

# Domestic Violence High Risk Teams

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2021 STATEWIDE REPORT

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INDIVIDUALLY WE POWER CHANGE.  
TOGETHER WE POWER A MOVEMENT.

# Contents

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<b>3</b>	<b>Overview</b>	
4	About TCFV	
4	The Evolution of DVHRT	
<b>5</b>	<b>Methodology</b>	
<b>6</b>	<b>Findings and Data Analysis</b>	
7	Risk Assessments	
<b>8</b>	<b>Demographics and Findings</b>	
8	Origins of DVHRT Cases	
9	Offender Demographics	
9	Victim Demographics	
10	DVHRT Victim and Offender Age Comparisons	
11	Relationship Status	
12	Length of the Relationship	
12	Reported Offenses	
13	Reported Method(s) of Assault	
13	Other High-Risk Indicators of Violence	
14	Recidivism	
14	Urgent Health Supports	
15	Strangulation	
16	Firearms	
17	Protective Orders/ Condition of Bonds	
17	Other Lethality Indicators Observed	
<b>18</b>	<b>Limitations of the Study</b>	
<b>19</b>	<b>Success Stories</b>	
19	Abilene, Texas	
20	Bexar County	
21	Brazos County	
21	Fort Bend County	
22	Grayson County	
23	Hays County	
23	Wilbarger County	

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*TCFV thanks all the Domestic Violence High Risk Team sites who stand with survivors and contributed data to this report. The data analysis was completed by Dr. David Scott.*

# Overview

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1,600 people were murdered by their intimate partners in Texas in the last ten years, according to the Texas Council on Family Violence’s (TCFV) Honoring Texas Victims reports.<sup>1</sup> Domestic Violence High Risk Teams (DVHRT) are one method focused on preventing these fatalities by identifying survivors at high risk for future homicide. Through the DVHRT, high-risk survivors get enhanced support from law enforcement, advocates, prosecutors, and others. This wrap-around model holds offenders accountable and is a trauma-informed approach to maximize victim safety. The purpose of the DVHRT efforts undertaken by TCFV is to develop and provide statewide support for the implementation and maintenance of DVHRT teams in various locations statewide.

To support this goal, TCFV works with our statewide funders, the Office of the Attorney General, and the Criminal Justice Division at the Office of the Governor, to award small grants to local community entities. Through these funds, the DVHRT sites aim to promote an effective coordinated community response to high-risk domestic violence cases. These teams focus on victim safety by identifying domestic violence victims at severe risk for further violence or lethality (risk of future homicide). The project calls for collaboration between all partners involved in each stage of a high-risk domestic violence investigation, including case management, investigation, prosecution, and offender monitoring, with a high emphasis on survivor safety, privacy, and autonomy.

The DVHRT concept also requires collaboration among the local family violence program, law enforcement, prosecutors, and other member agencies to ensure an effective, comprehensive response to family violence. As DVHRT is designed to support survivor safety, TCFV

**Our work focuses on reducing or preventing domestic violence incidents and providing supportive services to victims.**

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<sup>1</sup> Honoring Texas Victims (2020). Texas Council on Family Violence.

emphasizes transparency of information with the victim and asks each team to design their model on the knowledge that the victim is the expert on their own safety and a partner in all aspects of information sharing and safety planning.

A component of this work is analyzing de-identified case data to allow TCFV, and its DVHRT partner sites, to stay focused on the goal of prevention of future violence and fatalities. We offer the data in this report to allow communities to understand the risk factors present in domestic violence cases associated with high lethality and to promote the incorporation of these findings into practice among existing Teams.

TCFV offers this data with strong thanks to the funders mentioned above and our DVHRT partner sites. We also offer this with a deep respect for the survivors who have experienced violence in their homes and sought or received support from a DVHRT. We stand with them in a commitment to using this data to create a safer Texas for them and all survivors.

## About TCFV

TCFV is the statewide coalition in Texas of family violence service providers and allied professionals working to **promote safe and healthy relationships** by supporting service providers, facilitating strategic prevention efforts, and creating opportunities for freedom from family violence. TCFV is a membership organization made strong by the **100 family violence programs**, and **over 1,000 individual members** are professionals from supporting organizations and businesses, survivors of family violence, and other concerned citizens who stand with us in our mission.

## The Evolution of DVHRT

Since TCFV launched the DVHRT program, the DVHRT Coordinators and their Teams have taken strides to continuously assess what factors indicate that offenders pose an elevated risk of homicide in domestic violence cases. All DVHRT sites have consistently coordinated local agencies and resources to support victims and hold offenders accountable. As the program has grown, we have increased additional support, such as training for law enforcement on implementing a risk assessment tool to be used in the field and an understanding of trauma-informed investigations and response when working with a victim at high risk of future homicide. Furthermore, the courts and prosecutors' offices have gained an increased awareness of the inherent dangers a victim is facing in a relationship with an offender at high risk of committing homicide. In 2021, TCFV gave increased attention to conditions of bond requirements, removing firearms from offenders when they are prohibited possessors, and maximizing the use of protective orders to foster victim safety and recovery efforts.

# Methodology

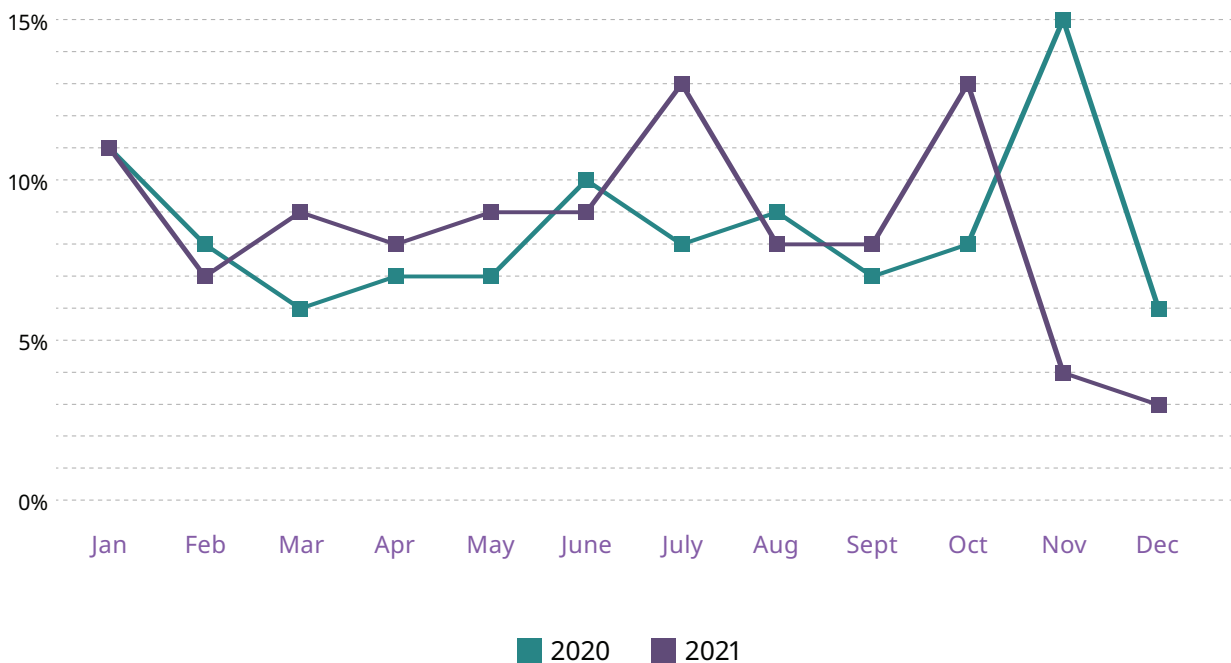
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Teams focus on domestic violence cases with the highest potential for lethality in a particular jurisdiction. The DVHRT method uses a team approach to maximize all available resources to a victim while providing real-time attention to an offender's behavior. For this report, the data collected (n = 470) reflects cases from January 1, 2021, to December 31, 2021, unless otherwise indicated. Each month, the DVHRT Coordinators share information with TCFV about dynamics, offenses, and outcomes. This data is analyzed by TCFV on an ongoing basis to help determine best practices for DVHRT sites. Each year, the DVHRT sites and TCFV are better equipped through this data to determine high-risk domestic violence factors among Texan survivors and how to combat domestic violence more effectively using local and state resources. All relevant data submitted adheres to privacy and confidentiality laws and TCFV collects general demographic information, the reported offenses in official reports, the existence of protective orders, the methods of assault, services provided through the DVHRT, and other general information that this report will discuss.

# Findings and Data Analysis

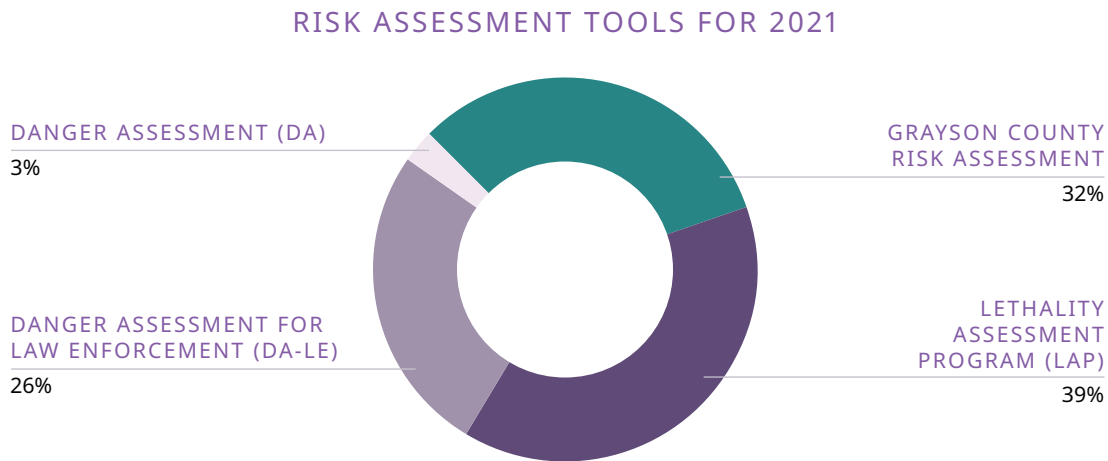
In 2021, there were 470 reported victims and high-risk offenders to DVHRT sites funded by TCFV. This represents an increase of 34% in 2021 from the 351 reported cases in 2020. The increase in high-risk instances was due to funding new sites: Bexar County, Abilene, and Stephenville. Existing sites such as Harris County, Fort Bend County, Wilbarger County, and Grayson County continued their DVHRT work and reported client increases during the pan-demic. These findings are consistent with increases in reporting to law enforcement. This report highlights the findings of DVHRT sites in 2021 and concludes with success stories from those sites. Below is a comparison of the monthly reports received in 2020 and 2021.

MONTHLY COMPARISON OF REPORTED HIGH-RISK INCIDENTS : 2020 VS 2021



## Risk Assessments

A primary feature of DVHRT sites is the use of a risk assessment. These tools help ascertain lethality and allow Teams to triage support and services. The four DVHRT risk assessment tools chosen by the funded sites were: the Danger Assessment (DA); the Danger Assessment for Law Enforcement (DA-LE); the Lethality Assessment Program (LAP); and a hybrid model that Grayson County, Texas adopted.



The DA was developed by Dr. Jacquelyn Campbell to be used by the survivor in collaboration with a social worker, advocate, or health care provider.<sup>2</sup> The DA includes a calendar activity and 20 items, 19 predictive of intimate partner homicide.<sup>3</sup> The DA-LE Jeanne Geiger Crisis Center, in collaboration with Dr. Campbell and Dr. Jill Messing, is a shortened form of the DA and has 11 risk questions that law enforcement asks at the scene of a domestic violence incident.<sup>4,5</sup> The Maryland Network Against Domestic Violence (MNDV) developed the LAP in collaboration with Dr. Campbell. The LAP is a short version of Campbell's Danger Assessment (DA) and is administered in the field by law enforcement<sup>6</sup> (Anderson et al., 2021). The Grayson County Crisis Center developed a short report screening measure to be used by law enforcement on first contact with a survivor to identify high lethality or potential homicide indicators. The figure above shows the breakdown of the use of these tools across sites.

2 Messing, J., & Campbell J., Dunne, K., & Dubus, S. (2020). Developing and testing of the danger assessment for law enforcement (DA-LE). *National Association of Social Workers* 143-156. doi: 10.1093/swr/svaa005

3 *Id.*

4 "Domestic Violence Homicide Prevention: The Geiger Institute." *The Geiger Institute*, <https://geigerinstitute.org/>.

5 *Id.*

6 Anderson, K., Bryan, H., Martinez, Al., & Huston, B.(2021). Examining the relationship between the lethality assessment/domestic violence high-risk team monitoring (LAP/DVHRT) program and prosecution outcomes. *Journal of Interpersonal Violence*, 1-24. doi: 10.1177/08862605211028325

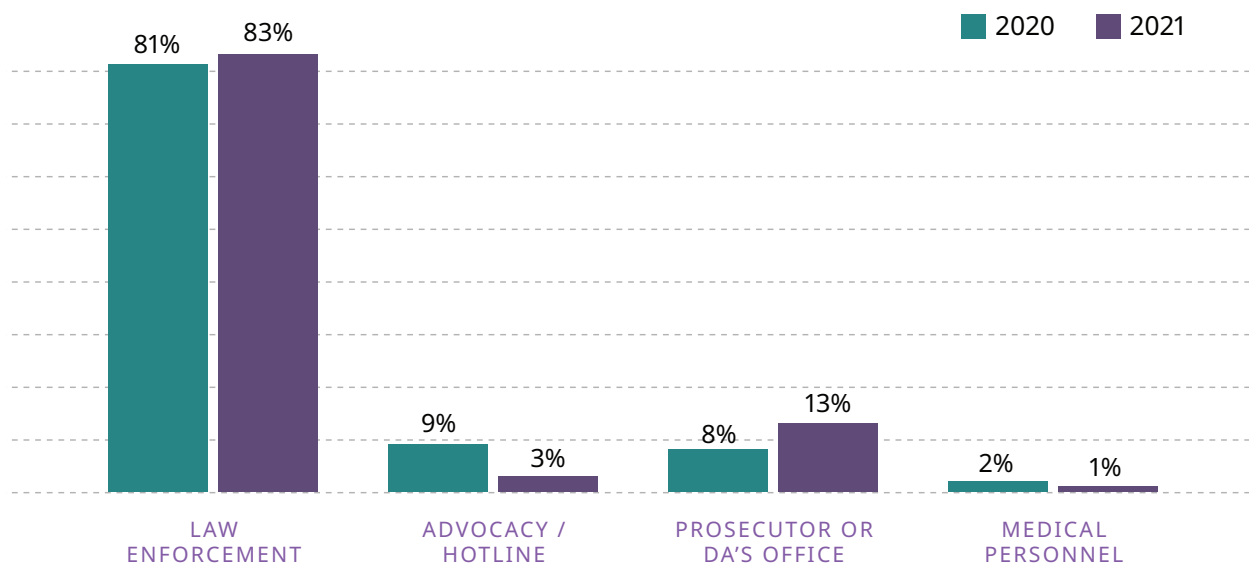
# Demographics and Findings

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## Origins of DVHRT Cases

The vast majority of cases reported to a DVHRT in 2021 came from law enforcement, with 392 (83%) generated from officers and deputies who were dispatched to calls involving domestic violence. This number increased by two percent in 2021. There were 60 DVHRT cases (13%) sent to DVHRT sites from the prosecutors' offices. This number increased from the previous year by five percent. Fourteen cases (3%) originated from either a domestic violence hotline call or a local advocacy group. This was a decrease from 2020, when cases presented to the DVHRT from a hotline or local advocacy group were at 9% for the year.

ORIGINS OF DVHRT CASES : 2020 VS 2021





## Offender Demographics

### GENDERS

- » 424 (90%) were identified as male.
- » 31 (7%) were identified as female.
- » 15 (3%) were reported as unknown or not reported to the DVHRT.

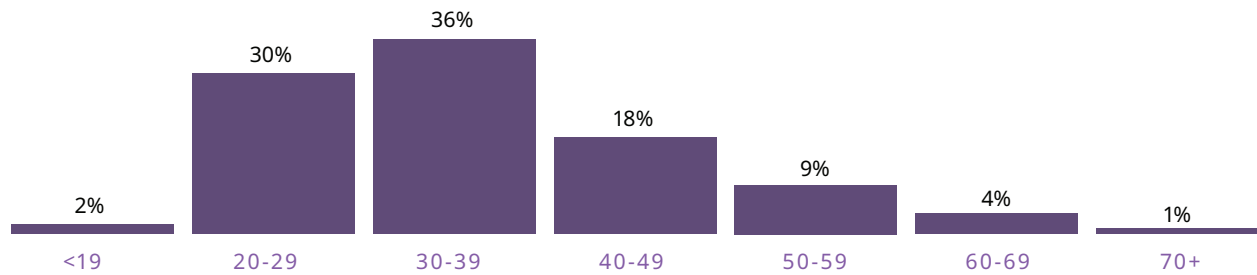
### AGES

- » The offender's age range for 2021 within the DVHRT reported a mean average age of 36.7 years.

### RACES AND ETHNICITIES

- » 298 (63%) were identified as White/Caucasian.
- » 107 (23%) were identified as Black/African American.
- » 57 (12%) were identified as Native Hawaiian or Pacific Islander.
- » Eight (2%) were not identified by race or ethnicity in the data.

OFFENDER AGES : 2021



## Victim Demographics

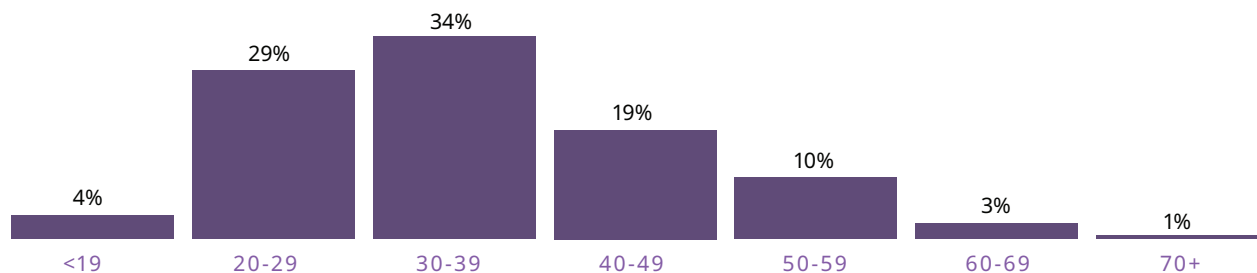
### GENDERS

- » There were 445 (95%) female victims in 2021.
- » There were 23 (5%) male victims identified in 2021.

### AGES

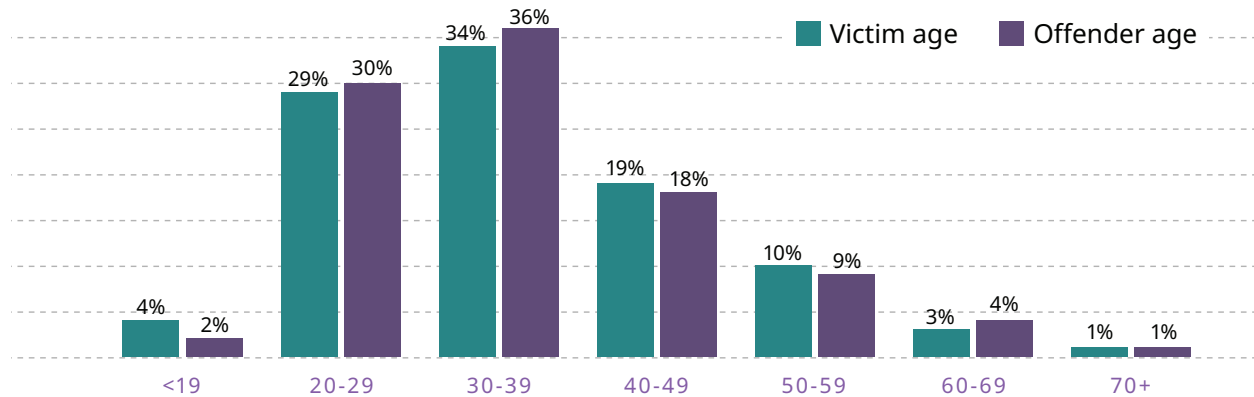
- » The average age of the victims was 37 years old.

VICTIM AGES : 2021



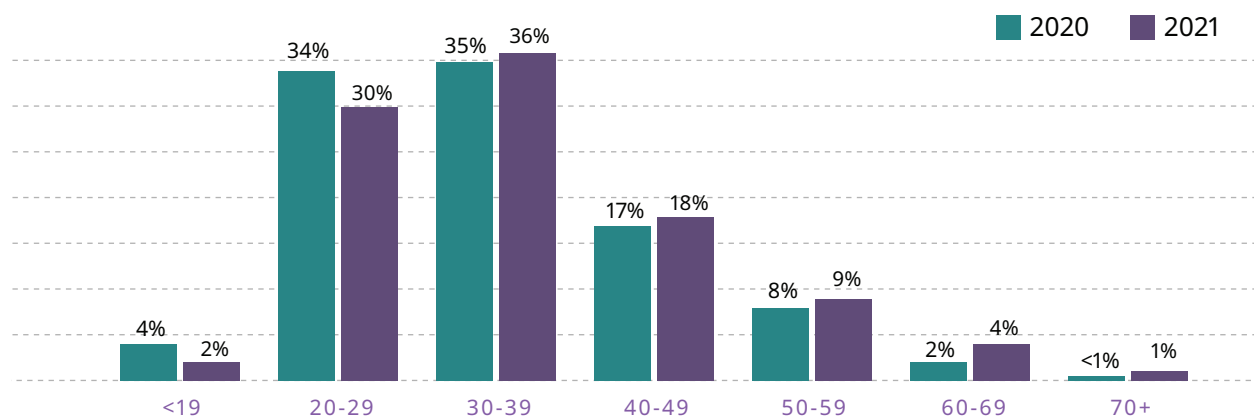
## DVHRT Victim and Offender Age Comparisons

VICTIM AND OFFENDER AGE RANGE COMPARISON : 2021



The figure below shows the offenders' age ranges for 2020 and 2021 that were compared for this report. For those offenders identified as 19 years old or younger, there was a two percent decrease from 2020 to 2021. There was a four percent decrease for the age range of 20-29 years old, from 34% in 2020 to 30% in 2021. There was a one percent increase in the offenders' age ranges for 30-39 years old (36%) and 40-49 years old (18%). In the age category of 50-59 years old, there was a one percent increase from 2020 (8%) to 2021 (9%). A reported rise of two percent occurred in the 60-69 age category. There was negligible change between 2020 and 2021 for offenders identified as 70 or older.

OFFENDER AGE RANGE COMPARISON : 2020 VS 2021

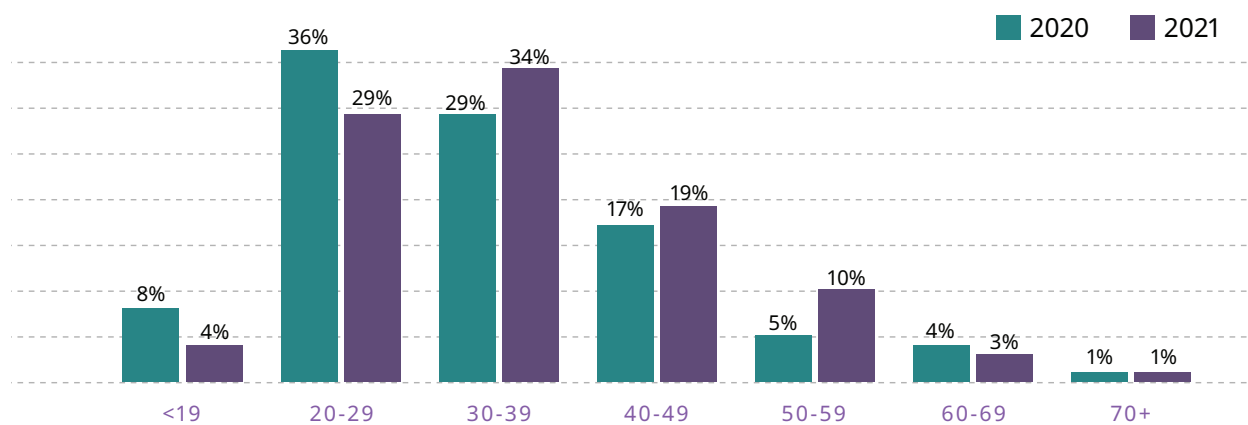


DVHRT sites reported a four percent decrease in victims aged 19 or younger between 2020 and 2021. There was a seven percent decrease in victims aged 20-29 between 2020 and 2021. Interestingly, there was a five percent increase in the 30-39 age range. The 40-49 age range showed a two percent increase, while the 50-59 age range revealed a five percent increase.

The 60-69 reported a slight decrease of one percent between 2020 and 2021. Similar to the offender age range, approximately one percent of all victims in 2020 and 2021 were reported as age 70 or older.

Some working theories regarding the decrease in the 19 and younger category and 20-29 category could be attributed to the closures of schools and universities during the pandemic. Conversely, the increase in the 30-39 and 40-49 age categories could represent married and/or cohabitating couples. The stay-at-home orders may have increased the stressors at home, which exacerbated risk and safety concerns. Contact with supportive friends, family, and co-workers was limited, and economic hardship compounded the power and coercive control already present in abusive relationships. Many Texans faced additional barriers to childcare, reduced working hours, and increased health risks. These issues may have prevented survivors from accessing support earlier in abusive relationships.

VICTIM AGE RANGE COMPARISON : 2020 VS 2021



### Relationship Status

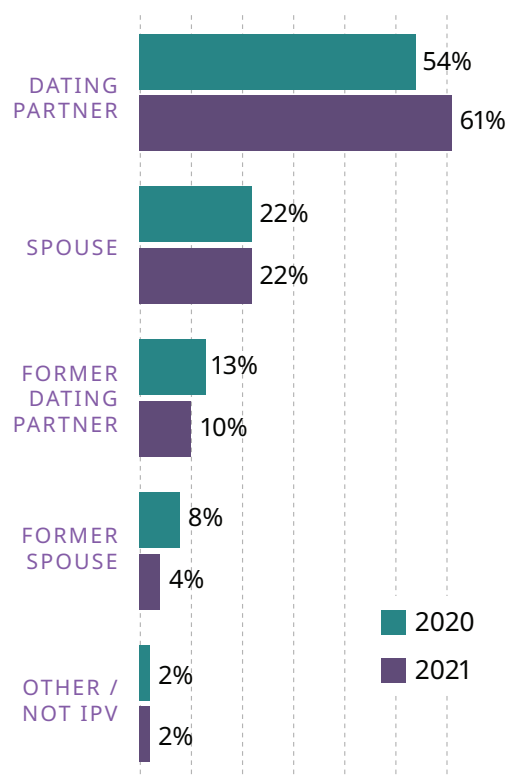
As the severity of violence often grows for survivors seeking to leave an abusive relationship, TCFV examined the type and duration of relationships. There was a two percent increase in victims that identified the offender as a spouse but a three percent decrease in victims that identified the offender as a former spouse. While two percent fewer victims reported that the offender was a former dating partner, 13% more victims reported that the offender was a current dating partner. There were no significant changes in the “other or not IPV (Intimate Partner Violence)” category from 2020 to 2021.

## Length of the Relationship

Each DVHRT site reported the length of the relationship at the time of the assault.

Eight percent of the victims reported being in a relationship with the offender for less than a year. The highest category for 2021 was the 1–5-year range, in which 15% was reported. This is a nine percent increase from 2020. In the 6–10-year range, five percent of victims reported being assaulted, representing a three percent increase from the previous year. Three percent of victims were in the 16–20-year category, while no victims were reported in this category in 2020. There were three categories (21–25, 26–30, and 31 or more years) that each reported one percent respectively, while no victims reported in these three categories in 2020.

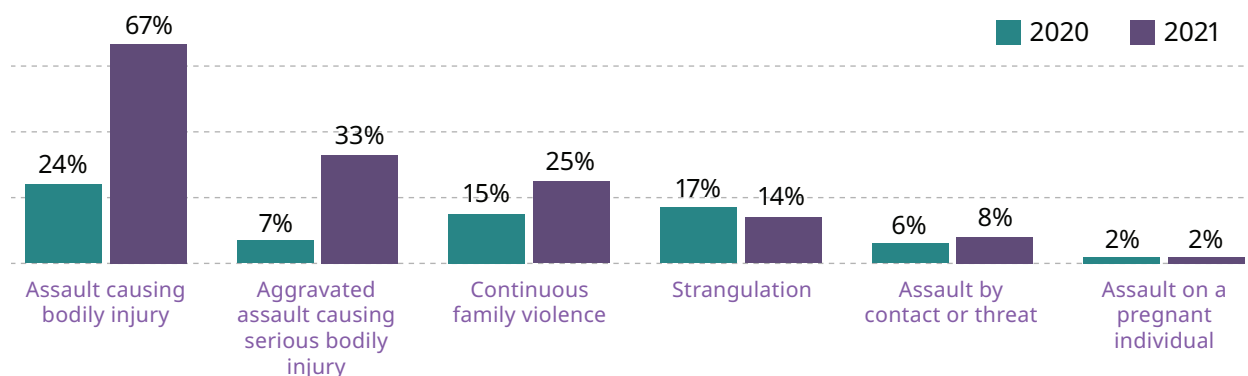
REPORTED TYPES OF RELATIONSHIPS : 2020 VS 2021



## Reported Offenses

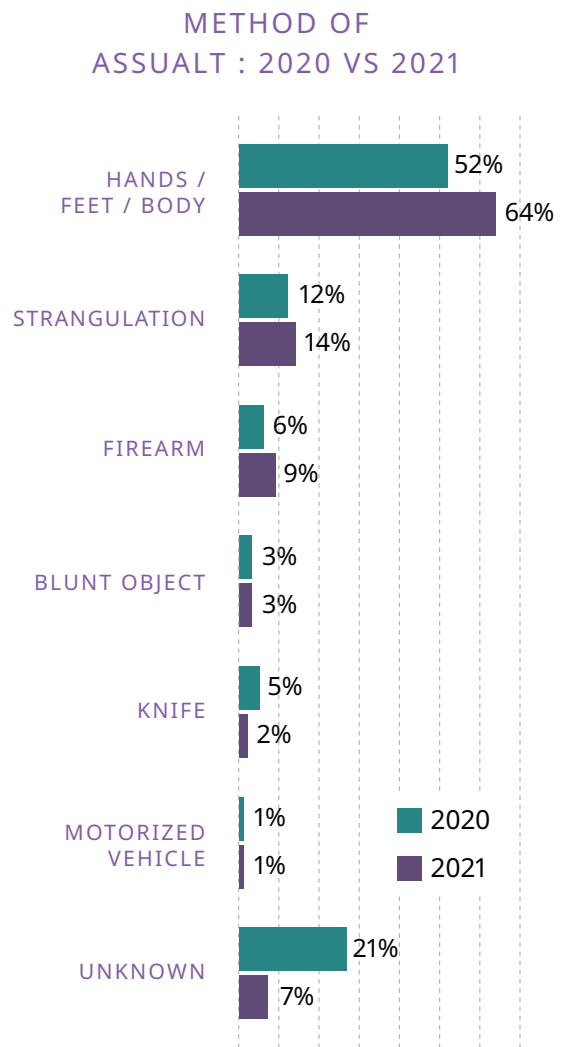
The reported offenses are an essential data measure, as they support a more comprehensive response to survivor safety and allow criminal legal system partners to hold an abusive partner accountable. Below are the reported offenses for 2021. Assault causing bodily injury increased significantly in 2021 to the most-reported offense, with a 43% increase from 2020 to 2021. Aggravated assault causing severe bodily injury similarly rose, with almost five times as many reports in 2021 as in 2020. Ongoing family violence was again the third most reported offense, with a 10% increase in reports. Strangulation increased by three percent but dropped to the fourth most reported offense.

REPORTED CRIMINAL OFFENSES : 2020 VS 2021



## Reported Method(s) of Assault

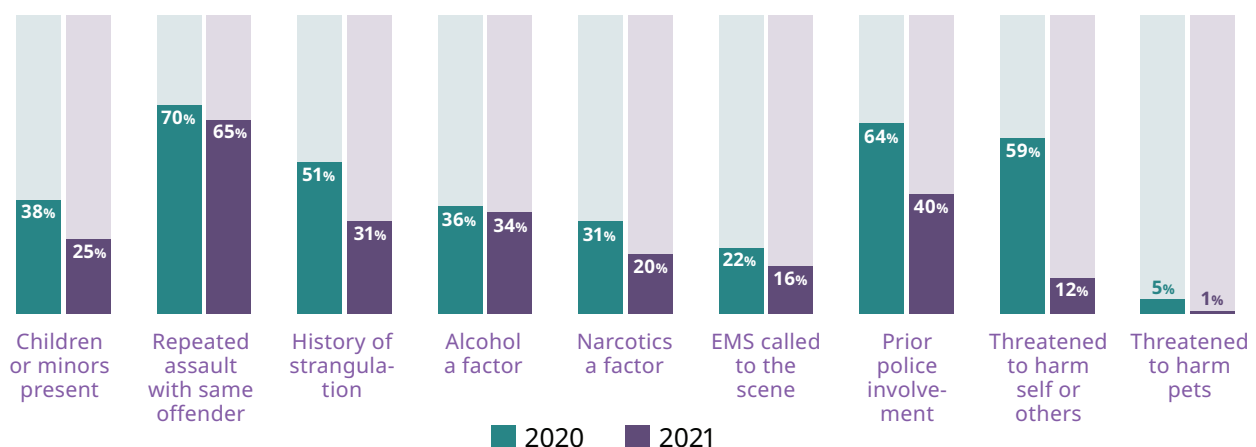
TCFV continues to study the methods and analyze how high-risk assaults occurred during this reporting period. The highest category of assaultive behavior was the offender attacking the victim using hands, feet, or the body. Strangulation was the second-highest reported method of attack, showing a two percent increase from the previous year. In nine percent of the cases, the victims reported that the offender used or pointed a firearm at the victim. Three percent of the victims were attacked with some blunt object (object with no sharp edges). A knife or sharp-edged weapon was used in two percent of the cases submitted to the DVHRT sites. One percent of the reported assaults stated that a motorized vehicle was used as a weapon, and seven percent of the assaults were listed as unknown or not reported.



## Other High-Risk Indicators of Violence

Like 2020, the DVHRT sites in 2021 continued to seek out and develop best practices in identifying indicators or patterns of abuse of high-risk domestic violence. Additional questions were asked of the DVHRT sites to better understand behaviors present in high-risk cases:

OTHER INDICATORS OF HIGH-RISK DOMESTIC VIOLENCE : 2020 VS 2021



## Recidivism

In 2021, 65% of the victims reported that the same offender repeatedly assaulted them or recidivated. This aligns with TCFV's DVHRT 2020 study, which indicated that 70% of domestic violence offenders abuse their victims again, even after a warning from authorities or after a protective order was issued.<sup>7</sup> This shows that repeated violence is an indicator of future lethality.

It is crucial to understand that when domestic violence reoccurs, the lethality risk to the victim increases. High-risk offenders should be evaluated differently from other offenders who may recidivate. A national study found an overall recidivism rate of 30.3%, and results show that the risk of recidivism is 45% lower for men who experienced two legal sanctions (arrest and probation) than men who experienced one legal sanction (civil protective order).<sup>8</sup>

## Urgent Health Supports

Intersections with health care providers is another important intersection to examine and incidents of EMS (Emergency Medical Services) or medical services being called to a domestic violence scene due to injury or a request for patient evaluation of the victim were only reported in 16% of the cases. This number is considerably low for high-risk victims who suffer serious bodily injury or strangulation.

A 2016 study reported that 403 EMS respondents indicated that they frequently encounter patients who disclose domestic violence—45% believed that if a victim does not disclose abuse, there is little they can do to help, and 32% to 43% reported assumptions and attitudes that indicated beliefs that victims are responsible for the abuse.<sup>9</sup> With these correlations in mind, it is important to note there is no law requiring EMS services to a scene when high lethality occurs. Many police and sheriffs' offices have policies or protocols on when EMS is called to the scene to evaluate a victim. In most cases, whether to call EMS is often left to the responding officer's discretion at the time of contact with a victim.

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7 Martin, F. (2021). Most Texas Abusers reoffend after legal warning or protective, a new report says. Houston Public Media. <https://www.houstonpublicmedia.org/articles/news/health-science/2021/09/27/409422/texas-domestic-violence-report-most-abusers-reoffend-after-legal-warning-or-protective-order/>

8 Cosimo, D. (2011) Domestic Violence: Legal sanctions and recidivism rates among male perpetrators. LFB Scholarly Publishing. ISBN: 978-1-59332-488-9

9 Donnelly EA, Oehme K, Melvin R. What do EMS personnel think about domestic violence? An exploration of attitudes and experiences after participation in training. J Forensic Leg Med. 2016 Feb;38:64-9. doi: 10.1016/j.jflm.2015.11.020. Epub 2015 Dec 11. PMID: 26708351.

## Strangulation

In the United States, strangulation is the cause of death for an estimated 10%-19% of women and 1%-9% of men.<sup>10</sup> Strangulation and asphyxiation are known to be leading indicators of future lethality; research shows that the presence of strangulation increases the odds of being a homicide victim by over 750%. Strangulation or asphyxiation are escalated forms of violence because both indicate that other, less lethal forms are no longer working. Research has reported that 43% of women killed by an intimate partner were within one year of a non-fatal strangulation incident.<sup>11</sup> Strangulation causes physical and psychological trauma to survivors and can result in ongoing medical conditions, including traumatic brain injuries and post-traumatic stress disorder.<sup>12</sup> Strangulation is “external pressure placed on the neck, such that there is a reduction of blood flow through the brain, or constriction of breathing through the airway in the throat.”<sup>13</sup> There are four common types of strangulation: strangulation, suffocation, aquatic assault, and positional asphyxiation.

In 2021, there were 64 reported incidents in which authorities reported strangulation as the primary criminal offense.

» 32 (10%) survivors reported the abuser using strangulation (manual or ligature strangulation) during the assault.

» 64 (14%) of the total DVHRT survivors for 2021 reported that there had been a history of strangulation in the abusive relationship prior to DVHRT involvement.

In 2021, the DVHRT sites reported that 13 (3%) of the strangulation survivors required hospitalization. During that same period, DVHRT sites reported that 19 (4%) of the strangulation survivors received Emergency Medical Services at the time of the incident. The ability of the offender to engage in less “visible” forms of strangulation (at least to the untrained first responder) may allow him to continue this pattern of coercion and control for longer than offenders who engage in more apparent forms of manual strangulation.<sup>14</sup> The effects of strangulation are often minimized or overlooked by victims and responding professionals alike, especially since over half of strangulation victims show no external physical signs.<sup>15</sup> Strangu-

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10 Sorenson, S., Joshi, M., & Sivitz, E. (2014). A systematic review of the epidemiology of nonfatal strangulation, a human rights and health concern. *American Journal of Health*, 104(11), e54-61. <http://doi.org/10.2105/AJPH.2014.302191>

11 Strack, G. B., & Gwinn, C. (2011). On the edge of homicide: Strangulation as a prelude. *Crim. Just.*, 26, 32.

12 Douglas, H., & Fitzgerald, R. (2014). Strangulation, domestic violence and the legal response. *Sydney L. Rev.*, 36, 231.

13 Glass, N., Laughon, K., Campbell, J., Wolf Chair, A. D., Block, C. R., Hanson, G., ... Taliaferro, E. (2008).

Non-fatal strangulation is an important risk factor for homicide of women. *Journal of Emergency Medicine*, 35(3), 329-335

14 Pritchard, Reckdenwald, Nordham, Holton, (2018), Improving identification of strangulation injuries in domestic violence: Pilot data from a researcher-practitioner collaboration. *Feminist Criminology*. <https://doi.org/10.1177%2F1557085116653181>

15 Volochinsky, B. P. (2012). Obtaining Justice for Victims of Strangulation in Domestic Violence: Evidence Based Prosecution and Strangulation-Specific Training. *Inquiries Journal*, 4(10).

lation, however, can result in the loss of consciousness within seconds and brain death within minutes.<sup>16</sup> Women who survive strangulation by an intimate partner are at increased risk of being killed by that intimate partner and developing severe physical and psychological problems immediately following the assault and over time.<sup>17</sup> When asked about being strangled or “choked” during the relationship, 31% of the victims reported a history of being strangled by the offender.

## Firearms

Firearm violence is a significant public health problem in the United States.<sup>18</sup> In domestic violence cases, a firearm does not have to be shot to indicate a raised risk of lethality. When an abuser uses a firearm, they are 41 times more likely to kill the victim in a later incident of abuse.<sup>19</sup>

In 2020, TCFV’s Honoring Texas Victims report showed that of 228 intimate partner homicides in Texas, 120 (67%) were killed with a firearm.<sup>21</sup> In a study by Rothman et al. (2005), the authors reported that batterers who had owned guns in the three years prior reported higher rates of using or threatening the use of a gun than those who did not own guns.<sup>22</sup> The literature suggests that violent intimate partners with access to firearms engage in more severe domestic violence than those without.<sup>23</sup>

**The mere presence of a gun or firearm in a domestic violence incident increases the risk of homicide by as much as 500%.<sup>20</sup>**

In 2021, there was a three percent increase from 2020 in reports of firearms being used during DVHRT cases. Additionally, DVHRT sites reported that 17 (12%) of the offenders were reported to have access to firearms or possession of firearms.

This year, TCFV has embarked on a firearm transfer protocol pilot supported by modest funds in a North Texas county. DVHRT sites have identified firearms use in domestic violence as a

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16 Thomas, K., Joshi, M., & Sorenson, S. (2014). Do you know what it feels like to drown?: Strangulation as coercive control in intimate relationships. *Psychology of Women Quarterly*, 38(1), 124-137. doi: 10.1177/0361684313488354

17 *Id.*

18 Pomeranz, J. & Ochoa, G. (2021). Firearm extreme risk protection order laws and preemption: New developments and outstanding issues, 50 states, 2020, *American Journal of Preventive Medicine*. 61(3): 455-460.

19 Campbell, Jacquelyn C et al. “Risk factors for femicide in abusive relationships: results from a multisite case control study.” *American journal of public health* vol. 93,7 (2003): 1089-97. doi:10.2105/ajph.93.7.1089

20 *Id.*

21 Honoring Texas Victims (2020). Texas Council on Family Violence.

22 Rothman, E., Hemenway, D., Miller, M., & Azrael, D. (2005). Batters’ use of guns to threaten intimate partners. *Journal of the American Medical Women’s Association*, 60, 62-68.

23 Zeoli, A., Frattaroli, S., Roskam, K., & Herrera, A. (2019). Removing firearms from those prohibited from possession by domestic violence restraining orders: A survey and analysis of state laws. *Trauma, Violence, & Abuse*. 20(1) 114-125. Doi: 10.1177/1524838017692384



rising problem, as TCFV has similarly seen in the Honoring Texas Victims report. TCFV hopes to empower Teams to identify solutions that work for their specific jurisdictions and decrease the use of firearms in domestic violence cases.

### **Protective Orders/Condition of Bonds**

In 2021, 17 (12%) of victims reported an order of protection or a condition of bond on file with law enforcement prior to the incident. 159 (37%) survivors reported that an order of protection or condition of the bond was filed after the incident occurred. Furthermore, 108 (23%) of the offenders recidivate against their victims, regardless of whether there was a protective order or a condition of bond prohibiting contact with the victim or protected persons filed or not. Orders of protection or bond conditions are specifically designed to protect the victim, especially after an offender is released from jail. When the offender or violator ignores an order of protection or condition of the bond, this is a strong indicator of high lethality. At this point, the DVHRT and law enforcement coordinate their efforts to maximize the victim's safety by arresting the offender for violating the order, revoking the offender's probation or parole, or filing new criminal charges such as stalking along with the violation of the order.

### **Other Lethality Indicators Observed**

In 2021, DVHRT sites were asked about additional indicators of future lethality. The data on other lethality indicators showed:

- » 8 (34%) cases where alcohol was a factor in the abuse.
- » 4 (20%) cases where narcotics were a factor in the abuse.
- » 116 (25%) where there was prior police involvement or contact in 2021.
- » 55 (12%) cases in which the offender threatened to harm themselves or others at some point.
- » Three offenders threatened to injure or kill a companion animal to the survivors.

## Limitations of the Study

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Due to the COVID-19 pandemic, Texas experienced circumstances that likely changed how survivors experienced domestic violence and reported domestic violence. For instance, as mentioned earlier, many students did not attend in-person classes. This may have affected offenders' access to the victims as younger victims are less likely to live with the offenders and/or may have affected victims' access to legal resources and domestic violence advocates.

Conversely, offenders who shared homes with victims had greater access to the victims and were generally likely to be older, which may explain the increased reporting in older categories. Other factors worth considering were the accessibility to the police, advocates, probation, parole, and courts during the pandemic. The pandemic has reportedly caused a backlog in civil and criminal courts across Texas, including Bexar,<sup>24</sup> Harris,<sup>25</sup> Travis,<sup>26</sup> Nueces,<sup>27</sup> Midland,<sup>28</sup> and Ector<sup>29</sup> counties. While these backlogs appear to be resolving, the data from 2020 and 2021 likely reflect delays as agencies struggled to adapt to the circumstances of the pandemic.

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24 Hernandez, Erica, and Misael Gomez. "It's Been a Lot Work': More than Half of Backlogged Domestic Violence Cases Resolved in Less than 2 Months." KSAT, KSAT San Antonio, 13 Apr. 2022, <https://www.ksat.com/news/local/2022/04/13/its-been-a-lot-work-more-than-half-of-backlogged-domestic-violence-cases-resolved-in-less-than-2-months>

25 Bennett, Author: Adam. Harris County Commissioners Approve \$7.5 Million to Fund Prosecutor Positions, KHOU 11, 5 Apr. 2022, <https://www.khou.com/article/news/crime/harris-county-funding-prosecutor-positions/285-cd0a9920-9a40-4637-8d8b-faf0c8e534ed>.

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# Success Stories

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## Abilene, Texas

The DVHRT received a call from law enforcement regarding a high danger score on the LAP. The client had been separated from the offender since April 2021. However, the offender continued to stalk and harass the client. Upon the arrival of law enforcement, the offender fled the scene. The local police department continued to look for the perpetrator and made an arrest. An emergency protective order was issued to the client. The offender had a lengthy record and was on parole for prior charges of family violence assault. The prosecutor and law enforcement worked diligently to hold the offender accountable, and the offender received an eight-year prison sentence. The DVHRT coordinator assisted the survivor in working with detectives and filing for Crime Victims Compensation (CVC) on behalf of the client. This is a notable example of the DVHRT team coordinating and acting swiftly on behalf of a high-risk victim and holding the offender accountable.

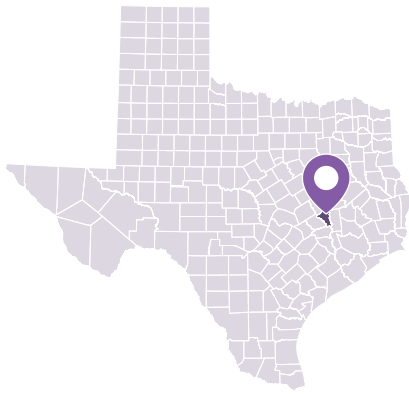
In an unrelated case, a high-risk victim who had been receiving shelter and support services accomplished her housing and employment goals, could leave the shelter, and move into long-term housing through our transitional housing program. In May of 2021, the client was represented by the local family violence program staff attorney and was granted a two-year protective order.



## **Bexar County**

The client requested services from the Bexar County Family Justice Center (BCFJC) in the summer of 2021. During intake, she was quickly identified as a high-risk victim through the Danger Assessment, with a scaled score of 28 and flags for “Firearm” concern. While eight months pregnant, the client met with the offender for a child exchange. The client refused to let the offender see the child because of pending allegations of abuse against his girlfriend. The offender informed her that it was not the girlfriend who hit the child but him. The offender repeatedly punched the client, pulled out a gun, and told her that he would kill her and her unborn child. The client convinced the offender to step out of the car, drive away, and flagged down a Sheriff’s Deputy by flashing her lights and honking the horn.

She was interviewed by a victim advocate, and her case was referred to the DVHRT. The DVHRT worked with the Prosecutor’s Office to obtain a temporary ex-parte protective order and eventually obtained a two-year protective order. The offender was further flagged for firearm possession, which triggered the District Court’s firearm surrender program. The client worked with BCFJC to obtain 100% assistance through CVC, including expenses associated with relocation, medical care, and counseling. The DVHRT Coordinator further worked with Bexar County Pretrial Services to have the client’s address added to a restricted zone for GPS monitoring in the associated criminal case. The offender is awaiting trial for three offenses stemming from the August 2021 incident, including Aggravated assault with a deadly weapon, endangering a child, and evading arrest. He is also awaiting trial on an additional charge of injury to a child involving a victim not associated with the client’s case.



### **Brazos County**

At a monthly DVHRT staffing, the team was told about a high-risk offender with open warrants, a new warrant for failure to appear at his court hearing, and an open protective order to be served. The victim was receiving services, and there was a concern about her safety with his escalating behavior. At the meeting, his information was disseminated to the team so all would be aware in case they met him. A few days later, the DVHRT coordinator was contacted by a team member and given information about his possible whereabouts as well as possible additional charges. Law enforcement on the team was notified, and through the joint effort of the team members, this offender was arrested. A high bond letter was included as part of his indictment, and he was given a high bond until the DA's office could file for a no bond in the case. Because of the new victim's information given to the DVHRT, law enforcement contacted an outside county about a possible unsolved murder involving this defendant. After investigating that information, a new murder warrant was also issued. This case went to trial in the Fall of 2021. After a week of testimony, this offender was found guilty and sentenced to life in prison. The coordinated efforts of the Brazos County DVHRT allowed for much of the successful prosecution in this case.



### **Fort Bend County**

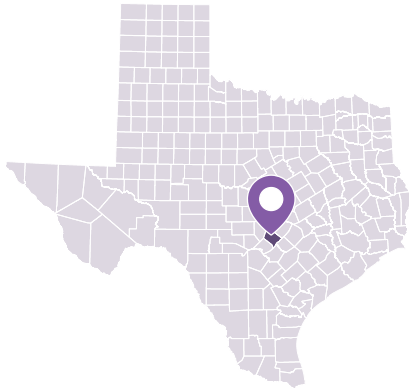
In August 2021, the DVHRT received a high danger LAP, with the client answering yes to 9 out of the 11 questions. The abuser was the client's boyfriend, who was already out on bond for assault/strangulation against the client in 2020. The abuser was arrested and ordered to wear a GPS (global positioning system) monitor. The DVHRT received additional cases for aggravated assault with a deadly weapon and unlawful restraint. The client received counseling from the local family violence center. After the DVHRT Coordinator made a referral to the protective order division, the client received a 99-year Protective Order. The assault strangulation case

was resolved, while the newest cases were filed unadjudicated with the assault strangulation. The defendant is currently serving four-year deferred probation, including completing a BIPP (Batterer Intervention Prevention Program) course and random alcohol and drug testing with a substance abuse evaluation and treatment as needed. The final order was that the offender was to have no contact with the client.



### **Grayson County**

This victim came to the Crisis Center in late December 2020. The client became estranged from her partner and father of her child in the previous months when she asked him to move out of her home. The client stated that the offender had become erratic and was concerned for her child's safety, so she asked him to move out. The offender moved out and moved in with friends at that time, and the victim attempted to maintain a cordial relationship for the best interest of their shared child. A few days before presenting at the Crisis Center, the offender had engaged in actively stalking the victim and had called the police and reported her as missing; the offender then stalked the victim via her telephone and drove to several of her co-worker's homes, knocked on doors and demanded to speak with her. The offender then entered the victim's home using a key that had not been returned to her and held her hostage in her home for over 24 hours, where he physically and sexually assaulted her, including strangulation. The client gave law enforcement her statement. Law enforcement then gave the client a crisis center victim's card. The client soon came to the family violence office for guidance with safety planning and obtaining a protective order. The case was referred to the DVHRT as the client was considered an extreme risk due to several factors, including stalking, strangulation, and escalating violence. A protective order was obtained the week after she returned to her home. The client is actively participating in the DVHRT, and the case is currently awaiting a court date with the district attorney's office.



### **Hays County**

In 2021, a high-risk victim who had been receiving shelter and support services accomplished her housing and employment goals and could leave the shelter and move into long-term housing through our transitional housing program. In May of 2021, the client was represented by the staff attorney and was granted a two-year protective order.

In 2021, the DVHRT also identified another high-risk victim and assisted in obtaining a protective order with our staff attorney. The DVHRT team collaborated with the local District Attorney's office to assist the family, consisting of a mother and her two minor children and her adult stepdaughter, with obtaining civil protection. The collaboration allowed each party to have their own counsel while consolidating the cases efficiently. The case is ongoing but is an example of our community's collaboration for high-risk cases.



### **Wilbarger County**

In April 2021, an offender was arrested for aggravated assault with a deadly weapon and aggravated kidnapping against a client. The survivor was immediately connected to services with the DVHRT and was assisted with ongoing counseling for her and her children, protective order assistance, and court accompaniment. In addition, the DVHRT could get the client's electric deposit waived as the client had to find her own place. The offender was sentenced to four years for aggravated assault with a deadly weapon in October 2021.

# Questions?

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