This report is a product of the Multnomah County Domestic Violence Fatality Review Team, a collaboration of private, public and nonprofit organizations.

Written by the Multnomah County Domestic Violence Coordination Office
Portland, OR

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Since 2005 the Multnomah County Domestic Violence Fatality Review Team has been conducting multi-disciplinary, systemic examinations of intimate partner homicides in our County, with the goal of preventing future deaths by identifying risk factors associated with homicides; improving community responses to domestic violence; increasing public awareness and identifying strategies to prevent domestic violence; and fostering communication across public and private agencies that intervene in domestic violence. The team comes together for this purpose with a deep sense of respect for those who have lost their lives to domestic violence, and their community of loved ones who are left behind after their death. It is our shared perspective that these tragic incidents are not only heartbreaking losses to be mourned, but are also important moments for us to reflect on the opportunities they provide to us, to learn and change how we work in Multnomah County to prevent and respond to intimate partner violence.

The case selected for the Spring 2015 review had multi-layered and complex issues for both the victim and the perpetrator, as well as their children. High levels of gang involvement and familial history of distrust in “systems” led to a victim who was isolated from community services and a perpetrator who had unlimited access to weapons and drugs. While both grew up in Oregon, the victim and perpetrator had significantly different childhood experiences. The perpetrator’s early life experiences included housing instability, physical and sexual abuse, head trauma from a young age and exposure to drugs and domestic violence. The victim grew up in a relatively stable home where despite her parent’s divorce during her adolescence, she was not exposed to drug use or violence in her homes. However, outside of her home, the victim spent large periods of time with family members who were, and continue to be, deeply entrenched in gang lifestyles which promoted misogyny, racism, drug use and violence.

Both the victim and perpetrator had children from previous relationships when they became intimately involved and quickly had a biological child of their own. The victim’s children were both present at the time of the homicide and the child that they shared spent the following 8 hours on the run with her father prior to his surrender. At the time of the homicide the victim had applied for a restraining order outlining physical violence as well as mental and emotional abuse from the perpetrator throughout their relationship. She had recently filed for divorce and had been granted sole custody of the child they shared with limited visitation for the perpetrator. Leading up to the homicide the perpetrator began displaying a variety of concerning behaviors including stalking the victim at her apartment, threatening suicide, selling his belongings and behaving erratically with family. The perpetrator had an established history of mental health diagnosis and both the victim and perpetrator were reported to use drugs and alcohol. The perpetrator had been on probation previously for assaults committed in Clackamas and Multnomah County and had been released from supervision 2 months prior to the homicide.

The victim was shot in the head at her apartment while both children were present and was taken off life support by family the following day. Her children now reside in the care of relatives who are seeking supportive services and are committed to maintaining their sibling relationship. The perpetrator was arrested the night of the homicide and pled guilty to Murder & Felon in Possession of a Firearm and Body Armor a year after the incident. He is serving 28 years in prison and his two children (from a previous relationship) are being raised by his relatives.
**Corrections Health**

The Correction Health Division is part of the Multnomah County Health Department that provides health care to adults and juvenile inmates at multiple Multnomah County jail facilities. Providing health care to detained individuals is the responsibility of Corrections Health. From first entering the jail through booking until release or transfer to another jail, prison or (United States Marshall) USM service, trained and skilled Corrections Health personnel provide screening, illness identification, evaluation and treatment through a system of policies and procedures that reflect the standard of care in the community and equal to other correctional facilities across the country. Over 38,000 individuals are cared for each year with over 60% having serious unstable and chronic health conditions, such as diabetes, kidney failure, infections, alcohol and drug withdrawal and major mental/behavioral illnesses.

The right to health care in jail is legally mandated under Federal and state law. When an individual is arrested and incarcerated the obligation for health care falls upon the government as a matter of constitutional law, enforceable under the US Constitutions 8th and 14th Amendment’s. Failure to provide health care amounts to deliberate indifference to serious medical needs. State Laws (ORS 169.076) further delineate standards for local correctional facilities.

During the review conducted this Spring the team was able to identify that the perpetrator struggled to maintain his mental health medication during and after his frequent entrances and exits through the County jail systems. It was clear in this case that when unmedicated the perpetrator was unable to maintain employment, escalated in his abusive behavior with his intimate partners, and increased his use of drugs and alcohol.

Oregon is currently considered a “suspend” state, which means that an inmate’s health insurance is suspended for 30 days after they enter the Department of Corrections (DOC) and canceled completely after 30 days. Senate Bill 233 was just passed and is awaiting the signature of the Governor which would extend the suspension period from the current 30 days to one year. Multnomah County DOC currently employs an Eligibility Specialist (1.5FTE) inside the jail system to aid inmates in signing back up for insurance prior to their release from jail. Additionally, because Corrections Health is part of the County Health Department there is a unique opportunity for information sharing with the Department of Community Justice (DCJ) and community mental health providers with proper releases of information.

While incarcerated in Multnomah County inmates who are identified through self-reporting as in need of mental health, or other, medications. These medications are often provided in an open setting on the jail pod/module which limits privacy. During this case review information was learned from Corrections Health that at times inmates do not disclose medications that they are in need of to avoid the social stigma in jail of taking mental health or other medications.
Recommendations

1.1 The Corrections Health Division should establish a temporary workgroup to examine medication distribution to inmates to determine if privacy can be increased for inmates in need of medication but concerned about the social stigma of accepting medications while in custody. Potential recommendations may be considered and developed following this initial analysis of medication distribution.

1.2 The Corrections Health Division should provide training to local Department of Community Justice regarding information sharing and necessary releases of information to aid in continuity of care for inmates entering Multnomah County DOC who are currently on supervision with Multnomah County.

Multnomah County Domestic Violence Fatality Review team members who have been identified to assist in moving these recommendations forward are Tim Moore, Laura Richie and Sandra Rorick. They will work in collaboration with Nancy Griffith, Director of Corrections Health. The Multnomah County Domestic Violence Coordination Office will offer support and coordination of this effort as well.

Department of Community Justice: Parole & Probation

The Department of Community Justice (DCJ) serves a vital role in protecting public safety and strengthening communities. They intervene to prevent the recurrence of crime among juvenile and adult defendants and offenders by supervising them and getting them they help they need to change problem behavior. Supervision and treatment resources are provided to youth, adults, families and communities to address the underlying issues that drive crime. DCJ efforts are guided by evidence-based strategies to maximize resources and results.¹

The Adult Services Division (ASD) promotes public safety and strives to reduce recidivism while supervising over 10,000 adults sentenced to probation or released from custody on parole. Adults on supervision are held accountable through a balance of supervision, services, and sanctions designed to develop necessary skills for success, while effectively using public resources. The Division works closely with

¹ https://multco.us/dcj-juvenile/
community members and partners using research and proven methods to promote positive change in the adults who are supervised.²

There are a variety of supervision teams and services that are provided through DCJ including the Day Reporting Center, the Domestic Violence Unit, Drug Court Unit, Family Services Unit, Female Only Supervision, Fines Fees & Restitution, Formal Supervision Misdemeanor Unit, Gang Coordination, Hearings, Local Supervisory Authority Unit, the Londer Learning Center, Medium Risk Supervision, Mentally Ill Supervision, Monitored Misdemeanor Program, Presentence Investigation Unit, Pretrial Services Program, Programs Unit, R.A.I.N. Program, Recognizance Unit, Reduced Supervision, Sex Offender Supervision Program, and Treatment Services. All of these different units and service teams are provided training in multiple areas, however specialize in one to two.

In this and previous reviews, the perpetrator was on formal supervision due to crimes committed that were unrelated to domestic violence, though he also clearly displayed abusive and controlling behaviors to his intimate partners. Despite probation officer’s efforts to support the victim in this case, and regardless of efforts to refer the perpetrator to services that would help address supervision needs as well as domestic violence issues, the perpetrator continued to use power and control tactics to abuse and isolate his partner. It became clear in this case, as in previous reviews, that having ongoing cross training for those charged with supervision of adult offenders who are on probation for crimes other than DV, but clearly need services to address abusive behavior, is a must.

Recommendations

1.1 The Department of Community Justice should establish an annual training for all sworn staff that would focus on cross-discipline collaboration, professional capacity building, and updated training on the crossover of domestic violence, gangs, mental health and addiction. This training would be mandatory for staff and would serve as an opportunity for staff to increase their skills and knowledge outside of their specified field.

1.2 In collaboration with Corrections Health, the Department of Community Justice will provide training for their sworn staff regarding information sharing and necessary releases of information to aid in continuity of care for offenders entering DOC who are currently on supervision, and for offenders exiting DOC to community supervision in Multnomah County.

Multnomah County Domestic Violence Fatality Review team members who have been identified to assist in moving these recommendations forward are Laura Richie and Sandra Rorick. They will work in collaboration with Nancy Griffith, Director of

² https://multco.us/dcj-adult
Corrections Health. The Multnomah County Domestic Violence Coordination Office will offer support and coordination of this effort as well.

**Juvenile Guardianships & Visitor Appointments**

In Multnomah County, if there is a petition filed in a protective proceeding seeking the appointment of a guardian for an adult respondent or temporary fiduciary (a person to prudently care for money for another person) who will exercise the powers of a guardian for an adult respondent, the court shall appoint a visitor under ORS 109.329. The visitor in these cases interviews the person nominated as well as anyone who has examined the protected person (psychologist or physician), and any other person who may have relevant information. The visitor then provides a report to the court regarding the information they gathered, recommendations they would make regarding suitability of the nominated fiduciary, limitations that should be imposed, or the need for further evaluation. Please note that a visitor can be appointed anytime after the appointment of a fiduciary, and has the opportunity to perform any duty they could have performed at the time of initial appointment.

In Multnomah County Juvenile proceedings visitors are appointed at the discretion of the Judge presiding over the case. Currently there is not a directive that visitors will be assigned, but rather that they may be assigned. During the case that the DVFRT reviewed this Spring concerns were raised that the children of both the victim and the perpetrator were placed with family members who may not have been fully evaluated for their suitability to act as guardian of the children. DHS Child Welfare had an open CPS (Child Protective Services) assessment at the time of the homicide regarding the victim’s children. When the homicide occurred the victim’s oldest child went into the care of her biological father and her youngest child was placed with the maternal Grandmother. Both of these placements were evaluated and supervised for a period of time by DHS Child Welfare and deemed to be appropriate, however, the perpetrator’s children were adopted by the paternal Grandparents without any outside agency involvement beyond the family court proceeding for the adoption. The paternal Grandparents of the perpetrator’s children had already been working with court systems to obtain guardianship of both boys and there was no active DHS involvement regarding these children at the time of the homicide.

The reality faced in these type of cases is that family can apply for guardianship/adoption of children and the majority of the time there is not cause for the judicial officer to request additional records or information from outside agencies (ie: Child Welfare, LEA, etc.). Additionally, the visitor program in Multnomah County is volunteer based and most times visitor’s are unable to accept new cases due to heavy workload.

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1 2013 ORS 125.150 Appointment of Visitors
Recommendations:

1.1 Policy/procedure in assignment of a visitor to cases where family members are applying for adoption/guardianship of a minor should be reviewed for possible updates or modifications that would allow Judicial Officers greater ability to assign visitors in these cases. Potential recommendations may be considered and developed following this initial analysis.

1.2 Additional evaluation of the Multnomah County visitor program should be undertaken in an effort to better understand when visitors are being utilized, what improvements to this program may be needed, and what affect visitor appointment has on the outcome of adoption/guardianship in Juvenile Court cases where both parents are either deceased or unavailable to parent.

Multnomah County Domestic Violence Fatality Review team members who have been identified to assist in moving these recommendations forward is the Honorable Judge Maureen McKnight. The Multnomah County Domestic Violence Coordination Office will offer support and coordination of these efforts as well.

Best Practice for Cross-Jurisdiction Collaboration/Services

Multnomah County borders the other two most densely populated counties in Oregon, Clackamas, Washington, and Multnomah counties, aka “the tri-counties” offer a wide variety of services drawing people from all over the state, as well as from out of state.

Due to their close proximity, families who are experiencing domestic violence may live in one county and work in another. They may move frequently between two counties in attempts to find safety, reconnect with social/family supports, or because they are simply facing housing instability coupled with other hurdles in their path. Because of this, and the likelihood that survivors are accessing services cross-jurisdictions, the tri-counties work hard to stay connected to one another, current on services that are offered and able to provide a warm hand-off or needed collaboration to help support survivors navigating these systems.

In 2009 Multnomah County hosted a Regional Training which brought representatives from various local agencies together to look at domestic violence systems from different angles, and to assess any gaps in the existing systems. From that training and collaboration the group known now as the Rose City Justice Jammers was formed. This group is comprised of advocates, criminal justice professionals, law enforcement and others, who come together regularly in an effort of continued collaboration and regional information sharing. An additional member of this group is Clark County, in the State of Washington, due to a high amount of overlap in families seeking services there as well.
During the DVFRT Spring case review the victim lived back and forth between Clackamas and Multnomah counties and family/friends believed that she did not have knowledge of the domestic violence resources available to her. The victim in this case had her restraining order out of Clackamas County, however was living in, and the homicide occurred in, Multnomah County. Family reported that she received little information regarding domestic violence services at the time of filing her restraining order and feel that had she been provided these resources, she would have reached out for support. Further, family and friends reported being unfamiliar with services for domestic violence survivors in both counties and felt that were there stronger community outreach; they would have felt more confidence in talking with the victim about what was happening in the relationship.

Recommendations

1.1 It is important for service providers to not only be aware of what is immediately available to survivors in their area, but also to have current knowledge of what services may be helpful to them in the surrounding area. Justice Jammers should compile, if this is not already in circulation, a current list of services in the tri-county area, that are offered to survivors of domestic violence. Further, this list should be updated and reviewed regularly with the full team to ensure that front line staff have the most current information to provide to clients.

1.2 In Multnomah County when a survivor applies for a Restraining Order, whether in person, or via video conference, there is an advocate present who can provide emotional support, referrals for ongoing services, and help to ensure that paperwork is properly filled out and submitted on time. It is the recommendation of the DVFRT that this service is beneficial to survivors and should be provided in other counties across the State.

Multnomah County Domestic Violence Fatality Review team members who have been identified to assist in moving these recommendations forward are Becky Bangs (recommendation 1.1), with Justice Jammers co-chairs, Sandra Rorick and Traci Anderson. The Multnomah County Domestic Violence Coordination Office will offer support and coordination of these efforts as well.
The Multnomah County Domestic Violence Fatality Review Team is comprised of members from various public, private, and non-profit agencies who come together in the effort of applying a multi-disciplinary lense to domestic violence homicides that occur in our county. This team is a highly dedicated group of individuals who goes about their task with a deep sense of respect for the lives that have been lost, the families and community members directly affected by these tragedies, and the abiding hope that this work will make a direct impact in changing the way we address domestic violence in Multnomah County.

Abuse Recovery Ministry & Services  
Oregon Department of Justice  
Legal Aid Services  
Local Public Safety Coordinating Council  
Metropolitan Public Defenders  
Multnomah County Attorney’s Office  
Multnomah County Circuit Court*  
Multnomah County Circuit Court*  
Multnomah County Commissioner*  
Multnomah County District Attorney’s Office  
Multnomah County District Attorney’s Office  
Multnomah County Health Department  
Department of Community Justice  
Department of Community Justice  
Department of Community Justice  
Department of Juvenile Justice  
Domestic Violence Coordination Office  
Domestic Violence Coordination Office  
Domestic Violence Enhanced Response Team  
Multnomah County Sheriff’s Office  
Oregon DHS-Child Welfare  
Oregon DHS-Child Welfare  
Oregon DHS-Self Sufficiency  
Gateway Center  
Portland Police Bureau  
Raphael House  
VOA Home Free

Stacey Womack  
Erin Greenawald  
Julia Olsen  
Abbey Stamp  
Lane Borg  
Patrick Henry  
Judge Maureen McKnight  
Judge Nan Waller  
Loretta Smith, District 2  
Traci Anderson  
Charles Sparks  
Sonja Miller  
Sandra Rorick  
Andrew Altman  
Laura Ritchie  
Deena Corso  
Annie Neal  
Allison Wilson  
Becky Bangs  
Tim Moore  
Jennifer Bren  
John Richmond  
Linda Pursell  
Martha Strawn-Morris  
Sgmt. Ron Mason  
Emmy Ritter  
Kris Billhardt

*2014-2016 Co-chairs