

2020



ANNUAL REPORT

**COLORADO
DOMESTIC VIOLENCE
FATALITY REVIEW BOARD**

PHIL WEISER, ATTORNEY GENERAL, CHAIR

Per C.R.S. § 24-31-702(4), this report is respectfully submitted to the Health and Human Services and Judiciary Committees of the Colorado Senate and the Public Health Care and Human Services and Judiciary Committees of Colorado House of Representatives.

This report is available on the web site of the Colorado Department of Law at the following link: <https://coag.gov/OCE/prevent-domestic-violence>.



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Dedication to the Victims Killed in Domestic Violence Related Incidents in 2019

The Colorado Department of Law enlisted the assistance of the staff of the Denver Domestic Violence Coordinating Council (DDVCC) to collect information on domestic violence related fatalities in the state of Colorado that occurred in 2019 to assist the work of the Colorado Domestic Violence Fatality Review Board (CDVFRB). The data collected includes information on murders, murder/suicides, suicides, collateral deaths, familicides, and any other death determined to be the result of, or occurring within, the context of domestic violence. This report provides an overview of 2019 data and a summary of incidents, along with definitions of case types, can be found at www.DDVCC.org/fatality-review.

Dedicated to the 42 victims who died in Colorado in 2019 as a result of domestic violence or occurring within the context of domestic violence, and to victims and survivors of domestic violence everywhere.

Theresa Bagwell (58)	Roxine Foster (59)	Kathleen Petrocco (36)
Patrick Begley (41)	Andrew Hapoff (39)	Rotasha Pryor-Thomas (32)
Tia Bivins (42)	Samuel Harding (60)	Russcel Recelistino (27)
Alexis Bush (22)	Dean Heerdt (58)	Veronica Sarinana (38)
Emily Butler (36)	Michelle Jacobson (43)	Mary Schaefer (42)
Brianna Carpenter (28)	Rafael Jaime (25)	Amy Schrieves (21)
Gloriamae Casias (55)	Alexus Keith (20)	Martha Sianez-Hernandez (32)
Shaina Castillo(22)	Andrea King (31)	Charlotte Stieb (66)
Juanita Castorena (23)	Karen Leithauser (59)	Frank Taylor (53)
David Cochran (32)	Frank Licata (61)	Lydia Tesfuoo (25)
Jacquelyn Coleman (19)	Kate McDowell (40)	Ty Tesoriero (10)
Elizabeth Collier (56)	Millie Mestas (47)	Heather Woolsey (41)
Sirena Duran-Maw (44)	David Mooney(60)	Jennifer Young (39)
Jeanette Ellingson (29)	Alexandria Morris (21)	Amber Zotto (35)

Note: An additional 27 individuals who died in domestic violence related incidents were determined to be perpetrators and are not named here.

Message from Attorney General Phil Weiser

Dear partners in domestic violence prevention,

The Domestic Violence Fatality Review Board, like every other person and institution across Colorado and indeed the world, has confronted a new and challenging reality in 2020. During this difficult time, we have worked to continue doing the important work of learning, developing, and amplifying lessons learned from tragedy with the goal of preventing domestic violence fatalities and near-death incidents. I could not be more grateful for the thoughtfulness, diligence, and resilience of this community—and for its dedication to serving Colorado by working to save lives.

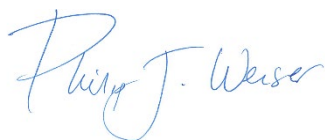
The 2019 data and the cases we review offer several vital lessons, including the painful toll that these cases take on children. This is borne out in each individual case that involved children studied by review teams throughout Colorado. Nineteen children were involved in twelve fatality incidents in 2019; to say that this represents nineteen tragedies is a vast understatement. These numbers represent nineteen children—nineteen children who are affected by the loss of one or both parents, nineteen children who may have witnessed death, and nineteen children who have experienced physical danger and trauma with direct consequences to their physical and mental health. The losses to these children—both in life and in physical and mental health—animates our first recommendation this year, which is to focus resources on the child survivors of these incidents.

This report contains several other hard-learned lessons and recommendations, and they deserve careful consideration. Only through study of these losses can we create and implement strategies to reduce and someday eradicate these losses.

Let me take this opportunity to thank Jenn Doe and Dr. Joanne Belknap, whose expertise and dedication to this work has made such a comprehensive report possible. The work we do to honor and elevate victims and survivors is so much the better for their energy and diligence. Our State is fortunate for their service.

We are grateful to all our partners across Colorado as we work together to build a better, safer, and more just Colorado. I am proud of the work of the Domestic Violence Fatality Review Board, together with diverse voices throughout our State, for this effort to learn from tragedy to prevent tragedy.

Sincerely,

A handwritten signature in blue ink that reads "Phil J. Weiser". The signature is written in a cursive, flowing style.

Phil Weiser
Colorado Attorney General



Introduction to Domestic Violence Fatality Review in Colorado

The Denver Metro Domestic Violence Fatality Review (DMDVFR) team was one of the first domestic violence fatality review teams (DVFRTs) formed in the United States and is the longest running team in Colorado. Formed in 1996 with funds from the U.S. Office on Violence Against Women, the DMDVFR is a multi-disciplinary group of more than twenty-five members from criminal and civil legal systems and community-based entities. Under the leadership of the Denver Domestic Violence Coordinating Council (DDVCC), the DMDVFR's goals include increasing victim and community safety and offender accountability, as well as helping to reduce the number of deaths related to domestic violence.

A long-time aspiration of the DMDVFR team has been to increase and broaden its focus and functions and to expand this work statewide. This was achieved with the passage of Senate Bill 2017-126, which resulted in the creation of the Colorado Domestic Violence Fatality Review Board (CDVFRB). With bipartisan support led by Senators Lucia Guzman and Bob Gardner and Representatives Millie Hamner and Yeulin Willet, the bill was passed by the Colorado General Assembly and signed into law by Governor John Hickenlooper on June 8, 2017 as Colorado Revised Statutes (C.R.S.) 24-31-701 through 24-31-706. The law enables communities across Colorado to form DVFRTs in order to enhance existing efforts to prevent domestic violence related fatalities.

The Colorado Department of Law has the statutory authority to lead the CDVFRB with the Colorado Attorney General as the chair. This leadership by a state elected official helps to improve collection of domestic violence fatality data, resulting in deeper understanding of the dynamics related to domestic violence fatalities and the development of meaningful policy and practice recommendation aimed at improving domestic violence prevention and response services. DDVCC works with the Colorado Office of the Attorney General and the CDVFRB to gather and analyze data from local DVFRTs and engage in statewide outreach to support the formation of additional DVFRTs.

Executive Summary

Per C.R.S. § 24-31-702(2)(a), the Colorado Attorney General serves as the chair of the Colorado Domestic Violence Fatality Review Board (CDVFRB), which is charged to:

- a. examine data collected by review teams during the preceding year;
- b. identify measures to help prevent domestic violence fatalities and near-death incidents;
- c. establish uniform methods for collecting, analyzing, and storing data relating to domestic violence fatalities and near-death incidents; and
- d. make annual policy recommendations concerning domestic violence to the Colorado General Assembly.

The findings presented in this report are compiled from basic information collected on incidents across the state where domestic violence (DV) resulted in a fatality, as well as detailed data gathered from cases reviewed by local domestic violence fatality review teams (DVFRTs).

In 2019, Colorado had *at least*¹ 60 incidents where domestic violence resulted in a fatality, and 70 people died in these incidents. This represents a 62.7% increase in deaths from the previous year, with an average of 49.6 deaths over the past 5 years. Of the 70 individuals who died, 39 (55.7%) were the primary victim of DV, 3 (4.2%) were collateral adults, 1 (1.4%) was a child, and 27 (38.5%) were the primary perpetrator of DV. The majority (27, or 38.5%) were women killed by a current or former male partner, followed by men who died by suicide (16, or 22.8%). Firearms were involved in 34 (56.6%) incidents, and gunshot wounds accounted for 45 (64.2%) deaths. Similarly, national studies have found that firearms are involved in approximately 50-60% of fatal DV-related incidents². **Nineteen children were involved in 12 (20%) of the 60 incidents.** It is important to note that children are not only impacted by their direct exposure to the fatal incident, but also by the loss of one or both parents, experiences that have long term effects.

¹ There may be additional cases that have not been captured in this data and/or additional information that may come to light in the future and would result in changes to this data.

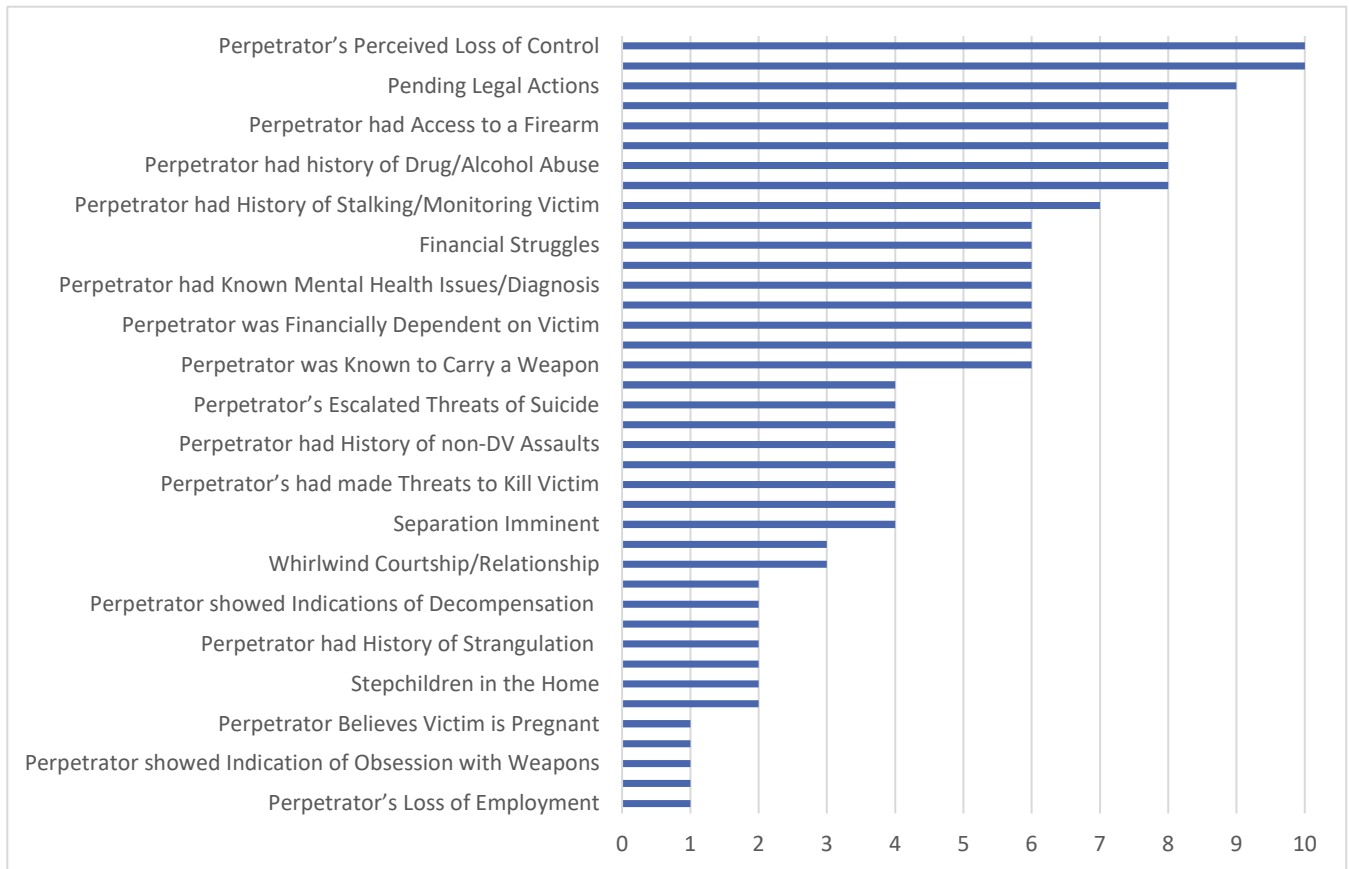
² The National Violent Death Reporting System's 2015 data indicates that around half of female-victim DVFs are due to firearms (Gollub & Gardner, 2019).

Eleven Colorado domestic violence fatality (or near fatality/attempted murder) cases were reviewed in-depth by local DVFRTs in 2019. Of these 11 cases, 63.6% (n = 7) involved the perpetrator murdering the victim (no other deaths/near deaths, including suicides). Of the remaining 4 cases, 1 was an attempted murder/near fatality of the DV victim, 1 was a victim fatality and attempted perpetrator suicide, 1 was a victim fatality and collateral fatality, and 1 was a DV victim witnessing attempted fatality, collateral fatality, and perpetrator suicide. Consistent with other research, the primary cause of the 12 fatalities was gunshot wounds (58.3%, n = 7), followed by blunt trauma (25.0%, n = 3), and stabbing (16.7%, n = 2) (Gollub & Gardner, 2019).

Among these 11 cases, almost half (45.5%, n = 5) involved a child or children in some manner: a 12-year old witnessed her mother's and grandmother's dead bodies; a 19-month old girl was shot by her father after he shot at and missed her mother; 2 children heard their mother scream and then a "loud thump"; 1 girl heard shots and ran out with her cousin to the front yard to find her mother deceased and father suffering from a self-inflicted gunshot wound; a victim's 8-year-old daughter made statements about her father shooting her mother and, at the very least, saw the crime scene after the fact. In 2 additional cases, there were young children present in the home at the time of the fatality. Exposure to physical danger, trauma, and violence has direct consequences to children's mental and physical health and such impacts are compounded by grief and loss in these cases.

Regarding whom in the victim's social support network knew about prior incidents of DV, the victims' parents, friends, and/or siblings, knew in 100.0% of the cases (for which there were data). Among the 9 cases where the couple had minor children, childcare staff/teachers/schools knew about the DV in 40.0% (n = 2), indicating the importance of training childcare staff, teachers, and school administrators on how to recognize and respond to DV. Among formal support systems, police/sheriffs were the most likely to know of the DV, but this was only true in two-thirds of the cases for which the data were complete (6 out of the 9 cases with data). Forty-four percent of victims pursued civil court action (e.g., divorce or custody) and 43% pursued legal services (3 out of 7 known cases). For the 6 cases where it was known whether the victim had sought services from a local DV program, one-third had (n = 2).

When cases are reviewed by a DVFRT, there is extensive discussion about “red flags” or risk factors. In this study, the most common of these were as follows, in order of frequency:



The findings in this report are similar in many ways to other domestic violence fatality (DVF) reports, including the highly gendered nature of DVFs (men killing women) and the predominant use of a firearm as the weapon (Velopulos et al., 2019). One of the most poignant findings in the 2019 cases reviewed in-depth is that for at least 2 of the 9 cases with minor children, childcare/educational staff knew of the DV. Moreover, DVFRTs identified a connection between child abuse and DV fatalities and these findings point to the need for improved coordination between systems when child abuse is suspected or reported. It is also notable that victims are more likely to disclose abuse to people in their social networks than they are to seek formal support prior to a DVF. DVFs are “a major social problem, and it is important to determine the predictors of this violent behavior” (Cunha & Gonçalves, 2019, p. 2573) in order to work toward solutions that will prevent future deaths.

Policy and Practice Change Recommendations

1. Polices and resources to support children exposed to DV and DVFs:

In 2019, 20% of DVFs in Colorado involved children who were either in the home, directly witnessed the incident, and/or were injured or killed during an incident. In such cases, children are not only impacted by their direct exposure to the fatal incident, but also by the loss of one or both parents. Exposure to physical danger, trauma, and violence has direct consequences to children's mental and physical health, and such impacts are compounded by grief and loss. In DVFs, the impact on children is further complicated by them having to live with other family members or entering the foster care system, and custody disputes between surviving family members are not uncommon after a DVF, causing additional stress to children and families.

Research also shows that children reside in 60% or more of households where DV is perpetrated, and many perpetrators of DV and DVFs have witnessed and/or experienced abuse as children. Recent COVID-19 restrictions and school closures mean that children are home more often, increasing their exposure to DV. Focusing on providing resources to these children may help them heal from trauma and/or prevent them from becoming perpetrators in the future, thus breaking the intergenerational cycle of DV.

2. The CDVFRB is engaging in efforts to support the implementation of the Lethality Assessment Program (LAP) in communities across Colorado.

"The LAP is a multi-pronged intervention that consists of a standardized, evidence-based lethality assessment instrument and accompanying referral protocol that helps first responders make a differentiated response that is tailored to the unique circumstances of High-Danger victims. Law enforcement officers and other community professionals trained in the LAP use an evidence-based lethality assessment instrument based on the pioneering research of Dr. Jacquelyn Campbell to identify victims of intimate partner violence who are in highest danger of being killed by their intimate partners."³

³ <https://lethalityassessmentprogram.org/about-lap/how-lap-works/>

In the coming year, the CDVFRB and partners will work to develop best practice guidelines and training resources for communities in Colorado that wish to implement the LAP. Guidelines will include action steps related to the use of the LAP by law enforcement, child welfare, medical professionals, community agencies, and others who may have contact with victims/survivors of DV. The LAP also has the potential to identify DV perpetrators who are at high-risk for committing lethal acts of violence, allowing for better containment and monitoring, and connecting them with resources that may help promote behavioral change, reduce recidivism, and prevent the escalation of abuse.

The LAP has been identified as a “supported intervention” by the CDC Continuum of Evidence Effectiveness and has been called a “leading promising practice” by OVW. Findings from an evaluation study of the LAP showed the following results (Messing, et al., 2015).

Victims/survivors who were administered the LAP:

- were more likely to have taken protective actions such as removing/hiding weapons in the home or seeking DV services immediately after a police-involved incident
- were more likely to have taken protective actions such as seeking a protection order or medical care, relocating to safe place, or purchasing mace/pepper spray
- reported experiencing less frequent and severe IPV at follow-up

3. Prohibit the possession of firearms by DV perpetrators:

Data collected by the CDVFRB, as well as national researchers, consistently shows that firearms are the weapons most commonly used in fatal domestic violence related incidents. In fact, it has been shown through research that DV perpetrators with access to firearms are 5 to 8 times more likely to kill their victims than those without firearms (Wintemute, et al., 2014). Firearms are also used in non-lethal ways by DV perpetrators to exert power and control over

their partners. A recent report by Everytown indicates that “4.5 million women in the US today report having been threatened with a gun by an intimate partner.”⁴

Furthermore, researchers Vigdor and Mercy (2006) found that when states adopted ERPOs and other laws prohibiting the possession of firearms by perpetrators of domestic violence, DVFs decreased by 8%, or 2.9 homicides per year. Emerging research also points to a connection between mass killings and perpetration of DV, showing that possession of firearms by perpetrators of DV presents a threat not only to DV victims, but also to the general public.

A number of initiatives along these lines are either adopted or under consideration in Colorado. For example, Colorado adopted Extreme Risk Protection Order legislation, C.R.S. § 13-14.5-101 *et seq.*, which is used effectively to protect domestic violence victims. This upcoming legislative session, there may also be a renewed effort concerning procedures for a domestic abuser upon the issuance of a protection order. There are also effective initiatives in local jurisdictions across Colorado, such as Denver’s firearms relinquishment program that works to identify domestic violence defendants who may have undisclosed firearms. Given the demonstrated effectiveness of these laws and programs, the CDVFRB asserts that Colorado needs to continue working to enhance policies and practices designed to keep firearms out of the hands of DV perpetrators, as required by existing state and federal laws. Such policies should not be viewed as anti-gun, but as rather seen as preventative measures that increase both victim and community safety.

4. Policies aimed at improving economic stability for victims and perpetrators of DV:

5. Year after year, we see that issues related to housing insecurity and financial struggles put victims of domestic violence at higher risk of lethality. This tells us that more resources for safe and affordable housing are needed, along with safety net programs that help ensure victims/survivors and perpetrators have access to resources that help them meet their basic needs and achieve economic stability. This is especially important while COVID-19 restrictions that have led to job loss and reduced hours remain in place.

⁴ See <https://everytownresearch.org/reports/guns-intimate-partner-violence/>.

5. Improved coordination between criminal, civil, DR, D&N, DHS cases/processes:

The Colorado Child Fatality Review team recently recommended creating dual track court systems for families involved in multiple court actions (i.e. domestic relations, criminal, and civil). This would allow for professionals to collaborate and coordinate services, case management, and participation/compliance with the families involved. The CDVFRB supports this recommendation and intends to research other possible avenues to improve coordination between systems through policy and/or practice changes, which may include:

- Training for judges, judicial officers, prosecutors, child welfare staff, and allied professionals on the dynamics of DV and the interactions between courts and systems in DV cases
- Regular convenings between judges, judicial officers, prosecutors, child welfare staff, and allied professionals working on DV cases with multi-system involvement
- Specialized DV courts and units within criminal legal system entities, which may be able to be modeled after drug, DUI, and/or veterans courts
- Increased access to civil legal services for victims/survivors of DV
- Early interventions with DV perpetrators focused on accountability and behavior modification to help reduce recidivism and prevent the escalation of abuse

6. Increased awareness in the public sphere about the dynamics of DV and resources available to victims/survivors and perpetrators:

The CDVFRB encourages legislators, and other public officials, to include information about DV resources on their websites and in communications to constituents, especially as COVID-19 restrictions remain in place, making it harder for victims/survivors to access supportive services. The links below provide additional information on some of what is currently known about the impacts of COVID-19 on DV in Colorado, as well as resources available to victims/survivors and perpetrators of DV:

- <https://www.denverpost.com/2020/11/01/domestic-violence-coronavirus-denver-colorado/>
- <https://www.violencefreecolorado.org/resources/>
- <https://www.denvergov.org/content/denvergov/en/police-department/safety-prevention/intimate-partner-violence.html>
- <https://www.standupcolorado.org/>

Additionally, here is an example from State Representative Leslie Herod's website of a DV resources page: <https://www.leslieherodforcolorado.com/vulnerablecommunities> and an excerpt from Rep. Herod's email newsletter sent out in March 2020:

While the stay-at-home order is critical for fighting COVID-19, it also can make an already [unsafe situation even more volatile](#). There are ways to get help.

Below is a message from Rebecca Zimmerman, Policy Chair for [Violence Free Colorado](#):

*We know that social isolation and being quarantined in the home is causing a very difficult situation for those experiencing domestic violence (DV). We want folks in these situations to know that there is help available! While much of the country is closed, DV programs and services are OPEN, **available and online as much as possible**. You can access from your home, your patio, your walk, and you can text! **You can leave or get help safely during this time.***

The [National Domestic Violence Hotline](#) is available 24 hours a day in more than 200 languages at **1-800-799-SAFE** or **text LOVEIS to 22522**. This national hotline will connect you to local resources. They can help you plan to stay safe no matter what your situation is, even if you can't leave.

[Violence Free Colorado](#) has [resources](#) including information culturally specific to immigrant communities, LGBTQIA+ folks, those with disabilities and more. If you, or someone you know needs help, we have also linked additional resources here.

The stay-at-home order does not mean you have to stay with your abuser. If you need help, resources are available. We will get through this together.

2019 Statewide Findings on Domestic Violence Related Fatalities

A. Data Collection Process

The Denver Domestic Violence Coordinating Council (DDVCC) maintains a comprehensive list of fatalities in Colorado resulting from an incident determined to be an act of, or which occurred in the context of, domestic violence (DV) or intimate partner abuse (IPA). The data is gathered from public sources, including media reports, information provided by law enforcement representatives and community agencies, and reports by members of the community, so it is more limited in scope than the data collected for cases that are reviewed in-depth by a local domestic violence fatality review team (DVFRT). Due diligence has been given to compiling the most accurate information possible, and we appreciate all of the feedback received from law enforcement, prosecution, victim services, and other agencies and individuals to help ensure this research is accurate and complete. It is acknowledged that there may be additional cases that have not been captured in this data and that additional information may come to light in the future that would result in changes to this data.

For the purposes of this report, the definition of a DV-related fatality includes murder, murder suicide, collateral deaths (friends, family members, neighbors, and other bystanders), suicides (this includes suicide deaths by perpetrators or victims of DV, which occurred in the context of DV, or in which DV was a major contributing factor), and any other death determined to be related to DV. Complete definitions of the types of fatalities for which information is collected can be found at www.DDVCC.org/fatality-review, along with the online form for entering basic information about fatal incidents that appear to be DV-related. Summaries of DV-related fatalities from across the state for the current report year and past years can also be found via that link. Comments and questions about the collection process can be directed to denverdvcouncil@gmail.com.

B. Summary of Colorado Domestic Violence Fatalities

The following information describes what we know about DV-related fatalities that occurred in Colorado in 2019. *Note: Percentages may not equal 100 due to rounding.*

In 2019 the state of Colorado had *at least*⁵ 60 incidents where domestic violence resulted in a fatality, and 70 people died as a result of these incidents. Of the 70 individuals who died, 39 (55.7%) were the primary victim of DV, 3 (4.2%) were collateral adults, 1 (1.4%) was a child, and 27 (38.5%) were the primary perpetrator of DV.

Table 1 shows the number and percentage of individuals killed by category. The majority (27, or 38.5%) were women killed by a current or former male partner, followed by men who died by suicide (16, or 22.8%). DV perpetrators killed by responding law enforcement was the next most common category (7, or 10%), followed by men who were killed by a female intimate partner or ex-partner (5, or 7.1%). Suicides by women, collateral adult men killed, and DV perpetrators killed by their victims in an act of self-defense were the next most common categories, with 3 people (4.2%) killed in each. Women killed by a female partner or ex-partner, and deaths in which the manner was unknown each accounted for 2 deaths (2.8%). It should be noted that the “unknown” category includes cases in which the manner of death was undetermined or unreported, but the cases were reported by media outlets as being DV-related. In one of these incidents, the victim’s fiancé was initially arrested on charges including first-degree murder, but was later tried and acquitted for the crime. The victim’s cause of death in this case was a gunshot wound, but the manner of death was ruled undetermined by the medical examiner. Finally, there was 1 incident (1.4%) in which a man was killed by another man (but not a current/former intimate partner or in self-defense) and 1 (1.4%) incident in which a child was killed. The child killed was murdered by his father, who subsequently took his own life.

⁵ There may be additional cases that have not been captured in this data and/or additional information may come to light in the future that would result in changes to this data.

1. Number of People Killed in DV-Related Incidents		
Women Killed by Male Partner/Ex-partner	27	38.5%
Women Killed by Female Partner/Ex-partner	2	2.8%
Women Killed by other women	0	0%
Collateral Women Killed	0	0%
Suicides by Women**	3	4.2%
Men Killed by Female Partner/Ex-partner	5	7.1%
Men Killed by Male Partner/Ex-partner	0	0%
Men Killed by other men	1	1.4%
Collateral Men Killed	3	4.2%
Suicides by Men	16	22.8%
Children Killed	1	1.4%
Killed by Law Enforcement	7	10%
Killed in Self-Defense	3	4.2%
Unknown***	2	2.8%

Total Incidents: 60

Total Deaths: 70*

* 39 DV victims, 3 collateral adult victims, 1 collateral child victims, 27 DV perpetrators

** of the women who died by suicide 2 were DV victims and 1 was a perpetrator of DV who killed herself after killing her female partner

*** The manner of death for these cases is unknown, but reports indicate that they occurred in the context of DV

Table 2 describes the types of fatal DV-related incidents that occurred in Colorado in 2019. Most common was murder only (31, or 51.6%), and in 3 of those incidents the deceased was a collateral victim. The next most common were incidents involving a suicide only (11, or 18.3%). Two of these suicides were reported by individuals who knew the decedents to be incidents in which DV was a major contributing factor to the victims' death, and 9 were suicides by perpetrators of DV. In one incident, the perpetrator attempted to kill his wife and stabbed her dog before he died by suicide, but she survived her life-threatening injuries. It should be noted that there has been an increase in reports about this category of cases in recent years. This increase may represent an actual increase in DV-related suicides; it is also possible that reports are increasing as more awareness of the intersection between DV and suicide comes to light. The third most common type of fatal DV-related incidents was murder followed by the suicide of the DV perpetrator (8, or 13.3%). In 1 of these cases, the perpetrator killed his 10-year-old son, then himself, after a court appearance where he found out he was likely to lose custody. Reports described a years-long pattern of abuse by this perpetrator toward his ex-wife, and he was on probation related to a DV offense at the time of the fatal incident. The family had ongoing involvement with the Department of Human Services and had been in court the day

prior to the fatal incident for a custody hearing. The death of a child in this case is considered a collateral death, since the child was not the primary victim of DV. This case has received widespread media attention and illustrates the need for better coordination between civil, criminal, and domestic relations court, and the various other systems the family had contact with over the years. In 7 (11.6%) incidents, DV perpetrators were killed by responding law enforcement officers, including 2 incidents in which the DV perpetrator had killed someone else prior to being killed by law enforcement. In 3 (5%) incidents, a DV perpetrator was killed by their victim in an act of self-defense, and in 2 (3.3%) the manner of death was either undetermined or unreported.

2. Type of Fatal DV-Related Incidents		
Murder *	31	51.6%
Murder/Perpetrator Suicide	8	13.3%
Suicide Only	11	18.3%
Killed by LE*	7	11.6%
Self-defense	3	5.0%
Unknown**	2	3.3%

* Numbers and percentages total higher than total incidents due to the following: In 1 case, the DV perpetrator killed his father-in-law, then was killed by LE. In another, a woman murdered her husband, then was killed by LE, so these are counted under multiple incident categories

** The manner of death in these cases is unknown, but reports indicate that they occurred in the context of DV

Tables 3 and 4 provide data on the locations of fatal DV-related incidents occurring in 2019. The plurality of incidents (15, or 25%) occurred in the City and County of Denver, which included 6 murders of a DV victim, 5 suicides (4 by DV perpetrators and 1 by a DV victim), 2 incidents of self-defense by a DV victim, 1 murder followed by the perpetrator's suicide, and 1 incident in which the manner of death was ruled undetermined by the medical examiner. In this case, the fiancé of the victim was acquitted on charges including first-degree murder at trial. Adams and Jefferson Counties had the next highest rate, with 6 (10%) fatal DV-related incidents occurring in each county. Of the 6 incidents in Adams County, 2 were suicides (1 by a DV perpetrator and 1 by a DV victim) that occurred in Brighton, 1 was the murder of a DV victim in Aurora, 1 was the murder of a DV victim in Denver, and 1 was a murder followed by the perpetrator's suicide in Commerce City. Additionally, there was 1 incident that was reported as being related to DV which occurred in Bennett, but the manner of death was not reported. Of the 6 incidents in Jefferson County, 4 were the murder of a DV victim, 1 was an incident in

which a perpetrator of DV was killed by responding law enforcement in Lakewood, and 1 was the murder of a DV victim in Arvada.

El Paso and Mesa Counties had the third highest rate, with 5 (8.3%) fatal DV-related incidents occurring in each county. Of the 5 incidents in El Paso County, 2 were the murder of a DV victim, 2 were incidents in which a perpetrator of DV was killed by responding law enforcement in Colorado Springs, and 1 was the murder of a DV victim in Fountain. Of the 5 incidents in Mesa County, 3 were the murder of a DV victim in Grand Junction, and 1 each were the murder of a DV victim and the murder of a collateral victim in Clifton. The person killed in the collateral murder was the husband of a DV victim, who was killed by her ex-husband. Arapahoe and Douglas Counties each had 3 (5%) fatal DV related incidents. All of the incidents in Arapahoe County occurred in Aurora, 1 of which was the murder of a DV victim, 1 of which was self-defense by a DV victim, and 1 of which was a collateral murder. The victim in the collateral incident was the father-in-law of the DV perpetrator, who was subsequently killed by responding law enforcement. Of the incidents which occurred in Douglas County, 1 was the suicide of a DV perpetrator in Highlands Ranch, 1 was the suicide of a DV perpetrator in Castle Pines, and 1 was a murder suicide in Lone Tree. The victim of murder in this case was a 10-year-old boy killed by his father, who subsequently killed himself.

Broomfield, Larimer, Pueblo and Weld Counties each had 2 (3.3%) fatal DV-related incidents. Both incidents in Broomfield County occurred in the City of Broomfield and included 1 murder followed by the perpetrator's suicide and 1 collateral murder in which a DV perpetrator killed his father. Of the incidents that occurred in Larimer County, 1 was the suicide of a perpetrator in Fort Collins, and the other was the murder of a DV victim in Loveland. In this case, the perpetrator was subsequently killed by responding law enforcement. In both cases that occurred in Pueblo County, a DV perpetrator was killed by responding law enforcement in the City of Pueblo. In Weld county, 1 murder of a DV victim occurred in Fort Lupton and 1 murder followed by the perpetrator's suicide occurred in Frederick.

3. Fatal DV-Related Incidents by County

County	(n)	% of incidents
Adams	6	10.0%
Arapahoe	3	5.0%
Archuleta	1	1.6%
Boulder	1	1.6%
Broomfield	2	3.3%
Denver	15	25.0%
Douglas	3	5.0%
El Paso	5	8.3%
Jefferson	6	10.0%
Kit Carson	1	1.6%
La Plata	1	1.6%
Larimer	2	3.3%
Logan	1	1.6%
Mesa	5	8.3%
Montezuma	1	1.6%
Morgan	1	1.6%
Otero	1	1.6%
Park	1	1.6%
Pueblo	2	3.3%
Weld	2	3.3%

* 1 in Adams county and 3 in Arapahoe county

**1 in Adams county

4. Fatal DV-Related Incidents by City

City	(n)	% of incidents
Aurora*	4	6.6%
Bennett	1	1.6%
Brighton	2	3.3%
Commerce City	1	1.6%
Denver**	16	26.6%
Pagosa Springs	1	1.6%
Boulder	1	1.6%
Broomfield	2	3.3%
Lone Tree	1	1.6%
Highlands Ranch	1	1.6%
Castle Pines	1	1.6%
Colorado Springs	4	6.6%
Fountain	1	1.6%
Lakewood	5	8.3%
Arvada	1	1.6%
Flagler	1	1.6%
Ignacio	1	1.6%
Loveland	1	1.6%
Fort Collins	1	1.6%
Sterling	1	1.6%
Grand Junction	3	5.0%
Clifton	2	3.3%
Mancos	1	1.6%
South of Brush	1	1.6%
Rocky Ford	1	1.6%
Lake George	1	1.6%
Pueblo	2	3.3%
Fort Lupton	1	1.6%
Frederick	1	1.6%

Finally, Archuleta, Boulder, Kit Carson, La Plata, Logan, Montezuma, Morgan, Otero, and Park Counties each had 1 (1.6%) fatal DV-related incident. The incident in Archuleta County was the murder of a DV victim which occurred in Pagosa Springs. In Boulder County, 1 murder followed by the perpetrator's suicide occurred in the City of Boulder. Kit Carson County had 1 murder of a DV victim that occurred in Flagler. La Plata County had 1 murder followed by the perpetrator's suicide that occurred in Ignacio. In Logan County, 1 murder of a DV victim occurred in Sterling. Montezuma County also had 1 murder of a DV victim that occurred in Mancos, as did Morgan county. The incident in Morgan county was reported to have occurred south of Brush. Otero County had 1 murder followed by the perpetrator's suicide occur in Rocky Ford, and Park County had 1 murder of a DV victim occur in Lake George. In this case, the perpetrator drove, with the victim's body in the trunk of his car, to Colorado Springs, where he was later arrested.

Table 5 describes the involvement of weapons in fatal DV-related incidents. Firearms were involved in 34 (56.6%) incidents, with 2 of these incidents also involving a knife. This percentage is consistent with various national studies that have found firearms are involved in approximately 50-60% of fatal DV-related incidents⁶. The next most common type of weapon used in incidents was a knife or edged weapon (10, or 16.6%), followed by hands and feet (6, or 10%). For the purposes of this report, hands and/or feet are considered a weapon in cases of strangulation and beatings. In 3 (5%) cases, it was either unknown whether a weapon was used, or no weapons were reported. In 1 (1.6%) incident, the weapon used was a motor vehicle. This was a case where the perpetrator jumped on the victim's car and the victim acted in self-defense. In total, weapons were reportedly involved in 54, or 90%, of fatal DV-related incidents.

⁶ The National Violent Death Reporting System's 2015 data indicates that around half of female-victim DVFs are due to firearms (Gollub & Gardner, 2019).

5. Weapons Use in Fatal DV-Related Incidents

Type of weapon	(n)	% of incidents
Firearm	34	56.6%
Knife/edged weapon*	10	16.6%
Hands/hands and feet	6	10.0%
Motor vehicle	1	1.6%
Unknown/none reported	3	5.0%
Total Incidents Involving Weapons	54	90%

*Two case cases involving a firearm also involved a knife, not counted in this category

**Deaths not involving weapons include 4 suicides by hanging, 1 suicide by drug overdose, and 1 suicide by blunt trauma resulting from a fall

Table 6 goes on to provide a breakdown of the cause of death of people killed in DV-related incidents. Gunshot wounds accounted for 45 (64.2%) deaths, which is again consistent with, or slightly higher than, national research on the involvement of firearms in DV-related deaths. In 1 of these incidents, the victim was also stabbed prior to being shot. Sharp force injury/stabbing was the next most common cause of death, with 9 (12.8%) incidents involving this type of fatal injury, followed by strangulation (5, or 7.1%). Hanging was the cause of death reported in 4 (5.7%) incidents, all of which were suicides. In 3 (4.2%) incidents, blunt trauma was the cause of death, and in 1 of these cases, the victim was also strangled prior to their death. In 2 (2.8%) incidents, the cause of death was unknown or unreported, and 1 (1.4%) each resulted from a drug overdose and being run over by a car.

6. Cause of death in DV-related fatal incidents

Gunshot wounds*	45	64.2%
Sharp force injury/stabbing	9	12.8%
Strangulation	5	7.1%
Hanging	4	5.7%
Blunt Trauma**	3	4.2%
Unknown COD	2	2.8%
Drug overdose	1	1.4%
Run over by car	1	1.4%

*1 was stabbed prior to being shot to death

**1 was also strangled

7. Ages of DV Victims Killed	
Age	(n)
19	1
20	1
21	2
22	2
23	1
25	1
27	1
28	1
29	1
31	1
32	4
35	1
36	2
38	1
39	2
40	1
41	2
42	2
43	1
44	1
47	1
53	1
55	1
56	1
58	1
59	2
60	2
66	1
Average Age	38.5

8. Ages of DV Perpetrators Killed	
Age	(n)
18	1
23	1
24	1
26	1
27	1
29	2
31	1
36	1
37	1
38	1
39	1
42	3
45	1
48	1
49	1
50	1
53	1
56	1
57	3
58	1
68	1
82	1
Average Age	43

9. Age of Collateral Adult Victims Killed	
Age	(n)
25	1
58	1
61	1
Average Age	48

10. Age of Collateral Child Victims Killed	
Age	(n)
10	1
Average Age	10

Tables 7 through 10 provide information about the ages of individuals killed in fatal DV-related incidents. Of the DV victims killed in 2019, the youngest was 19 and the oldest 66, with an average age of 38.5. Of the DV perpetrators killed, the youngest was 18 and the oldest 82, with an average age of 43. Collateral adult victims killed ranged in age from 25 to 61, with an average age of 48, and the sole collateral child victim killed was 10 years old.

Table 11 provides information about the involvement of children in fatal DV-related incidents. It is important to note children are not only impacted by their direct exposure to the fatal incident, but also by the loss of one or both parents. Exposure to physical danger, trauma, and violence has direct consequences to children's mental and physical health and such impacts are compounded by grief and loss. **In 2019 in Colorado, a total of 19 children were involved in 12 (20%) of 60 fatal DV-related incidents.**

Children were involved in 5 (8.3% of total incidents) incidents of murder. In 4 of these, children were on scene at the time of the murder, and in 1 the DV victim was able to flee with her 2 children prior to the murder of her father by the DV perpetrator, who was subsequently killed by responding law enforcement. Of the children who were on scene at the time of a murder, 3 were 3 years old, 2 were 5 years old, 1 was 1.5 years old. The ages of the 2 children who were able to flee the scene are unknown. In total, 8 children were on scene during, or just prior to, a DV-related murder.

Children were involved in 3 (5% of total incidents) incidents of murder followed by the perpetrator's suicide, during 1 of which a child was killed. In 1 case, a 6-year-old and a 12-year-old were in the perpetrator's vehicle when he fell to his death from the top of a parking structure, after killing the children's mother. In another case, the 15-year-old brother of the DV victim was in the home at the time of the murder/perpetrator suicide. The child who was killed in a murder/perpetrator suicide incident was 10 years old and killed by his father, who then killed himself. In total, 4 children were involved in incidents involving murder followed by the perpetrator's suicide.

Children were involved in 3 (5% of total incidents) DV-related suicide incidents. In one of these incidents, 3 children (ages 8, 11, and 13) were not on scene at the time of the fatal incident but were on scene during the DV incident that preceded the suicide. In 1 incident in which 2 children (ages 11 and 12) were on scene, the son of the perpetrator was on the phone with 911 at the time of the suicide. In another incident, a child (age 10) was injured by broken glass resulting from shots fired into the home just prior to the suicide. In total, 6 children were involved in suicide incidents. In 1 incident of suicide by a DV victim, it was reported that her 2

children had witnessed prior abuse of their mother at the hands of their father, although they were not on scene at the time of their mother's death.

Finally, in 1 (1.6% of total incidents) incident of a DV-related fatality resulting from law enforcement intervention, the DV perpetrator tried to take the DV victim's infant daughter from her and threatened to kill the DV victim. She and the infant were able to escape prior to the fatal incident.

11. Fatal DV-Related Incidents in which children were involved			
Incident Type	Type of involvement of children*	(n) of incidents involving children	% of incidents
Murder	On-scene (6)	5	8.3%
	Fled prior to fatality (2)		
Murder/Perpetrator	On-scene (3)	3	5.0%
Suicide	Killed during incident (1)		
Suicide	On-scene (3)	3	5.0%
	Witnessed DV incident preceding suicide (2)		
	Injured during incident (1)		
LE intervention	Fled prior to fatality (1)	1	1.6%
Total Incidents Involving Children		12	20.0%

*On scene means they were in the home/vicinity of the fatal incident but does not necessarily mean they witnessed it. A total of 19 children were involved in fatal incidents.

Finally, **Table 12** provides a comparison of the number of DV-related fatalities in Colorado over the past 5 years, based on information obtained from media sources and/or reported to the DDVCC and the CDVFRB.

Definitions of the types of fatalities referenced and complete lists with descriptions of fatal DV-related incidents in Colorado can be found at www.DDVCC.org/fatality-review. Questions about this data should be directed to DDVCC staff at 720-337-4470 or via email to denverdvcouncil@gmail.com.

12. Total DV-Related Deaths in Colorado by Year (at least)	
2015	37
2016	58
2017	40
2018	43
2019	70
5-Year Average	49.6

Examples of System Changes by Colorado Law Enforcement Agencies in Response to Domestic Violence

For this year's annual report, the CDVFRB solicited examples of changes that have been made by law enforcement agencies in how they respond to DV and what efforts they have made to prevent DV related fatalities in communities across Colorado. The intent behind this section of the report is to highlight the positive changes that have been made in these systems and showcase the exemplary work being done in our state. If you have additional examples that you would like to share for future reports, you can do so by completing this form:

<https://forms.gle/DfaqeewJ92XBi9hk7>

Castle Rock Police Department

The Castle Rock Police Department (CRPD) implemented an evidence-based Lethality Assessment Protocol (LAP) a few years ago. The LAP originated out of the Maryland Network Against Domestic Violence*, but CRPD modified the process to meet the needs of the community. Law enforcement officers utilize the LAP in collaboration with local system and community based domestic violence advocates.

Historically, law enforcement has been trained to respond to domestic violence on a single incident basis, meaning that only the circumstances of the specific incident are taken into consideration. The LAP requires a holistic, contextual approach to looking at domestic violence, taking into consideration the history and pattern of abuse among the parties involved, who the predominant aggressor is, and the overall dynamics of the relationship. This provides a better picture of the situation so that a determination of danger to the victim can be made, based on research that indicates the potential for lethality. The 11-question instrument is administered to victims and scored to determine whether a victim falls into a high-risk category. Regardless of whether an arrest is made, high-risk victims receive follow up contact within 72 hours, where law enforcement looks for additional bruising that may not have been present at the time of reporting, investigates protection order violations, and ensures that victims have been provided with information about available support services. Victims are strongly encouraged to connect

with community-based advocacy services that can assist with safety planning and provide various resources that may help increase victim safety. Law enforcement officers are trained to use strong language to let victims know they are worried for their safety, that research has shown that other people in similar situations have been killed, and that they would like the victim to talk with an advocate from the local community-based domestic violence service provider (CBDVSP), the Crisis Center.

As a result of implementing the LAP, CRPD has found that 52% of victims in domestic violence calls fall into this high-risk category and 75% choose to speak with an advocate from the CBDVSP. CRPD has also seen a reduction in recidivism by DV offenders and increased amounts of DV treatment being ordered as part of sentencing. Information from the LAP is included in arrest records and accepted by local courts to be factored into bond decisions. While this process requires more time and involves additional paperwork to be completed by officers, CRPD has seen no pushback, because they engage in training, share statistics, and help officers understand that spending an extra 5 minutes with a victim has great potential to save lives. The implementation of the program did require some initial training by qualified LAP trainers, but this was supported by a grant from the Department of Justice Office on Violence Against Women. Law enforcement agencies throughout Douglas County now have staff assigned to provide the training internally, and coordination between the DA's office, local courts, and community agencies has shown what successful collaboration can do to improve the response to domestic violence.

Commerce City Police Department

In 2018, the Commerce City Police Department (CCPD) began requiring officers to take incident reports on domestic violence calls where a crime could not be established. Two detectives were assigned to review all misdemeanors and patrol domestic violence arrests for quality assurance. Those two detectives were also directed to follow-up on misdemeanor cases where an on-scene arrest did not occur. Additionally, these two detectives follow-up with households where "incident report" domestic violence calls occurred, even though a crime may

not have been committed. Individuals in those households are then connected with services to reduce the potential for future domestic violence cases.

CCPD has seen an overall improvement in documenting domestic violence cases. Detectives have identified several misdemeanor cases, during their quality assurance reviews, where corrections or additional charges were needed. Detectives have also found several cases when reviewing “incident reports” where a crime DID occur, the cases were later filed, and arrests were made. These were often difficult cases where well-meaning and newer patrol officers simply missed certain cues that more experienced detectives have been able to notice and develop into cases.

These CCPD detectives have had terrific reactions from households where they followed-up on “incident reports”. There have been a couple of cases where the victim wasn't ready or able to communicate with patrol officers during the initial call but opened up to the detectives at the later meeting. In cases where the household still maintained there was no crime, they have still generally expressed appreciation for being connected with services to mitigate future events.

In cases of “incident reports” there are still some difficulties in trying to connect victims with services, as there is not a specific crime. However, potential victims are referred to domestic violence outreach programs so they can seek additional information. Potential aggressors are also referred to anger management or other similar services and CCPD documents those interactions. That data is kept and presented to prosecutors if there is a subsequent arrest—informing the future prosecutors that the potential aggressor was warned and provided services in the past.

CCPD has been very pleased with these improvements. While they have not seen a decrease in domestic violence cases, they have seen a remarkable improvement in the quality of cases being submitted for filing decisions.

Denver Police Department

In 2019, the Denver Police Department (DPD) created a new investigative unit that is responsible for proactively reaching out to domestic violence abusers with the hope/expectation of preventing incidents of domestic violence and domestic violence related homicides. Using multiple sources such as calls for service, refused criminal cases (cases refused for criminal filing by the Denver District Attorney) and referrals, detectives assigned to the Domestic Violence Prevention Program Unit (DVPP) contact DV abusers and provide them with resource information related to conflict resolution and substance abuse. The DVPP detectives are thoroughly familiar with other resources within the Denver community, such as food banks, and provide that information to DV abusers and victims to help ensure that daily family needs are met.

When victims/survivors are present during the detectives' contact with an abuser, the detectives provide information to them (victims) that are related to services offered at the Rose Amond Center. Victims are also given information related to shelter and a referral is made to SafeHouse Denver. Additionally, when patrol officers respond to calls for service related to family disturbances and incidents of domestic violence, officers provide the family with a resource packet that includes information related to conflict resolution and substance abuse.

Here are a few examples of how the DVPP has positively impacted families:

- DVPP detectives acted on a Safe2Tell tip where the detectives' intervention seemingly came at the perfect time: family members in the home had been subjected to extreme and dangerous DV behavior, including strangulation of the abuser's wife in front of the couple's children. The abuser and his wife (victim) had left their jobs for "vacation", removed their 2 children from school, and the family's status seemed to become more volatile than ever. The detectives' investigation resulted in the recovery of multiple firearms from the house, felony criminal charges were filed against the abuser and Child Protection Services intervened for the purpose of protecting the family's children.
- Detectives attempted multiple contacts at one home. Receiving no response, the detectives closed out the case assuming no one in the home wanted police contact.

However, the detectives later learned that the female victim living in the home had collected the information detectives had left and used it to contact the detectives at a later, safer time. She reported severe domestic abuse and responded to the Rose Andom Center to make a police report and receive assistance. The DVPP detectives initiated a criminal investigation. The abuser was arrested on felony DV-related charges.

- A crime stoppers tip resulted in DVPP detectives contacting a DV abuser and his girlfriend. The victim was scared and refused to accuse her boyfriend of specific crimes. It was clear, however, that the relationship was enveloped in drugs and violence resulting in a volatile environment. The detectives provided resource information to and maintained communication with both individuals until the victim was able to leave the relationship and safely move out of state.

Since the program's inception, the DVPP detectives have contacted hundreds of abusers and provided them with resource information that benefits them and their families. Detectives have also contacted hundreds of domestic violence victims/survivors and provided them with information related to available services at the Rose Andom Center. DVPP detectives who contact abusers do so with the victim's safety as a priority.

Denver District Attorney's Office

The Office of the Denver District Attorney hired a full-time Firearm Relinquishment Investigator in 2019. The investigator is dedicated to assuring the lawful relinquishment of firearms by defendants who are subject to Brady compliant protection orders. The program focuses on the early detection of firearms and ammunition possessed by DV offenders and then any necessary follow through until relinquishment is accomplished, and proper paperwork has been filed with the courts. In addition, the firearm investigator handles all referrals from victims who have concerns about the continued illegal possession of firearms and ammunition by defendants throughout the life of their DV case, including working with pretrial and probation officers. Finally, the Firearm Relinquishment Unit has also developed a data collection system to capture how many cases are being reviewed by our investigator, the percentage of cases involving firearms, the percentage of cases involving possession of firearms not involved in the

underlying case, how many firearms and rounds of ammunition have been identified, how many have been successfully relinquished, and the gender, race, and ethnicity of both offenders and victims.

The Denver District Attorney's Office has overseen the successful relinquishment of over 60 firearms and in excess of 6,000 rounds of ammunition from offenders in less than a year of operation. In addition, they have improved the safety of victims and their peace of mind knowing that they have a place to report any continued possession of firearms. The office has also trained numerous agencies, including other DA's offices, on our program. In addition, they have seen more defendants filing the proper paperwork with the court as a result of our unit developing all the necessary paperwork for successfully filing with the court. Finally, for the first time ever in Denver, there was success in having multiple defendants held in custody until their firearms were lawfully relinquished, precluding access to firearms by the defendant upon their release on bond.

2019 Case Review Data on Domestic Violence Related Fatalities

A. Case Review Data Collection

This section is based on cases reviewed throughout 2019 by Domestic Violence Fatality Review Teams (DVFRTs) in Colorado. Cases were selected for review based on several factors including status of the case (i.e., they must be closed with no civil action pending), availability of records, recommendation for review by DVFRT members, and incident location. In 2019, there were three active DVFRTs in Colorado. Case information was compiled with the cooperation of the respective law enforcement agencies and/or prosecutors' offices, as well as any other entities authorized to release information related to the case and, in some cases, interviews with survivors and/or family members. The 2019 cases were presented to members of the respective DVFRTs, after which a coding manual was completed. Dr. Joanne Belknap, Department of Ethnic Studies at the University of Colorado Boulder, entered the codebook data into Statistical Package for the Social Sciences (SPSS) and analyzed it for this section. The following provides a detailed report from the data analysis of the 11 cases reviewed by DVFRTs in Colorado in 2019 and are placed in the context of the extant research. The complete coding manual and more information on case review procedures are available at www.DDVCC.org/fatality-review.

B. Introduction

Domestic violence fatalities (DVs), also referred to as intimate partner homicides (IPHs), are "a major social problem, and it is important to determine the predictors of this violent behavior" (Cunha & Gonçalves, 2019, p. 2573). DVs/IPHs are a type of gender-based abuse, that is, one where the victims are primarily women/girls and the perpetrators are largely men/boys (Belknap, 2021). The primary goal of the Colorado Domestic Violence Fatality Review Board is to provide more in-depth data on the many factors potentially increasing the risk of DVs/IPHs. Thus, the detailed codebook not only includes documenting the characteristics of the DVs (e.g., completed and near/attempted murders, perpetrators' completed and

attempted suicides, collateral victims), but also provides an avenue to improve identification of the variables associated with DVFs.

Although there is not currently bandwidth to compare DVFs to NFDV (non-fatal DV)⁷ cases, some other recent studies have done so, most of which have been conducted outside of the U.S. One such study in Portugal addressed this through data collected on 96 incarcerated male DVF perpetrators and 76 community male DV perpetrators in DV intervention programs or under supervision by probation or child protection services. They found the DVF perpetrators were more likely than the DV non-fatal abusers to be older, exhibit more suicidal threats/intentions, and exhibit more homicidal threats/intentions, while the DV non-fatal abusers were more likely to have been victimized in childhood and not be single (Cunha & Gonçalves, 2019). A Canadian study comparing DVF and NFDV perpetrators found few demographic or criminal history differences other than the DVF perpetrators were more likely to have older victims, have had a prior DV incident, and, unexpectedly, were less likely to be unemployed and less likely to have substance abuse problems (Jung & Stewart, 2019). A study comparing DVF and NFDV cases in Spain found no differences in psychological problems, intoxication during the offense, an alcohol history problem, a drug problem, educational attainment, employment, and social disadvantage (Loinaz et al., 2018). However, compared to DVF perpetrators, the NFDV perpetrators were younger, had an elevated criminal history, and were found to be more “reckless,” defined as “a temperamental disposition related to a chronic need to carry out risky activities, to have new experiences and to reject routine or isolated activity” (Loinaz et al., 2018, p. 52).

A recent and large Australian study comparing male IPH to male-on-male homicide (MMH) perpetrators⁸ found that although both “have a history of offending... the extensiveness of this offending differs,” whereby the IPH perpetrators “reported lower offending prevalence, less frequent and versatile offending, and later offending onset compared with MMH offenders” (Eriksson et al., 2019, p. 471). Moreover, the IPH perpetrators were more likely than the MMH

⁷ NFDV (non-fatal DV) cases are DV cases where a fatality (or near/attempted fatality) has not occurred.

⁸ None of the MMH cases intimate partners. That is, none were not DVF same-sex IPHs.

perpetrators “to come to the attention of” the criminal legal system and to “be classified as ‘high risk,’” indicating the need for “ensuring that other areas of risk are recognized and responded to in appropriate ways through extensive screening or surveillance” (Eriksson et al., 2019, p. 471). Research continues to propose that stricter gun regulation (AbiNader, 2020; Doyle & McWilliams, 2020; Kivisto et al., 2019) and decreasing economic inequality (AbiNader, 2020) are necessary to decrease DVFs.

C. Findings

Location and Dates of Completed, Attempted, and Near Fatalities

Eleven Colorado domestic violence fatality (or near fatality/attempted murder) cases were reviewed in-depth in 2019, using the extensive CDVFRB Coding Manual. **Table 1** summarizes the locations of these 11 incidents. Four were in Denver (and Denver County), 2 were in Adams County (in the cities of Commerce City and Westminster), and the remaining 5 were in 5 different counties: Archuleta (city of Pagosa Springs), Garfield County (city of Glenwood Springs), Jefferson County (city of Westminster)⁹, Larimer County (city of Estes Park), and Mesa County (city of Grand Junction). The primary site of the DVFs was the joint residence of the victim and offender (36.4%, n = 4), followed by the victim’s residence (27.3%, n = 3) and the perpetrator’s residence (18.2%, n = 2). Of the remaining 2 cases, one (14.3%, n = 1) was in a national park and one (14.3%, n = 1) in the parking lot/garage of the victim’s apartment.

Unstable housing has been associated with women’s risks of DV victimization (Riley et al., 2020).¹⁰ In these 11 cases, 2 of the 3 that occurred at the victims’ residences, were living arrangements where the adult victims and their children lived with the victim’s parents. In 1 of the 2 cases that occurred at the perpetrators’ residences, the perpetrator was living with his parents. The year of the incident ranged from 2011 to 2017 with most of the cases in 2017 (n = 3) and 2016 (n = 3). Because the cases must be closed with no pending action before they can be reviewed, it is typically 2 years or more after the incident before a case is reviewed.

⁹ Westminster spans both Adams and Jefferson Counties, thus there are 2 cases in Westminster, but one was in Adams County and the other in Jefferson County.

¹⁰ We could not locate any extant research that has assessed unstable housing in the context of DVFs.

Although not in the tables, regarding the month of the incident, most occurred in the fall (i.e., 2 cases each in September, October, and November).

**Table 1: Locations and Dates of Incidents
(N = 11)**

	<u>%</u>	<u>(n)</u>
<u>County, City^a</u>		
<i>Adams</i>	18.2	(2)
Commerce	9.1	(1)
Westminster	9.1	(1)
<i>Archuleta</i>	9.1	(1)
Pagosa Springs	9.1	(1)
<i>Denver</i>	36.4	(4)
<i>Garfield</i>	9.1	(1)
Glenwood Springs	9.1	(1)
<i>Jefferson</i>	9.1	(1)
Westminster	9.1	(1)
<i>Larimer</i>	9.1	(1)
Estes Park	9.1	(1)
<i>Mesa</i>	9.1	(1)
Grand Junction	9.1	(1)
<u>Site of Incident^b</u>		
Victim's & Perpetrator's Joint Residence	36.4	(4)
Victim's Residence	27.3	(3)
Perpetrator's Residence	18.2	(2)
Parking Lot/Garage	14.3	(1)
National Park	14.3	(1)
<u>Year of Incident^c</u>		
2011	9.1	(1)
2012	9.1	(1)
2013	28.6	(2)
2014	9.1	(1)
2016	42.9	(3)
2017	42.9	(3)

^aWestminster spans Adams County and Jefferson County.

^bThe parking lot death was the victim's apartment/residence parking lot. In 2 (of 3) cases of "victim's residence" the victims lived with their parents, and in 1 case (of 2) coded as "perpetrator's residence," the perpetrator lived with his parents.

^cThe only pattern regarding months was that over half of the cases (n = 6, 54.5%) were in the fall (September, October, or November, with 2 cases in each month).

The DV Perpetrator/Victim Relationship

Among the 11 couples in the sample, all 7 (63.6%) who had ever been legally married were still legally married on the DOI (although one had moved out and they were "working on" their relationship). Three couples (27.3%) were common-law/domestic partners, and 1 couple had dated. Four (36.4%) of the couples were separated at the DOI, and the victims (19.2%) in at least 2 of the remaining couples were known to be planning to leave, consistent with existing studies identifying separation as a significant DVF risk (e.g., Wathen et al., 2007). Of the couples who had ever been married, the length of the marriages ranged from 3 to 20 years, while the common-law couples had been together from 2 to 13 years, and the couple who had dated, had dated 4 months. In contrast to most of the research documenting impending or occurring break-ups preceding the DVF, in 1 case, the couple, who had been together 20 years, was finalizing common-law paperwork when he killed her, but there was speculation that they may have been doing this for financial reasons.

None of the victims (all of whom were women) were known to be pregnant at the DOI. Previous research identifies "mutual children" as a DVF risk factor (Vatnar et al., 2018). Over four-fifths (n = 9) of the couples in our study had a joint child or children, with these children ranging in age from 3 months to 12 years.¹¹

Demographic Characteristics

Table 2 presents the domestic violence couple victims' and perpetrators' demographic characteristics. In this sample of 11 cases, all the DV victims were women and all the

¹¹ The only record of any of members of the couples having children from previous or other relationships was a victim who had 2 children with someone else while the perpetrator was in prison for abusing one of their joint children.

perpetrators were men. The victims ranged in age from 21 to 50 years with an average age of 31.4 years. The perpetrators' ages ranged from 22 to 56 years, with an average of 34.4 years. Over four-fifths (81.8%) of the couples were the same race, with 6 couples both White and 3 couples both Latinx. In 1 of the remaining couples, the victim was White and the perpetrator was Latinx. The victim in the other couple was a documented Asian immigrant, and the perpetrator was a Black documented Caribbean immigrant (i.e., neither had U.S. citizenship but both were here legally). Research indicates that DVFs of Latinas have been increasing in recent years (Stansfield et al., 2019).

Employment data were available for 9 of the victims and 9 of the perpetrators. All victims and two-thirds ($n = 6$) of the perpetrators were legally employed. Two perpetrators were unemployed, and 1 was illegally employed. About four-fifths (81.8%) of the victims and nine-tenths (90.0%) of the perpetrators were legally employed, and only 1 (9.1%) victim and 1 perpetrator were unemployed. **Table 2** also indicates that as well as being more likely to be legally employed than perpetrators, victims have obtained higher educational levels compared to perpetrators. None of the victims or perpetrators ever served in the military.

Although there was indication of mental illness for victims (27.3%) and about twice as much for perpetrators (50.0%), it appeared in some cases that perpetrators may have been malingering for the sake of their court cases, which is not uncommon in DVFs. One victim and 1 perpetrator were coded as having a disability. The victim's disability was coded as "fetal alcohol syndrome" and the perpetrator's as both "auditory processing disorder" and "intellectual/learning disability."

Table 2: Victim and Perpetrator Characteristics

Characteristic	Victim			Perpetrator		
	N	%	(n)	N	%	(n)
<u>Age^a</u>	11			11		
25 and Younger		18.2	(2)		18.2	(2)
26-35		63.6	(7)		36.4	(4)
36+		9.1	(1)		28.6	(5)
<u>Gender/Sex</u>						
Female	11	100.0	(11)	11	0.0	(0)
Male		0.0	(0)		100.0	(11)
	11			11		
<u>Ethnicity/Race</u>						
White		63.6	(7)		54.5	(6)
Latinx		27.3	(3)		36.4	(4)
Asian American		9.1	(1)		0.0	(0)
Black/African American ^b		0.0	(0)		9.1	(1)
<u>Citizenship Status</u>	11			11		
U.S. Citizen by Birth		90.9	(10)		90.9	(10)
Documented U.S. Citizen		0.0	(0)		0.0	(0)
Documented Immigrant		9.1	(1)		9.1	(1)
<u>Employment Status</u>	9			9		
Legally Employed		100.0	(9)		66.7	(6)
Unemployed		0.0	(0)		22.2	(2)
Retired		0.0	(0)		0.0	(0)
Disabled/SSI		0.0	(0)		0.0	(0)
Illegally Employed		0.0	(0)		11.1	(1)
<u>Education</u>	8			4		
Some high school		0.0	(0)		0.0	(0)
High School Grad.		25.0	(2)		50.0	(2)
Technical School		12.5	(1)		25.0	(1)
Some College		25.0	(2)		25.0	(1)
College Graduate		25.0	(2)		0.0	(0)
Postgraduate		12.5	(1)		0.0	(0)
<u>Indication of Mental Illness</u>	11	27.3	(3)	10	50.0	(5)
<u>Disability</u>	11	9.1	(1)	11	9.1	(1)
<u>Military Status</u>	11	0.0	(0)	11	0.0	(0)
<u>Substance Abuse Treatment</u>	9	11.1	(1)	6	16.7	(1)

^aVictims' ages ranged from 21-50 with an average age of 31.4. Perpetrators' ages ranged from 22-56 with an average age of 34.4.

^bOne perpetrator was Black and a documented immigrant from Jamaica who did not have U.S. citizenship.

A Description of the Fatal or Near-Fatal Events

Table 3 summarizes the deaths, near deaths/attempted murders, and suicides and attempted suicides, including of collateral deaths/near deaths (collateral is outside of the DV victim and perpetrator). Of these 11 cases, 63.6% (n =7) involved the perpetrator murdering the victim (no other deaths/near deaths, including suicides). Of the remaining 4 cases, 1 was an attempted murder/near fatality of the DV victim, 1 was a victim fatality and attempted perpetrator suicide, 1 was a victim fatality and collateral fatality, and 1 was a DV victim attempted fatality, collateral fatality, and perpetrator suicide. There were 2 cases with collateral victims. In 1 case the perpetrator stabbed and killed both the victim and her mother, and in the other the perpetrator attempted to murder his former partner and did kill their 19-month-old daughter by shooting her with a handgun before also taking his own life.

A recent national U.S. study compared state-level firearm ownership across DV (including both intimate partners and other family) and non-DV homicides from 1990 through 2016 (Kivisto et al., 2019). This study found that state-level firearm ownership was positively related to DV but not non-DV homicide rates, “and this pattern held for both male and female victims” (Kivisto et al., 2019, p. 311). Across these 11 cases there were a total of 12 deaths, ranging from 0 to 2 deaths per case. Consistent with other research the primary cause of the 12 fatalities was gunshot wounds (58.3%, n = 7), followed by blunt trauma (25.0%, n = 3), and stabbing (16.7%, n = 2) (Gollub & Gardner, 2019). One perpetrator borrowed the gun from a friend, and another had his new girlfriend buy the bullets he used to kill his estranged wife, whom he killed because he claimed she (his estranged wife) had “cheated” on him. (The perpetrator’s new girlfriend later pleaded guilty to accessory to a murder.) In another case, one where the perpetrator was living with his parents and had the victim and their child over to a family barbeque (as well as other relatives), the perpetrator shot and killed the victim in front of his parents’ family home where several adults and at least 5 children were present. The perpetrator who killed his partner and her mother stabbed his partner 33 times and her mother 12 times. This occurred at the home of the DV victim’s parents, where she and the perpetrator

lived along with their 2 children, another child of the victim's from a different relationship, and the victim's sister and brother-in-law and their child. At least 1 minor child, a 12-year old, witnessed her mother's and grandmother's dead bodies.

Indeed, among these 11 cases, almost half (45.5%, n = 5) involved a child who witnessed it in some manner. One was the 19-month old girl shot by her father after he shot at and missed her mother. Another was 2 children who heard their mother scream and then heard a "loud thump," and there was 1 other child in the home at the time. One girl heard shots and ran out with her cousin to the front yard at the family barbeque to see her mother deceased and father suffering from a self-inflicted gunshot wound (he survived), and there were other children present in the vicinity at the time of the fatal incident. In another case, it is unclear what the victim's 8-year-old daughter witnessed, but she made statements to neighbors and first responders about her father shooting her mother and, at the very least, saw the crime scene after the fact. There were 2 other children in the home in that case as well. In 2 additional cases, there were young children (a 3-year-old in 1 and a 19-month-old in the other) present in the home at the time of the fatality.

Table 3: Case Type and Fatalities (N = 11 Cases)

	%	(n)
<u>Type of Crime/IPH</u>		
IP Victim Fatality (“Only” Death)	63.6	(7)
IP Victim Near Fatality/Attempted Murder	9.1	(1)
IP Victim Fatality & Collateral Fatality	9.1	(1)
IP Victim Attempted Fatality, Collateral Fatality, & Perpetrator Suicide	9.1	(1)
IP Victim Fatality & Perpetrator Attempted Suicide	9.1	(1)
<u>Number of Deaths/Fatalities per Incident</u>		
0	9.1	(1)
1	72.7	(8)
2	18.2	(2)
<u>Cause of Fatality (N = 12 Fatalities)</u>		
Gunshot Wound	58.3	(7)
Blunt Trauma	25.0	(3)
Stabbing	16.7	(2)
<u>Attempted Fatality/Near Death (does not include attempted suicide)</u>	16.7	(2)
<u>Collateral Fatality^a</u>	16.7	(2)
<u>Completed Suicide^b</u>	8.3	(1)
<u>Attempted Suicide^c</u>	8.3	(1)
<u>Perpetrator Killed by Victim in Self-Defense^d</u>	0.0	(0)
<u>Perpetrator Killed by Police or Someone Else</u>	0.0	(0)

The DV Victims’ and Perpetrators’ Criminal Histories

A recent Canadian study of recidivism among men arrested for DV (abuse of a current or former intimate partner and not a study exclusive to DVFs) which included the Ontario Domestic Assault Risk Assessment (ODARA), a DV-specific risk assessment (Hilton & Eke, 2016), found that the official criminal history (“defined as none, non-violent, violent, and IPV”) did not

predict post-arrest DV (IPV), but the ODARA predicted post-arrest DV, stalking, sexual assault, and some non-violent offenses. The authors conclude that most men arrested for DV “do not specialize in their criminal careers” and that “ODARA holds promise for assessing general risk of recidivism among IPV offenders” (Hilton & Eke, 2016, p. 1347).

Table 4 summarizes the DV victims’ and perpetrators’ criminal histories. Notably, 20.0% (n = 2) of the DV victims, and not much higher, 27.3% (n = 3), of the perpetrators, had a prior DV arrest (although the perpetrators were more likely to have more arrests). Similarly, 1 of the victims and only 2 of the perpetrators had prior DV convictions. These findings are consistent with previous research on the criminalizing of DV victims, and in this case, ones who were subsequently killed by their current or former partners (or there was some other fatality or near-fatality). The additional criminal history variables in **Table 4** suggest a more perpetrator-related and gendered (given that all of the perpetrators were men, and all the victims were women) criminal history than the DV arrests and convictions. For example, none of the victims (women) had protection order violation arrests but 27.3% (n = 3) of the perpetrators (men) did.

One of the perpetrators had an on-again-off-again relationship with the victim for at least 13 years, during some of which he was incarcerated for 7 years for physically abusing 1 of their daughters. Specifically, he was convicted of child abuse for “shaken baby” of a daughter. Legal custody of his and the DV victim’s 2 daughters was granted to the girls’ grandparents following the abuse conviction, yet the entire family (including the perpetrator and a 4-year-old daughter the DV victim had with someone else while he was incarcerated) lived with these grandparents on the DOI, after he was released from prison. Although he was on parole and prohibited from contact with the daughter he was convicted of abusing, he claimed to be living with his mother, and she backed up that claim. Notably, a recent study found 13.5% of post-jail/prison release homicides were DV-related (Fraga Rizo et al., 2019).

Table 4: Perpetrators' and Victims' Criminal History (N = 11)

Criminal History	Victim			Perpetrator		
	N	%	(n)	N	%	(n)
<i>Prior DV Arrests</i>	10	20.0	(2)	11	27.3	(3)
<i>Number of DV Arrests^a</i>	10			11		
0		80.0	(8)		72.7	(8)
1		20.0	(2)		9.1	(1)
2		0.0	(0)		0.0	(0)
3		0.0	(0)		18.2	(2)
<i>Number of DV Arrests Past 5 Years</i>	10			11		
0		80.0	(8)		72.7	(8)
1		20.0	(2)		9.1	(1)
2		0.0	(0)		0.0	(0)
3		0.0	(0)		18.2	(2)
<i>Prior DV Convictions</i>	10	10.0	(1)	11	18.2	(2)
<i>Number of Prior DV Convictions</i>	10					
0		90.0	(9)		81.8	(9)
1		10.0	(1)		9.1	(1)
2		0.0	(0)		9.1	(1)
<i>Number of DV Convictions Past 5yrs</i>	10			11		
0		90.0	(9)		81.8	(9)
1		10.0	(1)		9.1	(1)
2		0.0	(0)		9.1	(1)
<i>Additional Criminal History Indications</i>						
Other (non-DV) assault and non-drug/ alcohol arrests?	10	20.0	(2)	9	44.4	(4)
Have a juvenile offending record?	8	0.0	(0)	7	28.6	(2)
Ever Investigated for Child Abuse	10	20.0	(2)	10	30.0	(3)
Ever Arrested for Child Abuse	10	0.0	(0)	10	20.0	(2)
Attend DV Intervention/Treatment	9	0.0	(0)	10	10.0	(1)
DUI/Possession Arrest	10	10.0	(1)	10	40.0	(4)
Protection Order Arrest	10	0.0	(0)	11	27.3	(3)
On Probation at DOI	10	0.0	(0)	11	9.1	(1)
On Parole at DOI	10	0.0	(0)	11	9.1	(1)

^aOne of the 2 victims with a prior DV arrest was arrested for DV with the perpetrator in the current case. The victim with the DV arrest for the current victim was not convicted, and the victim with a DV arrest for a different partner was convicted. Two of the perpetrators had prior DV arrests with the current victim, and 1 had a DV arrest for a different victim. One of the perpetrators with a DV arrest for the current victim was convicted, and the other was not. The perpetrator with a DV arrest for another victim was convicted on that arrest.

^bEach indication is a unique (yes/no) variable for which the “yes” rates are reported in the table.

Potential Social and System Supporters Who Knew about the DV

Table 5 summarizes who knew about the domestic violence. It is possible others who knew were not known to the local teams, thus these are likely under-reported in the table, that is, they occur more frequently than indicated. Still, the data provide information on survivors who are later killed are most likely to disclose the DV or have others to which to disclose the DV. The supporters are listed in the order of *potential social* and *potential official* (or system) supporters. However, given De Prince and her co-authors’ findings that simply because individuals know about the abuse does not necessarily mean that they *will* be supportive (DePrince et al., 2017), these findings should be interpreted with some caution regarding whether those who knew *were* supportive. Notably, compared to previous years in which we have collected these data, the higher rates of potential social supporters knowing about the abuse could indicate that DV victimization is being less stigmatized and that survivors are more willing to disclose.

The most complete data were for the victim’s potential social supporters, specifically, the victims’ parents, victim’s friends, and victim’s siblings knew in 100.0% of the cases (for which there were data). While there were less complete (known) data, neighbors, the victim’s co-workers, the perpetrator’s friends, the perpetrator’s parents, and the perpetrator’s siblings were reported as knowing in 100.0% of the cases, but the cases with these data ranged from 2 to 5 (of the 11 cases). Moreover, the perpetrator’s family members and friends may be *unsupportive* to the victim (Belknap et al., 2012; DePrince et al., 2017). For 7 of the 11 cases there were data on whether educational or childcare providers knew about the DV. In 1 case the DV victim was in college, and at least 1 member of the college knew of the abuse. Among the 9 cases where the couples had minor children, data were provided in 5 cases as to whether childcare workers/schools knew of the DV. Of these 5 cases, childcare staff/teachers/schools knew about the DV in 40.0% (n = 2) of cases, indicating the importance of training childcare

staff, teachers, and school administrators on how to recognize and respond to DV. Also, given that 1 of these 11 cases was of a DV victim who was in college, higher education institutions' law enforcement and psychological services staff should also be trained on the potential lethality of domestic violence and the risk factors for DVFs.

One multivariate study found that a major predictor of DV cases that become DVFs among Black women was "the use of legal resources" (in addition to victims' fear of their partners and victims with PTSD) (Sabri et al., 2014, p. 719). Our 2019 data indicate while police/sheriffs were the most likely to know of the DV among the potential system supporters, this was only for two-thirds of the cases for which the data were complete (6 out of the 9 cases with data). Forty-four percent of the victims were known to have pursued action in civil court (e.g., divorce or custody), and 43% were known to have pursued legal services (3 out of 7 known cases). For the 6 cases where it was known whether the victim had sought services from a local domestic violence program, one-third had (n = 2). There was limited data on medical providers knowing of the DV, only 3 cases, but in all cases the medical providers did *not* know about the DV. These findings indicate that medical providers need to more routinely screen women for DV risk factors. One recent study of DV survivors found that they were most likely to disclose this when the healthcare provider demonstrated "care, empathy, and support" (Dichter et al., 2020, p. 2655). One of the most poignant findings in the 2019 cases is that for at least 2 of the 9 cases with minor children, childcare/educational staff knew of the DV, and this was 2 of 8 cases (25.0%) in which the DVFRTs were able to find the information. (**Table 5**).

Table 5: Who Knew of DV (N = 11)

Identities of People/Agencies Who Knew	N	%	(n)
<u>Potential Social Supporter</u>			
Victim's Parent(s)	9	100.0	(9)
Victim's Friend(s)	9	100.0	(9)
Victim's Sibling(s)	8	100.0	(8)
Neighbor(s)	5	100.0	(5)
Victim's Coworker(s)	5	100.0	(5)
Perpetrator's Friend(s)	4	100.0	(4)
Perpetrator's Parent(s)	4	100.0	(4)
Perpetrator's Sibling(s)	2	100.0	(2)
Childcare staff/Teacher/School	7	42.9	(3)
Clergy/Religious Person(s)	3	0.0	(0)
Perpetrator's Coworker(s)	1	0.0	(0)
<u>Potential System Supporter</u>			
Police/Sherriff	9	66.7	(6)
Civil Court (e.g., divorce or custody)	9	44.4	(4)
Attorney/Legal Services	7	42.9	(3)
DV Shelter	6	33.3	(2)
Social Services/Child Protection	8	25.0	(2)
Medical Provider (e.g., nurse or doctor)	3	0.0	(0)

“Who knew” categories are divided into potential community and system supporters and then listed in order of the percent of “who knew” and the n of cases for which there were data.

The Fatality/Near-Fatality Criminal Legal System Case Outcomes

Table 6 reports the outcome of the case in the criminal legal system. Given that 1 perpetrator suicided, the outcomes are reported on 10 cases. The most common primary charge filed at arrest was for 1st degree murder (80.0%, n = 8), while the 2 remaining arrest charges were attempted murder (10.0%, n = 1) and 2nd degree assault and felony menacing for the near death case (10.0%, n = 1). Forty percent (n = 4) of the perpetrators accepted a plea bargain, and the remaining 6 cases went to trial (60.0%). Forty percent (n = 4) of the cases

resulted in a 1st degree murder disposition, and another 40.0% (n = 4) resulted in 2nd degree murder dispositions. One case (10.0%) resulted in a manslaughter disposition. The final case, the near-death DVF, the perpetrator was convicted of 2nd degree assault (10.0%, n = 1). Forty percent (n = 4) of the perpetrators received life without parole, and the remaining sentences ranged from 5 to 48 years, with 2 perpetrators (20.0%) receiving this second longest sentence of 48 years.

Table 6: Criminal Legal System Response to the Incident

<u>System Response</u>	<u>%</u>	<u>(n)</u>
<u>Charges Filed at Arrest^a</u>		
1st Degree Murder	80.0	(8)
2nd Degree Murder	0.0	(0)
Attempted Murder	10.0	(1)
Manslaughter	0.0	(0)
Other ^b	10.0	(1)
<u>Process</u>		
Went to Trial ^c	60.0	(6)
Accepted a Plea Bargain ^d	40.0	(4)
Charges Dropped	0.0	(0)
<u>Disposition</u>		
1st Degree Murder	40.0	(4)
2nd Degree Murder	40.0	(4)
Manslaughter	10.0	(1)
Other ^e	10.0	(1)
<u>Sentence</u>		
5 years	10.0	(1)
10 years	10.0	(1)
25 years	10.0	(1)
33 years	10.0	(1)
48 years	20.0	(2)
Life without Parole	40.0	(4)

^a There are 10 cases included for this table; it does not include the case where the perpetrator suicided as there were no criminal legal system responses.

^b In the “near death” case, the charges were 2nd degree assault and felony menacing.

^c Four of the 6 cases that went to trial were tried before a jury.

^e Five defendants were offered a plea deal, and 4 accepted.

^d This was the “near death” case, and the perpetrator was convicted of 2nd degree assault.

The Presence of Risk Factors Associated with DV Fatalities

Table 7 lists the frequencies of the known (or suspected) risk factors associated with DV fatalities. DVF review teams were given the list and asked to check all that were present in the case reviewed, so it is likely that these are under-reported because they were not known. These factors are listed in the order of their likelihood in these 11 cases. The 2 most common risk factors, reported in 10 (90.9%) of the 11 cases, were *possessiveness of the victim* and *perceived loss of control*, followed by *pending legal action* (81.1%, n= 9), and 72.7% (n= 8) of the cases had the risk factors: *perpetrator’s history of DV assaults, history of drug/alcohol abuse, perpetrator underemployed/unemployed, had access to a firearm, and exhibited feelings of abandonment/betrayal*. The *perpetrator stalking /monitoring the victim* was known in 63.6% (n = 7) of the cases, and in 54.5% (n = 6) of the cases, the following were present: *perpetrator was known to carry a weapon, experienced loss of housing, was financially dependent on the victim, was separated/estranged from the victim, and perpetrator having a known mental health issue or diagnosis*. In 45.4 percent (n = 5) of the cases, the perpetrator *knew or believed the victim was in a new relationship, was having financial struggles, and was emotionally dependent on the victim*. The next most commonly known risk factors, indicated in 36.5% (n = 4) of the cases, were the perpetrator’s *imminent separation from the victim, violation of protection orders, threats to kill the victim, prior threats with a firearm, history of non-DV assaults, loss of coping mechanisms, escalated suicide threats, and loss of child contact/custody*.

Slightly over a quarter of the cases (27.3%, n = 3) included the risk factors *a whirlwind courtship* and *perpetrator known to use a weapon*. Almost one-in-five (18.2% n = 2) of the cases included *perpetrator’s dependence on the victim for social interaction/support, threats to kill the victim’s family/children/friends, history of strangling the victim, asking to meet with the victim “one last time,” indications of decompensation, changes in daily living, and the presence*

of stepchildren in the home. Almost one-tenth (9.1%, n =1) of the cases included a perpetrator with a *loss of employment and unusual enmeshment with his mother, who exploits his victim's "caretaking,"* and who *believes the victim is pregnant.* None of the 11 cases indicated the perpetrator had *gambling problems, a history of animal cruelty, or the death of a close friend/family member.*

Table 7: Risk Factor Checklist^a (N = 11)

Risk Factors	%	(n)
Perpetrator's Possessiveness of Victim	90.9	(10)
Perpetrator's Perceived Loss of Control	90.9	(10)
Pending Legal Actions	81.1	(9)
Perpetrator had History of Domestic Violence Assaults	72.7	(8)
Perpetrator had History of Drug/Alcohol Abuse	72.7	(8)
Perpetrator was Underemployed/Unemployed	72.7	(8)
Perpetrator had Access to a Firearm	72.7	(8)
Perpetrator was Experiencing Feelings of Abandonment/Betrayal	72.7	(8)
Perpetrator had History of Stalking/Monitoring Victim	63.6	(7)
Perpetrator was Known to Carry a Weapon	54.5	(6)
Perpetrator's Loss of Housing	54.5	(6)
Perpetrator was Financially Dependent on Victim	54.5	(6)
Perpetrator's Estrangement/Separation from Victim	54.5	(6)
Perpetrator had Known Mental Health Issues/Diagnosis	54.5	(6)
Perpetrator Believes or Knows Victim is in New Relationship	45.5	(5)
Financial Struggles	54.5	(5)
Perpetrator was Emotionally Dependent on Victim	45.5	(5)
Separation Imminent	36.4	(4)
Perpetrator History of Violation of Protection Orders	36.4	(4)
Perpetrator had made Threats to Kill Victim	36.4	(4)
Perpetrator had made Prior Threats with Firearm	36.4	(4)
Perpetrator had History of non-DV Assaults	36.4	(4)
Perpetrator's Loss of Coping Mechanisms	36.4	(4)
Perpetrator's Escalated Threats of Suicide	36.4	(4)
Perpetrator's Loss of Custody/Contact with Children	36.4	(4)
Whirlwind Courtship/Relationship	27.3	(3)
Perpetrator was Known to Use a Weapon	27.3	(3)
Perpetrator was Dependent on Victim for Social Interaction/Support	18.2	(2)
Stepchildren in the Home	18.2	(2)
Perpetrator made Threat to Kill Victim's Children, Family, &/or Friends	18.2	(2)
Perpetrator had History of Strangulation	18.2	(2)
Perpetrator and Victim Meet "One Last Time"	18.2	(2)

Perpetrator showed Indications of Decompensation	18.2	(2)
Perpetrator's Changes in Daily Living	18.2	(2)
Perpetrator's Loss of Employment	9.1	(1)
Perpetrator's Unusual Enmeshment with Mother	9.1	(1)
Perpetrator showed Indication of Obsession with Weapons	9.1	(1)
Perpetrator Exploits Victim's Tendency to "Caretake"	9.1	(1)
Perpetrator Believes Victim is Pregnant	9.1	(1)
Perpetrator had History of Animal Cruelty	0.0	(0)
Perpetrator had History of Gambling	0.0	(0)
Death of Perpetrator's Close Friend/Family Member	0.0	(0)

^aThe codebook lists all of the above, and DVFRs are asked to check the ones they know existed (so there is no distinction between missing and "no").

D. Summary of Key Findings and Best Practices Identified in Extant DVF Research

The findings in this report are similar in many ways to other DVF reports, including the highly gendered nature of DVFs (men killing women) and the predominant use of a firearm as the weapon (Velopulos et al., 2019). In addition to 1 of the collateral victims being a joint child of the victim and perpetrator, at least 3 additional cases included children who saw the murdered body of their mother or witnessed the actual incident. Moreover, DVFRs identified a connection between child abuse and DV fatalities and these findings point to the need for improved coordination between systems when child abuse is suspected or reported. As noted, in the conviction for child abuse case the perpetrator served time in prison and was living with the same child he had abused and other children at the DOI, in violation of a protection order and the terms of his parole. As noted, in the conviction for child abuse case the perpetrator served time in prison and was living with the same child he had abused and other children at the DOI. Given the findings in this annual report, as well as from research on DVFs across the world, the following best practices have been identified:

1. *Implement DV Training for Childcare and School Staff and Administrators:* Even if this is a video or webinar, such training could alert these individuals to behaviors that might indicate an abusive home and deter DVFs.
2. *Implement Police Use of Lethality Risk Assessments:* Research in Canada and Australia indicates that intimate partner abuse risk assessments of those arrested for, and

particularly, those convicted of, DV against intimate partners, should be implemented (Fraga Rizo et al., 2019; Hilton & Eke, 2016; Kebbell, 2019).

3. *Implement Police Training and Guidelines that Include Children of DV Couples:* A recent Canadian study advocates for expanding the training and procedural guidelines for interventions and assessments with the adults in DV situations to including such guidelines, assessments, and interventions for children exposed to DV (Saxton et al., 2020). We recommend that Colorado consider implementing this.
4. *Document and Assess the Treatment Services for Children Survivors' of DVF Parent(s):* A Canadian study of DVF annual reports from three jurisdictions from 2004 to 2016 that concluded all three jurisdictions “identified several gaps in service provision for children affected by fatal domestic violence that will require increased engagement and resources targeting these vulnerable children” (Reif & Jaffe, 2019, p. 104). We need to amend our Colorado DVFR codebook to document what services the children survivors of the DVFs in Colorado received, and more importantly, to include in trainings that social services/child protection services need to assure that such children are receiving adequate services (e.g., mental health/therapy).
5. *Improve and Expand Healthcare Providers' Screening for DV:* There were no indications in the 2019 data that any healthcare providers knew of the DV. As noted above, a recent study found that DV survivors were most likely to disclose their victimization to healthcare providers who demonstrated “care, empathy, and support” for them (Dichter et al., 2020, p. 2655).
6. *Provide More Effective Partnerships and Coordinated-Community Responses:* These responses should be coordinated across stakeholders, such as law enforcement, child services, healthcare providers, civil and criminal courts, victim advocates, and researchers (Murray et al., 2015; Ragavan et al., 2019; White & Sienkiewicz, 2018; Witteman et al., 2018).



Acknowledgements

This report was authored by Jenn Doe, Executive Director for the Denver Domestic Violence Coordinating Council (DDVCC), and Dr. Joanne Belknap, Professor in the Department of Ethnic Studies at the University of Colorado Boulder.

Jenn has been working with DDVCC and the Denver Metro Domestic Violence Fatality Review (DMDVFR) team since 2014. She provides leadership to the Colorado Domestic Violence Fatality Review Board and supports the work of DVFRs across the state of Colorado. As a survivor of an attempted homicide by a former intimate partner, who lost her best friend in the same incident that nearly took her own life, Jenn has used her tragic experience to work toward creating change and preventing future domestic violence related deaths.

Dr. Belknap has served as the pro-bono researcher for the DMDVFR since it began over 20 years ago. Her guidance as a researcher has helped Colorado receive national recognition for our DV fatality review work, and she continues to improve the systems and processes to ensure that we are collecting the most robust and accurate data possible. Her contributions to this work cannot be understated.

Thanks to Katyie Wells, Xander Franklin, and Anna Brennan for their diligent efforts to help collect and compile the important information presented in this report so that we can all learn from these tragic cases and work to prevent future domestic violence related deaths.

And, last but certainly not least, thanks to all of the DVFRs, agencies and individuals across the state who provided us with data for this report and to the CDVFRB for their efforts to make meaning of and help disseminate this information.



Appendices

Appendix A: Colorado Domestic Violence Fatality Review Board Members

1. Office of a City Attorney in Colorado who has experience working with victims of domestic violence or prosecuting domestic violence offenders:
 - **Linda Loflin-Pettit**, Manager of Government and Community Relations, Denver City Attorney's Office
2. Colorado Department of Public Health and Environment:
 - **Kelly Dougherty**, Injury Prevention Coordinator
3. Colorado District Attorneys' Council Designee
 - **Brian Mason** - 17th Judicial District
4. Criminal Defense Attorney:
 - Currently Vacant
5. Denver Metro Domestic Violence Fatality Review Committee:
 - **Linda Johnston**, EAW Project Director, Colorado District Attorney's Council
6. Department of Human Services' Adult Protection Services:
 - **Kathleen Calderon**, Adult Protection Services Specialist, Division of Aging and Adult Services, Office of Access and Independence
7. Department of Human Services' Child Protection Services:
 - **Lucinda Connelly**, Manager, Child Protection Services Unit, Division for Child welfare, Office of Children, Youth and Families
8. Domestic Violence Survivor (first of two positions):
 - **Bridget Dyson**, Victim Advocate
9. Domestic Violence Survivor (second of two positions):
 - **Phillip Clark**, Senior Facilities Technician, LenderLive
10. Domestic violence advocate representing a shelter or other domestic violence service organizations:
 - **Carmen Hubbs**, Executive Director, Rise Above Violence (aka Archuleta County Victim Assistance Program), Pagosa Springs
11. Domestic violence offender management board:
 - **Jesse Hansen**, DV Offender Management Board Program Coordinator, Colorado Department of Public Safety

12. Domestic violence treatment provider specializing in offender treatment:
 - **Dr. Brenna Dee Tindall**, Director Treatment and Evaluation Services, Ft. Collins-Greeley
13. Judge or magistrate:
 - **Judge Shannon Gerhart**, 4th Judicial District, El Paso County Court
14. Law enforcement agency:
 - **Sgt. Lonnie Chavez**, Grand Junction Police Department
15. Medical professional with forensic experience:
 - **Megan L. Lechner**, Forensic Nurse Examiner, UCHHealth Memorial Hospital (El Paso County)
16. Probation, parole, or community corrections program:
 - **Lindsey Dixon**, Probation Officer Supervisor, Pretrial Services and Electronic Monitoring, City and County of Denver, Department of Safety, Division of Criminal Corrections
17. Statewide nonprofit organization that offers training and expert advice to domestic violence programs that serve survivors of domestic violence, dating violence, and stalking:
 - **Deborah Bittner**, Division Director, Domestic Violence Services, Family Tree
18. AG Selected Appointee (first of two):
 - **Andrew Steers**, Senior Deputy DA, 18th Judicial District:

Appendix B: Definitions and Guidelines for Colorado DVFRTs

Complete definitions and guidelines for Colorado DVFRTs can be found online at www.DDVCC.org/fatality-review. These documents were developed by the Denver Metro Domestic Violence Fatality Review/Denver Domestic Violence Coordinating Council and have been endorsed by the Colorado Domestic Violence Fatality Review Board.

Appendix C: References

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