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The Domestic Violence High Risk Team Model



What Is the Domestic Violence High Risk Team Model?

The Domestic Violence High Risk Team (DVHRT) Model is a nationally recognized domestic violence homicide prevention framework, identified by the Department of Justice, Office on Violence Against Women (OVW) as a “leading promising practice in the field.” With a goal of preventing intimate partner homicides (IPH) and near-lethal assaults, the Model has been successfully replicated the Model in a variety of jurisdictions across the country.



The DVHRT Model consists of four core components: 1) early identification of the most dangerous cases through evidence-based risk assessment; 2) increased access to supportive services for high-risk victims; 3) increased offender monitoring and accountability and 4) a coordinated response to high-risk cases through a multidisciplinary team.

Research shows that many intimate partner homicides are predictable; and if they are predictable, they are preventable. The DVHRT Model leverages that predictability by incorporating research-based risk assessment into a community's domestic violence response system to identify the most dangerous cases.

The DVHRT Model was also created with the understanding that when DV response systems share information and work together they have greater impact than when they operate in silos. High-risk cases are monitored by a multidisciplinary team that shares case information and implements coordinated intervention plans to mitigate the danger. The goal of a DVHRT is to reduce IPH by both monitoring specific high-risk cases and closing gaps in the domestic violence response system.

What Agencies Participate On a DVHRT?

DVHRTs should include representation from stakeholders with access to critical case-related information. To ensure that DVHRTs remain victim centered, teams are led or co-led by a non-governmental domestic violence agency representative. Other core partners on the team include law enforcement, prosecution, probation (or pretrial services if applicable), parole and corrections. When possible, court-ordered offender intervention programs also participate.

IPH disproportionately impacts marginalized communities, particularly women of color and immigrants. The most successful DVHRTs are community driven projects that reflect the community. **For this reason, DVHRTs should include culturally specific organizations.**



How Do DVHRTS Work?

DVHRTs meet regularly to review newly identified cases; develop proactive responses to address the specific risk factors of each case; and implement strategies intended to interrupt the escalation of violence. DVHRTs continue to provide ongoing monitoring and management to ensure that cases proceed as intended by providing updates on follow-up actions, case activity, and other relevant information.

Team members communicate regularly between meetings, sharing important updates such as probation violations or sentencing outcomes. Information is communicated in real-time so that team members can swiftly react to changes in a case or to a victim's risk level. The collaborative nature of the team and ongoing communication optimizes the domestic violence system's response and supports victims in real time.

DVHRTs also help stakeholders to identify and close gaps in the local system's response to IPV. By regularly convening stakeholders, sharing case-specific information, and reducing information silos, DVHRTs allow teams to troubleshoot and develop solutions that improve the system's response to IPV for all victims. Issues are identified formally through data collection on cases and informally as a natural consequence of discussing cases.



What Are the Core Components of a DVHRT?

1. Use of Evidence-based Risk Assessment to Identify High-Risk Victims

Risk assessment instruments that predict lethal or near lethal violence are used within the model to identify cases that are escalating to lethal levels and to provide a response that matches the risk level. Research has found that many survivors of IPH have contact with law enforcement prior to their murder. Anywhere between 39–91% of female victims of IPH were in contact with law enforcement prior to their homicide.^{i,ii,iii,iv}

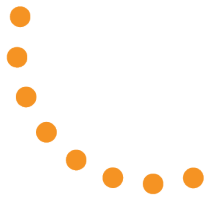
These findings indicate that law enforcement has a unique opportunity to identify cases that are escalating towards homicide.

THE DANGER ASSESSMENT FOR LAW ENFORCEMENT (DA-LE) WAS DESIGNED TO WORK WITHIN THE DVHRT MODEL.

The DA-LE is an 11-question, shorter derivative of the DA that is administered by law enforcement officers responding to calls involving IPV. It has a built-in cutoff score that screen approximately 30% of cases into the high-risk category. The lower screen in rate helps decision-makers focus on the most dangerous cases and helps to identify a manageable volume of cases for intensive risk management when used within the context of DVHRTs. The DA-LE was developed through a researcher and practitioner partnership between the Jeanne Geiger Crisis Center, Dr. Jacquelyn C. Campbell, and Dr. Jill Theresa Messing (MSW, PhD of Arizona State University School of Social Work).

Domestic Violence programs also identify cases that may be sent to a DVHRT for risk mitigation. Victims identified through this access point decide if their case will move forward to a DVHRT. As domestic violence program may have additional time with survivors, the Danger Assessment risk instrument is used in this setting.

- **The Danger Assessment** was created by Dr. Jacquelyn C. Campbell (PhD, RN, FAAN of Johns Hopkins University School of Nursing) for use with domestic violence advocates to assess the likelihood of lethality or near-lethality occurring in IPV cases.^{7,8} The DA has been scientifically validated and found to have a high level of predictive validity.



INCREASING PATHWAYS TO SAFETY

Building community awareness of risk factors and screening all victims for risk are critical strategies of the DVHRT approach. Some high-risk victims may never engage with the criminal legal system and may not want to have their case monitored by a multidisciplinary team. Homicide prevention efforts need to include both improving the response of the criminal legal system and creating new pathways to safety. This includes expanding access points for screening where marginalized communities seek help. These access points may include trusted community-based organizations such as churches, resettlement centers and community healthcare.



Intimate partner homicide disproportionately impacts marginalized communities, particularly women of color and immigrants. The most successful DVHRTs are community-driven projects that reflect the community

2. Increasing victim access to supportive services

Victims are more likely to underestimate than to overestimate their risk of being killed by their partner. Research indicates that risk assessments increase victims' understanding of the danger they are in, and this raised awareness leads to victims taking protective actions for themselves. DVHRT create protocols to quickly connect victims to services that are at high risk of being killed. Risk assessments provide important information to aid in safety planning with survivors. DVHRT work to eliminate barriers to services by coordinated efforts across multiple victim serving organizations.

3. Increased Offender Monitoring and Accountability

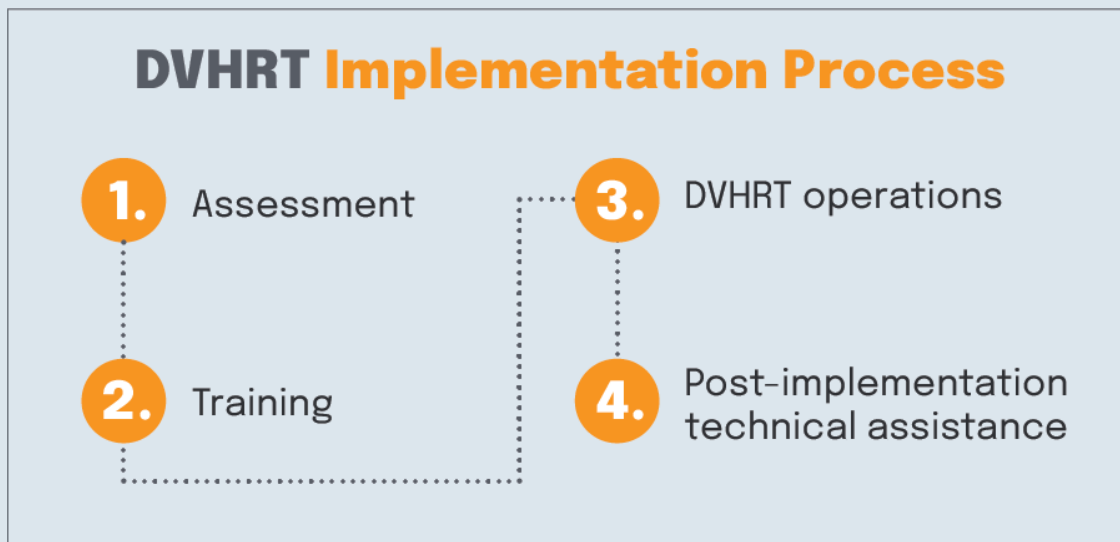
The pretrial period can be a dangerous time for victims, particularly if they have recently left the relationship or have become estranged from their abusive partner. The DA-LE provides critical information to prosecutors, judges and others making pretrial decisions. Risk assessment instruments like the DA-LE can help the court distinguish defendants who pose a greater risk to their victims from those who pose a lower risk.

The DVHRT monitors cases as they progress through the criminal justice system to ensure that the system is providing an optimal response at each phase of the process. This includes ensuring that firearms are removed whenever possible, addressing witness intimidation, serving warrants and protection orders, timely addressing violations of probation, and ensuring that offenders have access to offender treatment programs when available.



4. Providing A Coordinated Response Through a Multi-Disciplinary Team

The use of evidence-based risk assessment provides a common language across multiple agencies when discussing high-risk cases. By sharing information, a comprehensive view of the case is available to better inform decision making. This allows DVHRTs to coordinate and implement strategies to disrupt the escalation of violence. DVHRTs provide ongoing case monitoring and management to ensure that a reasonable degree of safety is maintained.



What is the DVHRT Implementation Process?

There are four steps to implement the DVHRT Model: 1) Assessment 2) Training, 3) DVHRT operations, and 4) Post-implementation technical assistance.

1. Assessment:

Relevant information is gathered about the domestic violence response system in order to customize the Model to each community's unique characteristics and needs. The assessment process helps to incorporate and build upon community strengths and address any challenges identified, creating a strong foundation for a DVHRT.



2. Training

Discipline specific trainings are provided to prepare stakeholders for DVHRT implementation. Trainings are tailored to develop understanding of the DVHRT and the DA-LE instrument and how risk information will be used across the DV response system.

Training is divided into two key parts: 1) A four-part training series for the domestic violence agency(ies) and 2) Trainings associated with implementation of the DA-LE instrument.

Training can also be provided to community-based organization to create additional access points to risk assessment screening.

DOMESTIC VIOLENCE AGENCY TRAINING SERIES:

The four-part training series prepares domestic violence agency supervisors for integration of the Danger Assessment. It certifies advocates in use of the Danger Assessment, improves skills in working with survivors at high-risk of lethal domestic violence and establishes mechanisms to coordinate risk management across response systems. In addition, advocates build skills to identify and respond to strangulation cases.

DA-LE TRAININGS:

Prior to trainings associated with the DA-LE the following must be established:

- Development of law enforcement policy on DA-LE administration
- Development of protocol for connection of high-risk victims to DV services in collaboration with DV agency partner(s)



Trainings associated with DA-LE implementation include:

- Law enforcement officers receive training on the administering the DA-LE and its accompanying policy and protocol
- Training is provided through a Train-the-Trainer format or as direct training to officers
- Training is provided to other stakeholders that interface with the DA-LE, including advocates, prosecutors and judges

3. Operations Training and Technical Assistance

DVHRT operations is a collaborative process that prepares DVHRTs to begin monitoring and managing high-risk cases. DVHRT partners gain a deeper understanding of their respective roles and responsibilities and what interventions each partner can offer. Partners gain in-depth knowledge of the mechanics of how a DVHRT operates through a customized training. Coaching is also provided to the DVHRT Coordinator to assist in building skills to successfully manage the DVHRT.



4. Post-implementation Technical Assistance

Post implementation technical assistance can include a wide range of activities to support the success and sustainability of the DVHRT, technical assistance often includes data collection and analysis and DVHRT meeting observation and feedback.

Data is used to measure the impact of the DVHRT and promotes program sustainability. The data helps communities to evaluate their helps to inform any adjustments to the program. Data is also used to track intimate partner homicide events and encourages analysis of the domestic violence system response.

ⁱ Georgia Commission on Family Violence & Georgia Coalition Against Domestic Violence, Georgia Domestic Violence Fatality Review Project, 2015.

ⁱⁱ Koppa and Messing, Can Justice System Interventions Prevent Intimate Partner Homicide? An Analysis of Rates of Help Seeking Prior to Fatality. *Journal of Interpersonal Violence*. June 2019.

ⁱⁱⁱ Messing et al. Police Departments' Use of the Lethality Assessment Program: A Quasi-Experimental Evaluation. US Department of Justice, 2014.

^{iv} New York City Domestic Violence Fatality Review Committee, 2021 Annual Report.