Domestic Violence Intervention & Investigation

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C-A-L-M

CONTROL

- Control Yourself
  - Do not join the dispute
  - Remember that bias only adds to the potential for violence
  - Do not react impulsively or emotionally
  - Watch your tone of voice and body language
- Control the Disputants
  - Start with the least aggressive technique
  - Be aware of territorial instincts
  - Be aware of cultural differences
  - Consider phrasing commands as requests

C-A-L-M

APART

- Separate the Disputants
- Be Cautious if a Lone Officer
- Avoid kitchens, bedrooms and bathrooms (may be weapons in bedrooms, will be weapons in kitchens)

LOOK for weapons

MODERATE the mood

- Seat Disputants
- Voice Instructions

Arrest Strategy

- Do not rush
- Do not discount the victim as a possible problem
  - Never underestimate the victim's aggressiveness or danger
  - Attempt to explain your position to victim and suspect
  - Brief them on your legal authority
  - Communicate to both parties that domestic violence is a crime

Private Rules for Responding Officers

- Avoid personal involvement
- Don't ridicule, insult, or talk over disputants' heads
- Hear both sides
- Show empathy, not sympathy, to both sides
- Regard the problem with importance
- Be sensitive to cultural differences

Private Rules for Responding Officers

- Remember that people in crisis need to vent feelings, to understand what's happening, and to maintain control over themselves.
- Stay calm, as screaming may increase risk for violence.
- Listen attentively to danger clues in words.
- Never sacrifice safety attempting to build rapport.

Objectives of Family Crime Investigations

- Investigating officer should be able to make his or her case without the cooperation of the victim.
- This is routinely accomplished in murder investigations
- By building a strong case in a domestic violence investigation, the officer may intervene, break the cycle of violence and prevent a future homicide.

Objectives of Family Crime Investigations

- Establish Probable Cause
- Identify the Offender
- Locate the Offender
- Identify the Victim
- Collect and Preserve Evidence

Identifying the Victim-- Establishing Probable Cause

What are some physical signs of abuse?

- Recurring or unexplained injuries; bruises
- Combination of new and old injuries
- Injuries in areas usually covered by clothing
- Burns in unusual places (on back)
- Injuries to head or face
- Spongy scalp (soft to touch because of pulled hair)
- Signs of strangulation

Strangulation Study: San Diego, California

Studied 200 strangulation cases over a five year period.

- 62% of victims had no visible injury
- 22% of victims had minor visible injuries
- 16% had significant visible marks

Strangulation versus Choking

- When documenting injuries officers should record the incident as “strangulation” and not “choking.”
- Choking is characterized by an obstruction in the airway
- Strangulation is a form of asphyxia characterized by closure of the blood vessels and air passages of the neck as a result of external pressure on the neck.
- Ten percent of violent deaths in the U.S. each year are due to strangulation- six females to each male

Three Types of Strangulation

- **Hanging**- nearly always suicidal
- **Ligature Strangulation**
  - Garroting by telephone cords, rope, wire, clothing, or other mean
  - If death results, these cases are nearly always homicides.
- **Manual Strangulation**
  - Hand
  - Forearms
  - Standing or kneeling on neck

Medical Examination of Strangulation

Obstruction of carotid artery, unconsciousness occurs:

- Most common cause of strangulation
- Applying 11 pounds of pressure for 10 seconds
- If pressure released immediately, consciousness is usually regained in 10 seconds

Obstruction of jugular vein

- Secondary cause of strangulation
- Applying 4.4 pounds of pressure completely obstructs

Obstruction of the tracheal

- Applying 33 pounds of pressure to completely obstruct
- Can cause fracture of tracheal and death

** Brain death occurs if strangulation persists for 4 to 5 minutes

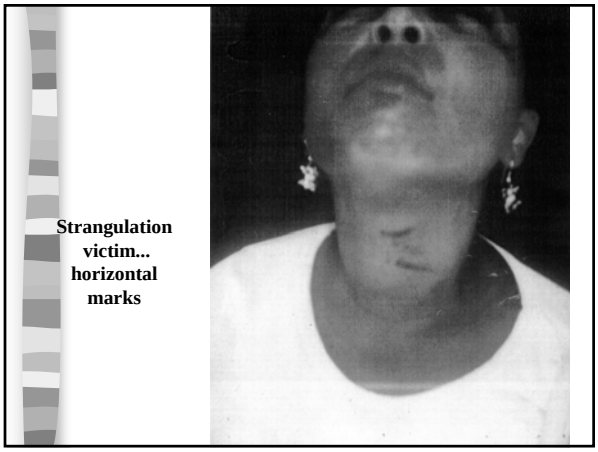
Symptoms and Signs

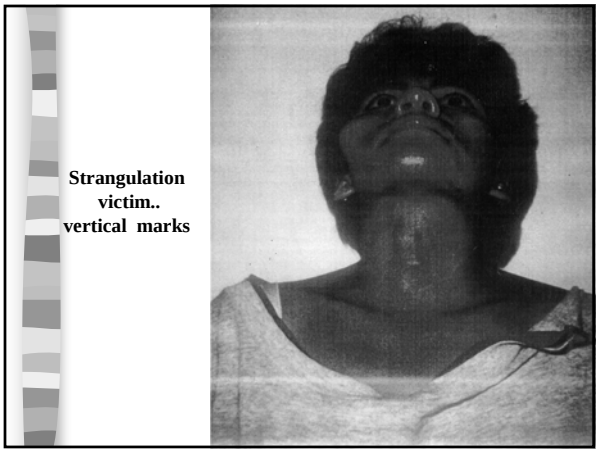
What are some symptoms or signs of strangulation you would expect to see?

- Neck pain
- Sore throat
- Scratch marks
- Tiny red spots, red linear marks or bruising
- Hoarseness
- Loss of voice
- Difficulty swallowing
- Light headed or head rush
- Fainting or unconsciousness

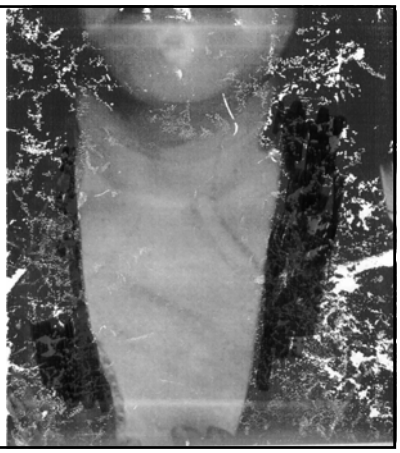
Symptoms and Signs

- Nausea or vomiting
- Loss of bodily function
- Red eye
- Rope or cord burns
- Neck swelling
- Miscarriage


Strangulation victim... horizontal marks


Strangulation victim.. vertical marks

Strangulation victim #3..



Victim 4

Strangled with an "object"

Lung Damage

- Lung damage may result from the vomit being inhaled by the victim during strangulation.
- This may lead to aspiration pneumonitis- a very serious condition as the gastric acids begin to digest the lung tissue.
- Milder cases of pneumonia may also occur as much as a few days later.
- The lungs may also fill with fluid due to complex pathological processes that may arise from direct pressure placed on the neck.

No Visible Injuries

- Officers should always call EMS to evaluate the victims because some of the internal injuries, which can be fatal, may not be apparent to the victim.
- Because of the underlying brain damage by lack of oxygen during the strangling, victims have died up to several weeks later.

Questions to Consider in Strangulation Cases

- During interview, officers should consider asking detailed questions of the victim or witnesses such as:
- Can you describe in detail how the suspect strangled the victim?
- Did the offender use one or two hands?
- How much force was used? How hard did he grab the victim's throat?
- Was the victim shaken simultaneously while being strangled?
- How much shaking? Little to whipping back and forth?

Questions to Consider in Strangulation Cases

- Did the victim have any difficulty breathing?
- Did the victim report urinating or defecating?
- Did the victim feel light headed, faint or lose consciousness?
- Did the victim complain of nausea or report vomiting?
- Any complaint of pain, discomfort, trouble swallowing or raspy voice?
- Any prior incidents of strangulation?
- Any pre-existing neck injuries?
- Will the victim release medical records?

Questions to Consider in Strangulation Cases

- Have you described the visible injuries in detail and photographed them clearly?
- Have you taken follow-up photographs 1-3 days after the incident?
- If an object was used to strangle the victim, was it collected and photographed?
- Was the suspect wearing any rings?
- Was there any corroborating witnesses to the incident?

Identifying the Victim--Establishing Probable Cause

What are socio-psychological signs of abuse?

- Depression or withdrawal
- Hesitation to talk openly
- Fearful of police or other helping professionals
- Resignation or denial

Identifying the Victim--Establishing Probable Cause

What Are Financial Signs of Abuse?

- Lack of knowledge about financial matters
- Unable to make financial decisions or pay bills without consulting another.

Identifying the Victim--Establishing Probable Cause

What Are Signs of Denial of Civil Rights?

- Unwarranted social isolation
- Signs of physical constraint
- Unwarranted schedule of imposed activities

Identifying the Victim--Establishing Probable Cause

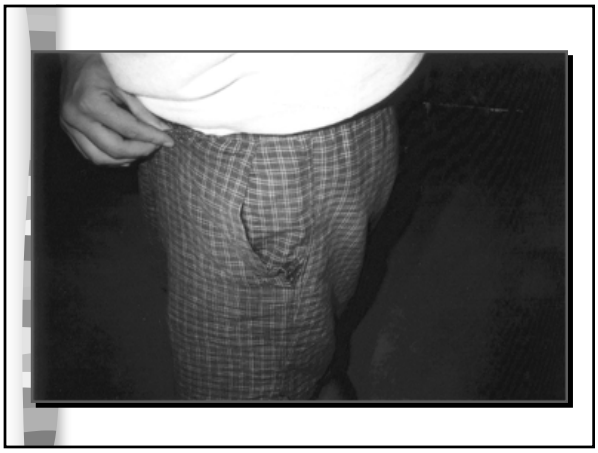
What Are Some Other Suspicious Signs of Abuse?

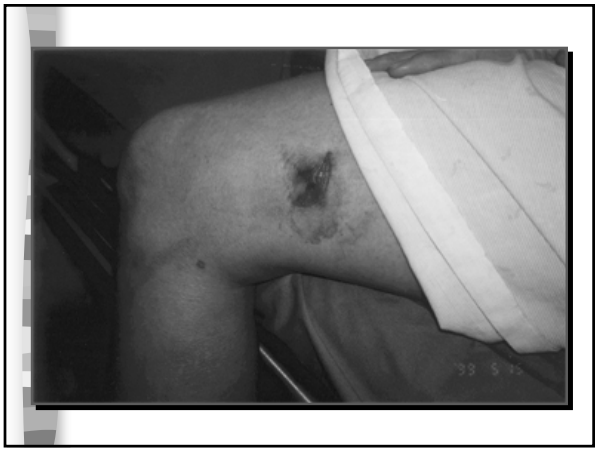
- Long intervals between injuries and seeking treatment
- Clusters of bruises, shaped like fingers, fists or cords
- Doctor shopping or agency hopping
- Description of injury inconsistent with wounds

Documenting Evidence

- Statements (victim, offender, witnesses)-- interview, spontaneous utterances overheard, allegation, confession
- Injuries (victim/offender)-- typical assault wound, defensive or offensive wounds, multiple wounds over time
- Damaged clothing (victim/offender)-- rips, tears, bloodstains, punctures

Physicians Call





Police Report

- **Police Report: "She had a cut over her eye."**

Police Report said, "Victim had a 'bump' on her forehead"

Police Report: “She had swelling around her eye and blood on her nose.”

Know what you are looking at

Suspect said victim scratched herself.

True

Defensive injury while trying to get his hands off her neck. She scratched herself fiercely to breath.

Bruises Behind the Ear?

Photos...Photos...Photos

- Police report said:
- Bruised left eye. Cut on forehead. Scratches on chest.

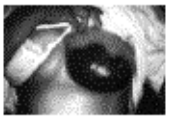
Victim had a handprint on her back.

Elder DV Case - v33014

- Police report said:
  - Extremely bruised black eye & swollen face.

Look for Injuries from the Sophisticated Batterer

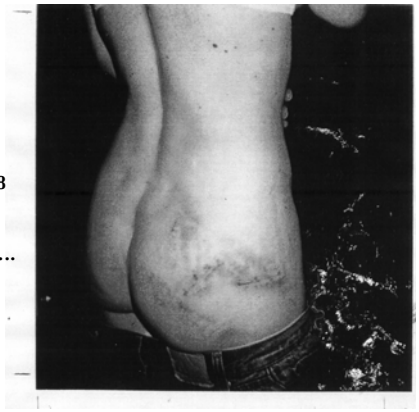
- Leaves no marks
- Hits in places where it is difficult to leave or see marks
- Hits in places where you won't look



Police report

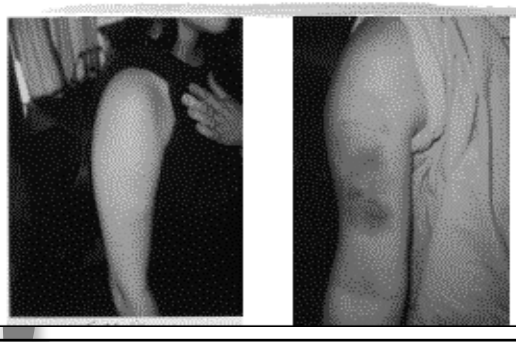
- **"Police Report: "The victim was beaten with the wooden leg of a rocking chair, but had no visible injury."**

Taken 48 hours after assault….



Taken 96 hours after assault

More Follow-up Photos



Documenting Evidence

- Weapons (firearm, knife, household objects, anything used to bind victim)-- fired, pointed, thrown, stabbed, struck
- Crime scene (location and surrounding areas)-- overturned furniture, broken items, damage to walls or doors, signs of forced entry, telephone damaged, blood stains

Documenting Evidence

- Other Information-- obtained via 911 records, hospital records, children's services reports, officers' observations
- History of previous calls
- Who called the police?
- Are the children abused or neglected?
- Does the batterer and/or victim use drugs?

Documenting Evidence

Document Clearly in a Report The Victim's Demeanor:

- Crying
- Hysterical
- Shaking/Trembling
- Nervous (rocking back and forth, bouncing legs)
- Uneasy
- Breathing (labored, quick, hyperventilating)
- Eye Contact
- Stoic
- Trance State

Report Writing

- Be specific
- Avoid using general statements such as, "suspect threatened victim."
- Record the threat accurately: "Suspect threatened to kill victim if she calls the police."
- Specific threats can be used to show intent
- If victim makes 911 call from a neighbors house, list the neighbor as a witness in the report
- Do not use the phrase "excited utterance" in the report

Interviewing the Victim

- Interview separate from apparent suspect
- Show concern with voice
- If person wants to attack suspect, distract the victim
- Let person tell story before clarifying
- Be nonjudgmental in questioning
- Reassure victim that help is available
- Reassure victim that she or he is not to blame

Interviewing the Suspect

- Separate from victim
- Ask the suspect to be seated; try to calm him or her
- Do not make accusatory statements that put suspect on defensive
- Acknowledge suspect's frustrations, concerns, anger
- Document statements like, "I hardly pushed her," or "She bruises easily" or "I was trying to get her to listen, so I just grabbed her."

Interviewing the Suspect

- Do not say you understand; be clear that anger or verbal confrontations don't cause violence
- If asked, don't tell the suspect that the apparent victim called the police

Interviewing the Suspect

Miranda Warnings Not Required:

- Officer asking basic information- DOB, age
- Suspect not in custody
- Officer is not going to interrogate
- The suspect makes incriminating statements of his own free will

Miranda Warnings Required:

- Suspect is in custody
- Suspect otherwise feels his ability to freely leave is restricted.

Interviewing the Children

- Crouch or sit to child's level
- Befriend child at first
- Explain why you're there, and why you took whatever action you did
- Be sure not to indicate a response as the child may comply

Interviewing the Children

- Note if child indicates fear of one or both parents
- Be aware of child's feeling responsible or guilty; reassure the child
- Be aware that if child is also a victim of abuse, he or she may be distrustful of adults or may have been warned not to talk to outsiders