



Domestic Violence Fatality Review Team (DVFRT) Findings

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Buncombe County DVFRT

The mission of the Buncombe County Domestic Violence Fatality Review Team (DVFRT) is to prevent domestic violence (DV) deaths, increase safety for DV victims, and increase accountability for abusers through systems change.

The Buncombe County DVFRT includes a broad cross section of community service providers including health, mental health, social services, law enforcement, courts, school professionals, survivors and other domestic violence service providers who meet quarterly to improve cross-system communication and to review domestic violence homicides that have occurred within the County.

(DVFRTs are defined by the NC General Assembly in Session Laws 2009-52 and 2013-70)



History of DVFRT



- ✓ In 2013, Buncombe County tied with Wake County, a jurisdiction nearly four times its size, for the second highest number of domestic violence (DV) homicides
- ✓ Buncombe County came together to implement a coordinated response to domestic and sexual violence called Buncombe County's Coordinated Community Response (CCR)
- ✓ From the CCR came the Buncombe County Family Justice Center (FJC) and the DVFRT
- ✓ Resolution #2018-06-22
- ✓ In 2020, the first intensive two-day Case Review was completed



Review Timeline



Review Findings

- There is a link between people with disabilities and being victims of abuse and DV
- The person who committed the murder has a consistent history of violence (e.g., knives, threats, strangulation, disregard of people, took possessions of victims, drug addiction, suicidal tendencies, lack of remorse)
- Incarceration did not help prevent him from future crime
- Poverty, race, education, and socio-economic status has a significant impact on resources and opportunities



Review Findings, cont.

- The person who committed the murder has characteristics that were indicative of a batterer (e.g., isolation, disregard, escalation)
- Isolation, through limited phone access, was a Power and Control tool used
- The consequences of the school-to-prison pipeline are significant and early intervention and engagement of youth are important
- There was consistent engagement with the medical sector
- There were numerous system failures for both the victim and offender (e.g., lack of follow through with referrals)





Recommendation #1

The Magistrate Recommendation for Domestic Violence Bond Form should be revised to move “Multiple Domestic Violence warrants by same complainant” as an aggravating factor instead of mitigating factor and to add an option for aggravating factor of isolation/lack of ability to call for help. The form should also be reviewed for additional revisions.

More research is needed to identify best practices.





Recommendation #2

Inter-agency training trauma-informed and DV focused for law enforcement, magistrates, judges, prosecutors, victim-witness assistance personnel, school personnel and social services employees.

- a. Ongoing training for smaller law enforcement agencies: Weaverville, Woodfin, Black Mountain, Biltmore Forest, Montreat



Recommendation #3

Create Workgroups:

- a. **Lethality Assessment Protocol (LAP)** workgroup to increase accountability and accurate use of the protocol
- b. **Courthouse workgroup** to remove barriers to court access and reduce unnecessary court appearances for both civil and criminal courts
- c. **Protocol workgroup** tasked with identifying and educating the team about the current protocols for responding to DV offenders (e.g., bail, the 48-hour hold, and electronic monitoring), to what extent they are implemented, identifying best practices, and considering the possible benefits or drawbacks of additional or alternative protocols.



Recommendation #4

Strengthen efforts/interventions/supports regarding trauma-informed, early childhood/school age program and increase access to services



Recommendation #5

Acknowledge the intersection of poverty, race, mental health (MH) and substance use disorder (SUD) and the impacts on DV.

- a. Provide pathways for housing stability for adults with significant MH/SUD/Justice Involvement to include services for offender accountability. Lack of affordable housing in Asheville has an impact on DV.
- b. Training for healthcare/mental health/substance abuse providers re: domestic violence (e.g., data collection, inventory of what training already exists vs. what is needed, bringing awareness)

