

## Joyce Bilyeu

Director of Clients Services for the Sacramento Regional Family Justice Center



Joyce Bilyeu currently works as the Director of Clients Services for the Sacramento Regional Family Justice Center (SRFJC). The SRFJC serves as a central location where agencies work together to meet victim's needs. The SRFJC provides trauma informed care to victims of domestic violence, sexual assault, human trafficking, elder and child abuse. The SRFJC is a "one-stop" center where survivors share their personal story only once avoiding the trauma of sharing multiple times.

Prior to her work at the SRFJC Joyce worked as the AmeriCorps Training Manager for the Child Abuse Prevention Council (CAPC) of Sacramento for 14 years. She provided overall management and coordination of the CAPC AmeriCorps Trainings, including Mandated Child Abuse Reporter Training for Sacramento County Mandated Reporters, Shaken Baby Syndrome Prevention in the hospitals, Domestic Violence and Sexual Assault and other training topics.

Ms. Bilyeu has more than 39 years of experience in providing direct services to victims of domestic violence and other victimizations. Her experience also includes program development, implementation, training, and public speaking. Since 1981, she has developed training curricula and provided training on the dynamics of Domestic Violence, Sexual Assault, Human Trafficking, and Child Abuse prevention to Law Enforcement, Mental Health Professionals, Health Care Providers, Civic Organization, District Attorney's, and other public and private organizations.

Prior to working at the CAPC, she was employed at Women Escaping A Violent Environment (WEAVE) (a comprehensive Domestic Violence and Sexual Assault Program) as their Director of Counseling and Crisis Services. Joyce created and implemented the first ever Domestic Violence Response Team in partnership with the Sacramento County Sheriff's Department and WEAVE. Before being employed at WEAVE she worked at the Fresno County Marjorie Mason Center where she coordinated, developed, and implemented the first Fresno County Domestic Violence Response Team (a partnership between the Fresno County Marjorie Mason Center, Hospital Emergency Rooms, and the Fresno City Police Department).

During Joyce's earlier years, she also worked at the Family Support Center in Colville, WA where she first went to access services as a survivor of Domestic Violence. Later she became one of their volunteers and then was hired as an employee to serve as their Domestic Violence Program Manager where she managed their crisis line, counseling services and shelter program. In addition, Joyce served two terms as President of the Washington State Coalition against Domestic Violence Board of Directors.

Joyce is a long time active and current member of the Sacramento County Domestic Violence Death Review Team, and member of the Sacramento County Domestic Violence Prevention Collaborative. In addition, she is a past member of the Sacramento County Children's Coalition (appointed by the Sacramento County Board of Supervisors) where she served two terms (7 years) on the Violence, Prevention and Treatment seat.

Joyce is a certified Domestic Violence Peer Counselor as defined by the California Evidence Code 1037.1. In addition, she has received specialized advance training on Strangulation Prevention through the Training Institute on Strangulation Prevention in San Diego, CA where she now trains law enforcement and hospital staff on assessing for and treatment of strangulation.

Joyce is an active citizen in her community by being a life member of the Veterans of Foreign Wars Auxiliary, Disabled American Veterans Auxiliary, and American Ex-Prisoners of War, not only locally, but also on a National level.

Most importantly, Joyce is a survivor of domestic violence and gun violence and has dedicated her life to making life better for not only victims of violence but for our active duty military and veterans.

**Joyce Bilyeu, Survivor**  
Director of Client Services, Sacramento Regional Family Justice Center  
Hearings on the Reduction of Crime

**Introduction**

Good afternoon members of the commission. I would like to thank you for inviting me to testify today on this critical issue on behalf of victims of Intimate Partner Violence.

My name is Joyce Bilyeu and I am the Director of Client Services at the Sacramento Regional Family Justice Center (FJC) in Sacramento, California. The FJC is highly collaborative- bringing multiple agencies and services for victim under one roof. This collaborative model is vital to reducing the trauma for those who have already been victimized as it ensures that victims only have to tell their story one time. The core concept of the SRFJC is to provide one place where victims of domestic violence, sexual assault, human trafficking, stalking, elder and child abuse can: 1) talk to an advocate, 2) plan for their safety, 3) apply for a Temporary Restraining Order, 4) meet with law enforcement and prosecutors together, 5) receive trauma informed counseling, social services, spiritual care, and 5) receive additional lifesaving services.

I am also a survivor of Intimate Partner Violence (IPV) also known as Domestic Violence. I am here today to share my personal story of domestic violence, the impact it had on my children and me, and to offer suggestions and recommendations to reduce the trauma of this horrific crime.

I was married for 10 years and had two beautiful children (a son and daughter). Throughout my relationship, my husband physically, mentally, and sexually abused me. He abused me during my pregnancies; broke my jaw and ribs; sexually assaulted me; and often strangled me to near unconscious. There were many times I had to go to the hospital for medical treatment because of the abuse. At the hospital, there was never an assessment done for domestic violence or strangulation, and I was never asked about it by any healthcare provider.

I tried to leave the relationship many times throughout the 10 years but he would always find me, or threaten to kill himself or me if I left. I had no self-esteem at that time and felt very isolated and alone.

Many times, I called law enforcement but they would never do anything to him. They would tell him to calm down or they would threaten to take him to jail. Then, after law enforcement did leave, his violence became even more severe and he would threaten to kill me if I ever called again.

Research has shown that leaving an abusive relationship is often the most dangerous time for a victim. I understand this very well because any kind of control I started to take in my life the more out of control he would become. When I finally did find the courage to leave, he broke into my house one night with an M-16 Automatic Weapon, (which had twenty rounds in it). He chased me down the street shooting at me with the third round going through the top of hair and knocking me to the ground (The gun jammed after that third round). He did all of this in front of our two small children. My husband was arrested that night and later released (he was never sentenced to any jail time for his crime).

Studies have shown that the strongest risk factors that lead to Intimate Partner Homicide are as follows: 1) a perpetrator's direct access to guns, 2) previous nonfatal strangulation, 3) previous rape of a victim, 4) threats with a weapon, 5) demonstration of controlling behaviors, and 6) threats to harm the victim and others. My husband displayed all of these risk factors. However, law enforcement never assessed for my safety or my children's safety nor did they provide me with resources regarding safe housing or safety planning. I believe that if law enforcement had assessed for lethality, during any of the many times they were called; given me resources, and connected me with a victim advocate I might have gotten out of the relationship sooner than later.

My life forever changed that night. It is only by the grace of God that I am alive. It has been a long time since that night, however at times it feels like yesterday. Eventually, I was connected to a Victim Advocate who educated me on the dynamics of domestic violence and how it is about power and control. She provided me with resources, got my children and me into counseling, and gave me lots of support throughout my healing process. However, the most significant thing she gave me was “Hope” for a brighter future.

For the past 39 years now, I have worked in the field of domestic violence prevention. I knew that if I could find the courage to leave so could others. I knew that I needed to be an advocate for other victims. I wanted to ensure that other professionals were educated and trained on how to assess for the risk of homicide, how to develop safety plans with survivors, and to make sure they understood the importance of connecting victims to resources such as safe shelter.

I wanted to be that advocate so I could tell survivors to always remember that they are braver than they believe, stronger than they seem, and smarter than they think. Most of all I wanted to create a pathway to hope for them.

It took a lot for my children and me to work through the trauma we experienced. However, I knew that if we could survive the abuse, we could survive the recovery.

### **Impacts and Effects of Intimate Partner Violence**

Intimate Partner Violence (IPV) is a serious and potentially lethal public health problem. It is a problem that affects the lives of Americans and others around the world. A comprehensive, nationally representative study conducted by the Centers for Disease Control found that 14% of men and 24% of women will experience severe physical violence at the hands of a partner in their lifetime. These statistics do not include other insidious forms of abuse, such as less severe forms of physical violence, psychological aggression, stalking, teen victims of dating violence, or children who are exposed to violence at home. The prevalence of domestic violence cuts across all genders, classes, races, religions, and sexual orientations. The trauma caused by domestic violence permeates the entire family and support network of survivors.

Law Enforcement, healthcare providers, 911 dispatchers, and the overall criminal justice system are routinely contacted by victims of IPV who are at risk for an increase in severity and frequency on the abuse spectrum, with the most severe point being murder.

It is often impossible for survivors to realize the danger they face after reporting an assault to law enforcement. That knowledge could have meant the difference between life and death for so many victims of Intimate Partner Homicide. Victims do not always recognize the potential for abuse to escalate. Nor do authorities always do enough to help victims fully recognize the danger because they have not been trained to identify the indicators.

Intimate Partner Violence impacts women and men, girls and boys, mothers and fathers all across society. Ask yourself these questions:

1. How many children in the nation's foster care system are there due to IPV?
2. How many men in prison are there due to the impact of Adverse Childhood Experiences including IPV?
3. How many women are in prison because they killed or tried to kill an abusive partner?
4. How many police officers have been killed responding to IPV?

IPV is a social malady that must be addressed through collaborative partnerships, including law enforcement, first responders, public health entities, domestic violence agencies, and FJCs.

## Recommendations and Promising Practices

### ***1. Support Funding for Training, Development, and Implementation of a Lethality Assessment and Safety Protocol for Law Enforcement, First Responders, and Victim Advocates:***

One-way to better assess the risk in which a victim finds herself or himself is by asking better questions. The Lethality Assessment Program (LAP) tool that was created by the Maryland Network Against Domestic Violence in 2005 is an innovative strategy to prevent domestic violence homicides and serious injuries. It provides an easy and effective method for law enforcement and other community professionals to identify those victims of domestic violence who are at the highest risk of being seriously injured or killed by their intimate partners. It also allows them to immediately be connected to the local community-based domestic violence agency or a Family Justice Center to provide lifesaving services.

The LAP is a multi-pronged intervention that consists of a standardized, evidence-based lethality assessment instrument and accompanying referral protocol that helps first responders make a differentiated response that is tailored to the unique circumstances of high-danger victims.

The Lethality Assessment Program was originally designed for law enforcement. While the LAP is now used by various allied trained professionals, the basic protocol is similar for all disciplines.

The process begins when an officer arrives at the scene of a call for service. Once the scene is secure and the investigation of the incident is complete, an officer is encouraged to activate the LAP. The officer asks the victim 11 questions on the Lethality Screen, which is the first component of the LAP. The screen itself takes less than five minutes to conduct.

Upon completion of the Lethality Screen, the officer utilizes a corresponding referral and service protocol to direct the victim to the most helpful resources. This second and equally important prong of the LAP is the effectiveness of the real-time connection of a victim to services.

Several law enforcement agencies around the county have been trained on how to identify indicators and implemented the use of the LAP tool with great success. Proponents of the tool say the data behind it speaks volumes. For example, the questions on the survey were developed using research conducted by Dr. Jacquelyn Campbell, a professor at the Johns Hopkins University School of Nursing. Campbell and colleagues found that women were 20 times more likely to be killed by their partner if their partner had threatened to use a weapon on them or had hurt them with a weapon; nearly 15 times more likely to be killed if their partner had threatened to kill them; and nearly 10 times more likely to be killed if their partner had ever tried to strangle them (such as in my case). Based on her findings, Campbell developed the Danger Assessment, an in-depth questionnaire that determines how lethal a domestic violence situation is.

Although I may not have believed at the time my husband's violence could turn deadly, the assessment would have flagged my case as high-risk based on the information in the criminal complaint against my husband. Had law enforcement officers been trained to ask the right questions, and this assessment and protocol been available to me, I could have spoken with an advocate right away who would have explained the indicators, which put me at very high risk. The advocate could then have set up an appointment for me with a domestic violence agency or Family Justice Center by the next day for on-going support.

### ***2. Support Funding for Training on the Assessment Tools Results in Better Outcomes:***

Training on the proper use of IPV assessment tools and respective safety-plan protocols have been shown to increase victim cooperation, trust and satisfaction with the criminal justice system. Given the divisive sociopolitical climate in contemporary society, this one benefit alone should encourage criminal justice leaders to embrace the integration of IPV assessment tools and collaborative safety-plan protocols into the way their agencies respond to domestic violence.

Using the IPV assessment tools include the potential for an increase in District Attorney (DA) filing rates, prosecutions and convictions. This is a common point of contention for police officers because so many DV-related cases are rejected at intake. There is evidence that more highly informed and trained officers write better reports, thus giving intake prosecutors more information to assess the likelihood of successful prosecution. Of major concern for law enforcement, and rightfully so, are those repeat calls for service. Anything law enforcement can do to write better reports, increase prosecutions, educate victims, provide more effective services, and increase self-protective behaviors while reducing return calls for service, should radiate like the axiomatic *win-win* scenario for all of us.

Assessment tools can also inform pre-trial release conditions. Probation officers may already use assessment tools when supervising domestic violence offenders, but an IPV-specific assessment tool may give these officers a more focused risk potential and help them develop action plans for those whom they supervise.

The Lethality Screen and Safety Protocol are both equally important components. The LAP is one of only two models of evidence-based intimate partner homicide prevention to be honored as a “promising practice” by the U.S. Department of Justice. It has been researched, studied and verified.

Finally and most importantly can you just imagine that if the assessment tool of the 11 questions is implemented first by the 911 dispatcher when that first domestic violence call comes in (if that information can be obtained while still on the call with the victim) and then sent to the responding officer, just how helpful that would be? It could possibly help to secure the officer’s safety as well as the victim’s AND possible save their lives. The officer would have a sense of what he/she would be encountering upon arrival, and call for backup if the situation was high risk for increased violence. Too many officers have died when responding to domestic violence calls.

### ***3. More Funding and Support for Family Justice Centers.***

When I tried to leave my abusive relationship to find safety and support, it was often overwhelming and traumatizing. To get help I had to go to multiple agencies, resulting in me telling my story repeatedly and reliving the entire trauma each time and often being re-victimized by blaming me for the abuse. For example, often law enforcement will not even do anything if a victim does not have a Domestic Violence Temporary Restraining Order (DVTRO). The process to get a DVRTO is very long and overwhelming (In CA a DVRTO is about 50 pages long).

Many times Law Enforcement and Child Protective workers will use “scare tactics” and tell victims that if they do not get a restraining order they will remove their children. When a victim goes in to get a restraining order, her risk of being seriously injured or killed becomes greater. This is because she is starting to take some control over her life and then the abuser starts to get out of control. **RESTRAINING ORDERS DO NOT SAVE LIVES...SAFETY PLANNING DOES.**

As a survivor trying to leave I had to talk with law enforcement, counseling centers, child support, public assistance office, court personnel, district attorney, district attorney advocates, healthcare providers, family, friends, kids schools and so forth while at the same time being harassed and stalked by my abuser. This does not include talking to the hot line worker, my pastor and others. It also does not consider all the time it takes to talk to each person, the difficulties getting transportation, and making appointments. In addition, not only was I dealing with all of this external stuff I was dealing internally with depression, anxiety, sadness, anger, guilt, hopelessness and other emotions. I worried about my children, their school, their emotional wellbeing, the trauma they experienced, food, clothing, housing, etc. It was just really too much for me. I was just a young mother trying to survive and find some hope for a better future for my children and myself.

If there had been a Family Justice Center I could have gone there to get all the services and support I needed in one safe place, not have to repeat my story, and be able to start the healing process a lot sooner than later.

Family Justice Centers focus on reducing the number of times victims tell their story, the number of places victims must go for help, and look to increase access to services and support for victims and their children. Partner agencies at a Family Justice Center may be comprised of, but are not limited to: Community-based rape crisis, domestic violence, and human trafficking advocates, Law enforcement personnel, Medical personnel, District attorneys and city attorneys, Victim-witness program personnel, Domestic violence shelter service staff, Social service agency staff members, Child welfare agency social workers, County health department staff, City or county public assistance workers, Mental health professionals, Civil legal service providers, case managers, advocates, and other service providers.

If a victim needs counseling that resource is in the building, if they need to get a job to take care of themselves financially, that resource and career paths are there. If they need cloths for a job interview, they can get them at the FJC. If they were strangled and need an exam, they can get it there by a forensic exam nurse, if their child needs to be interviewed due to child sexual abuse there is a Child Protection Services forensic interview on sight, or if they need safe shelter the FJC can make those arrangements, along with many other immediately accessible services.

Family Justice Centers offers a Camp Hope America for children exposed to domestic. Camp HOPE America is the leading year-round camping and mentoring program in the country for children and teens impacted by domestic violence. Camp is focused on creating collaborative, trauma-informed, as well as hope-centered and healing-centered pathways for trauma-exposed youth to believe in themselves, in others, and in their dreams.

Family Justice Centers are very cost effective because of their collaborative model. Having a Family Justice Center in all communities could result in an increase in victim safety, increased prosecution of offenders, increased efficiency in collaborative services and increased community support of the family justice center model.

Documented and published outcomes of Family Justice Centers include: reduced homicides; increased victim safety; increased autonomy and empowerment for victims; reduced fear and anxiety for victims and their children; reduced recantation and minimization by victims when wrapped in services and support; increased efficiency in collaborative services to victims among service providers; increased prosecution of offenders; and dramatically increased community support for services to victims and their children through the family justice center model. (Gwinn & Strack, 2006). In addition, the Family Justice Center model has been identified as a best practice in the field of domestic violence intervention and prevention services by the United States Department of Justice. It was included as a “purpose area” under VAWA 2005. Additionally, three states have legislation defining Family Justice Centers. **California:** California AB 1632 **Louisiana:** Louisiana HB 1860 and **Oklahoma:** Oklahoma Statute Title 22-60.31

#### **For Additional Information and Resources:**

- Lethality Assessment Program: <https://lethalityassessmentprogram.org>
- Sacramento Regional Family Justice Center: [www.hopethriveshere.org](http://www.hopethriveshere.org)
- Alliance for Hope International: <https://www.allianceforhope.com>
- Maryland Network Against Domestic Violence (MNADV) <https://mnadv.org>
- Dr. Jacquelyn Campbell Danger Assessment Tool: <https://www.dangerassessment.org>
- Great Book that I would encourage all to read titled: “*No Visible Bruises*” by Rachel Louise Snyder

Thank you for allowing me to share my story with you and for considering my recommendations. Thank you also for doing your part in creating pathways to hope for so many who have lost theirs. –Joyce Bilyeu

## Adrianna Griffith

SA/DV Specialist/Lived Experience Expert, Women's Center for Youth and Family Services



Adrianna is a native of San Jose, CA and has been a longtime resident of Stockton, CA since she was 14 years old. Throughout her life she has experienced multiple conflicts and victimizations ranging from community violence, family violence, police harassment, sexual assault, including exploitation and incarceration. She graduated from Tokay High School in Lodi, CA in 2006 and began classes at Delta College not long after. A year later in 2007 at 19 years old she made the difficult choice of having an abortion and a year later became involved in sexual exploitation. In 2010, Adrianna found herself facing incarceration as a direct result of her exploitation and did not come home again until 5 years later in 2015. Five years later in 2020, she has the privilege and honor of using her lived experience to help others who may be going through similar circumstances.

She has worked with The Women's Center Youth & Family Services for almost 4 years in various positions and currently is providing direct services to victims and their families. Adrianna's passion and focus has always been on empowering those most impacted by mass incarceration and human trafficking, helping them to unlock their full potential and understand how their vulnerabilities and victimizations led to their decision making. Speaking to community members and community partners about the issues and how they can all intersect in someone's life. Her goal has always been to give back to her community and create a safer space for all to be heard, seen and accepted.

Adrianna has conducted trainings for social workers and law enforcement officials as well as hosted presentations for teachers, counselors and students from junior high school on up to college. In 2019 she became an Outside Organizer for the organization Initiate Justice, whose mission is to activate the power of those directly impacted by mass incarceration through legislative advocacy and policy. She has attended and participated in two Policy Days at the State Capitol in Sacramento and has been on multiple panels to provide insight into various fields including victim services, law enforcement and legal assistance.

Adrianna is currently back in school and studying for a degree in political science and hopes to one day hold a law degree to further her impact and mission of helping those who may otherwise not be seen as victims of crime.



## **Written Testimony**

**Adrianna Griffith, Lived Experience Expert**

**DV/SA Specialist – Women’s Center Youth & Family Services**

**Outside Organizer- Initiate Justice**

### **Introduction:**

Thank you Commissioners for graciously allowing me the privilege of speaking with you today. It is an honor and truly humbling to be able to represent the many men and women throughout our country that have similar stories to mine. Survivors of crime, who have gone unseen in the fight for justice and who have been systematically told their victimizations do not warrant the same care or concern as others. Survivors who at first glance do not seem to be victims of crime, but offenders instead. Survivors whose behaviors outweighed their victimization on the scales of justice and faced incarceration instead of a chance at healing and redemption. Today, I will not tell you a story about an offender who seeks sympathy as a way of escaping accountability, but the story of someone who suffered multiple forms of violence and had no tools to effectively cope with the poly-victimization experienced throughout her life.

### **My Story:**

The first time I ever experienced a form of violence was within my own household. Growing up in a blended family, unfortunately there were times of tremendous conflict between family members. I witnessed and experienced verbal abuse on several occasions and witnessed my older siblings being severely disciplined. At around 10 years old, while staying over at a friend’s house, I came close to being sexually assaulted by one of their older siblings. I never said anything because I thought that I would be in trouble and would not be believed. I also feared that I would lose my best friends. The conflict between family members continued off and on as part of a cycle over the years. Law enforcement also became a regular presence at our home due to my older siblings being involved with the criminal justice system as minors. At one point, local law enforcement conducted a raid in the middle of the afternoon while I had been home. They burst into our home without warning and aimed their automatic assault weapons at everyone in sight, myself included. I was 11 years old. There were no follow ups done and no referrals had been made to CPS to check on my emotional and physical wellbeing after that ordeal. I was left to deal with that trauma on my own, without so much as a mental health checkup. By the time I was 12 years old, I found myself wanting to escape my reality at home quite often and by the time I was 13, I had grown angry and resentful and began to experience angry outbursts at an increased rate. This went unnoticed and unaddressed well into my teenage and adult years. I had no idea how to cope with the anger inside me. I felt powerless and afraid and did not even begin to know how to articulate what was going on with me. I just knew that I was angry but I had no idea why. It never occurred to me that my anger had been a response to the trauma that I had already experienced in my short 13 years of life.

My parents and I moved to Stockton, CA when I was 14 while my older siblings remained behind in San Jose. I went to high school in Lodi and graduated in 2006. That time in my life was relatively quiet and normal. Law enforcement was no longer involved with my family at that point and there were less arguments in the house. Still, there was some verbal abuse happening every now and then. My anger was still very present at this time and was managed like it had always been. It was meant with punishment and discipline. I never saw a counselor or any mental health professional when it came to addressing my anger. Later on, while taking classes at the local community college my first year after high school I began my first relationship and 7 months later discovered I was 7 weeks pregnant after we had broken up. I was 19 years old and was now faced with having to make an extremely difficult choice, that I had no idea would impact my life so severely. I had an abortion at 7 ½ weeks and that experience was the “straw that broke the camel’s back.” I fell into a deep depression and when I came out of it I was angrier and more resentful than I had previously been at any other time in my life. I began to utilize unhealthy coping mechanisms in ways I had not used them before. In the past, in high school, I had started to practice self-harm in the form of cutting. Now, at 19 years old, I was experimenting with alcohol and substance use. Anything that would numb the pain I was feeling inside my heart.

Due to my increased use of alcohol and substances, I was placing myself in unsafe situations. I would drink and use around people that I barely knew and many times became the victim of a sexual assault or attempted sexual assault. Because of those experiences, I became promiscuous as a way of controlling when and where I had sexual contact with people. I said yes more often than I said no because I thought it would prevent me from being raped and taken advantage of. Today, I have an understanding of how mistaken I was about that. In truth, I became less safe because now others viewed me as an object. Something to simply be used and discarded. By the time I was 21, I had experienced multiple sexual assaults and had been sexually exploited by others for financial gain.

At this point in my life, I was extremely angry, depressed, and borderline suicidal. I hated my life and had absolutely no regard for anyone else’s at that point. I began to act on my anger when confronted with conflict and fed off of the negative energy around me. This same time, I entered into a very toxic relationship characterized by domestic violence and sexual exploitation. I no longer had a will to live and I was operating on auto pilot most of the time. My significant other at that time, was very controlling and manipulative and would often use physical violence as a form of punishment. Affection would also be withheld and often times I was encouraged to physically assault other people as a way of preventing my own assaults. It would be an overwhelming and endless cycle of violence. He would abuse me and I would abuse someone else. Everything came to a head when we were both arrested for assault and pimping charges in July of 2010. Just 7 ½ months after we had started dating.

**My Contact w/ the Criminal Justice System as a VO (Victim/Offender):**

The day I was arrested, the detectives working my case told me that they “knew I was a victim.” They told me that they knew I was not the person people thought I was. I almost began to feel hopeful. That someone was going to really see me after all this time. When they continued

speaking they said I had to tell on my then-boyfriend if I wanted to go home. This was the complete opposite of what I needed at this crucial time. Because of the systematic approach to violent crime that law enforcement has historically taken, it felt like my victimization became conditional from that moment forward. There was no consideration for my mental state as a victim of a crime and what had happened to me. I was seen only as the accomplice and co-defendant. Additionally, there was no consideration for my safety or that of my family despite law enforcement knowing about the gang ties to my specific case.

Because I would not testify, I was charged as an accomplice and co-defendant in the case. I remained in the county jail to fight my case for 2 additional years due to my bail amount being set at an amount I was not financially able to pay. I spent 2 years going back and forth to court having only seen a mental health professional one time, despite corrections staff knowing about my fragile mental health state. Once again I was left without the proper tools to cope with my anger and depression. I eventually began cutting again while inside the jail but managed to keep it concealed from staff.

There were no mental health clinicians performing wellness checks or follow up appointments, despite my being prescribed medication for depression and anxiety. I would get into fights and again this was meant with punishment and isolation in the administrative segregation unit. Alone in a cell for 24 hours a day for weeks and weeks and not one visit from a mental health professional. Once again I was left to cope the only way I knew how. By self- destruction and substance abuse.

I came home from prison in 2015 and although I had done a lot of work on myself to improve my thinking and behaviors, I still suffered from unaddressed anger on a therapeutic level. It was not until 2017 that I finally gained a full understanding of how the trauma that I had experienced throughout my life shaped my decision making.

### **A Breakthrough:**

When I attended a training on Adverse Childhood Experiences for my job back in 2017, everything became clear. I realized that from that very first experience with violence I became more likely to commit violence myself as well as be more likely to experience re-victimization. The thing that stood out to me the most was that studies showed the risk of violence was less than when the trauma was addressed right away as opposed to later on in life. This information caused me to think about my own experience and how my life could have been different if I had been exposed to therapy and mental health services early on in my childhood.

I started to read more and more about adverse childhood experiences and what the end results might be when those experiences go unaddressed. The results were strikingly similar to my own. Substance abuse, depression, anxiety, violence within relationships and ultimately incarceration and/or death. Then I began to think about other like me that I had met along my journey. So many came from backgrounds of abuse and neglect. Mostly everyone that I encountered in prison had been sexually abused as children or experienced domestic violence in their homes as children. People that had been trapped in the cycle of violence most of their lives and were majority repeat offenders. It was then that I realized the key to reducing violent crimes was not in

the continued arrest, conviction and incarceration of vulnerable people, but in healing, compassion and mental health services.

### **My Recommendations/Hope for a Healing System:**

In the 4 years that I have worked for the Women's Center Youth & Family Services I have come across many people who have experienced multiple forms of violence. One thing that I have seen consistently is people attempting to understand how their lives had gotten so out of control. Many of my clients have experienced violence but they have also committed acts of violence against others as well. I find it both challenging and rewarding working with these individuals because I get to help folks realize their victimizations and hold space for that as well as help them to be able to hold themselves accountable for their actions and behaviors that may have harmed someone else.

I cannot definitively speak for others but I wholeheartedly believe that crime reduction will only happen when we begin to address the pain and trauma that so many in this country are walking around with on a daily basis. From childhood to adulthood, I believe that people will only be able to stop causing harm to others, when they learn how to stop causing harm to themselves, thus stopping the cycle of violence. The following is a list of recommendations I believe will effectively cause a reduction in violent crime and recidivism as a whole:

- Establish Nationwide Trauma Informed Diversion Programs for 1<sup>st</sup> Time Offenders of violent crimes, where the crime did not result in someone's death.
- Establish Nationwide Trauma Informed Intervention Programs for individuals charged with pimping and/or human trafficking as a first offense where the victim was 16 years or older and the suspect was no older than 26 years.
- Increase trauma training for law enforcement and corrections officers to more effectively deal with suspects and victims who have experienced multiple forms of trauma.
- Establish a "911" emergency phone line for mild to severe mental health emergencies where licensed mental health professionals would respond to crises.
- Establish State and Federal legislation mandating ALL incarcerated persons to be assigned a mental health clinician from entry to exit. Further establish a policy to keep caseloads regulated and reduce risk of service provider burnout.
- Eliminate incarceration of juveniles and refer juvenile cases over to a behavioral health agency specializing in juvenile trauma responses nationwide.
- Establish a nationwide diversion program for survivors of sex trafficking utilizing evidenced based curriculums or curriculums developed by Lived Experience Experts. (Ex. The Ending The Game Curriculum, Beyond Exploitation/Beyond the Hustle)
- Increase funding to organizations providing direct service to victims of crime
- Increase access to rehabilitative programming for incarcerated individuals.
- Amend VOC Funds to allow individuals on probation or parole access to emergency funds should they become the victim of a qualifying crime.

These are just a few suggestions I have for improving our system, healing people from their trauma and reducing crime as well as taking away some responsibility from law enforcement as

the only line of defense against crime. As law enforcement, I realize that your first instinct is to protect others from those that do harm, but today I ask you, what would you want to see happen in the lives of your children or your grandchildren if they were to ever suffer from an adverse childhood experience? How would you want someone to help them if they began to struggle with anger or depression? These are the questions we must consider if we do not want to see today's victims become tomorrow's offenders. We must act intentionally with the goal of healing as opposed to mass incarceration. Our country holds 5% of the world's population and 25% of its prisoners. In my experience and opinion, 100% of those people have all been harmed as children in some way, shape or form. We cannot continue to punish those the system has long failed to protect. We must change the way we look at people who offend and address each case on a person by person basis. Victimization is not a one size fits all. It takes on various forms and as such needs to be addressed in various ways.

Thank you so much for your time today. I appreciate the opportunity to share my story with you all and my thoughts on what could make our systems better. I am more than the worst thing I have ever done. More than my trauma, more than a number, and more than just an ex-offender. I am a strong black woman standing in solidarity with anyone with a story like mine, fighting to be seen, heard and understood. Thank you again for your time and God bless!

## LINKS FOR MORE INFORMATION

1. **Adverse Childhood Experiences:**  
<https://www.cdc.gov/violenceprevention/pdf/preventingACES-508.pdf>
2. **Ending The Game Curriculum:** <https://endingthegame.com/research-2/>
3. **AB 3160 Improving Access to Rehabilitative Programming:**  
<https://docs.google.com/document/d/1OqtJuazbgNdH2Lf7b-Unq7uECp8i3VCdQ0YiVwaShJY/edit>
4. **“Democracy Needs Everyone: The Urgency of Ending Felony Disenfranchisement in California”** is a first-of-its-kind report unveiling our groundbreaking research on the importance of restoring the right to vote to people in prison and on parole:  
<https://www.initiatejustice.org/wp-content/uploads/2019/03/Democracy-Needs-Everyone-Report-Initiate-Justice.pdf>
5. **Living Beyond** founded by Lived Experience Expert Ebony Jones:  
<https://www.linkedin.com/in/ebony-jones-1ab289172/>
6. **Restore Justice:** <https://restorecal.org/>
7. **Victim Compensation Fund Expansion:** <http://www.youthalive.org/wp-content/uploads/2018/08/AB-1639-E.-Garcia-Victim-Compensation-Fund-Expansion-FactSheet.pdf>

## Bella J. Hounakey

Subject Matter Expert, United States Advisory Council on Human Trafficking



Bella J. Hounakey has dedicated her professional life to encouraging and supporting victims of trafficking as they navigate the recovery process. Since 2011, she has served as an advocate, organizer, and speaker on anti-trafficking programs and policies. She previously served on the Board of the Human Trafficking Coalition in Michigan. She has also counseled female victims of sex trafficking at a specialized residential Trauma Recovery Center. Since 2015, she has worked with and supported the most vulnerable trafficking victims in the foster care system. Bella is currently a member on the U.S Advisory Council of Human Trafficking. Throughout her career, Bella's ambitions have remained steadfast: raise awareness, reduce risk of victimization, educate members of the judicial system and general public, and advocate for victim protection and treatment. Bella received a Bachelor's degree in Criminal Justice and Spanish; and a Master's degree from Western Michigan University and is currently working at the Department of Homeland Security.

## Natasha Alexenko

Founder, Natasha's Justice Project



At the age of 20, Natasha Alexenko was violently assaulted at gunpoint in New York City. It took nearly 10 years for her rape kit to be tested and another several years before her attacker was finally apprehended. Her recently written memoir, *A Survivor's Journey: From Victim to Advocate* recounts the attack and her advocacy work. Natasha's story was also featured in HBO's critically acclaimed documentary, *Sex Crimes Unit*. Natasha serves as a subject matter expert for the Sexual Assault Kit Initiative (SAKI), where she works with law enforcement officials, prosecutors, and rape crisis center staff members on techniques to properly support victims and process kits. Natasha has been instrumental in the passage of over 29 rape kit reform legislations across the nation. Along with her partner Scott, nephew Alex and their dog Piper, Natasha lives on Long Island, New York.



**Natasha Simone Alexenko  
Sexual Assault Survivor  
April 22, 2020**

**Presidents Commission Hearing Panelist  
Crime Victims Perspectives Panel**

**MY STORY**

In 1993 I was repeatedly raped and robbed at gunpoint by an unknown assailant in New York City's Upper West Side. The event and its aftermath changed the trajectory of my life in ways I cannot begin to conceptualize. My family and friends were also devastated by the crime and have difficulties processing the event even to this day. After my assault, I went to the hospital for a rape kit exam, which was almost equally as traumatizing. I fought my immediate instinct to take a shower in order to maintain the evidence left on my body and clothing. *I* had become a crime scene.

The two detectives that worked on my case in aftermath were so very kind and communicative. Although I viewed hundreds of mug shots, I could not identify my attacker as I could barely remember what he looked like. A year later, I received a phone call indicating that all leads had been exhausted and my case would be closed. I was absolutely devastated. I blamed the exhaustion of leads on myself – I could not remember what he looked like. I was haunted by the images of future victims being harmed by this man and blamed myself for each and every one of them. Unbeknownst to me, the rape kit I submitted to at the hospital that night — which would contain DNA evidence to help identify my assailant — wouldn't be tested for almost a decade.

In 2003 I received a phone call from the New York County District Attorney's Office indicating that my rape kit had been tested. I would need to testify before a grand jury in order to "stop the clock" on the statute, which was nearing its 10-year limitation. I did so and the DNA belonging to the "John Doe" in my rape kit was indicted with the crime. The evidence in my rape kit was entered into the Combined DNA Index System (CODIS) but at the time no matches were found.

In 2007 Victor Rondon, a career criminal who committed a variety of crimes across the country, had his DNA entered into CODIS after assaulting the police officer who was giving him a citation for jaywalking. Rondon's DNA matched the evidence found in my rape kit.

After nearly 15 years, I faced the man that raped me and I was able to share my story in front of a jury. Victor Rondon was sentenced to prison and is up for parole in 2027.

I am eternally grateful for the dedication and determination demonstrated by the law enforcement officials and prosecutors that worked on this case. Their perseverance compelled me to use my journey to justice as a catalyst for change. I have shared my story throughout the nation, hoping to unite law enforcement and survivors together in the pursuit of justice. I was even fortunate enough to be invited by the government of Brazil to share my story as they follow our country's lead in implementing CODIS for themselves.

I am honored to be included in several federal initiatives to support rape kit reform including the Sexual Assault Kit Initiative (SAKI). I have shared my story before congress and have supported legislation in 26 states across the nation.

It is important to note that my story is unique to me and that other survivors have their own personal struggles that may not resemble mine. I am aware of the fact that most rape victims are assaulted by someone they know. I have been very fortunate to have resources at my disposal that are not available to every survivor. I fight every day to make certain they do.

## **PROMISING PRACTICES**

### Law Enforcement

I have seen a shift in the way law enforcement officials handle victims of sexual violence. Many officers are routinely conducting trauma-informed interviewing processes when dealing with victims of sex crimes. Multidisciplinary approaches that include advocates and prosecutors are being utilized; insuring victims are given the appropriate resources to move forward with their cases. Law enforcement officials deserve accolades for embracing these procedures. While many law enforcement agencies are employing these practices and receiving appropriate training, we need to be certain these procedures are implemented nationwide.

### Grants

Over the past few decades, the Office on Violence Against Women (OVW) has developed several initiatives to support survivors of sexual assault. These initiatives have had a profound effect on how sexual assault cases are handled. Supporting the grant programs and training offered through OVW should continue and grow. I have heard from many survivors who have directly been impacted by these efforts. I know several law enforcement officials who are grateful for the training they have received through these programs. While it may be difficult to determine by metrics and data, survivors are aware and grateful for these efforts. We want to make certain they continue to be supported and evolve.

## Legislation

Most states throughout the nation have created legislation to support survivors of sexual assault. These legislations insure rape kits are tested, survivors are given specific rights and that advocacy groups and coalitions are supported. All these efforts should be mirrored on a federal level.

## **SUGGESTIONS FOR CONSIDERATION**

### Including Survivors in Planning Processes

The biggest suggestion I would make is to include more survivors in planning processes. What I have heard from survivors unanimously is that we need to be included in discussions and not merely utilized for our traumatic stories. There is no one better suited to discuss the unique needs of sexual assault victims than the individuals who have already lived through the process. Our insight is crucial. Reading data and understanding the physiology of trauma is an important component but no one is more versed in the nuances than we are. Not all of us may be ready to serve in such a capacity but many of us are ready and waiting to be invited to the table. We feel we have so much to offer in terms of discussing what needs to be in place to move forward as a nation. We all have different perspectives and while none of us can serve as a blank blueprint, we can share our personal experiences and recommendations.

### Training

Trauma-informed training is essential and it works. Law enforcement agencies and prosecutors who have received training and understand what trauma looks like and how to approach it are making a difference. These measures need to be the standard and not the exception. Agencies that have adopted these practices deserve to be acknowledged for their progress. Often, funding is not available to undertake these measures. Agencies should never be unable to receive training due to a lack of funds. We need to make certain programs are in place to encourage and financially support these initiatives. Developing a level of trust makes a survivor more apt to participate in the case.

Having a great relationship with law enforcement also allowed me to flourish even after my case was resolved.

### Testing Rape Kits

At present, thousands of rape kits are sitting on shelves collecting dust across the nation. We need to be certain measures are put into place to make certain every kit is tested. There is a plethora of data that clearly illustrates how testing rape kits

assist investigations, catches serial predators, and insures public safety. Testing rape kits is an investment in public safety.

## **CLOSING**

I would like to express how honored I am to have an opportunity to share my insights with this esteemed commission. I am moved by your commitment to public safety. I have managed to publish my memoir, participate in panels and use my voice for the advancement of the nation. I would not have the fortitude to do so had I not been treated with respect and sensitivity through the aftermath of my assault. We have the most incredible people in the world working towards making effective change. I continue to be inspired by everyone's efforts.