

# **Victim Service Programs for Violence Against Women: Links With Other Community Agencies**

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2004  
NCJ 199725

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This report is based on a full report, *Victim Service Programs in the STOP Formula Grants Program: Services Offered and Interactions with Other Community Agencies*, by M.R. Burt, J.M. Zweig, K.S. Schlichter, and C. Andrews. Washington, DC: Urban Institute, 2000. The full report can be accessed at [www.urban.org](http://www.urban.org).

Both reports were supported under award 99–WT–VX–0010 from the U.S. Department of Justice, National Institute of Justice. The nonpartisan Urban Institute publishes studies, reports, and books on timely topics worthy of public consideration. Findings and conclusions of the research reported here are those of the authors and should not be attributed to the Urban Institute, its trustees, or its funders, and do not reflect the official position or policies of the U.S. Department of Justice.

Public attention to the needs of victims of domestic violence increased dramatically during the 1980s. Estimates show that in the late 1990s, there were about 1,800 programs for women who had experienced domestic violence, of which 1,200 were shelters (Garner and Fagan, 1997). A study by Gornick, Burt, and Pittman (1985) concluded that about 600 victim service programs existed for sexual assault—reduced from a high of about 1,000—after the first 10 years of rape crisis center development. No more recent estimate is readily available.

Despite the large number of victim service programs, little evaluation research addresses the impact of these programs on women (Garner and Fagan, 1997; Koss, 1993). A major goal of such programs is the development of coordinated community approaches to addressing the problem of violence against women (Clark et al., 1996). Victim services expanded before research was conducted on what works best, say Garner and Fagan (1997), who contend that evaluating the impact of victim service programs is crucial if we are to learn how best to serve these women and whether any current practices have unintended negative consequences.

The STOP (Services, Training, Officers, Prosecutors) Violence Against Women Formula Grants Program is a major Federal initiative that has further stimulated the growth of programs that serve women who are victims of violence. Its long-term goal is to promote institutional change so that women will encounter a supportive and effective response from the criminal and civil justice systems and from community service agencies. STOP is authorized by Chapter 2 of the Safe Streets Act, which, in turn, is part of the Violence Against Women Act (VAWA–I), Title IV of the Violent Crime Control and Law Enforcement Act of 1994 (Public Law 103-322).

In 1999, the National Institute of Justice (NIJ) funded a study by the Urban Institute that would assess whether STOP’s financial support for direct victim services offered through private nonprofit victim service agencies improved the well-being of women victims of violence. This project is the only full-scale evaluation funded by NIJ to focus on the impact of STOP-funded victim services. This paper, part of the Urban Institute project, describes how victim service programs interact with other agencies in their community.

## **Methods**

### **Samples and Procedures**

STOP funds are distributed through grants to the 50 States, the District of Columbia, and the 5 territories. States then distribute funds to subgrantees to administer projects. The subgrantees are required to submit a Subgrant Award and Performance Report (SAPR) to the States, which, in turn, submit the report to the Department of Justice’s Office on Violence Against Women. At the time of this study, the States had reported on awards made through approximately 6,500 subgrants. Many STOP programs received additional STOP subgrants in the years following their initial funding, so the 6,500 subgrants translated into significantly fewer discrete projects (Burt et al., 2000).

Victim service programs were sampled from the SAPR database according to a number of criteria:

- ◆ Victim service programs, rather than individual subgrant reports, were sampled because many victim service programs are refunded over a number of years.
- ◆ Only private nonprofit victim service agencies were included.
- ◆ Victim service programs must have had STOP funding to provide direct victim services for at least 2 years and have or had STOP subgrants of at least \$10,000.
- ◆ A subset of victim service programs was sampled so that at least 10 interviews were completed in 8 States (Colorado, Illinois, Massachusetts, Pennsylvania, Texas, Vermont, Washington, and West Virginia).

Representatives from 200 victim service programs with STOP grants participated in an indepth telephone interview and completed a faxed questionnaire. Eighty-six percent of the agencies interviewed focus their services primarily on domestic violence and 13 percent focus primarily on sexual assault. The agencies provide different types of direct services to women victims of violence, such as legal/court advocacy, comprehensive safety planning, counseling, individual advocacy, and medical advocacy.

## **Measures**

Data from the programs in the sample were collected using a telephone interview and a faxed questionnaire. The questionnaire covered such topics as budgets, funding, employees, and number of victims served. The interview covered such topics as the nature of the agency's STOP-funded program, respondents' experiences with State STOP agencies, and changes in the justice system since STOP funding became available. In addition, outreach strategies, the ability of the community to meet the needs of women victims of violence, and the extent to which the STOP-funded victim service program works with other agencies in its community were addressed.

After interviews were completed, two trained interviewers rated each community based on victim service program reports on how well agencies communicate, coordinate, and collaborate in the community and whether or not the agencies in the community work together to provide a coordinated community response.

## **Findings**

### **Service Networks and Interactions**

For this study, respondents were asked to describe the service network in their communities. To do so, they listed all the types of agencies that provide services to women victims of violence, as follows:

- ◆ Law enforcement agencies were mentioned by every respondent.

- ◆ Prosecution agencies were mentioned by 99 percent of respondents.
- ◆ Other public and private nonprofit victim service agencies, such as health care facilities, governmental social services, mental health and substance abuse agencies, or legal aid programs were mentioned by 70 to 90 percent of respondents.
- ◆ Courts, probation/parole offices, or agencies that had a special focus on serving racial/ethnic, language, or other minority populations were mentioned by 30 to 55 percent of respondents.
- ◆ Governmental victim service agencies or arrangements with judges were mentioned by 15 to 25 percent of respondents.

The vast majority of program respondents also reported interacting with key service network players to provide services to women victims of violence: all of them reported interacting with at least one law enforcement agency, 97 percent with at least one prosecution agency, and 95 percent with at least one other victim service agency in the community.

Despite the array of services available to women victims and the interaction of victim service programs with other agencies in the community, not all agencies were involved in close coordination. Respondents were asked to identify two primary partner agencies in their community with which they had the most or most meaningful contact to address violence against women. Law enforcement (named by 65 percent of respondents) and prosecution (named by 42 percent) were identified most frequently. In fact, 26 percent of program respondents named both law enforcement and prosecution agencies as those agencies they partnered with most to help women victims of violence. Other agencies that partnered with victim service programs in the sample included governmental social services (25 percent); other nonprofit, nongovernmental victim service agencies (22 percent); courts or judges (16 percent); legal aid (11 percent); health care agencies (8 percent); and mental health agencies, substance abuse agencies, probation/parole agencies, governmental victim service agencies, and community service agencies (less than 4 percent each).

Respondents were asked about the extent to which they work with law enforcement, prosecution, other victim service programs, and their partner agencies. They described the levels of staff who were involved in the joint work, whether or not the work involved formal procedures, and whether types of interaction with agencies had changed since the introduction of STOP funding. Victim service programs reported that employees at every level (frontline staff, middle management, and agency leaders) interacted with primary partner agencies. Formal policies and procedures were followed most often with law enforcement (51 percent), followed by prosecution (31 percent); somewhat fewer victim service programs had formal arrangements with other victim service agencies (27 percent).

To understand how STOP funding has influenced the interaction between agencies, programs reported on five specific types of interaction: (1) contact of any type, (2) helping women deal with the other agency, (3) referrals of women to the victim service program by the other agency, (4) coordination of work between the two agencies, and (5) joint planning or funding between the two agencies or an institutionalized commitment to work together. Most agencies reported

positive changes in these types of interactions since the institution of STOP funding. Victim service programs reported increased interaction with law enforcement (between 81 to 89 percent reported increases for each of the five types), with prosecution (83 to 90 percent), with other victim service agencies (81 to 85 percent), and with other types of agencies (60 to 95 percent). More than half the reported changes were attributed to the victim service agency's STOP-funded program. Between 11 and 31 percent of the reported changes were attributed to other STOP-funded programs in the community.

### **Communication, Coordination, Collaboration, and Coordinated Community Responses**

Participants were asked to describe the activities they performed with their two identified primary partner agencies to serve women victims of violence. Researchers asked behaviorally focused questions to help narrow and define what activities were included in each level of interaction (communication, coordination, collaboration, and coordinated community response). The terms "communication," "coordination," "collaboration," and "coordinated community response" are often used in the domestic violence and sexual assault field, yet it is often unknown what exactly people mean when they say they "coordinate" activities with another agency.

Almost all respondents *communicated* with their primary partner agencies, regardless of the type of partner agency. They shared general information about violence against women, had frequent phone contact, held informal meetings, and referred clients to one another (86 to 100 percent reported these four measures). After the interview was completed, two members of the research team rated the overall community on how and to what extent victim service programs communicated with other agencies in the community, taking into account answers from both the interview and faxed questionnaire. The communities were rated on a scale of 1 (no communication) to 4 (positive communication existed with most or all other agencies in the community). Sixty-three percent of communities were rated at the highest level of communication, and none was rated at the lowest level.

Victim service programs often *coordinated* their activities with their primary partner agencies. Ninety-four to 99 percent of agencies reported helping primary partners on an as-needed basis with specific cases and facilitating referrals between agencies. Training was also common between agencies. Victim service programs were more likely to *provide* cross-training to law enforcement (95 percent) than to prosecution (73 percent) or other types of agencies (72 percent). But they were more likely to *receive* cross-training from other victim service agencies (78 percent) than from law enforcement (61 percent) or prosecution (56 percent). After the interview was completed, two members of the research team rated the overall community on how and to what extent agencies coordinated with each other in the community, taking into account answers from both the interview and faxed questionnaire. The communities were rated on a scale of 1 (no coordination) to 3 (victim service programs were coordinating with most or all other agencies in the community). Fifty-one percent of communities were rated at the highest level of coordination and 6 percent were rated at the lowest level.

Victim service programs also *collaborated* with primary partner agencies. The majority participated in task forces with their primary partners (80 to 83 percent with law enforcement and prosecution agencies and 91 percent with other victim service agencies) and strategized about how to reach women victims of violence (68 to 83 percent). Fewer victim service programs—although still more than half—influenced one another’s agency protocols, provided integrated services to victims, or employed a regular feedback mechanism to assess their collaborative work that helped them resolve problems and shape new developments. Of those respondents who named law enforcement as a primary partner, 36 percent participated on a first-response team with them. Of those who named prosecution as a primary partner, 26 percent reported interacting with them on a first-response team. Communities also were rated for their success at collaborating on a scale of 1 (no collaboration) to 3 (victim service programs collaborated with most or all other agencies in the community). Only 18 percent of communities were rated at the highest level of collaboration and 36 percent were rated at the lowest level.

Finally, communities were rated as to whether or not they achieved *coordinated community responses*. To be rated as having a coordinated community response for domestic violence—the highest level of interaction—a community’s law enforcement, prosecution, and the victim service program *all* had to be interacting at the level of collaboration. For sexual assault the same criterion applied, but also included the medical community. Only 15 percent of communities were rated as having a coordinated community response.

### **Role of Task Forces**

Researchers examined the relationship between a community’s ratings on “communication,” “coordination,” “collaboration,” and “coordinated community response,” and the extent to which it participated in collaborative activities. Participation in collaborative activities was assessed based on task force participation. Task forces are a common way to promote joint work and activities. Most victim service agencies (72 percent) participated with both primary agencies in some form of a task force that focused on violence against women in their community. Every type of collaborative activity or arrangement (e.g., influencing one another’s agency policies, participating on a first-response team or multiagency team, having joint funding, having joint mission statements, providing integrated services, strategizing about approaches to violence against women, and providing feedback to one another about the functioning of the joint work) was more likely to occur when all three agencies participated on a task force together. Communities rated as having a “coordinated community response” were more likely to cite the presence of each activity or arrangement than were agencies that did not have a coordinated community response or that did not participate on a task force with both primary agencies.

However, more than half of the victim service programs that did *not* serve on a task force with either of their primary agencies still received the highest rating on communication, and about 14 percent received the highest rating on coordination. In addition, between 21 and 25 percent of them engaged in collaborative activities with their two primary agencies, including strategizing about addressing violence against women in the community, influencing one another’s protocols, providing integrated services to women, and providing feedback to one another on their joint work. These accomplishments are not trivial and can be achieved in communities that lack a task force.

## Implications for Researchers

The findings demonstrate the advantages in clarity when researchers use behaviorally focused questions in their attempts to understand how communities interact and conduct joint work. By asking about specific activities such as training or facilitating referrals, researchers are able to define coordination, as well as other levels of interaction, specifically.

## Implications for Practitioners

Many victim service programs that receive STOP funds work with other agencies in their community to serve women victims of violence, and many work closely with law enforcement and prosecution. Most victim service programs attributed increases in interaction to their STOP-funded program or another STOP-funded program in their community.

Task forces can be useful forums for agencies to work together, particularly in those communities rated as having a “coordinated community response.” However, the existence of a task force does not guarantee joint work or collaborative activities in communities. Likewise, many communities without task forces still participate in collaborative activities.

## References

- Burt, M.R., Zweig, J.M., Schlichter, K., Kamyra, S., Katz, B.L., Miller, N., Keilitz, S., and Harrell, A.V. (2000). *2000 Report: Evaluation of the STOP Formula Grants to Combat Violence Against Women*. Prepared for the National Institute of Justice, forwarded to Congress. Washington, DC: Urban Institute.
- Clark, S.J., Burt, M.R., Schulte, M.M., and Maguire, K. (1996). *Coordinated Community Responses to Domestic Violence in Six Communities: Beyond the Justice System*. Prepared for the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Washington, DC: Urban Institute.
- Garner, J. and Fagan, J. (1997). “Victims of Domestic Violence.” In Davis, R.C., Lurigio, A.J., and Skogan, W.G. (eds.), *Victims of Crime*, 2d ed. (pp. 53–85). Thousand Oaks, CA: Sage Publications.
- Gornick, J., Burt, M.R., and Pittman, K. (1985). “The Structure and Activities of Rape Crisis Centers in the Early 1980s.” *Crime and Delinquency*, 31(2), 247–268.
- Koss, M.P. (1993). “Rape: Scope, Impact, Interventions, and Public Policy Responses.” *American Psychologist*, 48(10), 1062–1069.