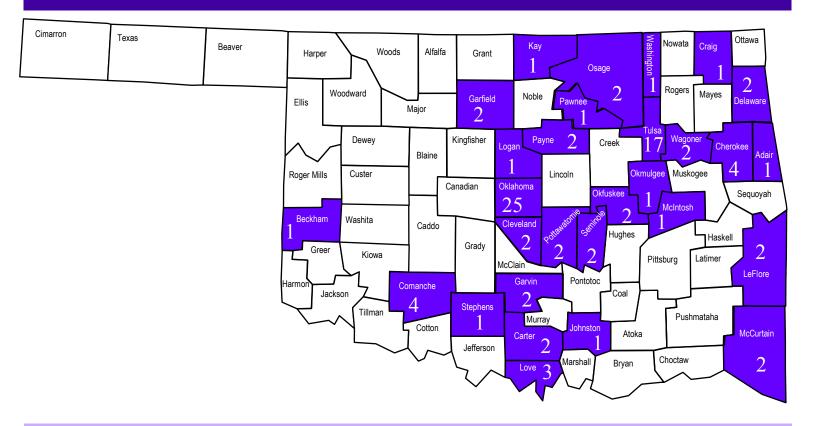
Domestic Violence Homicide in Oklahoma



A Report of the Oklahoma Domestic Violence Fatality Review Board 2014

Executive Summary

| Contents |
|--|
| Domestic Violence Fatalities in Oklahoma 2013 2 |
| Recommendations to Improve System Response to Domestic Violence and Prevent Homicide11 |
| Update on Past Recommendations and Achievements 13 |
| DVFRB Activities 2013 16 |
| Acknowledgements 17 |
| DVFRB Members 18 |

Dear Stakeholder,

In 2013, 90 victims lost their lives to domestic violence in Oklahoma. This is unacceptable.

A mission to reduce the number of domestic violence related deaths in Oklahoma guides the work of the Oklahoma Domestic Violence Fatality Review Board (DVFRB). We believe that the best way to accomplish this mission is for communities and systems, indeed all of us, to come together to address the epidemic of domestic violence.

The DVFRB, an eighteen-member multidisciplinary team composed of representatives from state agencies, organizations, agencies and associations was established in July, 2001, pursuant to 0.S. 22 §1602. The board convenes eleven times each

year (including two joint meetings with the Child Death Review Board [CDRB]), to review domestic violence fatalities in Oklahoma and propose recommendations to improve and coordinate the response across the multiple systems that serve victims of domestic violence in our state. Ongoing case reviews and trend analyses continue to shed light on the gaps that exist in our systems and serve to inform the development of recommendations to close these gaps.

Recommendations serve as an opportunity for our legislature, state agencies, and community organizations to review and update policies, protocols, administrative procedures and professional practices to better serve victims of domestic violence and their children. Recommendations encourage systems to work together to strengthen the safety net across our communities and achieve positive outcomes for victims.

While we identify problems and propose solutions, we also take the time to recognize the leadership, vision, commitment and exceptional service of the dedicated professionals serving victims every day.

Thank you.

Jacqueline Steyn, LPC Program Manager, DVFRB Office of the Attorney General

Cover: The highlighted counties/numbers on the front page represent the **90 victims** (men, women, and children) who died as a result of domestic violence in Oklahoma in 2013, as compiled by the Oklahoma Domestic Violence Fatality Review Board.

| Table 1: 2013 Domestic Violence Related Deaths | | | | |
|--|--------------|-----------------|--|--|
| # Homicide Victims | County | # Suicides | | |
| 1 | Adair | | | |
| 1 | Beckham | | | |
| | Caddo | 1 | | |
| 2 | Carter | | | |
| 4 | Cherokee | | | |
| 2 | Cleveland | | | |
| 4 | Comanche | 1 | | |
| 1 | Craig | 1 | | |
| 2 | Delaware | | | |
| 2 | Garfield | 1 | | |
| 2 | Garvin | 1 | | |
| 1 | Johnston | 1 | | |
| 1 | Kay | | | |
| 2 | LeFlore | | | |
| 1 | Logan | | | |
| 3 | Love | | | |
| 2 | McCurtain | | | |
| 1 | McIntosh | | | |
| 2 | Okfuskee | 1 | | |
| 25 | Oklahoma | 1 | | |
| 1 | Okmulgee | | | |
| 2 | Osage | | | |
| 1 | Pawnee | | | |
| 2 | Payne | | | |
| 2 | Pottawatomie | | | |
| 2 | Seminole | | | |
| 1 | Stephens | | | |
| 17 | Tulsa | 1 | | |
| 2 | Wagoner | 1 | | |
| 1 | Washington | | | |
| 90 Victims | | 10 Perpetrators | | |

State Overview 2013

National data from 2012, exposed Oklahoma's ranking of 3rd in the nation for women killed by men in single victim, single offender homicides for the second consecutive year (Violence Policy Center, 2014). This is the worst ranking for Oklahoma from 1999 to present (Table 2).

"Domestic violence affects thousands of Oklahoma families each year. Though we have had successes in preventing domestic violence homicides by providing assistance to victims and prosecuting those who threaten others with domestic violence, our diligence to raise awareness and prevent this cycle of violence must remain constant."

Oklahoma Attorney General E. Scott Pruitt

| Table 2: Women Killed by Men in Single Victim, Single Offender Homicides | | | | | |
|--|-----------|------------------------|--|--|--|
| Report Year | Data Year | Oklahoma National Rank | | | |
| 2014 | 2012 | 3 | | | |
| 2013 | 2011 | 3 | | | |
| 2012 | 2010 | 17 | | | |
| 2011 | 2009 | 11 | | | |
| 2010 | 2008 | 15 | | | |
| 2009 | 2007 | 9 | | | |
| 2008 | 2006 | 4 | | | |
| 2007 | 2005 | 10 | | | |
| 2006 | 2004 | 7 | | | |
| 2005 | 2003 | 14 | | | |
| 2004 | 2002 | 13 | | | |
| 2003 | 2001 | 10 | | | |
| 2002 | 2000 | 19 | | | |
| 2001 | 1999 | 8 | | | |
| 2000 | 1998 | 7 | | | |
| 1999 | 1997 | 5 | | | |

"Domestic Violence Death Ranking" means number of females murdered by men in single victim /single offender incidents (Violence Policy Center, 2014).

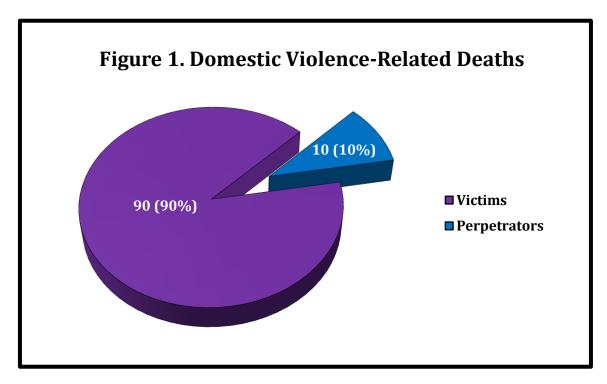
According to the Oklahoma State Bureau of Investigation, 2013, law enforcement reported 207 homicides in Oklahoma, of which 49 were classified as domestic abuse murders; firearms were used in 67.1% of the reported homicides. Other domestic abuse offenses reported by law enforcement included 828 sex crimes, 2,076 assaults, and 19,848 assault and batteries, representing an increase of 2.3% from 22,280 in 2012 to 22,801 in 2013. (OSBI, 2013).

Overview

In 2013, the Oklahoma Domestic Violence Fatality Review Board (DVFRB) identified 100 people in Oklahoma who lost their lives as a result of domestic violence. These deaths included domestic violence victims killed by partners and ex-partners; family members killed by family members, children killed by abusers or other family members; roommates killed by roommates; and suicide deaths of abusers (Table 3).

| Table 3: Breakdown of 2013 Domestic Violence Homicides in Oklahoma | | | | |
|--|----|--|--|--|
| Total domestic violence cases | | | | |
| Total domestic violence homicide victims | | | | |
| Total domestic violence attempted homicide victims | 1 | | | |
| Total domestic violence perpetrators | 89 | | | |
| Total domestic violence perpetrators who died | 10 | | | |

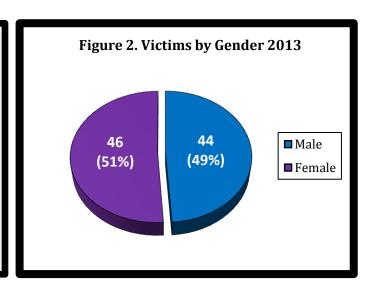
Of the **100** people who died, **90** were identified as domestic violence homicide victims and 10 were identified as domestic violence homicide perpetrators who died as a result of suicide or law enforcement/bystander intervention (Figure 1). The 10 perpetrators of domestic violence who died represented 11.2% of the 89 perpetrators of domestic violence homicide in 2013.



2013 Victim Demographics

2013 Victim Gender

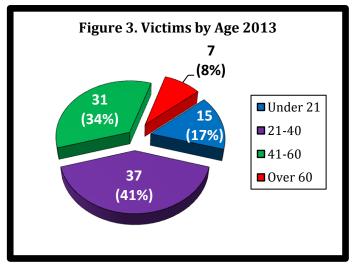
Of the 90 victims, 46 (51%) were female and 44 (49%) were male (Figure 2). Of the 44 male victims, 24 were killed by male perpetrators and 20 were killed by female perpetrators. Of the 46 female victims, 40 were killed by male perpetrators. No adult females were killed by other adult females.



2013 Victim Age

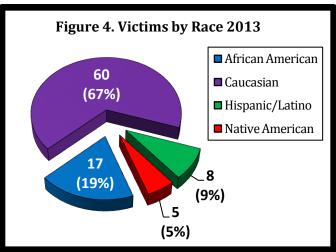
The youngest homicide victim was 5 months old. The oldest victim killed was 80 years old (Figure 3). There were 12 victims under the age of 5.

The average age of victims was **37.1** years.



2013 Victim Race

Of the 90 victims, 60 (67%) were Caucasian, 17 (19%) were African American, 8 were Hispanic/Latino Origin (9%), and 5 (5%) were Native American (Figure 4).

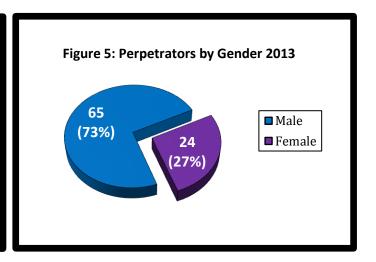


2013 Perpetrator Demographics

2013 Perpetrator Gender

Of the 89 perpetrators, 65 (73%) were male and 24 (24%) were female (Figure 5).

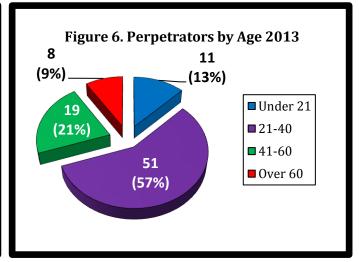
Of the 24 female perpetrators, 17 killed their intimate partners and 7 killed a child (e.g. children killed by their mothers, foster mothers and other relatives).



2013 Perpetrator Age

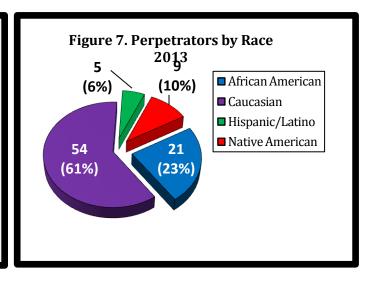
Of the 89 perpetrators, 11 (13%) were under 21, 51 (57%) were 21 to 40, 19 (21%) were 41 to 60, and 8 (9%) were over 60 (Figure 6).

The average age of perpetrators was **36.7** years.



2013 Perpetrator Race

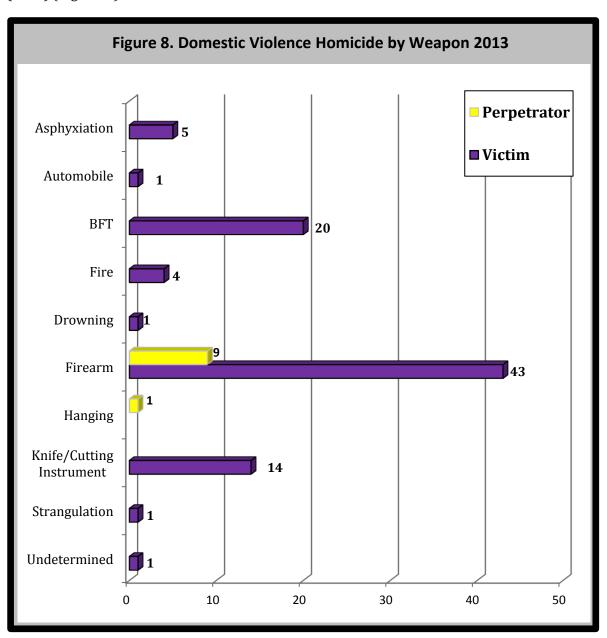
Of the 89 perpetrators, 54 (61%) were Caucasian, 21 (23%) were African American, 9 (10%) were Native American, and 5 (6%) were Hispanic/Latino Origin (Figure 7).



2013 Cause of Death (COD)

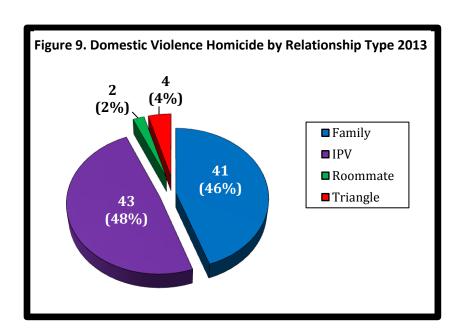
In 2013, victims were killed by firearms (48%), knife/cutting instruments (15%), blunt force (22%), asphyxiation (6%), automobiles (1%), drowning (1%), strangulation (1%), fire (4%), and undetermined (1%).

Perpetrators who committed suicide or suicide by police/bystander intervention following the murder were overwhelmingly killed by firearms (90%) and hanging (10%) (Figure 8).



2013 Relationship Type

In 2013, the majority of domestic violence homicides were perpetrated by intimate partners (48%) and family members (46%). In 4% of the cases, the homicide was categorized as a triangle. The remaining homicides were perpetrated by roommates (2%) (Figure 9).



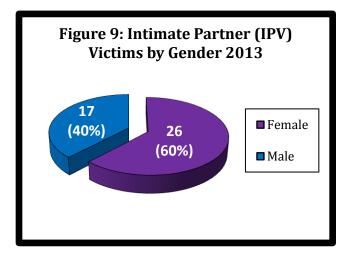
2013 Murder Suicide

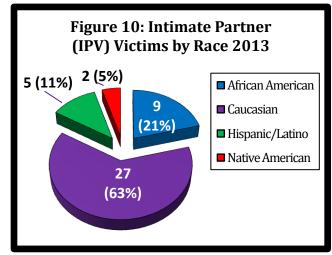
An event is referred to as murder suicide when someone first murders another individual or individuals and then kills himself or herself. In 2013, there were 8 murder suicide cases in which the victim and the perpetrator died and 1 attempted murder suicide in which the perpetrator died but the victim survived. In an additional case, there was no victim but the perpetrator died in a domestic violencerelated incident.

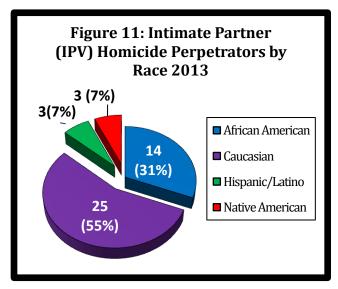
2013 Convictions

As of December 15, 2014, there were 23 convictions (8 jury trials/15 pleas) and 43 cases with charges pending for 2013 cases.

Intimate Partner Violence Fatalities Specific (IPV)







In 2013, 48% of domestic violence homicides were categorized as intimate partner (IPV) homicides. Cases were categorized as "intimate partner homicides" if the victim/perpetrator relationship was: husband/wife, exhusband/ex-wife, boyfriend/girlfriend, exboyfriend/ex-girlfriend common-law husband/wife.

Of the 90 domestic violence homicide victims in 2013. 43 (48%) were killed by intimate partners. The youngest IPV homicide victim was 14 years old. The oldest intimate partner victim was 73 years old. The average age of intimate partner victims was **39.8.** No victims were pregnant at the time of their death compared with 3 pregnant victims in 2012.

Women were more likely than men to be killed by an intimate partner. Twenty-six (60%) intimate partner homicide victims were female and 17 (40%) were male (Figure 9). The majority of IPV homicide victims were Caucasian (63%) and, consistent with national data, victims of color were disproportionately represented in these statistics (21%) (Figure 10).

In 2013, 25 (55%) of IPV perpetrators were Caucasian, 14 (31%) were African American, 3 (7%) were Native American and 3 (7%) were of Hispanic/Latino origin (Figure 11).

Intimate Partner Violence Fatalities Specific (IPV)

Between 1998 and 2013, **593** victims were killed by their **intimate partners** (IPV). While not every county has an Attorney General Certified Domestic Violence Shelter, each shelter has a catchment area that includes all 77 counties. Victims may access shelter in any county regardless of which county they reside in (Table 3).

| Table 3: Intimate Partner Homicide Victims (IPV) by County 1998 - 2013 | | | | | 2013 | | | |
|--|-----------------|------------------|---------|--|--------------|-----------------|------------------|---------|
| County | # DV Victims | # IPV Victims | Shelter | | County | # DV Victims | # IPV Victims | Shelter |
| Adair | 11 | 4 | | | Le Flore | 30 | 11 | Shelter |
| Alfalfa | 0 | 0 | | | Lincoln | 11 | 4 | |
| Atoka | 2 | 0 | | | Logan | 10 | 5 | |
| Beaver | 2 | 1 | | | Love | 9 | 3 | |
| Beckham | 8 | 1 | | | Major | 1 | 0 | |
| Blaine | 2 | 1 | | | Marshall | 6 | 2 | |
| Bryan | 23 | 7 | Shelter | | Mayes | 18 | 10 | |
| Caddo | 14 | 8 | | | McClain | 8 | 5 | |
| Canadian | 20 | 10 | Crisis | | McCurtain | 25 | 12 | Shelter |
| Carter | 31 | 12 | Shelter | | McIntosh | 8 | 4 | |
| Cherokee | 17 | 9 | Shelter | | Murray | 2 | 0 | |
| Choctaw | 4 | 2 | | | Muskogee | 26 | 19 | Shelter |
| Cimarron | 0 | 0 | | | Noble | 2 | 0 | |
| Cleveland | 29 | 10 | Shelter | | Nowata | 2 | 2 | |
| Coal | 3 | 4 | | | Okfuskee | 6 | 3 | |
| Comanche | 54 | 27 | Shelter | | Oklahoma | 302 | 138 | Shelter |
| Cotton | 5 | 4 | | | Okmulgee | 14 | 6 | Shelter |
| Craig | 7 | 5 | | | Osage | 12 | 7 | Shelter |
| Creek | 15 | 7 | | | Ottawa | 13 | 5 | Shelter |
| Custer | 9 | 5 | Shelter | | Pawnee | 8 | 3 | |
| Delaware | 25 | 12 | | | Payne | 16 | 9 | Shelter |
| Dewey | 1 | 1 | | | Pittsburg | 19 | 7 | Shelter |
| Ellis | 1 | 1 | | | Pontotoc | 20 | 11 | Shelter |
| Garfield | 13 | 6 | Shelter | | Pottawatomie | 30 | 12 | Shelter |
| Garvin | 16 | 3 | | | Pushmataha | 3 | 1 | |
| Grady | 15 | 5 | Crisis | | Roger Mills | 0 | 0 | |
| Grant | 1 | 0 | | | Rogers | 15 | 4 | Shelter |
| Greer | 1 | 1 | | | Seminole | 18 | 8 | |
| Harmon | 1 | 1 | | | Sequoyah | 11 | 5 | |
| Harper | 0 | 0 | | | Stephens | 12 | 3 | Crisis |
| Haskell | 9 | 5 | Shelter | | Texas | 6 | 2 | Shelter |
| Hughes | 5 | 0 | | | Tillman | 4 | 3 | |
| Jackson | 3 | 2 | Shelter | | Tulsa | 256 | 104 | Shelter |
| Jefferson | 0 | 0 | | | Wagoner | 19 | 11 | |
| Johnston | 7 | 2 | | | Washington | 12 | 5 | |
| Kay | 11 | 5 | Shelter | | Washita | 1 | 1 | |
| Kingfisher | 1 | 1 | | | Woods | 2 | 0 | |
| Kiowa | 2 | 2 | | | Woodward | 4 | 2 | Shelter |
| Latimer | 4 | 2 | | | | | | |

Recommendations to Improve System Response to Domestic **Violence and Prevent Homicide**

2014 DVFRB Recommendations

Attorney General Certified Domestic Violence and Sexual Assault **Programs and Tribal Programs**

Recommendation 1: Attorney General (OAG) Certified Domestic Violence and Sexual Assault Programs and Tribal Programs should expand their services to include dating violence and sexual violence prevention education in local schools, colleges and universities.

Among adult victims of rape, physical violence, and/or stalking by an intimate partner, 22% of women and 15% of men first experienced some form of partner violence between 11 and 17 years of age (CDC: National Intimate Partner and Sexual Violence Survey [NISVS], 2010). When we consider Oklahoma's state ranking of 3rd for women killed by men in single victim/single offender incidents (VPC, 2013). together with the well-established intergenerational cycle of violence, early prevention and education efforts become a critical component of the overall strategy to decrease domestic violence homicide in Oklahoma.

Prevention strategies, currently being utilized in Oklahoma and across the country, have been proven to prevent or decrease dating violence. Some programs "change norms, improve problem-solving, and address dating violence in addition to other youth risk behaviors, such as substance abuse and sexual risk behaviors" while others "prevent dating violence through changes to the school environment or training influential adults, like parents/caregivers and coaches, to work with youth to prevent dating violence" (CDC, 2014).

OAG Certified Domestic Violence and Sexual Assault Programs and Tribal Programs employ domestic violence/sexual assault advocates who possess the appropriate education, training, experience and expertise to provide these services. Currently, five OAG Certified Domestic Violence and Sexual Assault programs in Oklahoma provide prevention education programs in their local schools, colleges and universities. Additionally, there are several tribal programs providing similar programs across the state. The board would like to encourage other OAG Certified Domestic Violence and Sexual Assault Programs and Tribal Programs, to expand their services to include prevention education programming.

Visit the following websites for more information:

Centers for Disease Control http://www.cdc.gov/violenceprevention/pdf/teen- dating-violence-factsheet-a.pdf

Oklahoma State Department of Health, Injury Prevention Services http://www.ok.gov/health/Disease, Prevention, Preparedness/Injury Prevention Service/Sexual Violence Prevention/index.html

Recommendation 2: OAG Certified Domestic Violence and Sexual Assault Programs and Tribal Programs should enhance non-residential services by offering individual advocacy, court advocacy and groups for victims of domestic violence who do not reside in the emergency shelter.

While many victims of domestic violence are in need of emergency shelter services. there are many others whose services and safety needs would be better met through non-residential services. OAG Certified Domestic Violence and Sexual Assault Programs currently provide non-residential services to varying degrees. The intent of this recommendation is for programs to ensure that the same services routinely provided to victims in shelter such as individual advocacy, court advocacy and groups are equally available to victims not residing in shelter.

Court System

Recommendation 1: Court Clerks and Deputy Court Clerks should be provided with basic professional development/training on Protective Orders (PO's), including information about Full Faith and Credit.

Making the decision to file a PO is not easy and is compounded by the fact that the justice system can be both overwhelming and confusing. Fortunately, in some jurisdictions, victims have access to assistance and support from Domestic Violence Advocates or Victim Witness Coordinators. However, in other jurisdictions, a Court Clerk may be the first and only person a victim of domestic violence speaks to when she or he is trying to obtain a PO. In these instances, the court clerk provides information to the victim such as which forms to fill out, information related to the process and, sometimes, provides additional information such as eligibility criteria or under what circumstances a PO is valid. Therefore, the court clerk must possess sufficient knowledge to be able to provide the victim with accurate information. If the court clerk provides inaccurate information, such as advising a victim that sexual assault does not meet the eligibility criteria for a PO or that the PO will not be valid in another state where the victim will be relocating, victims may then choose not pursue a PO.

Law Enforcement

Recommendation 1: Law enforcement should implement the Lethality Assessment Program (LAP) utilizing the protocol developed by the Maryland Network to End Domestic Violence (MNEDV).

The law passed this spring, House Bill 2526, and put into effect on November 1, mandated 11 validated questions; it did not specifically address the accompanying protocol. The research demonstrates it is the protocol, not just the questions, that increases victim safety. Therefore, even though HB 2526 did not dictate that law enforcement agencies utilize the full MNEDV protocol, the board strongly believes that law enforcement agencies should implement the full protocol to ensure the full protective nature of the process. Further, though the full protocol will place further unfunded burden on domestic violence service providers, their role and cooperation in the protocol is vital to promoting victim safety (see more information p. 13).

Update on Past Recommendations and Achievements

Making a Difference in Oklahoma

Since 1998, the DVFRB has submitted recommendations based on intensive case review and analysis of trends. Recommendations are centered on system improvements, including increased awareness, training for allied professionals, policy and protocol considerations for the court system, law enforcement and child welfare, batterer intervention programs and others. Always, the goal is to close safety gaps across the multiple systems that intersect with victims of domestic violence and their children.

Oklahoma Lethality Assessment Program (LAP)

Spanning several years, the Oklahoma Domestic Violence Fatality Review Board (DVFRB) recommended training on dangerousness and lethality risk indicators for professionals outside of domestic violence programs who work with victims of intimate partner violence (IPV). Since law enforcement are so often contacted by victims at some time prior to their death. they are well-positioned to help victims assess their level of danger and connect them to safe services. The question often asked by the board is "does the victim know how much danger she is in"? Factors that can help us assess the level of danger an abused woman has of being killed by her intimate partner have been extensively investigated by Dr. Jacquelyn Campbell of the Johns Hopkins University School of Nursing. Based on Dr. Campbell's body of research, the Maryland Network to End Domestic Violence (MNEDV) developed the Lethality Assessment Program (LAP) as a "strategy to prevent domestic violence homicides and serious injuries." More information on the MNEDV LAP can be accessed from http://mnadv.org/lethality/

In Oklahoma, the LAP was evaluated during a three-year study funded by a grant from the National Institute of Justice (NIJ). DVFRB members, Janet Wilson, PhD. R.N and Sheryll Brown, M.P.H., were two of the primary researchers. The study, *Police Departments'*

Oklahoma LAP Study

Police Departments' Use of the Lethality Assessment Program: A Quasi-Experimental Evaluation (Messing et al., 2014).

LAP study participants:

- Experienced less frequent and less severe violence;
- Engaged in protective strategies both immediately after the event (e.g., seeking services, removing/hiding their partner's weapons) and at follow-up (e.g. applying for and receiving an order of protection, establishing a code with family and friends); and
- Experienced greater satisfaction with the police response.

Study results are available on the NCJRS website:

https://www.ncjr.gov/pdffiles1/ nij/grants/247456.pdf

Use of the Lethality Assessment Program: A Quasi-Experimental Evaluation (Messing, Campbell, Wilson, Brown, Patchell & Schall, 2014), examined the effectiveness of the LAP. The LAP, a collaboration between police and OAG Certified Domestic Violence Service Providers, involved two phases. First, a police officer on the scene of a domestic violence incident used an 11-item risk assessment (Lethality Screen) to identify victims at high risk of homicide. Second, if the victim screened in as "high risk", the officer immediately connected her via telephone to a collaborating OAG Certified Domestic Violence and Sexual Assault Program for safety planning. advocacy, and referral for services.

Earlier this year, Representative (now Senator) Kay Floyd, D-Oklahoma City, and Senator David Holt, R-Bethany, authored House Bill 2526 to address the problem of domestic violence in Oklahoma. The bill was signed into law by Governor Mary Fallin on April 29, 2014 and went into effect November 1, 2014. The legislation provides Oklahoma peace officers with a list of questions to assess an IPV victim's level of danger at the scene and requires officers to provide referrals to services. In the fall of 2014, the Office of the Attorney General, Victim Services Unit, conducted three LAP regional trainings funded by a Violence Against Women (VAWA) grant. The training utilized a "train the trainer" model to assist law enforcement agencies across Oklahoma to prepare for implementation of the new legislation. The training team included Janet Wilson, PhD, R.N. (OU School of Nursing), Sheryll Brown, MSW, (Oklahoma State Department of Health), Captain Kimberly Flowers (Oklahoma City Police Department), Kristie Mitchell (YWCA Oklahoma City) and Jacqueline Steyn (Office of the Attorney General). The training was facilitated by Lesley March (Chief, Victim Services Unit, Office of the Attorney General). Additional trainings will be offered in the spring, 2015.

Implement training for Mental Health Professionals in Oklahoma

In efforts to promote safety for victims, training recommendations for mental health professionals have been made by the DVFRB and others spanning several years. In the Domestic Violence Homicide in Oklahoma Annual Report (2013), we highlighted the "Mental Health Training for Mental Health Professionals" initiative in Oklahoma. The initiative emerged from the work of the DVFRB, leading to the development of a Mental Health and Domestic Violence committee comprised of multiple mental health and substance abuse agencies and organizations in Oklahoma including the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). Other partners included the Oklahoma Office of the Attorney General, Victim Services Unit (DVFRB), together with the Oklahoma Coalition Against Domestic Violence and Sexual Assault and the YWCA Oklahoma City.

In addition to placing "domestic violence liaisons" in all agencies contracted to the Oklahoma Department of Mental Health and Substance Abuse Services to coordinate safe referrals to OAG Certified Domestic Violence and Sexual Assault Programs, the committee recently completed the online training curriculum, "Trauma-Informed Domestic Violence Training for Mental Health Professionals". The training will be delivered using a webinar format and is expected to be available in the spring/summer, 2015.

Best Practice Guidelines for Oklahoma Department of Human **Services (DHS) Child Welfare Workers**

Domestic violence training recommendations for DHS have been made by the DVFRB over several years. Child welfare workers frequently provide services to families impacted by domestic violence. In fiscal year, 2013, 25.1% of all DHS Child Welfare substantiated reports were for domestic violence. In addition, approximately 30% to 50% of TANF (Temporary Assistance to Needy Families) recipients disclose domestic violence.

In 1999, the National Council of Juvenile and Family Court Judges (NCJFCJ) presented principles of "safety, well-being, and stability for all victims of family violence and the need to hold batterers accountable for their violence" (NCJFCJ, 1999 p. 6). The project included recommendations developed from diverse social and legal systems and with strong representation from judicial leaders. The recommendations have come to be known as the "Greenbook" Recommendations (NCJFCJ, 1999). An understanding that successful collaborations are built through "cross-communication" and "cross-training" for system partners is central to the development of these recommendations.

Earlier this year, the DVFRB Program Manager, Jacqueline Steyn and the OAG VSU Chief, Lesley March, met with Director Ed Lake and his team to discuss the recommendation made by the DVFRB in 2013 to create an internal position within DHS to act as a liaison between OKDHS and Attorney General Certified Domestic Violence and Sexual Assault Programs. Currently, DHS is updating the *Domestic* Violence Manual for Child Welfare Professionals: A Desk Reference Guide (2012). The new updates are expected to provide additional guidance to child welfare professionals based on trends from the field and best practices for domestic violence. The updated guide is expected to be disseminated to child welfare workers across the state. The manual is currently used extensively in training to assist workers in the areas of screening, safety planning and danger/lethality assessment at the very complex intersection of child maltreatment and domestic violence. In addition, DHS currently has several domestic violence initiatives underway in support of safety for children living in families where a parent is being abused. The DVFRB looks forward to continued collaboration and partnership with DHS in these initiatives and future projects.

Educate Healthcare Providers in Health Care Settings

In 2012, the DVFRB made a recommendation for healthcare providers to be trained in use of the National Consensus Guidelines on Identifying and Responding to Domestic Violence Victimization in Health Care Settings (2004) developed by the Family Violence Prevention Fund. In early 2014, DVFRB Program Manager and DVFRB member, Janet Wilson, PhD., R.N. met with Jane Nelson from the Oklahoma Nursing Association (ONA) for a discussion on implementation of the board's recommendations. Several preliminary ideas were considered to move this recommendation forward to nursing professionals in Oklahoma.

2013 DVFRB Activities

DVFRB members broaden the reach of the board by regularly conducting activities outside of their regular duties. Some examples include:

- DVFRB member, Janet Wilson, PhD, R.N., OU College of Nursing, acted as consultant to the National Domestic Violence Fatality Review Initiative, Flagstaff, AZ. In addition, Dr. Wilson engaged in the following DVFRB-related activities:
 - 1. National Domestic Violence Fatality Review Initiative (NDVFRI) International Webinar (with Frank Mullane), Expanding the Forensic Narrative: Engaging Surviving Family Members in the Domestic Violence Fatality Review Process, November 18, 2014.
 - 2. Violence Prevention Emerging Best Practices, Oklahoma District Attorney Council, Ouarterly Victim Services Roundtable Discussions hosted by tribal groups throughout Oklahoma - reporting on DVFRB findings and impetus/progression of OK-LA study
 - 3. 2014 Partnership Conference on Domestic & Sexual Violence and Stalking, September 24 – 25, 2014, Embassy Suites Hotel & Conference Center, Norman, Oklahoma. Dr. Janet Sullivan Wilson, Sheryll Brown (DVFRB member, Oklahoma State Health Department), Captain Kim Flowers (Oklahoma City Police Department), and Kristie Mitchell (YWCA, Oklahoma County,) presented DVFRB case analyses, impetus & research on the Oklahoma Lethality Assessment Protocol.
 - 4. Oklahoma Nursing Association (ONA) Annual Report 2013: Oklahoma Domestic Violence Fatality Review Board (ODVFRB), Oklahoma Nurses Association.
 - 5. ONA Award for Impact on Public Policy (ONA representative to DVFRB), Oklahoma Nurses Association Annual Conference, Tulsa, Oklahoma, October, 2014.
- DVFRB member, Karen Frensley, LMFT, (Oklahoma Department of Mental Health and Substance Abuse Services) and Jacqueline Steyn (DVFRB Program Manager, Office of the Attorney General) presented at the 2014 Partnership Conference on Domestic & Sexual Violence and Stalking, September 24–25, 2014, Embassy Suites Hotel & Conference Center, Norman, Oklahoma, Domestic Violence: What All Mental Health Professionals Need to Know!
- DVFRB member, Kristie Anderson and other child welfare professionals, presented with DVFRB Program Manager at the Annual Meeting of Child Welfare Supervisors, June 2014, on Domestic Violence Best Practices for Child Welfare Workers.
- DVFRB member, Maria Alexander, DVFRB designee for the State Commissioner of Health, was instrumental in the development of a prompt and efficient process for the DVFRB to be able to determine the number of domestic violence homicide victims who sought services through local health departments prior to their death. In addition, her efforts have resulted in all health departments in northeast Oklahoma reposting information on domestic violence resources in the public bathrooms and in waiting rooms.

- DVFRB Program Manager, Jacqueline Steyn and board members, Dr. Janet Wilson and Sheryll Brown, provided training on Danger Assessment to Victim Witness Coordinators from prosecutors' offices across the state at the *Victim* Witness Coordinator Meeting July 17, 2014.
- DVFRB Program Manager, Jacqueline Steyn, provided domestic violence training for juvenile court personnel, including judges, prosecutors, child welfare professionals, and Court Appointed Special Advocates (CASA's) at five regional trainings (CIT) provided by the Oklahoma Administrative Office of the Courts. Children's Court Improvement Program. Ms. Steyn also provided several trainings for domestic violence advocates, crime victim services students, batterer intervention facilitators, juvenile affairs staff, substance abuse professionals, and attorneys on the DVFRB and lethality risk factors.
- DVFRB member, Jennifer McLaughlin provided training at several conferences and included information about the work of the DVFRB and assessing dangerousness/lethality.

Acknowledgements

The members of the Domestic Violence Fatality Review Board and the staff of the Oklahoma Office of Attorney General gratefully acknowledge the time and effort rendered during this project. The outcomes of this project would not have been possible without the gracious cooperation and collaboration of the officials and their staffs acknowledged here:

- · Oklahoma State Bureau of Investigation
- · Office of the Chief Medical Examiner
- Oklahoma Department of Human Services
- · Oklahoma State Department of Health
- · Oklahoma Department of Mental Health and Substance Abuse Services
- · Oklahoma Office of Juvenile Affairs

Many thanks to all of the County Sheriffs, Police Chiefs, District Attorneys, Court Clerks and their staffs who have helped us gather the case materials. We realize many of you already are pushing the boundaries of time and we appreciate your hard work. A special thanks to the Oklahoma District Attorneys Council, Violence Against Women Act (VAWA) Board and Grants Division. The S.T.O.P. Violence Against Women Act Grant funds this project. Without this support, this project would not be possible.

2014 Domestic Violence Fatality Review Board Members

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Oklahoma Domestic Violence **Fatality Review Board**

Oklahoma Office of Attorney General 313 N.E. 21st Street

Oklahoma City, OK 73105

Phone: 405-522-1984 Fax: 405-557-1770

Email: *Jacqueline.Steyn@oag.ok.gov*

Please go to

https://www.oag.ok.gov

- · This report
- The DVFRB Mission, purpose and definitions
- · Methods and limitations of data collection and data
- · History of the DVFRB

Please disseminate this report widely.

If you or someone you know needs help in a Domestic Violence situation, please call:

Safeline 1-800-522-SAFE (7233)

If you need general information about Domestic Violence, please call:

Oklahoma Coalition Against Domestic Violence and Sexual Assault (405) 524-0700

The Office of the Attorney General, Victim Services Unit - (405) 521-3921

If you need more information about the Oklahoma Domestic Violence Fatality Review Board, please call: The Office of the Attorney General (405) 522-1984

If you are in an emergency situation please dial 9-1-1 immediately.

Publication prepared by the Oklahoma Office of Attorney General, E. Scott Pruitt on behalf of the Oklahoma Domestic Violence Fatality Review Board, 2014.

Submitted by: Jacqueline Steyn, Program Manager, DVFRB

Kody E. Young, Research Assistant

With assistance from: Lesley March, Chief, Victim Services Unit, and Victim Services

Staff

Research assistance provided by:

Jessica "Liz" Wallace, OSU-OKC Intern Dirce Gillin, OU Intern Sheridan Fulkerson, UCO Intern

This project is supported by subgrant No. V13-00001, awarded by the Office on Violence Against Women, US Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this publication are those of the author(s) and do not necessarily reflect the views of the Department of Justice, Office on Violence Against Women.