



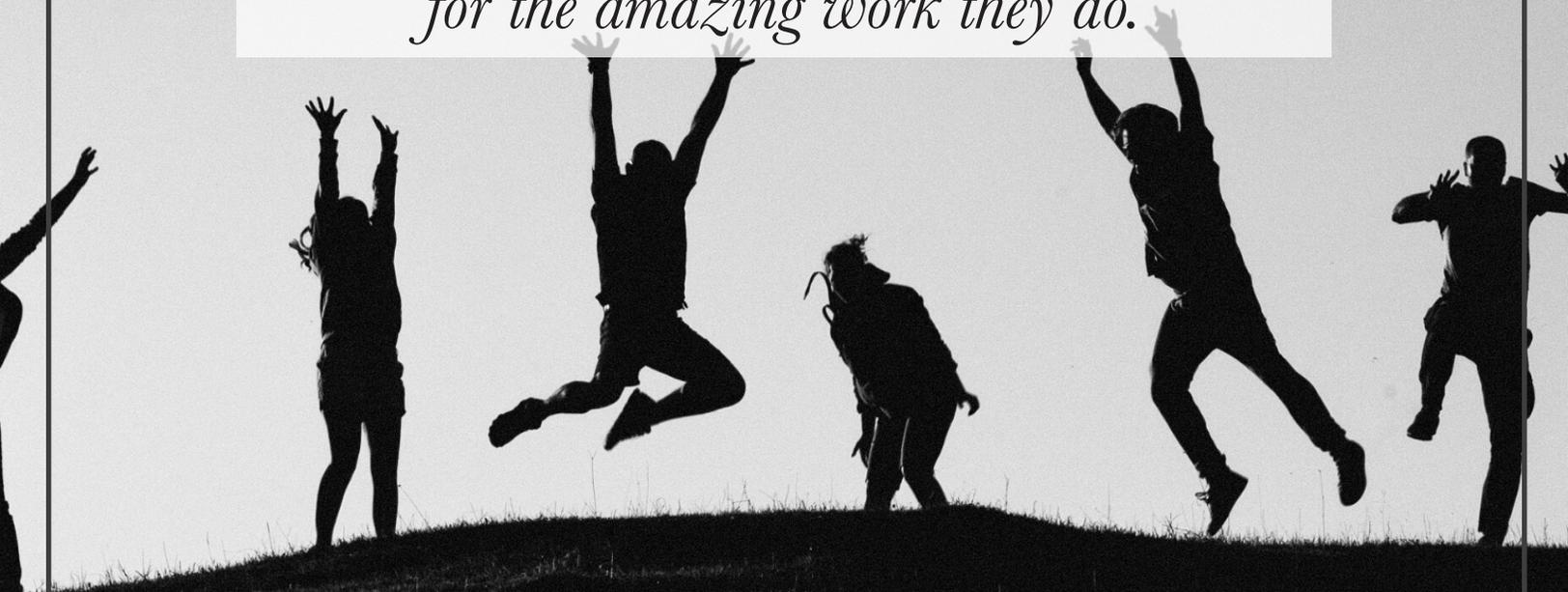
The State of Domestic Violence Report *2020 Edition*

Domestic Violence Network
2022

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Domestic Violence Network would like to give a special thank you to all of our Central Indiana direct service providers for the amazing work they do.



Visit our website to learn more about DVN at dvnconnect.org

Executive Summary

This report looks at domestic violence statistics in 2020 for Central Indiana: Marion, Hamilton, Hendricks, Hancock, Boone, Johnson, Madison, Morgan, Monroe, and Shelby counties. Data was collected from multiple direct service providers in the area, as well as the Indiana Coalition Against Domestic Violence. This report covers four main topics:

- 1. COVID-19 and the implications on the state of domestic violence in Central Indiana** - This section goes into detail on understanding how the pandemic has affected data, why, and what that means. One of the main takeaways being that COVID-19 was not the cause of many of the issues surrounding domestic violence, but it did exacerbate many issues. Since the pandemic, domestic violence has become more severe. This is something that was noted across organizations. COVID-19 is discussed throughout the report to help provide further context.
- 2. Service agency calls and arrests in Marion and the surrounding counties** In 2020, there were approximately 13,500 service calls made to five agencies in the region. This aligns with data from previous years. However, calls to the Indianapolis Metropolitan Police Department (IMPD) for domestic violence nearly doubled from the previous year. Capacity greatly diminished across organizations due to the safety measures put into place for COVID-19. There were 1,152 individuals denied service due to capacity issues across three organizations. The Domestic Violence Network (DVN) and other organizations worked to mitigate these issues by administering funds that were used to place hundreds of survivors into hotel rooms and help them work toward self-sufficiency. Arrests were slightly lower compared to previous years, with 3,709 arrests made for domestic violence. COVID-19 and the safety precautions put in place for the jail system play into these numbers significantly.
- 3. Domestic violence related fatalities with an emphasis on fatalities where a firearm was used** - There were 41 domestic violence-related fatalities in 2020. The manner of death for 33 of these individuals or 83% was a firearm. 41% of these fatalities were victims of domestic violence, and 59% were the perpetrators (murder/suicide), family members, and bystanders who were also killed. Service providers across Central Indiana note that the severity in domestic violence cases and the use of weapons increased dramatically.
- 4. Prevention programming** - Prevention programming for domestic violence is critical to help alleviate Central Indiana service providers. More than 6,500 youth and adults in Central Indiana were trained by a direct service or prevention-based organization on domestic or teen dating violence.

These are the recommendations based on the data and information collected:

- 1. Continue to support and increase funding for Central Indiana domestic violence service providers.**
- 2. Continue improving and expanding prevention, and providing funding toward these efforts. Advocate for healthy relationship and teen dating violence curriculum in schools across the area.**
- 3. Move away from the honor system for firearms surrender, as detailed in a recent report by DVN. Implement further transformative justice practices as a long-term solution to violence prevention.**

These recommendations give further details and data as to the how and why for each recommendation. According to the data the trends are in line with research that has been done over the past twenty years in some cases, especially when looking at fatality data.

Our hope is that leaders and decision makers in government, nonprofit, and private sectors will use this regional data and recommendations to advocate for and implement positive change in the movement against domestic violence.

INTRODUCTION

Use of This Report:

Domestic Violence Network (DVN) intends for this report to be used by leaders and decision makers in government, nonprofit, and private sectors. Our goal is that they use the data and information to create or update policies that improve processes across sectors to better serve our community and the victims and survivors of domestic violence, by reducing and eventually eliminating domestic violence in Central Indiana. This report is part of DVN's effort to change the culture that leads to domestic violence through informing the community of what the domestic violence landscape looks like.

Background:

Domestic violence occurs in all communities and affects individuals from all demographic categories, with at least 1 in 3 women and 1 in 7 men experiencing domestic violence in their lifetime. In Indiana (according to the most recent data from 2014), 40.4% of women and 26.8% of men experience intimate partner physical violence, intimate partner sexual violence, and/or intimate partner stalking in their lifetime.¹ National studies, such as the National Crime Victimization Survey, the National Intimate Partner and Sexual Violence Survey², and the Tween and Teen Dating Violence and Abuse Study,³ support this notion, while also pointing out that some groups are disproportionately affected by domestic violence. Understanding who is most at risk is key to developing – and measuring the impact of – powerful strategies to prevent and end domestic violence. Even with domestic violence being incredibly common, with 1 in 5 people reporting experiencing domestic violence in their lifetime, it is very difficult to find reliable, accurate data about domestic violence prevalence and incidence in the community.

To be clear: No one should be victimized by domestic violence. The purpose of assessing patterns and trends of domestic violence victimization is to generate information that can be used by community stakeholders and policy-makers to make informed decisions about programs, services, policies, and initiatives to end domestic violence in Central Indiana.

The “State of Domestic Violence in Central Indiana” report was created to collect, disseminate, and increase accessibility of key data about domestic violence in our community. This report presents an update on the state of domestic violence in Central Indiana based on similar reports compiled in 2020, 2016, 2015, 2014, 2013, 2011, and 2008. It includes updated information on the available community data, and community-wide efforts to end domestic violence in Central Indiana. Because the purpose of this report is to expand collective knowledge about the issue of domestic violence in the community, the report includes data that do not meet the ideal but do contain valuable information. It is not intended to indicate that any particular community is of greater importance.

Throughout this report, a number of the outcomes that correlate to COVID-19 are discussed. It is crucial to remember that: (1) correlation does not equal causation and that (2) many of the outcomes relating to COVID -19 are still being observed, studied, and analyzed as many of these

1 National Coalition Against Domestic Violence. Domestic Violence in Indiana (2019). Retrieved from: <https://ncadv.org/statistics>

2 Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J. & Stevens, M. (2011) The national intimate partner and sexual violence survey: 2010 summary report. Retrieved from: [cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf](https://www.cdc.gov/violenceprevention/pdf/nisvs_report2010-a.pdf)

3 Glauber, Anne. Love is Respect. Tween and Teen Dating Violence and Abuse Study: 2008 Retrieved from: <https://www.haven-oakland.org/assets/media/pdf/tru-tween-teen-study-feb-081.pdf>

outcomes have continued into 2021 and 2022.

This report will focus on four main areas of data and discussion:

1. Special considerations and context for Covid-19.
2. Service agency calls and arrests in Central Indiana.
3. Domestic violence related fatalities in Central Indiana.
4. Prevention programming in Central Indiana.

METHOD

For the purposes of this report, Central Indiana is defined as Indianapolis (Marion County) and the eight surrounding counties: Boone, Hamilton, Hancock, Hendricks, Johnson, Madison, Morgan, and Shelby. Ideally, all data would be provided by the counties as well as in aggregate form for Central Indiana as a whole. Where this is not possible, data is presented at the state level. There is also some data provided for Indianapolis or Marion County alone. DVN continues to work with partners to increase the availability of domestic violence-related data throughout Central Indiana.

The data contained in this report were provided from a variety of sources, which are noted throughout. It is important to remember that the data are limited to reported information – reports to service providers, crisis lines, law enforcement agencies – and do not capture the thousands of incidents of domestic violence that are unreported nor the thousands of secondary victims of domestic violence, which include child witnesses, family members, and friends. Additionally, when considering trend information, it is important to consider that increases or decreases in the trends do not necessarily indicate increases or decreases in the prevalence of domestic violence, but rather, they could indicate changes in reporting patterns among victims. While data alone cannot provide answers to all of the questions that could be asked, it is a useful tool in learning more about, communicating, and understanding domestic violence in Central Indiana.

Data were collected from the various sources for the calendar year 2020 and cleaned where necessary to make the data more uniform. It was then disseminated and put into various visualizations. A mixture of quantitative and qualitative data are used in this report. Qualitative data is taken from agency websites and annual reports. All of this was completed by DVN's Director of Research and Impact.

RESULTS AND DISCUSSION

COVID-19 Context

Sources

Direct service providers in Central Indiana were asked to give any quantitative or qualitative data around COVID-19 and the differences or challenges they faced. Data was also taken from national studies and reports to provide further evidence when providing context around domestic violence and COVID-19.

Discussion

One of the most crucial pieces to understand when discussing domestic violence and COVID-19 is that many of the outcomes that correlate to the pandemic are not a direct cause of the fact that there was a pandemic. COVID-19 and all of the related consequences have dramatically exacerbated issues that victims and survivors were already facing. One expert conducting research on this subject in partnership with the Centers for Disease Control and Prevention (CDC) and Futures Without Violence put this idea into perspective:

COVID-19 has compounded challenges faced by IPV survivors before the pandemic began. IPV survivors have always faced challenges meeting basic needs, which the pandemic has worsened. As another example, monitoring technology is a commonly used controlling strategy and now may be used even more frequently when so much of our lives have shifted to virtual. Furthermore, IPV survivors belonging to marginalized communities (ie, immigrants, racial and ethnic minorities, and gender and sexual minorities) may face compounding challenges due to deep-seated structural inequities such as racism, xenophobia, etc. It is so critical as providers that we understand this syndemic framework where IPV, COVID-19, and structural factors compound upon each other.⁴

This is true in Central Indiana as well. Many service providers noted that they adapted by moving programming, like advocacy, to a virtual platform, and that it was not an ideal option for many because it is often unsafe for those experiencing domestic violence to do things on virtual platforms. This regard for safety is a reason why offering victims and survivors virtual services was not a common practice prior to the pandemic.

Data throughout the report will show a reduction in many indicators. However, it is known that there are a number of factors to consider in this reduction. In asking organizations what differences or challenges they faced due to factors surrounding COVID-19, many service providers discussed the limited capacity and staffing due to safety concerns and guidelines from the CDC. The executive director of Sheltering Wings stated, “During COVID, we had to reduce our census to accommodate social distancing and a reduced staff. However, we still saw an increase (8%) in the number of families we housed.” Another organization noted the increase in intimate partner homicides in their county. Leah Wills, the database and reporting coordinator for Hamilton County-based Prevail, Inc. noted, “Intimate partner homicide saw a huge increase for our county. We believe the domestic violence escalated to murder and believe COVID was a direct connection to that increase.” Wills also points out, “Although a lot of our numbers didn’t increase, the severity of abuse we were responding to increased.” That statement is backed by studies that have been done on intimate partner violence and COVID-19. One study evaluated and compared the incidence and severity of IPV in the early phase of the pandemic to the previous three years. “While the number of patients reporting IPV almost halved, physical IPV cases nearly doubled with a five-fold increase in severity and a four-fold increase in severe injuries.”⁵ This same study also examines potential causes in the decrease of IPV cases in hospital settings.

Potential reasons for the overall decrease in the number of patients reporting IPV include an unfounded fear of contracting COVID-19 [during] the early phase of pandemic; the likelihood that IPV victims were overlooked by health care providers as they were overwhelmed by the surge of COVID-19 patients, and the fact that many outpatient clinics were not seeing patients in-person and screening questions were skipped during virtual visits, with no visual cues to bruises. Potential reasons for increase in physical violence and severity include various stressors such as isolation, socio economic instability, fear of infection, absence of community support, increased substance use, and increased time spent with partners at home. However, things have changed with a year into the pandemic. We are

⁴ Rodriguez, Tori. Expert Roundtable: Intimate Partner Violence and COVID-19 (2021). Psychiatry Advisor. Retrieved from: <https://www.psychiatryadvisor.com/home/topics/violence-and-aggression/expert-roundtable-intimate-partner-violence-and-covid-19/>

⁵ Gosangi B, Park H, Thomas R, et al. Exacerbation of physical intimate partner violence during COVID-19 pandemic. *Radiology*. 2021;298(1):E38-E45. doi:10.1148/radiol.20202866

now seeing a lot more patients reporting IPV, although we still need to compare the numbers and do a detailed analysis of the severity.⁶

The COVID-19 pandemic has put a spotlight on numerous ongoing public health crises, including Domestic Violence. In 2020, the entire public health sector was overwhelmed in ways that it had not experienced in quite some time. The pandemic exacerbated many issues that individuals face, leading to a great deal of questions in many sectors, including the systems around serving those experiencing domestic violence. It is important to keep this context in-mind when examining the entirety of this report.

Service Agency Calls for Domestic Violence and Arrest Data

Sources

Data for this section comes from service providers in Marion and surrounding counties, as well as the Indiana Coalition Against Domestic Violence (ICADV) for statewide data. There is also arrest data collected from the Management Performance Hub and from IMPD on calls for service.

Data and Discussion

On a given day in Indiana, there are at least 182 call requests for domestic violence services that go unmet due to a lack of resources in the state.⁷ Also, on a given day in Indiana, prior to 2020, there were at least 1,807 victims/survivors served by direct service providers.⁸ These statistics show that this issue is far reaching, and in high demand across the state. 2020 showed that this has not changed. The chart below provides a breakdown of crisis calls made for each service provider that provided data.



⁶ Gosangi B, Park H, Thomas R, et al. Exacerbation of physical intimate partner violence during COVID-19 pandemic. *Radiology*. 2021;298(1):E38-E45. doi:10.1148/radiol.2020202866

⁷ National Coalition Against Domestic Violence. Domestic Violence in Indiana (2019). Retrieved from: <https://ncadv.org/statistics>

⁸ National Coalition Against Domestic Violence. Domestic Violence in Indiana (2019). Retrieved from: <https://ncadv.org/statistics>

CRISIS CALLS TO CENTRAL INDIANA SERVICE PROVIDERS

This chart shows the total crisis calls that each agency received between 2018 and 2020. The nature of each call is unknown and unique callers are not known. This helps show the need in Central Indiana for the services these providers deliver to the community.

	2018	2019	2020
THE JULIAN CENTER	5,607	4,489	3,211
SHELTERING WINGS	1,183	1,499	1,366
ALTERNATIVES	2,826	2,876	4,146
FAMILIES FIRST	4,019	6,316	NO DATA
PREVAIL	NO DATA	NO DATA	1,418
BEACON OF HOPE	NO DATA	NO DATA	3,346
TOTAL CALLS	13,635	15,180	13,487

Data obtained directly from each organization.



In comparison to the previous report, this report shows data from two additional service providers, but data for Families First (now Children’s Bureau + Families First) was unavailable. The number of calls is lower than it was in 2018 and 2019, but given the change in organizations we collected data from, a direct comparison is not possible. It can be noted that the numbers observed are in line with the previous two years worth of data for Central Indiana. As previously stated, some of the reduction in calls is due to implications of COVID-19. Many organizations reduced capacity, especially early on in the pandemic, and many reduced on site staff due to social distancing measures.

Calls to IMPD for domestic-related service highlight that domestic violence cases did not decrease in 2020. The chart below shows the breakdown of calls for service from 2018 through 2020.

CALLS FOR SERVICE FOR DOMESTIC RELATED CASES MADE TO IMPD

This chart shows the total calls for service for domestic related cases made to the Indianapolis Metropolitan Police Department between 2018 and 2020. These calls do not reflect arrests that were made. These calls only reflect the service area of IMPD.

	2018	2019	2020
Q1	2,883	3,130	6,772
Q2	2,726	4,039	8,168
Q3	2,926	5,255	8,057
Q4	3,074	6,253	7,791
TOTAL CALLS	11,609	18,677	30,788

Data obtained directly from the Indianapolis Metropolitan Police Department.



Calls more than doubled from 2019 to 2020 in the service area alone for IMPD, covering 40 zip codes in Central Indiana. It can be seen in the three-year time period from 2018 to 2020 that calls have increased over time. Of the calls over the three year period, there are distinct zip codes that stand out as having the highest number of calls. Looking at the data each quarter over three years, the top 10 zip codes where these calls originate from are: 46201, 46218, 46203, 46222, 46226, 46219, 46241, 46227, 46235, and 46205. Of these, the top three zip codes with the highest number of calls are consistently 46201, 46218, and 46203. These ten zip code zones are home to approximately 18.4% of the entire Indianapolis metro area population (metro area consisting of 11 counties surrounding Indianapolis), based on numbers from 2019. These ten zip codes also have 52.2% population of Persons of Color, compared to 27.7% in the metro area. The racial breakdown of this area is: 47.8% White, 12.7% Hispanic, 33.2% Black, and 3% Asian.⁹ Along with higher proportions of Persons of

⁹ The Polis Center at IUPUI (2019). SAVI Custom Community Profile [online, customizable database]. Retrieved from: <https://profiles.savi.org/dashboard.html>

43%

increase

In shelters that reported being under capacity largely due to COVID-19 safety protocols.

1,152

individuals

Were denied service in Central Indiana due to capacity issues across organizations.

248

individuals

Were helped with funds to provide things like hotel rooms and car repairs.

Color, there are higher proportions of poverty (29.7% compared to 12.4% in the metro area). There is also less accessibility to transportation (12.9% without vehicle access compared to 6% in the metro area). Language accessibility is also a consideration in this area, with 14.2% of the population speaking something other than English which compares to approximately 5% of the entire metro area.¹⁰

Indiana University Purdue University of Indianapolis (IUPUI) conducted a study over the period of stay-at-home orders and found that calls to IMPD for domestic violence “increased significantly after school and restaurant closures, rising from an average of 73 calls per day before the closures to 89 calls per day after schools closed through March 23. They dropped slightly, to 86 per day, in the period beginning when Gov. Eric Holcomb’s stay-at-home order took effect March 23 through April 1.”¹¹ As the data shows, this trend has not let up. We also know that these call numbers are still increasing in 2021 at the time this report was written.

Shelter capacity is one area that has been largely affected by the implications of the pandemic. According to a survey conducted by the Indiana Criminal Justice Institute, “there was a 43% increase in shelters that reported being under capacity”¹² in all of Indiana. Many of the Central Indiana service providers fall into this category, including Alternatives Inc. Kelly Buzan, the chief program officer for Alternatives explained, “The total number of survivors served by our emergency housing programs was greatly reduced in calendar year 2020 due to the social distancing requirements of the pandemic. Only one family is able to be housed per suite [down from the 28 total emergency beds in those suites], limiting our overall capacity.”

There were 1,152 individuals denied service due to capacity issues across three organizations. The limitations on capacity led many organizations to adapt and turn to emergency hotel funds to keep victims and survivors safe when seeking emergency shelter was not an option due to COVID-19 safety measures. DVN partnered with Children’s Bureau, Inc.+ Families First to help in this effort. DVN was able to use seed money from

¹⁰ The Polis Center at IUPUI (2019). SAVI Custom Community Profile [online, customizable database]. Retrieved from: <https://profiles.savi.org/dashboard.html>

¹¹ Mohler, George & Bertozzi, Andrea & Carter, Jeremy & Short, Martin & Sledge, Daniel & Tita, George & Uchida, Craig & Brantingham, P. (2020). Impact of social distancing during COVID-19 pandemic on crime in Indianapolis.

¹² Christian, Kaitlyn. The Impact of COVID-19 on Victim Serving Agencies Across Indiana (2020). Indiana Criminal Justice Institute. Retrieved from: https://www.in.gov/cji/grant-opportunities/files/REPORT_The-Impact-of-COVID-19-on-Victim-Serving-Agencies-Across-Indiana.pdf

Braveheart Foundation and Central Indiana Community Foundation (CICF) to leverage additional funds from the City of Indianapolis, Women's Fund, Glick Family Foundation and other funders to provide 248 individuals with housing, hotel rooms, utility payments and car repairs using nearly \$200,000. \$105,000 of those funds was in direct response to COVID-19 and provided hotel rooms for individuals. Given the circumstances in which the direct service providers had to operate in much of 2020, many Central Indiana individuals experiencing domestic violence were still able to find help and resources. Nearly 7,000 people in Central Indiana were served by four direct service providers.

COVID-19 also had an impact on domestic violence related arrests. Arrests were lower than the previous two years. There were approximately 300 fewer arrests made in 2020 than in 2019. It is important to highlight the ways in which COVID-19 impacted the criminal justice system. According to research done on 19 Indiana counties on the effects of COVID-19 on jail populations and operations, jail populations were greatly affected by COVID-19 safety precautions. In February 2020, right before the pandemic was announced, there were 4,425 inmates across the 19 counties. During the first COVID-19 peak in April of 2020, jail populations in those 19 counties (including Boone, Hendricks, Hancock, and Hamilton counties) decreased by 32% to 3,006. By June 30, 2020, those numbers increased by 3.2% to 3,101 inmates for an overall decrease of 29.9%.¹³ "Jail populations in Indiana generally fell at a quicker rate than regional and national averages, and remained lower through the current period [June 30, 2020]."¹⁴

These decreases were evident for a few reasons that also affect arrests. Most of the fluctuation was due to changes in jail operations due to COVID-19 and the safety protocols. These changes often meant less space in the jails, and less staff available to run operations.

Stakeholders from Indiana sheriffs' offices described several common changes in jail operations during COVID-19, including the creation of quarantine areas, adoption of enhanced cleaning procedures and equipment, integration of health screenings, personal protective equipment, and COVID-19 testing, changes in staff shifts, modification to court-related proceedings, restriction of programs and services, changes in meal preparation and laundry services, and implementing inmate education and communication efforts.¹⁵

Other studies also show that these changes in jail populations and operations correlate to arrest data. With changing jail capacities, lower numbers of staff, and increased safety in the jails for COVID-19, this meant that less arrests could be made during that time. Inmates were also staying for longer periods of time during the peak COVID time (April 2020 – December 2020) than in previous times (January 2019 – February 2020). The average length of stay went from 38 to 48 days. There are many reasons for this including, longer wait times for court appearances and the release of low-level offenders, and decrease in arrests made especially for crimes where the length of stay is shorter.¹⁶ One study that examined arrests for all crimes

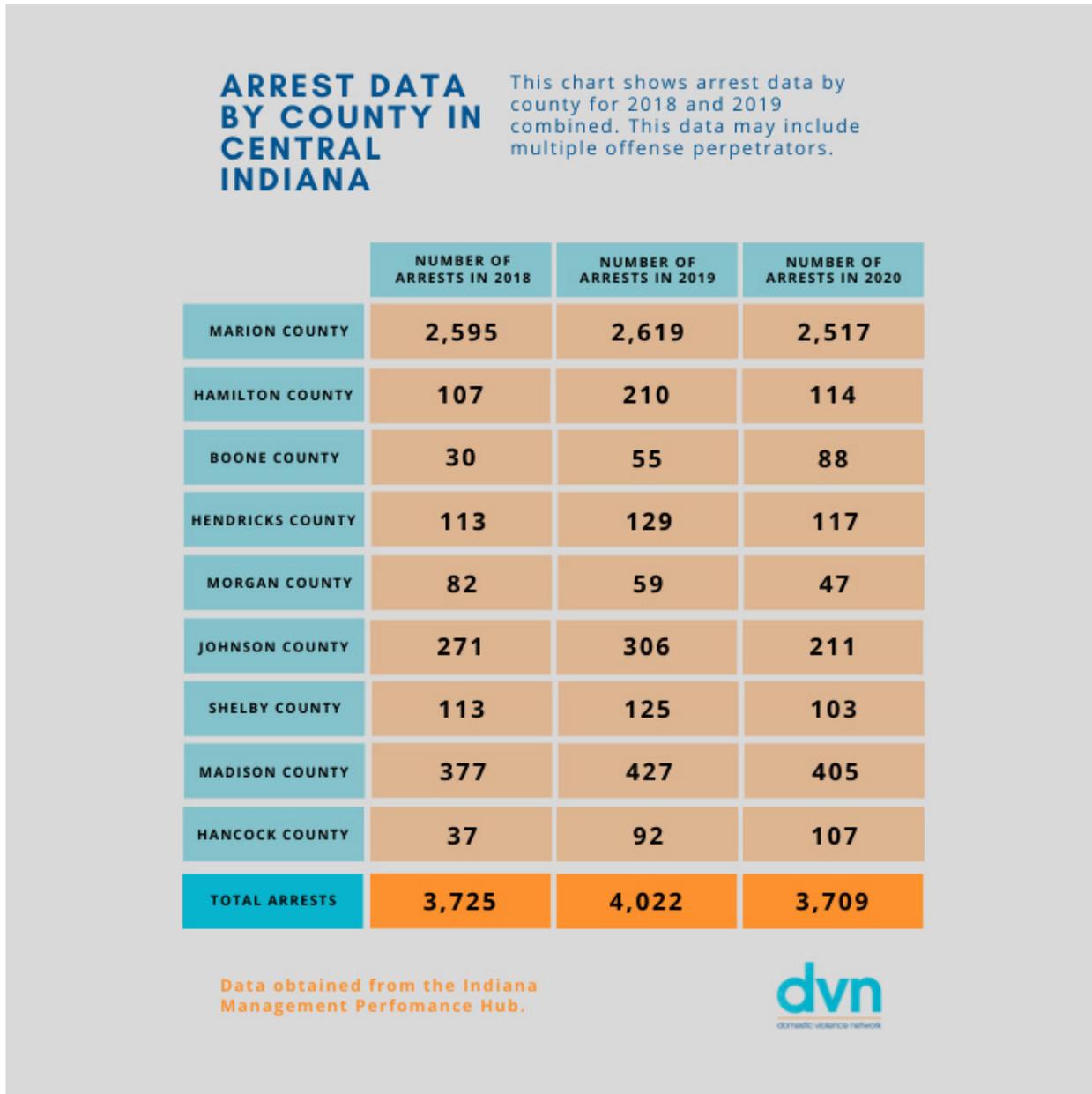
13 Indiana University Public Policy Institute: Center for Health and Justice Research (2021). Effect of COVID-19 on Jail Populations and Operations. IU PPI Issue 20-C04 Retrieved from: <https://policyinstitute.iu.edu/doc/COVID-19-IN-jail-populations.pdf>

14 Indiana University Public Policy Institute: Center for Health and Justice Research (2021). Effect of COVID-19 on Jail Populations and Operations. IU PPI Issue 20-C04 Retrieved from: <https://policyinstitute.iu.edu/doc/COVID-19-IN-jail-populations.pdf>

15 Indiana University Public Policy Institute: Center for Health and Justice Research (2021). Effect of COVID-19 on Jail Populations and Operations. IU PPI Issue 20-C04 Retrieved from: <https://policyinstitute.iu.edu/doc/COVID-19-IN-jail-populations.pdf>

16 Safety and Justice Challenge and The JFA Institute (2021). The Impact of COVID-19 on Crime, Arrests, and Jail Populations: An Expansion on the Preliminary Assessment. Retrieved from: <https://www.safetyandjusticechallenge.org/wp-content/uploads/2021/06/The-Impact-of-COVID-19-on-Crime-Arrests-and-Jail-Populations-JFA-Institute.pdf>

across the country saw an average of a 20% decrease in arrests made when comparing 2019 to 2020. When looking at violent crimes (including abuse and domestic violence), that decrease was about 12% which is in-line with data in Central Indiana (about a 7% decrease in arrests for domestic violence).¹⁷ Data in the chart below correlates with the larger narrative surrounding and understanding the decrease in arrest data.



¹⁷ Safety and Justice Challenge and The JFA Institute (2021). The Impact of COVID-19 on Crime, Arrests, and Jail Populations: An Expansion on the Preliminary Assessment. Retrieved from: <https://www.safetyandjusticechallenge.org/wp-content/uploads/2021/06/The-Impact-of-COVID-19-on-Crime-Arrests-and-Jail-Populations-JFA-Institute.pdf>

Fatalities from Domestic Violence

Sources

Data on domestic violence related fatalities is collected from ICADV. There is also added qualitative data that was collected from individuals from within Central Indiana service providers. These statements enrich the data to provide further context. ICADV's data typically covers fiscal cycles from July – June. DVN took the data for Central Indiana and covered the calendar year of 2020.

Data and Discussion

The previous edition of *The State of Domestic Violence Report* showed a growing trend in fatalities due to domestic violence, and 2020 proved no different. Across all of Indiana, there was a 181% increase in homicides from the same period in the previous year (July 1, 2019 – June 30 2020). There were a total of 98 fatalities across the state resulting from 69 incidents (18 of the incidents had multiple deaths).¹⁸ During 2018 and 2019 there were a total of 75 fatalities related to domestic violence with some incidents having multiple casualties.

According to data from 2014, in Indiana, over half of domestic violence homicides were committed using a firearm.¹⁹ Of the 75 fatalities in 2018 and 2019, there were 49 (65%) where the manner of death was a firearm. This data point aligns with what Vigdor, E. R., & Mercy, J. A. (2006) stated 15 years ago that 60% of domestic violence homicides between 1982 and 2002 were committed using a firearm.²⁰ The data indicates that use of firearms in domestic homicides is increasing. In 2018, 19 of 30 fatalities were caused by a firearm as the manner of death. In 2019, it was the manner of death in 30 of 49 fatalities. 2020 shows an even more dramatic increase in the use of firearms. The graphic below shows some of the numbers related to domestic violence fatalities in Central Indiana.

“We’re seeing a higher level of violence. We’re seeing more strangulation than we have in the past.”

-- Jami Schnurpel, The Julian Center

18 Domestic Violence Fatalities: July 1, 2020 - June 30, 2021 (2021). Indiana Coalition Against Domestic Violence.

19 National Coalition Against Domestic Violence. Domestic Violence in Indiana (2019). Retrieved from: <https://ncadv.org/statistics>

20 Vigdor, E. R., & Mercy, J. A. (2006). Do laws restricting access to firearms by domestic violence offenders prevent intimate partner homicide?. *Evaluation review*, 30(3), 313-346.

Central Indiana

Domestic Violence Fatality Statistics

Data for 2020



Source: Indiana Coalition Against Domestic Violence

In 2020 there were 41 fatalities in Central Indiana. This number is in line with 2018 and 2019 numbers, but there is cause for concern in the drastic increase in the use of firearms in domestic violence related fatalities. In 2018 and 2019, firearms were used in 65% of the fatalities, but in 2020 that number jumped to 83%. A firearm was not used in only eight of the 41 fatalities in 2020. A nearly 20% increase in firearms from one year to the next is not something that should be ignored. It shows that cases are becoming more violent which is echoed by service providers. Across the entire state of Indiana, firearms were used in approximately 75% of domestic violence related homicides,²¹ meaning there is a higher chance a firearm will be used in Central Indiana than other areas of Indiana. Leah Wills, the database and reporting coordinator for Preveil, Inc., explained, “although a lot of our [data points] didn’t increase, the severity of abuse we were responding to increased.”

This is also noticed by other organizations like The Julian Center. “We’re seeing more weaponry used,” said Jami Schnurpel, director of programs and survivor services. “We’re seeing a higher level of violence. We’re seeing more strangulation than we have in the past.”²² The increase in strangulation is a critical indicator to draw attention to. “In risk assessment tools used by domestic violence workers and police, strangulation, short of causing death, is considered a ‘red flag’ for future serious abuse and fatality.”²³ Strangulation is incredibly dangerous and can cause serious long-term

21 Domestic Violence Fatalities: July 1, 2020 - June 30, 2021 (2021). Indiana Coalition Against Domestic Violence.

22 Kast, Brett (2020). Domestic violence deaths up 86% in Indiana, local organization says. Fox59. Retrieved from: <https://fox59.com/news/indycrime/domestic-violence-deaths-up-86-in-indiana-local-organization-says/>

23 Douglas, H., & Fitzgerald, R. (2014). Strangulation, domestic violence and the legal response. *Sydney Law Review*, 36(2), 231-254.

injuries if it does not lead to a fatality. “Victims who have survived a strangulation incident often report a range of clinical symptoms including neurological and psychiatric symptoms such as loss of consciousness, paralysis, loss of sensation, vision changes, memory loss, anxiety, and post-traumatic stress disorder.”²⁴ Pregnant women have experienced miscarriages after surviving strangulation. Others have experienced permanent damage to their vocal chords, because swelling of the airways can last up to a day and half after experiencing strangulation. “Even where there are no visible injuries, some victims have died several weeks after the attack, as a result of the brain damage caused by lack of oxygen during the strangulation.”²⁵ As mentioned earlier, some of the reasons for the increase in severity of these cases is, in part, due to the social consequences of COVID-19 including “isolation, socio economic instability, fear of infection, absence of community support, increased substance use, and increased time spent with partners at home.”²⁶ It is critical that this number is monitored closely over the next couple of years to see if a trend is developing post COVID-19. If this increase in severity continues, it will only become an increasing priority for the community to step in to improve these numbers.

Along with the dramatic increase in firearm-related fatalities, there are other factors that will need to be watched over the next year or two. There were more youth casualties in 2020. In 2018 and 2019 combined, there were 12 youth (ages 0-24) casualties. In 2020 alone, ten youth (ages 0-24) were killed in a domestic violence related situation. Seeing the single year number for young people is cause for concern, and it is not possible to know how much of it is due to the consequences of COVID-19, but it is certainly a number to put on watch.

Another factor to be aware of is the 11% decrease in the number of intimate partner deaths. In 2020, 41% of the fatalities were the intimate partner. In 2018 and 2019 combined, 52% were the intimate partner. This means that more fatalities in domestic violence situations were other parties including perpetrators (such as murder/suicide situations), children and other family members, and bystanders. This number is important to watch because it shows the reach of domestic violence. It is a public health issue, especially when it begins to seep outside of the intimate partner relationship. This is one indicator of the way that domestic violence affects communities, and not only the involved intimate partners.

Data around mass shootings also illustrates this point. Domestic violence offenders are often linked to mass shootings. Between 2014 and 2019, there were 749 mass shootings nationally with an identified shooter (that were not classified as drug-related, gang-related, or robbery-related shootings). Of those 749 mass shootings, “46% [about 345 shooters] were incidents of domestic violence or violence against women, and 36% were committed by shooters with a known history of domestic violence or violence against women. About 60% [about 450 shooters] were either or both.”²⁷ This statistic determining the correlation between domestic violence/violence against women offenders and mass shootings should be a cause for alarm in the violence prevention movement, because this shows how much the issue of domestic violence is an issue that permeates through

24 Douglas, H., & Fitzgerald, R. (2014). Strangulation, domestic violence and the legal response. *Sydney Law Review*, 36(2), 231-254.

25 Douglas, H., & Fitzgerald, R. (2014). Strangulation, domestic violence and the legal response. *Sydney Law Review*, 36(2), 231-254.

26 Gosangi B, Park H, Thomas R, et al. Exacerbation of physical intimate partner violence during COVID-19 pandemic. *Radiology*. 2021;298(1):E38-E45. doi:10.1148/radiol.2020202866

27 Gu, Jackie (2020). Deadliest Mass Shootings Are Often Preceded by Violence at Home. Bloomberg. Retrieved from:<https://www.bloomberg.com/graphics/2020-mass-shootings-domestic-violence-connection/>

society and affects the public at large. While numbers from 2021 are still being calculated, that should not further delay the urgency needed in this matter of domestic violence and firearms.

Prevention Programming

Sources

Data for this section comes predominantly from DVN, Alternatives, Inc., Prevail, Inc., Beacon of Hope Crisis Center, and Sheltering Wings. Data was collected directly from each organization in aggregate forms.

Data and Discussion

The main shift that has occurred in the area of prevention programming is delivering more virtual-based opportunities. Organizations across Central Indiana expressed that COVID-19 dramatically shifted how these programs were and continue to be facilitated. Many organizations ceased prevention-based programming early in the pandemic in order to focus attention on shifting direct service operations and to work on pivoting prevention-based programming to an online world. Organizations like DVN who were providing programming to students in school-based programs, had to halt operations and create a platform to deliver the programming in an e-learning format. Engagement numbers reduced dramatically in a post-Covid environment created, in part, by an often less engaging virtual format,²⁸ as well as things like “Zoom fatigue”²⁹ and overall increases in mental health issues brought on by the varying side effects of COVID-19.

Overall, organizations were still able to reach the community to educate them on matters involving domestic violence. Of the organizations that provided data, there were a total of 389 days of training to youth, adults, and working professionals in the field across Central Indiana. During those presentations, well over 3,500 adults across the region were trained on topics related to domestic violence.

When looking at the number of youth that received education on areas of teen dating violence and/or healthy relationships, there are more positive numbers. More than 3,000 Central Indiana youth were educated on these topics in 2020. These numbers do not include data from all of the service providers in the area. This data also only covers organizations working and operating in Central Indiana who were able to provide their data.

Accessibility, in terms of geographical concerns, increased in the virtual era. ICADV and the Indiana Coalition Against Sexual Assault and Human Trafficking (ICESAHT) provided training opportunities for the community during this time, as well as the larger national organizations. Though many organizations experienced less direct engagement, the information was still provided and received. Many organizations increased their reach. For example, DVN was able to train internationally for the first time in its history. These numbers also do not account for the number of printed resources that were given to the community in an effort to prevent violence. These resources include shoe cards (small enough to fit discreetly in clothing with helpful information on seeking help) and safety planning materials. DVN partnered with IMPD to print special shoe cards for their officers to carry and hand out on domestic calls, anticipating it could help save a life.

These organizations are all taking on part of a region-wide effort to help curb domestic violence before it happens. When this information is paired with the call, arrest, and fatality data, it starts to become clear as to why prevention is a component of these organizations’ programming

28 Eika, E. (2021). Learning in Higher Education Under the Covid-19 Pandemic: Were Students More Engaged or Less?.

29 Williams N. (2021). Working through COVID-19: ‘Zoom’ gloom and ‘Zoom’ fatigue. Occupational Medicine (Oxford, England), kqab041. <https://doi.org/10.1093/occmed/kqab041>

models.

The need for services appears to be overwhelming compared to the capacity of the available service providers. If organizations can work on prevention measures, then they should be able to help bring down the demand for services. This helps alleviate some of the pressure on organizations when they cannot serve everyone. Potentially, this improves the services they provide to survivors. Prevention work is critical in the movement against domestic violence, and Central Indiana is doing a lot of work in this area, and needs to continue the momentum. Prevention programming in 2020 ultimately showed adaptability of organizations doing prevention-based work, collaboration across organizations to work toward solutions, and a continued willingness from the community to hear and learn about issues surrounding domestic violence. There will always be a place to increase prevention programming to reach more individuals in Central Indiana, but it is always worth acknowledging the impact.

RECOMMENDATIONS:

A Note on Recommendations:

The recommendations made in this report are similar to those stated in the previous report, but do include updated information. DVN believes that because there is still considerable work to be done on past recommendations, it would be unwise to move to a new set of action items. Factors surrounding domestic violence has become more severe. Until these key factors are addressed, it is difficult to suggest that a new set of recommendations is warranted, especially with regards to firearms and domestic violence. Many agencies also had to shift goals and adapt to the new environment that came with the public health crisis, which meant putting some previous priorities on hold. Some of these priorities may have included these recommendations.

Recommendation 1: Continue to support and increase funding for Central Indiana domestic violence service providers.

It should be noted that since the last *State of Domestic Violence* report was released, there has been a significant increase in funding directed toward domestic violence related programs and organizations, however, this increase in funding has not yet proven fruitful in diminishing the number of individuals experiencing domestic violence, which is why this remains a recommendation. As stated in the section on calls, there is a capacity issue with servicing those in domestic violence situations. Knowing how frequent domestic violence happens, and how large our population is in this region of the state, there should be more funding allocated to serve our survivors. The pandemic has caused an overall reduction in the number of beds available to serve those in-need of fleeing these situations. Hotel funds are in high demand, in part due to these increased safety precautions. Since the Violence Against Women Act (VAWA) was passed in 1994, there have been significant national statistics to consider when discussing funding domestic violence agencies. These include:

1. VAWA saved nearly \$14.8 billion in net averted social costs in its first six years alone
2. More victims report domestic violence to the police; there has been up to a 51% increase in reporting by women and a 37% increase in reporting by men
3. The rate of non-fatal intimate partner violence against women has decreased by 53%
4. The number of individuals killed by an intimate partner has decreased by 34% for women and 57% for men.

5. States have passed more than 600 laws to combat domestic violence, dating violence, sexual assault, and stalking (including Indiana). All states have passed laws making stalking a crime and strengthened laws that make date rape or spousal rape on par with stranger rape.³⁰

This report only discusses calls made to direct service providers and bed capacity, but the reality is that many survivors require other services including medical, mental health, legal, financial, and safety. The recommendation is for lawmakers to reevaluate their respective budgets and ensure that services to survivors are adequately accounted for, especially knowing the impact that VAWA has had on a national level. The data points above regarding VAWA are from 2011 (17 years after the passing of the legislation), showing that the effects were positive over an extended period of time. Many of the Central Indiana service providers serve multiple county areas, and resources are scarce to have the proper employment numbers, the continued training for those employees, and the other operational funds needed to run a successful agency.

With the positive impact VAWA has made in the movement against domestic violence, it is critical to continue the momentum through financial support. VAWA expired in 2018 and has since been in debate among politicians on how and if it should be reinstated. Funding for many of the programs under VAWA have continued since that time. At the time this report was written, the reauthorization of VAWA had still not passed, although it seems that a bipartisan agreement in Congress had been obtained. The revised provisions would close the “boyfriend loophole” which would allow restrictions to firearms access to dating partners who have been convicted of abuse. The new provisions would also include strengthening rape prevention and education efforts, providing legal funding and increase support for marginalized communities like LGBTQ survivors, and expand special criminal jurisdiction by tribal courts to cover non-Native perpetrators of sexual assault.³¹ These are all crucial provisions to the bill that will further the movement against domestic violence on the federal level.

Hopefully, local officials will find inspiration to continue with this momentum and make changes that directly affect the movement against domestic violence in Central Indiana. COVID-19 has impacted the way services are delivered through times of crisis, as well as increased the demand for services. With a forced decrease in capacity coupled with an increase in demand, service providers in Central Indiana have been strained for resources. DVN and others stepped in with a hotel fund to mitigate some of the demand by funding hotel costs for fleeing survivors. Central Indiana needs to ensure it is always ready to serve those in need, especially during times of crisis, making this recommendation crucial to supporting survivors of domestic violence.

Recommendation 2: Continue improving and expanding prevention, and providing funding toward these efforts. Advocate for healthy relationship and teen dating violence curriculum in schools across the area

Working with youth is one of the key ways to help prevent domestic violence. According to multiple studies, being exposed to intimate partner violence in the home is a significant indicator to future victimization, and it has been found to be “the best predictor of adolescent male abusive behavior.”³² One service provider conducted an informal study, asking clients at what age they started

30 McLaughlin, Monica. Campaign for Funding to End Domestic and Sexual Violence (2011). Retrieved from: http://www.ncdsv.org/images/NNEDV_CampaignFundingEndDSV_FY12Briefing_Book_April-29-2011.pdf

31 Wise, Alana (2022). Senators announce a deal to reauthorize the Violence Against Women Act. NPR. Retrieved from: <https://www.npr.org/2022/02/09/1079717258/senators-announce-a-deal-to-reauthorize-the-violence-against-women-act>

32 Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A

experiencing dating violence, and found that it starts happening as early as 12 years old in Central Indiana. To that end, it is critical that Central Indiana schools complete the next edition of the High School Youth Risk Behavior Survey from the CDC. The Indiana Department of Health should consider this a priority as well. The data collected from this survey is useful for those organizations with youth-serving prevention based programs for teen dating violence. With more information available on the state of teen dating violence in Central Indiana, service providers will be able to more easily alter existing programming or create new programming depending on the needs of the community. Paired with this is the continuing need for youth-based prevention programs to continue refining and improving on their curricula. Not only that, but building on the work that began about a decade ago with Heather's Law.

“During the 2010 legislative session, the General Assembly passed SEA 316 [Heather's Law], and the Governor signed IC 20-19-3-10 into law. The legislation requires the Indiana Department of Education (IDOE), in collaboration with organizations that have expertise in dating violence, domestic violence, and sexual abuse to identify or develop and make available to schools; (a) Model dating violence educational materials, and (b) A model for dating violence response policies and reporting by July 1, 2011.”

Building on and expanding this law is one way to advance the goal of domestic violence prevention. Having a dating violence response policy mandated at the state level by IDOE would help schools be readily equipped to handle situations more quickly and more effectively. However, this work can start locally. Indianapolis Public Schools (IPS) has already started making changes in an effort to curb teen dating violence. IPS amended its Title IX policy to include teen dating violence guidelines and resources in October 2018 after a group of students from one of the district high schools brought the issue to the district's attention. The updated policy includes initiatives to address teen dating abuse in both high schools and middle schools, including ways to report anonymously on school websites. The policy created an appointed Teen Dating Abuse Advocate for all middle and high schools who serves as the primary resource for students experiencing teen dating abuse. Additionally, DVN shares literature and resources within middle and high schools. Programming also includes prevention efforts through The Change Project, a healthy relationship curriculum available by request to middle schools. It would be beneficial to Central Indiana youth for more school districts to adopt measures similar to IPS. Another way to build on this work is for districts to mandate healthy relationships and teen dating violence curriculum, as noted in the section on prevention there are many free resources in the area that provide a curriculum for a variety of ages. Advocating for these changes at the state level is also appropriate, especially if Central Indiana becomes the leader of this movement.

At the time this report was written there were multiple bills in state congress that would prove harmful to students' safety and their ability to learn about teen dating violence warning signs and healthy behaviors. House Bill 1134 would prevent teaching "that any individual should feel discomfort, guilt, anguish or any other form of psychological distress on account of the individual's sex, race, ethnicity, religion, color, national origin or political affiliation."³³ This bill would also allow an individual to open civil action against third party vendors that provide a personal analysis, evaluation, or survey that reveals, identifies, collects, maintains or attempts to affect a student's

review of the literature. Child abuse & neglect, 32(8), 797-810.

attitudes, habits, traits, opinions, beliefs, or feelings.³⁴ This bill would have dire implications on the preventative measures that organizations like DVN are taking in schools by educating young people on these issues, as well as having many other incredibly harmful impacts. This bill recently failed in the Senate, in part, thanks to the work of the community, but it is critical for lawmakers to keep harmful legislation similar to this bill off of the governor's desk in the future. It is also important that community members and other violence prevention stakeholders speak out against harmful legislation as it arises.

Recommendation 3: Move away from the honor system for firearms surrender, as detailed in a recent report by DVN. Implement further transformative justice practices as a long-term solution to violence prevention.

In 2021, DVN released a report titled *Reducing the Number of Intimate Partner Homicides: A report on domestic violence and firearms in Central Indiana*. This report provided an in-depth summary for this recommendation. This came after seeing the high trends in firearms-related domestic violence fatalities in 2018 and 2019. We know that 2020 saw an exponential increase from 65% to 83% for firearms-related domestic violence fatalities in Central Indiana. This makes the details in that report even more critical, because something clearly needs to change to help reduce these staggering numbers. The main recommendation when it comes to this topic is for lawmakers, law enforcement, and decision makers within direct service organizations to review the referenced report. It provides great detail and a roadmap on how to implement change within these systems to help mitigate firearms-related domestic violence fatalities.

The main discussion within the report is focused on the honor system for firearms surrendering. There are many perceptions that it is incredibly difficult for courts and other justice system stakeholders to “(1) obtain complete and accurate information about an abuser’s possession of an access to weapons, which may change over time; (2) determine whether an offender has complied with the terms of a court order requiring surrender of firearms; and (3) prevent respondents from gaining access to new firearms even if they have surrendered the weapons they owned at the time a prohibition went into effect.”³⁵ Many of the recommendations within this report will not work unless there is buy-in and collaboration among key stakeholders throughout multiple sectors. The main recommendation for this report is for these various stakeholders to find common ground to be able to tackle this issue that is affecting the lives of many Central Indiana Hoosiers.

Domestic Violence Network wants to be very clear that more policing and an emphasis on criminal justice does not prevent crime. There is overwhelming amounts of data and research available to support that “increasing punitive measures have failed to reduce criminal recidivism and instead have led to a rapidly growing correctional system that has strained government budgets.”³⁶ “The early days of the feminist anti-violence movement focused on changing the dominator model, but, in part, this focus was co-opted by seeking criminal justice solutions, contributing to punitive responses and mass incarceration that have been ineffective in ending sexual violence.”³⁷

34 House Bill No. 1134, 122nd General Assembly Second Reg. Sess. (Ind. 2022) <http://iga.in.gov/legislative/2022/bills/house/1134#document-7671e6e6>

35 Moving Beyond the “Honor System”: Effective Strategies to Prevent Prohibited Abusers’ Access to Firearms (2020). National Council of Juvenile and Family Court Judges. Webinar. Retrieved from: <https://www.ncjfcj.org/webcasts/moving-beyond-the-honor-system-effective-strategies-to-prevent-prohibited-abusers-access-to-firearms/>

36 Andrews, D. A., & Bonta, J. (2010). Rehabilitating criminal justice policy and practice. *Psychology, Public Policy, and Law*, 16(1), 39.

37 Armatta, J. (2018). Ending sexual violence through transformative justice. *Interdisciplinary Journal of Partnership Studies*,

Recommendations within the firearms report address this, and the suggestion to move away from the honor system for surrendering firearms would, ideally, be something that would happen in tandem with further implementation of transformative and restorative justice practices in an effort to prevent the crimes before they happen, with the criminal justice measures in place to help when the protective measures are not enough.

Restorative justice is a “human-centered approach to repairing and preventing harm.”³⁸

*Restorative justice allows people who have experienced harm to speak their truth and ask for their specific needs to be met. It requires people who have caused harm to fully acknowledge the harm they’ve caused by naming it, discussing their understanding of the impact of their actions, actively listening to the person(s) they harmed (or a proxy) and then making amends for the harm they have caused. Amends are active; they require the individual to continually take steps to ensure the harmful behavior does not happen again.*³⁹

Transformative justice is centered around the systems that created conditions that allow for harm to be caused by individuals.

1. Transformative Justice is against violence and punishment, institutionalization and imprisonment.
2. Crime is a form of community-based conflict, where society and the government are also involved as possible offenders.
3. Transformative Justice brings issues of identity back into the realm of justice by addressing socio-political injustices toward women, People of Color, GLBT, individuals living in poverty, immigrants, people with disabilities, and other marginalized groups.
4. Transformative Justice believes in the value of mediation, negotiation, and community circles to transform conflicts.⁴⁰

Restorative and transformative justice have been written about extensively, though they are less commonly practiced as of now. Ideally, they are practiced together to prevent crimes.

For the purpose of this recommendation, the focus will be on transformative justice practices around improving access to things that improve quality of life for communities. This includes things such as providing livable wages, affordable and safe housing options, affordable childcare, access to quality education, and universal healthcare that includes access to mental healthcare. These are aspects that help communities thrive and reduce many stressors that are seen in cases of domestic violence.

Indiana has some of the most harmful tenant/landlord policies in the nation. Indiana is listed in the “Top 7 Landlord-Friendly States in 2022” by an investment property marketplace.⁴¹ The top three reasons Indiana is cited as “Landlord-Friendly” are (1) a zero tolerance for late rent payments,

5(1), 4-4.

38 What is Restorative Justice? Ampersands Restorative Justice. Retrieved from: <https://ampersandsrj.org/>

39 What is Restorative Justice? Ampersands Restorative Justice. Retrieved from: <https://ampersandsrj.org/>

40 Nocella, A. J., & Anthony, J. (2011). An overview of the history and theory of transformative justice. *Peace and Conflict Review*, 6(1), 1-10.

41 Hamed, Eman (2022). Top 7 Landlord-Friendly States in 2022. Roofstock. Retrieved from: <https://learn.roofstock.com/blog/landlord-friendly-states>

where only a ten day notice is required before an eviction notice is issued. (2) month-to-month tenants can be immediately evicted if the property is damaged. (3) there are no limits on security deposits, and they can be withheld for up to 45 days after the tenant moves out and the landlord determines what amount (if any) to return.⁴² Indianapolis ranks 14th in eviction rates among large U.S. cities for which data is available.⁴³ Additionally, Indiana is one of eight states where there are no protections for tenants against landlord retaliation.⁴⁴ Housing insecurity is something that is directly linked with many of the other indicators for quality of life including mental and physical health outcomes,⁴⁵ unemployment, and access to transportation and other resources.⁴⁷ Insecure housing and lack of resources are also reasons that many individuals stay or return to a domestic violence relationship. The intricate and deep connection that these things share, however, can change. If lawmakers work to correct the deep injustice to tenants that cause a number of negative outcomes, then the narrative can begin to change. Individuals should also join tenants unions, and support grassroots organizations that are already working to improve tenants rights in Indiana like The Ross Foundation and The Fair Housing Center of Central Indiana. Housing is a fundamental need for security and if that is not in place, it becomes nearly impossible to work on other issues around public safety including domestic violence.

CONCLUSION:

This report shows a high level view of what the domestic violence landscape is in Central Indiana. By examining the data points to understand where there is room for improvement in the overall system, we can try to direct a cultural shift in domestic violence in Central Indiana. The pandemic has definitely shifted the way some of these data points are viewed, but the underlying causes and solutions largely remain the same. Seeing these various data points come together, it becomes clear how the separate parts of the systems working within domestic violence interact, and how improving those systems can lead to better outcomes for victims/survivors, and hopefully help prevent domestic violence. Our goal is for decision makers in government, nonprofit, and for profit sectors to use this information to inform their decision making process to help improve the lives of Central Indiana Hoosiers. It takes a network to make real change.

LIMITATIONS:

We acknowledge the limitations to this report. Not every organization in the area was able to provide data for a more complete data set. Organizations also collect data in ways that align with their grant reporting, so it is not always possible to directly align some of the data points. DVN hopes to continue working on perfecting these processes to find the most accurate data from as many Central Indiana organizations as possible. We also know that it is likely that not every crisis call is a unique caller, as some individuals call every organization until they exhaust all options. We currently

42 Dillman, Beth. The Eviction Process in Indiana: Rules for Landlords and Property Managers. NOLO Retrieved from: <https://www.nolo.com/legal-encyclopedia/the-eviction-process-indiana-rules-landlords-property-managers.html>

43 Merritt, B., Stringham-Marquis, K., Camacho-Reyes, K., & Gibson, K. (2019). Eviction trends in Marion County (2010-2016).

44 Merritt, B., Stringham-Marquis, K., Camacho-Reyes, K., & Gibson, K. (2019). Eviction trends in Marion County (2010-2016).

45 Stahre M, VanEenwyk J, Siegel P, Njai R. Housing Insecurity and the Association With Health Outcomes and Unhealthy Behaviors, Washington State, 2011. *Prev Chronic Dis* 2015;12:140511. DOI: <http://dx.doi.org/10.5888/pcd12.140511>

46 Padgett D. K. (2020). Homelessness, housing instability and mental health: making the connections. *BJPsych bulletin*, 44(5), 197–201. <https://doi.org/10.1192/bjb.2020.49>

47 Merritt, B., Stringham-Marquis, K., Camacho-Reyes, K., & Gibson, K. (2019). Eviction trends in Marion County (2010-2016).

have no way to account for this, but the data that we have on crisis calls is still relevant because it shows that there are capacity issues. Some of the data simply cannot be broken down by county. Many of our service organizations serve multiple counties within the Marion and surrounding county area that makes up Central Indiana. While the service organization may be located in Marion or Hamilton county, they are often serving the surrounding counties as well.

ACKNOWLEDGEMENTS

This report would not have been possible without the network of organizations and people that provided information to the Domestic Violence Network. We thank the following people from the following organizations for their help and support.

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