems that are designed to protect victims, and to develop strategies and recommendations to prevent or reduce future incidents of injury and death. *Getting away with murder II* summarizes the team's findings and highlights possible solutions to improve services.

From the 29 women who were killed, the team learned that the average age of the victim was 36.5 years and the average age of the perpetrator was just under 40 years. In almost 30% of the cases, the perpetrator was more than ten years older than the victim. Three-fourths of the women (72%) died in their homes. Over half of the murders were committed with a firearm. Excessive force was used by over half of the perpetrators, as evidenced by the number of injuries to the victim. Among women who were stabbed to death, the number of separate stab wounds inflicted ranged from 11 to 50. The team also identified 29 children who lost either one or both parents to intimate partner homicide. In over one-half of the cases, the victim had children less than 18 years old, many of whom either witnessed or were present during the homicide. In one-third of the cases, the perpetrators committed suicide after killing their intimate partners. Of the cases that were closed with a sentence and judgment, slightly more than one-fourth of the perpetrators received life imprisonment. Of the remaining cases, the average sentence was 14 years. It is estimated that in most, if not all these cases, the perpetrators will serve only half of their sentences.

The team identified several recurring characteristics that were associated with lethal violence. Team members often noted that there were warning signs to alert victims, friends, family, the community, and service personnel of the severity of the situation. For example, a perpetrator's extreme jealousy can be an indicator of unhealthy and potentially lethal possessiveness.

The team reviewed each case in detail to evaluate the efficiency and effectiveness of the systems that were created to address the issues of violence against women. System failures were identified in the areas of law enforcement; legal, prosecution and judicial systems; legislature; physical and mental health care services; advocacy services; and public awareness and prevention. *Getting away with murder II* provides recommendations for improvement in each area. In each section, we have included vignettes that illustrate in a very poignant way how systems have failed to meet victims' needs. For example, our police services lack a centralized data system with which to identify prior offenses and prior intimate partner violence calls. In some areas, police lack the training to respond effectively. Physical and mental health care providers may be able to identify both victims and perpetrators prior to a potentially fatal incident. Laws passed by our legislature can hold perpetrators accountable for their violence. Judges and prosecutors need efficient access to offender records. Courts need more programs that effectively treat offenders. We in the community need to educate ourselves on the dynamics of intimate partner violence and how to take effective action. We must support advocacy programs. We did not want to focus solely upon system failures. Therefore, we have taken the opportunity to illustrate successful strategies that have been used in various communities in New Mexico to combat intimate partner violence.

The issue of intimate partner violence in New Mexico deserves every individual's attention. Effective solutions will be those created and supported by individuals, communities, and legislators cooperating to address this serious problem.

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Team Members:

(In alphabetical order) Edwina Abeyta, Early Intervention Program, Bernalillo County Metropolitan Court; Sheila Allen, NM Crime Victims Reparation Commission; Jolene Altwies, Office of the Attorney General; Deputy District Attorney (DDA) Julie Altwies, Second Judicial District; Sgt. Louis Armijo, Albuquerque Police Department (APD); Laurie Austin, Albuquerque Public Schools; Kevin Barnas, Children Youth and Families Department (CYFD); Officer Grace Barreras, APD; Officer Alice Bourgoine, APD; Dr. David Broudy, NM Child Fatality Review; Lt. Michelle Campbell, APD; Dr. Betty Caponera, NM Domestic Violence Data Central Repository; Sandra Cashman, Injury Prevention and EMS Bureau, NM Department of Health; Kathryn Chaney, Women's Community Association; Dr. Don Clark, Albuquerque Indian Health Service; Sandra Dietz, Victim Assistance Unit, Second Judicial District Attorney's Office; Shannon Enright-Smith, Resources, Inc.; Latisha K. Frederick, Attorney; Carolyn Ford, Albuquerque Rape Crisis Center; Sgt. Ronald Garcia, NM State Police; Sandra Gardner, Domestic Violence Legal Resources; Elena Giacci, Bernalillo County Prevention of Violence Against Women Coordinator; Pam Gonzales, Victim Assistance Unit, Second Judicial District Attorney's Office; Dr. Lorraine Halinka-Malcoe, UNM MPH Program; DDA Anne Keener, First Judicial District; Dr. Victor LaCerva, NM Department of Health; Agnes Maldonado, NM Coalition Against Domestic Violence; Det. Greg Marcantel, Bernalillo County Sheriff's Department; Assistant District Attorney (ADA) Sylvia Martinez, Second Judicial District; Dr. Jerri McLemore, Office of the Medical Investigator; Cpt. Quintin McShan, NM State Police; Connie Monahan, Albuquerque SANE Collaborative; Special Commissioner Nan Nash, Second Judicial District Court; Lt. Rocky Nogales, APD/DA Liaison; Gwen Packard, Morningstar; ADA Irma Pluemer, Second Judicial District; Dr. Diana Quinn, UNM Psychiatric Emergency Services; Debra Seeley, Full Faith and Credit Project Attorney; Laura Wilkerson, Women's Community Association; and Beverly Wilkins, Peaceful Nations.

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Please accept our apologies for all those who participated or gave us essential information and were left out inadvertently. We would like to say to the families and friends of the victims that the team respectfully acknowledges their loss and, in submitting this report, we hope to raise awareness about the plight of all victims of violence against women.

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Findings

The Office of the Medical Investigator (OMI) identified 58 female homicide deaths in New Mexico in 1997 and 1998. Of these, 25 (43%) involved a perpetrator who was an intimate partner. An additional two female homicide deaths (3%) involved sexual assault. To identify additional potential cases of homicide violence against women, we reviewed all (29) female deaths for which the OMI could not determine the manner of death. From the undetermined deaths the team identified two additional cases that were likely intimate partner homicide. All of the cases involving violence against women were examined in greater detail through the female homicide death review team. Our findings are reported below.

Table 1. Demographic characteristics of the victims and perpetrators.

	Victim N=29		Perpetrator N=31*	
Age (average, in years)	36.6		39.9	
Race				
Hispanic	14	48%	13	42%
Anglo	13	45%	15	48%
American Indian	1	3%	2	6%
Asian American	1	3%	1	3%

*In two cases there were two perpetrators responsible for the death of the victim.

Table 1 provides demographic characteristics of the victims and perpetrators. On average, the victims were about 37 years of age. The youngest woman who died was 18 years of age; the eldest was 65 years of age. The average age of the perpetrators was just under 40 years of age. Most of the perpetrators (23 of 29) were older than their victim. In eight of the 29 cases, the perpetrator was more than ten years older than the victim. The greatest age difference between a victim and perpetrator was 28 years.

Most of the victims were Hispanic (48%) or Anglo (45%), with the remaining being American Indian (3%), or Asian American (3%). The ethnicity of the perpetrators was similar to victims.

One of the cases involved a same-sex relationship, and the remaining 28 involved heterosexual relationships. None of the 29 women were pregnant at the time of death.

Table 2. Living arrangement, relationship of the perpetrator to victim, and presence of minor children.

With whom the victim lived			
Spouse or intimate partner	16	55%	
Children less than 18 years	8	28%	
Alone	5	17%	
Parents or other family members	4	14%	
Children 18 years and older	2	7%	
Roommate	1	3%	
Unknown	1	3%	
Relationship of the perpetrator to victim			
Intimate partner	12	41%	
Spouse	8	28%	
Ex-spouse	6	21%	
Ex-intimate partner	1	3%	
Acquaintance	2	7%	
Presence of minor children			
Cases with minor children	15	52%	
Total number of minor children	29		
Children present at time of homicide	19	66%	
Children witnessed the homicide	14	48%	

Most (55%) of the women who died were living with the person who killed them. In each of two cases, the victim had moved from another state to escape her perpetrator. Two-thirds (69%) of the women were in a current relationship with their perpetrator. One-fourth (24%) of the women were killed by either an ex-spouse or ex-intimate partner. In the two sexual assault homicide cases, the victim knew the perpetrator for a brief time.

In over one-half of the cases (52%), the victim had children who were less than 18 years old at the time of her death. In 44% of the cases, the children lived with their mother. In three cases, the victim sent her children to live with a relative because she was afraid the perpetrator might hurt the children. Children were present at the time of the homicide in one-third of the cases; in nearly one-fourth of the cases, children witnessed the

victim being killed. Of the 29 children, 19 (66%) were in their home at the time of the murder and 14 (48%) actually witnessed the death.

Table 3 details the weapons the perpetrator used, the principal injury that led to the woman's death, and the average number of injuries in cases of penetrating trauma (gunshot and stabbing deaths). The majority of women died as a result of firearm injuries (55%). When a firearm injury occurred, a handgun (69%) was the weapon most often used. Injuries from stabbing or cutting (14%), and strangulation or asphyxiation (14%) were the cause of most of the non-firearm deaths.

In over half the cases, perpetrators used excessive force or "overkill." Fifteen (52%) of the women suffered more than one type of injury, usually blunt trauma in addition to penetrating trauma. Nearly one-half (44%) of the women who died from a firearm also had evidence of blunt trauma. Five of the 16 women who were killed by a firearm were shot more than once. Four women were shot twice; one woman was shot four times. All of the women who died of stabbing or cutting injuries had multiple wounds, having been stabbed between 11 to 50 times.

Most of the women were killed in their homes (72%). An additional 7% occurred at their intimate partner's home. Ten percent occurred in a street, highway or a parking lot—often at a location very close to their homes. None of the women were killed at their place of employment.

In nearly one-half (45%) of the deaths, a family member reported the death to authorities. In six cases (21%), a minor child reported the death. In nearly one-quarter of the deaths, a friend (4 cases (14%)), co-worker (2 cases (7%)) or a neighbor (1 case (3%)) reported the death. In two cases, the woman herself managed to call 911 before dying of her injuries.

In 10 cases (34%) the intimate partner committed suicide.

Two of the reviewed cases involved sexual assault as a key component of the homicide death.

Table 3. Weapons used, injuries suffered, and number of injuries.

Weapons used		
Firearms	16	55%
<i>Handgun</i>	11	69%
<i>Shotgun</i>	3	19%
<i>Rifle</i>	2	13%
Blunt object, feet, hands	8	28%
Knife	4	14%
No weapon used	1	3%
Principal injuries suffered		
Firearm injuries	16	55%
Stab or cutting injuries	4	14%
Strangulation or asphyxiation	4	14%
Blunt injuries	3	10%
Other	2	7%
*Other injuries included 1 collapse during fight and 1 poisoning		
Number of injuries		
	Average	Range
Gunshot wounds	1.4	1-4
Stab/cutting wounds	22.3	11-50

Table 4. Location and who reported the incident to authorities.

Location		
Victim's apartment or house	21	72%
Parking lot, highway, or street	3	10%
Intimate partner's home	2	7%
Other	3	10%
*Other locations include perpetrator's girlfriend's apartment, desert, and motel (1 each)		
Who reported the incident to authorities		
Family member	13	45%
Friends, neighbors, coworkers	7	24%
Victim herself	2	7%
Other	7	24%
*Other includes: police (3 cases) and perpetrator, search and rescue, pedestrian, and unknown informant (1 each)		

Findings

Table 5. Other issues, including orders of protection, stalking, shelter use, and prior police records.

Orders of protection	6	21%
Violations of orders of protection	3	50%
Stalking	6	21%
Shelter use	3	10%
Prior police record		
Victim (n=26)	9	32%
<i>Victimless crimes</i>	7	78%
<i>Crimes against persons</i>	2	22%
Perpetrator (n=27)	22	76%
<i>Victimless crimes</i>	7	32%
<i>Crimes against persons</i>	15	68%

We identified that victims had filed, or attempted to file, an order of protection (“court restraining order” or “temporary restraining order”) against the perpetrator by six of the 29 (21%) women. In half of these cases (50%), we identified at least one documented violation of the order prior to the homicide event.

Information on stalking behavior was especially limited. Stalking behavior exhibited by the perpetrator was identified for one-fifth (21%) of the victims; however, none of the stalking events involved charges or adjudication.

Three of the 29 (10%) women used shelter services prior to their deaths.

The team was able to obtain police records for nearly all of the victims and their perpetrators. Of the victims, nine had a prior police record. Most of these crimes were “victimless” (the offense did not directly injure a person) and included: petty larceny, speeding, DWI, and other alcohol-related offenses. Two women had previous charges of crimes against persons; both of these were domestic violence offenses. In contrast, of the men who had prior police records, only seven (32%) of the crimes were “victimless,” while two-thirds (68%) involved crimes against persons. Eleven (41%) had prior charges specific to domestic violence.

Table 6 summarizes the initial charges submitted by the prosecution, the result of the trial or plea, sentencing, and additional comments pertaining to the case. Two cases involved two perpetrators. The ten homicides that involved suicide of the perpetrator are not included.

Among the 21 suspected perpetrators, 19 (89%) of the perpetrators were charged with murder. In one case, the perpetrator was not indicted by the grand jury and in another, no one was charged with a crime. Of the perpetrators charged with murder, six (32%) were convicted of 1st degree murder, and eight (42%) pled or were convicted of 2nd degree murder or manslaughter. Two perpetrators were convicted of or pled to charges other than murder. Two cases ended in mistrial; these cases are now pending. One defendant was acquitted.

The penalty for 1st degree murder is life imprisonment (30 years), whereas the penalty for 2nd degree murder ranges from 0 to 15 years with years added for various enhancements. Prior to July 1999 (during the years of deaths included in this report) in New Mexico, those convicted of 2nd degree murder were eligible for release or parole after serving 50% of their sentence.

Six perpetrators (29%) were sentenced to life imprisonment. Two of these cases are on appeal. Of the eleven remaining cases (52%),* the average sentence was 14 years. It is estimated that in most, if not all these cases, the perpetrator will serve only half his sentence. Thus, the average actual time served would be 7 years for those perpetrators *not* sentenced to life in prison.

*These figures do not include two mistrials and the case where no charges were filed.

Findings

Table 6. Perpetrator Charges and Sentencing.

Initial Charge	Plea or Conviction	Sentence	Time Given	Comments
Open count of murder	Pled	2nd degree murder	15 years	May serve 7 years, may be deported after serving time
Open count of murder, 15 other charges	Convicted	15 other charges	15 years	Will serve 8 years
Murder, aggravated burglary	Pled	Aggravated 2nd degree murder, burglary	34 years	1 year firearm enhancement
1st degree murder	Convicted	1st degree murder	Life	Verdict on appeal (30 years before eligible for parole)
1st degree murder	Alford Plea*	2nd degree manslaughter	7 years	Will serve approx. 1½ years
1st degree murder	Pled	Aggravated 2nd degree murder	20 years	Will serve 60-65% of sentence
1st degree murder	Four trials: Mistrial, hung jury, mistrial, judge rejected plea			5th trial pending
1st degree murder	Pled	2nd degree murder	20 years	Will serve 10 years
1st degree murder	Convicted, Pled	Aggravated battery, 2nd degree murder	20 years	
1st degree murder, 1st degree kidnapping, 1st degree criminal sexual penetration, 4th degree tampering with evidence	Convicted	1st degree murder, 1st degree kidnapping, 1st degree criminal sexual penetration, 4th degree tampering with evidence	Life + 20 years	
1st degree murder, conspiring to commit murder, tampering with evidence	Convicted	1st degree murder, conspiring to commit murder, tampering with evidence	Life (30 years)	30-35 years
1st degree murder, conspiring to commit murder, tampering with evidence	Convicted, Pled	Convicted of conspiring to commit murder, tampering with evidence, Pled to 2nd degree murder	7 years	
1st degree murder, 3 counts attempted murder, arson	Guilty but mentally ill (bench trial)	1st degree murder, 3 counts attempted murder, arson	30 years without parole	
1st degree murder, tampering with evidence	Pled	2nd degree murder, tampering with evidence	16½ years	Will serve 7 years
1st degree murder, 1st degree criminal sexual penetration, tampering with evidence	Convicted	1st degree murder, 1st degree criminal sexual penetration, tampering with evidence	Life + 34 years	On appeal
1st degree murder, 2 counts aggravated battery	Judge dismissed murder, Pled	2 counts aggravated battery	6 years	
1st degree murder, 1st degree criminal sexual penetration, tampering with evidence	Convicted	1st degree murder, 1st degree criminal sexual penetration, tampering with evidence	Life + 62 years	
2nd degree murder	Mistrial			DA pursuing 1st degree kidnapping
2nd degree murder	Acquitted			
Grand Jury did not indict				Grand Jury decided it was an accident
None				Unable to determine if cause of death was due to abuse

*Alford Plea = no admission of guilt

Law Enforcement

Sharon thought she was finally free of her abusive relationship with her former husband Charlie. He had moved from the rural home where Sharon lived with her 2 children 6 months before. She had filed for an order of protection when Charlie continually harassed her at work and on the phone at home. The police said they were unable to find Charlie to properly serve the order of protection since he was homeless.

Charlie appeared at Sharon's workplace, shouting and threatening and smashing her car with a tire iron. All the other employees were terrified. As a result, Sharon's employer told her she needed to work at home.

Charlie continued his threatening calls. One winter afternoon, Sharon received a call from Charlie saying he had a gun and was going to kill her and the children. Sharon called the police—she made numerous calls to several law enforcement agencies. She told them she feared for her life. Each agency dispatcher told her to call another agency. She called all day but could get no one to help. The next day she called 911; once again they told Sharon to call another agency. She was on the phone with police when she heard Charlie's car. She got the children out of the house through the front window. The police arrived just in time to hear screams and a shot. Sharon was dead.

Law enforcement personnel ranging from 911 dispatchers to field officers are often the first responders to an intimate partner violence (IPV) incident. From the case review, the team identified five main areas in which the law enforcement system could improve its response to intimate partner violence. These areas include:

- Mandating specialized IPV training for all law enforcement personnel.
- Adopting standardized procedures for responding to IPV.
- Having information on orders of protection readily available on the scene.
- Implementing a centralized interagency data and reporting system that would track outstanding orders of protection and prior criminal history of the perpetrator.
- Organizing interagency networks that encourage discussion between all systems that serve victims of IPV.

We have also noted that many law enforcement agencies have adopted successful strategies to deal more efficiently with IPV over the years.

SYSTEM FAILURES

- Due to lack of centralized system(s), law enforcement officers fail to identify prior calls to a residence, history of domestic disputes, or the existence of orders of protection.
- Law enforcement response lacks standardization.
- Investigation of intimate partner homicide incidents may lack vigor and consistency, especially in cases where the perpetrator also commits suicide.
- Federal law enforcement agencies fail to enforce federal firearm provisions.

RECOMMENDATIONS

Standardized Protocols

- Require all local law enforcement agencies to adopt and implement the standardized protocols for responding to intimate partner violence as outlined by the New Mexico Chiefs of Police Association.
- Include a police check for a prior history of intimate partner violence to aid in primary aggressor analysis.
- Document information on children who witness intimate partner violence, including the child's age, relationship to the victim and perpetrator, and statements provided by the children.

Orders of Protection

- Include information on: orders of protection, lethality assessment, warning signs, and victim rights in the packet given to the victims.

Successes

✓ *In many counties, packets are given to victims at the scene with information on orders of protection, lethality assessment, and victim rights.*

Centralized Data Systems and Interagency Cooperation

- Implement a statewide centralized reporting system to link all law enforcement and legal systems, including 911 dispatch, police agencies, district attorney's offices, and civil and criminal courts.
- Document and track orders of protection and train law enforcement personnel to utilize the system.
- Continue to enhance feedback, interagency cooperation, and sharing of resources between agencies represented on the Female Intimate Partner Violence Death Review Team.

Successes

✓ *Enhanced law enforcement participation in community groups devoted to preventing violence against women.*
✓ *Sexual Assault Nurse Examiner (SANE) collaboratives.*
✓ *Specialized intimate partner violence law enforcement units.*

Positive law enforcement developments in response to intimate partner violence in New Mexico

- Training on IPV is a core curriculum in NM Police Academies
- Specialized Violence Against Women training for law enforcement in rural areas
- Self-initiated examination of law enforcement compliance with the Brady Bill: restrictions on possession of firearms by officers who batter

Lethality checklist in revised information packets for victims

IPV information packets include a list of risk factors to help victims assess their level of danger, including:

- Threats of homicide or suicide
- Depression
- The victim has left the batterer
- Presence of new relationships
- Access to weapons
- Severity of violence is escalating
- Forced or threatened sex acts
- Defiance of court orders & judicial system
- Batterer is extremely jealous
- Threats to harm children
- Rage
- Objectifies partner (calls her names, body parts, animals)
- Pet abuse

Law Enforcement

Law enforcement-based Victim Assistance Program

Albuquerque Police Department Victim Assistance Unit

The APD victim assistance unit provides advocacy services to victims of domestic violence at the scene of the crime. Advocates are trained in crisis intervention and have knowledge of the criminal justice system. They are able to make appropriate referrals to community resources and provide child advocacy at the scene. Advocates provide victims with the necessary paper work and assistance to file an order of protection (previously referred to as a temporary restraining order (TRO)). Advocates also help victims create safety plans and supply transportation to a safe environment.

Follow-up services include helping victims file orders of protection, obtaining civil attorneys, accompanying victims to Metro Court and Grand Jury proceedings, assisting with relocation, and providing long-term services as needed to women and children.

Centralized Data Systems and Interagency Cooperation, *Cont'd*

- Encourage cooperation between victim advocate programs and law enforcement agencies so that advocates accompany law enforcement to intimate partner violence calls.

Success

✓ Law enforcement-based victim assistance programs.

- In cases where the perpetrator commits suicide, all involved agencies should thoroughly investigate the intimate partner homicide.

Training

- Train police (including dispatch) to recognize lethality risk on domestic violence calls to:
 - Prioritize calls.
 - Prevent transferring of intimate partner violence calls.
- Train both management and field officers on:
 - Obtaining and enforcing orders of protection.
 - Strategies for identifying the highest charge possible.
 - How to identify the primary aggressor.

Success

✓ Statewide training of law enforcement officers to improve the understanding, response to, and investigation of violence against women.

Training, *Cont'd*

- Educate and provide information to law enforcement with respect to:
 - How to provide referrals to all family members.
 - Shelter use and availability.
 - Documentation and corroboration of stalking behavior.
 - Special populations (sex workers, same-sex couples, immigrant women, elders, people with mental or physical disabilities).
 - The effects of intimate partner violence on the victim, family, and friends.
 - Cultural, religious, and gender issues.

Firearms

- Encourage federal law enforcement agencies to enforce federal firearm provisions.

Examples of successful law enforcement training programs

Fourth Judicial District Police Training

Matthew Sandoval, the Fourth Judicial District Attorney and retired police captain, attributes a 500% increase of domestic violence arrests to the refined awareness and expanded instruction of officers in the jurisdiction. The Department of Public Safety certified course is taught by the Senior Trial Prosecutor, David Silva. Each class is introduced to the dynamics of domestic violence. Officers utilize domestic violence manuals during the interactive training and the two mandatory exams. The manuals illustrate relevant statutes, case law, and checklists that cover a wide range of topics including: initial 911 calls; evidence gathering; and forms for medical records, victim statements, victim resources, and emergency protective orders.

Ongoing training for the Deming Police Department

The Deming Police Department received a VAWA subgrant to train and supervise all officers on the dynamics of intimate partner violence. They hired an officer to train the force on domestic violence guidelines and procedures; to encourage investigation of domestic violence cases; to carry at all times information on restraining orders; and how and where to refer victims, perpetrators, and family members to community services. Detective Sharon Cathey has trained Deming police officers and Western Police Academy students for over two years. She also serves as a liaison to the District Attorney's Office, the court, and the local shelter.

Detective Cathey believes this program has had a positive effect on the community. Because the police are investigating more cases of intimate partner violence, there has been an increase in reporting, even from neighbors. "The community has more confidence in the police department because they know we **will** investigate," says Cathey.

Maria, age 18, lived with her boyfriend Juan, age 20, and his mother Clara. Juan had a criminal history of domestic violence with Maria and his mother as the victims. Maria had a history of drug use and criminal charges as a minor. Friends watching TV in the living room one night heard a gunshot coming from the bedroom. When police arrived they found evidence of a struggle and Maria dead from a single gunshot wound to the head. They also found a .22 caliber rifle, the murder weapon (a 9mm handgun) and a criminal complaint form against Juan for aggravated battery against Maria three weeks before. Maria tested positive for methamphetamines at the time of her death. Juan claimed that Maria's death was an accident and pled to voluntary manslaughter. Juan was sentenced to 7 years with 2 years suspended by the judge. Juan was eligible for parole after one-and-a-half years in prison.

Intimate partner violence cases are among the most controversial and difficult in the legal system. Victims seeking protection and assistance are confronted by a complex and often confusing legal system. Victims frequently feel frustrated and demeaned. Court personnel, prosecutors, defense attorneys, victim advocates, probation officers, and judges rarely have adequate resources or staff. Many have received little or no training on intimate partner violence, cultural competency, and sexual assault issues. Rarely do offenders receive proper supervision, adequate treatment, or penalties commensurate to the crimes they have committed. The following section lists the most striking deficiencies in the legal system and the team's recommendations for improvement. Also included are examples of programs developed by dedicated individuals and agencies.

SYSTEM FAILURES

- Lack of intimate partner violence education and training among legal professionals.
- Lack of consistency, standardization, and expediency in prosecution and sentencing.
- Procedural obstacles, including: difficulties in determining jurisdiction of orders of protection, tribal limits on jail terms, and special issues related to juvenile offenders.
- Lack of access to civil legal assistance for victims in divorce and custody cases.
- Lack of intensive supervision of perpetrator by probation officers.
- Failure to provide training in cultural competency.

RECOMMENDATIONS

Orders of Protection

- Support consistent standards for orders of protection and implement them statewide.
- Discourage routine issuance of mutual orders of protection.
- Encourage domestic violence commissioners to educate litigants on the impact of stipulating to an order of protection during the hearing.

Penalties

- Encourage penalties commensurate with the severity of the crime.
- Increase probation monitoring to improve perpetrator compliance.
- Support and encourage the application of enhanced penalties on sentences, such as firearm and child abuse enhancements.
- Make information available to judges on the criminal history of the perpetrator and encourage judges to use this information when sentencing.
- Expedite and manage criminal cases to lessen the impact on the victim.
- Encourage victimless prosecution.

Intimate Partner Violence Information and Training

- Incorporate information on intimate partner violence during family law continuing law education (CLE) seminars.
- Make intimate partner violence information, resources, and referrals available to clients during separation and divorce proceedings.
- Conduct trainings for legal professionals, including judges, probation officers, public defenders and district attorneys, to promote understanding of the far-reaching ramifications of intimate partner violence.

Steve had a list of misdemeanors and felonies several pages long dating back at least 6 years. He was a drug dealer, abused several women, and had multiple DWIs. He had been a suspect in the disappearance of three other young women. It was not until his friends found a body of a young woman in the trunk of his car that anyone put together a comprehensive picture of his criminal past. The District Attorney's research on his criminal history revealed an alarming escalation of violence.

Summary list of priors

- Drug possession
- DWI
- Drug trafficking
- Driving with a revoked license
- Failure to comply with probation
- Domestic violence

Lisa was 28 when she was murdered. She subsisted on low-paying jobs and occasional prostitution. Steve was known by the local sex workers in the area as a man who would pick up women and demand sex at gunpoint. Lisa had known Steve off and on for several years. He sometimes provided her with drugs in exchange for sexual favors. Late one night Steve picked Lisa up by luring her with the promise of cocaine. He took her to a friend's apartment, and then raped and strangled her. He put her body in the trunk of his car and headed for home. He was stopped by the police for an outstanding ticket and arrested. His car was impounded. Months later, friends found her body in the trunk of his car when they were looking for tools.

Advocacy

- Encourage each district attorney office to have a dedicated intimate partner violence unit.

Success

✓ *Specialized intimate partner violence prosecution units in some district attorney offices and tribal jurisdictions.*

- Encourage dedicated intimate partner violence courts similar to drug courts.
- Establish programs to support immediate, consistent and on-going intervention by victim advocates.

Success

✓ *Law enforcement-based victim advocate programs.*

- Enhance court watch activities.
- Enhance existing civil legal assistance programs.
- Support early intervention programs for offenders.

Santa Fe's Court Monitors Programs

The Court Monitors Program (CMP) was established in 1997 as part of the ongoing campaign of the Santa Fe Rape Crisis and the League of Women Voters to see justice served in the cases of sexual violence. Court Monitors, with their distinctive red clipboards, have become a consistent presence in the First Judicial District court rooms, plea hearings, trials, and sentencings. Without public awareness, inconsistencies and problems in the courts are easily ignored. This can promote a silent permissiveness around the crimes of sexual violence. By being a presence in the courtroom, the CMP hopes to hold the justice system accountable for how it processes these crimes. They are there to: 1) identify where changes in the law need to be made and promote legislative change; 2) gather data from all aspects of the court system and to use those data to offer suggestions and solutions for the improvement of the system; 3) promote public awareness about the criminal justice system and to educate voters and potential jurors.

The CMP has received VAWA funds to begin a pilot program to monitor domestic violence cases. They hope to have this new part of the program up and running by the end of this year.

(Excerpt from CMP Newsletter.)

A Successful Offender Program

The *Bernalillo County Domestic Violence Early Intervention Program (DVEIP)* is designed to provide first time misdemeanor offenders charged with battery and/or assault, in a domestic violence setting, with early treatment directed at stopping the cycle of violence

Referrals are made from the assigned judge, defense attorneys, counseling agents, victim advocates, the district attorney's office, and/or the clients themselves.

Screening consists of a face-to-face interview with the defendant; a complete record check (locally, statewide and nationally); an interview with the alleged victim; staffing with the district attorney's office on the case; approval from the district attorney's office and a formal acceptance from the DVEIP judge. During the face-to-face interview, clients must take full responsibility for the underlying charges as outlined in the criminal complaint, and without justifying their behavior.

Criteria for eligibility to the DVEIP are: 1) defendants must be first-time offenders charged with a domestic violence case; 2) they must take full responsibility for their actions without justification; 3) their offense is not one that constitutes continual violence; 4) they have no prior felony convictions or pending felony charges; 5) they have no significant substance abuse or psychological problems that may curtail addressing domestic violence as a priority; and 6) they have no history of failure to appear/warrant.

The program began in 1995 and has served over 800 offenders with a recidivism rate under 10%. DVEIP has seen families reunite and start egalitarian relationships. Many clients have referred friends and relatives to the counselors of the DVEIP so they may begin to have a nonviolent relationship.

Intimate partner violence legislation can be problematic. New laws, which are intended to hold the perpetrator accountable for the harm done to victims, children, and society, may also serve to adversely affect victims. For example, when legislation was created to mandate that law enforcement make an arrest at the scene of an intimate partner violence call, abuse victims were sometimes wrongfully arrested and convicted. Due to the complexity of this issue and far-reaching effects of legislation on victims, responsible legislators need the assistance of intimate partner violence legal experts to help craft the legislation. These trained experts can help legislators take into account possible unexpected effects on victims of new or amended laws, and provide expert testimony to interim legislative committees and throughout the legislative process.

SYSTEM FAILURES

- Lack of legislation to authorize firearm seizure or destruction when the firearm is involved in intimate partner violence misdemeanor, any felony, or in suicide deaths.
- Penalties for intimate partner violence are often not appropriate to the severity of the crime.
- Lack of funding for programs that serve victims of intimate partner violence through advocacy, prosecution, and court services.

RECOMMENDATIONS

- Pass legislation that permits:
 - State law enforcement to confiscate firearms at the intimate partner violence scene or when there is a threat of suicide.
 - Law enforcement to destroy firearms involved in felonies, deaths, or suicides.
- Encourage the legislature to provide funding of intimate partner violence and sexual assault programs throughout the state, for both victims and perpetrators.
- Increase penalties for intimate partner violence to allow the court jurisdiction over perpetrators for a longer period of time.
- Encourage legislation that would mandate judges take into account domestic violence issues in custody cases.
- Create legislation to authorize and fund an ongoing Intimate Partner Violence Review Team.

The NM Legislature has created the following laws to protect victims:

- A Family Violence Protection Act that includes: *inter alia* equal access to orders of protection for gay and lesbian domestic abuse victims; protection without necessity of filing for divorce or paying filing fees; protection from stalking and emotional distress; mandatory arrest for violation of a protective order; a requirement that law enforcement provide notice to the victim when the abuser is released from detention; and emergency orders of protection that provide law enforcement authority to request the issuance of an *ex parte* order of protection at the scene of a domestic violence call so that the victim is given some protection during the weekend or after regular court hours.
- A law that provides victims of domestic violence the ability to request and change their names without the usual requirement to publish this intent in the newspapers, thus allowing some protection from the abuser.
- A law that extends the period of time that victims of domestic violence and sexual assault crimes have to file claims for reparation from the NM Crime Victims Reparation Commission.

Physical and Mental Health Care Services

Olivette and her common-law husband Patricio had a 15 year relationship. They had two children. Olivette and Patricio had a history of doing alcohol and drugs together. They also participated in violent behavior toward one another. Restraining orders had been taken out by each of them naming the other as the perpetrator. They were referred to a shelter that specialized in helping victims of domestic violence, but never went. Patricio attempted to seek assistance by going to the police and asking for help when he “snapped” over his wife seeing another man. He was referred to a mental health worker, however, the worker was not comfortable in assessing Patricio’s stability and he was released with an appointment the next day. One week later, Patricio called the police saying that Olivette was provoking him. When police arrived, they found both Olivette and Patricio dead.

Victims, perpetrators, and their children may present to any health care setting for reasons both related and unrelated to intimate partner violence. Emergency medical technicians (EMTs), nurses, doctors, and mental health providers have the opportunity and responsibility to screen and refer all their patients for intimate partner violence. Because alcohol, drug use, and intimate partner violence are associated, recovery programs need to be comprehensive and accessible.

SYSTEM FAILURES

- Medical and mental health personnel at all levels often fail to screen, document, and refer victims and offenders involved in intimate partner violence.
- Mental health and substance use interventions and services are not readily available.
- Comprehensive intimate partner violence counseling and education programs for offenders, beyond anger management, are rarely available.

RECOMMENDATIONS

Medical

- Adapt or modify existing protocols that screen for child sexual assault to include screening for other violence in the home.
- Promote standardized protocols for medical and mental health response to IPV.

Success

✓ *Comprehensive screening protocols in some emergency departments and health clinics.*

- Increase the availability and methods for referrals to mental health and alcohol and drug counseling programs within the medical setting.
- Build upon and expand existing efforts to train medical and mental health providers at all levels to understand, recognize, treat, document, and refer patients who experience intimate partner violence.

Success

✓ *Intimate partner violence training in some rural public health clinics.*

Physical and Mental Health Care Services

Mental Health, Counseling and Therapy

- Assess suicidal threats, gestures, and attempts by either the victim or the perpetrator for intimate partner violence.
- Develop, fund, and implement counseling and intervention services for children who witness intimate partner violence.
- Establish protocols for offender treatment.

Alcohol and Drug Treatment

- Increase access and availability of drug and alcohol treatment programs for women, especially women with children.
- Enhance alcohol and drug treatment and mental health counseling at shelters.
- Improve availability and provide information on substance abuse and mental health counseling through victim advocate services.
- Provide lethality assessment information to drug and alcohol programs.

VAST Trainings for Health Care Providers

In 1998, staff from the New Mexico Department of Health, Family Planning Program, in collaboration with other agencies, produced the VAST protocol (Violence, Alcohol, Substance Abuse and Tobacco Use). This protocol targets health care providers and provides them with information and tools for the identification, assessment, and referral of clients with VAST-related issues.

In 1999, the Family Planning Program contracted with an outside agency to provide statewide trainings to health care providers on domestic violence and sexual abuse. In 2000, trainings expanded to include all four VAST issues. Participants were educated on the VAST topics, on their dynamics, and how they affect individuals. They also received a VAST protocol to take back to their offices and share with their colleagues. Health care providers from all areas of New Mexico, including rural areas, were trained.

Participants have responded positively to the trainings. Rural health care providers now have the tools to assess and identify VAST-related issues, though they are frustrated by the lack of local services (e.g., shelters) to provide for these patients, once identified. To improve the effectiveness of the VAST protocol, the next step will be to improve service availability throughout the state.

It was rumored that Peter had bought Dawn from her parents when he was 42 and she was 14 after her mother had forced her into prostitution during her early teen years. After being married for 9 years, Dawn told the police that she thought Peter was going to kill her and the children. She remained in contact with Peter because she had no other way to support her children. A restraining order was signed, but could not be served since Peter was a truck driver and they could not locate him. Peter returned home. A few days later, Dawn awoke while Peter was planning a homicide-suicide scheme. He choked and stabbed her multiple times in front of their children. The children ran out of the house and called for help. When the police arrived they found the house on fire, Peter was still alive after a suicide attempt, but Dawn was dead.

Advocacy services support victims of intimate partner violence and sexual assault from the moment he or she enters the system. Advocates help victims understand and navigate the complex legal, health care, shelter, and law enforcement systems. Victim advocates also work with community coalitions to ensure greater efficiency of services as well as in shelters and crisis centers throughout the state. Their expertise and familiarity with the systems have proved to be vitally important to victims seeking assistance.

SYSTEM FAILURES

- Lack of systematic approach to service delivery once the woman has entered the system.
- Lack of available advocacy services.
- Delay in identification and intervention for victim, perpetrator, and children who witness violence.
- Lack of workplace policies, personnel or education to address violence against women.
- Lack of shelters and problematic access to shelters, especially in rural areas.

RECOMMENDATIONS

Systematic Approach

- Establish a case management approach for women who experience intimate partner violence, including transitional housing, mental health, alcohol and drug abuse counseling, career services, and other services as needed.
- Implement a multidisciplinary team approach so that comprehensive and appropriate services can be provided.

Success

✓ A multidisciplinary team approach has been developed for First Responders.

- Increase Child Protective Services involvement in community collaboration.

Advocacy

- Develop, fund, and implement counseling and intervention services for children who witness intimate partner violence.
- Enhance victim advocate programs and efforts to facilitate the legal process with sensitivity for the abused woman and her family.
- Expand and support rape crisis services throughout the state.

Shelters

- Increase the number of, and access to, shelters and related services for women with children, especially in rural areas.
- Provide counseling that is specific to issues of victimization and trauma.

Advocacy Services and Training Opportunities

Women's Community Association, Albuquerque – Oversees the domestic violence shelter for Bernalillo County and Pathways transitional housing program, trains and supports service for domestic violence survivors.

The Peace Keepers Domestic Violence Program, Eight Northern Indian Pueblos Council, Inc. – Provides legal services on behalf of victims of domestic violence, provides training for tribal law enforcement and court personnel, supports other women advocates, and serves the eight northern Pueblo communities.

Resources, Inc., Albuquerque – 24-hour crisis intervention; court, hospital, and child advocacy; civil legal assistance; counseling for women and children; education and community training.

Shelter for Victims of Domestic Violence, Clovis, Clayton, Raton, Tucumcari – Provide a safe refuge, referrals for medical, legal, and housing issues, provide counseling and participate in community education.

Crime Victims Reparation Commission, Statewide – Provides financial assistance to victims of violent crime, provides training and outreach services, and administers federal funding to improve and expand services to victims of crime such as the VAWA and VOCA Grants.

Northern New Mexico Family Crisis Center, Espanola – Crisis hotline, safety shelter for women and their children, counseling for victims and perpetrators of domestic violence, assistance and referral for legal, medical issues, education and community training.

Rape Crisis Centers, Albuquerque, Las Cruces, Santa Fe, Hobbs, Roswell – Provides support, intervention, referrals and counseling to victims of sexual assault, as well as providing training and education to the community.

UNM Women's Resource Center, Albuquerque – serves primarily UNM students, prospective students, staff and faculty as well as the Albuquerque community in providing support, training, and education of women's issues including domestic violence and sexual assault.

Public Awareness and Prevention

Everyone knew ...

Sara's sister and mother knew that Sara's ex-husband was in town and that Sara was afraid of him. She said to her mother, "I'm in constant fear for my life." But Sara's **family** didn't know what to do.

The **neighbors** heard them fighting almost every night. When they heard the shots they didn't call the police. They had become accustomed to the violence and were wary of the police.

Cindy's **friends** noted that she often had black eyes or other bruises. It made them uncomfortable, but they felt it wasn't any of their business. They were relieved when Cindy told them that her boyfriend was just jealous, and that he really loved her. They were shocked to hear of her death.

Teachers noticed that John was erratic in his behavior at school. Because they lived in a small community, everyone knew that his mother had called the police to their home because of his father's behavior. However, no one alerted the authorities until John called the police after his father shot his mother.

Violence against women occurs within the context of our social and private lives. In addition to the law enforcement, physical and mental health care, legislative, and legal systems involved in responding to intimate partner violence, members of the review team recognized that cultural and societal issues also needed to be addressed. Neighbors' and family members' knowledge of abuse, yet reluctance to intervene, was a part of almost every case the team reviewed. For any system change to be enacted and enforced, the public must be aware of the problem, be willing to act, and support prevention strategies. The following recommendations are designed to increase the public's awareness through local education and training projects, to encourage thoughtful and accurate media coverage, and to help develop strategies which will prevent the further victimization of women, children and men involved in domestic violence.

RECOMMENDATIONS

- Develop and implement institutionally specific curricula to identify intimate partner violence, risk factors for violence, children who witness domestic violence and how to access available intervention, prevention and service. Distribute the curricula to the following:
 - Day care centers
 - Schools
 - College campuses
 - First Responders
 - Employers
 - Faith-based communities
 - Public/Community organizations.
- Conduct public awareness campaigns highlighting intimate partner violence for the general public, with specific attention to what neighbors and family members can do if they hear or suspect that someone they know is experiencing intimate partner violence.

Success

✓ Increased media coverage on intimate partner violence with higher sensitivity to the issue.

- Raise awareness of available services and how they are accessed.
- Develop education and training programs to promote identification and intervention of perpetrator and victim of intimate partner violence at first contact (*e.g.*, day care centers, faith-based communities, hair salons).

Public Awareness and Prevention

- Address belief systems and societal attitudes about racism, sexism, same-sex relationships, religious beliefs, and attitudes towards victims of IPV.
- Raise awareness among employers about the importance of safety plans in the work environment and provide training to institute work-based, anti-violence policies.

Success

✓ *Workplace Violence Prevention programs developed by some employers.*

- Provide training for school personnel regarding recognition of risk factors and problems that may indicate family violence; support counseling programs in the schools.

Success

✓ *Schools Violence Prevention programs in some schools.*

- Conduct public awareness campaigns to raise awareness of the presence of firearms in the home as a risk factor for intimate partner violence death.
- Increase awareness regarding the link between animal abuse and perpetration of violence.
- Educate and provide information on the psychodynamics of chronic victimization and trauma experienced by victims of intimate partner violence, including traumatic bonding.

A Public School Violence Prevention Plan

In 1998, Albuquerque Public Schools (APS) released a district-wide comprehensive plan for addressing violence in the schools and hired a District Violence Prevention Specialist. In addition to training on the specific training programs listed on the plan, APS staff have received training on domestic violence, the effects of witnessing violence on children, and on community resources available for referrals. There is also a violence prevention strand in the elementary school health curriculum that includes safety planning for children in homes where violence may be occurring. APS staff are receiving training in how to identify children who may be from violent homes, and appropriate intervention strategies. A variety of counseling programs are being made available to students and their families who display risk factors or have been identified as experiencing family violence. Presentations occur in the middle and high schools on teen dating violence and warning signs of abusive relationships.

One of the most popular violence prevention programs is "Bullyproofing Your School." There are currently over 50 elementary schools and half of the middle schools that are in the process of implementing this program. Bullying encompasses a wide range of abusive behaviors that are very damaging to the victims and the school environment. The dynamics of bullying are similar to IPV in that they are both based on an imbalance of power. Children who bully often have thinking errors similar to those of the adult batterer, as well as attachment disorders. Intervening with the bullying student can reverse this learned behavior early in the process to decrease the risk of this student perpetrating violence as an adult.

Characteristics and Risk Factors

Team members identified recurring factors that appeared to be associated with lethal violence. Information on these factors was not available in every case. The characteristics listed below were repeatedly observed in the cases we reviewed. Each individual case had its own set of contributing characteristics.

Perpetrator Characteristics

- History of intimate partner violence in a present or former relationship
- Easy access to firearms
- Sexual suspicion, exhibited extreme jealousy, anger or possessive behavior toward victim
- Controlling behavior
- Verbal and physical threats to victim or children
- Threats of homicide or suicide
- History of alcohol or drug abuse
- Stalking behavior
- Financial problems

Couple Characteristics

- Couple had history of disputes or argued a lot
- Victim talked about or was in the process of leaving the relationship or was obtaining a divorce
- Disparity in age (more than 10 years age difference) between the victim and perpetrator
- The victim and minor children were financially dependent on the perpetrator

Other Characteristics

- Lack of community or family support
- Reluctance of family and neighbors to report violence or abuse to police
- Victim and family had distrust of system, drug use, fear of losing children

Cathy had been separated from her husband Dirk for several months. Their divorce had been finalized for two weeks. They were both 50 years old. Cathy had filed one temporary restraining order against Dirk in 1989. Cathy had given Dirk's .44 magnum handgun to the police, as she feared he would use it against her. After holding the weapon for 10 days the police returned it to Dirk. The next morning at 6:45 Dirk accosted Cathy as she was leaving her apartment to go to work. Witnesses heard her shout, "don't shoot me!" as she ran toward her car. He shot her twice, fatally injuring her with a wound in the back, then fired a few shots at the witnesses before turning the weapon on himself. He died of the self-inflicted wound to the chest. The police found a suicide note, a check, and several police department phone numbers on a table in Dirk's apartment. The note outlined his plan to kill Cathy and himself and contained several directions regarding what he wanted done with his belongings and assets. Dirk had a blood alcohol level above the legal limit for intoxication.

Margo was 55 years old and her husband Rick was 57. They had three grown children who reported that their parents had quarreled frequently during their thirty-plus years of marriage. Margo had recently moved out of the family home and was involved in a new relationship. Rick was depressed and threatened to commit suicide. At the request of Rick's son, the police went to check on him. They found him to be well and apparently he convinced them that he was just depressed, not suicidal. He also explained that he had made arrangements to protect himself in the event that he felt suicidal. He kept the ammunition for his rifle, but asked that a friend keep the gun until he felt safe to keep it. A few days later, the police were notified when Margo failed to show up for work. When they arrived they saw Rick through the kitchen window and heard a scream. By the time they had entered the home, both Margo and Rick were dead from gunshot wounds to the head. They found a suicide note that outlined Rick's wishes for the division of the estate between their three children and that said that he and Margo would be together always.

Mila, 34, and **Andreas**, 54, had been married for 15 years and had two children together: Anna, 3, and Philip, 14. Andreas had two previous arrests for domestic violence and battery against Mila. At one point, Mila had filed a temporary restraining order against Andreas, but later asked that it be dismissed. One evening, after weeks of arguing about their growing financial burdens, the couple was again fighting. Andreas was drunk again and in a violent mood. Mila had seen him like this before; depressed, insecure and ranting. Andreas was insisting upon keeping his loaded rifle under the living room sofa and Mila was attempting to wrestle it from him. The gun went off twice, hitting Mila in the head and abdomen, killing her. Philip called the police after he and his sister witnessed the murder. When the police arrived Andreas put the gun to his head and killed himself. His blood alcohol level was above the legal limit for intoxication.

Rhonda was 32 years old and had been living with her boyfriend Ryan for 11 years. They lived with her two young children. Both Rhonda and Ryan had been convicted of misdemeanors—Ryan for cruelty to animals and Rhonda for petty larceny. Neighbors reported a history of domestic problems between the two, but never remembered the police being called. On the evening of her death, Rhonda's children awoke to the sounds of arguing, then gunshots. They went to the living room to find their mother slumped over on the couch. They quickly escaped and waited on their neighbor's porch until 7 hours later when they knocked on the door. The children called their grandmother, who notified the police. Rhonda and Ryan were found dead in their living room. Rhonda had been shot twice in the head. Ryan had committed suicide. Both tested positive for alcohol. Ryan had told his sister that he was feeling suicidal just a few days before the incident.

Tina was 33 years old when her husband Fred, 45 years old, killed her and then committed suicide. They had a history of financial difficulties, with gambling bills and playing cards found in their home. Tina was in the process of changing the locks on her house and car, and trying to sever all ties with Fred. On the night of the murder/suicide neighbors reported having heard the two arguing followed by gunshots. The police found their bodies the following day when one of Tina's co-workers notified the authorities when she failed to show up for work. Tina had multiple gunshot wounds to the face and hands. Fred died from a single gunshot wound to the head. He tested positive for alcohol, cocaine and Valium. The autopsy report revealed that Tina had struggled for her life.

Tatiana was 65 years old and her friend Bob was 64 years old. They had known each other for more than 30 years but had only recently become involved after both of their spouses had died. Bob had apparently attempted suicide about 4 months previously when he stepped out in front of truck. The police and medical records showed no evidence that the event was non-accidental. Bob shot and killed Tatiana in her kitchen after she allegedly called his deceased wife a "whore." After the incident, Bob went home and began drinking. He called a friend and admitted to what he had done. The friend notified police who went to Bob's house only to find him barricaded inside. The police attempted to negotiate with Bob for several hours. When that failed they gained access to the home using tear gas. Bob was dead from a self-inflicted gunshot wound to the chest. Police found a suicide note in Bob's house that described his longstanding love for Tatiana and his desire to care for her and marry her in this life or the next. Bob had an alcohol level above the legal limit for intoxication.

Veronica was 31 years old when she died. She and her common-law husband, Greg, had a long history of mutual physical and verbal abuse resulting in battery charges against each of them. On the day of her death, Veronica and Greg were outside working on their car when they began arguing. They went inside and were heard arguing by their neighbors and roommates. Greg pushed Veronica and held her down for several minutes, as he had done many times before. However, this time something went wrong. He became frightened by the way she looked after he got off of her and called his roommate up from downstairs. Their roommate, Josh, called 911 immediately after seeing Veronica. She was awake when the paramedics arrived, but quickly lost consciousness. She died at the scene. The OMI determined her cause of death to be a cardiac arrhythmia due to many underlying medical conditions. The OMI could not directly link Veronica's death to the altercation between her and Greg.

Jennifer had been living with her boyfriend, Marc, for about 4 months when the police were called by a neighbor to investigate what sounded like a gunshot. When police arrived, Marc answered the door and told them that a picture had fallen off the wall. Four days later, after Jennifer's family called the police with concerns for her well-being, the police returned to the apartment. There they found Jennifer's dead body with a single gunshot wound in her chest. She appeared to have been dead for several days. No evidence of drugs or alcohol was found in Jennifer's body. Jennifer had ended another abusive relationship with her husband of 18 years just a few months before she and Marc met. Marc had been arrested three times in Colorado for domestic violence against his former girlfriend. He was known to be a very jealous and possessive man. A week before her death, Jennifer told a friend that her swollen and bruised eye had come from Marc's fist. Friends report that the couple had recently been fighting over money and that Jennifer may have been trying to end the relationship. Marc was found guilty of first degree murder for Jennifer's death, and is serving a life sentence with mandatory 30 years before parole eligibility. He has appealed the verdict.

Case Synopses

Maria, 18 years old, lived with her boyfriend Juan, 20 years old, and Juan's mother Clara. Juan had a criminal history of domestic violence battery with both Maria and his mother as the victims. Maria had a history of methamphetamine use, an extensive medical surgical history, and delinquency charges as a minor. One evening while friends watched television in the living room a single shot was heard in Maria and Juan's bedroom. When the police arrived only Maria and Juan's mother Clara were in the home. Maria was dead from a single gunshot wound to the head. There was evidence of a struggle in the room. There was a .22 caliber rifle in the room along with the murder weapon, a 9mm handgun. Police also found a criminal complaint form naming Juan as the suspect in an aggravated battery against Maria from three weeks before. Maria tested positive for methamphetamines at the time of her death. Juan claimed that Maria's death had been an accident. Juan pled to voluntary manslaughter and was sentenced to seven years. The judge suspended 2 years of his sentence. Juan was eligible for parole after one-and-a-half years in prison.

Pam and Sarah had been together for about 8 years. Pam was 12 years older than Sarah. They were both known to abuse alcohol, and Sarah had been in alcohol rehabilitation several times. There were several witnesses to physical violence between the couple, however, nothing was reported to the police. Sarah was planning to leave Pam for another woman, which led to an increased frequency and severity of fighting. Sarah claims that on the night of Pam's death Pam had fired a gun at her during a fight. The shot missed and Sarah took the gun and fatally shot Pam in what she insists was self-defense. Sarah then hid Pam's body in a horse trailer and moved out of state. The day after moving she confided in her sister that she had killed Pam and that her body was in the horse trailer. Sarah's sister contacted the state police and told them where to locate Pam's body. Sarah was not convicted of murder but was convicted of 15 other charges related to Pam's death including tampering with evidence, using Pam's credit cards, etc. Sarah is currently serving a 15-year sentence.

Amy, 29 years old, had been married to Karl, 34 years old, for three years. Both had children from previous marriages. Friends and neighbors told police that they had an on-again, off-again relationship characterized by Karl's physical and emotional abuse. Police records show several domestic violence charges filed against Karl by Amy, several of which resulted in convictions. Both were known to use cocaine and methamphetamines. Karl owned several guns and always carried one on his person. Amy was found with a fatal gunshot wound to the head two days after the neighbors last noted seeing her. Karl was seen leaving their mobile home on the day Amy's body was found. Amy tested positive for alcohol and methamphetamines. Karl claimed he had not been there for two days. He was arrested and charged with 1st degree murder. Several mistrials and a rejected plea later, the fifth trial is still pending.

Kerry, 18, and Gilbert, 26, met at the restaurant where they both worked. After turning down Gilbert's offers for a date many times, Kerry changed her mind and accepted. Gilbert took her to a coffee shop where he introduced her to his friend Matt. The three then went for a ride to look at Christmas lights. When Kerry asked the men to take her home, they threatened and beat her. Gilbert and Matt drove to a secluded place where they raped and stabbed Kerry to death. Kerry was stabbed more than 50 times. Her partially decomposed body was found three months later. Gilbert had never been arrested for any violent crimes, though several women claimed to have been raped by him. He was charged with murder, rape, kidnapping, and evidence tampering. He was sentenced to life plus 62 years. Matt was homeless and had no prior arrests. He was sentenced to life plus 34 years. Matt has appealed the decision.

Valerie was 20 years old and had been in a relationship with Scott, who was 29, for at least a year. Valerie had several misdemeanor arrests all of which involved alcohol. She had been in and out of drug rehabilitation several times, starting when she was fourteen. Scott had previously been arrested for burglary, DWI, aggravated battery, and hit-and-run offenses. He also had a history of alcohol and drug abuse. One evening Valerie and her father went to Scott's house after she had consumed 18 beers and used some cocaine. They all did some drugs together, then Valerie's father left. Sometime in the next 24 hours Valerie ingested a toxic amount of Tylenol. The circumstances are still unclear as to why she took an overdose. Speculations are that she was trying to get Scott to let her go, or that he forced her to take the Tylenol. In any event she was not allowed to leave. Scott called the New Mexico Poison Center and was instructed to get her to a hospital immediately or to call 911. Before her death, Valerie told police that she asked repeatedly for Scott to take her to a hospital but he refused, locked her in and threatened to beat her if she attempted to escape. Family attempted to check on her but found the door locked and got no answer to their calls. Scott's mother finally intervened and convinced him to take Valerie to the hospital. It was too late. She died two days later from liver failure secondary to the Tylenol overdose. Scott was charged with 2nd degree murder. The case is now pending due to a mistrial. Prosecutors are seeking a kidnapping charge against Scott.

Lisa was 28 years old when Steve raped and murdered her. Lisa was a part-time sex worker and had a history of drug abuse. She had a 10 year-old son who was living with her parents. Lisa and Steve had been acquainted for several years. He was most likely her drug dealer. According to other sex workers from the area, Steve would troll the area for women and demand sex at gunpoint after picking them up. He was also heavily involved with the drug trafficking in the area. He was arrested several days after he had murdered Lisa for DWI and taken into custody for violation of his probation from previous drug trafficking charges. While Steve was in custody, his brother was looking in the trunk of his car and found Lisa's body wrapped in a blanket. She had died of blunt injuries to the head and neck. She also had injuries on her hands that were consistent with a defensive posture during an assault, and evidence of sexual assault. While in jail for the DWI and probation violations, Steve was charged and convicted of 1st degree murder, 1st degree kidnapping, and tampering with evidence. He was sentenced to 50 years in the state penitentiary.

Carmen, 39, and Hector, 39 lived together in a small apartment for several months of their 6 month relationship. Hector moved into Carmen's apartment after being discharged from the Mental Health Center after attempting suicide. Both had criminal histories. She had been convicted of stealing rented furniture and DWI. Hector had several DWI convictions and had been sentenced to three years in jail for aggravated battery. Carmen had been divorced for 9 years and had a 14 year-old son and a 21 year-old daughter. Hector was often jealous of Carmen's friends and became increasingly possessive. On several occasions, Hector had threatened to kill himself, Carmen and her children if she left the home without him. Carmen and Hector had been fighting for several days before the murder. Carmen was upset about his drinking and lack of financial responsibility. Hector was upset because she had gone out without him. The night of the murder both had been drinking and using cocaine. At some point during the evening Hector forced Carmen into the bedroom, made her strip, and then stabbed her thirteen times. Articles of her clothing were later found cut and torn throughout the house. Hector then left the residence, slit his throat and was killed when he walked in front of a vehicle on the interstate. He died later at the local hospital. Police found Carmen's body when they came to notify next of kin of Hector's death.

Olivette, a restaurant cashier, and her common-law husband, **Patricio**, a food service worker, had been together for almost 15 years. They were both 40 years old. They had two children: **Kenya**, 14, and **Patricio Jr.**, 8. Olivette and Patricio enjoyed drinking and doing drugs together, which often led to arguments and incidents of domestic violence. Patricio had been arrested and charged with domestic violence in the past. At one point, both Olivette and Patricio had taken out restraining orders on each other, both blaming the other for battery. The couple was referred to a local shelter that specialized in helping victims of domestic violence, though they never went. One week later, Patricio discovered his wife was seeing another man and he went to police to inform them that he was "about to snap" over the news. Police referred him to a mental health worker who was not comfortable making a decision regarding Patricio's mental stability and released him after securing an appointment the next day. One week later, Patricio called the police to inform them that Olivette was provoking him. When police arrived, they found Olivette and Patricio dead from close range gunshot wounds. There were no witnesses and no neighbors heard the shots. Both Olivette and Patricio had been drinking. He was also positive for amphetamines and marijuana. Olivette's adult daughter from a previous relationship was granted temporary custody of Kenya and Patricio Jr.

Carla and her husband **Jorge** had only been married for one tumultuous year when the violence reached a new level. Jorge, a Mexican national who worked as a laborer, was 12 years younger than Carla. They both abused alcohol and Jorge also used both prescription and illegal drugs. Carla's family was concerned about the relationship from the beginning. One night Carla and Jorge were fighting like they always did, according to neighbors, when Carla came screaming into the adjoining apartment of their elderly landlady. Carla was bloodied from slashes and stabs and told the landlady that her husband was going to kill her. The next thing the landlady knew, Jorge was in her bedroom as well. He pulled her out of bed and proceeded to stab Carla to death. The landlady called 911. Police found the couple in a heap in the landlady's bedroom. Carla had died of stab wounds to the head, neck and chest. She also had pellet wounds to the back of her head and neck. Jorge was lying on top of her with self-inflicted pellet wounds and a laceration to the neck. He asked the police to shoot him. They arrested him. Both Jorge and Carla tested positive for alcohol; Jorge was also positive for Valium. Jorge pled to 2nd degree murder and was sentenced to 15 years in prison.

Barbara, 44 years old, had divorced **James**, 56 years old, because he was an alcoholic and had abused her for the duration of their 26 years of marriage. She had been remarried for the past eight months. Barbara and James' thirteen year-old son **Brett** had been taken into police custody for illegally driving his father's truck. James called his ex-wife Barbara to ask her to pick Brett up at the police station. While Barbara drove Brett to James' home, he used his cell phone and to call and threaten to kill her. Apparently he also called her husband and threatened him. When Barbara arrived at the police station she told the police about the threats. The police gave her information concerning restraining orders. When Barbara drove into James' driveway with Brett, James rammed her car out of the driveway and into a ditch, making it impossible for her to get out of the car. Brett ran to the house and called 911. Barbara attempted to call for help on her mobile phone. Before she could complete the call James shot her in the head with his rifle through the car window. James non-fatally shot himself in the face. James was arrested and charged with 1st degree murder. He pled guilty to the lesser charge of 2nd degree murder and was sentenced to 20 years in prison.

Cindy, 36 years old, and **Ben**, 55, had been married for 10 years. Two months before her murder, Cindy divorced Ben. She was letting him stay with her until he could find his own residence. Cindy had been pursuing a new relationship by phone and was scheduled to meet her new boyfriend in the coming weeks. One of Cindy's friends expected to meet her for an appointment but called police when Cindy failed to show or answer her phone. Cindy was not found, but the house appeared undisturbed. The next day, Ben's sister called the police after overhearing Ben tell a friend that Cindy was "no longer a problem." Police investigated and found Cindy dead in her bedroom. Her head had been beaten with a baseball bat. Ben was sentenced to 20 years.

Sharon and **Charlie** were both 44 and had been married for 20 years, but had been living apart for the last two years. Charlie began to call Sharon and threaten her. His harassing phone calls and violent behavior became so intrusive at work that Sharon's co-workers complained and she was told to work at home. Sharon reported his behavior to the police and obtained a restraining order, but because Charlie was homeless, they were unable to serve him. On New Year's Eve, after a day of threatening phone calls, Sharon called the city police and two county Sheriff's Departments. When they arrived at the house, they found Sharon dead from gunshot wounds to the stomach. The couple's three children witnessed the fighting and heard the shots. Casey, a daughter, said her mother called the police for help the day before but they declined to come out, citing poor weather conditions. Charlie was charged with 1st degree murder, pled to 2nd degree murder and burglary murder, and was sentenced to 34 years.

Shawna, 29 years old, and **James**, 32, lived together with their two children and Shawna's sisters and mother. James was violent and involved with survivalist activities. He had threatened Shawna many times. In 1996, James was charged with rape and aggravated battery against Shawna. Since she didn't press charges James was not convicted. Shawna called the police several times during the next year to report domestic violence incidents, but always refused to press charges. She also called shelters, though there is no evidence that she ever utilized their services. A year later James shot Shawna in the head as she slept. When Shawna's mother found her later that day, she had been dead for several hours. Shawna's children, unharmed, were asleep next to their mother. Shawna's sister **Toni** was missing, but was later found having been beaten and raped, but alive. James' body was found in the nearby wilderness with a single gunshot wound to the head. The weapon in both cases was a 9mm handgun.

Trinity, 30 years old, and **Jorge**, 41, had been living together for almost three years and had two children: a daughter **Simone** and Trinity's son **Jose**. Trinity and Jorge argued and fought constantly, according to friends, relatives and neighbors. Trinity's family was adamant that she leave him, knowing his history (drug-trafficking conviction). On the day she was killed, Trinity's sister had been trying to convince her to come and live with her. Jorge had gotten drunk and he and Trinity had been arguing all day. Later that evening Jorge became enraged and went to retrieve his gun from his car. Trinity followed him, begging him to come back inside. Jorge pointed the gun and he and Trinity struggled. The gun went off, Trinity was shot in the abdomen. En route to the hospital, she told the paramedics that she grabbed the gun causing it to go off and that it wasn't Jorge's fault. Autopsy reports, however, indicate that Trinity was at least 9 feet away when she was shot. Trinity died before reaching the hospital. Trinity's blood alcohol level was above legal levels for intoxication. Jose witnessed the entire event. He and Simone are now living with Trinity's sister out-of-state. The shooting was ruled accidental. Jorge served 18 months for DWI.

Case Synopses

Juanita, 47 years old, and **Peter**, 36, were separated for a few months before her murder. They had a rocky relationship spanning five years. Peter battered his first wife until she had him arrested and charged with felony domestic violence. Shortly after his divorce he began dating Juanita, and beating her, too. Juanita eventually ended the relationship and was granted a temporary restraining order against Peter, though she did not report him the few times he violated the order. Juanita had been advised to stay with friends or flee the state but she wanted to remain at her new residence. One night, Peter, out on bond from his latest felony domestic violence charge toward Juanita, created a disturbance outside her home. Peter lured Juanita out of her home, attacked her, and bludgeoned her to death with a rock. Autopsy reports confirm that Juanita died from sustained blunt trauma to the head and chest. Peter denied the murder at first, but later confessed. He is serving a maximum sentence of 20 years.

Dawn married Peter when she was 14 and he was 42. There are theories that she was "sold" to Peter by her family, and that her mother may have forced her into prostitution in her early teens. The couple had been married for nine years, when Dawn left Peter and moved to New Mexico. Dawn told the New Mexico police that she thought Peter was going to kill her and her children. Because Dawn was unable to care for herself and the three children without Peter's financial assistance, she remained in contact with him. She eventually filed a temporary restraining order, but the police were unable to serve it because Peter was a commercial truck driver who spent long periods of time on the road. He was traveling across country one weekend when he stopped in New Mexico to spend a few days with Dawn and the children. A few nights after Peter arrived, when Dawn and the children were asleep, he wrote a suicide note and rigged the house for a gas explosion. Dawn awoke during his preparations and attempted to stop him. He strangled her and stabbed her multiple times in the head, neck and chest. The children were awakened by the noise, and witnessed their father choking and stabbing their mother. They quickly ran to the neighbor's house to call the police. When the authorities arrived they found the house on fire and Dawn and Peter unconscious on the floor of the kitchen. Dawn died at the scene. Peter was taken to the local hospital where he was held until his court date. He was convicted of 1st degree murder, three counts of attempted murder (for the children) and one count of arson. He was sentenced to 30 years in prison without parole (the jury found him guilty but mentally ill and tempered the length of his sentence).

Rosa, 27 years old, and **Marco**, 31 had been friends and on-again, off-again lovers for about 10 years. There had been several incidents of domestic violence between the two. Marco also had a longstanding relationship with Felipe, who dressed as a woman and went by the name of "Yvonne." Felipe had always been jealous of Rosa, even when he and Marco were living together for more than a year. One night, after getting drunk, Rosa went to Marco and Felipe's house. An argument ensued and Felipe hit her over the head and strangled her while Marco watched. They buried the body in a shallow grave in a rural area outside of town. The following month the police received a tip about the whereabouts of Rosa's body and the circumstances of her death. Marco was convicted of being an accessory to murder and was sentenced to 5 years in prison. Felipe was convicted of 1st degree murder and was sentenced to 30 to 35 years in prison.

Jodi-Lee, 36 years old, had been dating **Harvey**, 38, for almost a year-and-a-half. He had a history of domestic violence with his ex-wife and ex-girlfriend. Jodi-Lee had a history of domestic violence with her ex-husband in which she was often the abuser. Harvey had a DWI arrest on record, as well as an arrest for domestic battery against his cousin. Both he and Jodi-Lee called the police at least once in their relationship to report the other for domestic violence. After an intense argument one afternoon, Harvey beat and kicked Jodi-Lee until she was unconscious. She was treated at an emergency room for a fractured rib, given Valium and Darvon for pain, and released. The next morning, Jodi-Lee was found dead in her friend's apartment (where she had been recuperating). Her injuries had been far more serious than anyone expected. A laceration of her spleen caused by her fractured rib was found at autopsy. Harvey was tried for murder and acquitted. The jury objected to the word "kick" versus "beat." The jury also felt that Jodi-Lee could have survived if she had received adequate medical treatment.

Raylene, 44 years old, was a heavy drinker who frequented bars every night. **Gunther**, 57, was an alcoholic who drank in the same bars every night. Gunther had been arrested and charged with DWI multiple times in the past. Just months before meeting Raylene, Gunther's girlfriend Midge shot and killed herself with his gun. Raylene and Gunther knew each other only days before they were married. Less than a week later Gunther killed her with a shot in the head. Gunther committed suicide with the same gun minutes later. Both had been drinking.

Violet and **Seth** had been in a rocky relationship for 12 years. They made plans for a weekend trip and checked into a motel. That evening, guests in the motel heard Violet screaming for help and the sound of objects breaking. After a while the noise quieted and Seth left the room and got in his pickup truck. Police stopped him hours later when he narrowly missed hitting one of the squad cars. He had blood on his clothes and police arrested him immediately. Violet was found dead in the motel room, strangled and with one of her toes missing. Autopsy reports confirm that Violet died of homicidal asphyxiation and had sustained additional injuries to her face, neck, chest, stomach, legs and groin, including contusions and bite marks. Seth was charged with murder but pled guilty to aggravated battery to get a lesser sentence. He was sentenced to eight years.

Donna and **Tom**, both in their thirties, were married for 12 years and had three children: **Cassandra**, **Jeffrey** and **Hunter**. Donna was a Jehovah's Witness and didn't believe in divorce. After years of abuse, Donna and the children moved from Oklahoma to New Mexico where they lived in a shelter for a month. Donna obtained a temporary restraining order because she feared Tom was stalking her in order to kill her. Four days before she was murdered, Donna called her mother and told her that Tom had been parked outside her new apartment. The police arrested him and charged him with violating the temporary restraining order. Four days later, Tom showed up at Donna's apartment again and began arguing with her. The children heard their parents fighting in the bedroom and then it was quiet. When their father emerged a short time later, he told them that their mother had fallen asleep. He calmly took the children out for ice cream, like he would any other day. Donna's body was found the following day in her car. She had been strangled to death. Donna's mother took the children at first, but permanent custody was awarded to Tom's mother. Tom pled to 2nd degree murder and tampering with evidence and was sentenced to 15 years.

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