

# SHATTERED LIVES



A REPORT OF DOMESTIC VIOLENCE FATALITIES IN  
LUCAS COUNTY, OHIO  
2003-2006

The University of Toledo College of Law  
Lucas County Domestic Violence Fatality Review Team  
December 2007

Pablo Picasso, Weeping Woman  
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### ON THE COVER:

The image on the cover of this report, “Weeping Woman” by Pablo Picasso, captures the complex and multifaceted nature of the subject of this study, domestic violence fatalities. “Weeping Woman” expresses our fragmented understanding of domestic violence and the challenge of interpreting the bits and pieces of information about it that we encounter in our daily lives and professions. Perhaps most significantly, “Weeping Woman” echoes women’s actual experiences of domestic violence – whether those experiences involve fear of a violent abuser, grief over the death of a loved one, remorse over a defensive killing, horror at witnessing an unspeakable crime, regret over a missed opportunity to intervene, revulsion to graphic in-court testimony, shock by a criminal conviction or dismissal, desperation over the threat of losing custody, or frustration about the inadequacies of “the system,” among other things. Like the weeping woman on the cover, this report confronts its subject from multiple angles and perspectives, challenging conventional assumptions and perceptions.



# SHATTERED LIVES:

## A Report of Domestic Violence Fatalities in Lucas County, Ohio 2003-2006

by Gabrielle Davis<sup>1</sup>

**A**t a time when local homicides are reported to be at their lowest level since 1964,<sup>2</sup> local domestic violence-related homicides and associated fatalities are on the rise. These inverse trends suggest that domestic violence is increasingly to blame for intentional deaths in Northwest Ohio. In fact, as of October 2007, domestic violence was the number one cause of local murders for the year.

This report summarizes the findings of a collaborative study conducted by The University of Toledo College of Law and the Lucas County Domestic Violence Fatality Review Team. The study identifies and examines all domestic violence-related deaths in Lucas County between 2003 and 2006 to gain a better understanding of local trends, risk factors and gaps in service. In addition to summarizing the major findings of the study, this report offers recommendations to begin to stem the tide of escalating domestic violence-related deaths in the area.

## Method

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This study is based on data extracted from public records and media sources. Researchers began by reviewing coroner verdicts and autopsy reports for every homicide and suicide that occurred within the county during the study period. Researchers initially divided the deaths into three sample data sets based on certain articulated criteria. The sample data sets included: a) domestic violence-related deaths; b) non-domestic violence-related deaths; and c) possible domestic violence-related deaths. Based on this preliminary classification, researchers identified 75 deaths within the study period that appeared to be associated with domestic violence.

Researchers then examined public records and media sources related to each of the 75 deaths using a standardized data collection tool. Public records included case files from local municipal, common pleas and appellate courts; police reports; 911 run sheets; booking reports and other jail and prison records; voter registration forms; county real estate records; and similar records maintained in the public domain. Researchers consulted media sources as well, including newspapers, broadcast media, electronic databases and Internet sites. In addition, participating agencies provided limited access to certain background data, including criminal histories, involvement with child protective services, juvenile court interventions, and contact with shelter, victim advocacy and batterer intervention services.

Based on the information extracted from these sources, each case was assigned to a specific sample data set. Researchers identified 49 domestic violence-related deaths over the study period. In addition, they identified 24 other deaths that bore some indication of domestic violence, but whose relationship to domestic violence could not be definitively discerned. Two cases were eliminated from the preliminary sample because domestic violence was ruled out as a correlative factor.

Researchers constructed a database into which the data was entered and analyzed. Statistical analyses were run with SPSS 15.0 software. This report summarizes the main descriptive findings of the study.

At a time when local homicides are reported to be at their lowest level since 1964, local domestic violence-related homicides and associated fatalities are on the rise.

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<sup>2</sup>"Toledo homicides hover at lowest level since '64," *The Blade*, October 10, 2007.

## FINDINGS

Domestic violence-related deaths increased each year of the study period. Significantly, confirmed domestic violence-related homicides tripled from 2003 to 2006.



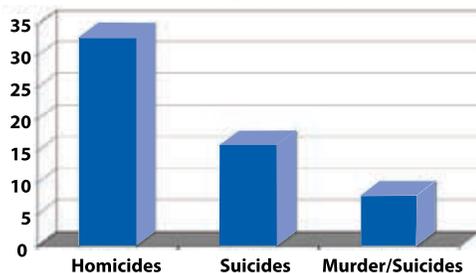
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### Domestic Violence-Related Deaths

For purposes of this study, domestic violence-related deaths were operationally defined as: a) any homicide in which the perpetrator and the victim were current or former intimate partners, household members or immediate family members; b) any homicide in which the victim was an intervener or bystander to a domestic violence event; and c) any suicide that was closely associated in time or circumstance with a domestic violence event.

Of the 49 domestic violence-related deaths identified during the study period, there were 33 homicides (67.35%) and 16 suicides (32.65%). Nine of the homicides (27.28%) and 8 of the suicides (50%) were committed in the context of a murder/suicide, which is a subset of both the homicide and suicide categories. The following chart depicts the nature of domestic violence-related deaths in the study:

Total Domestic Violence Deaths  
2003 to 2006

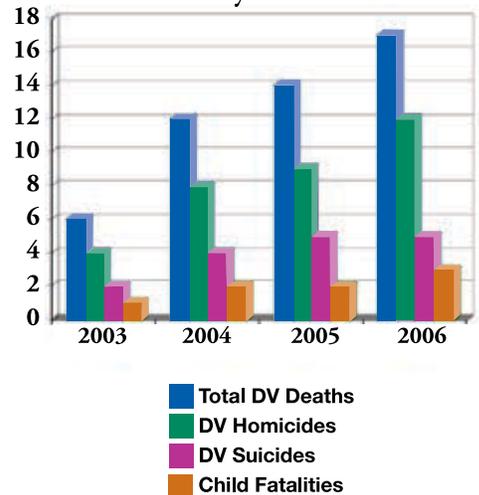


Domestic violence-related deaths increased each year of the study period. Significantly, confirmed domestic violence-related homicides tripled from 2003 ( $n = 4$ ) to 2006 ( $n = 12$ ).<sup>3</sup> These deaths include 8 child fatalities, which also tripled from 2003 ( $n = 1$ ) to 2006 ( $n = 3$ ).<sup>4</sup> The following chart represents the increase in local domestic violence-related deaths during the study period:

<sup>3</sup>It should be noted that these figures do not include the 24 deaths that could not be confirmed as domestic violence-related fatalities.

<sup>4</sup>Child fatalities are formally reviewed by a separate child fatality review team. They are included here for informational purposes only.

Domestic Violence Deaths  
By Year

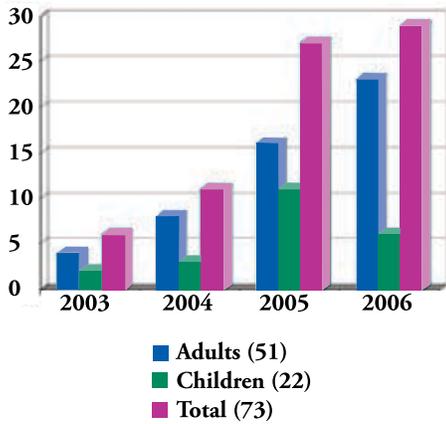


### Child Survivors and Other Witnesses

Nearly all of the domestic violence fatality victims were parents (83%). Collectively, they were survived by 42 minor children. This figure does not begin to represent the total number of children affected by domestic violence-related fatalities. For instance, it does not include minor grandchildren, brothers and sisters, nieces and nephews, family friends, and other related child survivors. This figure also does not include adult survivors of murder victims, who number in the hundreds.

In addition to child survivors, at least 73 people were actual eyewitnesses to domestic violence-related deaths during the study period. Researchers identified 22 children and 51 adult eyewitnesses. Again, these figures under-represent the actual number of on-scene witnesses because they do not factor in the countless people who witnessed fatalities that occurred in public; that is, killings that were perpetrated on a busy street, at a place of business, or in a multi-unit residential facility. The following chart represents the number of known eyewitnesses to domestic violence-related fatalities over the study period.

### On-Scene Witnesses (n=73)



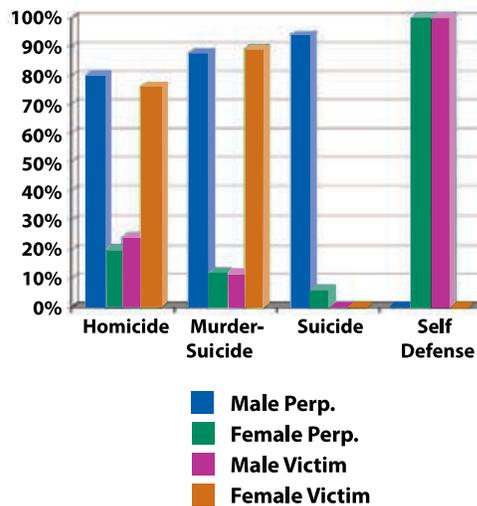
### Gender

This study demonstrates that domestic violence-related fatalities are gendered phenomena. Local intimate partner homicides are perpetrated primarily by men (80%) against women (76%). Local domestic violence murder-suicides are committed almost exclusively by men (87.5%) against women (88.89%). Documented domestic violence-related suicides in Lucas County are most prevalent among men (93.75%). Known defensive killings were committed exclusively by women against men (100%). The following chart depicts the gendered nature of local domestic violence-related deaths.

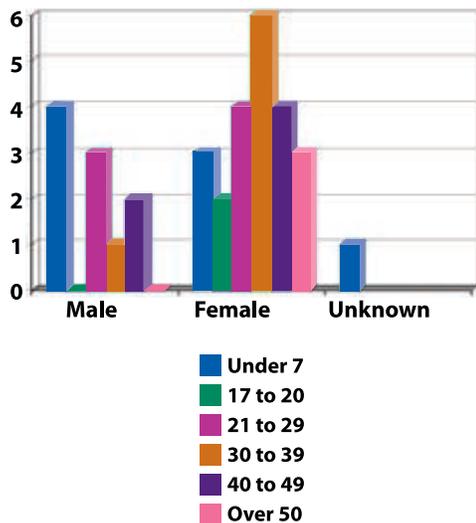
### Age

Age is a significant consideration in local domestic violence-related homicides. Children represent the highest concentration of domestic violence murder victims in the study. Seven of the 33 domestic violence homicide victims (21.21%) were under seven years old. Four of the 10 male homicide victims (40%) were young children. By contrast, only 3 of the 23 female homicide victims (13%) were under seven years of age. The following chart depicts the age distribution of male and female homicide victims in the study.

### Gendered Violence



### Age of DV Homicide Victims by Gender



Unlike male homicide victims who died relatively early in life, female homicide victims were killed across the entire life span.

These phenomena exist in sharp contrast to the reality that, overall, men are much more vulnerable to murder than women. In fact, 98 of the 132 homicides (74%) that occurred over the study period involved male victims. Only 10 of the 98 male homicides, however, were domestic violence-related. Significantly, 4 of the 10 male domestic violence homicide victims (40%) were under seven years of age. Young boys constitute the highest concentration of male domestic violence homicide victims in this study.

Compared to homicides involving male victims, homicides involving female victims, or femicides, are relatively rare. Only 34 of the 132 murders that occurred over the study period (26%) involved female victims. The majority of adult femicides (between 65% and 90%) were

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Unlike male homicide victims who died relatively early in life, female homicide victims were killed across the entire life span.

This study identified three distinct contextual patterns, or paradigms, among adult domestic violence-related killings.

These paradigms include:

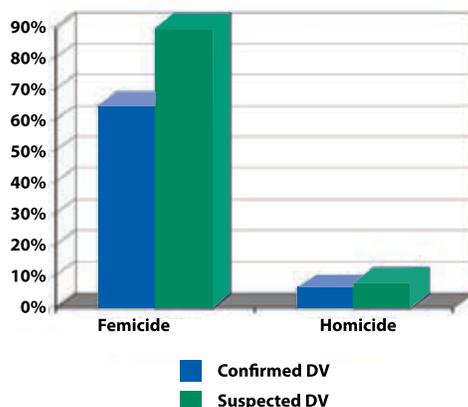
- (a) murder-suicide;
- (b) defensive killing; and
- (c) homicide unaccompanied by suicide or conditions of self-defense.



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domestic violence-related.<sup>5</sup> Consequently, whereas men are significantly more vulnerable to murder than women overall, they are far less likely than women to be killed in the context of domestic violence.

Adult Domestic Violence Homicide and Femicide Rates



## PATTERNED KILLINGS

This study identified three distinct contextual patterns, or paradigms, among adult domestic violence-related killings. These paradigms include:

- (a) murder-suicide;
- (b) defensive killing; and
- (c) homicide unaccompanied by suicide or conditions of self-defense.

### Murder-Suicide

Just over one-third of all domestic violence-related killings (37.5%) in this study involved murder-suicide. For purposes of this investigation, murder-suicide was defined as an intentional killing of an intimate partner or former partner closely related in time to a subsequent suicide by the person responsible for the earlier killing. Murder-suicides were typically perpetrated by white men (75%) against white women (77.78%).<sup>6</sup> All but one murder-suicide (88.89%) was committed with a handgun. In most cases (75%), the perpetrator had no documented criminal record. In the few cases in which the perpetrator had a criminal record,

there was very little evidence of a documented pattern of violence against the murder victim. That is not to say that there was no history of violence by the killer against the murder victim. In nearly two-thirds of the cases (62.5%), at least one emergency call to 911 had been made to report domestic violence prior to the date of the murder-suicide, but those calls did not result in an arrest. The point to be made is that if there was a history of violence by the perpetrator against the murder victim, that history usually was not reflected in the perpetrator's criminal history or arrest record. Further research is warranted to explain this trend.

### Defensive Killing

Approximately 17% of the perpetrators in this study appear to have killed their intimate partners in self-defense. These defensive killings were committed exclusively by black women (100%) against black men (100%). In each case, the murder victim was stabbed by the perpetrator (100%). As in the case of most murder-suicides, none of the perpetrators who appear to have killed in self-defense had a documented criminal history. Each of the victims, however, did. Further research is warranted to explain these patterns.

### Homicide

This study identified 11 domestic violence-related homicides unaccompanied by suicide or conditions of self-defense (47.83%). Each of these homicides was male-perpetrated (100%). All but one homicide victim (91.67%) was a woman.<sup>7</sup> Most of the perpetrators were black men (63.64%), though white men (18.18%) and Hispanic men (18.18%) were also responsible for domestic violence-related homicides. The female victims were black (45.45%), white (36.36%) and Hispanic (18.18%).

Unlike murder-suicides, where guns were almost universally used as the murder weapon, domestic violence-related homicide victims were more frequently stabbed, strangled or beaten to death (58.33%). Three homicide victims were shot (25%) and two were killed in a single house fire intentionally set by the perpetrator.

Perpetrators of domestic violence-related

<sup>5</sup>This range is based on known domestic violence-related femicides, on the one hand, and suspected, but not positively confirmed, domestic violence-related femicides, on the other hand.

<sup>6</sup>One murder-suicide was committed by a white woman who killed her husband and then herself. The other murder-suicide was committed by a black man who killed his ex-girlfriend and then himself.

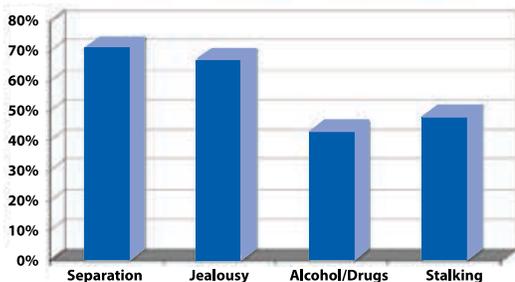
<sup>7</sup>The only male homicide victim was not related to the perpetrator, but intervened in a domestic violence event initiated by the perpetrator against his former wife.

homicides tended to have more extensive criminal histories than either murder-suicide perpetrators or defensive killers. All but two perpetrators (81.82%) had five or more prior arrests and a documented criminal history of domestic violence. In many cases, however, the perpetrator's experience with the criminal justice system did not reveal a pattern of domestic violence against the person he killed. In fact, only 18% of the homicide perpetrators exhibited a pattern of violent crime against the women they killed that was documented in their criminal records. Rather, their criminal histories tended to reflect a pattern of domestic violence committed against a former spouse or partner. Again, further research is warranted to explain these phenomena.

### Separation, Extreme Jealousy, Stalking and Alcohol or Drug Use

It is widely acknowledged that prior physical assault, coupled with a separation or estrangement in a relationship, together with stalking places women in greater danger of intimate partner murder.<sup>8</sup> This study confirms that separation,<sup>9</sup> extreme jealousy,<sup>10</sup> alcohol or drug use<sup>11</sup> and stalking commonly occur in the context of intimate partner fatalities. The following chart depicts the frequency of such co-occurring conditions in this study, where the

Co-Occurring Conditions in Intimate Partner Homicides



<sup>8</sup>McFarlane, J., Campbell, J.C., & Watson, K. (2002).

<sup>9</sup>Separation includes, among other things, ending or threatening to end an intimate relationship; moving out or threatening to move out of a shared residence; or filing or threatening to file for divorce.

<sup>10</sup>Jealousy includes excessive preoccupation, unfounded accusations of infidelity, and obsessive reaction to a former partner's new relationship.

<sup>11</sup>Alcohol or drug use refers to substances found at autopsy or known use at or around the time of death. It does not include a history of drug and/or alcohol use in and of itself.

researchers could find it in the public domain. It is quite likely that the actual frequencies are higher than what is reported below.

It is worth noting that extreme jealousy, stalking and substance use are contexts, as opposed to causes or justifications, for murder. That is to say that many perpetrators exhibit excessively jealous or possessive behaviors; many perpetrators engage in stalking, and many perpetrators (as well as victims) use drugs and/or alcohol. While these behaviors are relatively common among perpetrators, they do not cause people to kill. In reality, many people who are extremely jealous or possessive and who use alcohol and/or drugs do not kill the partners who seek to separate from them.

### Protection and No Contact Orders

Thousands of protection orders are issued each year by local common pleas and municipal courts. The vast majority of people who apply for and receive protection orders are not killed. Significantly, however, most people who were killed during the study period (83%) did not seek a protection order. In fact, only four of the domestic violence fatality victims in the study (17%) applied for a protection or no contact order before they were killed. Three of the four applications (75%) were granted. One protection order was issued by the Lucas County Domestic Relations Court. One protection order was issued by the Toledo Municipal Court. One no contact order was issued by the Lucas County Juvenile Court. All of the orders that were issued (100%) were in effect at the time of the killings.

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Most people who were killed during the study period did not seek a protection order.

Nearly half of all domestic violence killers in this study had no documented criminal history or arrest record.



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## Recommendations

Research shows that the number one risk factor for intimate partner murder is a prior history of domestic violence against a female partner.<sup>12</sup> Yet, nearly half of all domestic violence killers in this study had no documented criminal history or arrest record. Consequently, if we look solely to the criminal justice system for proof or evidence of prior domestic violence, we are quite likely not to find it, even though it is highly probable to have occurred.

Given that past domestic violence is the primary risk factor for lethal domestic violence, it is incumbent upon risk assessors to expand the places they look for domestic violence histories. First and foremost, they must credit the accounts of victims themselves. Victims know their own histories better than anyone else and studies show that they most reliably predict the threat their abusers pose to them (though many tend to underestimate that threat):

Research indicates that a woman's intuitive sense of whether or not her partner will be violent toward her is a substantially more accurate predictor of future violence than any other warning sign.<sup>13</sup>

Consequently, it is critical for lethality assessors to listen to and credit victims' own risk perceptions, recognizing, however, that victims are more likely to understate than overstate that risk.

Risk assessors are advised to consult as many sources of information as possible.<sup>14</sup> In addition to running more traditional criminal background checks, risk assessors must also look outside the criminal justice system for "proof" of past domestic violence, especially if the victim is unable to provide a full and complete history herself. A wealth of information is available (sometimes with a release) from myriad sources, including 911 dispatchers, healthcare providers, case workers, teachers, guidance counselors, service providers, as well as family, friends, neighbors, and co-workers, among others.

At the same time, it is important to recognize that most men with a documented history of domestic violence do not kill their partners. And, not all forms of domestic violence are as likely as others to escalate into lethal violence.<sup>15</sup> In fact, it

is widely acknowledged that there are a number of distinct, though sometimes overlapping, paradigms of domestic violence, each with its own gender dynamics, power motivations, levels of physical injury, risks of escalation, and degrees of dangerousness.<sup>16</sup> Consequently, risk assessors must take care to evaluate domestic violence in context and resist the temptation to interpret every act of domestic violence the same as every other.

Given the variations and complexities of domestic violence, there is no universally effective, one-size-fits-all intervention strategy that is sure to prevent intimate partner fatalities. In fact:

Policies and services designed to help victims of domestic violence appear to have two possible and opposing effects: either they decrease the abuse and risk of homicide or they have the unintended consequence of increasing them.<sup>17</sup>

Consequently, it is critical to carefully tailor intervention and prevention programs to the specific contexts and circumstances of each case. It is equally important to expand access to victim services beyond the criminal justice system. Systematic training on risk assessment and safety planning should be provided in hospital and healthcare settings, at educational institutions, in human resource departments, within recreational facilities and athletic organizations, and among faith communities so that comprehensive and individualized safety planning is available and accessible to women who need it, wherever they are.

In addition to expanding victim services both inside and outside the criminal justice system, programs and services for batterers must be enhanced as well. Many batterer intervention experts believe that abusive men do not seek help for domestic violence because they deny that their behavior is abusive<sup>17</sup> and many others who come in contact with abusive men fail to recognize abusive behavior when they see it. In many ways, the criminal justice response to domestic violence reinforces that denial when it fails to hold batterers accountable for their abusive behavior. But since so many intimate

<sup>12</sup>Campbell, J.C., Webster, D., et al, 2003; Greenfield, et al., 1998; Pataki, 2004; Mercy, et al., 1989; Langford, et al., 1998; Campbell, J.C., 1992; McFarlane, et al., 1999.

<sup>13</sup>Bancroft, L., 2002, page 158; Heckert, D.A. & Gondolf, E., 2004; Campbell, et al., 2003.

<sup>14</sup>Roehl, J., et al., 2005; Heckert, D.A., & Gondolf, E., 2004.

<sup>15</sup>Pence, et al., 2006; Miller, 2005; Stark, 2007.

<sup>16</sup>Pence, et al., 2006; Miller, 2005; Adams, 2007; Stark, 2007.

<sup>17</sup>Dugan, L., Nagin, D.S., & Rosenfeld, R., 2003, p. 21

<sup>18</sup>Adams, D., 2007.

partner murders are committed by people who have never been arrested, programs and services for batterers must be available and accessible outside the criminal justice system, by referrals from physicians, employers, union representatives, teachers and school administrators, social service agencies, clergy and others who are in a position to safely intervene.

Finally, the results of this study support a call for greatly enhanced prevention efforts that get to the root of gender violence. Given that past domestic violence is the leading risk factor for lethal domestic violence, preventing domestic violence from occurring in the first place must be a top priority. Consequently, it is imperative for the community to develop a comprehensive violence prevention plan that involves a full spectrum of initiatives, that includes: (1) raising knowledge and awareness about gender violence; (2) transforming social norms that perpetuate gender violence; (3) training providers to recognize and respond to gender power dynamics; (4) building violence prevention collaborations and networks; (5) changing institutional practices that promote and perpetuate gender violence; and (6) establishing sound public policy and effective legislation based on reliable qualitative and quantitative data.<sup>19</sup>

## Conclusion

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This study represents an initial attempt to better understand domestic violence fatalities in Lucas County. It endeavors to quantify the problem, and it challenges widely held assumptions about local domestic violence-related deaths. This study offers recommendations for risk assessors and suggests opportunities for further research and analysis. Most importantly, perhaps, it establishes a baseline for longitudinal research focused on developing and assessing comprehensive long-term strategies to stem the tide of escalating domestic violence fatalities throughout the region.

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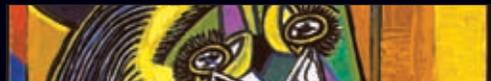
<sup>19</sup>Davis, R., Parks, L.F., & Cohen, L., 2006.

## RECOMMENDATIONS

- Listen to and credit victims' own risk perceptions.
- Consult as many sources as possible to determine if there is a history of domestic violence.
- Look beyond the criminal justice system for indications of past domestic violence.
- Understand the contexts within which domestic violence occurs.
- Tailor domestic violence intervention and prevention strategies to the particular contexts.
- Provide systematic training on risk assessment and safety planning across disciplines and settings so that comprehensive and individualized safety planning is available and accessible to women who need it.
- Expand and enhance programs and services for batterers beyond the criminal justice system.
- Enhance prevention efforts that get to the root of gender violence by:
  - Raising knowledge and awareness about gender violence;
  - Transforming social norms that promote gender violence;
  - Training providers to recognize and respond to gender power dynamics;
  - Building violence prevention collaborations and networks;
  - Changing institutional practices that reinforce gender violence;
  - Establishing sound public policy and effective legislation.

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