

**Mayor's Office
to Combat
Domestic Violence**

**New York City
Domestic Violence
Fatality Review Committee**

Annual Report 2009



Michael R. Bloomberg
Mayor

**Mayor's Office to
Combat Domestic
Violence**

Yolanda B. Jimenez
Commissioner



YOLANDA B. JIMENEZ
COMMISSIONER

(212) 788-3156

December 2009

Dear Colleagues:

Enclosed please find the fourth Annual Report of the New York City Domestic Violence Fatality Review Committee. This report is being provided to you pursuant to Local Law 61.

One of the most remarkable findings from this year's analysis is the 29% reduction in intimate partner homicides, a sub-category of all family-related homicides, involving female victims since 2002. In addition, the report illustrates that over the last seven years, all family-related homicides have decreased by 8%.

Over the last two years, the Committee has developed and implemented a community level assessment that will assist us in understanding factors that contribute to the concentrations of family-related homicides in five community districts in the Bronx. While the community assessment is still underway, early findings suggest that the community believes domestic violence is very problematic, but is unaware of available services for domestic violence victims. In response to this initial observation we have begun collaborating on a neighborhood outreach campaign with supermarkets, banks and other outlets to strategically place domestic violence prevention messaging in the community.

The Committee also continues to focus on developing an environment which promotes disclosure of domestic violence by victims at City agencies and contract organizations. During the past year, we have trained 675 Department of Homeless Services employees on domestic violence issues and appropriate referrals.

I look forward to our continued collaboration in implementing the community assessment and training. I am confident that our continued partnership and collaboration will enhance efforts to reduce domestic violence.

Sincerely,

A handwritten signature in black ink that reads "Yolanda B. Jimenez". The signature is written in a cursive style with a large, stylized "Y" and "J".

Yolanda B. Jimenez

The Fatality Review Committee Members

Yolanda B. Jimenez, Chairperson, Commissioner, Mayor's Office to Combat Domestic Violence

Lilliam Barrios-Paoli, Commissioner, Department for the Aging

Designee: Jane Fiffer, Deputy Assistant Commissioner

Daniel M. Donovan, Jr., Office of the District Attorney, Richmond County

Designee: Yolanda L. Rudich, Bureau Chief, Sex Crimes/Special Victims Bureau

Robert Doar, Administrator/Commissioner, Human Resources Administration

Designee: Marie B. Philip, Executive Director

Catherine J. Douglass, Esq., Executive Director, inMotion, Mayoral Appointee representing a legal service agency

Laurel W. Eisner, JD, MSW, Executive Director, Sanctuary for Families, Mayoral Appointee representing a social service agency

Thomas Farley, MD, MPH, Commissioner, Department of Health and Mental Hygiene

Designee: Catherine Stayton, DrPH, MPH, Director, Injury Epidemiology Unit, Bureau of Epidemiology Services

Robert V. Hess, Commissioner, Department of Homeless Services

Designee: Dova Marder, MD, Agency Medical Director

Robert T. Johnson, District Attorney, Bronx County

Designee: Penny Santana, Chief, Domestic Violence Bureau

Raymond W. Kelly, Commissioner, New York City Police Department

Designees: Kathy Ryan, Assistant Chief, Domestic Violence Unit and Daniel Murphy, Inspector, Central Investigation and Resource Division

John B. Mattingly, Commissioner, Administration for Children's Services

Designee: Elizabeth Roberts, Deputy Commissioner

John B. Rhea, Chairman, New York City Housing Authority

Designee: Nora Reissig-Lazzaro, Director, Social Services Department

Theresa McIntosh, Mayoral Appointee representing the voice of victims

Erin M. Correale, Esq., Mayoral Appointee representing the voice of victims

Edward Hill, Fatality Review Coordinator, Mayor's Office to Combat Domestic Violence

Rachel Johnson, Program Analyst and Interagency Coordinator, Mayor's Office to Combat Domestic Violence

Table of Contents

Section	Page
Key Findings	4
Introduction	6
Data and Methods	7
Family-Related Homicide Findings in New York City	10
Victims	10
Family-Related Homicides Involving Elders	13
Characteristics of Perpetrators of Family-Related Homicides	14
Overview of Agency Contact for Family-Related Homicides	17
Socioeconomic Circumstances of Neighborhoods Impacted by Family-Related Homicides	19
Communities Experiencing a High Concentration of Family-Related Homicides: The Bronx Community Assessment	21
Small Group Meetings with Community Organizations	24
Small Group Meetings with Survivors of Domestic Violence	25
Community Survey	27
Action Steps	27
Summary	29
Appendices	
Appendix A: 2002-2008 Family-Related Homicides Data by Year	

Key Findings

For this fourth Annual Report, the New York City Fatality Review Committee (“FRC”) reviewed data on family-related homicides that occurred from 2002 through 2008 and victim and perpetrator contact with City agencies and contract organizations for family-related homicides that occurred from 2005 through 2008.¹

While family-related homicides fluctuated from year-to-year, there were noteworthy reductions from 2002 to 2008. Specifically, data show:

- 1. Family-related homicides have declined 8% since 2002 – from 76 in 2002 to 70 in 2008.**
- 2. Intimate partner homicides, a subset of family-related homicides,² declined by 10% since 2002 – from 41 in 2002 to 37 in 2008. Intimate partner homicides involving a female victim declined by 29% (from 34 to 24) during the same time period.**

The FRC mapped family-related homicides to identify vulnerable communities. Data from 2004 to 2008 show the following:

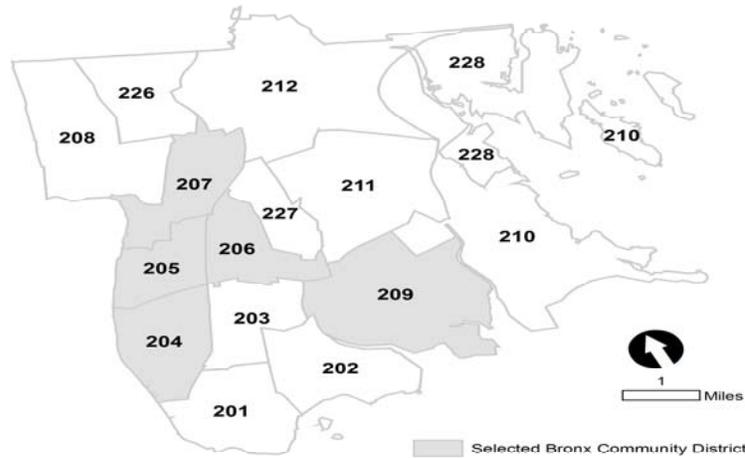
- 1. Since 2004, 61% of the family-related homicides in the Bronx (54 out of 89) were concentrated in five of the borough’s 12 community districts (Districts 4, 5, 6, 7 and 9).**
- 2. These five Bronx community districts (Districts 4, 5, 6, 7 and 9) accounted for almost 17% (54 out of 324) of the family-related homicides that occurred in New York City from 2004 to 2008.**

The FRC examined circumstances of family-related homicides, including weapon use and perpetrator characteristics. Data show:

- 1. From 2002 through 2008, knives and other cutting instruments were the most commonly used weapon, accounting for 33% (157 out of 474) of family-related homicides. During that same time period, firearms accounted for 26% (121 out of 474) of family-related homicides.**
- 2. Over 40% (20 out of 48) of elder family-related homicide victims die at the hands of their son or grandson.**

Given the high concentration of family-related homicides in the above-mentioned Bronx community districts, the FRC initiated a community assessment in these neighborhoods (shaded in the map below). This ongoing work began in September of 2008. To date, the community assessment has achieved substantial community buy-in to address domestic violence at the neighborhood level.

Bronx Community District Map



Note: The community districts include the borough designation for the Bronx, which is 2, followed by the two-digit community district number. For example, 204 represents Community District 4 in the Bronx.

- 1. From July 2008 through November 2009, the FRC Coordinator and other Mayor’s Office to Combat Domestic Violence (“OCDV”) staff, on behalf of the FRC, conducted individual and group meetings with over 50 community based organizations within the target Bronx districts.**
- 2. During the same time period, OCDV staff conducted six small group meetings with survivors of domestic violence within the target area in the Bronx. Small group meetings were conducted in English, Spanish and French.**
- 3. A survey of community attitudes about domestic violence and knowledge of community resources available is also being conducted in the target area of the Bronx. To date, 225 community members have participated in this street-intercept survey. The goal is to reach 500 community members by the summer of 2010.**

Introduction

The FRC was established in 2005 through Local Law 61, which requires the FRC to examine aggregate information pertaining to family-related fatalities and to develop recommendations for the coordination and improvement of services for domestic violence victims in New York City.³ This is the fourth Annual Report issued by the Committee. For this report, the FRC reviewed data on family-related homicides from 2002 through 2008.⁴

Defining “Family-Related Homicides”

As stipulated by Local Law 61 of 2005 and defined by the New York City Police Department (“NYPD”), a domestic violence fatality is defined as a death of a family or household member resulting from an act or acts of violence by another family or household member. “Family or household member” refers to the following individuals:

- persons related by marriage;
- persons related by blood;
- persons legally married to one another;
- persons formerly married to one another regardless of whether they still reside in the same household;
- persons who have a child in common regardless of whether such persons have been married or have lived together at any time;
- persons not legally married, but currently living together in a family type relationship; and
- persons not legally married, but who have formerly lived together in a family type relationship.

The definition includes same sex partners.

Data and Methods

This report describes, in aggregate, the 474 family-related homicides that occurred between 2002 and 2008.⁵ The FRC examines these homicides by factors such as age, gender, race, and the relationship between the victim and the perpetrator.

The following outlines the report's multiple data sources:

Family-related Homicides

NYPD Data: NYPD maintains information on family-related homicides and provides the FRC with basic demographic information including: (1) age of victim and perpetrator; (2) sex of victim and perpetrator; (3) race of victim; (4) weapon utilized; (5) familial relationship of the perpetrator to the victim; and (6) location of the crime. The FRC analyzed information on all family-related homicides that occurred in New York City during 2002 through 2008 for inclusion in this year's report. Data from prior years' reports have been updated, and the most recent year of data has been added.⁶ All homicide counts for 2002 through 2008 are presented in the report's findings sections or in the appendix.

Percent changes in family-related homicides from 2002 through 2008 were computed, and confidence intervals were constructed around 2002 and 2008 counts. When confidence intervals overlapped, the change was not interpreted as statistically significant. To compare distributions of family-related homicides across sub-groups (defined by age, gender, borough, type of family-related homicide, etc.) data from 2002 to 2008 were pooled because no steady upward or downward trend was discernible in the intervening years.⁷

Contact with City Agencies and the Representative Contract Agencies (2007 family-related homicides): The FRC provided each FRC member agency with identifiers (name, date of birth, and address) for the victims and perpetrators of family-related homicides that occurred in 2007, the most recent year for which contact information on these homicides was available from City agencies and representative contract agencies. Representative contract agencies, inMotion, Safe Horizon and Sanctuary for Families, provide domestic violence-related services under contract with New York City. The agencies independently cross-referenced that list with agency files, and were able to report whether or not they had any contact at any point in time with the victims and/or perpetrators, including the year the homicide occurred and the calendar year prior to the homicide occurrence. This information was compared with all agency submissions to determine if an individual victim or perpetrator had contact with one or more agencies. The result of that data match is reported in aggregate herein.⁸ The agencies were also able to provide aggregate data regarding the timeframe during which the contact occurred relative to the homicide.⁹

United States Census Population Estimates: The population, poverty, unemployment and educational attainment data utilized in this report were obtained from the United States Census and the New York City Department of City Planning and reflect 2000 Census figures. This is the most current data available at the geographic level necessary for this analysis.

Bronx Community Assessment

The FRC is currently conducting a community assessment in the Bronx to identify any community-level factors that may be associated with the high concentration of family-related homicides in Bronx Community Districts 4, 5, 6, 7 and 9. The following are the data sources for the community assessment:

Small Group Meetings with Community Organizations and Key Stakeholders: From June 2008 through August 2009, OCDV staff, on behalf of the FRC, met with over 50 community organizations in the Bronx. Meetings included 12 organizations that focus their services primarily on domestic violence victims and 38 general community based organizations. Meetings lasted from 45 minutes to three hours and were conducted using a semi-structured topic guide. Topics included service providers' experiences facilitating service provision for domestic violence victims; factors they perceived as hindering or helping their clients' access to services; and community perceptions of domestic violence. Notes were taken during the meetings and subsequently coded and analyzed by OCDV staff and research interns. Notes were coded and re-coded by three different individuals, ensuring inter-coder reliability. Before coding the notes from meetings, anticipated codes and themes were identified *a priori*, based on the topic guide and staff knowledge of the topic. *In vivo* codes were also identified based on concepts that emerged directly from the notes that had not already been identified *a priori*.

Small Group Meetings with Survivors of Domestic Violence: OCDV staff, on behalf of the FRC, conducted six small group meetings with survivors of domestic violence. Three groups were conducted in English and two in Spanish; one group meeting with recent African immigrant women was conducted in French. Each small group had from 5 to 14 participants and lasted from one to two hours. Participants were identified and recruited through the assistance of Sanctuary for Families, Supportive Children's Advocacy Network (SCAN) New York and the Violence Intervention Program. Groups were conducted using a semi-structured topic guide that asked participants about factors that led them to leave their abusive relationship(s); resources they turned to immediately for assistance; and factors that hindered or facilitated the receipt of the services they needed. Notes were taken during the group meetings and coded in the same manner as the other small group meeting notes, as explained in the above paragraph.

Community Based Survey: A 23-question, interviewer administered survey was developed for implementation in the focus areas to measure the community's understanding of domestic violence; the level of knowledge of existing domestic violence resources; and how someone might seek help. The community survey received the Department of Homeless Services Institutional Review Board approval in April 2009. The surveys are administered in English and Spanish by trained interns and take approximately 10-15 minutes to complete. Recruitment for the convenience sample for the survey was conducted at street fairs, health fairs, subway stations, parks, playgrounds, health centers, National Night Out Against Crime and greenmarkets. Inclusion criterion included any person over the age of 18 who is living in the Bronx within the targeted zones. To date, using a street-intercept approach, 225 surveys have been completed with a goal of 500 surveys to be completed by the summer of 2010.

Confidentiality

All data summarized in this report are protected. The FRC's meetings are closed to the public. Only the FRC Coordinator and FRC members review case level information on the homicide victims and perpetrators. Data are reported in aggregate only; identifying information is never presented.

Interpreting Report Findings

Comparisons of homicide counts over time and between subgroups must be interpreted with caution. While noteworthy changes from 2002 to 2008 are highlighted in the text, no changes over time were statistically significant. Fluctuations in the intervening years show no discernible upward or downward trend. In addition, differences between subgroups were not significant. Statements about higher frequencies of homicide in certain subgroups must not be interpreted as statements of causation. Since the report's socioeconomic data are presented at the community-level only, the relationship between individual socioeconomic status and family-homicide risk cannot be determined. The data on homicide victims and perpetrators' utilization of services were not subjected to statistical analyses.

Lastly, the data presented in relation to the community assessment are preliminary, as the assessment is ongoing, and were not subjected to statistical analysis.

All percentages of the data presented in this report have been rounded to the nearest whole number. Therefore, charts and graphs may not add up to 100 percent.

Family-Related Homicide Findings in New York City

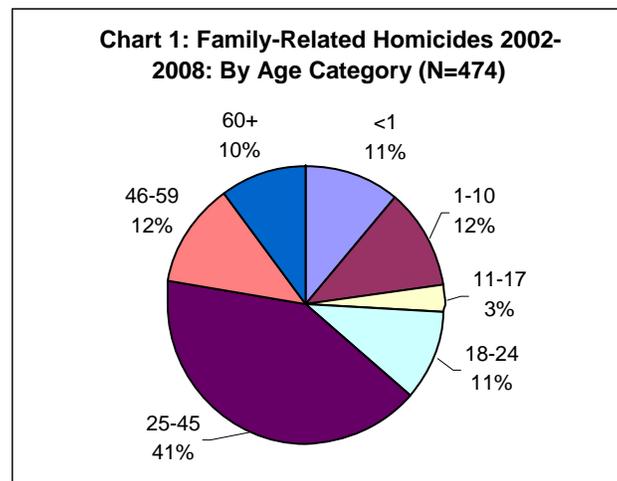
Victims

Family-related homicides have declined 8% since 2002, from 76 in 2002 to 70 in 2008. Fluctuations in the intervening years, however, do not suggest a steady upward or downward trend. Between 2002 and 2008 family-related homicide accounted for 12% of all homicides.

Table 1: 2002-2008 Homicides in New York City

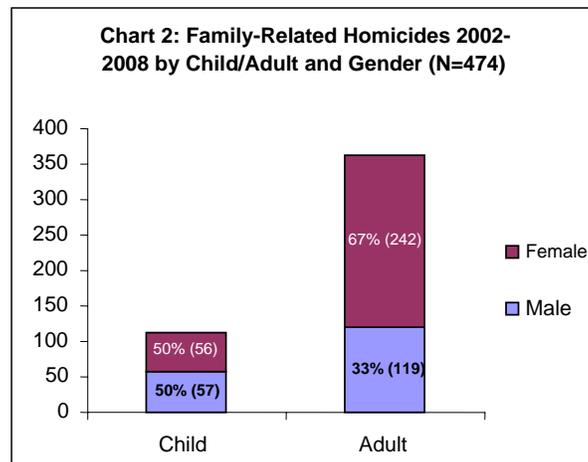
Year	NYC Homicides ¹⁰	NYC Family-Related Homicides	Percentage Family-Related Homicides
2002	586	76	13%
2003	598	74	12%
2004	572	67	12%
2005	540	68	13%
2006	594	71	12%
2007	496	48	10%
2008	501	70	14%
Total	3887	474	12%

The age group with the greatest number of victims is 25 to 45 year olds; children under 11 years old comprise the age group with second highest count. Over forty percent (41%, 195 out of 474) of family-related homicide victims between 2002 and 2008 were between the ages of 25 and 45. Just under a quarter of the victims (23%, 109 out of 474) were children under the age of 11.



Over 60% of family-related homicide victims are female. From 2002 through 2008, females accounted for 63% (298 out of 474) of the family-related homicide victims. For adult victims (age 18 and older), 67% (242 out of 361) were female and 33% (119 out of

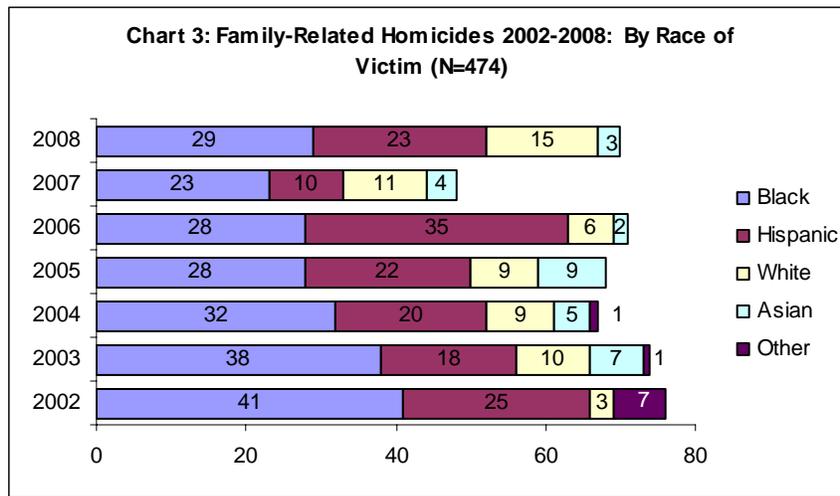
361) were male. A larger percentage of adult victims of intimate partner homicide (a category of family-related homicide described in more detail on page 13) were female.¹¹ Eighty-one percent (192 out of 236) of victims killed by an intimate partner were female. For child victims (age 17 and under) half were male (50% - 57 out of 113) and half were female (50% - 56 out of 113).



Black and Hispanic victims accounted for almost 4 out of 5 family-related homicide victims from 2002 to 2008. Despite an almost 30% decline from 2002 to 2008 in family-related homicides involving Black victims (from 41 to 29) and an 8% decline involving Hispanic victims (from 25 to 23), these two subgroups accounted for 78% of all victims during this period. Blacks were disproportionately affected by family-related homicides, as they comprise 24% of New York City’s population, but accounted for 46% (219 out of 474) of family-related homicide victims.¹²

Twenty-one percent (15 out of 70) of family-related homicides victims in 2008 were White. In recent years, the number of White victims has more than doubled, 6 in 2006 to 15 in 2008. Despite this increase, Whites are a minority among New York City’s homicide victims. Whites account for 35% of New York City’s population, but accounted for 13% (63 out of 474) of the family-related homicide victims from 2002 through 2008.

Similarly, Asians account for 10% of New York City’s population, but accounted for 6% (30 out of 474) of the family-related homicide victims, respectively, from 2002 through 2008.¹³



Compared to New York City’s other boroughs, Brooklyn has had the largest decline in family-related homicides. In Brooklyn, family-related homicides dropped 32%, from 37 in 2002 to 25 in 2008. In Manhattan, family-related homicides decreased 22% from 9 in 2002 to 7 in 2008. They increased 20% in the Bronx (from 15 to 18); increased 13% in Queens (from 15 to 17) during this period; and increased from zero to three in Staten Island during this period. It is important to note that in all five boroughs, the number of family-related homicides fluctuated in the intervening years, with no steady upward or downward trend.

Just less than half of the City’s population resides in the Bronx and Brooklyn, yet over 60% of the family-related homicides occurred in these boroughs. Specifically, 17% of the City’s population resides in the Bronx, while 24% (115 out of 474) of the family-related homicides occurred there. Thirty-one percent of the City’s population resides in Brooklyn, while 37% (175 out of 474) of the family-related homicides occurred there.¹⁴

Table 2: 2002-2008 Percentage of Family-Related Homicide Victims and Percentage of Citywide Population (N=474)

Borough	Number of Family-Related Homicides	Percentage of Citywide Family-Related Homicides	Percentage of Citywide Population
Brooklyn	175	37%	31%
Bronx	115	24%	17%
Queens	99	21%	27%
Manhattan	66	14%	20%
Staten Island	19	4%	6%

Most family-related homicides occur at the victim’s residence: From 2002 through 2008, 82% (391 out of 474) of the family-related homicides occurred at the victim’s residence.

Family-Related Homicides Involving Elders

Given previous FRC reports indicating that victims over the age of 60 had limited contact with City agencies prior to the homicide,¹⁵ the FRC continued its targeted examination of homicides among elders.

The annual number of elder family-related homicide victims is relatively constant.

From 2002 through 2008, there were 48 family-related homicides involving victims aged 60 and over, comprising 10% of all family-related homicides. The average age of the elder victim was 71.

Table 3: 2002-2008 Elder (60+) Family-Related Homicide Victims (N=48)

Number	2002	2003	2004	2005	2006	2007	2008	Total
Elder Victims	9	8	7	3	8	6	7	48

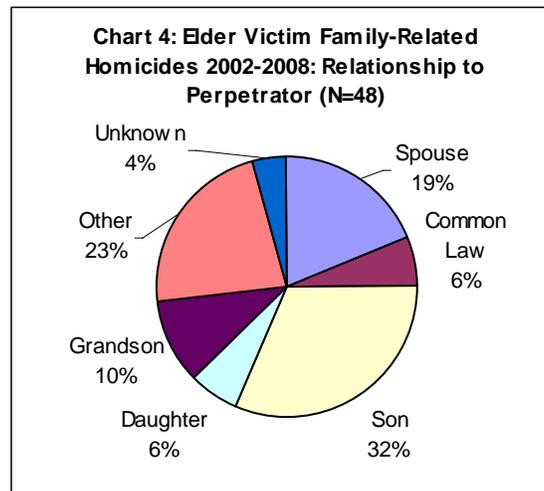
Over half of elder family-related victims are female. Fifty-eight percent (28 out of 48) of elder family-related homicide victims were female.

Brooklyn has the largest number of elder family-related homicide victims. From 2002 through 2008, 40% (19 out of 48) of the family-related homicides involving an elder victim occurred in Brooklyn, 33% (16 out of 48) occurred in Queens, 19% (9 out of 48) in Manhattan, 6% (3 out of 48) in the Bronx, and 2% (1 out of 48) in Staten Island. Brooklyn's elderly are disproportionately affected. While 30% of the City's elder population resides in Brooklyn, 40% of the City's family-related homicides involving an elder victim occurred in that borough.

Table 4: 2002-2008 Percentage of Elder Family-Related Homicide Victims and Percentage of Citywide Elder Population (N=48)

Borough	Number of Elder Family-Related Homicides	Percentage of Citywide Elder Family-Related Homicides	Percentage of Citywide Elder Population
Brooklyn	19	40%	30%
Queens	16	33%	30%
Manhattan	9	19%	21%
Bronx	3	6%	14%
Staten Island	1	2%	6%

Over 40% of elder family-related homicide victims die at the hands of their son or grandson. From 2002 through 2008, the perpetrator of the elder family-related homicide case was the victim's adult son or grandson in 42% (20 out of 48) of cases. In contrast, only 6% (3 out of 48) of elder family-related victims were killed by their daughter, and only one (2%) victim was killed by their granddaughter. Another 25% (12 out of 48) were killed by their spouse or common law partner.



Characteristics of Perpetrators of Family-Related Homicides¹⁶

The majority of perpetrators of family-related homicides are males and over half are between the ages of 25 and 45. From 2002 through 2008, there were 501 perpetrators involved in 474 family-related homicides. Seventy-four percent (369 out of 501) of the perpetrators of family-related homicides were male. Sixty percent (302 out of 501) were between the ages of 25 and 45 years, 19% (95 out of 501) were between the ages of 18 and 24, and 4% (18 out of 501) of the perpetrators were under the age of 18. Perpetrators in the age groups 18 to 24 years and 25 to 45 years are disproportionately represented. They account for 10% and 34% respectively of New York City's population, but accounted for 19% and 60% respectively of the perpetrators during 2002 through 2008.¹⁷

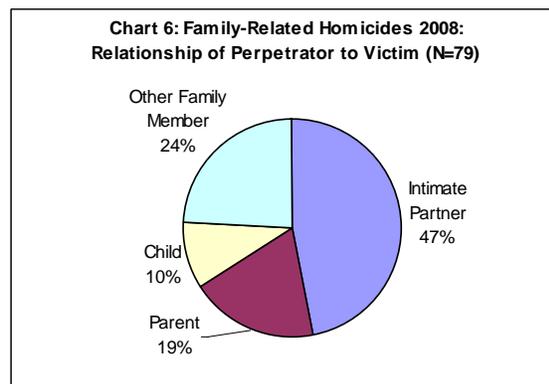
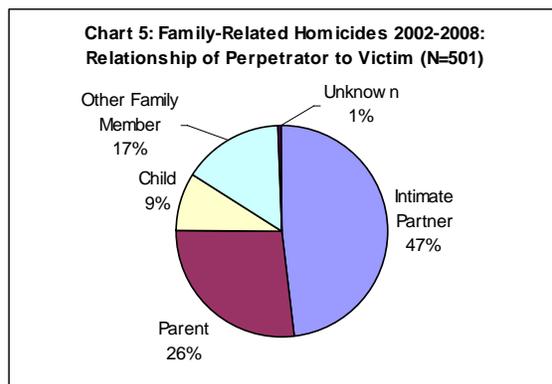
Table 5: 2002-2008 Percentage of Family-Related Homicide by Age Category of Perpetrator and Percentage of Citywide Population (N=501)

Age	Number of Perpetrators	Percentage of Citywide Family-Related Homicides	Percentage of Citywide Population
11-17	18	4%	9%
18-24	95	19%	10%
25-45	302	60%	34%
46-59	62	12%	16%
60+	20	4%	13%
Unknown	4	1%	-

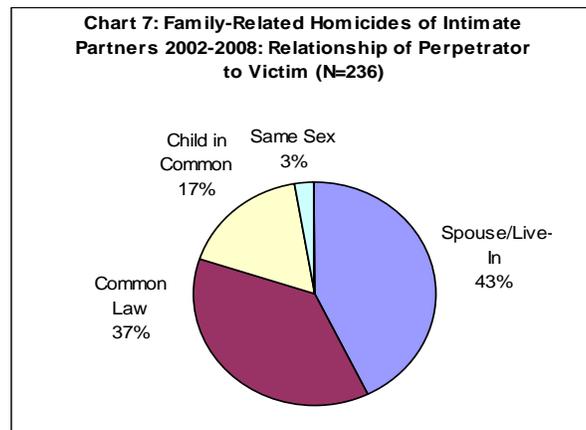
Almost half of family-related homicides involve perpetrators who were the intimate partner of the victim. From 2002 through 2008, 47% (236 out of 501) of the family-related homicides involved perpetrators who were the intimate partner of the victims. Additionally, 26% (132 out of 501) involved parents who were perpetrators; 17% (86 out of 501) involved other family members (e.g., uncle, aunt, cousin, brother, sister, etc.) and 9% (44 out of 501) involved a perpetrator who was the child of the victim.

Family-related homicides involving perpetrators who were the intimate partner¹⁸ decreased from 2002 to 2008. Intimate partner homicides declined by 10% from 41 in 2002 to 37 in 2008. Of note is an 85% increase (from 20 to 37) between 2007 and 2008. Homicides involving perpetrators who were parents decreased by 12% (from 17 to 15) between 2002 and 2008, and decreased by 44% (from 27 to 15) since peaking during that time period in 2006. Between 2002 and 2008, homicides involving other family members increased 58% from 12 in 2002 to 19 in 2008. In all relationship categories, the number of family-related homicides has fluctuated in the intervening years with no discernible upward or downward trend.

Given the decline in homicides involving parent perpetrators and the increase in homicides involving perpetrators who were other family members in recent years, the distribution of homicides by perpetrator relationship to the victim is somewhat different in 2008 compared with data pooled from 2002 to 2008, as noted in the graphs below.



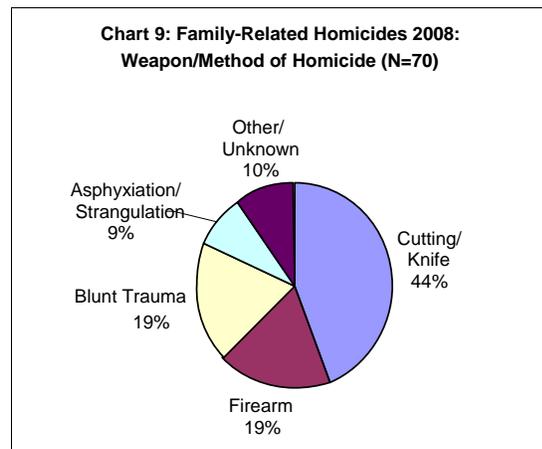
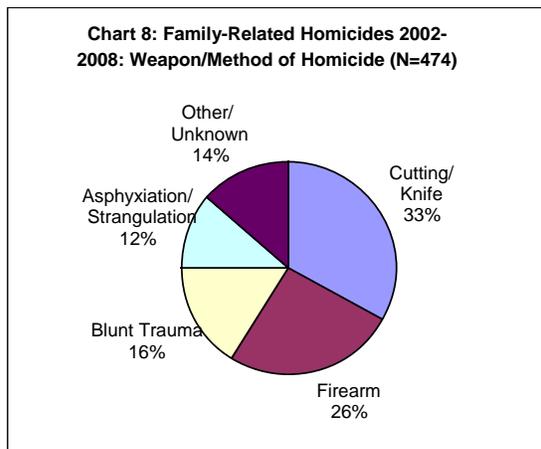
More than three quarters of intimate partner¹⁹ homicides involve a perpetrator who was a spouse, live-in or a common-law partner of the victim. From 2002 through 2008, 80% (189 out of 236) of the family-related homicides committed by an intimate partner were committed by a spouse, live-in or common-law partner of the victim. Another 17% (41 out of 236) of the intimate partner homicides were committed by a perpetrator who had a child in common with the victim.



A small proportion of homicides involve multiple victims. From 2002 through 2008, 6% (30 out of 474) of family-related homicide cases involved two or more victims. Forty percent (12 out of 30) of the multiple victim family-related homicide cases involved at least one victim under the age of 18, and most (10, or 83%) of these victims were under the age of ten. Forty percent (12 out of 30) of the multiple victim family-related homicide cases involved a perpetrator who was the parent or step-parent of one of the victims. Another 13% (4 out of 30) of the multiple victim family-related homicide cases involved a perpetrator who was the intimate partner of one of the victims.

A knife or other cutting instrument is commonly used in family-related homicides. From 2002 to 2008, a knife or other cutting instrument was the most commonly used weapon in family-related homicides (33%, 157 out of 474). Perpetrators used firearms in 26% (121 out of 474) of the family-related homicides that occurred during this period.

The number of family-related homicides perpetrated with a knife increased by a factor of more than four (from 7 to 31) between 2007 and 2008. During the same time period, the number of homicides committed with a firearm declined by 28% (from 18 to 13). The distribution of homicides by weapon, both between 2002 and 2008 and in 2008 only, is reflected in the graphs below.



Overview of Agency Contact for Family-Related Homicides

In the last three annual reports, the FRC found that over half of the family-related homicide victims had documented contact with at least one City agency or representative contract organization (Safe Horizon, Sanctuary for Families, and inMotion) in the calendar year prior to the homicide.²⁰ All data presented in this section reflects the 185 family-related homicides which occurred in 2005, 2006 and 2007 and describes documented contact that occurred at some point between January of the year prior to the homicide and the date of the homicide. For example, if a homicide occurred in September of 2007, we would report any contact for the period January 1, 2006 through the date of the homicide.

Specific information regarding contact is exclusive to each agency. A victim or perpetrator may have had contact with more than one City agency or non-City agency.

Over half of family-related homicide victims and perpetrators had contact with at least one City agency or a representative contract organization within the calendar year preceding the homicide. Fifty-four percent (99 out of 185) of the victims had documented contact with at least one City agency or representative contract organization at some point in the calendar year preceding the homicide. A slightly larger percentage, (55%, 100 out of 182) of perpetrators had contact with at least one City agency or representative contract organization during the same time period.²¹ Forty-six percent (86 out of 185) of the victims and 45% (82 out of 182) of the perpetrators never had any contact with a City agency or a representative contract organization during this time period.

Overall, 41% (76 out of 185) of the victims and 42% (77 out of 182) of the perpetrators had documented contact with the Human Resource Administration (“HRA”) for cash assistance, food stamps or Medicaid. Of the victims, only 4% (3 out of 76) received domestic violence-related services through HRA. In 54 of the family-related homicide cases, HRA had contact with both the victim and the perpetrator.

The Administration for Children’s Services (“ACS”) had contact with 14% (26 out of 185) of victims and 9% (17 out of 182) of perpetrators. Only 5 of the families ever came to the attention of ACS specifically for domestic violence-related allegations. Other cases came to the attention of ACS for a range of issues, including educational neglect, inadequate guardianship, substance abuse, and sexual abuse.²²

The Department of Homeless Services (“DHS”) had contact with 7% (13 out of 185) of the victims and 6% (11 out of 182) of the perpetrators.

Table 6: 2005-2007 Number and Percentage of Family-Related Homicide Cases with Agency Contact

Agency	Victims with Agency Contact (N=185)	%	Perpetrators with Agency Contact (N=182)	%
Any Contact with City Agency Prior to the Homicide	99	54%	100	55%
Human Resources Administration (HRA)	76	41%	77	42%
New York City Police Department (NYPD)	35	20%	36	20%
Administration for Children's Services (ACS)	26	14%	17	9%
Department of Homeless Services (DHS)	13	7%	11	6%
New York City Housing Authority (NYCHA)	13	7%	7	4%
Department for the Aging (for victims 60+, N=9)	0	0%	0	0%

Socioeconomic Circumstances of Neighborhoods Impacted by Family-Related Homicides

Poor socioeconomic circumstances, such as low income, unemployment and low educational attainment are documented risk factors for domestic violence homicide.²³ Since the FRC did not have access to individual-level income, educational attainment, or employment status of the individual family-related homicide victims, it examined neighborhood-level socioeconomic (SES) indicators by census tract. Indicators included: (1) the percentage of the individuals living below the poverty level; (2) the percentage of residents age 25 and older who have not graduated from high school; (3) the median income; and (4) the percentage of the labor force that is unemployed. Poor economic circumstances of a neighborhood appear to be correlated with the frequency of family-related homicides. Analyses of the 2004 through 2008 family-related homicide data and review of SES indicators point to the possible association between poor economic conditions and family-related homicides in New York City.

Poverty:²⁴ Almost 70% (215 out of 317) of the family-related homicide victims resided in communities with more than 20% of the population living below the poverty level. For comparison, only 44% of New York City's census tracts experience similar levels of poverty and only 21% of New York City residents live below the poverty level.

Extreme Poverty:²⁵ One in four (26%, 83 out of 317) family-related homicide victims resided in communities experiencing extreme poverty, defined by 40% of the population living below the poverty level. In contrast, 12% of New York City's census tracts experienced similar levels of extreme poverty, and only 9% of the City's population experience similar levels of extreme poverty.

Median Household Income:²⁶ More than a quarter (26%, 82 out of 317) of family-related homicide victims resided in communities where the median household income is less than \$20,000. Furthermore, 71% (226 out of 317) of family-related homicide victims resided in communities with a median household income less than the median household income for New York City (\$38,293).²⁷

Unemployment Rate:²⁸ More than 4 in 10 victims (44%, 138 out of 317) resided in communities where unemployment exceeded 16% – almost double the citywide percentage of 9%.²⁹ Only 18% of all New York City census tracts have unemployment rates greater than 16%.

High School Graduates:³⁰ More than half (54%, 171 out of 317) of the family-related homicide victims from 2004 through 2008 resided in communities where more than 40% of the residents age 25 and older have never received a high school diploma. In contrast, 23% of New York City's census tracts experience similar levels of educational attainment and 38% of the City's population age 25 and over half never attained a high school diploma.

Table 7: 2004-2008 Number and Percentage of Family-Related Homicides by Poverty, Median Household Income, Unemployment Rate, and Educational Attainment for Census Tract in which Family-Related Homicide Occurred: (N=317).³¹ Number of NYC Census Tracts (N=2,217)

Socioeconomic Neighborhood Characteristics			
Level	Number of Homicides	Percentage of Homicides	Percentage of NYC Census Tracts
Poverty			
Less than 20%	102	32%	56%
20% to 40%	132	42%	32%
Greater than 40%	83	26%	12%
Median Household Income			
<20,000	82	26%	14%
20,000 to 29,999	88	28%	17%
30,000 to 39,999	62	20%	24%
40,000 to 49,999	37	12%	18%
50,000 to 59,999	31	10%	13%
60,000 or More	17	5%	14%
Unemployment			
Less than 8%	77	24%	48%
8% to 15.9%	102	32%	33%
16% to 23.9%	99	31%	12%
24% to 31.9%	30	10%	4%
32% or More	9	3%	2%
No High School Diploma			
0 to 19.9%	34	11%	30%
20 to 39.9%	112	35%	47%
40 to 59.9%	166	52%	20%
60 to 79.9%	4	1%	2%
80 to 100%	1	<1%	<1%

Communities Experiencing High Concentration of Family-Related Homicides: The Bronx Community Assessment

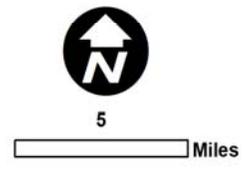
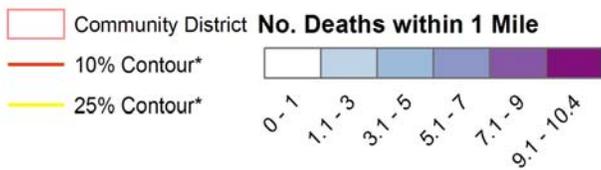
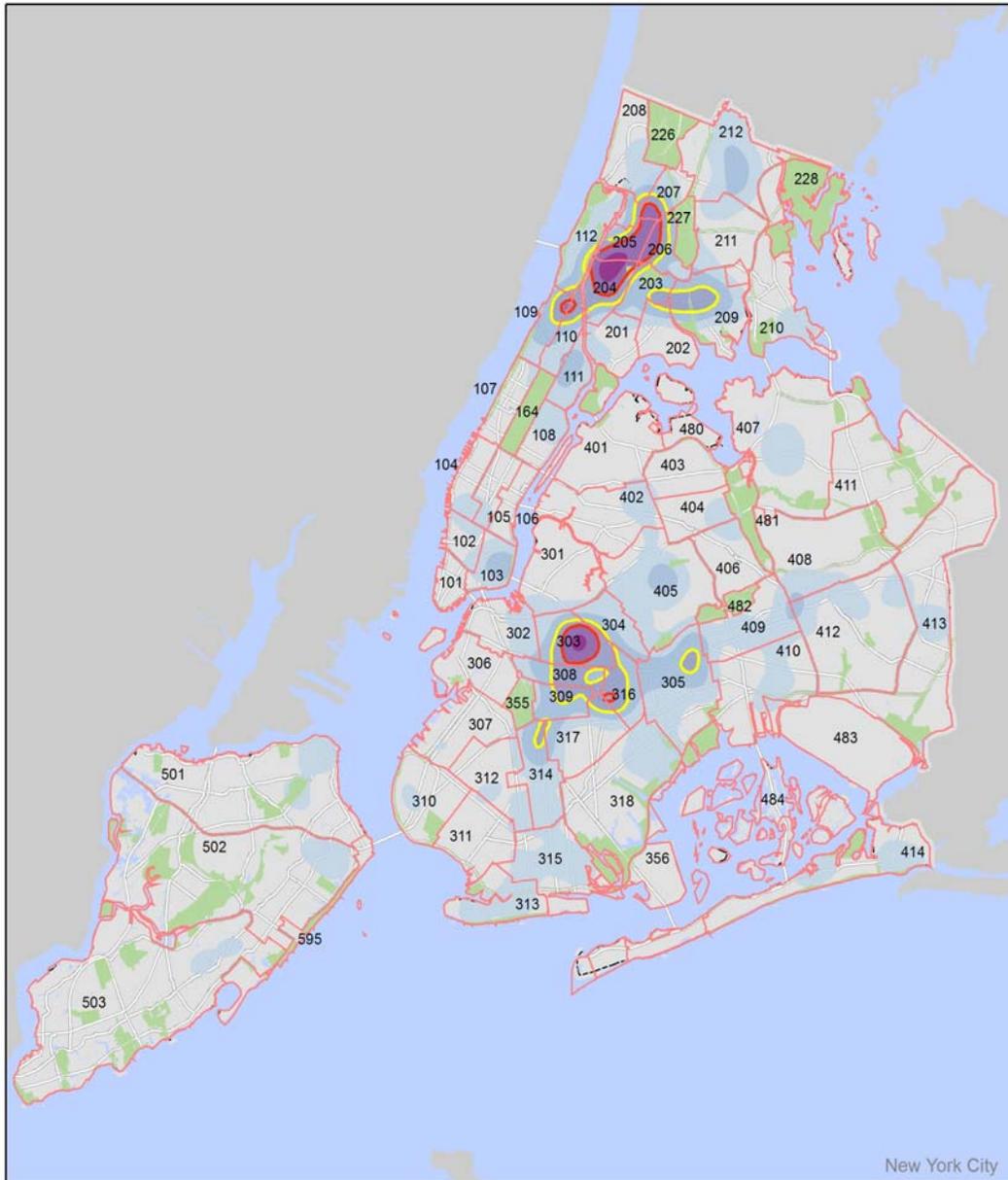
As previously mentioned in this report, a disproportionate number of family-related homicides occurred in the Bronx and Brooklyn. Family-related homicides from 2004 through 2008 were mapped in the Bronx within community district boundaries.³² The maps on subsequent pages display the resulting areas of high concentrations. Family-related homicides were concentrated – that is, 7 to 10 homicides occur within one mile of each other – in eight of the City’s 59 community districts. Five of those community districts are located in the Bronx (Community Districts 4, 5, 6, 7 and 9); and three are located in Brooklyn (Community Districts 3, 16, and 17).

While the aforementioned analysis suggests an association between the diminished educational, employment and economic status of the community and the frequency of homicide, socioeconomic data do not fully explain the observed frequencies in family-related homicides. For example, while the Bronx community districts with the highest level of family-related homicides are high in the itemized socioeconomic indicators, there are several other Bronx community districts that appear to have similar, if not worse, socioeconomic indicators, but lower rates of family-related homicides.³³ Therefore, the concentrations of family-related homicides in the Bronx warrant further investigation to identify additional contributing factors.

The FRC, through its participating City agencies and representative contract agencies, chose to conduct a community assessment in the targeted Bronx community districts (Community Districts 4, 5, 6, 7, and 9) to gain a better understanding of the concentration of family-related homicides in these neighborhoods. Since 2004, these five community districts in the Bronx experienced the highest frequency of family-related homicides in that borough, accounting for 61% (54 out of 89) of all family-related homicides citywide. A community assessment will also be initiated in the three Brooklyn community districts starting in the fall of 2010.

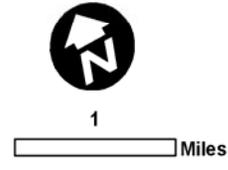
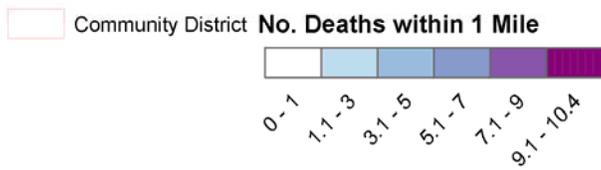
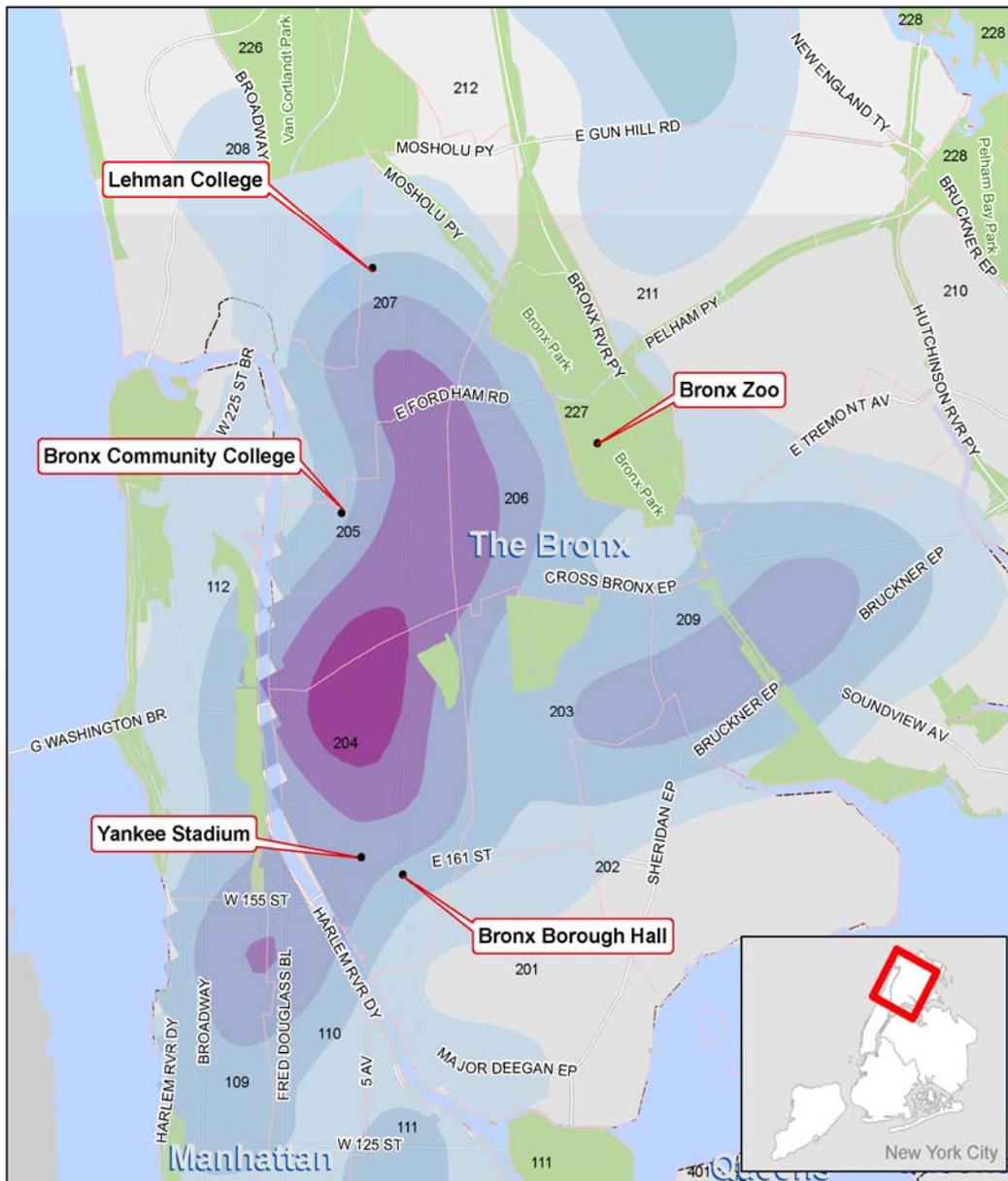
Through systematic information-gathering regarding current service needs of a population, a community assessment can be used to identify problems with service delivery and receipt strategies used to mitigate such problems, as well as the met and unmet needs among a population. Common components of a community assessment include review of secondary data sources (such as Census data) and information collection through in-depth individual meetings, small group meetings, and focus groups as well as a quantitative component such as a population-level survey. Through the community assessment, the FRC will assess services available within the community and the extent to which these services are used; what difficulties may exist in accessing services; and ways to maximize and network services that already exist.

Map 1: Family-Related Homicides 2004-2008: Victim Residence per Mile by Community District
Contours Indicate Percentage of Citywide Homicides within Area



Map 2: Family-Related Homicides 2004-2008: Victim Residence per Mile - Bronx Community Districts

Contours Indicate Percentage of Citywide Homicides within Area



Small Group Meetings with Community Organizations

Preliminary impressions shared during ongoing meetings with community organizations to date are summarized as follows:

Beliefs about and acceptance of domestic violence: Over 70 service providers from approximately 36 community based organizations participated in small group meetings. Many noted that among the residents they serve in the target area, domestic violence was ingrained in their communities. Service providers expressed that many residents in the target areas were raised in households where domestic violence was normalized. Service providers also reported that a commonly held perception among the residents they serve is that domestic violence involves only physical assaults and not other forms of abuse such as emotional, financial or sexual abuse. Many victims have suggested that the emotional abuse they endured was far more scarring than their physical abuse because it destroyed their self-esteem and emotional abuse often escalated to physical abuse. Residents have reported to service providers that domestic violence has not been widely discussed in their community and that there have not been adequate public education campaigns about domestic violence. As a result, some victims reported that this reinforces the acceptance of domestic violence. Service providers highlighted the need for members of the public and victims in particular to understand the full range of abusive and coercive behaviors that constitute domestic violence so that they will become educated, sensitized and will seek help and access services as early as possible.

Challenges to seeking services experienced by some immigrant victims: Service providers reported that many undocumented domestic violence victims face additional barriers to accessing services. For example, they noted that in some victims' country of origin, the police are not seen as a safe haven and, in fact, may symbolize further abuse. Furthermore, many victims have misconceptions about connections between the police and other government agencies, such as Immigration and Customs Enforcement (ICE). Community members may be unaware that City employees are precluded from asking about an individual's immigration status if they are a victim or witness to a crime. Finally, service providers noted that some interventions, such as obtaining an order of protection, are not seen as an effective intervention tool for all people and for all cultures. For example, undocumented domestic violence victims may be more financially reliant on the abuser because they do not qualify for most forms of public assistance on their own.

Lack of accountability for batterer: Some service providers expressed that victims feel that the legal system does not ensure accountability for batterers. Some service providers noted that through their own experiences with victims, there are not enough Batterers Accountability Programs³⁴ available in the target area but other providers reported the opposite, indicating a need for further assessment of this issue. Further, service providers reported that when batterers are court-ordered to enroll in a Batterer's Accountability Program, it is difficult to ensure compliance and victims related to them that they feel that there are inadequate consequences for non-compliance. Service providers suggested that victims would be better protected if the courts could ensure accountability and if there were more serious consequences for violating court orders.

Challenges in finding affordable housing: Service providers expressed concerns about the shortage of affordable housing options in New York City for clients who need to leave an abusive relationship. Even when their clients had a Domestic Violence Priority Section 8 Voucher or were participating in the Domestic Violence Work Advantage Program, they found it very difficult to find affordable housing. Service providers spoke about the challenging decisions their clients must face, such as choosing between staying in abusive relationships with stable housing or leaving the relationship and giving up that security. In addition, victims who have been living in domestic violence shelters and are unable to locate permanent housing may have no alternative but to enter the Department of Homeless Services shelter system.

Small Group Meetings with Survivors of Domestic Violence

The major themes that arose from the small group meetings with approximately 50 domestic violence survivors are as follows:

Importance of children in decisions to stay in or leave an abusive relationship:

Participants noted the pivotal role their children played in prompting them to reach out for services and ultimately leave an abusive relationship. Some women articulated their need to protect their children from violence, especially when the abuse was also directed toward their children. Others felt they needed to leave the relationship so that they could demonstrate to their children that violence in the home is unacceptable. One woman spoke of having left an abusive relationship after 30 years because she saw that her teenage son had become abusive towards his girlfriend and the mother wanted to be a positive role model for her son.

In contrast, children also factored into some women's decisions not to leave an abusive relationship. Many victims spoke about wanting to raise their children in a home with two parents, unlike their own experiences growing up, and also felt conflicted by their perception of the abuser's good parenting ability despite the violence they were experiencing. Finally, many victims noted that they were economically dependent on the abuser and that the economic stability that the abuser provided trumped concerns about their safety or the safety of their children.

Culture and language as barriers to services: Many participants stated that they encountered language barriers when trying to access services, from both community organizations as well as City agencies. One participant reported a frustrating experience of calling the New York City Domestic Violence Hotline, identifying herself as a French speaker, and then being transferred to a Haitian-Creole interpreter. Several participants reported being turned away from services entirely because of language barriers, despite having requested an interpreter. One woman reported that when she went into a community organization for assistance, the worker could not communicate with her in her language because of a language barrier and the worker told the woman that the organization could not assist her. Participants identified better and more widely available translation services as a key service needed in the community.

Clients also reported experiencing fear of being judged or not understood because of their cultural backgrounds when seeking services. Additionally, participants feared that their own community would judge them harshly and ostracize them if they identified themselves as victims of domestic violence.

Immigration Issues: Participants indicated that their immigration status was perceived as a barrier to services because they assumed they would not qualify for any services. Participants expressed considerable frustration that those without legal status qualified for fewer government programs which made it difficult to achieve economic stability to be able to leave and stay out of an abusive relationship.

Challenges to navigating the social services system: Participants reported feeling overwhelmed by the social services system and confused by what services each organization could provide. One woman stated, “when things get too complicated, you give up.” Some of the clients stated that it took time for the community based agencies to return their telephone calls, which was disheartening. Many victims stated that, initially, they became easily discouraged about obtaining help and leaving the abuse because they did not receive the services they were seeking. Another woman stated, “I wanted to die because no one was helping me... that first counselor [who was unhelpful] hurt me as much as my husband.” After summoning the courage to leave the abusive relationship, this woman felt let down by the social service organization she had expected would help her.

Importance of receiving services free of judgment: Most of the clients spoke about how much they value confidential services and the compassion shown to them by those who work at organizations. Some victims, however, felt that those who were working within the domestic violence field had become somewhat desensitized to their struggles. Many participants noted that anyone routinely assessing domestic violence victims needs to have on-going domestic violence training to ensure they remain sensitive to the concerns of victims. One woman explained:

Because when you have been abused and you go for help and some workers look at you cold and treat you bad because you have no papers and you have no language and that is even worse and then you give up. It makes it worse. They treat you bad like you are ignorant, like you should know what to do and then you didn't do it.

Reluctance to reach out to some City agencies: Participants had varying perceptions and attitudes about reaching out to City agencies for assistance. One woman reported that when she told her friend she was experiencing abuse, her friend erroneously told her not to go to the police to report it because they would take her children away from her. Many participants were also under the false impression that contacting the police would immediately mean that the Administration for Children's Services would become involved with their family.

Community Survey

A survey of community attitudes about domestic violence and knowledge of community resources is being conducted in the target area of the Bronx. From May 2009 through November 2009, 225 surveys were completed, with a diverse response from our convenience sample. While the majority of our respondents were between the ages of 45-54 years (26%), we were able to sample a wide range of ages, from 18 to 79. Thus far, 48% of respondents identified as Hispanic and 36% identified as Black.

Approximately two-thirds of survey respondents to date spoke English primarily at home (67%) while another 16% spoke primarily Spanish and 15% spoke both English and Spanish at home. Most respondents were born in the United States (70%), while 10% were born in Puerto Rico and 9% in the Dominican Republic. Of the respondents surveyed to date, 63% were female while 37% were male.

With a target sample size of 500 respondents, we aim to continue the street-intercept survey through the summer of 2010. We will over-sample males to ensure that we have a more equitable gender distribution.

Action Steps

The first wave of community assessment data from the Bronx target area, which pointed to several misconceptions about domestic violence in the community and the relative lack of community education, informed immediate action. OCDV collaborated with Alpha1 Marketing, the parent company of C-Town, Bravo and AIM Supermarkets, to place a public education message about domestic violence assistance on the front page of a weekly circular. This circular was then distributed in 123 C-Town, Bravo and AIM Supermarkets, including 36 in the Bronx. In addition to the circular placement, a web banner was placed on the supermarkets' websites which are viewed over 60,000 times a week. The FRC is currently exploring other opportunities to expand this public education campaign.

OCDV will continue the Bronx community assessment over the next year, aiming to achieve a convenience sample of 500 community survey respondents. Members of the FRC will continue to advise on the implementation and data analysis as well as give feedback on findings. Lessons learned from the ongoing community assessment will continue to inform service coordination, program planning, and outreach in the targeted areas. Moreover, the Bronx community assessment will inform the planning and implementation of a similar assessment in a high-fatality target area of Brooklyn (Community Districts 3, 16, and 17). The Brooklyn community assessment will commence in the fall of 2010.

The FRC has continued its commitment to developing an environment that facilitates disclosure by domestic violence victims in City agencies and nonprofit organizations. Over the last year, the Department of Homeless Services ("DHS") and OCDV partnered to develop a domestic violence awareness and referral training program for employees of Adult Family and Families with Children homeless shelters. The training covered the following topics: (1) prevalence of domestic violence in New York City; (2) power and control dynamics of domestic violence; (3) potential barriers to leaving a domestic

violence situation; (4) intersection of mental health, physical disabilities, substance abuse and immigration issues which arise in domestic violence cases; (5) identification of potential signs of domestic violence; and (6) domestic violence resources in New York City. OCDV piloted the training for DHS shelter staff in the Bronx focus areas, where more than 215 DHS staff were trained. Due to the success of the Bronx training, the pilot program was expanded to the high-fatality target Brooklyn community districts where OCDV trained an additional 170 DHS staff. This program was then expanded to Queens, Manhattan and Staten Island where an additional 290 DHS staff were trained. In total, 675 DHS employees received this training to date, with consistently positive feedback.

Over the next year, a similar training program will be developed and implemented with the New York City Housing Authority, a member agency of the FRC, for the training of their agency staff in the borough of the Bronx.

Summary

This report describes family-related homicides that occurred in New York City between 2002 and 2008. Family-related homicides declined by 8%, from 76 in 2002 to 70 in 2008. Family-related homicides involving perpetrators who were intimate partners of the victims declined by 10%, from 41 in 2002 to 37 in 2008.³⁵ The decreases are not statistically significant and homicide counts fluctuate in the intervening years, however, the reductions are still noteworthy.

The weapon used in family-related homicides has shifted in recent years. Cutting instruments, including knives, used in family-related homicides increased from 7 in 2007 to 31 in 2008. As a result, almost 45% of family-related homicides in 2008 were committed using a cutting instrument, making cutting instruments the most commonly used weapon that year. In contrast, the number of family-related homicides committed with a firearm declined by 28% – from 18 in 2007 to 13 in 2008.

By matching City agency and representative contract organization records with homicide cases, the FRC found that almost half of the family-related homicide victims or perpetrators had never had any contact with a City agency or a representative contract organization. The proportion of victims and perpetrators who had not received services prior to the homicide has remained approximately the same in all FRC Annual Reports.

The FRC mapped homicides from 2004 through 2008. Family-related homicides remained concentrated in eight of the City's 59 community districts – Community Districts 4, 5, 6, 7 and 9 in the Bronx and 3, 16 and 17 in Brooklyn. The Bronx community districts accounted for the majority of all family-related homicides that occurred in the Bronx. The majority (61%) of family-related homicide victims resided in neighborhoods with more than 20% of the population living below the poverty level.

Given the concentration of family-related homicide victims living in these communities, the FRC developed and began to implement the Bronx community assessment. Under the direction of the FRC Coordinator, the FRC has begun an assessment in Community Districts 4, 5, 6, 7, 9 that includes the following activities, among others: (1) informational meetings with over 50 identified community stakeholders; (2) six small group meetings with domestic violence survivors who reside in the target community; and (3) almost 250 surveys have been administered in the target areas of the Bronx to community members. The community assessment will continue through the first half of 2010. A similar effort will be launched in Brooklyn in 2010 as well.

While the community assessment is still underway, preliminary findings are converging on these themes: (1) cultural acceptance of domestic violence in the target communities in the Bronx; (2) a lack of accountability for the batterer; and (3) lack of knowledge regarding the availability of services for domestic violence victims in their community. Preliminary action has been taken on the need for additional knowledge of services through strategically placed messaging in grocery store circulars at no cost. Lessons learned from the community assessment will continue to inform service coordination, program planning and outreach in the targeted areas.

Appendix A: Family-Related Homicides Data by Year (2002-2008)

2002-2008 Family-Related Homicides Yearly Numbers

Years/ Characteristics	2002	2003	2004	2005	2006	2007	2008	Total
Total Family Related Homicides	76	74	67	68	71	48	70	474
Victims By Gender								
Child Female	7	11	5	4	15	8	6	56
Adult Female	44	40	37	38	32	22	29	242
Child Male	9	6	7	11	6	8	10	57
Adult Male	16	17	18	15	18	10	25	119
Victims By Age								
<1	8	9	7	6	5	10	8	53
1-10	8	8	5	9	16	5	5	56
11-17	1	0	1	2	5	1	3	13
18-24	8	11	8	11	3	2	7	50
25-45	37	28	31	25	26	18	30	195
46-59	5	10	8	12	8	6	10	59
60+	9	8	7	3	8	6	7	48
Victims By Race								
Black	41	38	32	28	28	23	29	219
Hispanic	25	18	20	22	35	10	23	153
White	3	10	9	9	6	11	15	63
Asian/Indian	0	7	5	9	2	4	3	30
Other/Unknown	7	1	1	0	0	0	0	9
Total Family Related Homicides by Borough								
Brooklyn	37	28	24	19	26	16	25	175
Bronx	15	11	18	23	22	8	18	115
Manhattan	9	12	10	12	12	4	7	66
Queens	15	22	13	10	8	14	17	99
Staten Island	0	1	2	4	3	6	3	19
Perpetrator By Age								
<1	0	0	0	0	0	0	0	0
1-10	0	0	0	0	0	0	0	0
11-17	2	2	1	1	7	3	2	18
18-24	14	17	13	12	12	13	14	95
25-45	52	41	44	43	47	28	47	302
46-59	5	11	4	11	11	7	13	62
60+	3	5	4	3	0	2	3	20
Unknown	0	2	2	0	0	0	0	4
Perpetrator to Victim Relationship								
Intimate Partner								
Spouse/Live-In	17	14	19	16	9	11	15	101
Common Law	17	14	15	14	11	7	10	88
Child in Common	7	7	7	6	3	2	9	41
Same Sex	0	1	1	0	1	0	3	6
Other								
Parent	17	21	15	17	27	20	15	132
Child	6	4	5	3	11	7	8	44
Other Family	12	14	6	14	15	6	19	86
Other/Unknown	0	3	0	0	0	0	0	3
Homicide Method/Weapon								
Cutting/Knife	26	20	23	19	31	7	31	157
Firearm	22	15	20	21	12	18	13	121
Blunt Trauma	11	9	9	10	11	13	13	76
Asphyxiation/Strangulation	9	13	9	10	5	4	6	56
Other/Unknown	8	17	6	8	12	6	7	64

Endnotes

¹ For the purposes of this report, “family-related homicide” is defined in Local Law 61 of 2005 creating the New York City Fatality Review Committee as a homicide involving persons related by marriage, persons related by blood; persons legally married to one another; persons formerly married to one another regardless of whether or not they still reside in the same household; persons who have a child in common regardless of whether or not such persons have been married or have lived together at any time; persons not legally married, but living together in a family-type relationship; and persons not legally married, but who have formerly lived together in a family-style relationship. This definition includes same sex partners.

While not reflected in this report, effective July 21, 2008, the New York State Criminal Procedure Law and the Family Court Act was amended to allow victims in other intimate relationships (whether or not they ever resided together with the perpetrator) to seek an order of protection in Family Court. The new law expands the definition of family/household member to include victims who are or have been in an intimate relationship, regardless of whether they have lived with the abuser or whether the relationship is of a sexual nature. Based on this amendment to New York State law, the New York City Police Department (“NYPD”) definition of family-related offenses has been amended to include individuals in intimate relationships. This change is reflected in all future reports issued by the Fatality Review Committee, beginning with this report.

² “Intimate partner homicides” is defined by the New York City Fatality Review Committee as all relationships defined in endnote 1 supra except other family members, such as parents, brothers, sisters, uncles, cousins, nieces, nephews, children and grandchildren.

³ Local Law Number 61 for the year 2005, Section 2.

⁴ The New York City Fatality Review Committee Annual Reports for 2006, 2007 and 2008 can be obtained through the Mayor’s Office to Combat Domestic Violence website at <http://www.nyc.gov/html/ocdv/html/publications/publications.shtml>.

⁵ Local Law Number 61 for the year 2005, Section 5. For a definition of “family-related” homicides see endnote 1.

⁶ Both the number of total citywide homicides and homicides designated as family-related homicides were obtained from the NYPD. In compiling annual figures for family-related homicides, the NYPD counts the actual family-related homicides that occurred during that year and any other homicides that have been reclassified as “family-related” homicides from previous years. The NYPD reclassifies homicides as family-related because, on occasion, it is not immediately known to the NYPD that the perpetrator was a person who falls within the definition of “family-related.” Since the FRC is charged with reviewing access by victims to services, the FRC chose to review data on homicides that actually occurred during calendar years 2004, 2005, 2006, 2007 and 2008.

⁷ When a noteworthy change is seen from 2007 to 2008, frequencies were compared between these two points in time to see if the change held for all subgroups. Z-tests and chi-square tests were used to determine significant differences between subgroups.

⁸ The Administration for Children’s Services (“ACS”), among other things, could provide only aggregate, not individual data on contact and was excluded from the analysis of individuals contacting multiple agencies.

⁹ ACS did not provide the time frame during which the contact occurred relative to the homicide.

¹⁰ The number of all citywide homicides and homicides designated as “family-related” were obtained from the NYPD. Overall citywide homicide numbers are preliminary NYPD Compstat numbers. The Department of Health and Mental Hygiene (“DOHMH”), which also reports homicides annually, uses International Classification of Diseases, Version 10 coding system, to identify homicides in New York City. Therefore, DOHMH counts may differ slightly from NYPD counts.

¹¹ See endnote 2

¹² 2000 Census, Population Division, New York City Department of City Planning (August 2009). See http://www.nyc.gov/html/dcp/html/census/demo_profile.shtml

¹³ 2000 Census, Population Division, New York City Department of City Planning (August 2009). See http://www.nyc.gov/html/dcp/html/census/demo_profile.shtml

¹⁴ 2000 Census, Population Division, New York City Department of City Planning (August 2009). See http://www.nyc.gov/html/dcp/html/census/demo_profile.shtml

¹⁵ *New York City Domestic Violence Fatality Review Committee: Annual Report 2007*, New York City Domestic Violence Fatality Review Committee (December 2007).

¹⁶ Between 2002 and 2008, there were 501 perpetrators involved in 474 family-related homicides. In 2007, there were 79 perpetrators involved in the 70 family-related homicides.

¹⁷ The population figures were obtained from the United States Census Bureau, 2000 Census, American Factfinder, United States Census Bureau website accessed August 26, 2008.

¹⁸ See endnote 2.

¹⁹ See endnote 2.

²⁰ For all agencies except the New York City Housing Authority (“NYCHA”), “contact” is defined as the victim or perpetrator having an interaction with the agency, such as obtaining a service, which was documented in the agency’s records. With respect to NYCHA, the victim and/or perpetrator was considered to have had contact with NYCHA if the victim/perpetrator was a resident in a NYCHA property as reflected in NYCHA records.

²¹ ACS could not be included because it did not provide information regarding contact that occurred within one year of the homicide and was therefore excluded from the time analysis.

²² ACS did not provide case specific information regarding contact that occurred within one year of the homicide. The information in this paragraph reflects victim/perpetrator contact and reports of domestic violence allegations that could have occurred at any point in time. The vast majority of contact that ACS had with victims/perpetrators occurred more than 5 years before the homicide.

²³ Burke, J. O’Campo, P. and Peak, G., *Neighborhood Influence and Intimate Partner Violence: Does Geographic Setting Matter*, Journal of Urban Health: Bulletin of the New York Academy of Medicine, Vol. 83 (2): 182-194 (March 2006); O’Campo P., Gielen AC, Faden RR, Xue X, Kass N, Wang MC, *Violence by Male Partners Against Women During the Childbearing Years: A Contextual Analysis*, American Journal of Public Health, Vol. 85(8): 1092-1097 (August 1995); O’Campo, P. Burke, J., Peak, G., McDonnell, K.

and Gielen, A., *Uncovering Neighborhood Influence on Intimate Partner Violence Using Concept Mapping*, Journal of Epidemiology and Community Health, Vol. 59: 603-608 (2005) and Miles-Doan, Rebecca, *Violence Between Spouses and Intimates: Does Neighborhood Context Matter?*, Social Forces, December 1, 1998.

²⁴ The United States Census Bureau defines “poverty areas” as census tracts where at least 20 percent of residents live below the poverty level. See, <http://www.census.gov/hhes/www/poverty/definitions.html>. The United States Census determines poverty status for all people except institutionalized people, people in military group quarters and people in college dormitories. The United States Census uses a set of income thresholds that vary by family size and composition to detect who is poor. If a family’s total income is less than the family’s threshold, then that family, and every individual in it, is considered poor. The poverty threshold for 2007 for a single person is \$10,590; a family of two is \$13,540; a family of three (two children under 18) is \$16,750 and a family of four (with three children under 18) is \$21,100. Information was obtained from the New York City Department of City Planning.

²⁵ *Increasing Opportunity and Reducing Poverty in New York City*, The New York City Commission for Economic Opportunity (September 2006).

²⁶ Household income includes the income of the householder and all other people 15 years and older in the household, whether or not they are related to the householder. The median household income is the point that divides the household income distribution into halves, one half with income above the median and the other with income below the median. The median is based on the income distribution of all households, including those with no income. For further information, see, *Income, Earnings, and Poverty Data from the 2007 American Community Survey*, United States Census Bureau, U.S. Department of Commerce, Economics and Statistics Administration. (August 2008).

²⁷ United States Census Bureau, State and County Quick Facts, New York City. United States Census Bureau website accessed on October 3, 2009. *See*, <http://quickfacts.census.gov/qfd/states/36/3651000.html>.

²⁸ According to the United States Census, “unemployed” includes all civilians 16 years old and over if they were neither “at work” nor “with a job but not at work.” Information was obtained from the New York City Department of City Planning. For unemployment, census tracts with unemployment rates higher than 16% were utilized in the analysis because only 18% (403 of the 2,217) of all census tracts that comprise New York City have an unemployment rate higher than 16%. This compares to 42% (928 out of 2,217) that are considered areas of poverty under the United States Census Bureau definition.

²⁹ 2000 Census, Population Division, New York City Department of City Planning (August 2008).

³⁰ 2000 Census, Population Division, New York City Department of City Planning (August 2008).

³¹ This analysis excluded seven family-related homicides recorded by the New York City Police Department from January 1, 2004 through December 31, 2008. Two cases were excluded because the victims’ address was not known and three other cases were excluded because the victims’ residences were not within New York City.

³² Locations of the family-related fatalities were geocoded using the NYC Department of City Planning’s Geosupport software. Point locations were assigned based off of the victim’s home address. The point locations for each fatality were then aggregated up into a raster density surface using ArcGIS 9.2 and the Spatial Analyst extension. The Spatial Analyst extension calculates a magnitude per unit area based off of the concentration of the point locations. Hawth’s Analysis Tools 3.17 was then used to create the contours from the density surface. In order to simplify the display of the density surface, family-related homicides occurring in the 0 - 1 break are not symbolized on the maps.

³³ As noted in the 2008 FRC Annual Report, Bronx Community Districts 4, 7 and 9 do not rank among the top five community districts in the Bronx with the highest percentage of residents living in poverty or unemployed, nor do they rank among the five community districts with the lowest percentage of residents obtaining a high school diploma. District 17 in Brooklyn does not rank high among the borough’s community district with low poverty rates or low education attainment. See pages 22 and 23 of the FRC 2008 Annual Report.

³⁴ Courts often mandate, or batterers can voluntarily choose, to attend a Batterer Accountability Program. Many of these educational programs are approximately 26-weeks long and assist the court in monitoring the batterer while providing them with information about the harm of domestic violence and an opportunity to choose to change their behavior. While recognizing the historical, social and cultural aspects of domestic violence, these programs emphasize that batterers are making a personal choice to abuse their partners and can make a personal choice to stop.

³⁵ *See* endnote 2.

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