Submission to Royal Commission into Family Violence

My name is Karen Pickering and I am an independent feminist organiser. I am the director of feminist cultural events, Cherchez la Femme and Girls On Film Festival, and have been lead organiser in activist campaigns including SlutWalk Melbourne and Our Parks. I work with feminists in Melbourne at a grassroots level to raise consciousness around gender equality, particularly focused on cultural change and preventing violence against women. I have an established network of women activists, campaigners, commentators and agents of change that I am fortunate to draw on in the ongoing work of pursuing gender equality. I am also a frequent commentator in the media on issues of import to women's rights and male violence. The scourge of family and intimate partner violence, and violence against women more broadly, is a common subject of action and discussion among my fellow organisers, activists and community. I would like to suggest three areas for the Commission to consider in its survey of family violence in Victoria, and what active steps can be taken to reduce and condemn it.

The three major areas of concern for me are media reporting guidelines, and policing and prevention measures to protect women and children from violent offenders, and the urgent implementation of a large scale public health campaign in which Australia specialises.

1. On the first subject, I understand that various guidelines exist, under different rubrics, but it's my view that a standardised master guide should exist for distribution among stakeholders including media, police, hospitals, social workers, politicians and the wider community. This should be developed in consultation with violence prevention workers and experts in intimate partner violence, as well as linguists, sociologists and media and communications workers. Such a document would be invaluable in establishing codes of conduct and standards of reporting that will not only contribute to the reduction of violence but respect the survivors of violence who are currently retraumatised and made vulnerable by present media practices. There would need to be mechanisms in place for enforcing these guidelines, in which media outlets could be penalised for ignoring or contravening them. This would reinforce to the broader community that women are entitled to respect in media depictions and that sexual and intimate partner violence is unacceptable under any circumstances.

2. Secondly, on the issue of planning and prevention around reducing the actual rates of intimate partner and family violence, we clearly need to embrace a program of drastic action. I believe that Victoria can lead the country in our approach, as we have on many issues of social justice and community progress, and demonstrate that the allocation of serious funds and application of political will can bring about massive and positive change on an issue that is currently costing our community huge amounts of money, energy and of course, lives. Women and children are dying because of our lack of action and sense of despair on the issue of male violence and this collective paralysis must end now.

The Massachusetts Model is a set of measures taken in the American state of the same name, in which serious action has been taken against violent offenders and the rates of harm, injury and death of women and children have been reduced.

Here are some resources on the efficacy of the High Risk Reporting Model, as adopted in Massachusetts. I have also attached a comprehensive journal study containing several articles on the Massachusetts Model in action.

https://apha.confex.com/apha/142am/webprogram/Paper310548.html

http://www.newyorker.com/magazine/2013/07/22/a-raised-hand

http://www.slate.com/blogs/xx_factor/2013/07/15/massachusetts_figured_out_a_simple_solution_t o_prevent_domestic_homicide.html Basically, this model shifts the focus from the victim to the perpetrator and allows police and other bodies to utilise special powers in preventing deaths and further harm among victims of family violence.

3. Thirdly, there must be a large scale public health campaign launched and disseminated that conveys the urgency, scale and scope of this problem, and empowers members of the community to see the signs of family violence, speak out and report against it, and access help if they are in a situation where they are either at risk of experiencing or perpetrating family violence. Australia has an incredibly proud history of completely transforming lethal social problems through audacious and highly effective campaigns that cut through the mass consciousness and bring about positive change. Examples include the campaigns to eradicate drink driving, skin cancer (through the adoption of sunscreen and hat use, especially among children), and the epidemic of HIV/AIDS that was largely arrested here in Australia, due to the astonishing effectiveness of the public health campaign to educate the community on the dangers of unsafe sex and raising awareness around condom use. These models are studied around the world, not only because they represent best practice in a media and communications sense and within the paradigm of harm minimisation as the best preventative approach in public health, but because their effect was comprehensively stunning - they worked.

Let us lead the way in adopting zero tolerance for more totally preventable deaths; the women and children lost to the epidemic of male violence within families and relationships are already dead, but we can prevent the senseless deaths of countless more. We know that family violence (and male violence against women more broadly) costs our society untold millions of dollars in pressure on the public health and mental health systems, the social security system, the court system, the workforce, the economy and the lost productivity that comes with the kind of insecurity faced by women attempting to negotiate and escape these situations. Imagine if that money was instead directed at prevention and changing social attitudes that license violence against women and effectively turn a blind eye to the lives lost to this violence. Let us be the generation that refuses to look away. Let us be the generation that stands up and says no more women will die because we refused to address male violence. Let us be the leaders in this fight.

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February/March 2012

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In Defense of Danger Assessment

by Emma Freeman

Introduction: The Need for Prediction and Prevention

On October 25, 1999, Jean Hosmer renewed a restraining order in the Hampshire Massachusetts Family and Probate Court against her estranged husband of 18 years, William Bernotas. Bernotas had never physically struck Hosmer, a resident of Pelham, Massachusetts and the mother of two young children. However, Bernotas's conduct towards Hosmer had been "so bizarre" that she felt constantly unsafe; after Bernotas made a "veiled threat to kill" Hosmer, she filed papers indicating that she feared for her life.¹ As she approached her car after leaving the courthouse where Judge Stephen Rainaud had just renewed her order or protection, Bernotas shot Hosmer at close range, killing her. Bernotas then shot and killed himself.

A plaque in the sidewalk where Hosmer was shot now commemorates her death:

Jean Hosmer's spirit fives on She died on this spot October 25, 1999

A victim of domestic violence

In 2009, a group of domestic violence prevention advocates and friends gathered *in memoriam* to discuss how Hosmer's story had affected Northampton's tightknit community of advocates and friends. Jessica Woodman-Hardy, for instance, discussed how

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The High Risk Team Model and GPS Offender Monitoring: Stopping DV in Its Tracks

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by Diane L. Rosenfeld

FSTIC VIOLENCE

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LAW • PREVENTION • PROTECTION • ENFORCEMENT • TREATMENT • HEALTH

It may sound simple, and in many ways it is, but perhaps the most promising development in the prevention of domestic violence homicides is the creation of the High-Risk Team Model that has been developed and led by the Jeanne Geiger Crisis Center in Newburyport, MA. The Greater Newburyport High Risk Response Team (Newburyport Team or Team) is comprised of representatives from advocacy groups, law enforcement, probation or parole, batterer intervention, prosecution, and others. Centered on a continuing danger assessment of high-risk cases, the Team communicates across disciplines to address and prevent the escalating threats so common in DV homicides (and DV cases in general). The Team uses stronger containment methods such as GPS monitoring of the DV offender to promote victim safety. DVR is addressing this innovative solution beginning with this issue.

The central tenet of this work is the belief that DV homicide is so predictable as to be preventable.¹ From this operating principle grows a critical re-examination of a system that we take for granted—one in which three to four women a day are killed by their intimate partners in this country.² We ask how this happens in cases where "she did everything right." This question highlights the fallacy of the answer: We know from too many cases that an abused woman can do everything "right" within the system and still become the victim of her abuser's lethal violence. In reality, it is unfortunately the case that the system is not currently set up to prevent DV homicides effectively. But we may now be at the tipping point of change. We know that DV homicide can be prevented through a coordinated community approach that takes seriously the level of potential dangerousness in any DV case and creates an effective response that focuses on offender containment to keep the victim safe. Thus, the truer answer to the question about how this could happen to a victim who did everything right is that we must realize the difference between risk reduction and prevention: Crime victims cannot prevent crimes from being committed against them; they can only try to reduce their risks of being victimized. Only the perpetrator can truly prevent a crime, and it is the job of the criminal justice system to prevent and address crimes.³

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The Importance of the High Risk **Team Model to Manage Dangerous** Cases

Understanding dangerousness is the key to building an effective response to DV. For this reason, all DV cases should be screened for potential lethality through the administration of danger assessment tools. Emma Freeman examines danger assessments in her article "In Defense of Danger Assessment" (p. 1). Equally important, however, is what happens to that information once an assessment is complete. When a case screens in as high risk, there must be a team in place to respond, creating a safety net around the victim and holding the offender fully accountable. The article by Victoria Burt, Emma Freeman and Elizabeth Hague outlines the operations of the Newburyport Team based on their interview with Kelly Dunne, Chief of Operations for the Jeanne Geiger Crisis Center (see "'The Warning Signs Were There': The Jeanne Geiger Crisis Center Model, High Risk Teams, and Community Adaptation," p. 3).

Our clinical work with the Jeanne Geiger Crisis Center (JGCC) began in 2004 when I met with Kelly Dunne and Marta Chadwick, an advocate and a victims attorney respectively. At the time, their community was still

application of any of the contents of this report letter.

reeling from the murder of Dorothy Guinta-Cotter, who was killed by her estranged husband the night before they were to return to court for a hearing on an extension of Dorothy's order of protection. Guinta-Cotter's husband committed suicide after murdering Dorothy; at the time of the murder-suicide, police were on site at the home, and their daughter was on the phone with the 911 dispatcher. What could they have done differently, they wondered. Dorothy had committed advocates, a lawyer from the JGCC, and police who were looking out for her safety. But even with all these supportive factors in place, the system was simply "not set up to protect Dorothy," as Kelly stated to the Governor's Commission on Sexual and Domestic Violence when we presented the idea for GPS monitoring of DV offenders in high risk cases.⁴ We shared the belief that a system that required a woman to hide in a shelter for her own safety was fundamentally flawed in that it exonerated a criminal justice system from taking responsibility for acting to prevent crimes it had notice were likely to be committed. Indeed, as Kelly pointed out, the cases in which a woman is fleeing to a shelter are by definition the most high risk: she is literally running for her life.⁵

The Newburyport Team is now in its sixth year of operation. The results have been so remarkable that Vice President Joseph Biden, speaking at a White House press conference in commemoration of National Domestic Violence Awareness Month, cited the High Risk Team Model as the one we should all follow.6 Moreover, the data (as discussed more fully in the IGCC article, p. 3) show no DV homicides in the areas served by the Team and that the offenders monitored by GPS tracking have not re-assaulted at all-a 100% success rate.

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The Newburyport Model is being replicated throughout Massachusetts, and JGCC has provided training to over 3,000 across the country on danger assessments and creating High Risk Teams (HRTs). We have come a long way since our first meeting. In 2005, shortly after our presentation to the Massachusetts Governor's Commission, the Gender Violence Clinic held a conference at Harvard Law School, "Improving the Criminal Justice Response to DV," at which several national experts came together to discuss danger assessments and the use of GPS monitoring of high-risk offenders.⁷ Last fall, a relatively new team, the Cambridge/Arlington/Belmont High-Risk Team (CAB HART) convened a statewide conference at which representatives from high risk teams across the state came to share

of a writer's agency or association

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University of Berkeley, CA

"The Warning Signs Were There": The Jeanne Geiger Crisis Center Model, High Risk Teams, and Community Adaptation

by Elizabeth Hague, Emma Freeman, and Victoria Burt

Introduction

"After Dorothy's husband shot her, the [Jeanne Geiger Crisis Center] made a commitment not only to screen every single woman for the warning signs, but also to bring everyone together to interrupt that cycle of escalating violence ... There have been no domestic violence homicides in that community since the project began." In 2010, Vice President Biden praised the Jeanne Geiger Crisis Center (JGCC or Center) in Newburyport, MA with these words, drawing national attention to the Center's innovative model and highly successful results. Most importantly, Vice President Biden offered the Center's model as a way forward: "We need to replace what we have been doing and replicate this kind of success."

This article will discuss the remarkable-and achievable-successes of the Newburyport approach to DV intervention, outlining how communities can implement their own version of Newburyport's high-risk model and attain similarly powerful results. This article is largely based on the authors' interview last November of Kelly Dunne, Chief of Operations for the JGCC; who conducts the trainings on the high risk team model. Dunne provides training and technical assistance to communities replicating the model.¹

Origins of the Newburyport High Risk Model

In 2002, Dorothy Giunta-Cotter's estranged husband killed her in her home the night before they were to return to court for a hearing to extend Dorothy's protective order. Giunta-Cotter's husband shot at responding officers and then committed suicide while their daughter was upstairs on the phone with a 911 dispatcher,² leaving the small Massachusetts community reeling. Although Dorothy had been receiving advice from advocates at the JGCC, her death stunned

those working to intervene in cases of intimate partner violence and prevent domestic abuse from escalating to lethal levels. Moreover, Dorothy's case was noteworthy because it contained all of the risk indicators DV advocates have recognized as signifiers of future violence or lethality. Through the innovative work of the JGCC leading the Greater Newburyport High Risk Response Team, Dorothy's murder has galvanized a movement to strengthen the safety net for victims by focusing on the dangerousness of the offender and dismantling his ability to escalate his violence.

The Jeanne Geiger Crisis Center High Risk Response Team as a Model

The High Risk Response Team partners include representatives from victim advocacy services, probation, law enforcement, the District Attorney's office, hospitals, legal services, batterers' intervention programs, and the local sheriff's department. Dunne explained that the team has prospered mainly because of its steady mechanics: team members are meticulously trained to recognize, understand, and quickly interpret risk factors using Professor Jacquelyn Campbell's danger assessment instrument, discussed further in "In Defense of Danger Assessment" (see p. 1). As a result of this danger assessment, high risk cases are assigned to a multidisciplinary team that develops individualized interventions and monitors and tracks each case. In order to make sure that the team members are aware of their roles and responsibilities in detecting cases rapidly, as well as their restrictions in confidentiality, the teams meet regularly to share information about potential victims. Dunne emphasized that the transfer of information and collaboration across disciplines are key factors in preventing DV homicides. If a victim is in immediate danger, however, the team follows a separate emergency protocol geared towards rapid intervention.

The Newburyport Team screens about four new high risk and potentially lethal cases of abuse each month, and approximately 30 new cases per year. The Team formulates a protective strategy plan for each case that may include the use of GPS monitoring of the offender. Fortunately, the Team's coordinated community response has resulted in no DV homicides in the areas served by the Team, as well as a 100% success rate in GPS monitoring. For this reason, the Greater Newburyport High Risk Response Team serves as a model for communities nationwide.

According to the Center's most recent Safety & Accountability Report at the end of 2011, the Team has accepted 106 cases between 2005 and 2011. Criminal justice interventions occurred in 78 of these 106 cases, and incarcerated offenders in 76% of the cases either pre-trial or as a part of sentencing. These offenders threatened to kill in 74% of the cases, and strangulation was used in 74% of the cases. Of the clients served, 92% reported no re-assaults, and 93% of the clients were able to stay in their communities without relocating to DV shelters, reflecting strategic effectiveness that takes into account both client safety and client mobility. Of the offenders put on GPS monitoring, there have been no violations.³

JGCC has taken the lead in providing training and technical assistance to communities seeking to replicate the High Risk Team Model; Massachusetts now has 22 High Risk Teams in operation. A Promising Practices Report to the Massachusetts Governor's Council on Sexual and Domestic Violence highlighted high risk teams; specifically, the report pointed to the use of GPS monitoring, the use of dangerousness hearings, and other containment

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options.⁴ The Report also highlighted the leadership role of the IGCC and the success of the High Risk Team Model. As the model spreads in Massachusetts, we see encouraging teams like the Framingham High Risk Team. Their success is especially significant to the DV advocacy movement because the Team's outcomes are remarkably similar to JGCC's despite its different location, population, demographic makeup, and court system. Framingham's High Risk Team demonstrates that the High Risk Team Model is not merely successful in its original community, but is also highly replicable and effective in a diverse array of circumstances. Furthermore, the Framingham team can also be understood as a case study in proper replication: to successfully implement the High Risk Team Model, communities must implement a period of readiness assessment, obtain buy-in from partner agency heads, meticulously train

Adaptation of the Model to Individual Communities in Massachusetts and Beyond

In large part, the High Risk Team Model is so successful because it is tailored to the individual community in which it resides. As Dunne pointed out, it is noteworthy largely because all its partners are "speaking the same language." While most pieces of the model are indispensable for a community's successful implementation, others may need to be altered, augmented, or omitted entirely in order for the model to best serve any particular community, and be consistent with its DV state laws and practices. Below are some crucial features for the successful adaptation of the High Risk Team Model. As the model expands beyond Massachusetts, these factors will prove extremely useful for communities undertaking the assessment, training, and implementation stages of adaptation. Communities that carefully consider these elements of the model will be well-equipped to attain

The research has established patterns and indicators that often precede a lethal attack.

all police offers and partners, and put the victim advocacy organization in the lead or co-lead of the High Risk Team.

The Cambridge/Arlington/Belmont High Risk team (CAB HART) is another replication success story.⁵ After extensive training by Dunne and Detective Robert Wile, one of the founding members of the Newburyport Team, CAB HART is off to an impressive start.

"The launch of CAB HART was the result of a year-long process of planning, discussion and collaboration between several community partners and was inspired by the success of (the) Newburyport Team."⁶ Additionally, CAB HART hosted a conference for High Risk Teams this past September that was attended by over 200 people. This signifies the progress being made in Massachusetts, as we witness the spread of the High Risk Team Model.⁷ the same successes that Dunne's team has achieved.

Community Assessment/Audit

1. Community Readiness and Buy-In. Before starting a high risk team, a community should conduct an assessment of readiness, including a safety audit, to implement the model. One of the most important aspects is obtaining community buy-in, particularly from the leaders of the various partner agencies. As Dunne noted: "If you believe the message that the media often sends us about intimate partner homicides-that the offender just snapped-then the high risk model will not make sense to you." For this reason, community stakeholders must have a good understanding of the research on intimate partner homicides, which demonstrates that these homicides frequently follow what Dunne calls "predictable patterns with identifiable indicators." Dunne's case February/March 2012

for the High Risk Team Model relies in large part on its ability to effectively prevent future lethality: "Just as homicide review teams look backward to identify what red flags were present and where the system may have failed, in the high risk model we identify cases that have the potential to escalate to lethal levels and design interventions in real time in order to deescalate dangerous situations." When communities are beginning to establish high risk teams, Dunne frequently attends stakeholder meetings to assess the current domestic violence response and determine how the model might work in the particular community.

The buy-in must include critical partners in the community: law enforcement, the local hospital (the last place victims are often seen before a homicide is the emergency room), local probation officers, the District Attorney or prosecutor's office, the batterer's intervention program, and, typically, a sheriff's program. Other community members such as faith leaders or child welfare could be included as appropriate in tailoring the team to the local community.

2. Build on Existing Resources: Re-Purpose Your DV Roundtable. Of course, a high risk team may build off of existing community coordinated response efforts or domestic violence round tables, which may have paved the way for high risk teams. Dunne is enthusiastic about the prospect of upgrading current community advocacy groups into more formal prevention programs. By "transform[ing] existing resources into high risk teams," Dunne pointed out, communities can make the leap from what can be a circular discussion of system improvements to actual strategies for intervention and change. A key benefit of a safety audit can be to re-purpose a DV roundtable or other Coordinated Community Response into a high risk team. The structure and goals of such a team can reinvigorate a community with knowledge and capacity to effectively intervene in DV before it turns lethal.

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Tiana's Story

by Juhyun Park*

Tiana Notice was stabbed to death on Valentine's Day, 2009. Her exboyfriend, James Carter, was found guilty of her murder and of violating the restraining order she had against him. Carter had repeatedly violated the restraining order without consequence, although Tiana kept careful track of and reported several violations. When he slit her tires, the police told her it was a property crime.¹ The day before she died, when she went to the police to report multiple violations of the restraining order, they told her that they could not verify the existence of her restraining order, and that "it was a long weekend and they were short-staffed."2

When James Carter emailed Tiana the last time, and told her not to tell the police, she went to the police for protection, and was told he would be arrested. But the police did not arrest him. Instead, they called him and told him that if they found out he was the one who sent the email, he would be arrested.³ Having been tipped off as to Tiana's disobedience of his warning to her not to seek protection, Carter got a knife, went to her apartment, and lay in wait until she returned home. She had the presence of mind to call 911 as she was bleeding to death, and the tape was played at Carter's trial.⁴

After Tiana's death, her father, Alvin Notice, created the Tiana Angelique Notice Foundation, and has been a powerful advocate for strengthening law enforcement protections for endangered women in high-risk domestic violence cases. Our clinic worked with Alvin and others in supporting new legislation in Connecticut that was hailed as "the most concentrated attack on these crimes in 24 years" and that offered, among other things, a pilot GPS monitoring program for offenders in high risk domestic violence cases.⁵ Alvin's work is an inspiration for how strong advocacy can improve laws and practices, and also for the many ways in which

advocates can apply pressure to ensure that law enforcement is accountable for protecting those endangered by domestic abuse.

The Media and Political Leadership

Before discussing Alvin's activism, I would like to highlight certain factors which, combined with the dedication of Alvin and other advocates, helped coalesce the legislative impetus needed to make important changes to domestic violence laws.

First is the role of the media. On June 29, 2009, Alice Morrin, an employee at a local affiliate of Fox News and The Hartford Courant, was killed at her home by her estranged husband.⁶ For a year following Alice's murder, The Courant and Fox CT dedicated a blog to covering issues of domestic violence, in her honor.7 The Courant's website currently has a section collecting articles on domestic violence⁸ that reflects not only the tragic frequency of domestic violence incidents, but also the sustained attention The Courant has given to this issue. On the whole, the local news media has maintained a very supportive relationship with Connecticut's domestic violence advocacy community according to Linda Blozie of the Connecticut Coalition Against Domestic Violence (CCADV), an umbrella organization for the state's domestic violence agencies.9

The story also illustrates the importance of getting politicians to support efforts to address domestic violence. In Connecticut, House Speaker Chris Donovan's leadership has been especially instrumental passing stronger domestic violence legislation. With a background in social work, Speaker Donovan was especially alert to the seriousness of domestic violence crimes in the state.¹⁰ Following the string of intimate partner assaults in 2009, he brought together advocates, victims, prosecutors, lawyers, and victims' family members to brainstorm ways to address domestic violence most effectively on three fronts: prevention, protection and prosecution.¹¹ The bipartisan Speaker's Task Force on Domestic Violence he created remained active for the 2011 legislative session, and this year achieved the enactment of a bill that, among other protections, allows teenage victims of dating violence to get legal protection and expands the availability of restraining orders against abusers or stalkers.¹² Blozie is optimistic that advocates will be able to continue making progress in developing the state's domestic violence laws, even after the task force's mandate expires, based on the interest generated and relationships already forged.¹³

A Father's Efforts

Politicians and the media are, of course, only part of the picture. The GPS pilot program, for example, may never have seen the light of day without the efforts of Alvin Notice, Tiana's father.

The CCADV had been considering pushing for GPS legislation for some time, and Connecticut's judicial branch had conducted research on the effectiveness of electronic monitoring for domestic violence offenders.¹⁴ Yet even in early 2010, after the formation of the task force on domestic violence, advocates at CCADV were expressing reservations about the practicality of a GPS program for the state. "We have entertained the whole idea of GPS because it is something that is becoming a growing national trend," Linda Blozie told the Connecticut Post, but added, "We clearly would need to have a much more sophisticated GPS system in Connecticut before I would feel and before my colleagues would feel that it's an effective measure."¹⁵

Everything changed when Alvin Notice arrived on the scene. Notice had begun researching GPS for restriction order violators a month after Tiana's death, and what he learned convinced him that this was a measure that could have saved his daughter's life. Around this time, he got in contact with Diane Rosenfeld of Harvard Law School, who helped him prepare a presentation on how to implement a court-administered

See TIANA'S STORY, next page

^{*}Juhyun Park is a second-year student at Harvard Law School. She received an A.B. in English Literature from Harvard College.

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GPS program. With this presentation, Alvin began meeting with lawmakers to persuade them to support the measure.¹⁶ He was a "die-hard advocate" who "met with everyone," Blozie recalls.¹⁷ Notice also brought around the somewhat half-hearted advocates at CCADV by repeatedly stressing the benefits of the program, and especially by introducing them to victims' tracking devices, which would alert the wearer when the offender entered a protected area—exactly the sort of "sophisticated" system that CCADV had been waiting for.¹⁸

During a public hearing on proposed domestic violence legislation, some of the legislators voiced concerns about the costs of administering the GPS program, which were estimated at fifteen dollars a day per device. As the consensus seemed to shift towards shelving the measure, Notice walked out of the room to where a crowd of journalists was waiting, and began talking to them about the benefits of electronic monitoring. "My daughter's life was worth more than fifteen dollars a day," he told them. A number of his audience started actively questioning legislators about the GPS program, and soon after, the tide turned in favor of increasing victim protection through offender monitoring.¹⁹

Notice's activism has not been confined to lobbying the state legislature. Through the Tiana Angelique Notice Foundation, Notice installs security cameras for domestic violence victims in Massachusetts free of charge. The video footage can provide valuable evidence of protective order violation in trials, and the presence of the cameras may even deter the aggressor from coming near the survivor's home. Cameras that Notice installed have led to two arrests so far, and to one conviction. Installing the cameras "makes me feel so good," Notice told The Hartford Courant in December 2010. "It's worth every bit of my time to see justice for these women."20 Another ancillary effect of the cameras was that two students from the Harvard Law School's Gender Violence clinic, Cari Simon and Kamilah Willingham, were helping a victim in one of these high-risk cases. As a result of the prosecutor's

failure to take seriously the danger the victim was in, the students not only acted quickly to bring critical factors of dangerousness to the judge's attention, but also started a Domestic Violence Courtwatch Program. It is currently being run by the Harvard Law School Women's Law Association.

Tiana Notice, Tracey Thurman, and Jessica Gonzales

Carter's conviction last month was a major part, and yet only a part, of the justice that Tiana's family is seeking. The family has also filed a civil suit against the Plainville Police Department for mishandling Tiana's requests for help.²¹

Police mishandling of calls is not unusual in domestic violence cases. In 1985, Tracey Thurman won a lawsuit against the Torrington Police Department for failing to enforce her restraining order against her abusive husband.²² Tracey's story, widely publicized, started a wave of reforms in domestic violence legislation across the country, and in Connecticut, spawned a mandatory arrest law for domestic violence offenders.²³Yet, despite significant further advances in domestic violence law since then, Tiana was killed in 2009 due to the same predictable cause that nearly cost Tracey's life so many years ago: police failure to take seriously the dangers that these women reported.

The continuing presence of this evil no doubt bears relation to the fact that the American judicial system, as represented by the U.S. Supreme Court, has yet to take seriously a domestic violence victim's right to protection. In Castle Rock v. Gonzales, the Supreme Court ruled that a woman has no property right in police enforcement of a restraining order.24 The decision received a sound rebuke this year from the Inter-American Commission for Human Rights ("Commission") which found that the United States's failure to "adequately and effectively organize its apparatus to ensure the implementation of the restraining order ...violated [Jessica's and her daughters'] right to judicial protection."25 The Commission also found violations of the girls' rights to life and to special protection as girl-children, and to the petitioners'

right to equal protection before the law, as guaranteed by the American Declaration. $^{26}\,$

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While not legally enforceable, the Commission's ruling casts moral censure on a nation that loves to see itself as enforcer and protector of human rights abroad, and it is hoped that advocates will be able to use this to get the word out on how far Castle Rock strays from international human rights norms. The Supreme Court's ruling is an indication of just how entrenched the barriers to protection of domestic violence victims are in our society's very psyche. The old impulse to conceive of intimate partner violence as an interpersonal rather than criminal affair remains strong, and feeds decisions that choose to afford more protection to money interests than to a domestic violence victim's right to life.27

The Supreme Court did not, of course, couch its reasoning in these precise terms. The right that was shoved out into the cold was the right to enforcement of a restraining order, not the right to life. The problem is that in high risk domestic violence cases, an unenforced restraining order may just as well be a death sentence.

The problem is grave, but it does suggest to us a line of action. The Castle Rock Court and the police responding to Tiana's requests for help were blind in their own ways-the Court to the implications of its decision for domestic violence victims, the police to how precarious Tiana's situation really was. Some of the blindness may have been willful, but much was doubtless caused by ignorance. Ignorance, though destructive, can be addressed through education and advocacy. This is where high risk teams come in. Had the Plainville Police been part of or trained by a high risk team, the officers would have known that Carter's slashing of Tiana's tires was no ordinary property damage, but rather a serious (and surprisingly common) escalation. Slashing tires conveys to the victim that she cannot go anywhere to escape the abuser's control. The police would have seen the death references in the emails Carter sent as the lethality indicators that they were. It could also, perhaps, have prevented the placing of that fatal phone call to Carter.

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The Use of GPS Technology in Cases of Gender Violence Around the World

by Victoria Burt*

While the use of GPS to monitor domestic violence (DV) perpetrators is still very new in the U.S., it is encouraging to see that it is beginning to be used in other places outside of the continental U.S. This article discusses the use of GPS technology to monitor domestic abusers around the world.

Spain

Spain passed its first and longawaited law against DV in December 2004. This law, supported by influential social movements in the country, lays the groundwork for decisive governmental policies to ensure the effective protection of women's integrity. One of the most important and innovative policies was the application of GPS technology to monitor offenders in DV cases. The use of this technology in Spain resulted from a collaborative effort of many state offices, like the Secretary of Justice, the Secretary of Equality, the Supreme Court's General Counsel and the District Attorney's Office. An experimental pilot project was first launched on July 24, 2009, with a budget of five million Euros, largely used to install and monitor 3,000 GPS bracelets, and to train public officials. Even though the initial number of bracelets covered only 10% of the restraining orders per year, this first step provided the authorities with the expertise and information needed to expand the use of electronic bracelets throughout the country. The media played a crucial role in this process: As the GPS monitoring system in DV cases was advertised, the number of GPS-monitored restraining orders skyrocketed.

The Spanish government is currently analyzing the effects of the pilot program to aid it in launching a permanent GPS monitoring system in the near future.

France

An influential national campaign to foster women's rights and protect women against gender violence is making significant progress in France. The Minister of Solidarities and Social Cohesion, Roselyn Bachelot, has recently made an important public announcement indicating the government's intention to adopt GPS technology to monitor offenders in cases of gender violence. The first experiment should be launched in Amiens, Strasbourg, and Aix-en-Provence and will last for one year; depending on the results, the system will expand to the rest of the country. It is also worth noting that a recently enacted law introduced some significant innovations: psychological violence is now a crime that can be punished with up to three years of prison; and victims of verbal abuse are now authorized to seek restraining orders as well as the use of electronic bracelets to monitor the offender.

Scotland

Scotland is also using GPS technology to improve the protection of victims of domestic abuse. The GPS monitoring system was launched during the country's Annual Domestic Abuse Campaign on December 21, 2010. There have been successful trials of GPS bracelets in the British counties of Devon and Cornwall. The Strathclyde Police in Scotland, which dealt with 25,112 incidents of DV, is the first force to use this technology. Their experience is expected to serve as a model for the rest of country.

Puerto Rico

On August 2011, Governor Luis G. Fortuno publicly affirmed the commitment of this U.S. territory's government to take all appropriate measures to put an end to DV in Puerto Rico, including enacting new legislation to improve the protection of women's rights. Since then, the government has also taken important measures to spread the use of GPS technology to monitor offenders in cases of DV. Many state institutions have been involved in this national effort to improve women's protection against gender violence, including the Women's Secretariat, the Police and Justice Departments, City Halls, and the First Lady's Office. The government has already invested \$1.5 million U.S. dollars to install the GPS monitoring program, and a pilot program will soon start in Bayamón; hopefully, it will be expanded to the entire country.

Peru

Peru's Congress is currently examining an important law that could foster women's protection against DV. A legislative committee of the Peruvian Congress has recently presented a draft of a new law against DV, which will treat domestic abuse as a crime, rather than just as a misdemeanor. Among the important innovations introduced by the proposed law are the creation of a GPS monitoring program to track domestic offenders, and the creation of a public registry of domestic abusers, which will be monitored by one or more judges.

Portugal

Portugal already had substantial experience with the use of GPS technology to monitor criminal offenders (since 2002) when it decided to extend the use of this instrument to monitor offenders in cases of gender violence. The electronic bracelets were tested for about two years in specific cases in Lisbon and Coimbra, before the Ministry of Justice officially introduced a national electronic surveillance program on August 31, 2011. The first decision that ordered the use of a GPS-monitored bracelet in a gender violence case occurred on

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^{*}Victoria Burt is an LL.M. (master's in law) student at Harvard Law School from Asuncion, Paraguay. She holds a law degree from the Catholic University in Asuncion, Paraguay and a Specialization in Contracts and Torts from the University of Salamanca, Spain. She clerked for the Civil and Commerical Court of Appeals in Paraguay and was an Associate at Peroni Sosa Tellechea Burt & Narvaja Abogados.

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experiences and expertise on how to best run HRTs. Over 200 people attended. It was exciting to witness the new teams collaborating, creating, and sharing information, and all working toward the same goal of stopping DV in its tracks.

Work With States to Pass GPS Monitoring Legislation for High-Risk DV Cases

Our clinical experience has been that, like Newburyport, communities react to high profile DV homicides or murder-suicides by asking what they could have done differently to prevent such tragedies. The resulting actions range from nothing substantive, or nothing but "chatter" (see "Maine: Move Beyond the 'Chatter Stage' in Preventing DV Homicides" by Elizabeth Hague, in a future DVR issue) to individualized efforts aimed at correcting the precise fault line in the system that was responsible for the murder,8 to GPS legislation alone, to GPS legislation with HRTs to manage cases. Although the HRT aspect need not be legislated, it is suggested as the most effective way to implement the GPS monitoring legislation. It is clear to us that the last approach is the necessary one; GPS legislation works most effectively when the offender is monitored in the context of an HRT.

The Gender Violence Clinic functions as a resource center for legislators, advocates, and survivors interested in preventing DV homicide, and we are happy to contribute whatever legal assistance and expertise we can. For example, in 2008, after Michael Giroux murdered Cindy Bischof, a well-loved real estate agent in Chicago, her brother Michael Bischof contacted me about pursuing GPS legislation in Illinois. Due to his impressive organizational and advocacy skills, the bill now known as "The Cindy Bischof Act" became law 150 days after it was first introduced in the legislature.9 After Amanda Ross was killed in Kentucky, we worked with legislative counsel for the Speaker of the House Greg Stumbo, as well as advocates and prosecutors to pass "Amanda's Bill." Steven Nunn, who was under an order of protection for having previously attacked Amanda, recently pled guilty to her murder and is now serving a life sentence.¹⁰ He was found in the cemetery at his parents' grave with his wrists slit in an unsuccessful suicide attempt immediately following Amanda's death. After receiving news of the tragic murder of Tiana Notice, a 25 year old graduate student in Connecticut, I reached out to her father, Alvin Notice, who was also interested in strengthening the criminal justice response to high-risk cases like his daughter's (see "Tiana's Story" by Juhyun Park, p. 37). Several of my clinical students attended a rally at the Statehouse in Connecticut one year after Tiana's murder, calling for GPS legislation and other initiatives to address DV. The legislation passed in 2010, five months after the rally at the Statehouse.

Tiana was African American, as is her murderer, James Carter. Black women are at a significantly higher risk of DV homicide than other women. Kandis Wood ("Women of Color, the Pressure Not to Report, and Sisterhood" in a future issue of **DVR**) examines women of color and DV risk factors in an article that emphasizes the power of female alliances to combat gender violence. She envisions the creation of a community intervention program called "SisterHood" that she will likely pursue after graduation.

Cindy, Tiana and Amanda all could be alive today if their abusers had been placed under GPS monitoring.¹¹ Each was murdered in a zone ostensibly protected by their respective orders of protection. Each would have known that the offender was there, waiting to kill her. GPS can communicate in realtime the location of an offender: if he violates a restricted zone, law enforcement and the victim are notified and can immediately enact a safety plan. In "GPS: Frequently Asked Questions," Laura Taylor discusses these technologies and addresses related issues and potential questions (in a future issue of DVR). Similarly, Victoria Burt reports on "The Use of GPS Technology in Cases of Gender Violence Around the World" (see p. 39).

When presented with a new and effective promising practice, states should act aggressively to prevent DV from escalating into a homicide. While some states will pass the legislation with reference to an out-of-state murder-suicide,¹² other states seem more recalcitrant. For example, we began to work with Maine two years ago on GPS monitoring legislation. Maine's DV homicide

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rate is one of the highest in the country. Yet, despite these statistics as well as the high profile murder-suicide of Amy Lake, a kindergarten teacher, and her two children by her estranged husband Steven Lake, the state has not yet enacted GPS legislation. A new report reviewing the murders recommends such legislation, perhaps indicating that the state is finally moving towards adopting more robust tactics to intervene in domestic violence cases (see Hague, future **DVR** issue).

As I said to the Council of State Governments in 2008, states should not wait for yet another DV homicide to wake up to the glaring inadequacies of the current system.¹² States have enough information to know what actions they can take *right now* to prevent DV from escalating into homicide. Perhaps it is time for a national effort to lead the states forward. Certainly, we should be pooling our resources in this new direction.

The Difference a High Risk Team and GPS Make

A personal anecdote highlights the difference it can make to a woman's life to live in a community equipped with both a high risk team and GPS monitoring of DV offenders. The other night, I was at a dinner party seated next to a woman. While discussing our professional lives, she said she had experienced serious career setbacks because of a personal situation. Then she told me about her recent divorce from her abusive spouse and the ensuing custody problems, as well as her fear that with access to her son, her ex-husband would be able to harm him. Because this woman lived in Cambridge, I was able to give her the contact information for the Cambridge, Arlington, Belmont high risk team (CAB HART). I did so with confidence, knowing that the team members were fully dedicated to helping out in these situations and that they are committed to providing real safety to endangered women.

The next day, I received an urgent email from a woman I will call "Donna" in a Chicago suburb. She had obtained an order of protection against her ex-boyfriend, who had become unstable and threatening after she broke up with him. In fact, the psychiatric hospital to which he was briefly committed

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contacted her upon his release (as required under the law) to notify her that he had made threats to kill her while hospitalized. After her ex-boyfriend violated her order of protection, he was put on GPS monitoring; however, the judge ordered the device removed after a trial. At the trial, Donna brought forward five witnesses to the series of violations the man had committed when he showed up at her work place. Despite this evidence, the judge acquitted him on a technicality: The state had failed to prove that the ex-boyfriend had "remained" at her workplace as required by the language of the statute, as opposed to just "passing by." It strains the imagination as to why this judge imposed such a narrow interpretation of The Cindy Bischof Act, which was enacted after Cindy was murdered in circumstances eerily similar to those facing this woman in Illinois.

Unfortunately, there is no team to which I could refer this woman in Illinois. I made a series of phone calls, and am still trying to cobble together some safety net for her. Meanwhile, this woman's professional life is disrupted and she lives in constant fear. She does not want the attention that necessarily accompanies being seen as a "victim" nor does she want to be subject to an order of protection that might force everyone in her workplace to be on high alert. GPS monitoring gave this woman the only sense of security she has felt since the abuse began in May 2011. Once that protection was taken away, she is experiencing a life marked by a form of domestic terrorism. It simply does not have to be this way.

The contrast between these two experiences is stark: my ability to help

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Hosmer's homicide had prompted her to apply to law school and pursue a career in family law.² However, Woodman-Hardy and the other advocates also asked themselves how DV advocates could have better anticipated Bernotas's lethal conduct. Despite the fact that Hosmer had been in contact with three advocates on the day of her death, they had been unable to

the woman in Cambridge and my inability to help the woman in Illinois depended entirely on whether each state had a high-risk intervention team. All states should implement high-risk case management teams, for they are needed everywhere. Donna's safety should not depend on a mere fortuity: had she not been able to contact me, it is unclear and far from certain who would have been equipped to intervene on her behalf. An endangered woman's safety should not depend on where she lives: she has a right to be safe and protected whether she lives in Massachusetts, Illinois, or any other state in this country. Unfortunately, this is not vet the case.

There remains much work to do on behalf of battered women. We will take with gentle hands the lessons learned from the lives of Cindy Bischof, Tiana Notice, Amanda Ross, Amy Lake, and countless others so that they were not lost in vain, and we will act to protect others similarly in danger.

End Notes

1. Diane L. Rosenfeld, Op-Ed: "Law Enforcement Sends Mixed Signals," Chicago Tribune, July 29, 1994, at 19.

 Sæ http://bjs.ojp.usdoj.gov/content/homicide/ intimates.cfm. Two points of note are that Intimate Partner Homicide rates for women have only decreased from 1,587 for the year 1976 to 1,181 for 2005; and that 35.2% of homicides have no reported victim-offender relationship.
 Dr. Jackson Katz makes this point in his trainings and lectures on male violence prevention. He is the founder of MVP: Mentors in Violence Prevents (www.jacksonkatz.com), and author of *The Macho Paradox: Why Some Men Hurt Women and How All Men Can Help* (Sourcebooks, Inc., Naperville, IL 2006).

4. Presentation to the Governor's Commission on Sexual and Domestic Violence, Boston, MA, Dec. 12, 2004.

Kelly Dunne & Marta Chadwick, "Redefining Safety: Do You Have a Safety Plan If a Victim Says 'No' to Shelter?" 12 DVR 49 (2007).
 White House Press Conference, National Domestic Violence Awareness Month, Oct. 27,

anticipate or prevent the violence that ultimately proved fatal. Moreover, as Judge Rainaud recalled, the renewal of the restraining order was "a garden variety hearing—no animosity, no yelling. That's what made the result so shocking."³ Were there hidden warning signs, the advocates at Hosmer's plaque wondered, that could have prevented Hosmer's death? And could a different sort of engagement on the part of the domestic violence com2010. Available at http://www.whitehouse. gov/photos-and-video-/video/2010/10/27/ domestic-violence-awareness-month# transcript

7. Among the attendees were representatives from Jane Doe, Inc. (the Massachusetts Coalition Against Sexual and Domestic Violence), government agencies, law enforcement, lethality experts Jacquelyn Campbell and Neil Websdale, batterer intervention specialist David Adams, members of the Governor's Commission on Sexual and Domestic Violence, and law students.

8. For example, Ken Paulson has been making progress in legislation to require that a prison psychotherapist examine an inmate before release and notify the victim. Jennifer Paulson, Ken's daughter, was murdered by an ex-boyfriend against whom she had a civil order of protection in Washington State. The legislation would also enable electronic monitoring to enforce such protection orders. *See*http://www.komonews.com/news/ local/133219973.html.

9. Michael Bischof created a foundation in his sister's name. He often refers high risk cases to the clinic for assistance and actively promotes GPS legislation in several states. *See* http://www.cindysmemorial.org

10. http://www.ongo.com/v/1261776/-1/ 9C546F604FF6DOV1/steve-nunn-pleadsguilty-to-murder-gets-life-sentence

11. http://abcnews.go.com/Nightline/ restraining-orders-stalkers-domestic-violencevictims-call-enforcement/story?id=9999-86#. Tu-A183qqKo describes each of these cases.

12. http://www.csg.org/pubs/statenews/ video/conversations_omaha/diane_rosenfeld.aspx

Diane L. Rosenfeld is a Lecturer on Law at Harvard Law School where she teaches courses on Gender Violence, Law and Social Justice; Title IX; and Theories of Sexual Coercion. She supervises the Gender Violence Clinical Program at Harvard Law School. The Gender Violence Clinic engages in legal policy work on many issues, but with a focus on preventing intimate partner homicides and creating effective school policies on stopping campus sexual assault. This issue reflects the Clinic's work on intimate partner homicide prevention. You may reach the Gender Violence Clinic at guclinic@ law harvard.edu. The student-writers of the various articles participated in the Gender Violence Clinic in Fall 2011.

munity have recognized Hosmer's death as predictable and therefore preventable?⁴

Over the past several decades, stories like Jean Hosmer's have motivated community advocates for victims of domestic violence to approach case management in a way that, according to Diane Rosenfeld, better accounts for the "texture and reality of the

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lived experience of the endangered woman."5 Professor Jacquelyn Campbell, the Dean of the Johns Hopkins School of Nursing, has become particularly well-known for her instrumental work in developing danger assessments designed to determine whether women are at high risk for fatal outcomes like Jean Hosmer's.⁶ Campbell's research, discussed in greater detail below, relies on the fundamental premise that certain factors present in DV cases may indicate the likelihood of future fatal violence. By creating a risk assessment system to diagnose the meaning of these common factors, Campbell and subsequent scholars hypothesize that DV homicides are neither sporadic nor random but rather recognizable and, therefore, avoidable.

This article, first, will defend the use of danger assessments against several recent policy-based and constitutional attacks. Second, it will highlight an increasingly significant high-risk factor in cases of intimate partner (IP) violence: the abuser's prior strangulation attempts. Ultimately, it will contend, Jean Hosmer's story is just one of countless stories that teach DV advocates the value of utilizing danger assessments and high-risk analysis. Hosmer's case was, to be sure, unusual; Bernotas did not demonstrate the same level of prior violence towards his wife that many abusers display. However, that the relationship between Hosmer and Bernotas was atypical and yet ultimately fatal just underscores the importance of nuanced high-risk analysis. Only if the DV advocacy community continues to creatively assess current data, investigate previously unrecognized high-risk factors, and remain attuned to the facts of each individual case can it best prevent tragedies like Jean Hosmer's death and diminish the likelihood of future violence.

In Defense of Danger Assessment

"Given the high percentage of battered women who may be reassaulted, there is a great need to determine which clients are at greater risk of future harm." – Dana Harrington Conner⁷

Developed in 1986 and revised in 2003, the Danger Assessment (DA) is an instrument used to determine the likelihood that an abused woman will become the victim of IP homicide. The DA consists of a calendar, which assesses the "severity and frequency of battering during the past year,' and a 20-question instrument, which weighs the yes/no responses to questions about risk factors common to cases of domestic violence.8 In addition to the original DA, Campbell has developed a shorter, four-question version known as the Lethality Assessment. Law enforcement officials use this abbreviated test when responding to domestic violence calls, then refer women at high risk to advocates trained to implement the DA itself.⁹

Campbell's Danger and Lethality Assessments have tremendous potential to predict and prevent fatal intimate partner violence; a 2009 analysis suggested that the revised DA is likely to catch more than 90% of potentially lethal DV cases.¹⁰ For this reason, the DA and programs like it have become increasingly popular across the United States. Most recently, on a state level, Campbell worked to implement the DA across counties in Maryland. The results have been extremely successful: most notably, Calvert County has had no homicides involving intimate partners since implementing the lethality assessment.¹¹ Furthermore, the DA has "sparked national interest;"12 for example, Virginia and Washington, D.C. support the DA.13 Ken Noyes, Coexecutive Director of the D.C. Coalition Against Domestic Violence, has "no doubt that lives could be saved" if Washington, D.C. were to implement a similar program.

Though scholars and advocates alike have acknowledged the tremendous preventive value of danger assessments like Campbell's,14 such assessments have not gone uncontested. Some scholars question the empirical value of danger assessments, noting that "the whole language of prediction ... is problematic"15 and emphasizing that "[c]aution is urged in the use of risk assessments without further research."16 Other scholars, however, have levied more doctrinal arguments against state intervention in DV cases. Most recently, Professor Margaret E. Johnson of the University of Baltimore School of Law protested the state's use of high-risk factors and dangerousness assessments on the grounds that such requirements "encroach ... on women's dignity unnecessarily and even detrimentally."¹⁷ Johnson contends that mandatory danger assessments are problematic in two respects: first, they prioritize the state's perspective that homicide prevention should be paramount in determining legal and community responses to DV, and second, they presume that abused women have a "false consciousness" regarding abuse and thus inhibit women's autonomy.

Johnson contends that women in abusive relationships have a right to refuse state intervention intended to prevent future homicide. For some women, she argues, the state's prioritization of homicide prevention both infringes on dignity and prevents her from factoring other issues-such as economic status, children, and even love of a partner-into how she chooses to approach an abusive relationship. Johnson marshals several doctrinal threads in support of her hypothesis: the right to privacy and abortion; the right to refuse medical treatment; and the right to die.¹⁸ Since we recognize these liberty interests in the face of the societal impulse to protect both fetus and patient, Johnson ultimately contends, we ought to recognize a similar interest on the part of battered women in the face of the societal impulse to protect them from the fatal consequences of their relationships.

Though Johnson's argument may intuitively appeal to feminists and batterers' advocates alike, her contentions are both doctrinally and politically unavailing. First, Johnson obscures her claim that women have a right to remain in abusive relationships by couching it in the language of rights and autonomy: "I argue for the right of women subjected to abuse," she declares, "to stave off the State from interfering with their decisionmaking around the violence."19 Because state intervention may not incorporate elements of the abusive relationship that may be "positive and strengthening," Johnson contends, it may ultimately damage a woman's ability to control her personal relationships.

Danger assessments, however, are agents of autonomy rather than barriers to it. Understanding the state's

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involvement in DV cases as an "interference" with female autonomy belies the fact that lethality assessments are primarily intended to foster informed decisionmaking and promote independence and self-sufficiency. Indeed, contrary to Johnson's assertions, DV advocates emphasize that risk assessments are valuable and often lifechanging because they enable women to make informed decisions about freeing themselves from their abusers and beginning to seek independence. "I do think the women I work with become empowered by the process [of risk assessment and state intervention]," noted Wendy Berg, a Northampton attorney. "In the end, they're so grateful precisely because they feel like they have their lives back.²⁰

Furthermore, Johnson's contention that state intervention presumes a false consciousness is doubly flawed.²¹ First, Berg characterizes this consciousness differently: rather than understanding risk assessment as the disillusionment of endangered women, Berg instead views it as a means to communicate significant information about risk factors of which most women would have no reason to be aware. "Everything we have in place in terms of restraining orders ... and mandatory custody," Berg pointed out, "enables [women] to be more on their own and to be independent."22 Although Johnson is correct that the state prioritizes homicide prevention in constructing methods of intervention, the independence fostered by risk assessments does not, in all instances, lead to women abandoning potentially lethal relationships. Rather, such independence allows women to exercise the very autonomy and independence Johnson prizes in deciding how they wish to deal with their abusive relationships.

Second, scholars have marshaled powerful empirical data to suggest that the "false consciousness" is not a patronizing barrier to autonomy but instead a severe phenomenon that reflects the powerful reality of abuse. Ruth Jones, in particular, contends that remedies based on the "empowerment model" for which Johnson advocates "do not reflect the variety of battered women's experiences."²³Jones postulates not that

women are incapable of autonomy and independence, but that they require state assistance to realize that autonomy. "Coercively controlled women" are "immobilized by violence," Jones ultimately argues, and for this reason "need a more aggressive state intervention than those provided by empowerment based remedies."24 Jones and Johnson actually agree that the fundamental motive behind state responses to DV ought to be the empowerment of endangered women. Whereas Johnson understands state intervention to perpetuate victim disenfranchisement, Iones recognizes that such intervention can actually restore the independence of women "so controlled by abuse that they have lost their autonomy."25

Finally, although Johnson correctly asserts that endangered women have a liberty interest in making independent relationship decisions, she neglects to analyze the ways in which state-sponsored risk assessments positively affect stereotypes about men, women, and family. Scholars have argued that the history of familial privacy contributed to the state's traditional reluctance to intervene in DV cases.²⁶ Since familial privacy was "valuable yet fragile," it was imperative that the government refrain from interfering in cases of DV. What Elizabeth Pleck labels the "Family Ideal," therefore, has been the "single most consistent barrier to reform against domestic violence." Viewed from this perspective, lethality analyses have helped begin the difficult process of eroding the sacred barriers that separate family from society and limit state intervention in familial abuse. Since it is precisely these stereotypes that contribute to this country's culture of DV, risk assessments are a tremendously valuable means of breaking down the walls that separate lethal abuse from the eyes of those able to recognize and prevent that abuse.

High-Risk Factors: Strangulation as Case Study

Strangulation Defined: "An Ultimate Form of Power and Control."²⁷ Of the high-risk factors recently recognized by DV advocates, strangulation is among the most pervasive and problematic. Often confused with choking or suffocation, strangulation is properly understood as the external compression of the neck that cuts off the victim's airway and can lead to unconsciousness in mere seconds.²⁸ After the victim is unconscious, her brain death can occur within four to five minutes, but paradoxically, many victims display no visible injuries.²⁹ The basic facts are these: Victims of prior strangulation attempts are seven times more likely to become homicide victims.³⁰ Strangulation is one of the best predictors of future homicide,³¹ and is among the most dangerous forms of IP abuse. The odds of becoming a homicide victim increase by 800% after being strangled by an IP. And, finally, as many as 68% of female DV victims have undergone at least one strangulation attempt by their male partners.32

Strangulation as a Mechanism of Abuser Control. Scholars have noted that control is an important element of any dangerousness inquiry, suggesting that advocates investigate "whether the abuser has a controlling nature" to assess how he may react in certain circumstances.33 For this reason, strangulation is important not only as a reliable indicator of future homicide attempts or actual homicides but also as an apt metaphor for the control abusers often exert over their victims. Sponsors of a 2010 New York State strangulation bill³⁴ effectively articulated the charged interface between strangulation and the nature of abuser/victim relations, noting that strangulation "epitomize[s] the power dynamic in most domestic violence cases."35 Furthermore, the sponsors pointed out, such conduct "send[s] a message to the victim that the batterer holds the power to take the victim's life, with little effort, in a short period of time, and in a manner that may leave little evidence of an altercation."36 Fundamentally, as Gael Strack and Casey Gwinn noted, strangulation has a unique tendency to make victims believe they are actually being killed. By allowing perpetrators to keep their victims at the very brink of death, strangulation is an insidious mechanism for perpetuating and magnifying an abuser's control over an endangered woman.

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Next Steps: State Responses to Strangulation Data. In response to increasingly powerful data linking strangulation attempts to homicide, states have begun to elevate strangulation from misdemeanor to felony status in their statutory codes.³⁷ The health consequences of strangulation and the fact that all strangulation attempts could potentially result in death, together make strangulation a logical candidate for high-level prosecution. However, because women's injuries resulting from strangulation attempts may not be adequately or carefully documented and because medical and law enforcement professionals alike are poorly trained in recognizing the aftereffects of strangulation, prosecution of strangulation under more serious rubrics has traditionally been rare.38

Because strangulation is more frequently recognized as a serious crime that frequently foreshadows lethal violence and presents a remarkably high risk of death, an increasing number of strangulation cases are being classified as felonious offenses. Even more ideal, however, would be legislation classifying strangulation as what it really is: attempted homicide. Such a classification would foster a widespread understanding of strangulation as a crime that inherently brings its victims close to death even if it does not actually kill them.³⁹ When employed in conjunction with a coordinated community response system run by teams that respond to high-risk cases as discussed in greater detail elsewhere in this issue, strangulation legislation can become an essential tool for the prevention of future violence.

Conclusion

Before Jean Hosmer's homicide, courthouses in Hampshire and Franklin counties had few mechanisms to protect an endangered woman's safety after potentially inflammatory court proceedings. Before the homicide, no mechanism ensured that the victim and the batterer would be kept apart for any length of time following the grant of a restraining order or the confirmation of a divorce. Furthermore, no support groups had been available for the batterers themselves, who frequently benefit from "venting" their emotions in a healthy, nonviolent way.

After Hosmer's homicide, however, the Hampshire Courthouse began to treat both victims and abusers differently by addressing the above shortcomings. First, victims now tend to remain inside courthouse offices with advocates and at a substantial distance from their abusers.⁴⁰ Furthermore, victims are escorted out of the courthouse while the abuser remains inside, supervised, for 15 to 20 minutes following any potentially instigative ruling.41 Finally, the Men's Resource Center in Amherst, Massachusetts now sends advocates to the Hampshire Courthouse to talk with abusers so they can better confront and deal with their emotions.42 These procedural changes are especially important in cases like Jean Hosmer's, which present an unusually scant amount of warning signs for advocates. "One of the security guards remembered [Bernotas] because he was so friendly," Judge Rainaud noted. "This case seemed to pose absolutely no warning whatsoever."43

These steps, while tremendously significant, may ultimately not be enough. Massachusetts as well as other states across the country must do more than protect victims within courthouses. Instead, states should use the Jeannie Geiger Crisis Center, discussed in this issue beginning on page 35, as a model for the creation of high-risk assessment programs and crisis intervention teams. Only by recognizing, first, that dangerousness assessments empower rather than diminish abused women, and second, that strangulation is just one example of a high-risk factor that can signify the likelihood of future violence, can states begin to create an integrated and holistic system of response to DV cases and honor the memory of Jean Hosmer and others like her.

End Notes

1. Telephone interview with Wendy Berg, Staff Attorney, Families and Children's Unit, Community Legal Aid in Massachusetts (Nov. 20, 2011). Berg has a J.D. from Western New England College School of Law and has been working in the family law and domestic violence fields for nearly two decades.

2. Laurie Loisel, "Advocates Salute Hosmer's

Legacy, 10YearsAfterHerMurder,"TheHampshire Gazette, October 26, 2009. Available at http://www.gazettenet.com/2009/10/26/ advocates-salute-hosmer039s-legacy-10-yearsafter-her-murder?SESSfdfe5574a0daeae7814 5ab3e5a0b4700=gnews

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3. Telephone interview with the Hon. Stephen M. Rainaud, Associate Circuit Justice, Massachusetts Probate and Family Court (Nov. 25, 2011).

4. Diane Rosenfeld, "Law Enforcement Sends Mixed Signals," Chicago Tribune, July 30, 1994, at 19.

5. Diane Rosenfeld, "Correlative Rights and the Boundaries of Freedom: Protecting the Civil Rights of Endangered Women," 43 Harv. Civil Rights-Civil Liberties L. Rev. 257 (2008). 6. Jacquelyn Campbell, http://dangerassessment.org/(last visited Nov. 28, 2011).

7. Dana Harrington Conner, "To Protect or To Serve: Confidentiality, Client Protection, and Domestic Violence," 79 Temp. L. Rev. 877, 918 (2006).

8. See http://dangerassessment.org/About. aspx (last visited Nov. 28, 2011). The Danger Assessment itself is available for download at http://www.dangerassessment.org 9. Id.

10. Jacquelyn Campbell, Daniel Webster & Nancy Glass, 24 Journal of Interpersonal Violence (2009). Available at http://www. dangerassessment.org/uploads/DA_Validation_of_a_Lethal_Risk_Assessment_Instrument-Campbell.pdf.

11. Donna St. George, "Police Tool Assesses Domestic Violence 'Lethality,'" Washington Post, October 2, 2007, at A01.

13. Id.

14. See, e.g., Jan Roehl & Kristin Guertin, "Intimate Partner Violence: The Current Use of Risk Assessments in Sentencing Offenders," 21 Just. Sys. J. 171 (2000) ("Justice officials and judges find the assessment results helpful in making decisions about sentencing and the allocation of scarce resources, and there is anecdotal information of their value in enhancing victim safety"); Janet A. Johnson, Victoria L. Lutz & Neil Websdale, "Death by Intimacy: Risk Factors for Domestic Violence," 20 Pace L. Rev. 263, 280 (2000)("[R]isk assessment provides valuable insight ... in understanding what may contribute to the presence of domestic violence in some cases").

15. Johnson et al., supra note 14, at 267.

16. Roehl et ano., supra note 14.

17. Margaret E. Johnson, "Balancing Liberty, Dignity, and Safety: The Impact of Domestic Violence Lethality Screening," 32 Cardozo L. Rev. 519 (2010).

- 18. Johnson, supra note 17, at 544.
- 19. Id.
- 20. Berg, supra note 1.

21. Johnson, supra note 17, at 556 (noting that society has an "unreflective view of

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^{12.} Id.

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women subjected to domestic violence as suffering from diminished capacity or competence, or, in other words, a false consciousness about the abuse").

22. Berg, supra note 1.

 Ruth Jones, "Guardianship for Coercively Controlled Women: Breaking the Control of the Abuser, 88 Geo. L. J. 605, 627 (2000).
 Johnson *et al., supra* note 14.
 Id.

26. Elizbeth Pleck, "Domestic Tyranny: The Making of Social Policy Against Family Violence From Colonial Times to the Present," in Clare Dalton & Elizabeth Schneider, *Domestic Violence in Social and Historical Context* Ch. 1, pp. 3-13 (1987).

27. Family Justice Center, Strangulation Resources. *Available at* http://www.familyjusticecenter. org/Strangulation-Training/important-facts. html.

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Training

Throughout our interview, Dunne emphasized the importance of training in the early stages of high risk team development. Indeed, without thorough and thoughtful training, high risk teams will likely face communication challenges, differences in goals among team members, and a lack of precision in implementation. As Dunne remarked, "Domestic violence cases exist on a continuum of severity and urgency. There is a difference between a person who exhibits one isolated incident of episodic violence and an offender who has a pattern of control and violence and strangles their partner to unconsciousness." The research has established patterns and indicators that often precede a lethal attack. Developing a response system that is geared towards identifying, documenting and responding to these risk markers is critical to homicide prevention.

Since the Newburyport model is comprised of multidisciplinary partners, an effective training must teach all team members to "speak the same language." In Framingham, where the High Risk Team Model was replicated in 2006, the JGCC stepped in to work with the community for a year, assessing their readiness to implement the model, gaining buy-in from stakeholders, and planning and conducting training. Mary Gianakis, the Executive 28. Gail Strack & Casey Gwinn, "On the Edge of Homicide: Strangulation as a Prelude," 26 Criminal Justice 32 (Fall 2011). 29. Family Justice Center, supra note 27. 30. Strack & Gwinn, supra note 28. 31. Amy Schwartz, "Strangulation and Domestic Violence: Important Changes in new York and Criminal and Domestic Violence Law (Nov. 19, 2010). Available at http://www.empirejustice.org/ issue-areas/domestic-violence/case-laws-statutes/ criminal/strangulation-and-domestic.html. 32. Id. 33. Conner, supra note 7. 34. This bill creates three new crimes: Criminal Obstruction of Breathing or Blood Circulation, Strangulation in the Second Degree, and Strangulation in the First Degree. 35. Schwartz, supra note 31.

36. Id.

37. See, e.g., New York and Tennessee. 38. Jacquelyn Campbell, "Non-Fatal Strangulation Is an Important Risk Factor for

Director of Voices Against Violence, the lead agency in the Framingham High Risk Team, remarked, "For our community, getting the police trained in risk assessment and strangulation was a key element. We saw an immediate improvement in both the initial investigation of domestic violence incidents and the quality of the police reports being generated from those incidents."

While working with multidisciplinary partners can pose challenges Homicide of Women," 35 Journal of Emergency Medicine (2008).

39. Allison Turkel, "And Then He Choked Me": Understanding and Investigating Strangulation, National Center for the Prosecution of Child Abuse (2007).

40. Berg, supra note 1.

41. Id. 42. Id.

43. Rainaud, supra note 3.

Emma Freeman is a second-year student at Harvard Law School from Northampton, MA. Emma holds a B.A. in American Studies from Yale University, where she completed a senior thesis about the intersection of Cold War tropes and reproductive rights. She spent the summer of 2011 at Planned Parenthood Federation of America's Department of Public Policy Litigation and Law. During the summer of 2012 she will work as a law clerk at the ACLU of Massachusetts.

Dunne also pointed to structural expansions that need to occur as the program is expanded outside Massachusetts, including a formal curriculum, a stronger online presence, and opportunities to complete parts of training through the High Risk Team Model's website. The Danger Assessment website, which offers an online training session, may prove helpful in expanding the model.⁸ When asked if a statewide coordinator might be helpful, Dunne was adamant that such a

States should use a "best available technology" standard in selecting their GPS providers for optimal protection and immediate response.

given differences in perspectives and organizational cultures among partners, a shared understanding of dangerousness will enable team members to find common ground when addressing high risk cases. Placing the DV advocacy program in the lead or the co-lead of the team also allows members to find common ground; having a victim-oriented perspective in the forefront of partners' minds ensures that high risk teams do not stray from the goals and methods of the Newburyport model. coordinator would have to come from an advocacy background; she is wary of removing administrative control from advocacy organizations and shifting the focus away from victims in the process.

Implementation

In the High Risk Team Model, information sharing takes the form of monthly meetings, at which the Team manages ongoing cases and takes on new cases. But communication

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extends beyond meetings; the Newburyport team shares information via email and telephone, particularly when an urgent case arises. Constant communication among team members ensures that cases are continuously monitored to enable prompt response to any indication of increased danger. As the Promising Practices Report stated, many teams have an equal focus on offender accountability and victim safety. This focus enables us to move from a victim-blaming posture (of "why doesn't she leave?") toward meaningful accountability for the offender.

Dunne also emphasized the importance of providing local and adequate victim services to high risk victims. The JGCC is structured so that as many services as possible are available in one location. The Center houses lawyers, advocates and therapists and can provide a limited amount of emergency financial assistance and longer term housing. Co-located services ensure that victims can obtain all necessary services in one location, rather than visiting each service individually. Of the 106 high risk cases that the Team has intervened in, 90% of those victims utilized services. Accessing victim services is a protective factor in preventing DV homicides.9

Conclusion

Although the Jeanne Geiger Crisis Center has become a model for

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The Uncertain Future of Connecticut's GPS Legislation

My reflection on Tiana's story ends with a sobering observation. The GPS pilot program, which was advocated so forcefully by Tiana's father, has run out of funding, and the court is no longer taking additional hook-ups (monitoring devices already in place will remain until the orders expire). Thus, despite the program's great success, which led to its being extended for 12 months beyond the initial six month trial period, it will likely be discontinued, unless additional funding can be found for it.²⁸ Alvin Notice told communities in Massachusetts and across the United States, Dunne made clear that there is still work to be done. With regard to law and policy reform, Dunne articulated several goals for the future. First, she hopes that other states will be able to adopt or increase the use of existing pretrial detention statutes similar to Mass. Gen. Law ch. 276 §58A, which permits the Commonwealth to move for a hearing to determine if the defendant is dangerous. If the judge finds the defendant to be dangerous, the defendant can be held for a period of time prior to trial. Dunne emphasized the benefits of statutory discretion to prevent a dangerous defendant's release on bail, as this can be an extremely dangerous time for the victim. She encouraged states to work towards the adoption of similar legislation if they do not already have it.

Second, Dunne hopes that law enforcement will continue to develop policies and practices to conduct risk assessments on scene, documenting this critical information and providing it to prosecution to positively influence the dangerousness hearings discussed above.

Finally, Dunne hopes that Massachusetts and other states will be able to implement more sophisticated GPS technology. States should use a "best available technology" standard in selecting their GPS providers for optimal protection and immediate response. All these factors and people need to work together to produce the systemic change necessary to stop DV homicide. What the Newburyport Team stands for is the proposition that it can.

February/March 2012

End Notes

1. Our interview notes of November 15, 2011 are on file with Professor Diane Rosenfeld.

2. See http://www.youtube.com/watch? v=QvC-4B1VOck for the NNEDV award video. For more information about the Jeanne Geigher Crisis Center, see http://www.jeannegeigercrisiscenter.org

3. More statistics include: At the pre-trial stage, 59% of these 78 cases resulted in defendant incarceration on the basis of dangerousness assessments, and five defendants were placed on GPS monitoring. Most criminal cases (72%) were resolved through guilty pleas, and over 60% of cases resulted in incarceration as part of sentencing. Furthermore, 15 offenders received split sentences which included GPS monitoring upon release.

4. Promising Practices: High Risk Assessment-Mass. Gov. *Available at* www.mass.gov/.../ promising-practices-to-address-dv-3-31-09. doc

 The Guidance Center, "CAB HART." Available at http://www.gcinc.org/pages.asp?p=323&c=18.
 CAB HART Conference, "High Risk Teams: An Innovative Response to the Most Dangerous Cases of Domestic Violence-Challenges, Standards and Growth." Sept. 22, 2011. Notes on file with Professor Diane Rosenfeld.

7. Id.

8. Id.

9. Jacquelyn C. Campbell, ed., Assessing Dangerousness: Violence by Batterers and Child Abuses (2d Edition, Springer Pub., NY: 2007).

me that Speaker Donovan has personally assured him that additional funding will be found for the program, and we at the Clinic sincerely hope that this is the case. Once the new legislative session starts, Alvin Notice will be back on the road, doing everything he can to make sure that the Speaker's promise is delivered.²⁹

In the meantime, though, victims seeking the protection of this program will have to be told that it is unavailable, *because of lack of funding*. This is profoundly distressing. What is at stake here is no less than women's lives, which cannot be subject to bargain. Until Connecticut places this highly successful program squarely within its list of non-negotiables, it, too, will not be able to escape the blame of valuing lives less than money.

End Notes

1. Email from Alvin Notice, President, Tiana Angelique Notice Foundation, to Juhyun Park, Harvard Gender Violence Clinic (Nov. 30, 2011, 21:48 EST) (on file with author. For more information about the Foundation see http://tiananoticefoundation.org/

2. State of Connecticut Office of the Victim Advocate, "Tiana Angelique Notice" 9 [hereinafter OVA Report]. *Available at* http:// www.ct.gov/ova/notice_report_9_24_10.pdf. 3. *Id.* at 9-10.

4. Christine Dempsey, "Jury Hears 911 Call From Tiana Notice," The Hartford Courant,

See TIANA'S STORY, next page

Letter to the Editor

Importance of Protective Order Vacating Husband-Owner From His Home

To the Editor:

Regarding the case note titled "District of Columbia:

Protective Order Properly Vacated Husband From Home Despite His Ownership of Property," 17 **DVR** 6 and 14 (2011), please understand that this comment is not a criticism, merely a highlight of what I look for in commentaries relating to DV cases. Additionally, I have spoken and will again next Friday, at Statewide Family Law Conferences about using the exclusion from home remedies during DV restraining orders and feel like the D.C. court's decision was a leap forward!

I wish that the **DVR** Editor's Note space for this case was used to discuss the DV-related issue in the decision rather than the dissolution related commentary. While separate property is indeed not subject to equitable distribution,* I would like to highlight that this court did a huge service to the DV community by recognizing the intersection of DV and homelessness. Victims often consider availability of shelter or a place to stay before they decide whether to proceed to seek help for the abuse they are suffering. Laws allowing for temporary control and use of common dwelling of family (such as California Family Code (6321) allow for the restraining order process to include protections designed to ensure safety and stability of the victim, and give teeth to a restraining order. Removing barriers to allow escaping from violence helps the DV community to meaningfully assist victims in breaking the cycle. By recognizing that despite the fact that the home may legally be later adjudged as separate property of the husband, the court placed the safety of the victim as paramount and made orders allowing the victim to use the home temporarily so as to ensure her safety and stability. As a practicing Family Law Attorney who routinely represents survivors and has also litigated eviction defense cases, decisions such as the one highlighted here, lay a strong foundation for creating the jurisprudence behind DV laws, that safety and stability of a survivor should be the goal of the courts when hearing a request for a domestic violence restraining order. Sincerely,

Protima Pandey, Staff Attorney Bay Area Legal Aid San Mateo County Regional Office 539 Middlefield Road Redwood City, CA 94063 PPandey@baylegal.org

*Editor's Note: It is true that in California and all other community property states that separate property is not subject to equitable distribution. However, in a minority of equitable division states, such as Massachusetts, courts can equitably divide separate property as part of a divorce judgment.

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October 15, 2011. Available at http://articles. courant.com/2011-10-14/news/hc-carter-notice-trial-1015-20111014_1_pt-cruiser-tiananotice-alvin-notice.

5. Joshua Kovner, "Domestic Violence: A New Vigilance, The Hartford Courant, July 18, 2010. Available at http://www.courant. com/news/domestic-violence/hc-domesticviolence-this-0718-20100717,0,6628116.story 6. David Owens & Christine Dempsey, "Desperate Pleas for Help," The Hartford Courant, June 30, 2009. Available at http://www.courant. com/news/domestic-violence/hc-domesticviolence-archive-morrin-063009,0,4135604. story

Overcoming Battered Lives, November 28, 2011, 12:50 p.m. Available at http://blogs.courant.com/overcoming_battered_lives/
 "In the News: Domestic Violence," The Hartford Courant. Available at http://articles.courant.com/keyword/domestic-violence
 Telephone interview with Linda Blozie, Director of Public Affairs, Connecticut Coalition Against Domestic Violence, November 28, 2011 [hereinafter Blozie Interview].
 Id.

11. Far-Reaching Domestic Violence Bill Signed Into Law, Fox CT. Available at http:// www.ctnow.com/videobeta/9e81d196-8216-478e-bd91-6bca4190fc4b/News?Fox-CT-Domestic-Violence-8-9

12. "Progress Against Domestic Violence," *Domestic Violence*, June 17, 2011. *Available at* http://www.housedems.ct.gov/DV_PR_2011-06-17.html

- 13. Blozie Interview, supra note 9.
- 14. Id.
- 15. Id.

16. Telephone interview with Alvin Notice, President, Tiana Angelique notice Foundation, November 29, 2011 [hereinafter Notice Interview].

- 17. Blozie Interview, supra note 9.
- 18. Notice interview, supra note 16.
- 19. Id.

20. Christine Dempsey, "Domestic Violence Victim's Father helps Others by Buying, Installing Cameras," The Hartford Courant, December 10, 2010. Available at http:// articles.courant.com/2010-12-10/news/ hc-domestic-violence-cameras-1129-2-1-1129_1_ cameras-alvin-notice-state-victim-advocate.

21. Not all of the blunders mentioned in the beginning of this article were committed by the

Plainville Police. The officers who told Tiana that they could not validate her restraining order, and that the office was understaffed, were from the Waterbury Police Department. See OVA Report, supra note 4 at 6, 9.

22. Thurman v. City of Torrington, 595 F. Supp. 1521 (D. Conn. 1984).

23. Deborah Geigis, "Tracey Thurman Motuzick," The Hartford Courant, March 15, 1992. Available at http://articles.courant. com/1992-03-15/news/0000204455_1_ domestic-violence-domestic-abuse-familyviolence-prevention.

 Castle Rock v. Gonzales, 545 U.S. 748 (2005).
 Lenihan v. U.S., Case 12.626, Inter-Am. Comm'n H.R., Report No. 80/11, & 177 (2011).
 Id. at p. 5.

27. See, e.g., Castle Rock, supra note 24 at 766, in which the Court says that even had Colorado created an entitlement to enforcement of protective orders, such a right would not be protected under the Due Process Clause because the right lacked an "ascertainable monetary value."

28. Telephone interview with Stephen Grant, Director, Court Support Services, State of Connecticut Judicial Branch, November 28, 2011.
29. Notice Interview, *supra* note 16.

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DOMESTIC VIOLENCE REPORT

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September 23, 2011, and in the next ten weeks Portugal applied this technology to more than 50 cases. When the offender gets closer to the victim, an alarm goes off both in a "pager" held by the victim and at a specific department at the Ministry of Justice, which is responsible for informing the police. the Maria da Penha Law demands a local regulation by each of the 27 states. Many states have already passed their laws and implemented important changes in their legal structure (*e.g.*, they designed special courts and police departments to deal with DV). In January 2012, the Brazilian state of Minas Gerais will be the first to implement a structured electronic monitoring program with

While the use of GPS to monitor domestic violence perpetrators is still very new in the U.S., it is encouraging to see that it is beginning to be used in other places.

Brazil

Federal Law 11.340 (from August 7, 2006), also known as the Maria da Penha Law, in reference to a Brazilian woman who became paraplegic after her husband twice tried to kill her, is considered a landmark achievement of the women's rights movement in Brazil. It sets the directives and general norms to combat violence against women in the country. Because Brazil is a federalist state, the application of GPS technology to track offenders and improve the protection of women. Other Brazilian states (*e.g.*, Rio Grande do Sul) are in the process of implementing similar electronic monitoring programs. An important civil society organization (the Maria da Penha Observatory) supports and follows the implementation of the law by each of the states, and publicizes and shares information on successful experiences.

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