

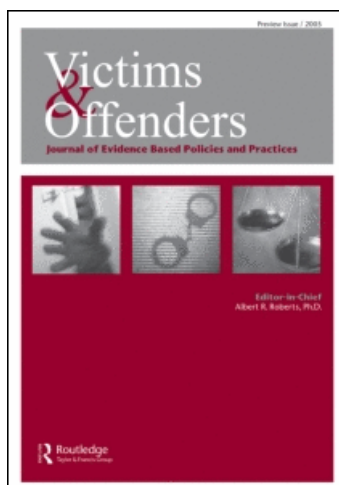
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Captive-Taking Incidents in the Context of Domestic Violence: A Descriptive Analysis

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Captive-Taking Incidents in the Context of Domestic Violence: A Descriptive Analysis

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Abstract: Captive-taking events in the context of domestic violence have received increased attention from law enforcement and mental health professionals. However, despite the high lethality risk of these situations, for both the partners involved as well as first responders (police officers, crisis negotiators), only a modicum of investigative activity has been directed to these incidents. Further, the few extant reports in this

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area are primarily clinical case studies or anecdotal accounts. The purpose of the present investigation was to expand on previous work by providing more descriptive analyses of these events in order to garner data potentially useful in crisis negotiators' efforts to resolve these critical incidents in a peaceful, nonviolent manner. Specifically, three categories of variables (demographic, situational, and outcome) were examined in cases obtained from the Hostage/Barricade Database System (HOBAS) maintained by the Crisis Negotiation Unit of the Federal Bureau of Investigation (FBI). Results showed that (1) these incidents tend to be unplanned, (2) they occur in private residences, (3) third party intermediaries are judged to have minimal impact on the negotiated outcome, and (4) subjects tend to be white in their mid-30s or 40s with prior violent arrest and substance abuse histories. Further, white females are more likely to be victims. Extended family members and children are increasingly becoming involved in these situations. Additionally, five cases were chosen to reflect the primary categories of variables. Limitations of the study and implications for future research in this area are also discussed.

Keywords: domestic violence, hostage, barricade, crisis, negotiation

The magnitude and severity of domestic violence in the United States has been well established for many years. Data attesting to domestic violence as both a growing social problem and a major public health concern in this country are unequivocal. For example, according to statistics from the U.S. Department of Justice (2005a), nearly 30% of female murder victims in this country are killed by current or former intimate partners. And approximately 5 million women are physically assaulted or raped by a partner or spouse each year (Tjaden & Thoennes, 2000). Further, the major cause of death for women in the workplace is murder, with many of these killings carried out by a husband, boyfriend, or ex-partner (American Institute on Domestic Violence, 2001). Evidence has also accumulated revealing the harmful impact of domestic violence on children in these families (e.g., Starr & Wolfe, 1991; Warner-Rogers, Hansen, & Hecht, 1999). Moreover, the greater potential for child abuse in homes characterized by relationship aggression has been established as well (e.g., Rosenbaum & Gearen, 1999).

Perhaps less widely known is the lethality risk for law enforcement professionals who are called to intervene in cases of domestic violence. In fact, first responders often become victims themselves, as reflected by the high number of police officers who are injured or killed responding to domestic violence calls. Indeed, from 1996 to 2005, 17% of all police line-of-duty injuries or deaths occurred while handling "domestic disturbance" calls for service (U.S. Department of Justice, 2005b).

A particularly unique and potentially lethal situation for victims, as well as responding officers, is captive-taking that occurs in the context of domestic violence. Captive-taking is the holding of one or more persons against their will with the actual or implied use of force (Lanceley, 1999; Vecchi, Van Hasselt, & Romano, 2005). A captive-taking situation could result from a crime (e.g., a

failed bank robbery), an altered murder-suicide, or an act of terrorism in which a ransom is sought or a political agenda is promoted (Rogan, Hammer, & Van Zandt, 1997). Barricaded captive-taking comprises two distinct types of situations: hostage situations and crisis situations (Vecchi & Van Hasselt, 2008). A barricaded hostage situation is where a perpetrator takes a person captive unwillingly for rational or instrumental reasons in order to influence a third party to comply with a demand. A barricaded crisis situation is where a perpetrator takes a person captive for irrational or expressive reasons for the purpose of threatening or harming the captive. In the former situation, the captive is termed a hostage; in the latter situation, the captive is termed a victim (Vecchi & Van Hasselt, 2008). Captive-taking in the context of domestic violence refers to an individual engaging in an "expressive" response which "involves those behaviors designed to communicate the subject's frustration, outrage, oppression, power, passion, significance, despair, anger, etc. These acts appear illogical and often highly emotional, in that there is no substantive demand or obvious way in which the hostage-taker could stand to gain anything" (Noesner & Webster, 1997, p. 13). Moreover, there have been an increasing number of domestic violence incidents in which the victim, and in many cases her child(ren), have been taken captive by her husband or partner; a significant number of these events have ended with the injury or death of the victim-captives (Van Hasselt et al., 2005).

In recent years, the field of law enforcement has increasingly employed psychologically based crisis intervention techniques (e.g., use of active listening, rapport-building) in law enforcement negotiation strategies to diffuse and peacefully resolve high-risk events, such as captive-taking in domestic violence situations (Strentz, 2006; Van Hasselt et al., 2005). Now referred to as "crisis negotiation" to reflect a broader strategy in conflict resolution (Hatcher, Mohandie, Tuner, & Gelles, 1998; McMains & Mullins, 2001; Vecchi, 2002), this approach has consistently proven effective in accomplishing nonviolent resolutions of high-risk events (Regini, 2002). Illustrative are data from the Hostage/Barricade Database System (HOBAS) maintained by the Crisis Negotiation Unit of the Federal Bureau of Investigation (FBI) (Flood, 2003). HOBAS serves as a database on hostage/crisis incidents through the systematic collection of cases (postincident) from law enforcement agencies across the country. In an analysis of HOBAS data from 2002 to 2003, results indicated that about 82% of reported incidents were resolved without death or injury to the subject or victim (Flood, 2003).

To assist crisis negotiators in their conflict resolution efforts, Van Hasselt et al. (2005) conducted one of the first investigations of background and characteristics of persons who take their victims captive in their own homes, intrapersonal and environmental factors affecting the probability of these critical incidents, and the circumstances under which they occur. Such data

have heuristic value to crisis negotiators in resolving these volatile situations without violence. In a case study analysis of five domestic violence cases obtained from HOBAS involving various forms of abuse (physical and emotional) and murder, as well as disparate outcomes (negotiated versus tactical resolution of the event), Van Hasselt et al. (2005) identified the salient role of several risk factors noted in previous spouse abuse research (e.g., Bixenstine, 1999; Saunders, 1995), including substance abuse, possession of a deadly weapon, prior history of domestic violence, other criminal activity, and threats of (or actual) separation or divorce. While an important first step, Van Hasselt et al. (2005) acknowledged the need for additional work in this important area with a larger sample, and other opportunities for further analyses.

The purpose of this study is twofold: (1) to expand on the case series presented by Van Hasselt et al. (2005) by focusing on a larger sample of offenders, victims, and events; and (2) to more clearly delineate perpetrator and victim variables/characteristics that might have value in refining crisis negotiation and remediation strategies in these high-risk encounters.

METHOD

Procedure

Fifty-six cases were obtained from HOBAS, a postincident data collection tool which stores historical data from participating law enforcement agencies across the nation on barricaded hostage, barricaded crisis, suicide, kidnapping, and attempted suicide incidents (Flood, 2003). HOBAS was developed by the FBI's Crisis Negotiation Unit of the Critical Incident Response Group (FBI Academy, Quantico, Virginia), and is a component of the Law Enforcement Negotiation Support (LENS) system available to law enforcement personnel in the United States, via the Law Enforcement Online (LEO) Internet-based network.

Descriptive data were collected from all 56 cases in order to (1) capture case studies representing emerging trends and (2) develop a template profile of these captive-taking situations occurring in the context of domestic violence. Three categories of variables were examined: (1) *situational variables* included the perpetrator's planning of the event, the geographical and physical location of the incident, method of communication between offender and law enforcement, and weapons employed; (2) *demographic variables* were the subject and victim ages, gender, race, and marital status; (3) *outcome variables* consisted of method of victim release (non-negotiated release, rescue by tactical team, release at time of negotiated surrender, negotiated release, or no release); treatment of victim (physically, verbally, and/or sexually abused, or no abuse); and victim's status (no injury, injury, or killed by subject) postincident.

RESULTS

Descriptive Analyses

Situational Variables

Situational variables, including the planning of the incident, location, weapons used, third-party intermediary (TPI) use, and presence of a mental health professional, are presented in Table 1. The data revealed that most of

Table 1: Situational variables.

Planned or Unplanned Incident	
Planned incident	14.3%
Unplanned incident	83.9%
Location	
Private residence	55.4%
Apartment/Condo	26.8%
Mobile home	8.9%
Woods	1.0%
Other	7.1%
Initiated Communication	
Law enforcement officer	37.5%
Negotiator	3.6%
LEO & negotiator	46.4%
Subject	7.1%
Other	5.4%
Communication Method	
Existing phone service	35.7%
Throw phone	3.6%
Voice contact from cover	16.1%
Bullhorn/PA	3.6%
Multiple methods	37.5%
Face-to-face	1.8%
Third Party Intermediaries	
Yes	25.0%
No	75.0%
Mental Health Professional Utilized	
Yes	19.6%
No	80.4%
Number of Victims	
1	71.4%
2	12.5%
3	8.9%
4	5.4%
More than 4	1.8%
Weapons Used During Incident	
Handgun	31.7%
Shoulder weapon	17.1%
Knife/Sword	7.3%
Handgun and shoulder weapon	9.8%
Blunt object	2.4%
None	17.1%
Multiple	14.6%

the incidents tend to be unplanned (83.9%). Further, these incidents are more likely to occur in a private residence (55.4%) or an apartment/condominium (26.8%). However, there are incidents where the domestic violence occurs in locations such as at the workplace or in multiple locations (7%).

Most likely, the law enforcement officer and/or negotiator (37.5%, 46.4%) will be responsible for making the initial contact with the subject and victim(s). It is unlikely that the subject will make the first contact (7%) although this seems to occur in planned incidents with higher demands that may not relate to the domestic violence issue, including access to the media. Further, multiple methods were used in the communication (37.5%) between law enforcement officials and the subject, although the utilization of an existing landline telephone was the most common means (35.7%). Also, 75% of the cases did not utilize a TPI, and 80% did not use a mental health professional at the scene. In 71% of the cases there was only one victim, which was usually the intimate partner (20%). Hand-gun and/or shoulder weapon (31.7%, 17%) were the weapons of choice in these domestic incidents.

Subject Variables

Subject characteristics and demographics are delineated in Table 2. The majority of perpetrators were white (63.4%), single (34%) or married (29.3%), and ranged in age from approximately 33 to 44 years. Over 75% of the subjects had a prior arrest history; of those arrests, over 50% were for violent offenses. This number is likely an underestimate, since nearly 20% of those prior arrest reports did not indicate the type of crime previously committed by the subject. Also, 80% of the subjects did not have a restraining order against them. Further, substance abuse (both previous history and use during the incident) was likely to occur in these events (63.4%, 53.6%).

Approximately 40% of the subjects had a significant mental health history and were previously treated in an outpatient or inpatient setting. Although most were arrested with no injuries (82.9%) at the conclusion of the incident, 2% were killed and 2% died by means of police-assisted suicide ("suicide by cop").

Victim Variables and Treatment

Table 3 presents victim characteristics and treatment during the incident. Victims tend to be white (61.8%) females (68.5%) with a wide age range, which is a result of subjects taking multiple victims in these situations, typically younger children. The victim's relationship to the subject is not only as a spouse/ex-spouse (13.5%) or significant other (20.2%); family members (e.g., mother, father, brother, sister) are becoming more involved (44.9%). In

Table 2: Subject demographics and characteristics.

Subject's Gender	
Male	97.6%
Female	2.4%
Subject's Marital Status	
Single	34.1%
Married	29.3%
Separated	4.9%
Divorced	12.2%
Cohabitation	9.8%
Subject's Race	
Caucasian	63.4%
African American	24.4%
Asian	2.4%
Hispanic	9.8%
Subject's Prior Arrests	
Yes	75.6%
No	24.4%
Subject's Type of Prior Arrests	
Violent	51.2%
Drug	4.9%
Not specified/Other	19.5%
Restraining Order	
Yes, prior	9.8%
Yes, current	2.4%
No	80.5%
Subject's Substance Abuse History	
Alcohol	24.4%
Stimulants	2.4%
Other	12.2%
Multiple use	24.4%
Subject's Use of Substances in Incident	
Alcohol	26.8%
Stimulants	4.9%
Other	2.4%
Multiple use	19.5%
Subject's Mental Health History	
Yes	39.0%
No	61.0%
Prior Suicide Attempts	
Yes	12.2%
No	87.8%
Subject Status	
No injury	82.9%
Injury	7.3%
Killed	2.4%
Suicide	4.9%
Suicide by cop	2.4%

12.4% of the cases, victims who did not have a relationship to the subject (e.g., employees, bystanders), were also detained in addition to the family member or significant other. Further, the majority of victims were not abused during the incident (52.8%). However, approximately 45% suffered

Table 3: Victim demographics and characteristics.

Victim's Sex	
Male	29.2%
Female	68.5%
Victim's Race	
Caucasian	61.8%
African American	24.7%
Asian/Pacific Islander	4.5%
Native American	1.0%
Hispanic	5.6%
Victim's Relationship to Subject	
Significant other	20.2%
Spouse/Ex-Spouse	13.5%
Family member	44.9%
None	12.4%
Other	9.0%
Victim's Treatment	
Physically abused	4.5%
Verbally abused	16.9%
Physically and verbally abused	22.5%
Physically, verbally, and sexually abused	3.4%
No abuse	52.8%
Victim's Release Method	
Non-negotiated release	28.1%
Rescued by tactical team	19.1%
Released at time of negotiated surrender	30.3%
Negotiated release	15.7%
No release	3.4%
Victim Status	
No injury	79.8%
Injury	15.7%
Killed by subject	3.4%

some form of abuse. In cases where abuse occurred, 22.5% of the victims were both physically and verbally abused. Most victims were either released at the time of a negotiated surrender (30.3%) or were a result of non-negotiated release (28.1%), either escaping or the subject releasing them prior to the end of the incident. As such, nearly 80% of the victims were released with no injuries.

Outcome of Incident

Table 4 presents additional outcome variables, such as incident resolution and type of tactical action taken (if needed). Over 50% of the cases were resolved through negotiations. If they were not resolved through negotiations or surrender, Special Weapons and Tactics (SWAT) teams took action in 25% of the cases. It is important to note that 5% of the cases ended in suicide or attempted suicide. If tactical intervention was necessary, SWAT was more than likely to use less than lethal means, such as bean bags or gas (64.3%).

Table 4: Additional outcome variables.

Incident Resolution	
Negotiation/Surrender	57.1%
Tactical/Intervention	25.0%
Combination of negotiation and tactical	12.5%
Suicide/Attempted suicide	5.4%
Type of Tactical Action	
Bean bags	64.3%
Chemical	1.8%
Deliberate assault	7.2%
Emergency assault	5.4%
Other various means	21.3%

Case Illustrations

The following five cases were selected from the current HOBAS sample to illustrate some of the variables previously discussed, as well as their manifestation and complexity in actual events. Some of these variables include the subject's substance abuse and mental health history, suicidality, the minimal effect of TPIs, multiple deaths, and the presence of more than one victim (e.g., children).

Case Example #1: Substance Abuse History and Substance Use During Incident

This scenario demonstrates polysubstance abuse and how this may impact the safety of those involved and cause erratic behavior in the subject.

The police department in Monroeville, Alabama, was notified of a fight in a parking lot involving a subject with a gun. The police were advised that the subject, a 29-year-old Native American male, was threatening everyone with his weapon, had placed it to his girlfriend's head, and subsequently dragged her into the woods. Officers pursued the subject on foot into the woods and told him to put down his weapon and release the female. At that time, the subject turned and fired ten shots at the officers. They attempted to negotiate with him without success, and the subject was apprehended by the tactical team. In the course of events, the subject discharged his weapon and injured himself, was taken into custody, and was provided with medical attention. He had previous criminal charges and a prior substance abuse history—specifically for controlled substances and alcohol, which he used during the incident. Also, the victim was verbally and physically abused; however, she suffered no physical injuries. The incident lasted just over one hour with one negotiator on scene. A friend of the couple was used as a TPI. However, this person was judged not to be helpful, as his efforts failed to result in a negotiated surrender.

Case Example #2: Extended Negotiations, High Demands, Injured Victim

This case illustrates the often irrational demands of a subject who takes his partner captive. Further, the victim was physically abused during the incident and received multiple physical injuries.

In April 2001, officers in St. Paul, Minnesota, were called to a residence where a gunman had chased his wife into their home and was holding her captive. The subject, a 36-year-old Asian/Pacific Islander male, told officers over the phone that he had an assault rifle aimed at the victim's chest. He threatened to shoot her if his demands were not met. His demands included a medic (because both of them were bleeding) and a news crew to conduct a live interview so he could report how the criminal justice system had wronged him. After two hours of negotiations, the subject stated that they had six minutes to have a news crew available or his wife would be shot. The deadline passed and the subject became more agitated. He demanded his wife's family be brought to the house to convince her to not leave him. Negotiations continued over the next eight hours; a surrender was eventually negotiated and he was placed in police custody. The subject had no prior arrests, substance abuse, or mental health history. However, there was an existing restraining order that the victim had obtained. The victim was verbally and physically abused during the incident and was released with multiple physical injuries.

Case Example #3: Substance Abuse, Family Member Hostage, Multiple Third Party Intermediaries

This case is unique in demonstrating the detrimental effects of substance abuse during the incident, and the impact of family members being taken captive in addition to the intimate partner. Also, multiple third party intermediaries were used.

In August 1995, the Baltimore County Police Department responded to a domestic disturbance involving a husband, wife, and their four children. When officers arrived, the wife was outside the home with three of the children. She reported that she and her husband had a fight over a misunderstanding when he became highly agitated. After the argument, the subject reportedly took his pistol and placed it in his mouth saying he would kill himself. She stated she came outside with three of her children while one of her sons stayed inside the house with the subject to prevent the suicide. Negotiators spoke with the subject in brief intervals (three to seven minutes) during which he would only scream at the negotiator. The subject contacted his attorney while inside, whereby the attorney called the police to negotiate "a deal" for his surrender. The subject also called a friend who stated the police were going to beat him. Over the objections of the negotiators, the on-scene commander insisted they allow the youngest daughter to talk to him over the phone. However, this strategy had no effect on the situation. Negotiators then permitted an elderly

aunt, who was a nun, to speak to the subject. The subject was first polite and respectful, but then began to scream again when the negotiator came back on the phone. At this time, the subject demanded his wife be brought inside the house. A mental health consultant was then utilized to speak with the subject. The consultant offered psychological services to the subject if he surrendered (via a three-way call between the subject and his wife). At this point, the subject became even more agitated. The tactical team used light and sound diversionary devices and the subject came to the front door; he was convinced to throw his handgun in the bushes. Once outside, the subject was apprehended by the tactical team.

The subject in this case was a previously divorced, white male with no prior arrests. He had a history of Percodan abuse and was currently prescribed this medication when the incident occurred. Although his wife and the other children left before the subject barricaded himself inside the house, the one victim was the subject's 18-year-old son who did not experience any maltreatment during the incident. He was released prior to the resolution of the incident with no injuries. The event lasted over five hours. Multiple methods of communication were used—including a bullhorn/public address system, landline telephone, and three TPIs (who appeared to have little impact on resolution of the incident).

Case Example #4: Mental Health History, Child Injuries

This case serves to demonstrate the role of a subject's mental health history and its potential impact on victims.

In October 1996, Atlanta (Georgia) Police responded to a 22-year-old separated, African American male taking eight people, including family members and children, captive in a private residence. The subject arrived to speak with his estranged wife while brandishing a pistol and a knife. He forced all of the captives into one bedroom and insisted his wife bind the other hostages with duct tape and rope. The subject placed his five-year-old stepson on his lap and stabbed him in the back; the child screamed and the subject sprayed mace in the child's face and into his wounds. The subject then asked his estranged wife to kill her child. When she refused, he cut the child's throat. Fortunately, the child suffered only minor injuries and survived. Next, the subject took his wife to his mother's home where he barricaded himself. Negotiations lasted for two days, but a surrender was eventually negotiated.

This subject had previous violent criminal offenses and was receiving therapy for anger management. A prior restraining order obtained by the estranged wife was no longer in effect. The wife, a 22-year-old African American female, was physically and sexually abused during the incident. The other hostages ranged in age from 1 to 16 years. All were released, without harm, prior to the resolution of the incident. The five on-scene negotiators utilized multiple communication methods, including hostage phone and voice contact

from behind cover. No TPIs were used; however, a mental health expert was consulted during negotiations.

Case Example #5: Previous Suicidality and State Hospital Commitment, Multiple Deaths

This case further illustrates several of the variables characterizing the previous scenario. Here, prior suicidality and commitment to a state hospital for mental health treatment also were relevant.

In March 2000, police were called to a private residence where a 31-year-old white male and his 41-year-old girlfriend were involved in a domestic dispute. The subject physically assaulted her and was taken into custody, but was soon released on bond. He then located his girlfriend at her coworker's house and kidnapped her, killing four other people (unrelated to the victim) in the process. He subsequently broke into an 81-year-old woman's house and stole money, food, guns, and a car; his girlfriend escaped later that night. The subject evaded police for the next ten days, during which time he kidnapped a man and forced him to drive to Virginia where the victim was released. He then broke into another home and took three people captive, including one 12-year-old child. Baltimore County Police negotiated with the subject for 97 hours. They eventually opted for a tactical entry and killed the subject.

The subject in this case had a history of criminal behavior including a previous captive-taking incident and various violent criminal charges. He also had a history of suicidality and had been committed to a state mental health facility. Further, the victim had obtained a restraining order which was no longer in effect. She and three captives escaped without injuries. Negotiators on scene used existing phone service, bullhorn, hostage phone, cell phone, and a robot during the incident. Further, several TPIs were employed including the subject's mother, a mental health consultant, the subject's attorney, and a released hostage from a previous kidnapping incident. As in the previous cases, the TPIs were viewed as having minimal effect on the outcome of the incident.

DISCUSSION

The present study examined the phenomenon of captive-taking in the context of domestic violence by investigating three categories of variables (subject/victim, situational, outcome) that, based on previous case studies and anecdotal reports, have particular relevance in these events. The impetus for this effort is, in part, research showing that nearly 80% of all captive-taking situations are "relationship-driven" (Flood, 2003; Romano, 2003) or barricaded crisis situations, and instigated by relationship difficulties and resentments (e.g., abandonment, rejection). Further, domestic violence incidents are generally viewed as dangerous for police officers due to the potential for physical aggression

(Pinizzotto, Davis, & Miller, 1997). And acts of domestic violence are the basis for a significant portion of police calls for service. It was anticipated that better knowledge of subject and victim characteristics and incident behavior would enable first responders, particularly law enforcement negotiators, to develop and implement more efficacious strategies for resolving these events in a peaceful, nonviolent manner.

Results of this investigation revealed several predominant characteristics emerging in the offender group. Specifically, the majority of perpetrators of these acts were white males in their mid-30s to 40s, usually with a prior history of violent criminal offenses. Handguns were present in most of these incidents, with possession of multiple weapons a growing and ominous trend. This latter finding is consistent with recent data from the Violence Policy Center (2006), which reported that handguns were the most common weapons used by males to murder females. Victims of the incidents also tended to be white and were involved in an intimate relationship with the perpetrator; there was also evidence of verbal and/or physical abuse by the offender over the course of many incidents. Most often, the perpetrator and victim(s) were not harmed at the resolution of the incident, and victims were usually released at the time of the negotiated surrender.

As with the previous case series reported by Van Hasselt et al. (2005), substance abuse (usually alcohol, but in some cases multiple substances) was apparent in most incidents. Not surprisingly, there was a prior history of polysubstance abuse by a majority of perpetrators as well. The present analysis also showed that most of the captive-taking events were unplanned and occurred in private residences. Further, while most involved single victims, there were several that involved additional family members, usually children.

In addition, third party intermediaries (TPIs) were frequently employed, but were viewed as ineffectual and even harmful in many of the critical incidents. Use of TPIs has been the topic of much controversy in the field of law enforcement negotiations. While much of the early training in this area strongly advised against their utilization in attempted negotiations, more recent perspectives are less critical (Romano, 1998). In particular, they can have value if they have been properly screened or vetted so that (1) the nature of the relationship between subject and TPI is known; (2) the relationship is not a basis for, or precipitant, to the current critical incident; and (3) there is a reasonable degree of safety and control possible when a TPI is employed (Romano, 1998). It is unclear whether such criteria were met in the cases provided due to insufficient detail in most police reports.

Our findings also indicated that mental health experts were utilized infrequently in law enforcement negotiation efforts. This is surprising given previous suggestions (e.g., Hammer, 1997; Hatcher et al., 1998) that negotiation teams can derive benefit from including mental health professionals who can provide insight and direction based on their knowledge of behavioral psychology

and psychopathology. A related point is the role of the perpetrator's mental health history in the incidents examined here. The present results failed to show a significant portion of cases with existing psychiatric disorders in subjects taking their intimate partners captive. This could be due to underreporting of such conditions by subjects themselves, or law enforcement personnel handling the case. By contrast, our own experience has shown that a high proportion of these individuals can be characterized by some form of psychological problem, most notably depression, suicidality, and/or substance abuse/dependence.

Several limitations of this investigation deserve attention. To begin with, although the sample size was sufficient for descriptive analyses, a larger sample would help to further delineate the context and characteristics of situations and persons involved in barricaded crisis events. Also, a larger sample would enable statistical analysis to be conducted, such as methods to predict outcomes (e.g., negotiated versus tactical resolution) based on subject and victim variables. Third, data were obtained from police agencies across the United States after the incident occurred. It is possible that information and reports could be less accurate or thorough due to reporting delays and reduced recall. Further, there is considerable variability with regard to the quality and quantity of information provided by police agencies, leading to possible omission of important details in those reports that are relatively sparse in content.

Captive-taking in the context of domestic violence is particularly hazardous and challenging for police officers and crisis negotiators. Identification of effective negotiation strategies in these critical incidents, combined with relevant preparation and training, are of considerable importance for law enforcement professionals. The purpose of this investigation was to begin to garner data that might have heuristic value in assisting negotiation teams to bringing these events to an end in a peaceful, nonviolent manner. However, this study is clearly a preliminary step in this direction. Further research is needed in this area—one currently at the nascent stage with regard to empirical study.

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