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195625

Development of a National Study of Victim Needs and Assistance

Ellen Brickman

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FINAL REPORT

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Table of contents

	<u>Page</u>
Chapter I Introduction	1
Chapter II Methodology	11
Chapter III Results of Telephone Survey	28
Chapter IV Individual and Contextual Determinants of Service Use	60
Chapter V Youth and Parent Data	115
Chapter VI Findings from Interviews and Focus Groups	127
Chapter VII Summary and Conclusions	148

List of tables

<u>Table</u>	<u>Page</u>
1 Target sample sizes across sites	17
2 Result codes by type of crime	31
3 Percent completes, refusals, and non-locatables by type of crime and site	32
4 Respondents' income level	33
5 Behavioral impact of crime	36
6 How victims learned about Victim Compensation	40
7 Percent of victims who reported need was met	42
8 Percent of victims who reported need was not met	43
9 Listening – Sources of help	45
10 Understand how case is handled – Sources of help	45
11 Avoid revictimization – Sources of help	46
12 Install locks – Sources of help	46
13 Get information – Sources of help	46
14 Get order of protection – Sources of help	47
15 Go to doctor – Sources of help	47
16 Replace door or lock – Sources of help	47
17 Number of needs got help with	51
18 Number of needs wanted help with but did not get	51
19 Needs endorsed – got help plus wanted help	51
20 Unmet needs of assault/battery victims	54
21 Unmet needs of burglary victims	55
22 Unmet needs of robbery victims	55
23 Unmet needs of domestic violence victims	56
24 ANOVA: Effects of urbanicity of site and race on number of unmet needs	57
25 Unmet needs by outreach strategy and race	58
26 Site characteristics and victim knowledge of/contact with service program	108
27 ANOVA: Needs met and site characteristics	109
28 Multivariate models of service contact, needs met by programs and unmet needs	112
29 Where adult needs were met	114
30 Rate of specific injuries among those injured as a result of crime (youth)	116
31 Reasons for missing school	118
32 Youth behavioral changes reported by parents	125
33 Concerns about using victim services	126

List of figures

<u>Figure</u>		<u>Page</u>
1	Rate of specific injuries among those injured as a result of crime	35
2	Sources of money victims used for crime-related expenses	38
3	Sequence of questions about met and unmet needs	41
4	Met and unmet needs	44
5	Victim needs by type of crime	52
6	Unmet needs by type of crime	53
7	Unmet needs by race	59
8	Referral density in Hamilton County	66
9	Referral density in Seattle	74
10	Referral density in Johnson County	80
11	Referral density in Westchester	88
12	Referral density in Malheur County	96
13	Referral density in Pearl River County	103
14	Cross-site comparison of victim service network sizes	106
15	Cross-site comparison of referral networks	107
16	Met and unmet needs of youth victims	122
17	Parent perceptions of met and unmet needs of youth victims	124

Chapter I

Introduction

Victim service programs have proliferated over the past several decades. In the early 1970s, the Law Enforcement Assistance Administration (LEAA) sponsored the development of programs to improve the treatment of victims by criminal justice officials and to provide services designed to help victims to recover from the impact of crime.

Between 1970 and 1975, LEAA spent more than \$22 million for victim programs. Many federally funded victim programs were based in, or worked closely with, law enforcement agencies in order to encourage victims to cooperate in the apprehension and conviction of criminals (Davis and Henley, 1990).

At the same time that the federal government was supporting programs for victims, private initiatives were developing as well. In contrast to the federal interest, which was largely motivated by a desire to improve victim cooperation with the justice system, private efforts were prompted by the simple humanitarian conviction that society has an obligation to treat victims fairly. Private, or grassroots initiatives were often founded by former victims and worked outside of criminal justice agencies, which were seen as flawed structures (Young, 1988).

In the 1980s, a wealth of federal and state legislation and funding, providing the basis for victim services and rights within the criminal justice system, boosted the development of programs for victims. The most significant legislation for the growth of services was the federal Victims of Crime Act (VOCA) of 1984. VOCA established ongoing federal funding for state as well as federal victim compensation and assistance programs. In part due to the availability of VOCA funds, victim programs have been established in most local urban and suburban criminal justice jurisdictions as well as federal districts (Tomz and McGillis, 1997). A program directory

of the National Organization for Victim Assistance, which captures most of the universe of victim service programs, contains 10,000 entries (Young, 1997).

According to a survey by Cronin and Borque (1981), a majority of victim programs provide crisis intervention services designed to alleviate the adverse effects of crime. Crisis counseling generally involves listening to victims compassionately, helping victims to make sense of the event, and assisting victims to obtain a variety of social services (American Psychological Association, 1984). In addition to offering psychological assistance, many victim programs actively assist clients in dealing with mundane yet pressing practical problems (Tomz and McGillis, 1997). These services include material assistance such as emergency food, shelter, clothing, or cash; document replacement; relocation assistance; and other services helping victims to regain a sense of control over their lives. Services also frequently encompass advocacy efforts by victim program staff to assist victims in obtaining what they need from other social service agencies. Common advocacy efforts include replacement of stolen government checks, emergency welfare grants, and assistance in receiving state crime victim compensation.

Davis and Henley (1990) outlined three basic policy questions about services for crime victims: (1) Are programs reaching the people they seek to serve? 2) Are programs providing the services that victims need? and (3) Are the material and psychological assistance that programs provide effective? The present study addressed the first two of these questions, and complemented a recently completed NIJ study conducted by the Urban Institute, which evaluated the implementation and effectiveness of VOCA-funded services.

Are Victim Programs Reaching Those in Need?

Evidence suggests that service programs reach only a small proportion of persons victimized by crime. For example, a study of Milwaukee residents found that few persons who reported being victims sought aid from service organizations (Knudten, Meade, Knudten, and

Doerner, 1976). A study conducted at Victim Services by Friedman, Bischoff, Davis, and Person, (1982) found that only 15% of a sample of victims who reported crimes to the police sought aid from service organizations, including welfare, the housing authority, Social Security Administration, senior citizens' groups, or the state's crime victim compensation program. Less than 1% sought assistance from the city's victim service program. These patterns are relatively consistent over time. An unpublished study by Victim Services cited in Davis and Henley (1990) found that fewer than 10 percent of the persons who received service outreach letters after filing police complaints actually used program services. Similarly, a recent Texas survey of victims recruited through prosecutors' records found that the only services received by large numbers of victims were case information (41%) and medical services (34%); every other service listed in the survey (including both counseling services and practical assistance, the ones most often provided by formal victim service providers) was utilized by fewer than 15% of the victims. (Crime Victims Institute, 1999).

The pattern suggested in these studies appears to be borne out in other countries as well. A study in Hungary revealed that very few burglary victims sought help from a victim services office, and most did not know of the existence of such a program. Instead, they turned to informal support sources; 80% turned to household members, and high percentages also turned to non-household relatives, friends, neighbors and colleagues. This study also found, though, that almost half the respondents did not find the people they talked to helpful. (Mawby, Koubova & Brabcova, 2000).

The fact that victim service programs seem to serve a small proportion of victims may not be distressing if they are serving the neediest victims. There is some indication that this is so. The study by Friedman, et al. (1982) showed that victims who went to service organizations for

help tended to be poorer, to have been victimized more often, and to report more crime-related problems than victims who did not seek formal assistance. Another study conducted at Victim Services by Davis (1987) also found that a sample of service users was more traumatized, on average, than was a general sample of victims who reported crimes to the police (few of whom used services). This study suggested further that service users tend to suffer from greater life stress (domestic, employment, and health problems) when compared to non-service users.

Research has also suggested other characteristics that distinguish between those who do and do not seek assistance from victim assistance programs. Recent immigrants who become victims appear to be less likely than others to seek assistance from police and the courts (Davis and Erez, 1996). It would be reasonable to assume that they are less likely to seek assistance from victim assistance programs as well. Some subgroups of domestic violence victims, such as gay men, also have low rates of help seeking from general victim assistance programs (Merrill & Wolfe, 2000). Additionally, practitioners and policymakers have expressed concerns that rural victims may be underserved as a result of the sparser distribution of services for victims in these areas (Office for Victims of Crime, 1998). Finally, gender appears to be a significant predictor of service utilization. A large Canadian study revealed that, in a group of over 10,000 crime victims, females sought more informal help and were more likely to use mental health services, social services, and self-help groups than were men (Kaukinen, 2002).

In the most comprehensive investigation to date of this issue, Skogan, Davis, and Lurigio (1990) surveyed victims who reported crimes to the police in four cities. Like the earlier studies cited above, this research found that service use increased with the number of crime-related problems that victims reported. Moreover, those who failed to use services overwhelmingly reported that they did not have any problems stemming from the crime or that they had already

received help from family, friends, or neighbors. In fact, victims' level of crime-related problems and need for formal assistance programs appear to be inversely related to the strength of their informal social networks (Friedman et al., 1982; Skogan, Davis, and Lurigio, 1990). More generally, reliance on informal sources of support—especially family and friends—is more common than use of formal services (Friedman et al., 1982; Crime Victims Institute, 1999).

Several of these studies have also identified lack of program awareness as a significant reason that victims do not use services. Knudten, Meade, Knudten and Doerner (1976) suggested that many victims simply did not know that help was available. Skogan, Davis and Lurigio found that contact with victim service programs was significantly related to knowledge that the programs were available. The police were noted to be the most important source through which victims found out about the availability of services.

It should be noted here that much of the research on victim service utilization focuses on victims of non-domestic violence. Because domestic violence tends to be ongoing, often escalates, and may be more severe than many of the other crimes represented in the above studies, victims of this form of crime may have different help-seeking patterns and service utilization than would other victims. For example, a study in Canada found higher rates of service utilization in this group than what is suggested by the research cited above (Harris, Stickney, Grasley, Hutchinson, Greaves, and Boyd, 2001). They found that all of the abused women in their study had sought some help after an abusive incident, with 50% seeking help from a “general crisis service” (such as police or emergency rooms), and 17% seeking help from domestic violence shelters. Twenty-nine percent reported seeking informal help. Another study conducted in Athens, Greece, suggests that battered women rely heavily on their informal support sources before seeking help from a battered women's shelter (Chazifotiou & Dobash,

2001). These women reported that they sought help only when they could not stand their husband's violence anymore, felt they could not control it, no longer hoped for change, had exhausted their own resources, and feared for their own and their children's safety. This study was quite small (17 respondents) and included only women who were already in the battered women's shelter; thus, it does not provide insight into differences between help-seekers and non-help seekers.

Clearly, there is evidence that particular factors—level of need, awareness of services, and strength of informal support network—are associated with victims' decisions about seeking help after a crime. However, prior research provided little understanding of the interrelationships among these factors and of victims' decisions to seek services beyond those offered through traditional victim assistance programs. One goal of the present study was to explore how victims use community resources, religious resources, and family and friends to supplement and/or replace formal victim services.

Are Programs Meeting Victims' Needs?

A myriad of research has documented the powerful psychological consequences of criminal victimization, frequently prompting a need for mental health services (see, for example, Davis, Lurigio & Skogan, 1997). Several studies have also examined more broadly what victims need in the aftermath of crime. Skogan, Davis and Lurigio (1990) noted that security-related concerns (information about how to avoid victimization, repairs of locks or doors, upgrading security systems) and having someone to talk to about feelings were the main concerns of victims. This study also found that victim needs varied by type of victimization. For example, while burglary victims tended to report security needs, assault victims were more likely to report needing someone to talk with. Similarly, a Texas study of victims of violent crime found that victims perceived the greatest impact of the crime as psychological, but also reported moderate

impacts on their physical, financial, social and spiritual well-being. In fact, these victims rated spiritual counseling as the most useful service they received, followed closely by medical services (CVI, 1999). This finding suggests that some of victims' greatest needs may be outside of the realm of "traditional" victim service programs.

The study by Friedman and colleagues (1982) of victims who reported crimes to the police in New York City tallied the proportion of victims who needed each of 12 forms of assistance, from borrowing money to psychological counseling to finding a temporary place to stay. Results indicated that improving security (repairing or upgrading locks and doors) and borrowing money were the types of help which victims most needed, but were unlikely to get from family, friends, or neighbors. A study of English crime victims by Maguire and Corbett (1987) came to quite similar estimates of the proportion of victims who needed help with improving security and making ends meet, and did not receive such help from their social networks.

The importance of security assistance and emergency financial aid in these studies is interesting when contrasted with results of a study of victim service programs by Roberts (1987). Roberts surveyed 184 victim assistance programs throughout the United States. He found that security and financial assistance were among the *least* common services that programs offered: Only 13% offered assistance with security and 24% offered financial help. Moreover, Roberts noted that most programs do not intervene immediately, but do so days or weeks after the crime has occurred. By that time it may be too late to help victims resolve urgent practical problems such as repairing broken doors, windows, or locks, or buying groceries.

The available information suggests that there may be significant victim needs that are not being met by service programs. Skogan, Davis and Lurigio concluded that there may be a

mismatch between the counseling services emphasized by victim programs and the immediate practical and long-term security needs of many crime victims. The present study addressed both psychological and practical needs, to aid in identifying such mismatches and guiding policy decisions about how to make services maximally responsive to victim needs.

Are the needs of youth victims being met? In a summary of literature on youth victims, Finkelhor, Wolak & Berliner (2001) found that there is general underreporting of juvenile crimes compared to adult reporting. However, little research has addressed experiences of these youth with other service systems, such as victim assistance programs. The exception to this is child sexual assault/abuse; victims of these crimes tend to have a particularly high rate of mental health service utilization (New & Berliner, 2000). They have also been the focus of significant research, while less research has been done on the impact of non-familial, non-sexual crime on youth victims.

While the research cited above has contributed greatly to our understanding of victim needs and help-seeking behaviors, several gaps remain in this understanding. First, much of the information available on victim needs is fairly general (e.g. needed financial help), rather than detailed. Second, studies of victims' use of "services" tend to define services primarily as formal victim service programs. There has been much less attention to victims' use of religious institutions, community mental health centers, medical facilities, and general social service agencies. Because such small proportions of victims tend to use the formal victim service programs, it is vital to know if they are going elsewhere for help, or simply remaining unserved. Third, this body of research has not addressed the question of service utilization in the context of the range and cohesiveness of services available and accessible to these victims. Both professional experience and research suggest that there can be tremendous variations on these

dimensions in locales across the country. For example, a comparative analysis of victim/witness assistance programs in North Carolina and Virginia suggest that North Carolina programs focus primarily on getting victims to attend court to facilitate conviction, while Virginia programs are described by the study's author as "victim-oriented," with a focus on crisis intervention and on-scene comfort (Moriarty et al., 1998).

Participants at a 1997 conference sponsored by the National Institute of Justice and the Office for Victims of Crime underscored the fact that victim service providers need to know what kinds of problems victims have following criminal incidents, and whether those problems are being successfully resolved (Victim Needs Strategic Planning Meeting, March 10, 1997). They also need to know whether the victims have a need for services, whether those who do not come for assistance are aware of available programs, and whether their needs correspond to the services offered by programs. In an effort to address these questions, the Office for Victims of Crime funded Safe Horizon (then Victim Services) to develop and pilot a methodology for a national survey of victim needs and assistance sought. The plans included designing a sampling plan and methodology for a random-digit-dialing (RDD) survey; drafting a survey instrument; recruiting and convening a National Advisory Panel to provide guidance on the project; and piloting the survey in two sites in New York, with a companion analysis of the context of service delivery.

The research team worked on these tasks for the first several months of the award. A sampling plan was designed, selected modules of the questionnaire were drafted, and a National Advisory Panel of experts met with key personnel from OVC and NIJ to review the efforts and challenges to date. As a result of the discussion at that meeting, both OVC and NIJ requested that the research team shift the design away from developing a national point-estimate study, and

move toward actually conducting a multi-site study with more purposive sampling, and which focused more on some of OVC's current priorities. This shift involved expanding the scope of the project to a multi-site study and reconsidering key design features in light of some of the drawbacks of the original sampling plan. With extensive consultation and encouragement from NIJ, the team proceeded to direct its efforts toward a design that would capture large numbers of victims, incorporate a thorough contextual analysis and address OVC's concerns about rural victims. The research described in this report is the result of that effort, and addresses the following questions:

- (1) What are the material and psychological needs of crime victims? How do these differ by (broad) crime type?
- (2) Where do victims go for help? How do they use formal and informal support systems? What factors affect help seeking and receipt of services?
 - (a) What services (broadly defined) are available to urban, rural, and suburban areas, and what is the context in which they are provided?
 - (b) How does the context in which services are provided relate to help seeking (i.e., victim service outreach strategies, accessibility of services, interagency referral practices)?
- (3) Are victims' needs being met? Which needs are/are not met, and which formal and informal support systems are most effective at meeting which needs?
- (4) How do the needs and help-seeking behaviors of victims—and the satisfaction of those needs—differ for rural, suburban and urban victims? For victims of different types of crimes?

Chapter II

Methodology

This chapter addresses the overall design of this study, including site selection and key variables, as well as the methodology of the telephone survey of crime victims across six sites. Methods and design issues pertaining to the contextual analysis and the qualitative data collection efforts are discussed in later chapters focusing on those efforts.

Site selection

The design for this study called for six sites, including two urban, two suburban, and two rural sites¹. A key research question was how the outreach strategy of victim assistance programs relates to service utilization and the satisfaction of victim needs. Therefore, for each potential site, the primary victim assistance program (i.e. largest and serving greatest number of crime types with VOCA funding) was identified, and its outreach strategy was classified as either “active” or “passive.” Active outreach was defined as individualized outreach to large numbers of victims, by letter and ideally by phone. Passive outreach was defined as relying primarily on media campaigns and police and prosecutor referrals to bring victims to the program for services.

Within each type of locale (urban, suburban, rural), we sought one site with an “active outreach” program, and one with a “passive outreach” program. Additionally, we attempted to select sites that provided diversity in both geography (i.e. region of country) and the context of the primary program (i.e. prosecutor- v. police- v. community-based). Obviously, final criteria

¹ We determined three categories of urbanicity: county containing a central city of a metropolitan statistical area or MSA (“urban”); county in an MSA that did not contain a central city (“suburban”); and a county that was outside and not too close to an MSA and which did not contain any large towns (“rural”). It should be noted that a county with a substantial proportion of its population in urbanized areas, as defined by the Census Bureau, could still be considered in the “rural” category

for sites were the willingness of both the victim assistance programs and the local law enforcement and criminal justice agencies to participate; no severe statutory constraints on their ability to share data with researchers; and sufficient cases to enable us to meet target numbers for the survey sample. While only one site that was asked to participate actually refused, a number of sites were eliminated when preliminary discussions suggested that they could not meet the other criteria.

We began the site selection process by soliciting nominations from such organizations as National Organization for Victim Assistance (NOVA), the National Center for Victims of Crime (NCVC), and other professionals in the field. Once we had some sites selected based on nominations, we identified key regions where we wanted to include other sites, and then asked state VOCA administrators for nominations. The final sites selected were: Cincinnati, OH (urban “active”); Seattle, WA (urban “passive”); Johnson County, KS (suburban “active”); Westchester County, NY (suburban “passive”); Malheur County, OR (rural “active”); and Pearl River County, MS (rural “passive”). It should be noted that this was and is not intended as a nationally representative sample.

Development of Survey

The initial step in the development of the survey instrument was to review similar instruments developed by other researchers, including the Skogan, Davis and Lurigio victim needs survey (1990) and Urban Institute’s survey instrument for victim assistance program clients, among others. Based on those and on our own list of topic areas, we developed a first draft, which went through several iterations within our team. Once we had a draft that covered all of the pertinent topic areas, it was sent for review to members of the study’s National Advisory Board as well as to NIJ and OVC. After the reviewer’s comments were incorporated, the instrument was prepared for cognitive testing.

Issues addressed in survey development

Several key issues came up in the process of survey development, and resulted in shifts from our original design and/or topic areas. The major ones are discussed below.

Victim rights. The initial research plan included this as a topic for the survey, but the team encountered several challenges in attempting to assess this. The most complicated was that victim rights vary considerably not only by state but also by characteristics of the crime, nature of the specific charge, nature and extent of injuries and/or damage suffered, and other criteria. Because these are not always completely objective and because the survey would not be gathering detailed data on all of these elements, it would have been impossible to determine during an individual's interview what rights he/she should be granted in that particular state. We were very concerned that asking questions regarding victims' awareness of "their" rights and whether particular rights had been granted would give respondents the impression that they should have been granted those rights, when we did not actually know whether they were eligible or not.

Additionally, we were concerned about the length of the survey and the fact that adequate attention to this issue would have required several additional minutes of respondents' time. Because there are already other studies looking at victim rights, we decided in conjunction with NIJ and OVC to omit this topic from the questionnaire, but to address it in the focus groups and individual interviews.

Assessing victim needs. There was considerable debate within the team over how to assess victim needs and specifically, whether it was necessary to establish a base rate of what needs exist for victims before asking whether they are met or unmet needs. To establish this rate, we would have to ask respondents about their specific needs (e.g., replacing stolen documents, repairing a broken door, etc.) before asking who, if anyone, helped them. Alternatively, we could

simply ask about help they received and help they wanted but did not receive. The latter method would not provide information about needs that the victims were prepared to deal with by themselves (i.e. did not want help). From a policy and program standpoint, though, that information might not be particularly valuable. After some debate, it was decided that the first methodology — asking about base needs — would be used in the cognitive testing and we would evaluate it at the end of that process and make a final decision.

Cognitive Testing

Five individuals participated in the cognitive testing: four were referred by Safe Horizon and one by Johnson County². Two of the respondents were male assault victims, and three were female victims of domestic violence. The interviews were conducted over the telephone by Westat senior researchers.

The goal of the cognitive interviews was to assure that respondents clearly understood the questions asked and that the response alternatives were appropriate. Cognitive testing sessions were semi-structured administrations of the instrument and yielded insights into the cognitive sources of potential response errors. The cognitive testing addressed concerns such as the following: Did participants in the cognitive testing adequately comprehend the instrument items? Did these respondents recall information that was necessary for answering the items? Were the response choices understood? Were the choices mutually exclusive and exhaustive? Did the topics flow logically from section to section, as well as from item to item?

During the testing, we presented a survey item to a respondent, allowed the person to answer and immediately probed for the basis of the response or the interpretation of the question.

² The number of cognitive interviews was originally set at ten; however, the first five interviews consistently revealed the same sets of problems and issues, and suggested that further testing would yield little new information.

The types of probes that were used in cognitive interviews varied by the types of questions that are being tested.

The results of each area that was tested during the interviews follow:

The feasibility of asking respondents an open-ended question about the incident. During the cognitive testing, respondents were asked, “Can you tell me about what happened to you?” It quickly became apparent that using an open-ended question was very time consuming, and sometimes upsetting to the victims. In response to this, we developed closed-ended questions to capture the details of the incident.

The placement of items addressing prior victimization. We tested how to ask if the incident was a single isolated incident or one in a series of similar incidents. It was determined to ask about this in the first section of the interview.

The optimal way of asking about needs, and who helped with specific needs. As noted above, in the version of the survey instrument that was tested, respondents were asked about their specific needs. After responding to the list of needs with yes/no answers, they were asked who helped them. This proved to be a difficult structure for respondents to follow. As a result of the cognitive testing the team decided to ask respondents if they received help with a list of predefined needs (rather than asking if they had a need). Those who responded “yes” were asked who helped them (after each need). If a respondent did not get help with a specific need, they were asked, “Did you want help with...” This proved to be a more comprehensive and efficient way of asking about needs.

Additional results of the cognitive interviews. Additional information was gathered during the cognitive interviews that helped clarify questions and response items. For example, as a result of the cognitive interviews, we added Medicaid to the list of response items for the

question about who covered the medical expenses arising from the incident. Furthermore, the cognitive testing helped clarify time periods throughout the interview.

Data collection procedures

Sampling for telephone survey. Sample selection involved two stages after the sites were selected. These included the allocation of sample by community, by crime type and by age (adult and youth); and the final selection of crime victims. Each of these is described below.

Allocation of Sample to Communities, Crime Type and Age. Our first decision was to have 1850 adult and 150 youth completed interviews, for a total of 2000. This breakdown was based on an approximation of the number of youth victims in the pertinent crime categories, in the sites where we were sampling. Further, we were targeting 500 interviews for each of the 4 crime types (assault/battery, robbery, domestic violence, and burglary). Originally, we had planned to complete 200 interviews at each of the rural sites, 300 at each of the suburban sites, and 500 at each of the urban sites. Initial estimates of available cases from the sites suggested that these figures were attainable. However, once we began the actual process of collecting case information, we discovered that these numbers were not realistic in rural sites. The numbers provided to us for assault and domestic violence, in particular, proved to represent many of the same cases, with about a 70% overlap between the two categories. Additionally, many records were missing phone numbers or other contact information, and could not be included in our sample. Finally, we had to eliminate a number of cases in which the victimization occurred within the county but the victim resided in another county or state, and therefore might not be served by all of the same resources as would other victims living in the county. For these reasons, we revised our target numbers [see Table 1 for target numbers].

Table 1

Target sample sizes across sites

Site	Urban or Rural	Target Number
Malheur	Rural	76
Pearl River	Rural	100
Johnson	Suburban	329
Westchester	Suburban	329
Cincinnati	Urban	583
Seattle	Urban	583

Explanation of target figures. Once we obtained victim counts in Malheur County, it became clear that the Malheur sample size would be constrained by the number of available victims. It was decided that it would not be useful for the Pearl River sample size to be too much larger than that for Malheur. The Johnson County sample size was constrained by the number of available cases in some crime categories. These initial decisions were made without any counts of victims for Westchester and Seattle, since we did not have counts for these areas when we needed to begin finalize the other samples. In the absence of any information to the contrary, we initially assumed that Westchester would be identical to Johnson and that Seattle would be identical to Cincinnati.

We determined, based on Westat's past experience with similar surveys, that we needed to select designated samples 3 to 4 times larger than the desired number of completed interviews to ensure that we met the targets. For youths and for domestic violence victims, we sampled at a 4 to 1 ratio in anticipation of a lower response rate. For all other adult crimes, we sampled at a 3 to 1 ratio. Ultimately, cooperation rates and location rates were lower than expected; in retrospect, larger designated samples should have been selected where available.

In making specific allocations, we began with the youth samples. We had decided not to include domestic violence cases in the youth sample because of concerns about mandatory reporting. Thus, youth victims were sampled only for assault, burglary (of which there were very

few), and robbery. We included all available victims in Malheur County because of small numbers. The Pearl River sample did not include a designation of age, so we were unable to allocate a separate youth sample *a priori*. For Johnson County, the only crime type with a sizable number of youth victims was assault; we sampled from that set but included all youth cases for burglary and robbery. There were similar considerations for the Cincinnati youth sample. We assumed that Westchester would be identical to Johnson in every respect and that Seattle would be identical to Cincinnati. This left us with decisions to make on youth victims only for assaults in Johnson County and Cincinnati. We based the allocation here on the overall allocation of 329 to Johnson and 583 to Cincinnati, and the constraint of 150 total youth interviews.

We then considered adult sample sizes. For Malheur, we selected all cases within the relevant time frame because the number of available cases was so small. For Pearl River, we took all victims for two crime types where there were few victims, and took enough victims in the other two crime types such that we expected to obtain a total of 100 completed interviews in Pearl River.

We next considered burglary sample sizes for the other jurisdictions. Allocations were made by considering sampled youth burglaries, sampled adult burglaries in Malheur and Pearl River, and the overall allocations of 329 to Johnson and Westchester and of 583 to Cincinnati and Seattle. A similar process was followed for determining domestic violence and adult robbery sample sizes.

As noted earlier, these allocations were made without any specific knowledge of what was available for Westchester and Seattle. The information that became available required some modifications in planned Westchester and Seattle target numbers. Further, we had to select a

sample for Seattle without knowing beforehand whether victims were adults or youths, as that information was not available on printouts received from the Police Department. In some crime types, the number of available youth victims in Westchester was smaller than for Johnson and so we were unable to obtain the desired youth sample sizes. We attempted to make up for the shortages by selecting more youth victims in Seattle. This then required us to modify some adult target sample sizes in order to maintain the overall targets for Westchester and Seattle and for each crime type.

Sample Selection of Victims. The sampling procedure varied somewhat from site to site. For most of the sites (Malheur, Pearl River, Johnson, and Cincinnati), the process followed three steps: 1) Selection of large sample, 2) Contact by letter or telephone call to sample persons to obtain their agreement to participate, 3) Selection of final sample from among those willing to participate.

For step 1 for the four specified sites, we obtained information on all crime victims of the crime types of interest with dates of report from September 1999 through August 2000. We selected separate samples by site, crime type, and age (adults or youths). Records were generally sorted by type of crime and by date of report, and then systematic samples were selected. For Malheur and for some categories for Pearl River, all available crime victims were selected.

In step 2, Safe Horizon or police departments attempted to contact all victims who were sampled in step 1. With IRB approval, we used a passive consent procedure, in which victims received a letter notifying them about the study, and informing them that the police department or prosecutor's office wanted to include their name in a list provided to the researchers. Victims were given the opportunity to call and request that their names not be included in the list; those who did so were deleted from the sample. Domestic violence victims were contacted by phone,

for safety reasons; in these cases, we deleted persons who were not reached by phone or who declined to participate. Refusal rates were tracked, as were numbers of return letters. Unfortunately, those data were stored on a computer, which was rendered inoperable for two months after the September 11 attacks, when Safe Horizon's computer server located in the World Trade Center was destroyed. When we were able to access the computer again, we discovered that the files had been expunged by the system. Our collective recollection is that large numbers of letters (up to 40% at some sites) were returned as undeliverable, and similarly, about 30% of the phone numbers for domestic violence victims were not in service or incorrect. However, there were relatively few (less than 5%) victims who called in response to an outreach letter and asked for their names to be removed. The refusal rate for domestic violence victims who were reached by phone is estimated to have been approximately 25%, to the best of our recollections.

In step 3, we selected a subsample of the persons who remained after step 2. This was a systematic subsample, using the same sort order as for step 1. A prime sample was selected, in which persons would definitely be called for an interview. A reserve sample was also selected, from which persons would be called if the prime sample did not yield enough completed interviews. After the field period started, a supplementary sample, beyond the reserve sample, was also selected for Cincinnati domestic violence cases because of the low yield in completed interviews for domestic violence victims.

We did not want to call the same household more than once, even if there were multiple persons at the household that were victims, perhaps of different types of crime. We therefore did unduplications based on telephone number and/or name. Unduplication was done at different stages, i.e., before step 1 and/or after step 2, and varied somewhat by site. Therefore, we do not

have precise counts on cases deleted for this reason; however, they are estimated to be lower than 1% of the sample at most sites.

For Westchester and Seattle, the sampling process was slightly different. Here, the protocols requested by the cooperating agency at the site rendered it difficult and expensive to obtain information on large numbers of cases and then select sample cases from that larger universe. Thus, the sample sizes were predetermined and only these numbers of cases were selected from the police records, as opposed to providing the universe of cases to Westat for sample selection. Consequently, we did not have direct control of the sampling procedure. Furthermore, in the case of Seattle, cases could not be pre-identified as youth or adult. Thus, a much larger sample had to be selected here in order to obtain enough youth, with Westat subsampling the adult cases to obtain the desired sample sizes. Step 3 of the sampling process was the same for Westchester and Seattle as it was for the other four sites.

Method for telephone survey.

Westat's Telephone Research Center in Frederick, Maryland was the performance site for the survey. The final version of the survey instruments was programmed into Westat's CATI (Computer-Aided Telephone Interviewing) system. The software, called the Cheshire System, was developed in-house especially for use in large government surveys that demand high standards of quality for deliverable datasets. The Cheshire system has three components: the

Cheshire Screen Management System, the Cheshire Database Management System, and the Cheshire Procedural Language. The three phases of preparation are described below.

Phase I. *Building the screen library using the Screen Management System* —Screens were designed based on the questionnaire. Additional screens were designed to assist the interviewer/coder to resolve inconsistencies in the data. After the screens were reviewed and approved, the screen library was built.

Phase 2. Defining the project database using the Database management system —Based on screen development activities, variable and range definitions were established and the data dictionary was built to define the project database.

Phase 3. Coding edit/flow control modules using the Procedural Language —Modules that execute consistency check edit specifications and control the flow of the interview were developed and tested thoroughly.

Prior to training, the CATI questionnaire was tested for two weeks. During the CATI testing period, project staff and CATI programmers tested the system by entering information from mock interviews. Any problems were recorded on problem sheets and referred to the lead CATI programmer who fixed them. This was a final check of question wording, skip patterns, as well as soft and hard ranges.

Interviewer Training

Telephone Interviewers for the survey. It was essential to select interviewers who were experienced, since we had anticipated that speaking about victimization and associated material and psychological harm might upset some respondents. Therefore, twenty-six experienced interviewers were chosen to work on the study. They had all worked on a considerable number of Westat studies and all interviewers had prior experience interviewing youth.

General Interviewer Training. When the interviewers were initially hired by Westat, they participated in a 4-hour general interviewing techniques (GIT) session. This session introduced them to Westat and to survey research. They also became familiar with types of survey questions and recording conventions. The training also included a discussion of basic ways to obtain accurate data through listening and probing, confidentiality procedures, and methods for gaining respondent cooperation. The format included a video presentation that was interspersed with

exercises, interactive lectures, role-plays, a question-and-answer period, and practice exercises. Each interviewer received a manual, with the material presented in the session.

Specific Training for the present survey. Interviewers participated in twelve hours of training specific to this survey. The twelve-hour training session included a combination of lecture and interactive learning experiences. A considerable portion of the training time was spent on the contact procedures and introduction portion of the questionnaire. Interviewers received a project specific training manual. The following paragraphs summarize the training activities.

Introduction to the Study. At the beginning of training, the Westat Project Director introduced the project staff, National Institute of Justice, the Office of Victims of Crime, and Safe Horizon. She also provided an overview of the study design and key research areas. In addition, there was an introduction to sensitivity issues related to interviewing crime victims, such as recalling unpleasant memories, feelings of vulnerability after victimization, and appropriate roles for interviewers.

Interactives. Interactives were sessions in which interviewers took turns reading questions aloud while the trainer played the respondent. After each response, the trainer pointed out specific aspects of a question or response that needed emphasizing. These sessions familiarized interviewers with survey questions and anticipated responses. It also gave interviewers an opportunity to learn when and how to probe for information.

The interactive sessions covered every section of the questionnaire, including the screener and alternative outcomes of the screener (e.g., scheduling for another day, refusals, etc.). In addition, during the interactives, data coding issues were also discussed, as well as data entry rules.

Confidentiality, Safety and Sensitivity. During training, there was a session on confidentiality, safety, and sensitivity. The following topics were covered:

- The special nature of confidentiality as it applies to this study.
- What the respondents might say, and how interviewers should respond.
- How to identify the study to other household members versus the victim.
- How interviewers might feel during and after conducting this type of interview.
- Examples of victimization scenarios.

As part of the discussion of sensitivity, the myths and facts of domestic violence were discussed. Additionally, an important part of the training was a thorough discussion of procedures to follow for specific situations that had the potential for compromising confidentiality and safety. Several procedures were instituted to ensure confidentiality during the interviews:

- The call was terminated if the respondent indicated that another person was in the room or listening to the call on an extension.
- The call was terminated if the interviewer believed that someone was listening to the conversation either in the room or on a telephone extension.

In addition, procedures for dealing with respondents that asked to be referred to a counselor or victim advocate were developed. In such cases, the interviewers referred to a list of victim service agencies located in the geographic location of the caller, and provided the appropriate contact information to respondents. These lists with appropriate phone numbers were included in the interview manual.

Role Plays. During role plays, interviewers formed teams and practiced interviewing each other from a prepared script. The scripts, prepared prior to training, covered a range of

victimization scenarios, including different types of victimization (e.g., domestic violence, robbery, etc.), harm, needs, and services sought. The scenarios included adult, parent, and youth interviews. This approach provided interviewers with the broadest possible experience. After several role-play sessions in the training room, the interviewers went to their assigned workstations and actually interviewed each other over the telephone. During these sessions, project staff monitored the interviews. Team leaders were available to assist interviewers and answer questions as they arose.

Data Collection

Operations Management. An operations manager, who worked at the Telephone Research Center in Frederick, Maryland supervised the overall operation of the data collection effort. She scheduled interviewers, reviewed each case, referred problems to the project director, and assigned final result codes. In addition, she monitored 10 percent of the calls as a quality control measure. The operations manager participated in weekly project meetings, and reviewed completion rates with key project staff during the meetings.

The field period began on October 3, 2001 and ended on December 1, 2001. During that period, interviews were conducted during the following time periods:

Monday to Friday:	9:00 a.m. – midnight
Saturday:	10:00 a.m. – 6:00 p.m.
Sunday:	2:00 p.m. - 10:00 p.m.

Interviewers were scheduled to cover all time periods. This allowed greatest flexibility in reaching respondents in all time zones at different times of the day.

Interviewing Procedures. Interviewers administered the screener and interview as they appeared on the screen. At the beginning of the interview, those who wanted additional information were given the project's dedicated toll-free number at Westat, answered by trained

Westat staff. In addition, for respondents who requested another copy of the letter sent by local law enforcement, contact information was obtained and a letter was sent.

At the time of the initial call, respondents who were available were immediately interviewed. Others who wanted to begin the interview and finish it at another time were encouraged to do so. Respondents who did not have enough time to be interviewed were rescheduled for another day and time. The Cheshire scheduler controlled the workflow in order of priority of the call (e.g., scheduled call back).

Interviewers recorded the reasons for refusals, which were tabulated on a daily basis. The CATI system also tracked the number of non-working numbers and instances where the respondent was unknown at the telephone number.

Data Preparation. A designated data preparation staff member reviewed all problem sheets and referred them to the appropriate staff person for review. In addition, the data prep person performed frequency checks and examined the data for completeness.

Once the interviews were completed, the data were converted from Westat's customized system into an SPSS database for analysis.

Design issues and external validity

Later in this report, there is a discussion of some of the methodological limitations inherent in this study and how they may affect interpretation of the study findings. Two in particular should be noted here, as a reminder of whose experience the results in the following chapter do – and do not – represent. First, inherent in telephone survey research is the fact that those without telephones are not included the sample. This is not intended to suggest that their experiences can be represented by those with telephones; presumably, they cannot. However, the costs of household visits to those without telephones would have been prohibitive, especially in a multi-site study.

Second, the sample for this research was drawn from police and prosecutor records, by definition reflecting a population of “reporters.” This decision, too, was based on pragmatic and budgetary constraints. The authors and readers alike must recognize that there are likely to be differences in met and unmet needs, as well as in help-seeking behaviors, between reporters and non-reporters. We hope that future research will gather comparable data from non-reporters, through new or existing large-scale random digit dialing studies and other methodologies.

Finally, the four types of crime included in this study reflect a series of difficult decisions by the research team about what kinds of victims would and would not be included in this study. Crime types considered in our initial discussions included sexual assault, hate crimes, homicide (surviving families), stalking, and elder abuse, among others. The decision was made to limit the design to four crime types, to allow meaningful comparisons between different groups. The bases for these decisions included the number of cases likely to be available at each site; what other research had been conducted in this area; and difficulties in obtaining data due to inconsistent classifications or statutory constraints. For example, one concern was that some states have privacy laws that would have made it impossible for us to obtain information on sexual assault victims without a court order or similar process. Other law enforcement agencies agreed to participate only if we would not be requesting data on sexual assault victims. Although we made a decision not to include sexual assault in the current study, we are exploring the feasibility of a study that would focus on this population.

With the recognition that both our design and our sampling procedures pose some constraints for the generalizability of this study, we now turn our attention to the results of the adult victim telephone survey and contextual analysis, followed by a discussion of the survey of youth victims and their parents, and then the results of our focus groups and qualitative interviews.

Chapter III

Results of telephone survey

A total of 800 interviews were completed in the telephone survey. This number includes 648 adult victims, 93 parents of youth victims, and 59 youth victims (ages 12-17). This total fell far short of our target of 2000 interviews. There are several reasons for this:

(1) The rural sites had significantly fewer available cases than we had expected based on their initial estimates.

(2) We discovered that the police records at some sites contained significant numbers of inaccuracies or incomplete information. At many of the phone numbers, interviewers were told that the number belonged to a bar or a store, or that the number had never belonged to anyone by the name we were seeking. This is borne out by our experience with the outreach letters, many of which were returned marked "No such address." We have spoken with other researchers who have contacted victims using police records, and were told that the error rate at some of our sites was considerably higher than they would have anticipated based on their experiences. As seen in Table 2, 38% of the victims we tried to contact could not be located; for an additional 12.8%, we were unable to reach the victim directly within the maximum number of tries scheduled (set at 9 or above). Thus, we never achieved direct contact with over 50% of our targeted respondents.

(3) We had planned to interview victims within 6-18 months after the crime. This time frame was selected because we wanted to give people time to identify their long-term needs as well as short-term needs. Sampling at the first set of sites occurred in late fall 2000, and sampled for people victimized between September 1999 and September 2000. This was done with the expectation that the survey field period would begin in March 2001 and last for about a

month. Unfortunately, the field period was delayed until November 2001, because of difficulty in accessing sample data from some of the sites. We had been told that Seattle's police records were computerized and downloadable, but further discussions with the Records department revealed that the records we required would have to be selected manually, which was a cumbersome process. Additionally, a major earthquake in Seattle severely damaged the building where the Records Department was based, and they had to delay responding to our request for about two months. In Westchester, we had gotten preliminary agreement to participate, but ran into difficulty securing a commitment of cooperation from one key player, which resulted in several additional months' delay. Consequently, the victims were contacted for the survey anywhere from 14 to 29 months after they had been victimized. We believe that this significantly increased the rate of incorrect phone numbers because so many were outdated.

(4) The response rate (i.e. agreement) for the survey was lower than we expected. Based on Westat's prior experience, we had expected over a 50% agreement rate for those whom we were able to contact, and we did not achieve this rate. It is hard to know if this would have been higher if we had reached victims closer to the time of the victimization, as originally planned. In retrospect, we also believe that the length of the interview was a deterrent for some victims.

Unfortunately, there was little that we could do to address these problems once the field period began and they became apparent. It was neither financially nor logistically feasible to return to the sites and obtain new samples. While we are disappointed with the ultimate sample size, we are encouraged by the fact that we are still able to identify significant and consistent patterns and relationships among variables, as we discuss later in this chapter.

Data on response rates and reasons for non-response are presented below in Tables 2 and 3. These tables account for the 4,140 victims whose names were provided to Westat to contact for the survey. As Table 2 indicates, the rate of completed interviews was 17.4%, and the refusal rate was also 17.4%. Taken together, these figures show that interviewers only had direct contact (barring language barriers) with 34.8% of the 4,140 victims. Thus, the completion rate among those with whom interviewers had direct contact is actually 50%, though this group represents a much smaller percent of the total sample attempted.

Looking across crime types, the completion rate was highest (and the “can’t locate” rate lowest) among domestic violence victims. This reflects the fact that domestic violence victims were contacted by phone first, generally by local law enforcement personnel. Only those who were reached and who actively agreed to be contacted were included in the sample provided to Westat’s Telephone Research Center. Even with this pre-screening, close to 20% of the domestic violence victims still could not be located at the time of the survey, and 22.5% refused to participate when contacted by an interviewer.

Table 2

Result Codes by type of crime (percent of final codes within crime type)

	Total	Assault	Burglary	Robbery	Domestic Violence
Percent Complete	17.4	11.1	21.0	16.2	26.8
Percent Refusal	17.4	15.5	20.1	14.5	22.5
Percent Can't locate	38.0	44.1	37.9	39.7	19.3
Percent Maximum calls	12.8	11.2	13.7	11.3	18
Percent Other non-response	11.2	14.7	5.7	16.6	3.7
Language problem	1.4	0.9	1.0	2.3	1.6
Parent non-response	7.4	12.2	1.5	11.9	0
Other	2.4	1.5	3.3	2.4	2.1
Percent Ineligible	3.2	3.4	1.6	1.8	9.6
N	4140	1192	1250	1193	505

Table 3 provides further detail about the three primary outcomes (complete, refusal, and non-locatable) broken down by crime types within each site. Differences between sites – for example, the high rate of “not located” among domestic violence victims in Malheur County, and the much lower rate in Westchester – tend to reflect differences in the time that elapsed between initial outreach to the victim and when the survey was actually conducted. For domestic violence victims, in particular, even a few additional weeks between the two contacts seemed to increase the risk that interviewers would not be able to locate the victim with the contact information provided.

Table 3

**Percent Completes, Refusals and Non-locatables by type of crime and site
(Percent within site for type of Crime)**

	Total	Malheur	Pearl River	Johnson	Cincinnati	Westchester	Seattle
% Complete							
Assault/Battery	11.5	11.8	16.2	11.1	12.1	4.4	12.9
Burglary	21.3	25.5	20.6	24.6	18.3	26.3	19.4
Robbery	16.5	NA	12.5	20.2	19.8	16.2	12.3
Domestic Violence	29.7	37.1	40.0	33.0	27.2	24.6	29.1
% Refusal							
Assault/Battery	16.1	14.7	11.8	19.9	17.4	16.2	13.7
Burglary	20.4	12.7	26.0	17.9	16.8	19.0	25.4
Robbery	14.7	NA	12.5	13.5	12.2	17.1	17.1
Domestic Violence	24.9	2.9	26.7	20.0	32.7	18.5	31.7
% Not Located							
Assault/Battery	45.7	44.1	60.3	32.9	43.9	57.4	47.6
Burglary	38.6	47.3	39.7	38.6	48.5	32.6	31.7
Robbery	40.4	NA	50.0	43.8	38.6	35.1	42.8
Domestic Violence	21.3	42.9	6.7	26.0	23.1	7.7	16.5

Note: For ease of reading, this table does not include three categories of result code: Maximum calls, Ineligible, and Other Non-Response

Description of telephone survey sample

We turn now to the findings from the survey. In this chapter, we present the survey results for adult victims only. Youth and their parents are discussed later in this report, in Chapter 6.

Demographics. Of the 648 respondents, 373 (or 57.7%) were female and 274 (or 42.3%) were male (missing data for one record). Age of respondents ranged from 14 to 96 with a mean of 39.26. Of the 640 respondents who identified their race, 428 (or 66.9%) identified as White, 149 (or 23.3%) identified as Black, 17 (or 2.7%) identified as Asian, 15 (or 2.3%) identified as American Indian or Alaskan Native, four (or .6%) identified as Native Hawaiian or Other Pacific Islander, and 27 (or 4.2%) identified as something else. Consistent with U.S. Census practice, we

asked separately about Hispanic origin, and 6.2% (40) of the sample identified themselves as being of Hispanic origin.

The vast majority of respondents (90.7% or 588 people) were born in the United States or in United States territories. For those who were not born in the U.S. or in U.S. territories, time living here ranged from 1 to 57 years, with a mean of 17 years. About 12% of this group had been living in the U.S. for five years or less at the time of the survey. Almost 2/3 of (or 423) respondents were employed either full or part time at the time of the survey with 53.1% (344) employed full-time and 12.2% (79) employed part time. The rest were unemployed (10%), retired (8%), disabled (7%), homemakers (4%), students (4%) or some other status (2%). Respondents who specified an income³ reported income ranging from \$0.00 per annum to \$600,000 per annum with a mean of \$50,180.

Table 4

Respondents' income level

Annual income	Number of Respondents	Percent	Cumulative Percent
\$0 - \$9,999	59	11.7	11.7
\$10,000 - \$19,999	55	10.9	22.6
\$20,000 - \$39,999	121	23.9	46.5
\$40,000 - \$59,999	110	21.8	68.3
\$60,000 - \$79,999	71	14.1	82.4
\$80,000 - \$99,999	31	6.1	88.5
\$100,000 - \$199,999	49	9.7	98.2
\$200,000 - \$600,000	9	1.8	100
Total	505	100	

Forty-two percent of the sample had a high school diploma or less; the remaining 58% had some post-high school education, with 29% completing college and/or graduate training.

³ 143 respondents either didn't know or refused to respond to this question, and are excluded from these calculations and from the income table.

About 1/3 of the respondents (32.6% or 211 people) were married at the time of the survey and another 11.6% (or 75 people) were living with someone as a couple. In addition, 1/3 of the respondents (216 people) had never been married, while another 22% were either widowed, divorced, or separated. Just under half of the respondents (44.9% or 111 people) had children under 18 living with them.

Crime characteristics Among the 648 adult victims, 16.5% (107) of the cases were classified as assault/battery; 38.7% (251) were classified as burglary; 24.5% (159) were classified as robbery; and the remaining 20.2% (131) were classified as domestic violence. We present here descriptive characteristics of the crime incidents.

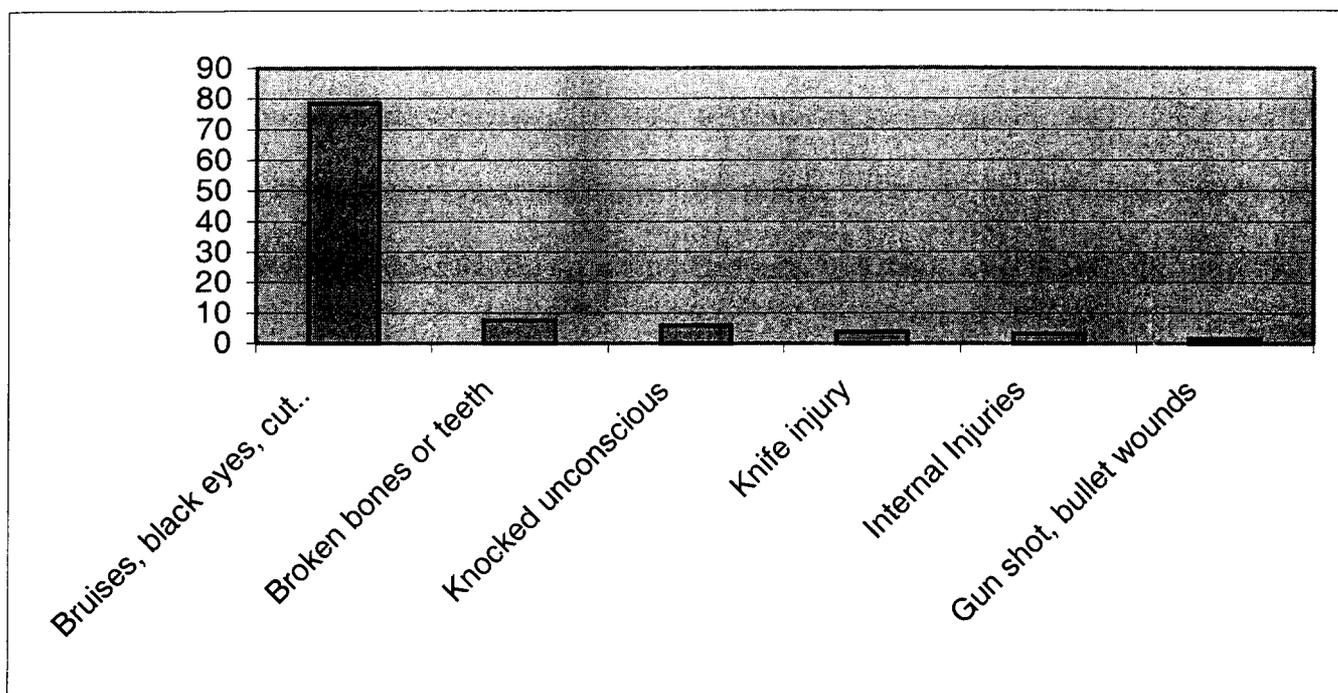
Weapon involvement. Respondents reported that weapons were used in 28.9% of the incidents. Of the incidents that involved weapon use, a knife, razor, or other cutting instrument was used most often (50.8%). Guns were used in 23.8% of the incidents that involved weapon use and 37% of respondents reported the use of a weapon that was not a gun, knife, or other cutting instrument.

Injuries and health impacts. More than 1/4 (28.7%) of the respondents were injured during the criminal incident. Injuries included knife or stab wounds, gun shot or bullet wounds, broken bones or teeth, internal injuries, being knocked unconscious, bruises, black eyes, cuts, scratches, swellings, and chipped teeth (see Figure 1 for types of injuries sustained).

Most of the injuries did not have lasting physical effects. Ninety-three percent of the physical injuries caused problems for less than three months, with the majority causing problems for one month or less. The specific problem most likely to affect people for longer than a month was pain that got in the way of daily activities.

Figure 1

Rate of specific injuries among those injured as a result of crime



Medical treatment. A little less than half of those injured (47.9%) sought medical treatment as a result of these injuries, with about 70% of these being treated at an emergency room. In addition to treatment for physical injuries, some respondents (11.3%) sought psychological counseling for mental or emotional injuries.

A number of respondents were treated with medication for their physical and emotional injuries. Eleven percent (69 people) were taking medication every day as a result of the crime. Of these people, 64% were taking medication for depression or anxiety, 43% were taking pain medication, and 15% were taking some other type of medication. Pain medication was generally used for less than three months. Medication for depression and anxiety was generally used for longer than pain medication, with 69% of those who used daily medication for depression or anxiety using it for three or more months and 31% using it for 21 months or more.

Behavioral impacts. Respondents' behavior was affected by their victimization in a number of ways. Almost half of the respondents had changed their daily routine in some way due to the incident. Specifically, 43% avoided certain places while 35% avoided being out on the street unless absolutely necessary. Almost a fifth of those surveyed reported problems relating to family or friends after the incident and 8% reported using alcohol and/or drugs more often than before the incident.

Table 5

Behavioral impact of crime

Behavioral impact	N	Percent
Change your daily routine in any way	309	47.8
Avoid certain places	280	43.4
Avoid being out on the street unless absolutely necessary	227	35.0
Put in an alarm system, window bars, or special locks to increase security at your home	197	30.5
Have problems relating to friends or family	119	18.4
Buy a gun, watchdog, or some other weapon for protection	74	11.4
Change your job or your work hours	71	11.0
Move from your home	63	9.7
Use alcohol and/or drugs more than you did before	52	8.0
Change your phone number	35	5.4
Other effects	300	46.6

People also reported taking a number of other precautionary measures to address safety concerns after the incident. Close to a third (30.5%) of respondents reported that they had put in an alarm system, window bars, or special locks to increase security in their home, 11.4% reported buying a gun, watchdog, or some other weapon for protection, and 5.4% reported changing their phone number. Others reported making more drastic changes such as changing their job or work hours (11%) or moving from their home (9.7%).

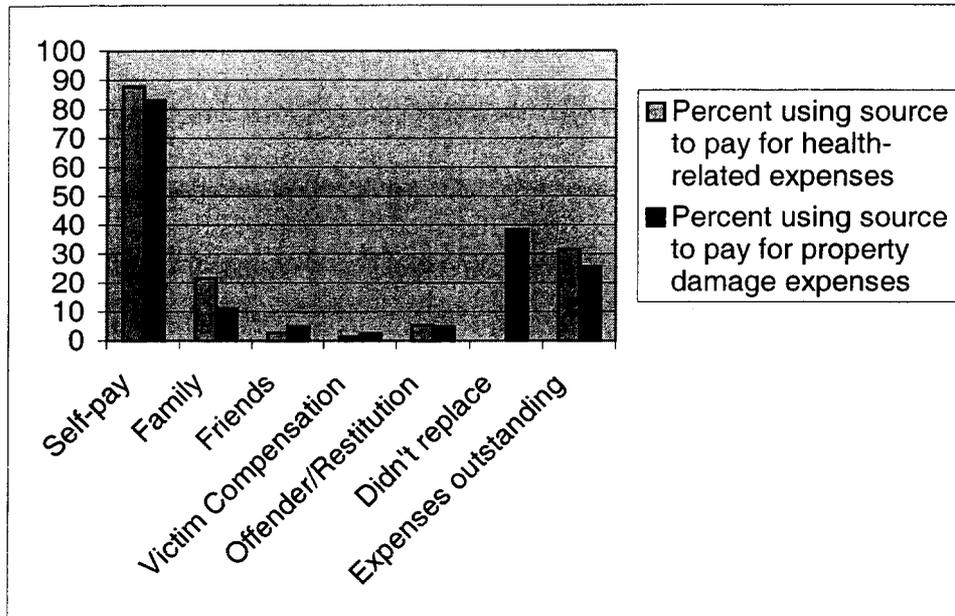
Financial impact. Victims reported many expenses related to the incident. Health-related expenses were incurred by a number of respondents. Most people (76.6%) who were either

physically injured, sought psychological counseling, or needed daily medication as a result of the incident had health insurance (including Medicaid and Medicare) at the time of the incident. However, not all expenses were covered by insurance. Eleven percent of all of those surveyed had to pay up front for either medical or mental health expenses and a number of people had sizable health expenses that insurance did not cover. These uncovered expenses ranged from a few dollars to \$15,000, with a mean of \$656. The vast majority of people who had such expenses (87.8%) paid for them out of their own pocket. Others got money from their families (21.6%), from their friends (2.7%), from Crime Victim Compensation (1.3%), or from the offender or restitution (5.3%). However, for a significant percentage of individuals with such expenses (31.5%), the expenses were still outstanding at the time of the survey.

Property. About two thirds of respondents (65.1%) had something belonging to them stolen or damaged. Of those who had something stolen, 62.8% had expenses related to the stolen property. These expenses ranged from \$11 to \$45,000, with a mean of \$1,307. Most people (83.1%) paid for these expenses themselves, 11.1% got money from family, 4.9% got money from friends, 2.5% got money from Crime Victim Compensation, and 4.9% got money from offender or restitution [Note: These are not mutually exclusive categories]. Not all of these expenses were covered, however. Thirty-eight percent decided not to replace the stolen or damaged property and 25.5% still had the expenses outstanding.

Figure 2

Sources of money victims used for crime-related expenses



Missed Workdays. Most of the people surveyed (77.1%) were employed at the time of the incident⁴. The criminal incident affected their work lives in several ways, including missing days at work. About 37% of people who were employed at the time of the incident missed days at work due to the incident. For this group, reasons included being too physically hurt (33.5%), upset (51.4%), and/or scared (28%) to go to work. Others missed work to deal with the police or go to court (57.4%), to go to counseling appointments (12%), or to go to medical appointments (20.9%). Finally, 43.2% of those who missed work did so to deal with other things related to the crime, such as replacing documents, replacing locks, or repairing damaged property.

⁴ The figure of 2/3 employment rate cited in the demographic descriptions refers to status at the time of the survey. We do not know why the employment status of about 9% of the sample changed from the time of the incident to the time of the survey. However, we did not have anyone in the sample who had to stop working permanently as a result of the incident, or who was still on disability because of the crime.

The amount of time that people missed at work ranged from one day to several months. Of those who missed time at work, 83% missed less than five days, 12.7% missed one to three weeks, and 4.2% missed a month or more. Over sixty percent of those who missed time at work lost income from their jobs due to the incidents. Amount of lost income ranged from \$40 to \$40,000, with a mean of \$1,489.

Other financial consequences. The criminal incidents resulted in financial consequences beyond the clearly defined medical, property, and salary expenses. A number of respondents (18.1%) indicated that they had had problems paying bills, including credit cards, mortgage, rent, or other expenses, since the incident. Of those who had problems paying bills, 52.2% reported that their credit rating has been affected by the incident and have since had problems getting loans or credit cards, and 16.2% reported that they have been threatened with eviction or foreclosure since the incident. The eviction or foreclosure had actually taken place for about ¼ (or 5 people) of those who had been threatened with these actions.

Victim Compensation. Of those who incurred some out-of-pocket expenses due to the incident, 21% were aware of the state victim compensation program. As indicated in Table 6, the most common sources of information for those who knew about the program were victims assistance programs and police. Others found out about the program through the media, a friend or other acquaintance, and the prosecutor's office.

Table 6

How victims learned about Victim Compensation

Source of information	Percent (of those who knew about Victim Comp.)
Victim's Assistance Program	22.9
Police	21.4
Media	12.9
Friend or other acquaintance	8.6
Prosecutor's Office	7.1
Other	27.1

While relatively few people knew of the victim compensation program, even fewer of the respondents (12 people or 1.9% of the total number surveyed) filed an application to get money from the state. A third of those who filed an application were helped in filing the application, by victim assistance programs or others. Seventy-five percent of those who filed an application had received a response from the state at the time of the survey. Slightly more than half (55.6%) received monetary compensation from the state. The mean compensation was \$93.00 with a low of \$30.00 and a high of \$200.00.

Respondents who were aware of the existence of Victim Compensation but did not apply for it gave the following reasons: they were told that they were not eligible; they did not think that they were eligible; they did not know how; it was too difficult or confusing; they did not think it would do any good; they thought the loss was too small; they did not have any receipts; and/or they were already compensated by someone else.

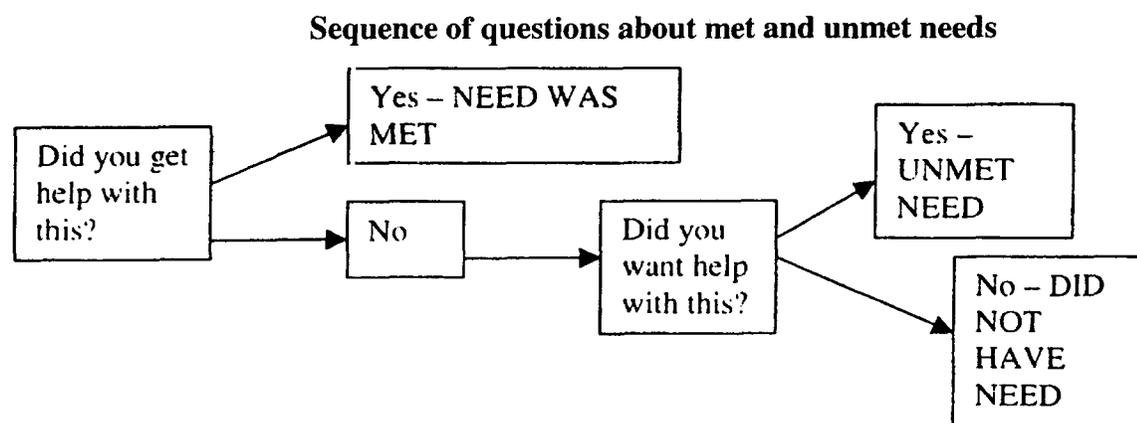
Victim Needs

Victims were asked about a list of needs that people might want help with after a crime, ranging from tangible to emotional to informational needs. Because some of the needs were specific to particular crimes (or to features of particular crimes), not every victim was asked about every item. The maximum number of needs asked of adults was 23.

The questions were structured as follows: First, victims were asked, "Did anyone help you by..." If the victim said yes, (s)he was considered to have that need, and the need was considered to have been met.

If the victim said "no," (s)he was asked, "Would you have wanted help with that?" If the victim said "yes," (s)he was considered to have that need, and the need was considered to have been unmet. If the victim said "no," (s)he was considered not to have had that need. The victim's total number of met needs was computed by the number of "yes" responses to the questions beginning, "Did anyone help you by..." The total number of unmet needs is computed as the number of "Yes" responses to the questions, "Did you want help with that?", which followed the questions about getting help. The flow of these questions is illustrated in Figure 3, below.

Figure 3



The types of help reported by the greatest number of victims were someone listening to them when they were upset; help in understanding how their case was handled - and similarly, getting information about the case from police and court systems; help in getting information to avoid revictimization; and help in installing locks and/or improving the security of their home.

The complete list of needs and percent of victims who received assistance with each need is presented in Table 7.

Table 7

Percent of victims who reported need was met

Need	Percent reporting need as met
Listen to you talk when upset	66.5
Understand how case is handled	39.5
Get info to avoid revictimization	30.7
Install locks/improve security	25.5
Get info re case from police/court	24.1
Get order of protection	17.9
Go to doctor, police, or court	17.3
Replace door/lock	17.1
Escort or help you in court	13.3
Household work/shopping	13.3
Replace other property	13.1
Care of children or aged parents	11.0
Replace ID	9.1
Repair damaged property	9.1
Get time off to take care of things	8.2
Find a temporary place to stay	6.9
File insurance claims	6.2
Find home in a safer area	6.0
Get advice from a lawyer	4.2
Deal with other agencies (p/a, ss)	3.7
Learn new job skills	0.9
Find interpreters/translators	0.9
Make modifications to home	0.6

Unmet needs

The two greatest unmet needs of victims both centered on the need for information from the law enforcement/criminal justice system. Two other unmet needs cited by at least 15% of the sample were assistance in avoiding re-victimization and obtaining legal advice. A complete list of unmet needs, with corresponding percentages of victims, is presented in Table 8.

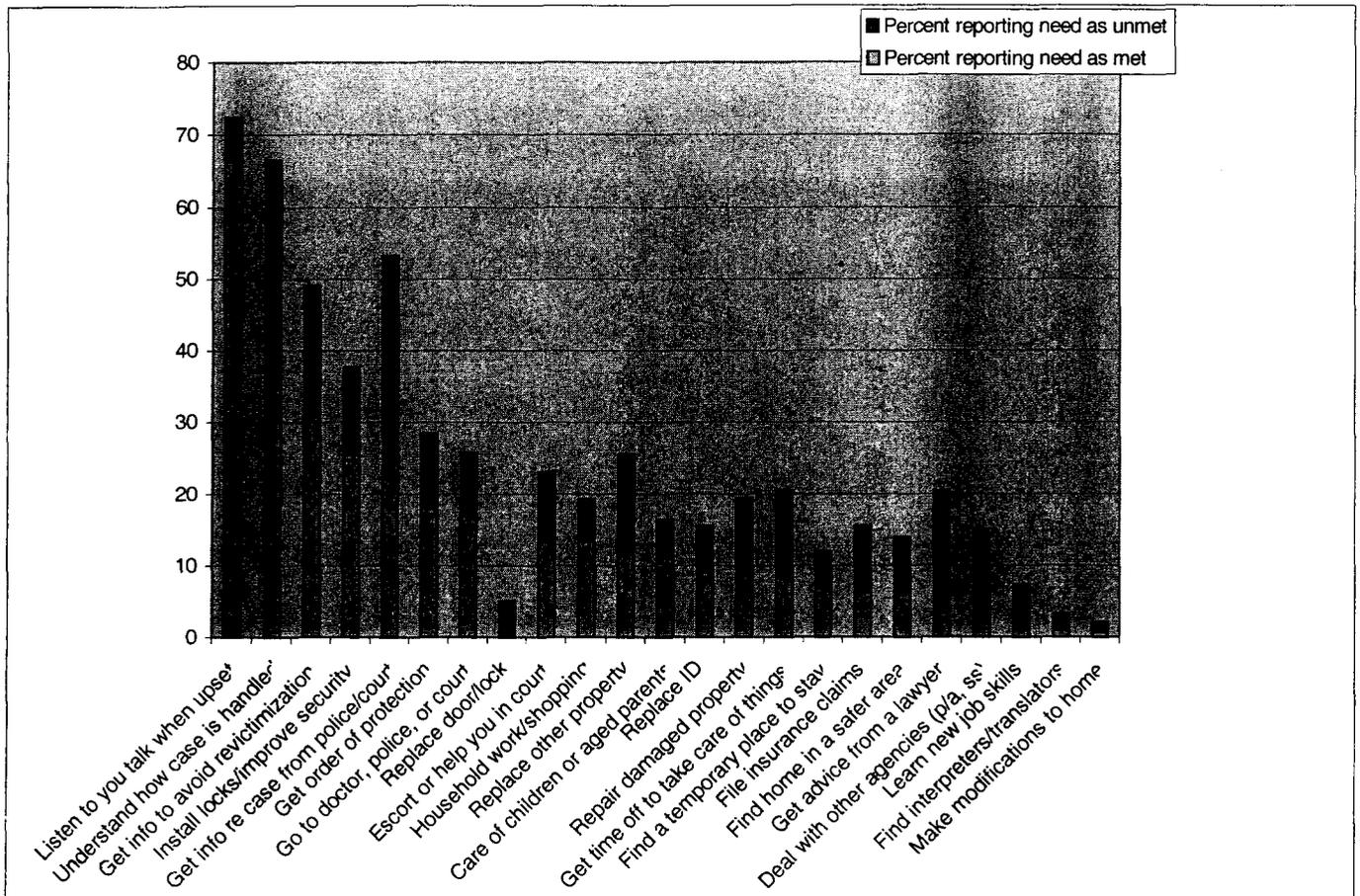
Table 8

Percent of victims who reported need was not met

Need	Percent reporting need as unmet
Get info from re case from police/courts	29.2
Understand how case is handled	27.0
Get information to avoid revictimization	18.4
Get advice from a lawyer	16.2
Replace other property	12.5
Get time off to take care of things	12.3
Install locks/improve security	12.2
Deal with other agencies (pa, ss)	10.8
Get order of protection	10.5
Repair damaged property	10.3
Escort or help you in court	9.7
File insurance claims	9.4
Go to doctor, police or court	8.5
Find home in a safer area	8.0
Replace ID	6.5
Learn new job skills	6.5
Household work/shopping	6.0
Listen to you talk when upset	5.9
Care of children or aged parents	5.4
Replace door/lock	5.1
Find a temporary place to stay	5.1
Find interpreters/translators	2.3
Make modifications to home	1.5

Figure 4

Met and unmet needs



A comparison of met and unmet needs is presented above in Figure 4. As the figure indicates, most needs are more likely to be met than unmet; however, significant unmet needs remain for a sizable number of victims.

From what sources do victims get help?

The survey instrument included a comprehensive list of possible help sources; for ease of analysis, these are collapsed into five categories: Police department, prosecutor's office, victim assistance program, other agency or professional, informal support network (which includes friends, family, co-worker and neighbor), and other. An examination of help sources for needs that were met (see Tables 9 through 16) reveals an unsurprising pattern: Police, and sometimes

prosecutors, were the primary source of help for needs involving the law enforcement or criminal justice system, while informal support networks were the primary source of help for all other needs.

Table 9

Listening – Sources of help

Source of Help	Percent Helped By Source
Police Department	10.4
Prosecutor's Office	1.2
Victim Assistance Program	1.4
Other Agency or Professional	2.8
Family/Friends/Other Informal	78.7
Other	5.4
	N=423

Table 10

Understand how case is handled – Sources of help

Source of Help	Percent Helped By Source
Police Department	49.6
Prosecutor's Office	22.8
Victim Assistance Program	8.7
Other Agency or Professional	0.4
Family/Friends/Other Informal	7.1
Other	11.4
	N=254

Table 11
Avoid Revictimization – Sources Of Help

Source of Help	Percent helped by source
Police Department	38.3
Prosecutor's Office	5.2
Victim Assistance Program	14.0
Other Agency or Professional	4.7
Family/Friends/Other Informal	22.8
Other	15.0
	N=193

Table 12
Install locks – Sources of help

Source of Help	Percent Helped By Source
Police Department	4.2
Prosecutor's Office	0.0
Victim Assistance Program	0.6
Other Agency or Professional	0.0
Family/Friends/Other Informal	39.4
Other	55.8
	N=165

Table 13
Get information – Sources of help

Source of Help	Percent Helped By Source
Police Department	34.2
Prosecutor's Office	21.9
Victim Assistance Program	11.0
Other Agency or Professional	1.9
Family/Friends/Other Informal	11.0
Other	20.0
	N=155

Table 14
Get order of protection – Sources of help

Source of Help	Percent Helped By Source
Police Department	25.2
Prosecutor's Office	25.2
Victim Assistance Program	11.3
Other Agency or Professional	1.7
Family/Friends/Other Informal	13.0
Other	23.5
	N=115

Table 15
Go to doctor – Sources of help

Source of Help	Percent Helped By Source
Police Department	18.8
Prosecutor's Office	1.8
Victim Assistance Program	0.9
Other Agency or Professional	2.7
Family/Friends/Other Informal	67.0
Other	8.9
	N=112

Table 16
Replace door or lock – Sources of help

Source of Help	Percent Helped By Source
Police Department	1.8
Prosecutor's Office	0.0
Victim Assistance Program	0.9
Other Agency or Professional	0.0
Family/Friends/Other/Informal	35.0
Other	62.2
	N=111

As the tables above indicate, the role of Victim Assistance Programs is relatively minor.

Although they are listed as help sources by 14% of those who received information about

avoiding re-victimization and by 11% each of those who were helped in getting information regarding the status of their case and in getting an order of protection, these percentages translate into relatively small numbers of people. Further detail about those who did and did not get services from these programs is presented in Chapter 4, where we discuss our contextual analysis.

Predictors of needs and whether needs are met

We explored several factors to determine whether particular demographic and/or crime type groups had different levels of need, or different levels of success at having their needs met, than did others. The key factors explored here were race, gender, crime type, and type of locale in which the victim lived. Some of these factors were built into our research design; others (demographics) were selected based on their emergence as significant predictors in preliminary regression analyses. It should be noted that household income did emerge as a significant predictor in some analyses, but is highly intercorrelated with race, which was consistently significant as well. Once separate analyses for whites and non-whites revealed that, within racial groups, income barely achieved significance for whites and was not significant for non-whites, it was decided that race alone would be used in further analyses.

Race. Two-thirds (67%) of the adult respondents described themselves as “white” in a question about racial identity.⁵ Because non-whites constituted a minority of the sample and were comprised primarily of African-Americans (23% of adult sample), analyses breaking non-whites down into further subgroups would have suffered from small cell sizes; consequently, the analyses reported here classify the sample into only two groups, whites and non-whites. T-tests reveal that the two groups report getting help with comparable numbers of needs (3.55 for

⁵ The question allowed for multiple response categories; we used their first response as the indicator of race. Only 14 (3%) of the 431 White victims also named another race as well.

whites, 3.49 for non-whites). However, while whites report an average of 1.82 unmet needs, the average for non-whites is twice as high, at 3.59 ($t(303) = -5.08, p < .001$). This higher number of unmet needs also results in a higher number of total needs reported by non-whites (7.08) compared to whites (5.30); this difference, too, is statistically significant ($t(326) = -4.23, p < .001$).

Further exploration of these findings reveals that differences in unmet needs between these two groups cluster in two areas: Tangible needs and need for information and assistance in navigating various systems. White victims report an average of .60 unmet tangible needs, while non-whites report more than twice as many (mean=1.63, $t(279) = -5.76, p < .001$). Similarly, whites report an average of 1.15 unmet informational needs while the mean for non-whites is 1.90 ($t(331) = -3.93, p < .001$). It is striking that whites and non-whites did not differ in unmet needs for emotional support. The key indicator for this type of support was having “someone to listen to me when I am upset”; 19% of whites and 16% of non-whites reported this as an unmet need.

Gender. The effect of gender on met and unmet needs was explored using the non-domestic violence victims only. Since the vast majority of domestic violence cases were female, inclusion of this group would have confounded gender and crime type and made the results difficult to interpret. T-tests comparing males and females in the subsample showed significant differences in the number of total needs (met and unmet) reported by males and females. Males reported an average of 4.96, while females reported an average of 5.83 needs ($t(514) = -2.35, p < .005$). The higher number of needs reported by females is driven largely by this group reporting more needs with which they received help. Men reported getting help with an average of 2.56 needs, while women reported getting help with 3.77 needs ($t(514) = -5.82, p < .001$). However, the two groups did not differ in their number of unmet needs (2.39 for males, 2.05 for

females, ns). Thus, though women are getting more help, this benefit is offset by their higher level of reported overall needs.

An exploration of the types of needs reported by women and by men shows an interesting, though not surprising pattern. Needs were categorized (by the researchers and independent judges) as tangible, informational, or emotional in nature. Men and women differ slightly in the number of informational needs with which they receive help (1.15 for men, 1.41 for women); this difference is statistically significant at the .05 level. In contrast, the difference in the number of tangible needs with which men and women get help differs more sharply, with men reporting help with significantly fewer needs than women (.90 v . 1.46, $t(496) = -4.82$, $p < .001$). Similarly, men and women differ dramatically in their reports of getting help by someone “listening to me when I was upset” – the key indicator of emotional support. Women are almost twice as likely to report receiving this help as are men; 81% of women versus 46% of men report they got this kind of help (chi-square = 67.51 with 1 df, $p < .001$). It is striking that men and women do not differ in either number of unmet tangible needs or in whether they would want someone to listen to them, if they have not gotten that help. Thus, women appear to want more tangible assistance and emotional support, and to receive correspondingly more help in both of these areas.

Crime type. A comparison of numbers and percentages of met and unmet needs across crime types revealed significant differences only on the numbers of needs with which victims got help, and the number of total needs endorsed (see Tables 17 – 19 and Figure 5). There were no differences in either number of unmet needs or percentages of reported needs that were met versus unmet.

Table 17
Number of needs got help with

Crime Category	N	Mean
Assault/Battery	107	3.17
Burglary	251	3.02
Robbery	159	3.83
Domestic Violence	131	4.91
Total	648	3.51

F(3,644)=16.95, p<.001

Table 18
Number of needs wanted help with but did not get

Crime Category	N	Mean
Assault/Battery	107	2.21
Burglary	251	2.29
Robbery	159	2.13
Domestic Violence	131	3.07
Total	648	2.39

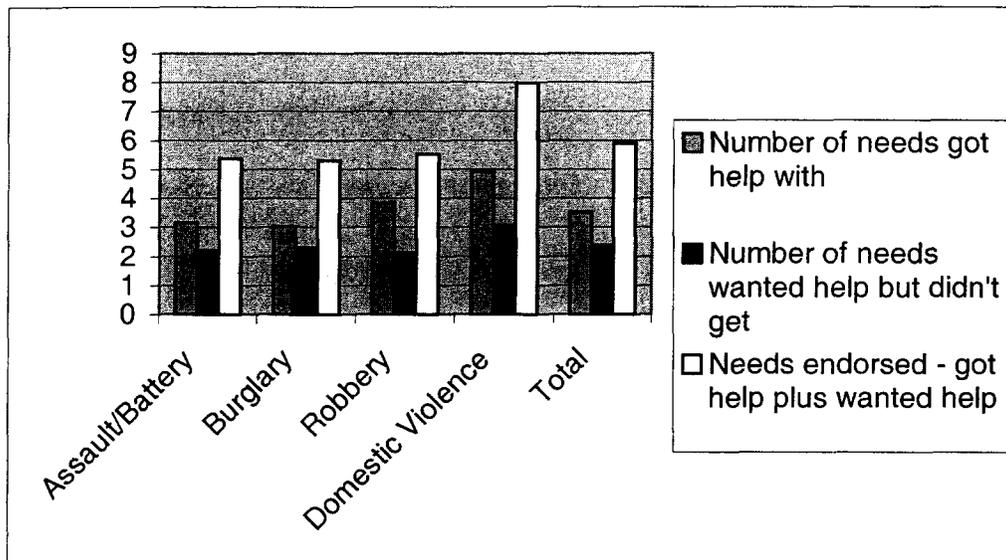
F(3,644)=1.88, ns

Table 19
Needs endorsed – got help plus wanted help

Crime Category	N	Mean
Assault/Battery	107	5.38
Burglary	251	5.31
Robbery	159	5.52
Domestic Violence	131	7.98
Total	648	5.91

F(3,644)=12.65, p<.001

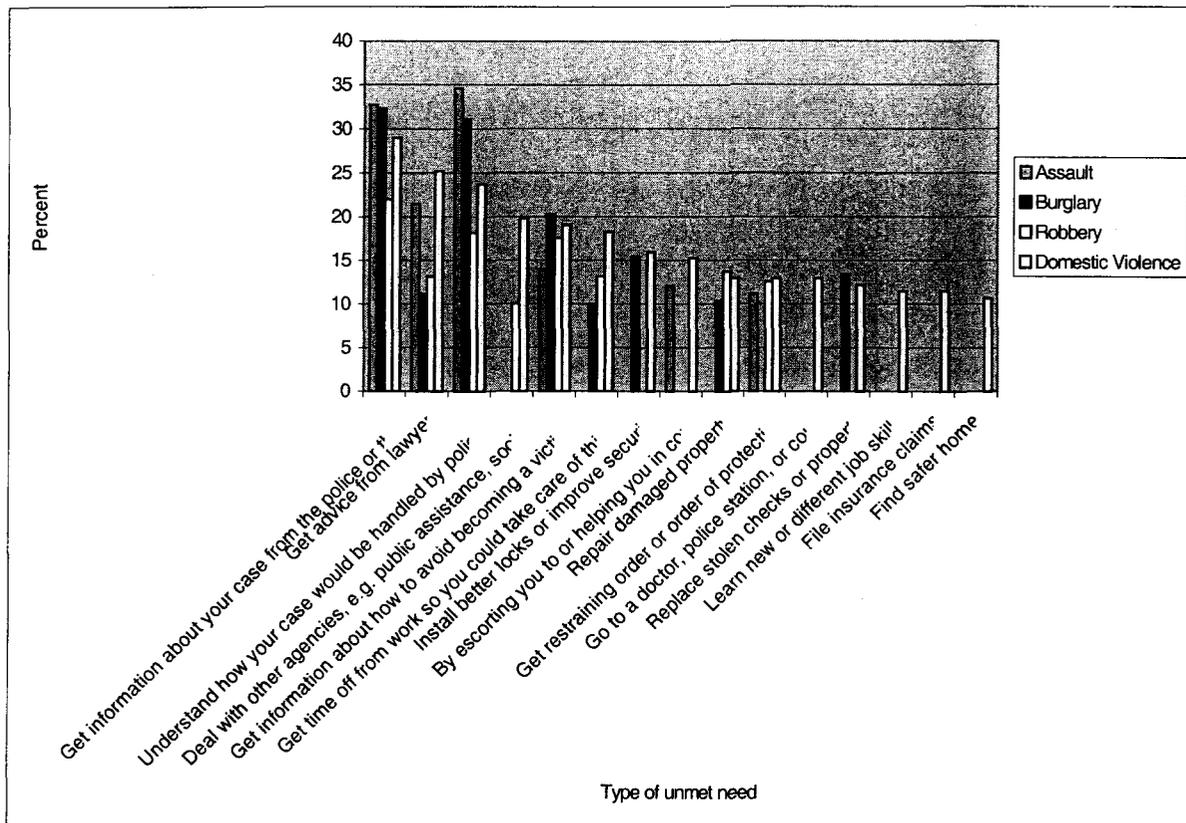
Figure 5
Victim needs by type of crime



An examination using Scheffe contrasts of the mean number of needs reported for each crime type, as well as number of met needs, suggests that this finding reflects the fact that domestic violence victims need more help than others. They reported an average of 7.98 total needs, compared to 5.51 for robbery victims, 5.37 for assault/battery victims, and 5.31 for burglary victims. The latter three groups did not differ significantly from each other.

However, domestic violence victims also reported getting more help than other, with an average of 4.91 met needs compared to 3.38 for robbery, 3.17 for assault/battery, and 3.02 for burglary. Here again, Scheffe contrasts indicate that the latter three groups do not differ from each other, but all are significantly different from the domestic violence group. Thus, domestic violence victims both need and receive more help than do victims of other types of crimes.

Figure 6
Unmet needs by type of crime



Crime type and the nature of unmet needs. Survey respondents had a number of unmet needs after the incident. As indicated in Figure 6, while there are some differences in the unmet need depending on the type of crime, victims in all four crime categories all had the following four unmet needs: *Understanding how your case would be handled by the police and courts; Get information about your case from the police or court; Get advice from a lawyer; and Get information about how to avoid becoming a victim again.* Getting information about their case from the police or courts and understanding how their case would be handled were unmet needs for approximately 1/5 to 1/3 of respondents in each of the four crime categories. Advice from a lawyer was an unmet need for more of the domestic violence and assault/battery victims than for either burglary or robbery victims.

Assault/Battery. Assault/Battery victims appear to have somewhat fewer unmet needs than respondents in the other three crime categories. In addition to the four unmet needs that existed across crime categories, 12.1% of victims of assault/battery reported that they would have wanted an escort to and/or help in court and 11.2% wanted help getting a restraining order or order of protection.

Table 20
Unmet needs of assault/battery victims

Type of unmet need	% identifying as unmet need
Understand how your case would be handled by the police and courts	34.6
Get information about your case from the police or the courts	32.7
Get advice from lawyer	21.5
Get information about how to avoid becoming a victim again	14.0
By escorting you to or helping you in court	12.1
Get restraining order or order of protection	11.2

Burglary. Eight needs were cited as unmet by at least 10% of burglary victims. Foremost among these was the need for more information about case status or how the case was being handled. Other major needs were information to avoid re-victimization and security improvement in their homes.

Table 21
Unmet needs of burglary victims

Type of unmet need	% identifying as an unmet need
Get information about your case from the police or the courts	32.3
Understand how your case would be handled by the police and courts	31.1
Get information about how to avoid becoming a victim again	20.3
Install better locks or improve security	15.5
Replace property	13.5
Get advice from lawyer	11.2
Repair damaged property	10.4
Get time off from work so you could take care of things	10.0

Robbery. Similar to burglary victims, there were eight needs cited as unmet by at least 10% of robbery victims. These included needing help with case information as well as repairing damaged property and getting time off of work to take care of things, among others.

Table 22
Unmet needs of robbery victims

Type of unmet need	% identifying as an unmet need
Get information about your case from the police or the courts	22.0
Understand how your case would be handled by the police and courts	18.2
Get information about how to avoid becoming a victim again	17.6
Repair damaged property	13.8
Get advice from lawyer	13.2
Get time off from work so you could take care of things	13.2
Get restraining order or order of protection	12.6
Deal with other agencies such as public assistance, social services, housing and child welfare	10.1

Domestic Violence. Victims of domestic violence identified more unmet needs than others. After the four unmet needs that existed across categories, other unmet needs for domestic

violence victims included: help dealing with other agencies, getting time off work to take care of things, installing better locks or improving security, and escort to or help in court, among others.

Table 23
Unmet needs of domestic violence victims

Type of unmet need	% identifying as an unmet need
Get information about your case from the police or the courts	29.0
Get advice from lawyer	25.2
Understand how your case would be handled by the police and courts	23.7
Deal with other agencies, such as with public assistance, social services, housing and child welfare	19.8
Get information about how to avoid becoming a victim again	19.1
Get time off from work so you could take care of things	18.3
Install better locks or improve security	16.0
By escorting you to or helping you in court	15.3
Repair damaged property	13.0
Get restraining order or order of protection	13.0
Go to a doctor, police station, or court	13.0
Replace property	12.2
Learn new or different job skills because you couldn't continue to do your old job after the crime	11.5
File insurance claims	11.5
Find safer home	10.7

Urbanicity of site. Initial comparisons of victims at urban, suburban and rural sites suggest that they are similar in terms of numbers of total needs reported as well as numbers of met and unmet needs. However, a two-way ANOVA exploring the joint impact of locale type and race on unmet needs revealed a significant interaction effect for race by locale type (see Table 24). While it is difficult to glean much about racial differences in rural sites, because of the low numbers of non-white respondents at these sites, the differences in the other groups are more revealing. In both suburban and urban sites, non-whites report higher numbers of unmet needs than do their white counterparts. The racial disparity is particularly striking in urban sites,

where whites report an average of 1.75 unmet needs and non-whites report more than twice as many, for an average of 4.1 unmet needs.

Table 24
ANOVA : Effects of Urbanicity of site and Race (White/Non-white) on # of unmet needs

	F-value	Degrees of freedom
Urbanicity	2.77	2,634
Race	3.08	1,634
Urbanicity x Race	6.27**	2,634

** p < .01

Active versus passive outreach strategy of sites. Victims in active outreach sites reported getting help with significantly more needs than did victims in passive sites (3.71 v. 3.29; $t(646) = 2.03, p < .05$). However, there was no significant difference between the two groups in number of unmet needs – that is, needs for which they wanted but did not receive help (means = 2.10 v. 1.98). Thus, while “active site” victims are getting more help, they also have a greater number of total needs, and the same number of needs remain unmet for both groups. It may be that active outreach sites more effectively identify and serve needier victims, a hypothesis we test later, in our contextual analysis. Alternatively, the active outreach at some sites may have helped victims to identify their needs more thoroughly, thereby creating a difference in the two types of sites. These and other possible explanations are explored later, in our summary and conclusions.

In keeping with the findings regarding type of locale and race, two-way ANOVA’s were conducted to examine met, unmet and total needs as a function of both race and outreach strategy of the site. In these analyses, there were no significant main effects or interaction effects for number of needs with which people received help. However, an analysis of unmet needs (reported in Table 25) revealed a significant main effect of race (with non-whites reporting more unmet needs at both active and passive sites than did whites); there was no significant main

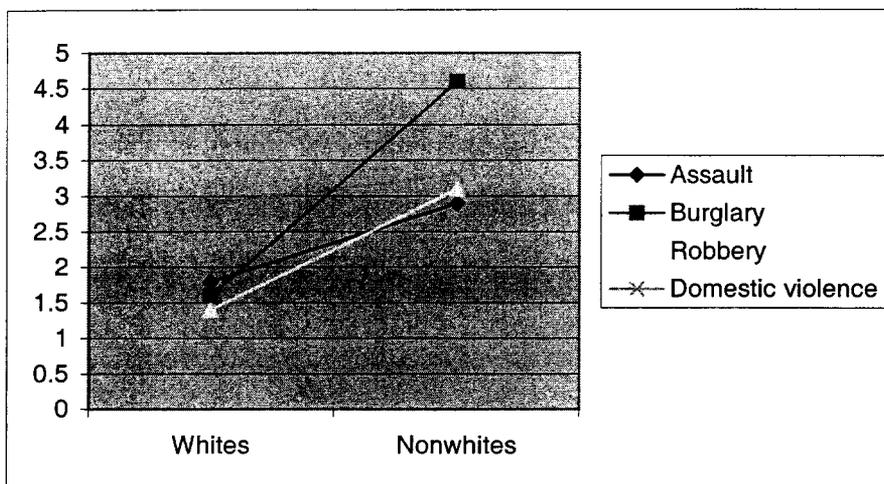
effect of outreach strategy or interaction effect. This pattern is consistent with the findings regarding race alone, as reported earlier. A similar pattern was found for number of total needs, driven by the racial differences in unmet needs.

Table 25
Unmet needs by outreach strategy and race

Outreach strategy	Mean number of unmet needs
Active sites	
White	1.83
Non-white	3.90
Passive sites	
White	1.88
Non-white	3.11
<i>Outreach strategy:</i>	<i>F (1,636)=1.44, ns</i>
<i>Race:</i>	<i>F (1,636)=28.67, p < .001</i>
<i>Outreach strategy x race:</i>	<i>F (1,636)=1.87, ns</i>

Crime type and race. A two-way ANOVA was conducted to explore the joint impact of crime type and race on number of met and unmet needs reported. As Figure 7 suggests, there is a significant main effect of race, though not of crime type, on number of unmet needs, consistent with earlier findings ($F(1, 632) = 24.34, p < .001$). In addition, there was significant interaction effect of race and crime type. ($F(3, 632) = 3.39, p < .05$). Numbers of unmet needs vary across crime type within whites, ranging from a mean of 1.41 for robbery victims to 2.91 for domestic violence victims. For non-whites, numbers in every crime type are higher, and also become somewhat more variable across crime types. Non-white assault/battery victims report an average of 2.93 unmet needs. This rises to 3.12 for non-white robbery victims, 3.31 for non-white domestic violence victims, and a high of 4.61 unmet needs for non-white burglary victims. Thus, while non-white victims in all crime types fare worse than their white counterparts, non-white victims of some crime types fare even more poorly than do victims of other crimes.

Figure 7
Unmet needs by race



Chapter IV

Individual and Contextual Determinants of Service Use

In our discussion of help sources used to meet victims' needs, we noted that relatively small percentages of victims appear to be getting help from victim assistance programs. One of the goals of this project is to understand why some victims utilize the services of these programs while others – the majority of victims -- do not. Past efforts to understand service use have relied solely on survey techniques. Survey techniques are able to probe individual motivations for seeking services, but they cannot examine policies or characteristics of service networks that may prove to be the strongest determinants of whether victims receive services or not. For example, research by Skogan, Davis and Lurigio (1990) suggested that referrals by police and prosecutors are important precursors to service use. Based on this finding, it is reasonable to anticipate that jurisdictions where such referrals are common would have higher service utilization rates than jurisdictions where police and prosecutor referrals are less frequent.

Examples from related applied social science research support the need to consider contextual factors. In the medical field, environmental factors such as location of health care facility and provider-related factors have been found to be significant predictors of health care utilization (Phillips et al., 1998). In an evaluation of a statewide program to remove young offenders from detention, community agency referrals of these youth were conditioned by the strength of the network of services available for these youths (Spergel, et al., 1982). Sampson and Raudenbush (1998) demonstrated the importance of neighborhood *collective efficacy* in determining rates of violent crimes.

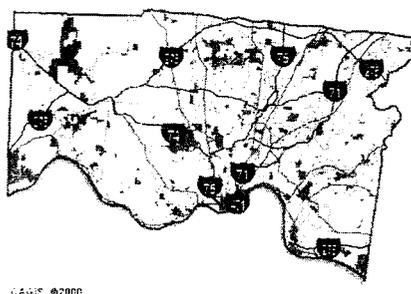
In our work, we included jurisdictions that differ on two primary contextual factors - activeness of service program outreach practices and size of jurisdiction. We expected that

jurisdictions that conduct active outreach via in-person visits, phone calls, or letters would generate more service users than sites with passive outreach. We further expected that rural sites would have fewer service users than urban sites. This is because (we believe) rural sites would have fewer services available than urban sites where high population density makes it easier to justify more specialized services.

We begin the discussion by describing the service delivery networks in each of the six study sites. These descriptions are based on in-person and telephone interviews with the program we have designated as the primary provider of services to victims and with other organizations that provide services to victims in the same county. The descriptions are especially valuable for understanding how the variables regarding key characteristics of service delivery networks, which we use in further analyses, are derived. The descriptions are followed by a comparison of these key characteristics across the sites. Finally, we build models of service knowledge, service utilization, and help received using both contextual factors and characteristics of individual victims.

Site Descriptions

Talbert House Victim Services: Urban: Hamilton County, Ohio



Active Outreach

Hamilton County is an urban county located in the southwestern corner of Ohio, bordering both Indiana and Kentucky. Cincinnati is the third largest city in the state and holds the County seat. The most recent census conducted in 2000 lists the population at 845,303. The county is about 73 percent white, 23 percent African American, 2 percent Asian and 1 percent Latino.

Both in Hamilton County and statewide, roughly 76 percent of people age 25 years and over are high school graduates or higher. The number of people who have obtained a bachelors degree or higher is about 24 percent in the County compared to 17 percent statewide. It is estimated that 11 percent of the total population lives below the poverty line and 17 percent of children. The median family income is around \$39,000, and \$36,000 for the state.

Based on federal Uniform Crime Reporting statistics, the crime rate in the state of Ohio is 40 crimes per 1,000 people and in Hamilton County is about 46 per thousand.

In 2000, the State of Ohio received a total award of \$14,510,000 from the Victims of Crime Act Victim Assistance Grant Program, and funded 274 service providers. According to the State VOCA administrator, funding is dispersed through a needs assessment study involving a sixteen member State Victims Assistance Advisory Board. The Advisory Board consists of criminal justice professionals, private citizens and service providers. The Board reviews all grant applications and then makes a recommendation to the Attorney General, who has the final decision. One of the major priorities has been to fund county prosecutor-based programs because of their involvement with victims of violent crimes; thus the Board has funded all 88 such county programs. Domestic violence shelters have also been given priority and have received a large portion of VOCA funds. In addition, the Board has placed an emphasis on a number of

underserved populations such as homicide survivor groups, and rural populations with limited service.

The Primary Program: Talbert House Victim Services.

Talbert House Victim Services is part of the non-profit Talbert House. The program, which began in 1983, currently has an annual budget of approximately one-quarter million dollars per year. Funds derive from city and county government, VOCA, and the United Way. They support a staff of four full-time and one part-time employees.

While not housed within a criminal justice agency, the program cooperates closely with the police and the Hamilton County District Attorney's Office. The program receives from the police lists of persons who have reported misdemeanor and felony crimes via the county computer information system. The program sends 13,000 letters annually to victims within two weeks of the crime – the amount of time it takes to get outreach lists from the police. Program staff make approximately 2,300 outreach phone calls to victims each year as well. Victims may also hear about the program from presentations at community group meetings or from cards given out by the police. However, program staff stated that the police do not reliably carry the cards and that such referrals are few in number. Referrals from the prosecutor's office, other service programs, and hospitals are also infrequent.

The program provides information about the justice process and court escorts to an estimated 900 victims per year. These services are available to misdemeanor as well as felony victims, with the exclusion of cross-complainants. Impact statements are routinely prepared for victims in court by victim advocates who work for the District Attorney's Office.

Talbert House Victim Services provides short-term counseling to an estimated 500 victims each year. In addition, the program maintains support groups for homicide survivors and

senior citizen victims. Practical assistance in the forms of help filing victim compensation forms and relocation assistance are provided to another 100 victims per year.

With a small staff, Talbert House Victim Services does not have personnel to aid victims who are unable to communicate in English.

Referrals. Talbert House staff estimate that they refer victims most frequently to the Free Store, a private non-profit organization that provides food, personal hygiene products, bus tokens, and small cash grants to persons in need due to emergencies or extreme poverty. The services of the Free Store are without cost to its clients, with funds coming from state and local governments and the United Way. The Free Store's director estimates that about 1% of the program's 42,000 clients annually are crime victims. Talbert House was cited as the major referral source for crime victims, followed by the YWCA, Juvenile Court, and the police. Persons in need of shelter and practical assistance may also be referred to the Salvation Army or to Link Line, a referral agency that connects people with services.

Talbert House staff estimate that one in two of the victims it serves receive referrals for counseling. The most common referral for counseling is to Mental Health Services East (MHSE), another component of Talbert House. MHSE does both short and long-term counseling and has specialized counselors for child and elderly victims and victims of sexual assault. The counselors are specially trained to deal with post-traumatic stress and anxiety that often follow victimization. Fees are calculated on a sliding scale, with subsidies coming from state and local government. Currently, MHSE has an eight-week waiting list for new clients, making it inappropriate for victims with emergency needs.

Other common counseling referrals are CORE and Mental Health Access Point Central Clinic. The latter program offers individual and group counseling to adult clients on a sliding

scale. Services are subsidized by state and local funds. Clients are taken on an availability basis, and there is no immediate response center for victims with emergency needs.

Female victims of sexual assault and/or domestic violence are referred to Women Helping Women (WHW), a non-profit organization that receives VOCA and VAWA funding as well as state, local, and United Way funds. The free services provided to 8,000 victims each year include a crisis hotline, sexual assault support groups, criminal justice advocacy, and prevention education in schools. In addition, WHW helps women with relocation, shelter, and employment issues. While Talbert House is a source of referrals for WHW, it is not the primary one, since WHW normally reaches victims before Talbert House. This is because WHW is geared toward victims in crisis, reaching out to sexual assault victims in the local hospital within 72 hours and domestic violence victims at criminal court arraignment within 24 hours of the crime. Most referrals to WHW come from the police, from hospitals, and the courts.

Talbert House staff report that they routinely follow up with clients to determine whether they used referrals that are made.

Figure 8
Referral density in Hamilton County

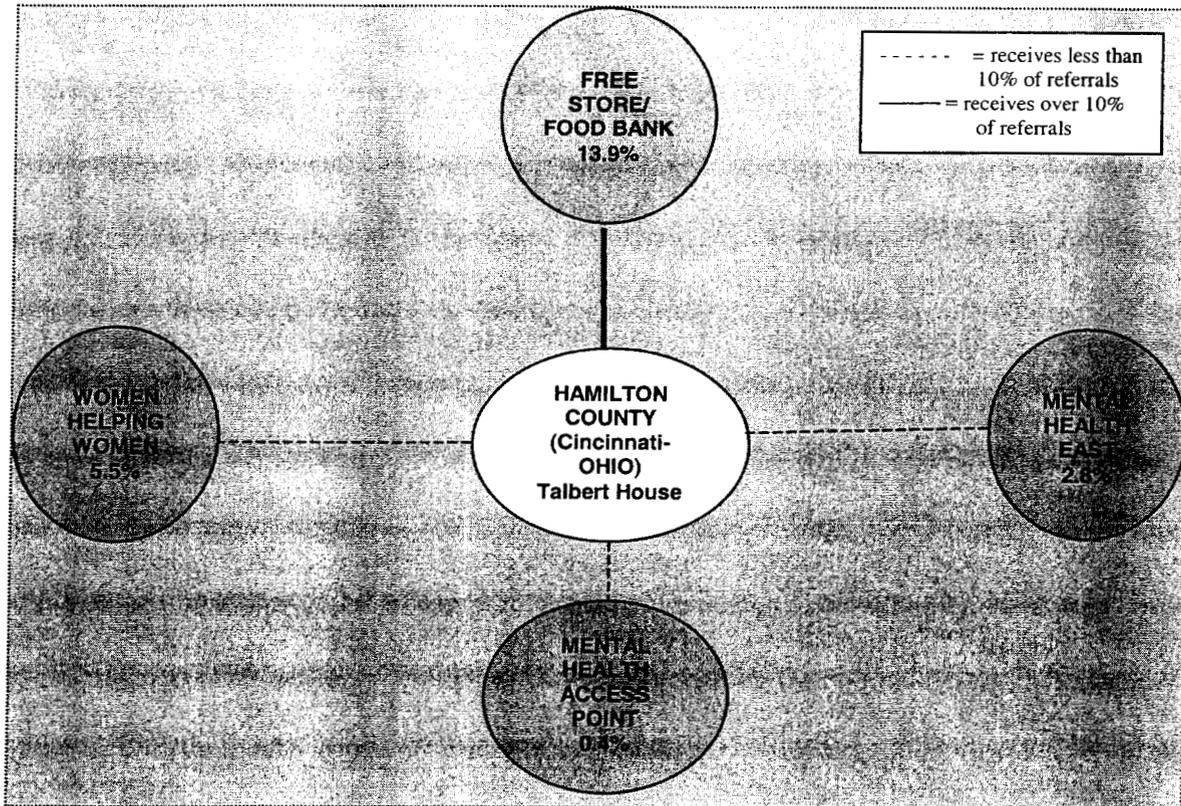


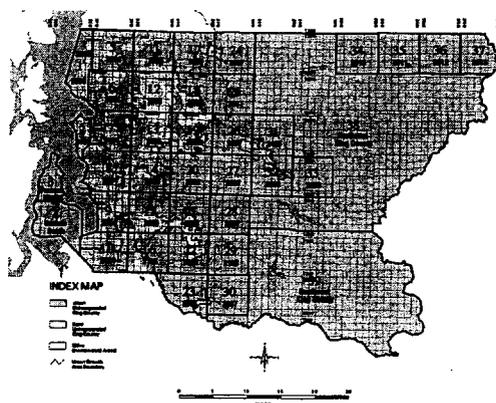
Figure 8 depicts the referral density in Hamilton County based on the proportion of clients referred by Talbert House to secondary programs. (It does not show the total number of agencies referred to, which is ten, but includes those for which we were able to get information. We note that out of the four agencies that Talbert House refers to, only the Free Store receives over 10% of Talbert House clients.

Synthesis. Victims in Cincinnati have a full service program available and a broad range of counseling services and practical assistance. Outreach efforts by Talbert House Victim Services ensure that misdemeanor as well as felony victims who report crimes to the police will be informed about how and where to receive assistance. Female victims of violence are likely to

receive offers of assistance soon after the crime but, for most other victims, there is a two-week delay in notification of assistance.

Although Cincinnati victims have services readily available, this is less true for victims in suburban Hamilton County. Victims in some suburban communities do not receive outreach letters and phone calls. Moreover, while the location of Talbert House is convenient for victims in Cincinnati, suburban victims must travel downtown for assistance. In suburbs with sparse public transportation, this can be a lengthy trip for those without cars.

Seattle Victim Assistance Network Urban: King County, Washington



Passive Outreach

King County includes the greater metropolitan Seattle, Washington area and outlying towns. Seattle is in the center of western Washington, and is bordered on the west by the Puget Sound. The most recent census conducted in 2000 lists the population at 1,737,034. The county is about 73 percent white, 5 percent African American, 11 percent Asian, 1 percent American Indian, 5 1/2 percent Latino and about 4 percent multiracial.

Roughly 88 percent of people age 25 years and over are high school graduates or higher while statewide the percentage is 84 percent. In King County the number of people who have obtained a bachelors degree or higher is about 33 percent compared to 23 percent statewide.

There are a number of Colleges and State Universities located in the Seattle area including many University-run hospitals and services.

In King County, it is estimated that only 8 percent of the total population lives below the poverty line while 12 percent of children live below the poverty line. The median family income is around \$51,000, while the state median is \$41,000. Statewide, the percentage of people and children living below the federal poverty level are only slightly higher than the county levels.

The largest employer in the area is Boeing followed by companies such as software and computer giant Microsoft, area hospitals, Safeco, and a host of government agencies. The largest percentage of the population works in the service sector, followed by retail and manufacturing.

In recent years, there have been a number of immigrants and refugees settling in Seattle, including Mexicans, East Africans, Vietnamese, Laotians, Chinese, and Eastern Europeans, and adding to an already diverse city.

Based on federal Uniform Crime Reporting statistics, the crime rate in King County at 58 crimes per 1,000 people is higher than the state rate of 51 per 1,000 people.

In 2000, the State of Washington received a total award of \$7,611,000 from the Victims of Crime Act Victim Assistance Grant Program, and funded 115 programs. According to the State VOCA administrator, funding is dispersed both competitively and non-competitively. In order to meet the needs of different victim populations, the total grant is divided into thirds. One third is non-competitively distributed to emergency domestic violence programs, another third is non-competitively distributed to direct service agencies focusing on sexual assault and the rest is competitively procured and is intended to go to any other victims, particularly those that are underserved or victims of child abuse.

The non-competitive grants are handed out annually while the competitive grants are only dispersed every three years. The review process involves an initial solicitation for proposals and a review. Though there is no formal advisory board, a group of 3-5 people, comprised of community members, and victim services professionals review the proposals and make recommendations to The Department of Social and Health Services. Their recommendations are based on scores as well as on any mitigating circumstances or special priorities.

In recent years, there has been an emphasis on meeting the needs of the Latino population and on providing funding to local Native American tribes. In 2000, domestic violence shelters, 40 sexual assault programs, and 31 comprehensive programs were funded.

The Primary Program: Seattle Victim Assistance Network.

The Crime Survivors Services Unit (CSU) is a city agency that is part of the Seattle Police Department. The program, which began in 1979, currently has an annual budget of approximately \$560,000 per year. Funds derive from city and county government, VOCA, and VAWA. They support a staff of eight full-time and one part-time employee, and a roster of 76 volunteers.

The program is located within one of the police department offices and cooperates closely with the police and the King County District Attorney's Office. The agency does not serve misdemeanor victims and or victims of non-violent felonies. The program handles felony level cases that are deemed eligible by the Detective working on the case; with the exclusion of any person who the department feels has a criminal history that may be a threat to the advocate. In addition, there is another stipulation that further restricts their caseload to person to person crimes. The one exception to these policies is domestic violence; for this crime type, advocates respond to both felony and misdemeanor level cases.

Since they are a division of the Seattle Police Department, the program either contacts the victim by telephone or by letter within 24-48 hours of the crime. Impact statements are routinely sent out with a form letter by victim advocates while practical assistance in the form of helping file victim compensation forms is done by the District Attorney's Office. In the year 2000, the CSU did outreach to roughly 2235 victims through these methods.

The program provides information about the justice process and provides notification using the VINE system, a system that notifies victims on the status of an inmate. They also provide court escorts and transportation as needed.

The CSU runs a specialized program for domestic violence victims called the Victim Support Team (VST). The VST is a partnership between the community and the police department. Sixty-one trained community volunteers provide on-scene crisis intervention to domestic violence victims immediately following an incident. They are equipped with an unmarked patrol car, cell phone, pager, and a police radio. Patrol officers frequently call on the VST to respond on domestic violence calls. Once a team arrives, the volunteer works as a liaison between the victim and local services, helps to locate food, clothing, and shelter, helps orient the victim to the criminal justice system, and helps devise a safety plan for the following days. After the weekend, JustServe Americorps members call domestic violence victims to follow up and to further assist in making linkages with local services. Americorps members work with the victim until the case is shifted to a legal advocate in the City Attorney's Domestic Violence Unit (misdemeanor cases) or to the Crime Survivors Unit (felony cases).

Spanish-speaking advocates help with Latino victims and the office currently has a staff member who is fluent in Cantonese, Vietnamese and Mandarin. For translating any other languages, the office uses the AT&T language line. The building is wheelchair-accessible and

the downtown area is easily reached by those with special needs. The program has no specialized staff for dealing with the needs of victims who are visually-impaired or hearing-impaired, but they are confident that they could locate services in the Seattle area.

Referrals. The Crime Survivors Unit does not provide mental health counseling directly and therefore, refers a large number of clients to local agencies. Harborview Center for Traumatic Stress is a hospital-related agency that serves anyone experiencing trauma, from crime victims to survivors of automobile accidents. Harborview receives state and local dollars, VOCA, VAWA, and private funding. Specializing in sexual assault, Harborview serves roughly 1000 crime victims each year, the large majority of which are rape victims. The program operates a full range of clinical services, including crisis response, individual therapy, trauma specific therapy and group counseling. With VOCA funds, they are able to provide non-sexual assault victims with services free of charge. Otherwise, clients pay on a sliding scale, with insurance or with Medicaid or Medicare. Because of their relationship with the hospital, they receive one third of their clientele directly from the Harborview Medial Center emergency room. The rest may come within months or years depending on the trauma.

Survivors of homicide are referred to Virginia Mason, Separation & Loss Services, a program that is part of Virginia Mason Hospital. Working in conjunction with the King County Medical Examiner, Virginia Mason serves about one hundred and twenty families a year. Contact is made by letter within three to four months of the death, however, many clients do not arrive at the program until six months to a year after the loss. If requested, a counselor will accompany families to the Medical Examiner's office to identify the body. Virginia Mason provides individual therapy, group counseling, psychiatric evaluations and in some cases

medication. The program also assists people with filing out victim compensation forms, and making referrals.

Persons in need of shelter and practical assistance may be referred to Catholic Community Services. Part of the archdiocese of Seattle, CCS provides emergency shelter, family assistance services; welfare advocates, and direct cash grants. CCS receives money from state and local funds, and the United Way.

Victims of domestic violence are referred to a range of shelters and services including New Beginnings and Catherine Booth House. New Beginnings is a private non-profit organization. In addition to serving King County, the program receives 20 percent of their clients from out of state or out of the county. The program takes only cases in which the woman is in imminent danger. Still, after assessing lethality in all cases the program turns away nineteen out of every twenty women who have been determined eligible. Most women hear about the program through the police, the hospitals, or from one of the other social service agencies. New Beginnings runs four confidential 18-bed emergency shelters, serving roughly three hundred women and children a year and a 17 -unit transitional housing program funded by HUD that serves 60 to 80 people each year. Along with shelter, New Beginnings provides legal advocacy, chemical dependency services, community advocacy and a telephone help-line. Services are free except for the transitional housing, where women are asked to contribute 30 percent of their income to stay for up to eighteen months. New Beginnings operates on a budget of 2.2 million, with funds coming from VOCA, VAWA, state and local sources and the United Way. A large part of their budget also consists of money received from fundraising. To educate the community about family violence issues, New Beginnings uses fundraising as a method of advocacy.

Catherine Booth House is a confidential shelter associated with the Salvation Army, serving around 250 women and children a year. Their budget comes from VAWA, state and local funds and private funding through the Salvation Army. They operate a domestic violence hotline and a 16-bed shelter, and provide legal advocacy, self-help divorce training, community advocacy, and practical assistance such as social security changes, clothing and food. Like New Beginnings, Catherine Booth uses a screening process to identify women who are in imminent danger and in need of shelter. They too must turn away women, and currently cannot accommodate fourteen out of fifteen women. Most women reach them either by calling the hotline or self-referring, though women also come from local hospitals.

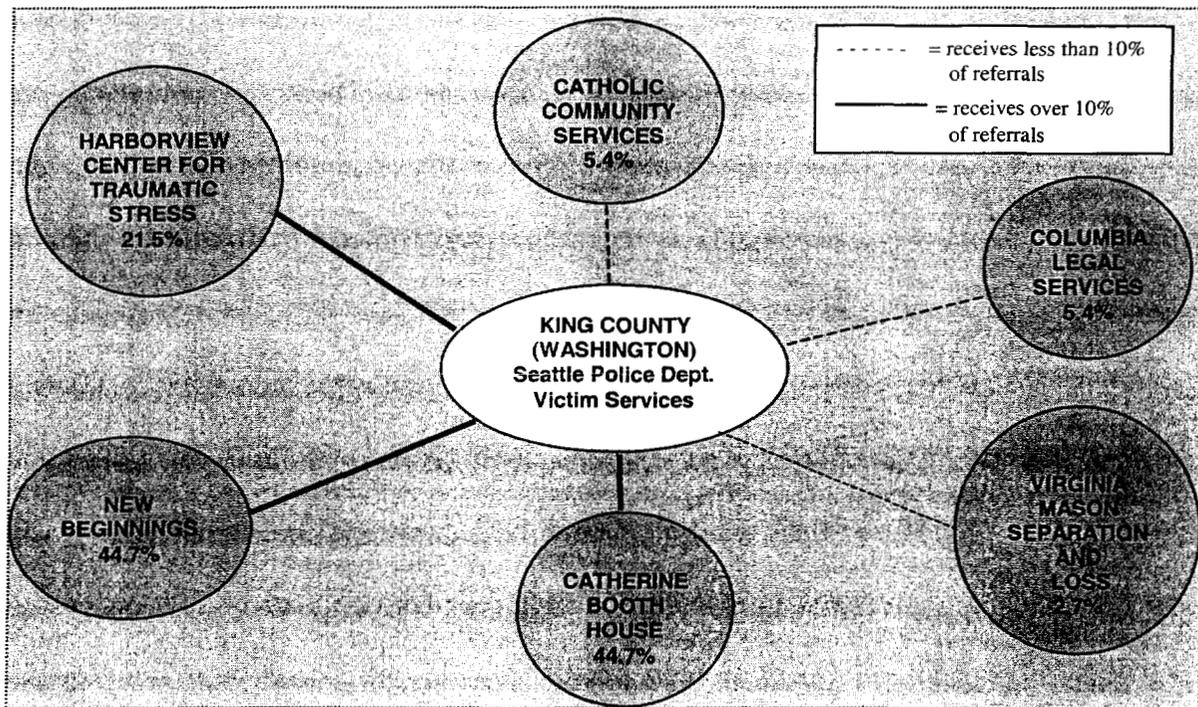
Victims in need of legal services can access Columbia Legal Services, an organization that provides court-based advocates to low income clients in the Seattle area. Their family law unit focuses specifically on domestic violence cases and serves several hundred clients each year. The organization is staffed with one family law attorney, some law students, and is also supported by local lawyers who take on pro-bono cases. It often takes several months to a year for victims to reach Columbia Legal services and domestic violence advocates typically refer them. Because resources are scarce, there is a screening process designed to determine lethality and complexity. In order to receive services clients must be referred by a domestic violence agency or the police department. All services are free and are subsidized by state, and local funding and some United Way money.

CSU staff report that they do not routinely follow up with clients to determine whether they used referrals that are made.

Figure 9, a diagram of referrals in Seattle, illustrates referral density to the six secondary programs where we were able to obtain statistical data. Three of them are referred to over 10% of

the time. In comparison to the other sites, Seattle has a fairly high referral density, with many victims being referred to the domestic violence shelters.

Figure 9
Referral density in Seattle



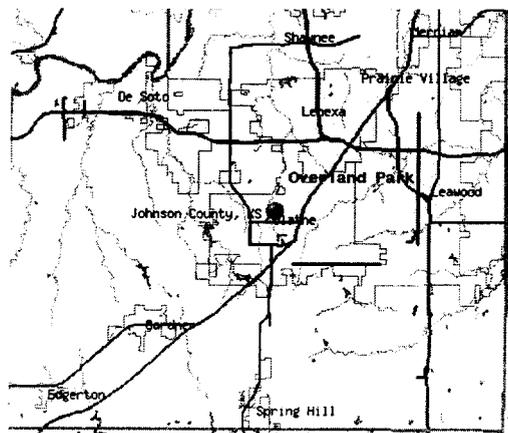
Synthesis. In Seattle, victims of felony violence have access to the full service assistance program, which includes access to counseling services and practical assistance, while misdemeanor victims are not contacted by the primary program. Female victims of violence are likely to receive offers of assistance soon after the crime.

Although Seattle victims of felony offenses have services readily available, this is less true for victims of felony property crimes or misdemeanors. Also, victims in some suburban communities do not receive outreach letters and phone calls and they must travel downtown into the city for assistance. In suburbs with sparse public transportation, this can be a lengthy trip for

those without cars. Moreover, while there are a wealth of services, navigating them can be difficult.

As Seattle continues to become more diverse, another concern raised by many service providers was the ability to reach large refugee and immigrant populations, as well the various other ethnic groups. In recent years, there have been many East African, Eastern European, and Asian immigrants coming to the city, and with that comes new cultural needs and in some cases barriers.

Johnson County Victim Assistance Network Suburban: Johnson County, Kansas



Active Outreach

Johnson County is a suburban county located in the northeastern corner of Kansas, bordering Missouri. Olathe holds the County seat and is located 20 miles southwest of downtown Kansas City. The most recent census conducted in 2000 lists the population at 451,086. The county is about 89 percent white, 3 percent African American, 3 percent Asian and 4 percent Latino.

In Johnson County, approximately 93 percent of people age 25 years and over are high school graduates or higher, compared to 81 percent for the state. The number of people who have obtained a bachelors degree or higher is about 41 percent in the County, a rate that is twice as

high as the state rate. It is estimated that 4 percent of the total population lives below the poverty line, and 5 percent of children do so. Statewide, the rates are much higher at 11 percent for the total population and 15 percent of children living below the poverty line. The median family income is approximately \$60,000 for Johnson County, compared to \$36,500 for the state.

Based on federal Uniform Crime Reporting statistics, the crime rate in the state of Kansas is double that of the County rate, with the state experiencing about 44 crimes per 1,000 people and Johnson County only 22.

In 2000, the State of Ohio received a total award of \$3,786,000 from the Victims of Crime Act Victim Assistance Grant Program and funded 44 service providers. According to the State VOCA administrator, funding is dispersed through review of applications. A three member review committee consists of a representative from the US Attorney's Office, a crime victim, and a representative from one of the underserved rural areas.

The group makes a recommendation to the Attorney General based on demonstrated need, and stability of the program with priority given to existing providers. Recently, there has been an effort to fund programs serving a growing Latino community and rural areas. In 2000, the state funded advocates to work specifically with the Latino population to address domestic violence and sexual assault.

The Primary Program: Johnson County Victim Assistance Unit.

The Johnson County District Attorney's Victim Assistance Unit is the primary victim aid resource in this suburban Kansas City county. Begun in 1978, the program has an annual operating budget of approximately \$335,000 per year derived from VOCA and VAWA federal funds as well as state and local dollars. Paid staff include 7 full-time workers and 4 part-time workers. The program relies heavily on volunteerism, with a current roster of 18 volunteers.

The program serves felony victims and victims of misdemeanor domestic violence. Its first contact with most victims is through letters notifying them of preliminary hearings, usually held about three weeks after arrest. The 28,000 letters annually are sent to felony and domestic violence victims in whose case an arrest is made by any law enforcement agency in Johnson County. Child victims and sexual assault victims receive immediate referrals to the program by police or medical staff.

Persons who report crimes where no arrest is made are supposed to be informed about the program verbally by police. To educate officers about services for victims, staff of the Victim Assistance Unit (VAU) conduct trainings of new officers at the local police academy and conduct periodic in-service trainings for veteran officers. VAU staff conduct similar trainings with prosecutors several times per year and each month speak to community groups.

Services of the VAU are centered around the court case. In addition to notification letters and phone calls, program staff accompany 7,000 victims annually to grand jury hearings. At the grand jury and later hearings, VAU caseworkers orient victims to the court process and help them to understand what decisions are being made by officials. As the case progresses to a resolution, they assess victims' need for restitution, prepare victim impact statements and communicate victims' wishes to prosecutors.

The VAU helps with some practical needs as well. Victims of violent crimes are given assistance filing for state compensation. Domestic violence victims judged to be in serious danger are provided with pendant alarms or cell phones to contact the police if they are accosted by their abuser on the street.

The VAU is able to accommodate many victims with special needs. Their offices are handicapped-accessible and two staff members are trained in sign language to communicate with

hearing-impaired victims. The program is able to accommodate Johnson County's growing Spanish-speaking population by calling on the services of Spanish-speaking staff in court administration or a Spanish-speaking assistant district attorney. The VAU also produces some of its forms in Spanish.

Referrals. The VAU does not provide counseling services. One hundred and fifty victims each year in need of mental health services are referred to either Johnson County Mental Health or to a private therapist. Johnson County Mental Health provides both in-patient and out-patient assistance to persons with psychological needs. It is a part of the county government, and receives both state and county funding. Services to victims are administered on a sliding scale basis. As with other mental health clinics we interviewed, only a small fraction of its caseload consists of crime victims.

Sexual assault victims in need of counseling are referred to MOCSA. With a five-county catchment area, MOSCA aids 8,000 crime victims each year. Its principal services are crisis intervention and ongoing support groups for adult and child victims of sexual assault. With funding from VAWA, most services are free, but long-term counseling clients are asked to pay on a sliding scale basis. Since MOSCA's primary referral sources are hospitals and the police, most of its clientele is reached quickly after the crime.

The VAU refers 300 women each year to Safe Home, a local shelter for battered women. Safe Home maintains a shelter that houses 260 women and children annually. It operates counseling programs that assist over 300 victims each year. It intercedes on behalf of its clients with the courts, housing agencies, and welfare offices. Clients are drawn from a three-county area. Services are free, subsidized by VAWA, state and local government funds, and United

Way donations. The Salvation Army also runs a shelter for domestic violence victims as well. Shelter clients are also eligible for counseling, and must pay a \$75 maintenance fee upon entry.

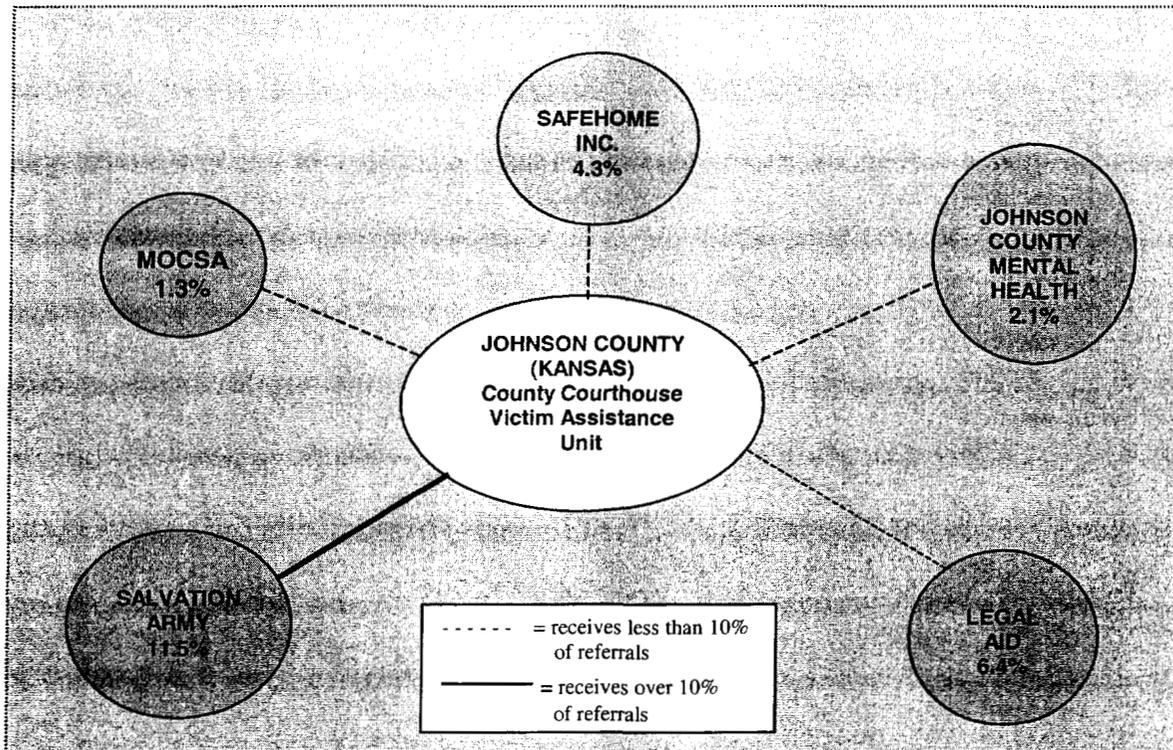
Four hundred seventy victims in need of legal assistance are referred to the local Legal Aid Society. The Society provides legal advice and representation free of charge, but only to persons who are indigent. It estimates its victim clientele at 2,500 per year, drawn from a six-county area. Most of its victim caseload consists of civil legal assistance provided to victims of domestic violence, funded with VAWA dollars.

Victims in need of practical assistance are referred to Catholic Community Services or the Salvation Army for housing, help with paying rent or utility bills, food or clothing. Most services provided by each are free, although the Salvation Army may require clients to attend mandatory alcohol or drug treatment programs.

The VAU reports that it does not routinely follow up with clients to determine whether they used referrals that were made.

Figure 10 illustrates the number of cases referred to five agencies where we were able to obtain statistical data. Only one, the Salvation Army, which provides primarily concrete services and practical assistance to crime victims, is referred to over 10% of the time.

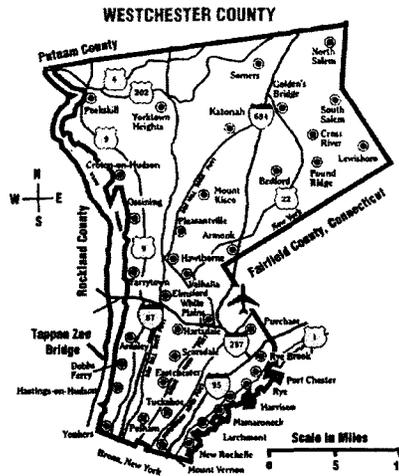
Figure 10
Referral density in Johnson County



Synthesis. Johnson County’s network is strongest for domestic violence victims and victims of sexual assault. Victims of sexual and/or domestic violence seem likely to be reached quickly after the crime and offered assistance. Other victims of felony crimes receive offers of services if an arrest is made, but typically after several weeks have elapsed. Basic assistance for issues arising from the court case is offered by the VAU, while victims with counseling needs or practical assistance have several referral options.

The most serious shortcoming of the network seems to be low awareness of services since there is no systematic way to reach persons in cases where no arrest is made or misdemeanor victims (except domestic violence). Other service providers mentioned lengthy travel times to services as a problem since most services cover multiple counties where public transportation is sparse.

Westchester Victim Assistance Network Suburban: Westchester County, New York



Passive Outreach

Westchester is a large suburban county located just north of New York City, bordered on the east by Fairfield County, Connecticut and on the west by Rockland County, New York. The most recent census conducted in 2000 lists the population at 923,459. The county is about 64 percent white, 14 percent African American, 5 percent Asian and 16 percent Latino.

Roughly 81 percent of people age 25 years and over are high school graduates or higher while statewide, the percentage is 75 percent. In Westchester County the number of people who have obtained a bachelors degree or higher is about 35 percent compared to 23 percent statewide. There are over 25 colleges and universities in the area and all of the major schools located in New York City are accessible by train.

In Westchester, it is estimated that only 9 percent of the people live below the poverty line and 15 percent of children. The median family income is around \$55,000, an amount that is about \$20,000 more than the state median. Statewide, the percentage of people and children living below the federal poverty level are noticeably higher than the county levels.

Many residents of lower Westchester, in particular, commute to New York City as well as to Southern Connecticut. From lower Westchester, commuters often take a 25-30 minute ride on Metro-North railroad into Manhattan. By comparison, from the northernmost points in Westchester, which include Cold Spring and Patterson, it takes closer to two hours to reach midtown Manhattan by train.

Westchester County is centrally located between New York City, New Jersey and Connecticut and therefore, many large global corporations maintain their headquarters there. IBM, PepsiCo, Texaco, and Starwood Hotels employ a combined, 7,800 personnel.

Based on federal Uniform Crime Reporting statistics, the crime rate in Westchester is 24 crimes per 1,000 people, a rate that is slightly lower than state rate of 31 per 1,000.

In 2000, the State of New York received a total award of \$23,217,000 from the Victims of Crime Act Victim Assistance Grant Program and funded over 200 agencies. According to the State VOCA administrator, funding is dispersed through a need-based review of programs and an evaluation of reported crime statistics in each County. A five-member board reviews applications and makes a final decision based on the recommendations of a twenty-five member advisory council and on how well programs demonstrate need, stability, and delivery of services. The Board mandates that every County have at least one program and in addition, that they should have a domestic violence program, a sexual assault program, and a comprehensive program. In recent years, there has been a priority on developing child advocacy centers and on reaching particular ethnic populations. The administrator further noted that in 2000, 60 percent of the funding went to domestic violence programs.

The Primary Program: Westchester County Victim Assistance Services.

Victim Assistance Services (VAS), a private non-profit, associated with the Westchester Community Opportunity Program, is the primary victim aid resource in this suburban New York

county. Begun in 1981, the program has an annual operating budget of approximately \$1,000,000 per year derived from VOCA and VAWA federal funds as well as state and local dollars. Paid staff includes 18 full-time workers and 3 part-time workers.

The program serves all victims, including victims of misdemeanor and felony offenses. Its first contact with most victims is initially through referrals made by local law enforcement and criminal justice agencies and through other service providers like the Department of Social Services or Child Protective Services. Many sexual assault and domestic violence victims are referred by any of the 14 area hospitals.

All forty-four police departments are supposed to forward any domestic violence reports to the District Attorney's Office and many often send them directly to My Sister's Place, (a local shelter) and in Southern Westchester to the VAS office in Mount Vernon. VAS receives these reports at the end of every month and typically attempts to contact victims by phone. In addition, staff members sometimes go directly to the Yonkers, Mount Vernon, Peekskill and White Plains police departments to gather names and addresses of victims. The program then sends out letters to all victims, including victims of lesser crimes such as petit larceny, to let them know about VAS. The District Attorney's office sends out notification letters concerning court services and the status of individual cases.

Persons who report crimes where no arrest is made are supposed to be informed about the program verbally by police and are given brochures and cards with VAS contact information. VAS has also mounted an aggressive publicity campaign with public service announcement in movie theaters, played during the previews, and posters featuring the singer Mary J. Blige. To educate officers about services for victims, VAS staff conduct trainings of new officers at the local police academy twice a year and conducts in-service trainings for veteran officers at local

departments 25-30 times a year. With a portion of the grant money VAS receives, it is able to send two staff members to speak with community groups and schools approximately 200 times per year.

In addition to letters and phone calls, program staff assist with preparing victim impact statements and are available to accompany victims to court. In 1999, VAS caseworkers helped orient victims to the court process in 580 court appearances.

For victims in need of counseling VAS provides a range of counseling services including individual therapy by trained counselors, and support groups for those who have experienced rape, incest or loss of a loved one through homicide. In 1999, VAS saw three hundred and fifty clients for individual therapy and five hundred people participated in support groups. They also operate a 24-hour crisis hotline that responded to 160 calls in 1999. Promoted as a rape crisis line, most of the calls are from, but not limited to sexual assault victims. In 2000, VAS did outreach to over 1500 victims.

Collaborating with local hospitals and the Visiting Nurses Association, VAS provides care and medical services to victims of sexual assault through the Sexual Assault Nurses Examiners (SANE) program. The program was developed by VAS and is facilitated by the SANE coordinator, an employee of VAS. Though the nurses are not employees of VAS, they are trained through the SANE program and all of the exams are paid for by VAS. In 1999, VAS provided 68 medical examinations through the SANE program, and nurses testified in five Grand Jury hearings and two criminal court proceedings.

VAS helps with a variety of practical needs as well. Victims of violent crimes are given assistance filing for state compensation. Victims of burglaries or robberies are assisted with document replacement and security checks, and in 1999, VAS replaced locks in 48 apartments

and homes and arranged for emergency food or money in more than 90 cases. VAS assists in relocating domestic violence victims judged to be in serious danger, and for those who remain in their homes, safety planning is provided. A program called the Hope Chest helps women gather important documents and items in the event that she may have to flee suddenly.

VAS is able to accommodate many victims with special needs. Their offices are handicapped-accessible and one staff member is fluent in sign language and able to communicate with hearing-impaired victims. The program is also able to accommodate visually impaired clients with some materials in Braille.

Referrals. Though VAS provides on-site counseling, they also refer victims to the Mental Health Association (MHA). Their staff of psychiatrists, psychologists, social workers and counselors provide family abuse services to women, children and men. A private non-profit, MHA receives state and local dollars as well as private funding from companies like Philip Morris and Kraft. AWARE, a support group that operates for women in abusive relationships, is available on a sliding scale basis or paid for by insurance, Medicaid or Medicare. One of the few places that offers services for male batterers, MHA runs a program called the Workshop for Anti-Violence Education (WAVE), with approximately 180 men attending each year. Many of the men are mandated by criminal court to attend and pay a \$25 fee.

Sexual assault victims in need of counseling are referred to Westchester Jewish Community Services (WJCS) an organization that provides comprehensive treatment to victims of domestic violence and sexual assault. It also has the only incest treatment center in the County and therefore specializes in long-term counseling for victims of incest. Serving primarily Westchester County, WJCS aids around 125 crime victims each year. Using a team and family-focused approach, its principal services are individual and group counseling and ongoing support

groups for adult and child victims of sexual assault. They also provide psychiatric counseling and are able to prescribe medication. With funding from the state, they provide free long-term counseling to adult survivors of sexual abuse. Most services are free, but for those that are not, clients are asked to pay through insurance or on a sliding scale basis. Since WJCS's primary referral source is Victim Assistance Services and they deal mainly with child sexual abuse and domestic violence victims, most of its clientele is reached within 2-3 months of the crime.

VAS refers around 100 women each year to one of three different shelters: My Sister's Place, Putnam Women's Resource Center and the Northern Westchester Shelter.

My Sister's Place, a local shelter for battered women provides direct services to approximately 2,000 people each year. They maintain two emergency shelters and operate counseling programs and support groups. In partnership with the Yonkers Police Department, they have established a special domestic violence unit. Staff members also participate in trainings and educational programs for middle school and high school students as well as for other social service organizations. Clients are drawn from the Westchester County area and from a small section of the Bronx. Services are free, subsidized by VAWA, state and local government funds, and private donations.

The Northern Westchester Shelter also runs a shelter for domestic violence victims providing shelter for both residents and non-residents of the county. In 2000, the Northern Westchester provided shelter and non-residential services to 327 women and children. Clients are also eligible for counseling, support groups and access to the VAWA-funded three-person legal department. Services are free, subsidized by VAWA, state and local government funds, and private donations made by Philip Morris, Chase, and Citibank.

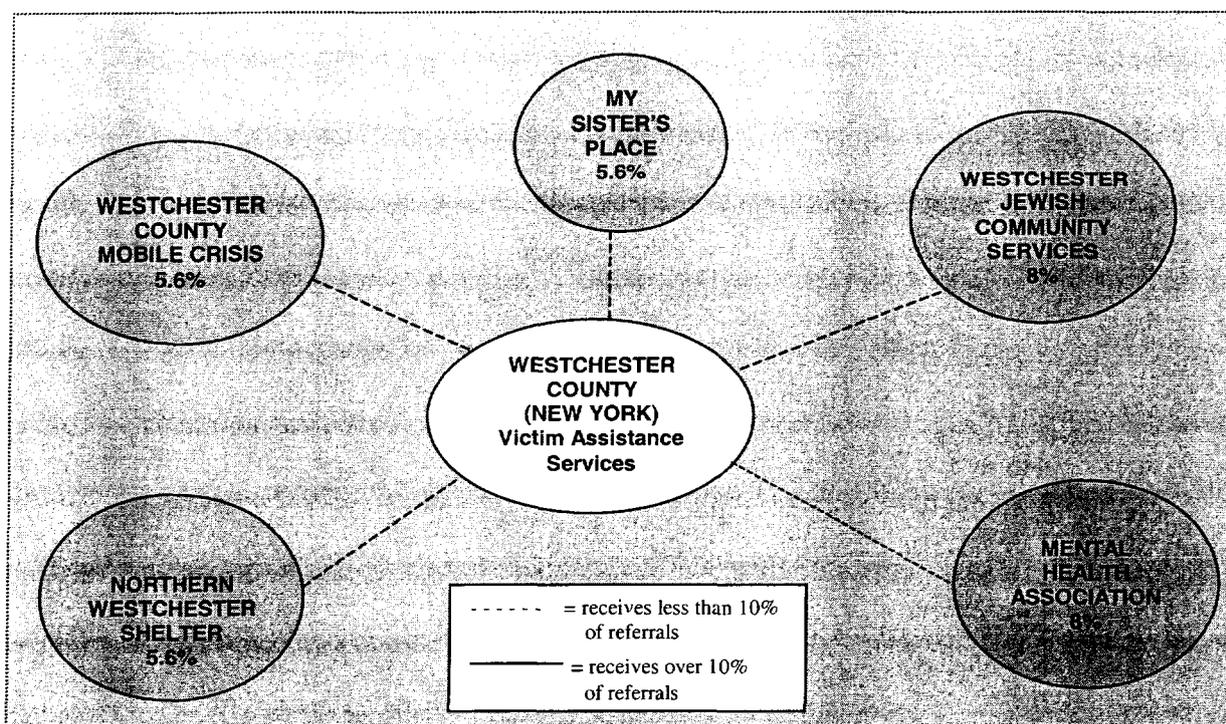
About one hundred victims in need of legal assistance are referred to the local Legal Aid Society, the Pace Women's Justice Center, or Westchester-Putnam Legal. Founded in 1991, the Pace Women's Justice Center, is staffed by eight attorneys, Pace law students and faculty, and advocates who work to give legal support to battered women, the elderly, women with low income, and victims of sexual assault. The center operates a telephone counseling hotline, legal workshops, and seminars. Each year, they provide representation to hundreds of clients in the Westchester area with an emphasis on undeserved populations.

Victims in need of practical assistance are referred to the Community Action Program (CAP), the Bridge Fund, or the Department of Social Services for housing, help with paying rent or utility bills, food or clothing. Most services provided by each agency are free.

There are at least three multidisciplinary groups for service providers that meet on a monthly basis; the Westchester Task Force on Child Abuse and Neglect, the Coalition of Family Violence Agencies and Stand Together, a group comprised of domestic violence providers. VAS belongs to all of these groups and participates along with over fifty other agencies in coordinating services, programming events, addressing policies and planning curriculum for school based trainings.

VAS reports that it does routinely follow up with clients to determine whether they used referrals that were made, particularly when dealing with clients in need of mental health services.

Figure 11
Referral density in Westchester



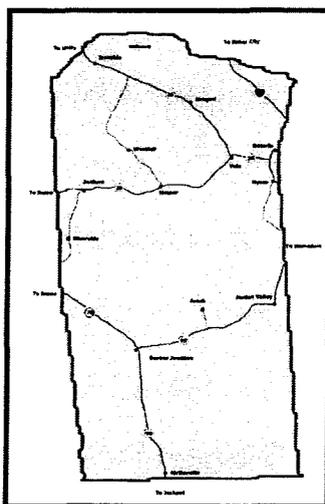
Overall, Westchester County VAS refers to over twenty different agencies. According to the Director, VAS counselors will give victims three different options for the same type of referral. Out of these twenty, we obtained statistical data on five, and of those, none were referred to over 10% of the time. In Figure 11, we note that the highest referral rates were to mental health services.

Synthesis. Victims in Westchester County have access to a notably broad range of programs and a network that is relatively strong in most areas. Female victims of violence seem likely to be reached quickly after the crime and offered assistance through the many collaborations with medical professionals and law enforcement. Other victims of felony and misdemeanor crimes receive offers of services even if no arrest is made, but it appears that outreach in the form of letters is not systematic. VAS offers basic assistance for issues arising

from the court case, practical assistance, and can address a victim's counseling needs with their own staff or through several referral options.

The most serious shortcoming of the network seems to be geographical access to services, and for people in northern Westchester, lengthy travel times to providers. Many programs are located in lower Westchester, not in the northern part of the County where public transportation is sparse. VAS staff also mentioned that though there are a number of domestic violence shelters in the area, many women are still being turned away because most shelters are at capacity and there is waiting list. They also expressed a need for more specialized shelters serving, the disabled, mentally ill, elderly, and single women with older children.

Malheur County Victim Assistance Network
Rural Site: Malheur County, Oregon



Active Outreach

Malheur is a small rural county located in Eastern Oregon. The most recent census conducted in 2000 lists the population at 31,615. The state's second largest county, Malheur forms the state boundary with Idaho. Vale holds the county seat while Ontario is the largest town

in the county. The county is about 69 percent white, 27 percent Latino, 2 percent Asian, and 1 percent African-American.

There are no major universities or institutions of higher learning in Malheur and the level of educational attainment reflects that. Roughly 70 percent of people age 25 years and over are high school graduates or higher while statewide the percentage is 82 percent. In Malheur County the number of people who have obtained a bachelors degree or higher is 13 percent compared to 21 percent statewide.

In Malheur County, it is estimated that about 20 percent of the people live below the poverty line, and 26 percent of children do so. The median family income is around \$28,000. Statewide, the percentage of people and children living below the federal poverty level are lower than the county averages, with 12 percent of the state population living below the poverty level and 16 percent of children.

Malheur County is only 50 miles from Boise, Idaho. It is 94 percent rangeland, two-thirds of which is controlled by the Federal Bureau of Land Management. Irrigated fields that are the center of intensive and diversified farming characterize the county's northeastern corner, also known as the Western Treasure Valley.

In recent years, Malheur's demographics have been shifting, with many migrant farm workers coming from Mexico and settling permanently in the area. The most common occupations are in factory work or farming with many residents working at Amalgamated Sugar, Heinz Frozen Products factory and in a mill.

Based on federal Uniform Crime Reporting statistics, the crime rate in Malheur County is about 38 crimes per thousand compared to 49 per thousand people for the state.

In 2000, the State of Oregon received a total award of \$4,600,000 from the Victims of Crime Act Victim Assistance Grant Program. According to the State VOCA administrator, funding is dispersed in two ways. An advisory group consisting of state and local funders, human service professionals, and District Attorneys, makes a final recommendation on funding to the state administrator. In the last year, the state administrator established regional committees comprised of local service providers and community leaders, as well as one staff member from the state and a member of the advisory board. These regional committees review applications and score them across categories ranging from budget to performance outcome measures. Once the committee has scored all programs from their region, the advisory board evaluates the programs with the highest scores.

Basic awards of at least \$10,000 are given annually to programs that have demonstrated the ability to receive a matching competitive grant for a period of three years and that have met prescribed standards. A second type of award is based on a competitive application and is awarded for a two-year period. Recently, because Oregon has access to a large amount of state funding, they have excluded victim assistance programs located in District Attorney's offices and have funded them non-competitively with state money.

Last year, roughly 29 percent of the competitive grants went to domestic violence initiatives. In total, 195 agencies received funding from VOCA. The Primary Program: Malheur County Victim Assistance Network. The primary victim assistance program in Malheur County is the Malheur County Victim/Witness Assistance Program (VWA). Begun in 1988, the program is located in Vale, the county seat, in the district attorney's office. The office is currently run by 2 full-time staff members and 12 volunteers. The program's annual budget of approximately

\$100,000 is derived from county funds and federal VOCA and VAWA dollars distributed through the state of Oregon.

The program is notified about felony victims 2 to 3 days before their cases go to grand jury. They are unaware of misdemeanor cases until the case is entered into a central database. The database is compiled by prosecutors and the police department, and contains a list of victims for all arrests. Victims with no court case are included as well because the staff members use the prosecutor's database to contact all victims. On average, it takes them one to two days to make contact with felony victims and about one week for misdemeanor victims. For domestic violence and sexual assault cases, the two advocates are able to call the victim almost immediately if the information is available through the database. The police department also hands out brochures to victims and occasionally refers them directly to the program.

Caseworkers prepare victims for grand jury testimony and trial, notify victims of court dates and outcomes, provide information about the court process, provide court advocates, assist with obtaining restraining orders, and assist in preparing victim impact statements. They are also equipped to provide childcare and document replacement.

Caseworkers also assist in assessing financial losses and helping victims seek restitution through the criminal proceeding or compensation from the state. Outreach efforts by the program include a police academy training twice a year and monthly speaking engagements with community groups such as high schools and elderly organizations.

Program staff have not had to deal with visually-impaired or hearing-impaired victims, but they do have amplified microphones available in the courthouse for the hard of hearing and are confident that they could locate someone for assistance if the occasion presented itself. The victim assistance offices and the courthouse in Vale are wheelchair-accessible. Because the area

is at times almost 40 percent Latino, a caseworker and the receptionist are both bilingual and all forms are in available in Spanish and English.

Referrals. Currently, the main advocate at the victim/witness program also chairs a fairly comprehensive multi-disciplinary group. The group, focusing on child sexual and physical abuse victims, meets twice a month and is intended to give all of the local agencies a chance to discuss cases and ensure that victims are receiving the appropriate services and referrals. Just about every major agency in Malheur County is involved in the group, including the district attorney's office, three major police departments, the state police, local government agencies, domestic violence shelters, school counselors, and mental health organizations. Similar to the group mentioned above, excluding school counselors, is a family violence team that meets twice a month and focuses on discussing domestic violence cases. These groups serve not only to coordinate services but also to act as a safety net for victims who are not yet identified in the prosecutor's database, or who have not entered the criminal justice system.

Program staff estimate that they refer an average of sixteen victims per month to Project DOVE in Ontario. DOVE serves victims of domestic violence, rape, and child abuse in two counties. Referrals come primarily from law enforcement, hospitals, local government agencies, and mental health centers. Services include a domestic violence shelter, group and individual counseling, a rape crisis hotline, prevention programs in schools, sexual assault examinations, emergency transportation, court advocacy, and civil legal assistance through a private attorney. Through partnerships with the community, DOVE recently opened a secondhand store called the "Unique Boutique." Revenues generated support DOVE programs, and the store has collaborated with AFS to run Jobs Plus, a job training program. In addition, women in drug court who have been identified as victims of violence are sometimes mandated to do community service at the

store. With a staff of 23 employees, 11 full-time and 12 part-time, DOVE operates an innovative, comprehensive program that is both bicultural and bilingual. On average, contact with victims occurs within one week, in part because a DOVE staff member located in the Sheriff's office screens new arrests. All services are free to clients and DOVE's budget comes from grants from VOCA and VAWA, in addition to state and local government and private funds.

The Victim/Witness Assistance Program refers approximately 12 victims per month to Lifeways Behavioral Health Center. Lifeways serves people with developmental disabilities, substance abuse problems, and general mental health needs in three counties, including two in Idaho. They provide drug treatment, case management, individual and group therapy, and counseling for parents and children. For domestic violence victims Lifeways operates an intervention program that includes the treatment of batterers. There are no restrictions on victims served and patients pay on a sliding scale or through Medicaid and the Oregon State health plan. Most clients are referred by Services to Children and Families, Project DOVE, local schools and law enforcement. Lifeways relies on the police department to forward them reports in order to get in touch with victims, or they learn about victims in the multi-disciplinary meeting. They receive state funds but no federal VOCA or VAWA dollars. The Center specializes in brief therapy, refers victims in need of long term counseling to private doctors and clinics, and often refers back to Project DOVE.

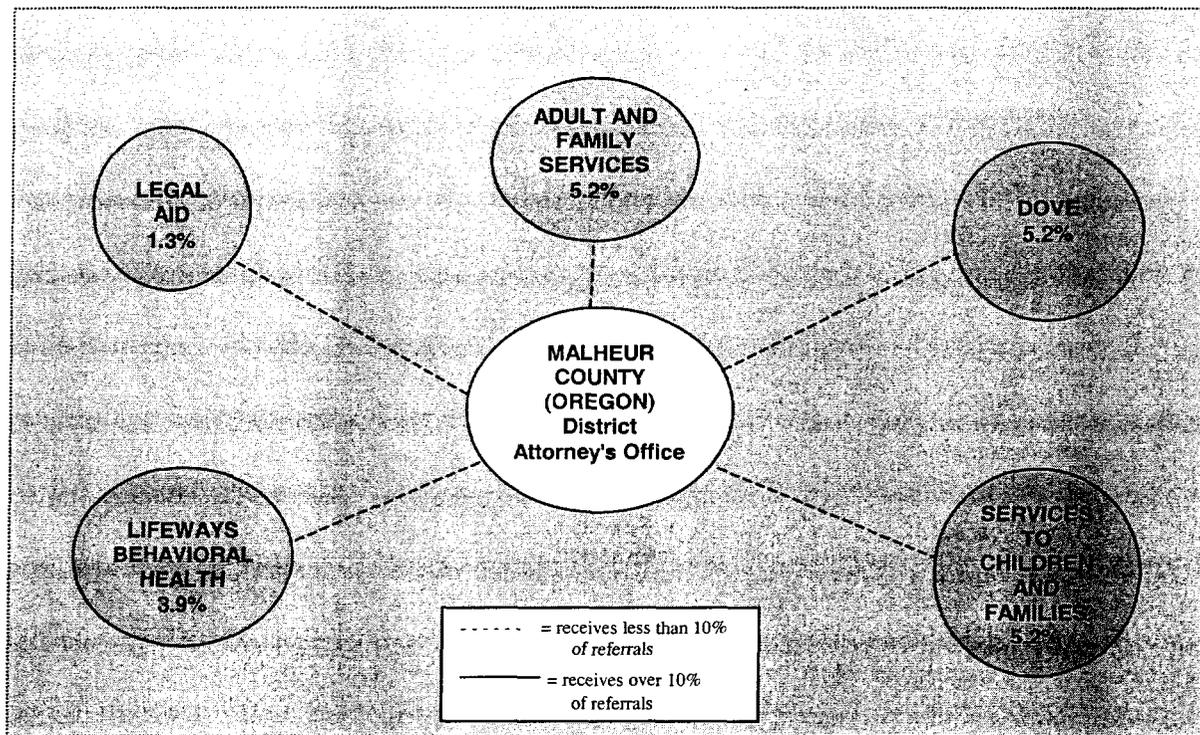
About 16 victims per month are referred to Adult and Family Services, a state agency that serves low-income adults and families. They serve approximately 70 victims each year, many of them victims of domestic violence. There are no restrictions on victims served and AFS provides daycare, safety planning, food stamps, referrals and linkages to other agencies, case management and assistance in finding housing or shelter. Crime victims reach AFS most

frequently through referrals by the domestic violence advocate at the Sheriff's office, from the District Attorney's office, from Project DOVE or through word of mouth. For victims who are reached by the Sheriff's office, AFS may see them within 8 hours of the incident. The domestic violence advocate at AFS defined their referral system as "a pass with a catch" noting that they follow up with referrals to make sure that the victim has connected with services.

Victims in need of legal services can access the Oregon Law Center, an organization that offers a limited amount of services because of a lack of resources and expertise. Nonetheless, the Center holds divorce classes every six weeks and often takes divorce cases with abuse implications. The organization is staffed with two attorneys and currently serves over three counties. Because resources are scarce, they accept one in five eligible cases. All services are free and are subsidized by state, and private funds.

VWA staff report that they do not routinely follow up with clients to determine whether they used referrals that are made. In Figure 12. we see that in Malheur County the referral rates average less than 10% for the five agencies for which we obtained data.

Figure 12
Referral density in Malheur County

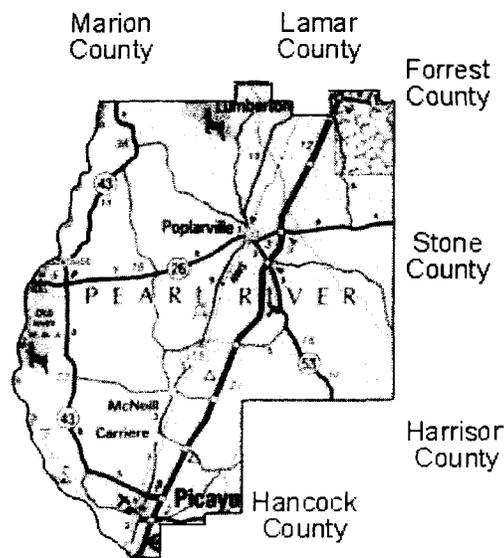


Synthesis. For a rural area, Malheur County has a good range of services available to victims and the well organized multi-disciplinary groups seem to facilitate a lot of collaboration. Service providers were confident in the level of synchronization that occurs and mentioned that because of the good coordination, police officers are well trained and judges are sensitive to victim issues. There are however, some significant shortcomings in the system involving hospital resources such as psychiatric help, general mental health services, legal aid, and shelter space. The director of Lifeways noted that many Latino residents view the Center as an Anglo service provider and are sometimes reluctant to ask for help. Though they have some Spanish-speaking advocates, they expressed the need for greater outreach efforts in the growing Mexican community. In addition, other service providers affirmed that undocumented victims, especially women and children, are underserved and have a difficult time getting medical help.

Second, geography poses a barrier to services for some victims, especially in rural areas. The county covers a lot of territory, and the travel time from some parts of the county to Ontario, where the main secondary service providers reside, can be over an hour. Public transportation is non-existent, making private automobiles the sole source of getting to assistance programs.

A third problem seems to be a lack of affordable legal services. Though the Oregon Law Center offers services free of charge they are admittedly understaffed and under funded and cannot fully meet the needs of the County.

**Pearl River Basin Victim Assistance Network
Rural Site: Pearl River County, Mississippi**



Passive Outreach

Pearl River is a small rural county located in Southern Mississippi. The most recent census conducted in 2000 lists the population at 48,621. Pearl River County was named for the Pearl River, which forms its western boundary and the State boundary with Louisiana. Poplarville holds the county seat while Picayune is the largest town in the county with a population of around 13,000. The county is about 86 percent white and 12 percent African American. There are no major universities or institutions of higher learning in Pearl River and

the level of educational attainment reflects that. Roughly 68 percent of people age 25 years and over are high school graduates or higher while statewide the percentage drops to 64 percent. In Pearl River County the number of people who have obtained a bachelors degree or higher is only 11 percent compared to 15 percent statewide.

In Pearl River County it is estimated that about 18 percent of the people live below the poverty line as do 25 percent of children. The median family income is around \$27,000. Throughout the whole United States, Mississippi is, and has been for many years, one of the poorest states in the nation. Statewide, the percentage of people and children living below the federal poverty level are practically identical to the numbers in Pearl River County. These rates are considerably higher than the national averages.

Though still quite isolated, Pearl River County is only 50 miles from the Gulf Coast of Mississippi and a burgeoning gaming and gambling industry in Biloxi and Gulfport. Recently, NASA built the Stennis Space Center, just southeast of Picayune, an agency that employs over 3,600 personnel.

Life moves at a relaxed pace in the towns of Pearl River County, and the area has a distinctly southern feel. Heavily wooded and dotted with farms, the landscape supports timber and agricultural industries. The most common occupations are in retail while in 1997 there were about 609 farms in the county.

The southern and western parts of the county have become more attractive to development because of its proximity to the coast and to New Orleans. As people retire and seek a mild climate and quieter life, a spillover from the Gulf of Mexico and New Orleans is occurring.

Based on federal Uniform Crime Reporting statistics, the crime rate in Pearl River is about 20 crimes per 1,000 people, a rate that is half the state rate of 40 per thousand.

In 1999, the State of Mississippi received a total award of \$2,620,400 from the Victims of Crime Act Victim Assistance Grant Program. According to the State VOCA administrator, funding is dispersed based on individual review of each service provider.

The grants are determined through an evaluation process and applications are rated and scored. Programs that score within a certain range are typically awarded grants. Recently, special emphasis has been put on survivors of homicide victims because they are a relatively underserved population. In total, 33 agencies received funding from VOCA.

The Primary Program: Pearl River Basin Victim Assistance Network. The primary victim assistance program in Pearl River County is the Pearl River Basin Victim Assistance Program. Begun in 1989, the program is located in a district attorney's office that serves a five county area. Pearl River is the largest of the five counties and so the program stations one of its two staff members in Poplarville, the county seat, while the other handles the other four counties. The program's annual budget of approximately \$150,000 is derived from county funds and VOCA funds distributed through the state of Mississippi.

The program establishes contact with felony victims at the point that their cases are presented to a grand jury. Outreach is in the form of brochures, phone calls, and/or face-to-face contact when victims come to testify before a grand jury. Burglary victims – who usually are not required to testify before the grand jury – receive letters, while violent crime victims are contacted personally. Sexual assault victims may be referred by the police shortly after arrest, but such referrals were reported to be unreliable by victim case workers.

Unless the defendant is in custody, grand jury hearings typically take place 1-2 months after an arrest is made. Thus, the great majority of felony victims do not receive assistance for a long time after the crime. Victims of misdemeanors and victims of crimes where no arrest is made do not have any structured way to receive assistance.

Case workers prepare victims for grand jury testimony and trial, notify victims of court dates and outcomes, provide information about the court process, and assist in preparing victim impact statements. With a small caseload, they are able to work closely with prosecutors to advise victims of pleas that are being discussed and to ascertain victims' desired outcomes and see that these are communicated to the court. Caseworkers also assist in assessing financial losses and helping victims seek restitution through the criminal proceeding or compensation from the state. After cases have been concluded, caseworkers keep victims informed of parole decisions.

Being a small program, the program has no specialized staff for dealing with the needs of victims with disabilities. However, the courthouse in Poplarville where the program has an office is wheelchair-accessible. Spanish-speaking police officers help out with Latino victims whose English is poor. The need for translating other languages reportedly has not arisen. Similarly, program staff have not had to deal with visually-impaired or hearing-impaired victims, but they are confident that they could locate someone for assistance if the occasion presented itself.

Referrals. Victims who need psychological counseling or relocation assistance are referred to other social service agencies. Program staff report that they do not follow up to see if victims used the referral or how they fared with the new service provider.

All victims of violent crimes are given a brochure describing the services of the Gulf Coast Mental Health Center, a private mental health facility located in Gulfport. GCMH offers counseling, psychotherapy, and substance abuse programs to roughly 5,000 individuals each year in a four-county area. Fees are on a sliding scale, so services are affordable to low income persons. The Center director estimated that crime victims constituted less than 1% of their caseload. Its victim referrals come primarily from law enforcement agencies, the Gulf Coast Women's Center, and the District Attorney's Victim Assistance Program. The Center's main victim clientele are sexual assault victims. Specially trained staff maintain a sexual abuse treatment program including a 24-hour crisis service. The Center refers a handful of victims (one per month each) to other services including a residential mental health treatment program at Memorial Hospital, Social Security Disability, Medicaid, and the Red Cross.

The District Attorney's Victim Assistance Program also refers a small number of victims in need of counseling to the Pine Grove Outpatient Counseling Center in Picayune and to a private social worker. However, for both of these providers fees are fixed, restricting access to services to victims with the means to pay. All together, staff of the District Attorney's Victim Assistance Program estimate that they refer about 7 victims per month to counseling services.

VAP staff estimate that they refer an average of one victim per month to the Gulf Coast Women's Center for Nonviolence, Inc. in Biloxi. GCWCN serves victims of domestic violence, rape, child abuse and families of homicide victims in a six-county area. Referrals come primarily from law enforcement, hospitals, courts, and clergy.

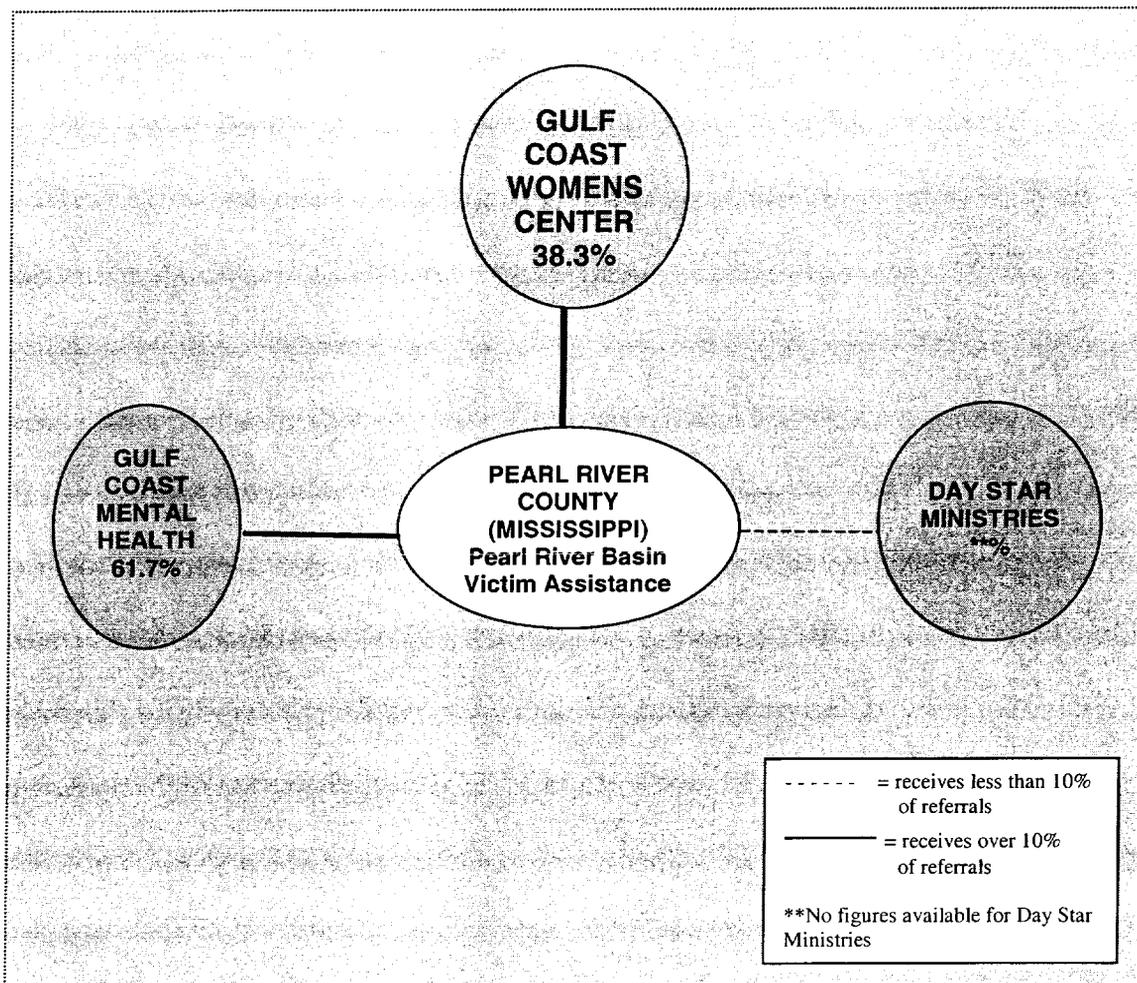
Services include a domestic violence shelter, group and individual counseling, a rape crisis hotline, prevention programs in schools, and court advocacy. All services are free to clients and the Center's \$1.3 annual budget come from grants from VOCA and VAWA, in

addition to state and local government and private funds. The Center refers about 20 victims per month to medical services at Coastal Family health; 20 victims per month to housing assistance at the Biloxi Housing Authority; 15 victims per month to civil legal assistance; 10 victims per month for employment assistance; and 10 victims per month to psychiatric services.

Another referral is the newly built Day Star Ministries, a battered women's shelter located in Poplarville. The shelter was constructed in April of 2001 and serves women and children. The facility has four efficiency units where women can stay for up to six months and four bunk beds for short-term shelter. Serving all of Pearl River County, Day Star is the only battered women's shelter in the area. They provide on site counseling, food, clothing, and transportation and offer life skills training along with job placement. The services are free and the agency is funded entirely by private donations. The director further noted that the shelter and its services are run by nominal Christians and that the program is Christ-based. Because it is relatively new, there seem to be some problems with visibility.

Figure 13 illustrates the referral rates for the three programs available in Pearl River County. The figure indicates that Pearl River has a strikingly high referral rate. However, in Pearl River, it is possible that victim assistance staff were unclear about what they considered a referral. Referrals include dissemination of a pamphlet alone, as well as a one on one consultation.

Figure 13
Referral density in Pearl River County



Synthesis. A rural county, Pearl River offers a limited number of services. There are significant deficits in the service delivery system. First of all, most victims are unlikely to receive services until long after the crime and others not at all. Victims of domestic/sexual violence seem to fare the best, with referrals made to the Gulf Coast Women's Center and the District Attorney's Victim Assistance Program. Victims of felonies may not be approached until weeks after the crime; victims of misdemeanors (other than domestic violence) or victims in cases where no arrest is made may not be approached at all.

Second, geography poses a barrier to services for some victims without transportation. The county covers a lot of territory, and the travel time from some parts of the county to Biloxi or Gulfport, where the main secondary service providers reside, can be over an hour. While domestic violence victims are told of the fairly comprehensive Women's Center in Biloxi, the distance from Pearl River County is significant. Public transportation is non-existent, making private automobiles the sole source of getting to assistance programs. The Gulf Coast Women's Center has made efforts to reduce this barrier by stationing a domestic violence counselor in Picayune one day per week. Both the Women's Center and the Victim Assistance Program make house calls to reach some clients who cannot get to their offices.

A third problem, noted by the director of the Gulf Coast Mental Health Center, is lack of coordination between service organizations. The county does have a coordinating council that includes law enforcement, department of social service, mental health, and victim service staff. However, according to Victim Assistance Program staff, law enforcement agencies do not refer victims of domestic/sexual violence as often as they should. VAP staff make relatively few referrals to other organizations and, when they do, they do not follow up to see if the victim reached the other service provider.

Comparing Service Networks Across Sites

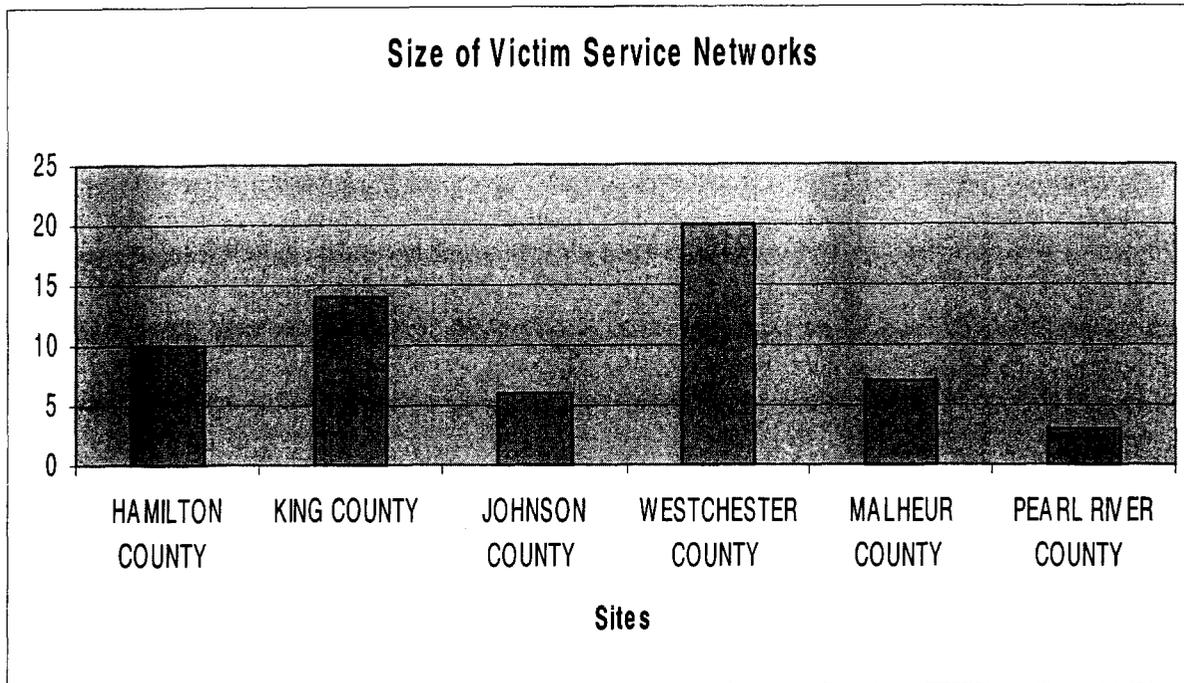
The sites are classified as *active* and *passive* primarily because of their outreach efforts. When comparing across sites, it is evident that some programs aggressively contact crime victims in a relatively short period of time, as is the case at Talbert House in Cincinnati where advocates make 2,300 outreach calls a year and routinely follow-up with victims to see if they made use of referrals. In Johnson County 28,000 letters are sent annually and caseworkers are heavily involved in guiding victims through the court system. In Malheur County the database shared by local criminal justice agencies allows the primary program to easily and quickly

identify and contact all victims. In contrast, the sites we have labeled as “passive” conduct limited outreach for a subset of victims. While the primary program in Seattle makes contact by phone or through a letter, they serve only felony victims of person-to-person crimes, leaving all other victims with no linkage. In Westchester County the primary program serves all victims but only sends out 50 letters a year, and does not currently have a systematic way of contacting victims. Most striking is Pearl River County, where the outreach efforts consist primarily of handing out pamphlets. Contact is often made months after the crime, and only with victims who have a case that reaches grand jury. There is no outreach to victims with cases that don’t reach grand jury.

All of the programs have relative strengths and weakness. Some have a wide range of services available as is the case in Westchester and Seattle. Other sites, like Pearl River, have less than 5 programs available. Another distinction concerns ease of access to the programs. All of the primary programs cited that transportation can be difficult for victims who live in outlying areas. Talbert House in Cincinnati, for example, is accessible by public transportation for city residents but not for county residents who live outside the city limits. Rural locations were decidedly more problematic because distance to the few available programs may be great and public transportation is virtually non-existent.

*Aggregate level data*An analysis of services across the six sites reveals substantial differences in the size of the network of services for victims (see Figure 14).

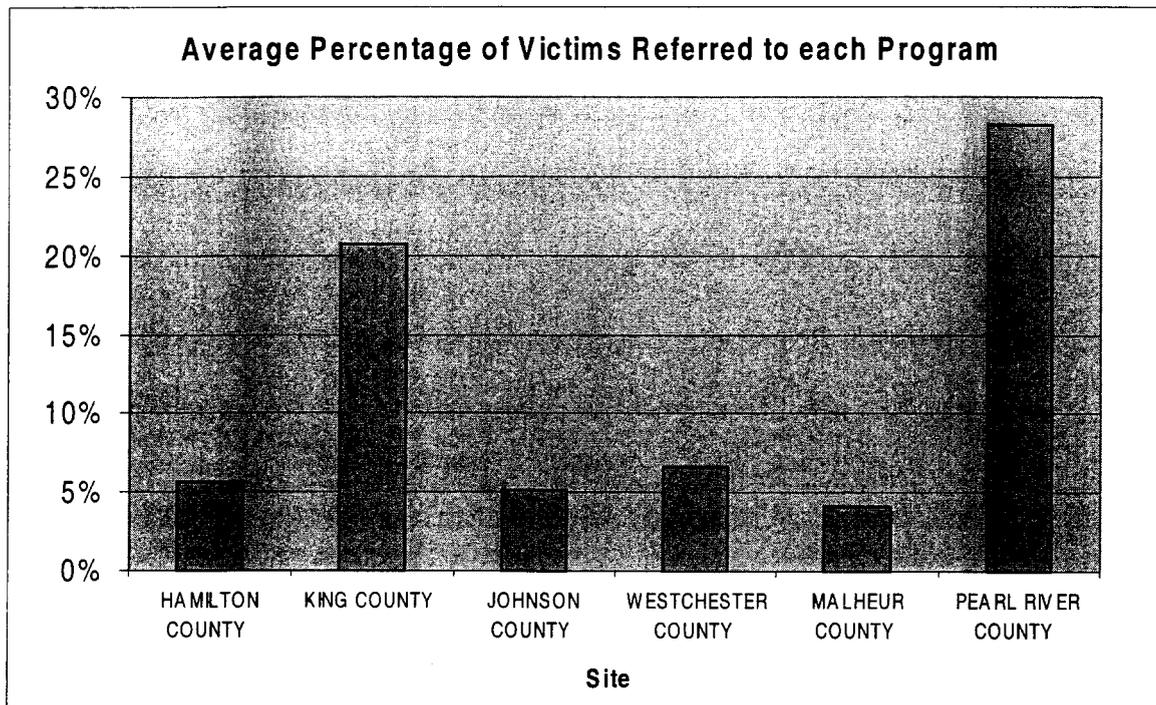
Figure 14: Cross-site comparison of victim service network sizes



The primary program in Westchester County named a total of 20 other programs available in the county. Seattle and Cincinnati, the two urban sites, each had over 10 programs with whom they worked. Pearl River had the fewest ancillary programs with just three. Across these six sites, there was no clear ordering of urban, suburban, and rural with respect to the number of organizations providing services to victims. The rural sites, however, tended to have fewer programs than other jurisdictions.

The greatest proportion of victims referred from the primary to other service programs was in Pearl River where, on average, half of all victims were referred to each program (see Figure 15). The primary programs in Seattle also referred a high proportion of victims (an average of one in five) to other programs. All the other primary programs referred under 10% of their clients to each other service organization in their county. Again, however, we are not sure that what is counted as a referral is comparable across sites.

Figure 15: Cross-site comparison of referral networks



Individual level data

Using our typology (urban/suburban/rural and active/ passive outreach), we used the survey data to compare outreach contacts, prosecutor referrals, and police referrals across sites. We first looked at the proportion of people who received outreach contacts from service programs. We would expect, of course, that more victims would be contacted in sites with proactive outreach programs. Our expectation was confirmed: logistic regression results displayed in Table 26 show a highly significant coefficient for type of outreach.

Table 26

Site characteristics and victim knowledge of/contact with service program

	LOGISTIC REGRESSION COEFFICIENTS FOR SITE CHARACTERISTICS		
	<i>Active/Passive Outreach</i>	<i>Site Population*</i>	
		<i>Urban</i>	<i>Suburban</i>
Respondent contacted by service program?	22.07***	0.46	1.33
Respondent got referral from prosecutor?	8.06**	0.41	0.04
Respondent got referral from police?	3.86**	3.06	2.13
Respondent knew of service program in area?	52.44***	0.00	8.76***

* Dummy Variable for rural site omitted to avoid over determination.

** p < .05

*** p < .01

Twenty-eight percent of respondents in sites with active outreach reported receiving outreach call or letters, compared to 12% in sites with passive outreach practices. These results validate our classification of sites into active and passive outreach. Coefficients for dummy variables representing urban and suburban programs did not approach statistical significance.

We did not have any expectations about differences between sites in referral rates by prosecutors or police. We were, therefore, surprised to learn that the proportion of victims referred to services by both police and prosecutors was higher in sites with active outreach than in those with passive outreach. In sites with active outreach, 15% of respondents said they were referred to services by a prosecutor compared to 8% in passive outreach sites. Similarly, 19% said that they were referred to services by a police officer in sites with active outreach compared to 13% of respondents in sites with passive outreach. There were no differences in referrals by either prosecutors or police between urban, suburban, and rural sites.

Given the greater proportion of victims who were contacted by service programs and the greater number of referrals by police and prosecutors, it is not surprising that more respondents knew about services for victims in sites with active outreach than in sites with passive outreach practices. Fifty-one percent of respondents in sites with active outreach knew about the availability of services, compared to just 23% of victims in sites with passive outreach. Also, we

found significant differences by level of urbanicity in the proportion of respondents who were aware of service programs. Forty-seven percent of respondents in suburban sites knew about services compared to 34% of respondents in rural sites and 32% of respondents in urban sites.

Finally, respondents who lived in sites with active outreach policies had more needs met by service programs than other respondents (see Table 27).

Table 27
ANOVA - Needs met and site characteristics

ANALYSIS OF VARIANCE TESTS FOR SITE CHARACTERISTICS		
	Active/Passive Outreach	Site Population*
Number of needs met through assistance from primary program	F= 6.59 ***	F=6.40***
Number of needs met through assistance from other programs	F=5.51**	F=1.21

- * Urban/suburban/rural.
- ** p < .05
- *** p < .01

Respondents in sites with active outreach had an average of 0.20 needs met by the primary service programs and 0.16 needs met by other service programs. In passive sites, respondents reported 0.08 needs met through assistance from the primary service program and

0.06 needs met through assistance from other programs in the area. While all of these numbers are quite low in the context of total needs – an issue we address later in this chapter – the differences between the two types of site are statistically significant. Table 27 also shows that the number of needs met through primary victim service programs varied significantly by site urbanicity. Respondents in urban and suburban sites both had more needs met through assistance from the primary service program (mean = 0.24 and 0.26 needs met, respectively) than did rural victims (mean = 0.07 needs met).

These results indicate that there were substantial differences between the sites in the size of service networks and in outreach policies. The unexpected finding was that, in sites with active outreach, not only were more respondents contacted by the primary service program, but also more respondents were referred to services by prosecutors and police. This suggests that programs with active outreach may also be active in their commitment to train criminal justice personnel. Alternatively, it may mean that some sites have adopted a system-wide coordinated response to victims involving referrals by police and prosecutors and active outreach by service programs. In either case, the active/passive dimension seems to have broader significance beyond outreach policies. Further, more victims in sites with active outreach knew about the availability of service for victims and also received help with a greater number of needs through assistance from victim programs.

Understanding Why Some People Use Services and Others Do Not

In this section, we model service utilization and amount of help obtained using both contextual variables and victim characteristics drawn from the survey. The contextual factors were active/passive outreach policies and urban/suburban/rural site population. Respondent characteristics included number of crime-related needs identified on the survey and travel time to

the primary victim service program. Travel time is a measure of the difficulty involved in getting assistance. In addition, the models include type of crime, age, gender, education, race, and whether respondent was born in the U.S. All these models control for number of crime-related needs, identified in previous research (Davis, et. al., 1999) as a significant predictor of help seeking.

The analytic model tests our assumption that more victims will have had contact with service programs in sites that engage in active outreach. If that assumption proves true, the model then examines whether the higher utilization levels in active outreach sites translate into more help received from service programs. If that also proves to be the case, then we come to the most interesting policy question: Does greater help received by victims in sites with active outreach mean fewer unmet needs? The answer is not obvious since lesser use of formal service programs may be compensated by greater assistance from friends and family, churches, and other informal sources. This question is key to informing the public policy debate about the role that should be played by government and the role of private sources

The first model, using logistic regression, attempts to predict contact with victim services (either primary or other programs) based upon contextual and individual factors. The results, presented in Table 3, show a highly significant effect of outreach policies upon contact with service programs after controlling for respondent characteristics. That is, victims living in jurisdictions with active outreach were more likely to have had contact with a victim service program than victims living in sites with passive outreach. This is consistent with the findings of our initial logistic regression, discussed above.

Whether respondents lived in urban, suburban, or rural sites did not affect contact with service programs. Victims of domestic violence and robbery were more likely to have contact

with service programs than other victims, but none of the demographic variables affected service contacts, nor did travel time.

Table 28
Multivariate models of service contact, needs met by programs and unmet needs

	Contact with any service program (logistic regression coefficients)	Number needs met through service programs (ANOVA F-Tests)	Number of unmet needs (ANOVA F-Tests)
Number Needs	0.62	14.58**	9996.78**
Site Characteristics			
Outreach policy	18.81**	9.14**	1.02
Site population		0.27	1.57
Urban	0.09		
Suburban	0.01		
Crime Type			
Assault	0.06	0.68	0.57
Domestic violence	33.06**	51.23**	12.97**
Robbery	4.02	4.89*	4.08*
Demographics			
Age	0.00	3.15	0.51
Education	0.44	1.36	3.25
Gender	0.53	1.33	22.97**
Native born	1.08	0.02	0.00
Race	1.71	1.57	6.30**
Travel Time	0.17	1.17	0.58

* p < .05
** p < .01

The results of the second model depicted in Table 28 derive from analysis of variance to predict the number of needs met through assistance from either primary or secondary service programs. Like the first model, type of outreach was a significant predictor of victim outcomes. Victims in sites with active outreach had more needs met through service programs than victims in sites with passive outreach. Whether victims lived in urban, suburban, or rural sites had no discernible effect upon the number of needs met through victim assistance programs. Among respondent characteristics, only type of crime was significantly related to amount of help from

service programs: Victims of domestic violence or robbery had more needs met by service programs than did victims of other crimes.

The final model displayed in Table 28 uses analysis of variance to predict the number of unmet crime-related needs that victims had. Unlike in the earlier models, there was no difference according to outreach policies of the sites, nor was there a difference in unmet needs between victims living in urban, suburban, or rural sites. In spite of the greater assistance received from service programs, domestic violence and robbery victims still reported more unmet needs than other victims. Turning to demographic characteristics, non-whites and women reported more unmet needs than white victims or males.

At first blush, it is puzzling that respondents in “active outreach” sites were more likely to have contact with service programs and to have more needs met by service programs, yet wind up with virtually the same number of unmet needs as victims in “passive outreach” sites. The explanation is that service programs played only a minor role in addressing the total number of crime-related needs that victims had. As Table 29 indicates, an average of 0.25 of the 5.91 needs reported by all victims is met by victim assistance programs; this represents a mere 4% of their total needs. Looking only at service users, programs appear to meet a higher proportion of victim needs (1.24/6.98, or approximately 18%). However, this still represents only a minority of the needs that are reported by the service users. Thus, greater contact with service programs did not make a large difference in the totality of needs that victims had or that were taken care of.

Table 29
Where adult needs were met

	Full adult sample (n=648)	Adult service users (n= 99)
Total needs	5.91	6.98
Needs met by programs	0.25	1.24
Needs met by other sources	3.27	2.75
Unmet needs	2.39	2.99

Chapter V

Youth and parent data

Our research design called for interviews with both youth victims and one parent/guardian for each youth. Parents were included for two reasons: First, we believed that participating in an interview themselves would increase the rate of consent for their children to be interviewed and second, we thought they could provide interesting perspectives and additional information about the youths' experiences. Interviews were completed with 93 parents. In 59 of these cases, we were able both to obtain parental consent for the youth interview and to contact the youth and complete an interview with her/him. We present first the data from these 59 youth interviews.

Demographics

Of the 59 youth crime victims in the survey, the vast majority (79.7%) were male; 20.3% were female. More than half of the respondents (59.3%) were white and about 1/3 (32.2%) were black. Another 3.4% were Asian and about 5% identified as "something else." Only one of the respondents was not born in the United States or a United States territory.

The age of youth respondents ranged from 13 years to 17 years with a mean age of 14.68 years. Most of the youth crime victims (82.8%) were in high school (grades nine through twelve), one was in his/her first year of college, and 15.5% were in middle school (grades seven and eight).

Crime characteristics and impact

About half of the youth respondents were victims of a robbery; 42% were victims of assault/battery, and the remaining 8% were victims of a burglary⁶. Thirty-six percent of the victims knew their offender(s); of these 21 victims, 12 (57%) classified the offender(s) as a “schoolmate, but not a friend.” Of those who had actually encountered their offender(s), 39% reported that there was one offender, 30% said there were two offenders, and 31% said there were three or more offenders.

Weapons.

Thirty-six percent of the youth respondents reported that the offender used a weapon during the incident. Among those reporting weapon-involved incidents, about a third reported that a gun was used and another third reported that a knife, razor, or other cutting instrument was used. The remaining 38.1% involved “other non-specified” weapons.

Health impact.

More than a third (37.3%, n=22) of respondents were physically injured during the incident. Injuries included knife or stab wounds, broken bones or teeth, bruises, black eyes, cuts, scratches, swelling, and chipped teeth.

Table 30

Rate of specific injuries among those injured as a result of crime

Type of injury	Percent reporting *
Bruises, black eyes, cuts, scratches, swelling, chipped teeth	76.2
Broken bones or teeth	4.8
Knife injury	4.8

** Denominator includes only those reporting injuries*

⁶ Two of the burglary victims reported the burglaries occurred in their own homes; the other three indicated that their property had been stolen from other locations and the incident was classified by police as a burglary.

At the time of the survey, most of those who were injured as a result of the incident (86.4%) were no longer experiencing problems due to the injury. Most of the problems related to the physical injury (76.5%) were resolved within the first week and 82.4% were resolved within the month after the incident. About 1/10 of those reporting an injury believed that their injury would continue to cause problems for 21 months or more.

Problems facing those who reported having problems at one month after the incident included having pain that got in the way of daily activities, having trouble getting around, and having scars and/or bruises that made them feel uncomfortable.

Treatment and medication. Of youth who were injured, half sought medical treatment, mostly from the emergency room. About 12% of the 59 youth in the sample reported needing daily medication – primarily for pain – at some point as a result of the crime. All had ceased taking the pain medication six months after the incident, with the majority (80%) ceasing within a month. A few respondents required daily medication for depression or anxiety as a result of the crime.

Financial impact

Property. Almost sixty percent of the youth respondents reported that something belonging to them was stolen or damaged during the incident. Bicycles, cars, and other vehicles were the types of property most often reported stolen or damaged. Many respondents also reported that their jewelry was stolen or damaged and a few reported that their books, cell phones, CDs and CD players, money and/or IDs, driver's license, or other documents were stolen or damaged.

Employment. Almost ¼ of respondents (23.7%) were employed at the time of the incident. Of those who were employed at the time of the incident, 28.6% (or four individuals) missed days at work due to the incident. All of the respondents who missed work reported that

they were too upset to go to work. Other reasons given for missing work included having to go to doctors' or other medical appointments, being physically hurt, being too scared, and having to deal with police or go to court.

Educational impact.

Almost all of the respondents (98.3%) were students at the time of the incident. Of those for whom school was in session at the time of the incident, 29.3% missed days of school as a result of the incident. As Table 31 indicates, the most common reason reported by youth for missing school was that they were too upset to go (58.8%). Almost a third (29.4%) reported that they did not go to school for each of the following reasons: being physically hurt, being too scared, and having to go to doctors' or other medical appointments. Other respondents reported missing school due to having to deal with police or go to court, switching schools and missing time in between, having to go to counseling appointments, having no way of getting to and from school, being emotionally confused, being kept at home by mother for safety reasons, being blamed by the principal, being scared of running into offenders who attended the same school, and being suspended.

Table 31
Reasons for missing school

	N citing reason	Percent
Too upset	10	58.8
Physically hurt	5	29.4
Too scared	5	29.4
Had to go to doctors' appointments or medical appointments	5	29.4
Had to deal with police or go to court	4	23.5
Switch schools/missed time in between	4	23.5
Had to go to counseling appointments	3	17.6
Had no way of getting to and from school	2	11.8
Other reason related to the crime:	5	29.4
	N=17	

Most students who missed school missed only a few days. Of the 17 students who missed school, 13 (or 76.5%) missed five or fewer days, two (or 11.8%) missed one to two weeks of school, and two (or 11.8%) missed one or more months of school.

Behavioral impact.

In addition to health, financial, and educational effects, being victimized affected the behavior of the youth respondents. About 1/3 of respondents reported changing their daily routine in some way after the incident. Similar to adult respondents, youth most commonly avoided certain places (64.4%) and avoided being out on the street unless absolutely necessary (35.6%) as a result of the incident. A smaller group (18.6%) reported that they had started carrying a gun or other weapon after the incident. Some respondents (15.3%) also reported changes in eating behavior since the incident, but very few (1.7%) reported using drugs or alcohol more than they had prior to the incident.

In addition to these behavioral changes, a number of respondents reported having more trouble with family and friends and in school since the incident. A third (33.9%) of youth respondents reported having arguments with their family members about their whereabouts after the incident, while 25.4% reported having arguments with their families about who their friends are. Twenty-five percent also reported getting into fights with other kids more often. About 1/10 of respondents (11.9% and 10.2%) reported respectively that they started going to school less and that they started to get into trouble more at school, and a few respondents (6.8%) reported that they began to have more problems with grades than they did before the incident. In addition, three respondents reported having to switch schools as a result of the incident while two respondents reported thinking about or actually joining a gang as a result of the incident.

Other effects included getting a job or adding more work hours (8.5%) and having other money problems (3.4%). In response to an open-ended question about other effects, youth

respondents also reported beginning to carry mace; being more willing to fight if necessary; deciding not to visit family members who live where the incident occurred; not wanting to go out at night; feeling violated; becoming “more prejudiced toward blacks;” losing friends; feeling more cautious; beginning to value possessions; watching one’s back and where one goes; being more cautious about annoying others; losing sleep; and becoming more introverted.

Youth needs

Met needs. Youth victims had a number of needs after the incident, most of which appear to have been met. The most commonly met need was help in reporting the incident to police (81.4%). More than two-thirds were helped by having someone available to listen to them talk when they were upset and 60% reported receiving help in understanding how their case would be handled by the police or the courts. Some of the respondents were also escorted to or helped in court (16.9%).

About a quarter of youth respondents (23.7%) reported receiving help in figuring out ways to protect themselves from the offender, and a similar percentage were helped to replace stolen property. They also reported receiving assistance in making up schoolwork (20.3%), being lent money (16.9%), having their IDs replaced (6.8%), and having their door/locks replaced (1.7%).

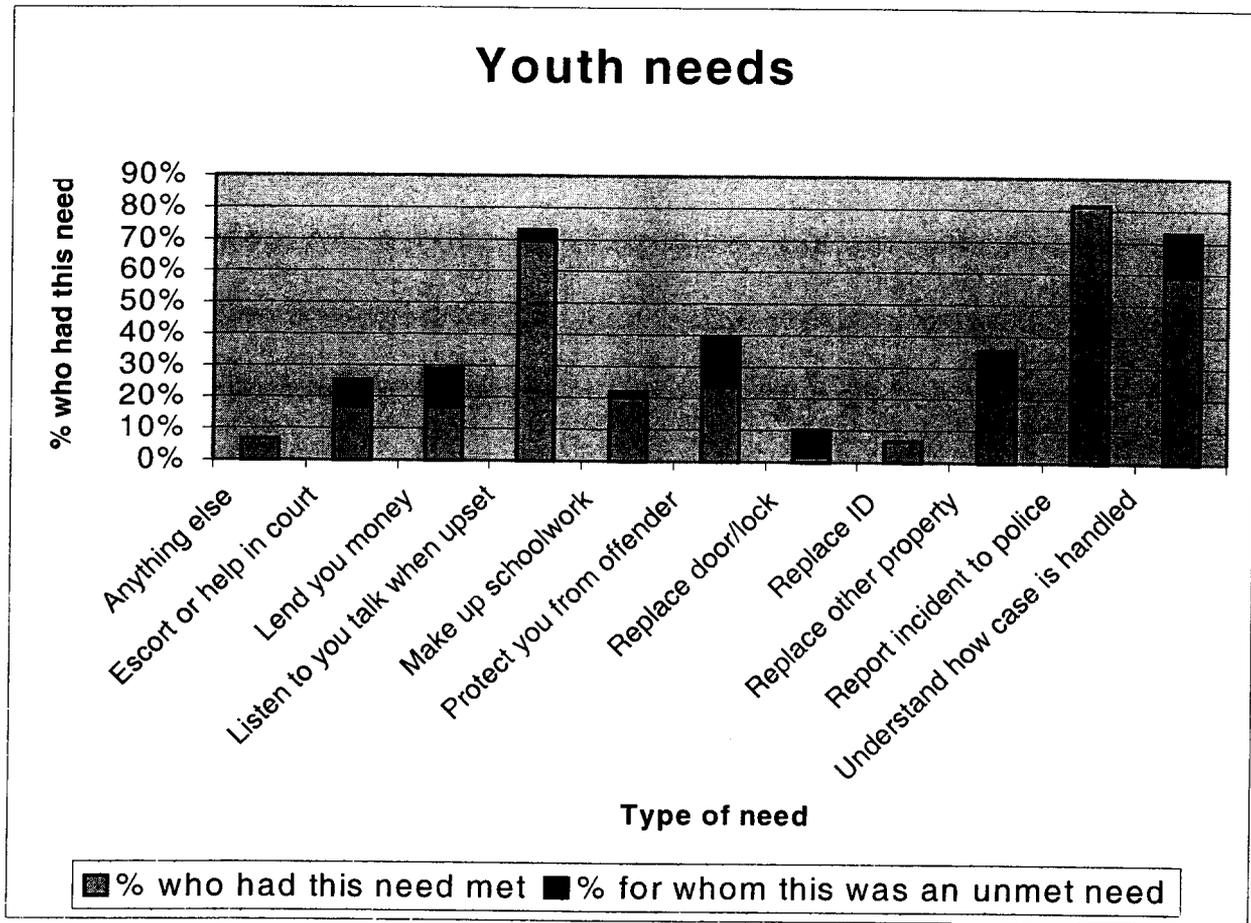
Sources of help in meeting needs. Informal support networks of family and friends were the most commonly cited source of help in meeting the needs of the youth respondents. Of those who had the need met, informal networks including family and friends were cited as the source of help by most of the respondents in meeting needs related to: Reporting the incident to the police (83.3%); listening to them talk about the incident (95.1%); lending money (90.0%); and replacing property (78.6%).

While parents were cited as sources of help in helping youth respondents understand how their case would be handled (26.5%) and in making up school work (41.7%), youth also reported receiving help from other sources to meet these needs. Specifically, 35.3% of youth cited the police department, 11.8% cited the prosecutor's office, and 11.8% cited another agency or professional as helping them to understand the way their case would be handled by the police or courts. In addition, more than half (58.3%) of youth respondents who received help in making up schoolwork were helped by another agency or professional, typically someone in the school.

Unmet needs. Youth respondents also reported a number of unmet needs. The most common one was help in figuring out how to protect themselves from the offender (15.3%). While receiving help to understand how their case would be handled by the police or courts was a met need for a high percentage of respondents, some (13.6%) cited this as an unmet need. Also, 8.5% of youth respondents cited having an escort or help in court as an unmet need.

Tangible needs were unmet for several youth respondents. Ten to twelve percent (per need) reported that they could have used help in replacing property, being loaned money, and/or in replacing their ID.

Figure 16: Met and unmet needs of youth victims



Parent Reports

Parents were asked about their perceptions of their children’s needs, as well as of the impact of the crime. Additionally, they were asked about service use.

Met Needs. Parents of youth victims reported that their children received help to meet a number of needs that existed after the incident. According to parents, the number of needs met ranged from 0 to 8 and the mean number of needs met was 3.74. Almost all of the parents (91.4%) reported that someone helped their child by listening to her/him if (s)he was upset and wanted to talk. A large proportion of respondents (83.9%) also reported that their child received

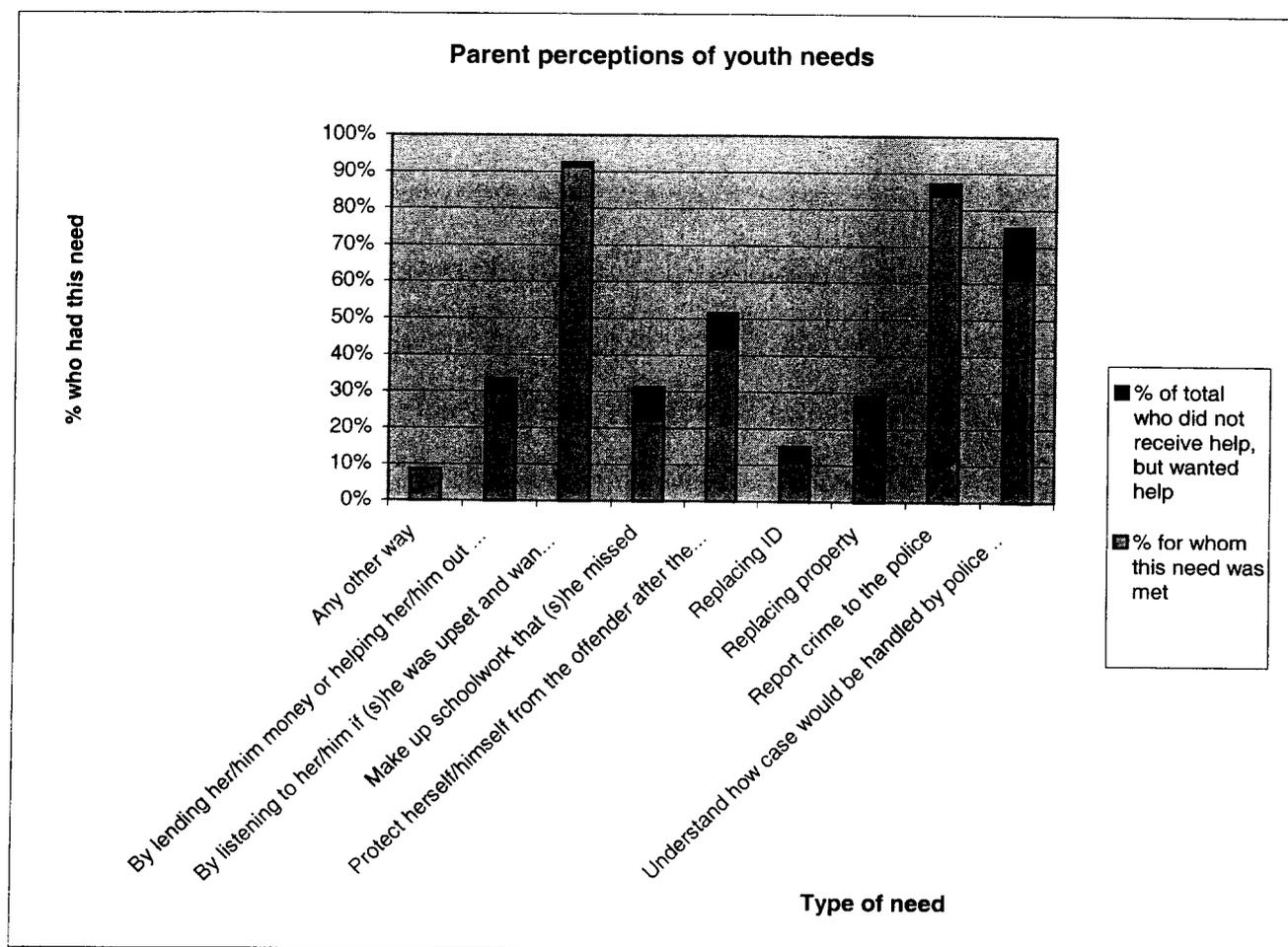
help in reporting the crime to the police and 61.3% of the respondents reported that their children received help in understanding how the case would be handled by police or the courts.

Parents also reported that their children received help to deal with the more tangible results of the incident. Forty-two percent said that their child received information on how to help protect her/himself from the offender after the crime and 30.1% were lent money. According to parents, youth victims also received help in replacing property damaged and IDs stolen during the incidents and in making up schoolwork that they missed.

Unmet needs. Not all of the needs of the youth victims were met, from their parents' perspectives. For example, 14% of all parents surveyed reported that their child needed, but did not receive, help to understand how the case would be handled by police or courts. Similarly, almost 10% felt that their child needed, and did not receive, help in figuring out how to protect her/himself from the offender after the crime. Other unmet needs reported by parents of child victims include (from greatest to least % reporting the unmet need): help to make up schoolwork; help to replace property and IDs; someone to lend money; help to report the crime to the police; and having someone to listen to them.

Figure 17

Parent perceptions of met and unmet needs of youth victims



Behavioral Impact. According to parents, youth victims demonstrated a number of behavioral changes as a result of the incident. Some parents reported that their children began having more problems at school. About 30% began having more problems than before with their grades, while almost 25% began getting into trouble more in school, and 16.1% started going to school less than they had gone before the incident. Eight percent of parents reported the more severe impact of their child having to switch schools as a result of the incident.

About 20% of parents reported that their children began having more problems with their friends and having arguments with family members about whereabouts and who their friends are.

Twelve percent said their children began getting into fights with other kids more often and a few began to carry guns or other weapons for protection and/or joined or thought about joining a gang.

Parents did not report any increase in drug or alcohol use by their child, but almost ¼ (22.6%) reported that their child changed their eating patterns as a result of the incident.

Table 32
Youth behavioral changes reported by parents

Change	Percent parents reporting
Have more problems than before with her/his grades	29.0
Begin eating a lot more or a lot less than (s)he used to	22.6
Start getting into trouble more in school	22.6
Have problems with his/her friends	20.4
Have arguments with you or other family members, about when and where (s)he goes out	20.4
Have arguments with you or other family members about who her/his friends are	19.4
Start going to school less than (s)he had before	16.1
Start getting in fights with other kids more often than (s)he had before	11.8
Have to switch schools	7.5
Start carrying a gun or other weapon for protection	5.4
Have other money problems	5.4
Join a gang or think about joining a gang	2.2
	N=93

Why parents and children did not use services. Parents cited a number of concerns that they and/or their children had about calling or using a victim assistance program after a crime. More than half of the parents surveyed did not know that a victim assistance program existed. Even more common were reasons that related to perceptions (on both their and their children's' parts) that they did not need help. Other responses included thinking that the incident was a private matter, worrying that the offender would get angry if the child talked to anyone, lack of

time, and worrying that people would think that there was something wrong with the child if (s)he sought help.

Table 33
Concerns about using victim services

	Percent citing concern
My child was able to solve her/his own problems	61.3
My child did not think that (s)he needed any help, or refused to go	60.2
Did not know about availability of services	55.9
My child already go the help (s)he needed from somewhere else	53.8
I did not think my child needed any help	48.4
It was a private matter	48.4
We were worried that the offender would get angry if my child talked to anyone	22.6
Didn't have time to go to get services	10.8
My child or I were worried that people would think there was something wrong with her/him if (s)he went for help	6.5
Any other concern	10.8
	N=93

In addition to these concerns, some parents who knew of a victim assistance program had other, more specific concerns about the program itself. Almost 15% of parents who knew of the victim assistance program stated that the program did not provide the services that her/his child needed. Eight percent also believed that their child was not eligible to get help from the program.

Chapter VI

Findings from Interviews and Focus Groups

Across the six sites of the project, seven focus groups and thirty-two individual interviews were conducted with crime victims. Victims were recruited from a variety of sources, including victim assistance programs, police records, flyers, and advertisements in local papers. At each site, we held one or more focus groups and also conducted individual interviews. Each focus group was comprised either entirely of domestic violence victims or entirely of non-domestic violence victims. In our recruitment for the focus groups, we also offered victims the alternative of participating in an individual interview. Participants in either focus groups or interviews were each given a \$30 stipend. Both focus groups and interviews were typically held in a neutral, accessible location such as a hotel meeting room or public library. The one exception to this was a series of domestic violence focus groups in which all of the women were clients of the local service agency, and preferred to have the groups meet at the program office where they were familiar with the childcare provider. For all other groups, childcare was provided when needed. We present below the findings from these groups and interviews, beginning with the non-domestic violence victims.

Victims of Assault, Burglary and Robbery

We held two focus groups and conducted 20 individual interviews across the six sites. The topics included where victims turned for help and support, experiences with police and courts, knowledge of and experience with the victim assistance program, and unmet needs.

Use of informal support systems. Almost all of the crime victims who participated in this project cited the importance of their informal support network of family, friends, neighbors and co-workers in helping them recover from the crime. Assault and robbery victims were

particularly grateful for the emotional support they received; one commented that he didn't know how people could get through such a crime without that kind of support. Other assault victims talked about how their support network had helped them feel safe after the crime, by escorting them to their cars or driving them around, and socializing only in places where the victim felt safe. Burglary and robbery victims talked about both emotional support and practical assistance. Several burglary victims, in particular, said it was especially helpful to have people come over and help them clean up broken glass and generally restore the house to order.

When victims told employers and co-workers about the crime, they generally got supportive reactions. Supervisors were typically sympathetic, and permitted victims to take the time off that they needed to recover, to deal with practical problems, and/or to attend court. Co-workers were described as a particularly good source of emotional support, listening when victims just needed to talk. One interesting comment came from a burglary victim who ran his business out of his home: He noted that he can't "do the co-worker thing" and blow off steam to his colleagues, and felt that was something important that he missed out on, and that would have been valuable. He added, though, that people from his church heard about the crime on the news and called him, and that was helpful. Several others described church communities as sources of support, offering both emotional aid and practical assistance.

Experiences with the police and courts. Victims generally reported positive experiences with the police, though they often didn't have much to say about their interactions. One theme raised by those who were burglarized or robbed but not assaulted was the sense that their crime was not deemed serious enough to command much official attention. One victim said,

This is probably low on the totem pole. I totally recognize that, and there's a whole lot of other crimes that deserve a whole lot more attention and I'm totally cool with that, but I just feel like I got screwed here.

Several victims cited frustration with investigations moving slowly or not receiving as much attention as they would have liked, and one robbery victim expressed this particularly well:

You know, crime's high and I know it was low priority, but it wasn't to me...It may be small stuff, but it's the only stuff I know.

She went on to say that she felt petty by wanting her \$37 (that had been stolen) back, but that it was important to her. Mostly, she said, she wanted some acknowledgement from the police that "something happened." Several other robbery and burglary victims also wished aloud that they had gotten their things back earlier (or at all) once the police found them. Other victims, though, were more matter-of-fact, and felt that their crimes didn't merit more investigator attention than they received. However, many victims did complain that they were never informed if somebody was apprehended for the crime. Another complaint that was heard at rural sites was that non-violent cases with juvenile perpetrators were sometimes handled "outside the system," with police leaving it up to the perpetrator's parents. One victim summarized this attitude:

We'll just let it stay in the neighborhood and handle it like that.

Court involvement and victim rights. Victims became more passionate when they talked about their experiences with cases that went to court. Here, again, lack of information was the biggest complaint. Some victims knew that there was an arrest but never found out if there was a plea, if the case was dropped, or – up to 18 months later – if it was still open. There were exceptions: One robbery victim told us that he was asked to attend a plea conference and that, when he objected to the 30-month sentence that the defense attorney asked for, the prosecutor rejected it and offered 60 months instead. But, most victims felt like they didn't get the closure that they hoped for by learning the outcome of the case. A few who did hear about it through

other routes – read about it in the paper or found out about court dates from the perpetrator – were upset that they hadn't gotten the information directly. One such victim said,

I think the victim should be notified. Just like when a child molester gets out, they're supposed to notify people that's in the neighborhood, I think for me who was burglarized, I should be notified on what's going on with those people.

Another victim was surprised when, months after an incident, he received a check from the prosecutor's office and discovered that the perpetrator had been apprehended, pled guilty, and was ordered to pay restitution. The victim said this was the first he had heard of the case since the police left his house right after the incident.

In addition to wanting more information, some victims wanted to have more active involvement in the case, and were frustrated when they were unable to do so. One assault victim, who had his teeth knocked out by a drunk stranger in a bar, said,

I would call and say "What can I do? Do you need me to come in? I'd love to say a few words", and there was just nothing, it was like "no we got this, he goes to court on this date, we're pressing charges for this," and no one contacted me. Why on earth wouldn't I be there in front of a judge to have my say? I did get a form if I would like to provide a written statement, and I definitely filled that sucker out but to me it's not what I wanted.

Victims were asked whether anyone had talked to them about rights they might have as a crime victim, and what they recalled from those discussions. The victim quoted above, as well as several others, did remember filling out victim impact statements. A few also reported attending the perpetrator's sentencing. However, only one victim (discussed above with respect to plea bargain) recalled significantly more involvement than that.

Some victims – primarily those who had not been personally assaulted and had not experienced major loss or damages to their homes - were less concerned about not being involved in the court case. One burglary victim summed up that sentiment, when we asked him if anyone had spoken to him about specific victim rights:

They didn't say anything about that I had a right to compensation to fix the window or anything like that. It wasn't a whole lot of damage, but I don't recall specific conversations about any rights. They could probably sense that I didn't feel terribly violated.

This comment reflects a general lack of awareness that victim rights are, in fact, rights, rather than privileges to be granted at the discretion of individuals in the court system.

Knowledge and use of victim assistance programs. Many victims were not familiar with their local victim assistance program. Sometimes this was attributable to the constraints of the program's mandate. At one rural site, the court-based program has one staff member serving a full county, so the program is limited to serving felony victims only. At this site, participants in a focus group of burglary, assault, and robbery were asked if they knew of the program. All of them were surprised to hear about it, and had the following discussion:

- 1: It would seem to me that if there is something out there available, then every officer should know about it and every officer should be telling every victim of crime about it.
- 2: Maybe they refer some people and not others based upon their perception of the need for it.
- 3: But it shouldn't be like that, a victim's a victim no matter what.

More striking than the lack of familiarity – and more consistent across all sites -- was a recurrent theme among those who were familiar with the local victim assistance program, but had never called for services: The sense that the program was designed to serve “other people, not people like me.” A robbery victim who found the program helpful in keeping him notified about the case said that he had really needed someone to talk to, because his friends and family were getting tired of listening to him talk about the robbery. When asked if he had talked to anyone at the Assistance program about this, he said,

I just felt like I was a victim but in the scheme of things, relatively insignificant...I didn't want to tie up their resources. I felt like if I need anything (referring to counseling) I had health insurance and there might even be things to

help people who don't have health insurance ... but I never felt like I needed to check with a government organization to find out what I can get.

Other robbery and burglary victims believed that the program only served victims of more serious crimes; one noted that she had been handed the program brochure, but that its list of services seemed to be directed at rape victims and other violent crimes, not at her. Similarly, when an assault victim was asked who he thought the local police-based program served, he said,

Somebody close to somebody that had been murdered, rape victims, mugging, armed robbery, just very serious stuff.

Another assault victim, at a different site, assumed that if he told his court liaison at the assistance program that he needed to talk about his feelings about the crime, she would have referred him to a psychologist, and would have said, "We don't have time to listen to that."

While some of these victims were bothered by the perceived or real lack of attention to their needs, others did not have any expectations of receiving services from a victim assistance program. One suburban burglary victim summed up this sentiment:

You obviously have to target the type of crime and the amount of damage done to the victim, in order to use your limited resources in the most wise fashion. I think the use of resources they used for me were pretty reasonable. They gave me business cards and so on. I wouldn't have expected a lot more time.

Victim assistance program outreach efforts. Victims were asked if they remembered receiving a letter or phone call from the local assistance program and, if so, how they responded to it. Some people remembered receiving letters, but the phone calls were more memorable for people, and were more likely to be responded to by victims. Typical comments were:

I basically got a letter in the mail. It wasn't like I got a phone call following up on any sort of help. (Assault victim)

Maybe there could have been a little more assistance or calls, "here's where your case is at, you can do x, y & z or you can know it's being covered in this way, and we sent you a form for the medical bills, do you have any questions that we can help you with? (Assault victim)

If there was someone to call to say, "I'm from the Victim Assistance Program in [county] and we understand this happened the other day. How are you doing? How are you eating? How are you sleeping? Are you having any safety concerns?...Because there wasn't any real big physical injury or anything, there wasn't any connection with that type of agency. (Robbery victim)

Similarly, a victim of assault and robbery suggested that it would be helpful for the program to call and "brainstorm" with victims what their possible range of needs might be, because there might be things the victim isn't even aware of needing at the time of the crime or shortly thereafter.

Service users. While relatively few of the victims represented in these groups and interviews had used the services of a victim assistance program, those who did were generally positive about their experiences. This was especially true for those few victims who turned to the programs for counseling or other emotional support. An assault victim said,

As soon as I walked in there, I felt, oh my God, someone is listening to me, someone is compassionate, I felt they wanted to help me... I knew I was the victim but I felt like the criminal and they reassured me that I wasn't.

A 14 year old victim and her mother, who were interviewed together, reported similar experiences:

Girl: They were all really great. They said my mom and I could contact them by e-mail anytime we wanted, for any questions or anything.

Mother: They were all there to answer our questions, offered us whatever they could do for us, they were very helpful.

Unmet needs. As noted above, the biggest unmet need of victims was for more information from police and prosecutors' offices about the status of the investigation and/or court case against their offender. Another need, described earlier, was to have crimes that were perceived as less serious still receive appropriate attention from the authorities. A few other unmet needs were mentioned, though each was raised by only one or two victims. These included the need to speed up the verification process for victim compensation so that victims

don't have medical and other bills piling up, and the need for schools to support victims who are assaulted by fellow schoolmates, rather than minimizing the incident. With these exceptions, though, most of the participants in these interviews and focus groups felt reasonably well-served by their informal support networks and, to a lesser degree, by some of the formal institutions designed to work with them.

Domestic Violence

We held five focus groups and conducted 12 individual interviews with female victims of domestic violence. Three of the focus groups, including one Spanish-speaking group, were held in rural sites, and two in suburban sites. Interviews were conducted with women in rural, suburban and urban sites.

In both focus groups and interviews, women were asked to provide some background information on the relationship in which the abuse occurred, and then to talk about their experiences in seeking help or choosing not to seek help; their interactions with law enforcement and criminal justice systems, what help they had sought and/or received from informal support systems; factors that might have facilitated or impeded help-seeking, and what needs remained unmet.

Making contact with a service agency. Most of the women participating in this project had used some form of specialized domestic violence services, whether it was shelter, court advocacy, counseling, or other services. The women described a wide variety of referral paths. Some had heard about the program through formal institutions such as the police, prosecutor's office, local social service office, telephone hotline or hospital emergency rooms. Other referral sources included friends, colleagues, a mother, the assistant at an eye doctor's office (who had herself been in a violent relationship), a locksmith, and a pharmacist.

A number of women were able to pinpoint specific “trigger events” that motivated them to seek help, especially from a domestic violence program (as opposed to the police). For some women, the trigger was the abuser hurting or threatening the children for the first time; for others, it was a changing or growing awareness that they would be killed at some point if they stayed. As one woman said, “*I realized I either leave or die or kill him, so I left.*” For another woman, the first incident requiring emergency room treatment was the catalyst for acknowledging the problem and accessing services.

The primary motivation for seeking services of any sort was safety. Participants in the project were at diverse stages in their relationship with their abusers: Some still lived together, others were separated or divorced, and several were in hiding. However, virtually all of them continued to express fears for their own safety and that of their children. As described below, most of the women did not feel adequately protected by the police or others.

Experiences with the police. Most, though not all, of the participants had experienced at least one incident in which the police had been called. The quality of these experiences tended to vary by site, with a fair amount of consensus within each site as to the helpfulness of the police and the problems encountered. Unfortunately, there was only one site where women described predominantly positive experiences with the police. This was a rural site that had a well-coordinated domestic violence network run by the local domestic violence program. In this site, the police were described as “supportive” and “wonderful.” One woman noted that a police officer had taken her home from the emergency room and agreed to wait until the woman got her children out of the house before arresting their father. Another said they helped her to trace the source of a hand-delivered letter from her abuser, who wasn’t supposed to know where she was.

Virtually all of the women at this site agreed that the police took domestic violence very seriously, and saw it as part of their role to connect women to available services.

At other sites, many of the women described negative experiences, saying the police had either done nothing, or made derogatory comments to them:

He [abuser] was visibly drunk and the cop said to me, "I'm tired of dealing with you two. I'm tired of it. You're wasting my time. I've got more important things to do."

The officer called me stupid. He said, "You're a pretty girl. Why do you put up with this?"

This woman went on to add that this same officer, who had already been on several calls to her house, failed to arrest the man who had just broken several of her bones and landed her in the hospital.

Several women either assumed or were told by the police that their response was constrained by state law. Two women in a rural site said police had told them that state law prohibited the police from making the abuser leave the house because the couple was married. These women had each called the police for multiple incidents, but the abusers were never taken to jail. Similarly, several women in another jurisdiction expressed concern about the local mutual arrest policy:

You're gonna come there and tell me that, "if you slap each other, I'm gonna take you both." In one breath they're telling me don't let him do this to you, defend yourself. And in the next breath they say, "if you do defend yourself this is what's gonna happen to you."

Still others complained about the police officers' reluctance to get involved if there was an ongoing divorce or custody case:

Because there was a divorce, and custody issues, they really don't look or pay much attention to it...because they think you're not telling the truth, because "oh, you're just vindictive, you're in a custody battle, you want a divorce," and you get nowhere fast.

In one of the rural counties (the one without the well-coordinated network) as well as in the two suburban counties, a number of women talked about how the “small-town” nature of their site posed a problem for police response. Several women used the term “good old boys” or “old boys network” in explaining why the police or courts were unwilling to come down hard upon the abuser:

He grew up in that town, one of the good old boys there, and he knew all the police department, the guys on staff, the chief and everything. We were just at each other’s throats at the school parking lot and I called the police. They came and I showed them my restraining order, and they were like, “Oh, John... you’re Bertha’s boy, aren’t you?”

[The police said:] We know Mr. X, we know the X family, and they’ve been in this area since the beginning of time. We’re sorry if you’re having problems but we can’t find that he’s done anything.”

For the few women who had never called the police, the primary deterrent was the belief that it would be ineffective at best and potentially terribly dangerous. One woman aptly summed up the sentiment of this group:

If I had known I could be sure that when I picked up the phone and called the police I would never have to see him again, I would have done it. But knowing full well that that wouldn’t have been true, there was no way.

Experiences with the courts. Even women who had described reasonably positive interactions with the police expressed frustration with the court process and outcome – with the exception of the rural county with a coordinated network, described earlier. Typical complaints were:

The police were great, I had no problems with the police...my problem was with the prosecutors. They kept dropping the charges, dismissing it, and he just kept coming right back.

Of course it’s the judges. Remember the police bring them in, it’s the judges. The police can arrest them every hour on the hour, but if the judge lets them out, where do you go from there?

A number of women in both suburban counties as well as in one rural county described the same concerns about the “old boys’ network” that they had described relative to the police. They talked about their husbands being socially or politically connected, to prosecutors and/or judges, and using those family connections to escape punishment. One woman described it all as coming down to “money and politics.” Even in sites where family connections were not a concern, prosecutors and judges were often seen as too lenient with batterers. Many women had particular complaints about the perceived ineffectiveness of restraining orders/orders of protection. One woman who had an order of protection noted that her ex-husband violated it every time he came to pick up his daughter as part of their court-ordered joint custody:

Don’t give me a piece of paper and say he has to stay away from you, and then on their next record he can come home tonight because his kid is there. Because I’m gonna die tonight and I’ll be another statistic, and you guys will have just issued another piece of paper.

This woman pointed out that she and her abuser exchange their daughter at least three times a week, with pick-up and drop-off each time, putting her in contact with him at least 6 times a week. She felt the court had made her a “sitting duck” and said,

I sit every day and say what day is it gonna be that he’s gonna be pissed off at something else and he’s gonna take me out of this world maybe in front of my daughter, or do something to her to get back at me.

In addition to concerns about the outcome of the court cases, several women also talked about their experiences with the process. Many women talked about the difficulty of not knowing what to expect at hearings and other court appearances, and a few noted that they found the court setting intimidating. Several women at one suburban site had more positive experiences, as a local domestic violence program had provided a court orientation before the first hearing; others at the same site reported that prosecutors and prosecutor-based victim advocates had helped to explain the process to them beforehand.

The biggest, and most consistent, complaint about the court process was that victims were not always informed about the outcome of the case, especially if they did not attend the actual hearing. One woman noted that she only knew her husband had been sentenced to mandatory treatment because the counselor had contacted her; others said they heard about the outcome, or about upcoming court dates, from the abusers themselves.

Experiences with service programs. As noted earlier, most of the women participating in the focus groups and interviews had had some contact with either a general victim assistance program or a domestic violence program, or both. This is in no way representative of the general population of battered women; it merely reflects the difficulty we had recruiting participants without an introductory call from a service provider with whom the woman was already familiar.

Participants generally described their experiences with service programs in positive terms, but there was considerable variation in their experience of how comprehensively the program had met their needs. At one extreme was the local domestic violence agency at a rural site (the one with the coordinated network of services), which was described in glowing terms by its clients. One woman summarized the feeling of many in this group:

Pretty much every need I've had has been met; housing, medical, food stamps, cash and attorney, anything and everything.

This woman and two others provided an extraordinary testimonial for the program when they noted that each of them had come to this town to stay in the shelter for one night, as part of a cross-country or cross-region trip to escape their batterer. Each of them had ended up staying permanently because the program offered such comprehensive services and the county was so proactive and responsive with regard to domestic violence victims. In addition, the program went beyond the women's emergency needs, in ways that felt very powerful to the clients. One woman noted that her husband had never let her look feminine. During her first contact with this

program (as part of a cross-country escape trip), a counselor told her, “You’re beautiful and you should feel beautiful,” and offered her a voucher for a haircut and took her to the store to buy makeup, lotion, and bubble bath. This woman said, “When I got my haircut, I just cried, I was so happy.”

At this same site, other women described problems “mysteriously” being solved. One had mentioned to her counselor that her car had been repossessed and she had a mildly sick baby at home. The next day, a nurse practitioner appeared at the house to check the baby. Similarly, another woman had not updated her car insurance because she didn’t want information on her new address to be in any computer system. She received a ticket for driving without insurance, but the case was thrown out of court without any explanation.

Women’s experiences of the comprehensiveness of services at this site contrast sharply with the paucity of services experienced by women at the other rural site in this study. At that site, several women expressed surprise at hearing that there was a prosecutor-based victim assistance program (with one staff member) and a newly opened domestic violence shelter in their county. Most believed that the closest shelter was two hours away, and none had availed themselves of its services. One woman at this site complained that she tried to get her husband into crisis counseling and was told that there was a month-long wait at the one agency in town that provided this; this experience appeared to be typical for the domestic violence victims at this site. Similar comments were made about the difficulty of accessing legal services; women described a yearlong wait for assistance with a low-cost divorce, from the “local” Legal Aid – over 90 minutes away by car.

Women at the remaining four sites described experiences that fell somewhere between these two extremes. Several of them had stayed at shelters for a few months or longer. While

there were a number of complaints about curfews and the difficulty of sharing one phone with so many people, most said they felt safe at the shelter. The primary concerns that came up concerned the impact of the shelter stay on the women's children. In particular, women in one suburban county said that it was difficult to keep their children at the same school because the shelter had only one van and it was not always available to transport children to school. Several women across different sites also mentioned that it was socially difficult for their children to live in a shelter, where they couldn't have friends over or talk on the phone for long periods of time. In contrast, many of the women found it reassuring to live with others who had undergone similar experiences. They talked about the importance of having their experiences validated, especially if they felt badly treated by the police and judges. As one woman said, "it's comforting to know that it's not just me."

Some of the women felt that the local service programs were limited in their ability to be helpful. Four women in one county pointed out that the community-based victim advocates had no standing in the local court system, and were not allowed to speak in the courtroom. One woman expressed the frustration of the group:

They're not there to get any information to the court, they are really just there for handholding, and at a certain point, I didn't need anybody to hold my hand. I needed that before I decided to leave. Once I decided to leave, I needed someone to help me stop what was going on.

Experiences with other formal and informal networks. The women who participated in these groups and interviews had very mixed experiences with other formal institutions, such as schools, employers and churches, as well as with family and friends. These are described below.

Schools. Few of the women spoke about experiences with their children's schools; mostly, they described difficulties in transporting their children from shelters to schools, as noted above. However, a few noted that the schools had been sympathetic to the complications of their

lives, and tried to be accommodating. One school helped by taking a copy of the woman's protection order so the children could not be taken from school by their father. This school also worked with the mother to arrange different drop-off and pickup spots every day, to protect both the woman and the children. Other women in the group were impressed by this story, and saw it as a way that schools could ease the concerns of women who had escaped abusive situations.

Churches and clergy. All of the women were asked whether they had spoken to or thought about speaking to a clergy person or others at their church/temple. Women in the Spanish-speaking group were the most likely to have done so, and generally described more universally positive experiences than did other women. In the other groups and interviews, roughly equal numbers of positive and negative experiences were described. On the positive side, women described pastors praying with them, visiting them in the hospital, and letting them know that it was okay to leave their abusive husbands. A few women also received financial assistance from their church. On the negative side, experiences included being told it was their duty to stay and "work things out," and having the domestic violence re-framed as a marriage problem rather than a husband's problem with violence. A few women said they were reluctant to tell their pastor or anyone in the church because of concerns about confidentiality. As one woman said,

The church community is too much my community. I didn't want everyone to know my business.

Employers and co-workers. When asked if they wanted and/or received any help from employers and colleagues, women who held jobs indicated either that they had not told their employer or that they had, and received support and assistance. One woman's company had a program that escorted women to their car after work if they felt they were not safe. Another employer helped a woman whose husband showed up in the parking lot one day. Company

security came and arrested him, and the employer later helped the woman to secure an underground parking space at work. Several women also noted that their co-workers were important sources of support. They screened calls from the abusers, and provided emotional support. One woman noted that the presence of “good friends” at her office was connected to her decision not to seek counseling or join a support group at a local agency:

I suppose that’s probably why I don’t need to look for it anywhere else, I’ve got it right here...

Family and friends. Questions about family and friends generally led to a discussion primarily about family, because so many women said the abuser had never permitted them to have friends. Moreover, many of the women had never told their families about the abuse in their relationships. Several noted that their families had never liked their partner, and telling them about the abuse would only make that worse, or cause the family to say “we told you so.” Some women said they had told their parents or siblings, but the family became less supportive over time as the woman stayed in the relationship. Typical descriptions of this experience include:

Your family is like, you choose this relationship. Until you choose to get out of it and stay out of it, we’re not helping you.

They start out very helpful but they don’t understand why you keep going back.. the more I kept going back, eventually, the more my family said we can’t do anything for you, we can’t keep getting you out of this situation and you keep going back and we just can’t do it and you’re gonna kill yourself.

The problem with family is they get tired of it because you keep going back and they get really tired of it. Especially if they’re putting money at it.

A few women also noted that they did not turn to their families out of fear that the abuser would then hurt the families. One woman said that the last time she ran away to her parents’ house, her abuser had tried to burn their house down. She was unwilling to endanger them again, and no longer turned to them for assistance.

While some families suggested that their help was contingent on the woman's leaving, others were prepared to help, but only on their own terms. A few women described their families' offers and/or attempts to beat up, or even shoot, the abuser. All of these women protested, at which point the families refused to help in any other ways.

Most of the women who received help or support from their families said this occurred primarily after they had made the decision to leave the relationship, or already left. At this point, siblings came with moving trucks or picked up children early from school, and parents offered places to live and/or financial help. There were exceptions even to this, though. A few women described how devastated they were when their families sided with the abuser after the woman left, or told their daughters or sisters that it was their responsibility to return to the relationship. On the other hand, several immigrant women in the Spanish-speaking group – as well as a few women in the other groups – noted that the abuser's family had taken the woman's side once they found out what was going on, and had helped her financially or otherwise. This was especially important to the immigrant women (mostly migrant workers in a rural site), as many of them did not have any of their own relatives in the United States, and relied entirely on their husbands' families.

Unmet needs and obstacles to help seeking. While the discussion above describes much of the help and support that victims of domestic violence received, it also highlights the significant variations in available services and the extent to which needs were met in different locales. Additionally, there were a number of needs that were unmet at most of the sites, as well as obstacles to seeking or receiving help; these are described below.

Unmet needs. Two primary unmet needs at most sites were for temporary and long-term housing solutions for women who have left their abusers, as well as affordable legal assistance

with divorce and custody cases. Outside of urban settings, transportation also posed problems in several ways. Women who were geographically isolated, especially in rural sites, were unable to access services when their abuser was out of the house with the vehicle. Even after they had left the relationship, some women could not afford cars, and had difficulty getting their children to school, accessing counseling or other assistance, or just leaving the house.

Barriers to help seeking. A number of factors emerged in these discussions as potential barriers to women's desires or efforts to seek help. Foremost among these was fear of the abuser and a lack of confidence that the woman would be protected if she called the police or otherwise took action against the abuser. Even women whose abusers were in jail remained fearful; one woman whose husband was serving time for trying to kill her and her children said:

He's in there now. He's not gonna stay in there, I know mine isn't gonna stay in there. They say 7 years, then you cut it down to 4 years which maybe makes it 2 years, but he's been some time already for 3 months...so let's face the facts, they're gonna come out and they're coming back for the ones who put them there...

Another barrier to escaping from a relationship was fear of what the shelters would be like, and especially, a reluctance to take children from a nice home into a crowded shelter that offered little privacy. Women also expressed concerns about the financial impact of having the abuser removed from the house (e.g. arrested/sent to jail), or the impact on the woman's job if the abuser was the primary caregiver while the woman worked. Other women expressed concerns particular to rural communities: isolation with no means of communication (e.g. abuser took batteries of cordless phone with him, and took the only car to work); and small communities in which one agency (e.g. Legal Aid) was a sole service provider, and could not serve the victim because the abuser was already a client. Two women expressed the geography-related problems, in particular, quite clearly.

Even if there was something, some kind of support where you could go, it's too far away. Everything is too far away to get to.

We lived out in the middle of nowhere...there was lots of us out there that have no way. I had to go 12 miles just to get to the bus, and if someone takes your keys and your vehicle and you're 12 miles away from the nearest bus stop, you're not gonna go anywhere.

Immigrant women at a rural site worried about losing their children, knew they were ineligible for some assistance because they did not have "legal papers," faced language barriers in accessing services, and also experienced prejudice and discrimination in some agencies.

A number of women expressed concerns about confidentiality, both in terms of embarrassment and in terms of safety. Women were reluctant to apply for formal documents, such as driver's licenses or public assistance, because they believed their abusers would be able to find them if their addresses showed up in any computer systems. A few women talked about the need for help in changing one's identity (e.g. getting new social security numbers). In small towns, women had particular concerns about confidentiality; a typical comment was:

Everyone in the neighborhood knows the [shelter] van, they know us from walking back and forth, they know what each person that lives there looks like...

Finally, several women felt that in society as a whole, the needs of domestic violence victims just do not receive adequate attention and support. The frustration of the many women participating in this study was eloquently expressed by one woman:

The whole nation was in shock because of September 11 and I could understand why, it was a horrible thing. But, when you look at things from a perspective of where I was coming from, 4000 of us die every year and you don't see a nation screaming about all of us dying. You don't see people outraged over it, it's swept under the carpet, forgotten about and put behind, and nobody wants to deal with the issue that we're being abused and killed every day, and then we fight back or kill them and we go to jail and stay there and rot. Or you get in a system where it's a Good Old Boys network like where I was in, and nothing that I did... I was told that, "you ladies get these boys mad and they hit you, then you call for us to help you. It's your fault."

Finally, though, all discussions with these women eventually returned to one theme: Women need to feel safe, and to feel that they are protected by the institutions charged with keeping them safe. One focus group ended on a chilling note, which is a fitting summation for this chapter:

Here we are, four women from four different backgrounds, and every one of us is a sitting duck, waiting to be killed. And, it's just a question of which one of us you're going to be reading about first when you pick up your newspaper one morning.

Chapter VII

Summary and conclusions

In this chapter, we review and highlight the key findings from the telephone survey, contextual analysis, and focus groups and interviews, and consider their implications for policy and practice. We conclude with recommendations for further research in this field.

Key findings and implications

Overall, the results of the telephone survey were quite consistent with the findings of the focus groups and interviews: Crime victims generally have many of their needs met by their informal support networks (with the exception of domestic violence victims), and their biggest unmet needs center around wanting more information from law enforcement and criminal justice agencies regarding case status. We address this unmet need later in this chapter; first, however, we turn to findings on the impact of the victimization.

Crime Impact

Much of what we found about behavioral changes following victimization has been documented by other researchers and is familiar to professionals working with crime victims. This study contributes more detailed information than previously available regarding the financial impact of crime on victims. A significant percentage of victims had out-of-pocket expenses as a result of the crime. On average, those with out-of-pocket expenses paid \$656 for health expenses, \$1307 for property repair or replacement, and lost \$1489 in wages for missed work. Few of these expenses were reimbursed in any way; mostly, victims covered the expenses themselves. These data, as well as our finding that 80% of victims who incurred expenses were not aware of Crime Victims' Compensation, suggest that victims are not consistently receiving information about compensation. If all of these victims did not receive information because they were ineligible, that would imply that the program's criteria are so strict that they render

80% of expense-incurring victims ineligible. Given that some people have severe problems as a result of crime-related expenses – e.g. their credit rating is affected or they are threatened with eviction or foreclosure – Crime Victims Boards and others need to consider ways for more of these costs to be borne by someone other than the victim.

Victim Needs

Victims generally report that their need for someone to listen to them when they are upset is met by their informal support networks. Most do not report turning to formal service agencies to meet that need. While we recognize that professional counseling entails more than “someone to listen to me talk when I am upset,” our data tend to suggest that findings of previous research remain valid: While many victim assistance programs primarily provide emotional support and counseling, victims’ greatest unmet needs may lie in other areas. In this study, the most commonly cited unmet needs pertain to getting information about the status of the law enforcement/criminal justice case. This was true both for survey respondents and for focus group and interview participants. Additionally, some groups such as non-white victims had particular needs for assistance with tangible problems such as needing to get locks changed and doors replaced. These needs, again, may be less likely to match the services provided by victim assistance programs. While we would not advocate at this point that programs eliminate or curtail their counseling services, they should consider ways to enhance their non-counseling services in accordance with the large proportions of victims who need such services. This is especially true for programs serving neighborhoods with high numbers of non-whites and/or burglary victims. Adding or supplementing service components that aid victims with their immediate and tangible post-crime needs is an important way to address service gaps for these victims and others.

Another common theme that arose in the qualitative data collection efforts was that victims of less violent or non-violent crimes need to have what happened to them be acknowledged. These victims felt that their experiences were sometimes minimized by police. Recognizing constraints on already taxed law enforcement and criminal justice systems, it is possible that training police in sensitivity to this issue would help mitigate this experience for victims. With the great increase in attention to police responses to victims of domestic violence and sexual assault in recent years, it may be that victims of “less serious” crimes are experiencing something of a backlash, as police relegate them to a lesser status.

Victim rights

As we noted earlier, we have limited information on this topic because it was not included in the survey. However, what we have heard in the focus groups and interviews suggests that victims are not consistently informed about their rights. The term did not even seem familiar to most of the victims with whom we spoke. Additionally, victims consistently complained about not being notified about hearings and other key dates, and victim notification is perhaps the most universal right across the fifty states. It is possible that our findings in this area would be somewhat different had we spoken to victims sooner after the crime; at more than a year post-crime, victims simply may not remember everything they were told by criminal justice professionals. However, the total lack of familiarity with the term for most victims was striking, and suggests that there are still many victims who are not being informed about their rights.

Other key findings

In our exploration of what factors predict how well victims’ needs are met, we can summarize our findings pithily: Race matters, and outreach strategy appears to matter as well.

Race. Consistently, race emerged as a determinant of how many unmet needs a victim is likely to have. White victims and non-white victims report the same number of met needs, but non-whites have twice as many unmet needs as do whites. This finding holds true even after controlling for income. The primary differences between the two are not in the area of emotional support but, rather, are in areas of practical support (e.g. property repair and replacement) and getting information in various domains. The racial disparity is at its peak in urban settings, where non-white victims report an average of 4.1 unmet needs, compared to the average of 1.75 for whites. Also, non-white burglary victims have especially high numbers of unmet needs. Victim assistance programs need to consider ways to close this racial gap. This might involve better outreach to non-white communities, especially in urban settings.

It must be acknowledged here that one of our urban sites was plagued by racial tensions for much of the last several years; in fact, major race riots occurred at one point during the study period. There was also significant conflict between the Black community, in particular, and the police department. This may have skewed results somewhat, and racial disparities might be less pronounced at sites with better race relations. However, not all of the identified unmet needs – including more than twenty needs which non-whites were significantly more likely to define as an unmet need than were whites -- were those typically met by police or the criminal justice system.

We strongly recommend that further research be conducted in this area, to identify both the causes and possible solutions for this racial disparity in needs being met. One limitation of this study is that our group of non-white respondents was too small to be further broken down into subgroups. However, different groups of non-whites are likely to have different experiences and these need to be explored. Additionally, we have very limited information on non-English

speakers (see discussion of domestic violence, below), and these, too, need to be included in research targeting non-white populations.

Outreach strategy. The results of our contextual analysis suggest that active individualized outreach by a victim assistance program is associated with greater victim awareness of the program. Fifty-one percent of respondents in active sites knew about the programs, compared to only 23% in passive sites. Active outreach is also associated with more victims having contact with the service program, and having more needs met through the service program. It is particularly interesting, though, that there is no evidence that active outreach translates into fewer unmet needs. As noted earlier, it is possible that active outreach sites better identify higher-need victims, or that they help victims to identify a broader range of needs than the victims might name on their own. It is also possible that programs in areas with victims who are likely to be higher-need for demographic reasons are simply more likely to develop active, as opposed to passive, outreach strategies. This is an area worthy of further research efforts, to explore the complex relationships between these variables and address questions of causality.

This discussion brings us to a key point regarding service programs: Even though outreach strategy appears to make a difference, victim assistance programs are still reaching relatively small number of victims, and meeting a relatively small number of needs. Some explanations for this may be:

- the misperceptions of the programs held even by victims who are in contact with them, such as believing that program does not provide counseling, or help with other issues.

- Lack of awareness of the program, which was the case for the majority of our sample. Even with active outreach, half the victims in those sites still were not aware of program's existence.
- Programs' services may simply not match the needs of victims.
- Programs typically reach out to victims several weeks after the crime; at that point, victims' immediate needs may no longer be pertinent, and people may have already turned to others such as family members to help them with longer-term needs.

The first two explanations above could be addressed with better coordination with police and prosecutors to ensure consistent referral practices, and better materials to provide to victims regarding the full range of services available. Additionally, our data point to the importance of phone calls to victims rather than reliance on outreach letters; victims appear to recall the phone calls better and feel more responsive to them.

The latter two explanations, however, would require bigger changes in the practices of victim assistance programs. Structurally, it may be difficult for victim assistance programs to receive information about a crime in the first 24 hours after it occurs, when many of the needs (e.g. repairing broken doors) are likely to be pertinent. Nonetheless, a pilot program which identifies victims even of non-violent crimes within 24 hours, contacts them by phone, and completes a thorough needs assessment might yield more insight for programs as to how they can meet more needs for more victims.

Special needs of domestic violence victims

The most compelling finding from our qualitative research with victims of domestic violence is that despite years of reform, police and judge training, and other interventions, the

vast majority of these women still do not feel safe. They are still having negative experiences with the police and negative experiences in the courts. Given all of the improvements and innovations in law enforcement and criminal justice handling of domestic violence cases, it is disheartening to hear this.

In considering ways to address this issue, the site that proved an exception to this rule in our research can be highly informative. It is a small rural site with a comprehensive domestic violence agency that describes itself as “grass-roots” but has been around for 21 years. This agency plays a key role in a highly coordinated and cohesive network of agencies – public and private – involved with domestic violence victims. The domestic violence network holds team meetings once every 2-4 weeks, and discusses individual cases as well as general policy issues. The nature of interconnectedness at the site is so intense that when the local prosecutor did not have enough money in his budget to send some of his assistant district attorneys to a domestic violence training on the East Coast, the domestic violence agency director gave him money from her budget to send them. This extraordinary cooperation and coordination clearly has an impact on the victims served by the network. Women in this site felt safe and protected, and trusted police and courts to treat them well. This case study clearly proves the value of a coordinated community response to domestic violence.

Unfortunately, domestic violence victims at the other sites in this study fared less well. A number of them told us that their abusers’ social or political connections with police and judges – especially at smaller sites -- interfered with the women’s safety on a regular basis. This finding suggests the need for some independent oversight of how domestic violence cases are handled at police, prosecutorial and judicial levels. We also heard more general dissatisfaction with perceived judicial leniency, which suggests the need for:

- more and better education of judges regarding handling domestic violence cases
- more and better coordination between judges handling domestic violence cases and judges handling custody cases, to ensure that custody orders don't endanger women. The model of single courts and/or judges handling all matters relating to the same family could help to mitigate this problem

Like the other victims who participated in this study, victims of domestic violence do not feel adequately informed about the status of the criminal case against the abuser. This is probably the group that has the biggest safety investment in being kept informed, and courts need to recognize that and make it a bigger priority.

Domestic violence victims also suffer from a lack of housing options and lack of low-cost legal services. The legal service shortage was true across sites, and needs to become more of a funding priority nationally and locally.

Given the difficulty that women experiencing domestic violence have in sharing their experiences with their potential support network, it is incumbent upon professionals in all fields to provide them with a positive experience when they choose to seek support or assistance. With respect to clergy, victims report mixed experiences. This fact suggests the need for more and better education for religious leaders regarding domestic violence and how to respond to the needs of victims. There has been a growing movement in this direction in the past decade, and our findings confirm the importance of continuing with this work.

More generally, the victims themselves suggested that more public education is needed, both so that other battered women can know that they are not alone and that they have options, and so that family and friends can learn how to respond effectively, to meet the needs of their daughters, sisters, and friends.

Immigrant Latina victims. Though we were unable to include non-English speakers in our phone survey for financial reasons, we were fortunate to have a group of nine Spanish-speaking women (mostly from Mexico) participate in a focus group for women who have experienced domestic violence. This group was held in a rural site with excellent services, and all of these women were clients of the local domestic violence program. Thus, they may be better served than many of their counterparts at other sites. Nonetheless, these women reported significant problems in accessing services. Foremost among these was their inability to obtain financial assistance because they did not have “legal papers.” Additionally, even in this area with a large population of migrant farm workers, the women could not always find Spanish speakers in local agencies and service programs. They also reported encountering prejudice and discrimination.

Realistically, the ability of public agencies to address all of these needs is likely to be constrained by mandated eligibility criteria for aid, linked to the legality of immigrant status. This suggests the need for aid sources to develop “outside the system,” in a grass-roots fashion.

While these Spanish-speaking women faced unique barriers, they also described unique strengths. Two in particular are noteworthy: First, this group reported more consistently positive experiences with their clergy than did other groups. Further exploration into this issue – whether the clergy are responding more positively, or simply being perceived as such by the women, and why – could inform efforts to help other clergy respond more effectively to women experiencing domestic violence.

Second, the Spanish-speaking women noted that, because they often had no family of their own here, they relied on the abuser’s family even after they had left the relationship. They were more likely than their English-speaking counterparts to receive financial and other

assistance from the abuser's family. Here, again, further study of this issue and the cultural values behind it could provide valuable insight into the experiences of both Spanish-speaking women and other groups, and identify ways that informal support networks can be strengthened to provide more support for these women.

Youth victims

The most encouraging finding regarding youth victims was that most of their needs appear to be met, primarily by an informal network of family and friends. A few issues stand out for further exploration and consideration, though:

- Almost a third of youth missed school as result of victimization, most commonly because they were too upset to go.
- Both parents and youth reported some school-related and social changes following victimization, including more fighting and arguing with peers and changes in school performance and/or attendance. This finding suggests the need to sensitize schools to issues related to victimization.
- Parents are mostly unaware of the existence and services of victim assistance programs, and therefore may not be accessing needed services for their children.

Methodological/Design limitations

While this study has advanced our understanding of victim needs and help-seeking behavior, there are some issues inherent in our design that constrain our ability to interpret some of our results. First, virtually all our data come from victims who reported the crime to the police. While we tried to recruit non-reporters for the focus groups and interviews, they were very difficult to find; local advertisements and flyers proved ineffective at reaching these victims. We recognize that non-reporters may have different help-seeking patterns and needs than reporters, and believe that it is important to reach these victims and hear from them directly.

The best way to reach non-reporting victims is likely to be through a random-digit-dialing survey. Our experience has demonstrated that developing one exclusively for this purpose is very costly; however, incorporating questions about needs and help seeking into an existing effort such as the National Crime Victimization Survey could provide the same information with a better cost-benefit ratio.

Our study also included a limited population of victims. We selected only four types of crimes so that we could make meaningful comparisons between groups; other studies might focus specifically on other crime types that were not represented in this study. Additionally, our study reached victims more than a year, and sometimes two years after the crime. Some of this time lag was built into our design, and some was caused by delays in the start of our field period. We recognize that responses might have been different had we spoken to victims closer to the crime itself. Our suggestion, earlier in this chapter, that victim assistance programs develop pilot programs to conduct needs assessments shortly after the crime would address this knowledge gap, and complement our retrospective analysis.

Finally, our use of number of needs as a primary indicator carries its own complications. We fully recognize that not all needs have equal valence, or are equally important. Thus, a pure additive index such as numbers of needs does not provide us with complete information about whether the bulk of victims' most important needs are being met or not. The fact that the focus groups and interview respondents spontaneously emphasized the same unmet needs that showed up in the highest percentages in the survey suggests that there is some correspondence (albeit not a perfect one) between the percent of people listing a need as unmet and the importance of that need. Nonetheless, we caution readers that the two are not completely equivalent.

In conclusion, our results are both encouraging and disheartening for the victim assistance community. The good news is that many of victims' key needs are being met and, for most victims, met well by their informal support networks. The bad news is that certain groups, particularly non-whites, burglary victims, and domestic violence victims, still have significant numbers of unmet needs. Many of these victims are not yet being reached by victim assistance programs. It is our hope that this research can facilitate the victim assistance community's ongoing efforts to reach and serve these victims in need.

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APPENDIX I

Weighting and Variance Estimation

The sample estimates in this study do not reflect any specific population. At best, the sample from each site is intended to represent crime victims from that site, but the combination of data across sites is some arbitrary weighted average across the sites that are *not* a function of the population of each site. In reality, the sampling rates for different crime types vary within a site, so that without highly variable weights the sample does not even represent crime victims across crimetypes. The purpose of the study is to make comparisons between passive and active outreach and between urban, suburban, and more rural counties. This can be validly done without using sample weights that reflect the probabilities of selection of crime victims. Thus, we use an arbitrary base weight for all victims of 1 .0.

Weights were determined for adults, for youths, and for parents of youths. Weighting was done separately for these three groups, using the same methodology. There were two steps in the weighting procedure, one to standardize across urbanicity type and between outreach type, and one to prevent SPSS-generated variance estimates from being too low.

Some crime victims had more than one record in the police records because they reported more than one crime victimization. These persons had higher probabilities of selection as a result. We did not apply weight adjustments to account for this since we did not in general know when this occurred. In this sense, the weights are not quite correct, as they are more appropriate for a sample of crime *victimizations* than they are for crime *victims*, our true unit of analytical interest.

Where there were police records for more than one person in a household and more than one case was sampled from a household, we retained only one case by randomly dropping all but one sampled case. This reduced the probability of selection for each person in the household. We did not make a weighting adjustment for this, since we were not able to tell when this was done in those communities where local people rather than Westat selected the sample.

In most surveys conducted by Westat, a nonresponse adjustment is part of the weighting process. Such an adjustment may reduce the bias resulting from nonresponse. For this survey, we did not have information on nonrespondents that could profitably be used for nonresponse adjustment, and thus this weighting step is not done. This is in no sense incorrect nor does it cause bias. The lack of nonresponse adjustment simply means that we have been unable to do anything to reduce bias caused by nonresponse.

The first step in the weighting adjustment was to account for different distributions of crime types among communities and for different distributions across communities among crime type. This is desirable to ensure that differences we observe between crime type are not actually caused by different distributions among communities. We standardized the weights to account for different distributions of crime type. As an example of how the weighting factor was computed, adult assault victimizations constitute 22.0% of all adult victimization interviews in Seattle whereas adult assault victimizations constitute 16.5% of all adult victimization interviews across all sites. That is, assaults are over-represented in Seattle compared to other sites. The

weighting adjustment factor used for Seattle assault victims is $16.5/22.0 = .75$. Use of adjustment factors calculated in this way properly accounts for both different distributions of crime type among communities and for different distributions across communities among crime type. There is no need to have separate weighting adjustment factors to adjust for the two different disparities.

The second step in the weighting adjustment was for the purpose of producing better variance estimates when using SPSS. This adjustment does not at all affect estimates for characteristics. This survey is not a complex clustered or stratified sample—it is effectively close to a simple random sample. However, the variation in weights resulting from the first step in the weighting adjustment increases the variance of sample estimates, making the “effective” sample size smaller than the actual sample size. SPSS calculates variances assuming that there is a simple random sample, with sample size being the sum of the weights. Thus, if we reduce all weights to reflect the effective sample size, SPSS variances will be based on the appropriate sample size. A single weighting adjustment factor was calculated and applied for adults, for youths, and for parents. The factor for adults is $1/1.19 = .84$. The value 1.19 is calculated from the relative variance of the weights. The variance estimates that are obtained when the factor .84 is used is “better” in the sense that SPSS variance estimates are too low if the factor is not applied.