

2013-
2014

Iowa Domestic Abuse Death Review Team

Prepared by The Iowa
Department of Health
and Human Services
on behalf of the Iowa
Domestic Abuse
Death Review Team

Acknowledgements

This report is compiled in honor of those we have lost to Intimate Partner Violence and their surviving family, friends, and communities. Their lives mattered, they were loved and important. We remember them as more than the harm they experienced and wish healing upon their surviving loved ones.

Iowa Domestic Abuse Death Review Team

2013-2014

The Iowa Domestic Abuse Death Review Team was established in 2000 to identify the causes and manner of deaths resulting from domestic abuse in Iowa. It is established by statute in the *Code of Iowa*, Chapter 135.108-135.112. Team members are appointed by the Director of the Department of Public Health for a term of three years, and they meet up to six times per year to review cases of homicide and suicide resulting from domestic violence. In a biannual report, case data is presented to identify contributing factors to the deaths and form the basis for recommendations for the prevention of future domestic abuse-related deaths.

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Executive Summary – Findings and Recommendations

Domestic violence (DV) impacts individuals from all communities. In case review we examine data available by case, searching for trends and possible contributing factors. Percentages provided are based on the number of cases for which data is available. Cases without known demographic areas were removed from the total. When case percentage is compared to the overall percentage of Iowa’s population, possible health inequities can be identified. Individuals who identify as male are responsible for the majority of domestic abuse related deaths in Iowa. This presents the question, “In what ways can we improve community support for men and boys to reduce violence as a means for problem solving?”

Risk Factors

The team identified the top risk factors for domestic abuse deaths, listed below. The at-risk identifiers are those conditions that the team determined directly contributed to the death.

| Most Common At-risk Identifiers | Factors identified prior to fatalities* |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ol style="list-style-type: none"> 1. History of abuse 2. Substance use 3. Excessive control/jealousy 4. Financial problems/unemployment 5. Mental health diagnosis | <ol style="list-style-type: none"> 1. Isolation 2. Knowledge the relationship was ending 3. Stalking behavior 4. Presence of a dispute/argument 5. New partner |

**Additional factors; complicated grief, access to firearms, age difference, lack of education, entitled, strangulation, manipulation, and social norms*

Opportunities for Intervention

To identify the potential of preventing future domestic abuse deaths, the team identifies contact that the victim or person causing harm may have had prior to the fatality. The table below lists setting specific categories, identifying those with the most opportunity to identify and potentially intervene when domestic abuse is known or identified. Actions that could be taken by those included in the recommendations for prevention are described more thoroughly on the next page.

Opportunities for Intervention*

1. Family and friends
2. Law Enforcement/prosecution
3. Veterans Affairs
4. Health Care Providers
5. Workplace

Opportunities for Intervention; **Family and friends: Were aware of the abuse/danger. **Law Enforcement (LE)/prosecution:** Provide referrals for domestic violence (DV) services, provide support to LE to reduce compassion fatigue in responding to DV cases. **Veterans Affairs:** Care provider of one or both parties **Health Care Providers:** Opportunity for screening/referral/support at appointments, Emergency Department, and Primary Care Provider visits. **Workplace:** Co-workers knew of dangerous circumstances.*

Recommendations for Prevention

1. **Family and Friends:** Educate yourself about healthy relationships. Learn how to help a loved one and provide referrals for additional support to victim service providers.
2. **Law Enforcement:** Always, in every circumstance, refer DV victims to services.
3. **Judges and court settings:** Ask about firearms at home and complete a lethality assessment with the person doing harm
4. **Veterans Affairs:** Assessment on PTSD, exposure to domestic violence growing up, and non-violent problem solving skills. Provide support and referral.
5. **Healthcare Providers:** Training on how to identify domestic violence and provide resources
6. **Workplace:** Assure that supervisors receive training on substance abuse/misuse and domestic violence. Training should also include services referral for victims, including recognizing lethality.

In addition to the recommendations listed above, the team identified the following activities that they believe would also prevent future deaths.

- **Integrated services** for mental health, substance use disorder, and victim counselor
- **Reduce stigma** about substance use and mental health
- **Support families** by providing early education, services, and supports
- **Screening for domestic violence** by substance use treatment providers

Case Findings

Demographics

Gender

Of the cases reviewed during this report period, the majority of persons killed by a current or former partner/spouse were female. The majority of those causing these fatalities were male.

Figure 1. Gender of person murdered by a current or former partner or spouse

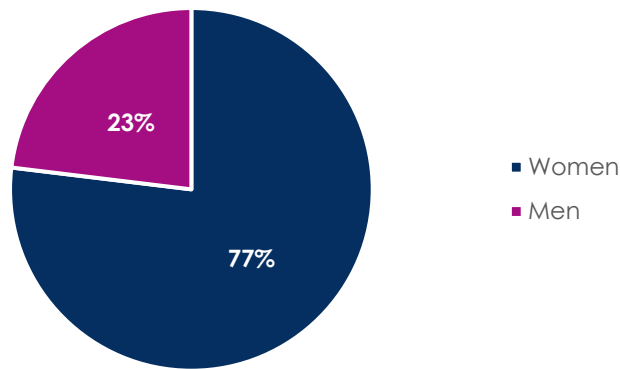
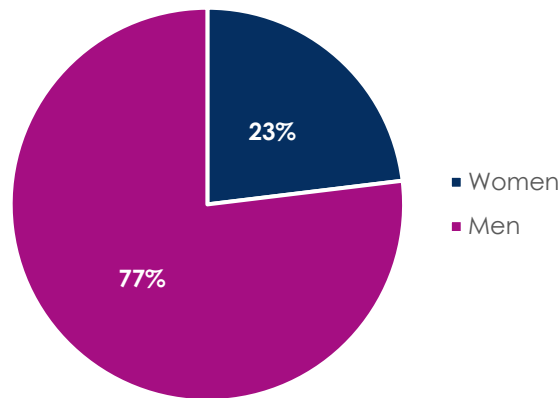


Figure 2. Gender of person who murdered a current or former romantic partner or spouse



Age

According to the 2010 Census, the median age of Iowans is 38.1. Of the domestic abuse cases reviewed during this report period, the majority of victims were between the ages of 18-45. The age group of the majority of those who caused the fatality was 26-35.

Figure 3. Age of Decedent

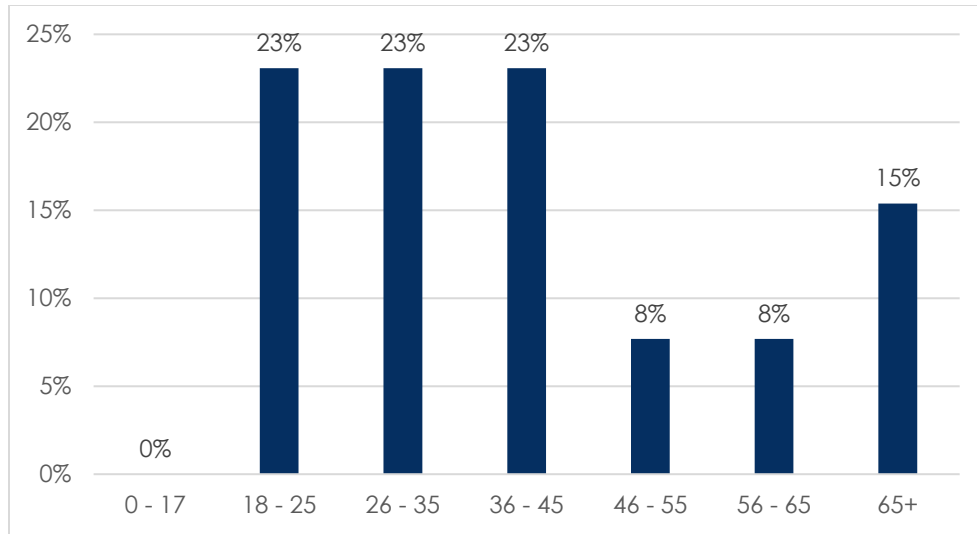
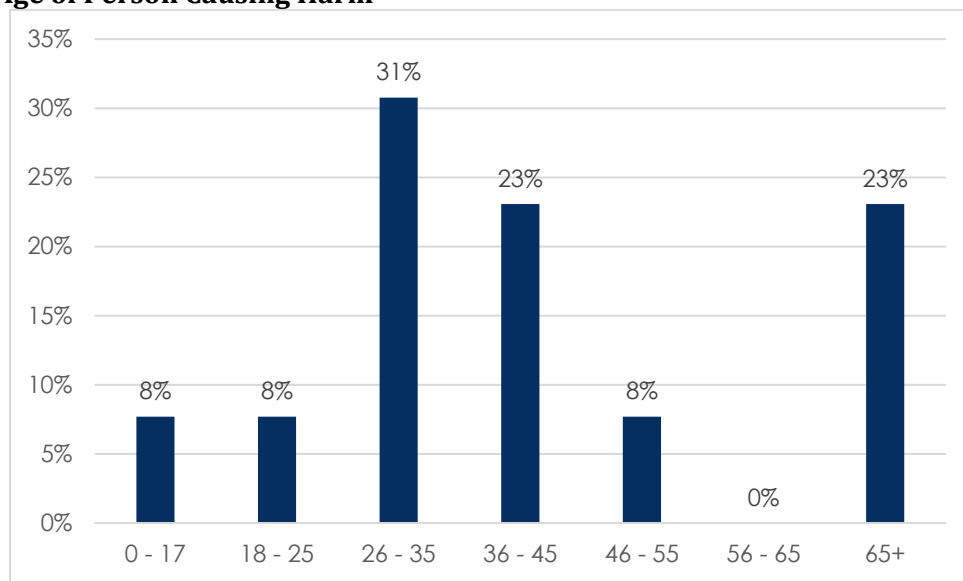


Figure 4. Age of Person Causing Harm



Race/ethnicity

Iowa is home to more than 3 million people. The following figures show 2010 census data for race/ethnicity compared to Iowa Domestic Abuse Death Review decedents.

Figure 5: 2010 Iowa Census Data

| Subject | Number | Percent |
|--------------------------------------|-----------|---------|
| White alone (not Hispanic or Latino) | 2,701,123 | 88.7% |
| Hispanic or Latino | 151,544 | 5% |
| Black or African American | 86,906 | 2.9% |
| American Indian and Alaska Native | 8,581 | .3% |

| | | |
|--------------------------------------------|--------|------|
| Asian alone | 52,597 | 1.7% |
| Native Hawaiian and Other Pacific Islander | 1,797 | 0.1% |
| Other Race alone | 2,132 | 0.1% |
| Two or More Races | 41,675 | 1.4% |

Figure 6. Race of Victims

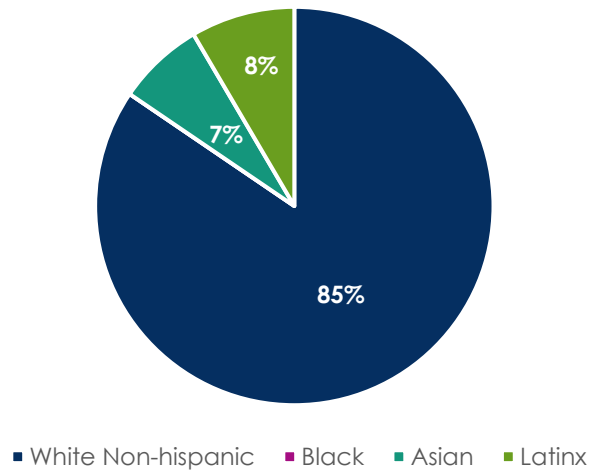
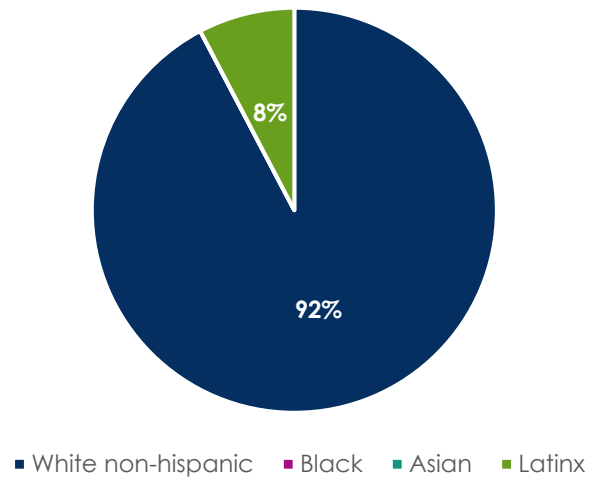


Figure 7. Race of person causing harm



Education background

The following information is from the 2010 Iowa Gender Wage Equity Study;

The 1999 study shows 27.0 percent of males and 28.4 percent of females had obtained a bachelor's degree or higher. The 2008 study shows that 32.6 percent of males and 33.8 percent

of females have obtained a bachelors degree or higher. This study shows that 28.0 percent of males and 29.1 percent of females have obtained a bachelors degree or higher. Both studies illustrate that females have achieved a higher level of education than males.

Figure 8. Education Levels by Gender 2010 Iowa Gender Wage Study

| Education Level | Male | Female |
|---------------------------|-------|--------|
| Less than 9th grade | 1.1% | 0.8% |
| Some HS, no diploma | 4.3% | 2.7% |
| HS diploma, including GED | 31.4% | 26.0% |
| Some education beyond HS | 16.2% | 19.6% |
| Associate degree | 10.7% | 13.6% |
| Trade certification | 4.9% | 4.5% |
| Vocational training | 3.0% | 3.5% |
| Undergraduate degree | 19.6% | 20.3% |
| Postgraduate degree | 8.4% | 8.8% |

Figure 9. Educational background of decedent

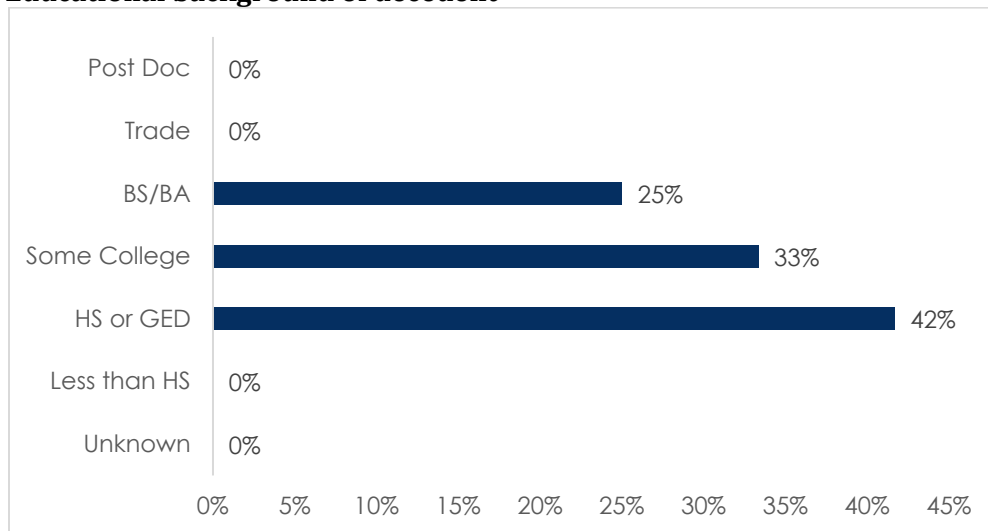
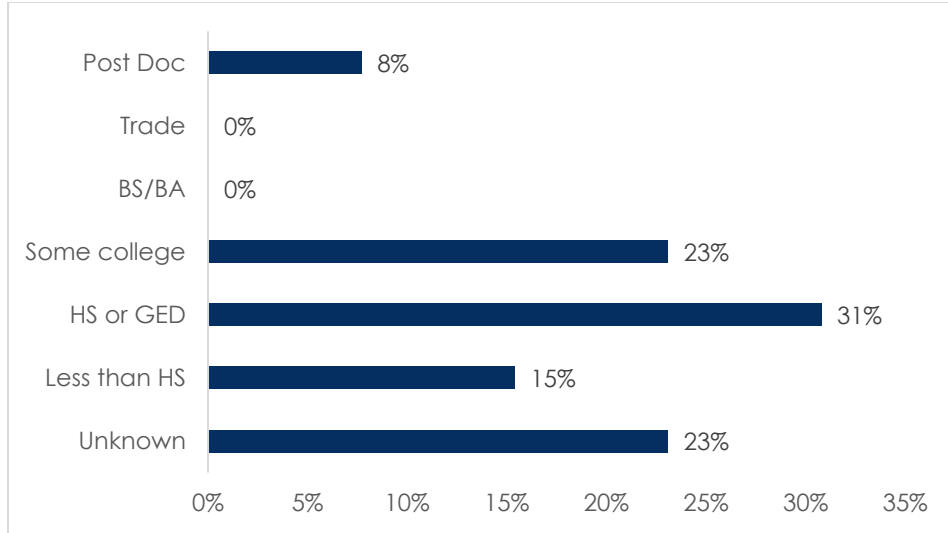


Figure 10. Education background of Person Causing Harm



Death Circumstances

This section provides a summary of information related to the circumstances surrounding or contributing to the domestic abuse homicides. Except for figure 13, the totals in the remaining figures refer to the number of cases in which they apply, not the number of persons involved. A “case” represents the primary victim and the person causing harm who were involved in the domestic abuse incident that resulted in death(s).

Figure 11. Cause of Death

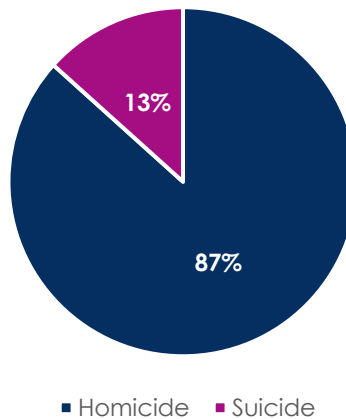
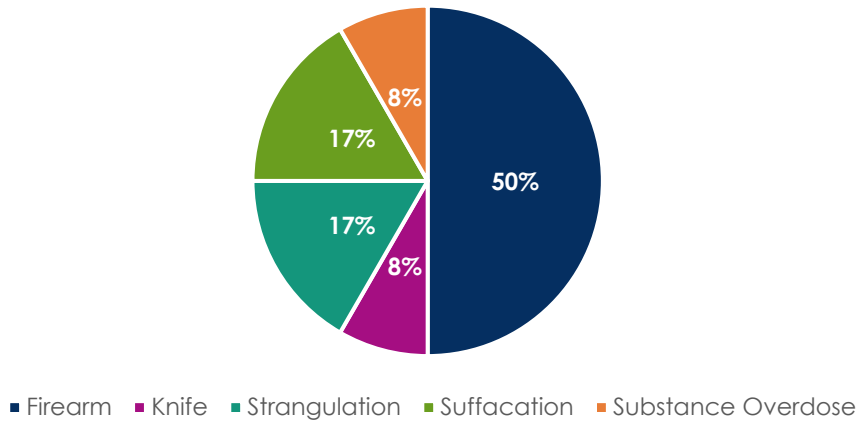
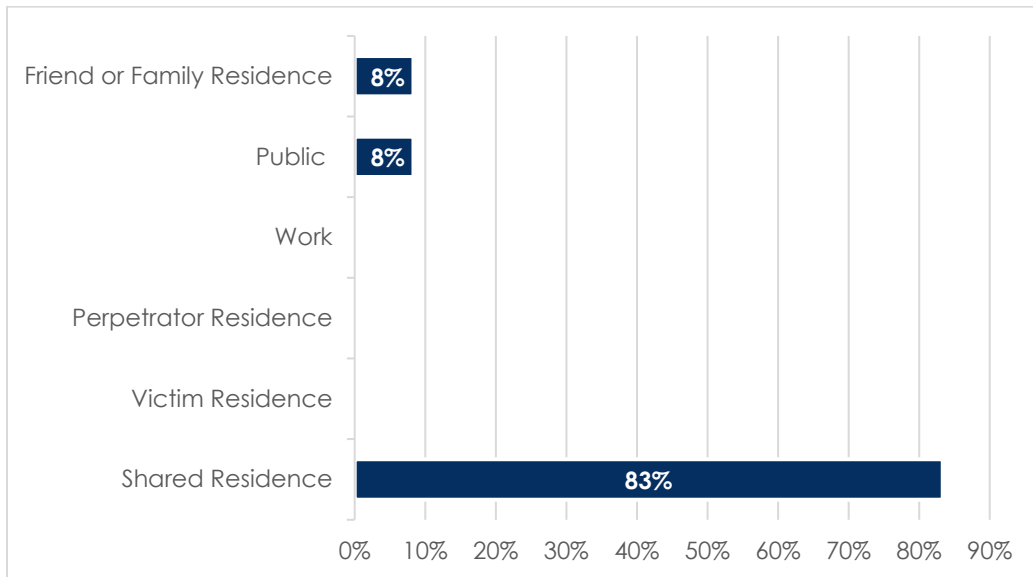


Figure 12. Weapons used in Death



Fifty percent of the domestic abuse fatalities resulted from the use of a firearm. The majority (72%) of deaths occurred at either a joint residence or the residence of the victim or the person causing harm.

Figure 13. Location of death



Further information about the Iowa Domestic Abuse Death Review Team may be obtained by writing or calling. The contact information is as follows:

Domestic Abuse Death Review Team

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321 East 12th St.
Des Moines, Iowa 50319-0075
515-281-5032

http://www.idph.state.ia.us/bh/domestic_abuse_review.asp