Domestic Violence Prevention Response Taskforce September 9th meeting

Attendees:
Sen. Monnes Anderson, Rep. Whitsett, Erinn Kelley-Siel, Margaret VanVliet, Erin Greenawald, Gina Skinner, Sybil Hebb, Susan Lindauer, Helen Thompson, Niki Terzieff, Meg Parichelli
Governor's Staff:
Duke Shepard
Galen Gamble

The Domestic Violence Prevention Response Taskforce Current Charge:

- Adequacy and availability of services to racial and ethics minorities
- Domestic violence in the workplace
- Teen dating violence
- Availability and adequacy of service to minors (SB 757, 2011)

General Charge:

- Prioritize the findings and recommendations of the Oregon Domestic Violence Fatality Review Team
- Facilitate the coordination of the statewide response to domestic violence including prevention activities
- Identify and address existing gaps in service and system response, including disparate services for racial and ethnic minorities, Native American and tribal members, and gay and transgender populations;
- Improve the efficacy and efficiency of system response to domestic violence
- Identify and implement best practices prevention strategies
- Provide leadership and serve as a forum to engage key stakeholders in establishing goals, creating performance measures, supporting implementation, and monitoring outcomes;

Erin Greenawald Presented:

The Domestic Violence Fatality Review Team (ODVFRT) is a multi-disciplinary team of statewide experts that reviews select domestic violence fatalities to determine what can be learned to reduce the likelihood of future fatalities (the cases ODVFRT select are not cold cases). Team members include representatives from Oregon Department of Justice, the Oregon Department of Human Services, the Oregon Health Authority, the fields of medicine and psychology, county district attorneys' offices, domestic violence survivors, and domestic violence programs, among other fields and agencies. The mission of ODVFRT is to improve the coordinated statewide response to, and prevention of, domestic violence and domestic-violence-related fatalities.

These reviews have two sections. The first sections ODVFRT goes to locality of the fatality. The team speaks with the family members, friends and local officials, in addition they review police reports, photographs, court records, and interviews. The team identifies several critical issues and areas for system improvement. Second sections occurs two weeks later in Salem or Portland. Team briefly reviews the material discussed and provided at the first section. The second section allows for additional discuss on new information that they decided needs to obtain (or try to obtain) between the first and second meetings. The team uses the meeting to identify the issues in the case presentation and then work on crafting recommendations/solutions to address those issues. For instance, were the victim's friends/family/co-workers aware of the domestic violence? Did they discuss this with the victim/ anyone? Why not? What can we do to encourage safe intervention and/or awareness among the community? Another issue has been the medical community not wanting to intervene even when they know about DV issues in a relationship. Can we mandate education/training for docs? Can we mandate a

screening tool in ERs, Pediatrician offices, Public Health clinics? Trying to sift through all of the issues, prioritize them, and address each of them, takes up a lot of our time.

Erin shared multiple case examples below are the findings from a review done in the spring 2013:

Impact of historical trauma and oppression
Effects of adverse childhood experience
Use of drugs and alcohol
Possible points of prevention/intervention overlooked maternal health/school/medical/professionals)
Need for improved collaboration between state/tribal courts regarding restraining orders
Need for improved training at DHS regarding children with tribal membership

A link to the video about the Montana Domestic Violence Fatality Review Team:

http://vimeo.com/15147441

Discussion

Cultural change
A change in the words used to describe domestic violence, the media's reporting of such cases, social media benefits and disadvantages. The "normalcy" of abuse needs to be removed through education.

Children
The children exposed to domestic violence or DV fatalities, we currently do not track or have data on how these children grow up.

Missed opportunities
Opportunities for intervention when children are involved- Children wellness check-ups, school, childcare.

ER Departments ask questions regarding Domestic Violence but do not know the appropriate reporting channels when the victim answers the question. Are the right questions being asked? Are there cultural barriers?

When victims are seeking Legal Aid
Drug/Alcohol screening programs

Effective restraining order protection
A must have tool in a safety plan

Barriers-
The victim does not know the perpetrators address
Having access to judges in local areas (currently one would need to travel to Salem or Eugene)/ limited times of operation
Restraining orders from other states or foreign lands are not always recognized

Sentencing structure
Proportional sentencing, Oregon is behind other states regarding restraining order violations. Many of these violations fall under misdemeanor or assault 4. There are few/or no penalties in-between assault 4 and a sentence of 72 months in jail for the predator. Other state spell out the crime and clear label it, Oregon does not.

Weapons
Guns play in Domestic Violence cases

Capacity in rural areas
Rep. Whitsett stated that her district has one of the highest rates of DV cases because there is a lack of services such as mental health, police, hospital access (the state hospital is where many folks are taken and it is costly)

Juvenile prevention
Currently there are no treatment providers (such as counselors) for this population

Access to housing
Access to affordable housing, shelters, transition housing.
Example one victim did not self-identify as being "homeless" because she in fact had a home and refused to go to a homeless shelter for assistance. A change in terminology should be explored.

Next Meeting
Sybil Hebb will look at other states, where is Oregon compared to other states.

ACE's study

Pathways-
Health Care
Education
Juveniles

DHS Data pilot project

Access to 24hour restraining orders