

Review of best practices for ICJI program areas and funding streams

Victims of Crime Act (VOCA)

A research partnership between the Indiana Criminal Justice Institute and the Indiana University Center for Criminal Justice Research











ICJI/CCJR Research Partnership

For more than a decade, the Indiana University Center for Criminal Justice Research (CCJR) has partnered with the Indiana Criminal Justice Institute (ICJI) to address critical issues related to Indiana's justice systems including: *crime prevention; drug and alcohol abuse associated with crime; law enforcement; sentencing and corrections;* and *traffic safety*. On behalf of ICJI, CCJR conducted program assessments of 12 federal grant programs between January 2006 and June 2008. In an effort to further assist ICJI in improving criminal justice programming and policy development in Indiana, CCJR entered into a two-year research partnership (beginning in June 2011) to perform critical data collection and analytical tasks in two broad research areas identified as priorities by ICJI. The scope of work includes 1) a review of best practices for all Victims Services division programs and primary program areas under ICJI's Drug and Crime Control division and Youth Services funding streams, and 2) a statewide justice data records assessment that will serve as a first step in developing a statewide crime and justice data collaboration that could emulate the nationally recognized traffic safety records collaboration facilitated by ICJI. This work will result in a series of technical reports and topical briefs.

Indiana University Center for Criminal Justice Research

The Center for Criminal Justice Research (CCJR), one of two applied research centers currently affiliated with the Indiana University Public Policy Institute, works with public safety agencies and social services organizations to provide impartial applied research on criminal justice and public safety issues. CCJR provides analysis, evaluation, and assistance to criminal justice agencies; and community information and education on public safety questions. CCJR research topics include traffic safety, crime prevention, criminal justice systems, drugs and alcohol, policing, violence and victimization, and youth.

Indiana University Public Policy Institute

The Indiana University Public Policy Institute is a collaborative, multidisciplinary research institute within the Indiana University School of Public and Environmental Affairs (SPEA). Established in the spring of 2008, the Institute serves as an umbrella organization for research centers affiliated with SPEA, including the Center for Urban Policy and the Environment, and the Center for Criminal Justice Research. The Institute also supports and the Indiana Advisory Commission on Intergovernmental Relations (IACIR).

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EXECUTIVE SUMMARY

In an effort to assist the Indiana Criminal Justice Institute (ICJI) in improving criminal justice programming and policy development in Indiana, the Center for Criminal Justice Research (CCJR) entered into a two-year research partnership (beginning in June 2011) to perform critical data collection and analytical tasks in two broad research areas identified as priorities by ICJI. The scope of work includes 1) a review of best practices for each ICJI program area and 10 major funding streams, and 2) a statewide criminal justice data assessment.

This report describes best practices for subgrants awarded under the Victims of Crime Act (VOCA) funding stream administered by ICJI. Authorized through the Victims of Crime Act of 1984, VOCA is administered by the Office for Victims of Crime (OVC) within the Office of Justice Programs, U.S. Department of Justice, and funding supports a broad range of services. States that receive VOCA funds have four years to expend an award. In Indiana, over the three-year period between FFY 2009 and FFY 2011, ICJI received an average of \$8.2 million each year from the OVC. Through the Victim Services division, for the 2009, 2010, and 2011 operating periods and using carry-over funds from earlier federal grants, ICJI has awarded \$26.2 million in VOCA subgrants to an annual average of 176 agencies and organizations throughout the state during the three-year period.

For this assessment, CCJR researchers consulted relevant materials from ICJI, including the VOCA subgrantee solicitation document and 2011 funded VOCA subgrantee applications. To capture the types of victims serviced and particular services provided by VOCA subgrantees, CCJR reviewed 2010 subgrantee fiscal reporting with supplemental information provided by ICJI for new award recipients in 2011.

According to federal guidelines, VOCA subgrants must be used to address specific purpose areas, including the following:

- Provide services that respond to the emotional and physical needs of crime victims
- 2. Provide services that assist primary and secondary victims of crime to stabilize their lives after victimization
- 3. Provide services that assist victims to understand and participate in the criminal justice system
- 4. Provide services that give victims of crime a measure of safety and security
- 5. Help victims learn about, apply for, and/or obtain crime compensation benefit

CCJR's assessment of 2011 funded VOCA applications found that a substantial majority (82 percent) of subgrantees selected three or more of the above purpose areas. With regard to types of victims served by VOCA subgrantees, the majority of grants support 1) domestic violence programming, 2) providers that offer services to victims of child sexual or child physical abuse, and 3) organizations that serve victims of sexual assault. Based on available subgrantee reporting, the majority of VOCA

subgrantees provide a wide range of services that address these areas.

This assessment of best practices is structured according to four broad categories of VOCA services, including 1) general services, 2) victim advocacy, 3) crisis response/intervention, and 4) mental health services that cover 14 distinct types of services. Each overarching service section includes discussion of the nature of services provided and a review of relevant literature regarding best practices. CCJR's analysis of best practices resulted in a number of key observations and recommendations summarized below that could improve overall VOCA-funded programs.

General Service Provision

- Require subgrantees to describe and document how they are assisting victims with emergency financial assistance, information and in-person referral, telephone contacts and referral, follow-up contact, and personal advocacy. The funding application also should include explicit and directed questions on whether and how the subgrantee is employing any best practice in general service provisions to victims of crime.
- 2. Provide subgrantees a model intake form for assisting victims with victim compensation. Currently, the descriptions for this service on the application vary greatly in length and specificity. Since this is a required purpose area for all subgrantees, there should be some level of uniformity for evaluation.

Victim Advocacy

- 3. Provide evidence that service delivery is victim focused.
- 4. For law enforcement agencies and court appointed special advocates, document collaborations with other entities in service provision.
- 5. For prosecutors, provide evidence of ensuring that victims are aware of their rights.
- For CASA providers, provide evidence of internal and external evaluations.

Crisis Response/Intervention

7. Require subgrantees to document how the crisis response/intervention programs are actually carried out. In the current grant applications, subgrantees who engage in crisis response/intervention typically provide some data on number of victims served, units of service, number of service hours. However, most do not discuss whether and how they employ any best practice in providing crisis counseling, crisis hotline counseling, and/or shelter/safe houses. The application should be amended to require that subgrantees document their use of best practices.

Mental Health Services

- 8. Clearly describe the nature of treatment services provided.
- 9. Document evidence supporting the efficacy of their treatment approaches in relation to the disorders subgrantees treat. Appropriate treatments for mental health issues experienced by crime victims depend on individual factors. Professional standards exist for treating disorders such as post-traumatic stress disorder, depression, and substance abuse which often follow victimization.
- 10. Require subgrantees to demonstrate that treatment approaches are tailored according to victimization type.
- 11. Clearly identify the length of services provided. Because subgrantees may provide crisis counseling or longer term treatment, providers should clearly identify the length of services provided.

General—Best Practice Considerations across Services

- **12.** Clearly identify the length and nature of treatment services being provided. This includes distinguishing between crisis and ongoing counseling and individual and group treatment.
- 13. Require documentation of credentials for individuals providing mental health services, legal counsel, or other professional services.
- 14. Require subgrantees to distinguish between counseling provided as a routine part of case management, counseling provided under mental health services, and legal counseling offered as assistance for civil protection orders.

General—VOCA Subgrantee Application Process

- **15. Provide consistent and explicit definitions for evaluation terms, such as "objective," "results," and "goals."** Currently, subgrantees use these terms interchangeably and, at times, inconsistently.
- **16.** Require subgrantees to explain how they selected their stated goals. Although many subgrantees do provide specific and measurable goals/objectives/results, they do not provide an explanation of why and how these goals are selected. Direct links between problem documentation and program goals are lacking.
- 17. Clearly define purpose area 4 (provide services that give victims of crime a measure of safety and security). Some organizations claim to fulfill this area, but from review of applications and CCJR interpretation of the purpose area, many do not appear to provide these services.
- **18.** Require subgrantees to explain how evaluation tool(s) are used. The current application only asks the applicant to specify the tool(s) used. Consequently, many subgrantees do not explain how they evaluate their programs. If a client survey is the sole source of evaluation, ICJI should offer a third party service for clients to respond. This will encourage honest feedback, allow ICJI to compare organizations offering similar services, and reduce redundant overhead costs.
- **19. Require subgrantees to report evaluation results.** Currently few subgrantees do this.



ICJI RESEARCH PARTNERSHIP PROJECT SUMMARY

The Center for Criminal Justice Research (CCJR), part of the Indiana University Public Policy Institute, has partnered with the Indiana Criminal Justice Institute (ICJI) to address critical issues related to Indiana's justice systems across a variety of areas; including program assessments of 12 federal grant programs conducted by CCJR between January 2006 and June 2008. In late 2009, CCJR and ICJI staff identified the next steps in this partnership, including two broad research areas identified as priorities by ICJI that will be addressed over a two-year period (June 1, 2011 to May 31, 2013):

- 1. a statewide justice data records assessment, and
- 2. a review of best practices for each ICJI program area and 10 major funding streams (see Table 1).

The first broad research area in the project is a statewide crime and justice data assessment. One of the main goals of this assessment is to enhance ICJI's research capabilities in its role as Indiana's Statistical Analysis Center. The assessment will focus on the data needs of ICJI and its partners, and CCJR will build awareness of issues pertaining to justice data by seeking input from local agencies/organizations. The second

broad research area in the project is a best practices review of major ICJI funding streams. The goal of the best practices portion of the project is to develop tools to help guide ICJI funding decisions and strategic investment of federal awards. There will be seven best practices reports pertaining to ten ICJI funding streams (see Table 1). For each best practices report, CCJR researchers will review ICJI's current funding and grantmaking processes, examine federal guidelines and priorities for each funding stream, and conduct literature reviews of best practices for each funding stream. CCJR will then synthesize this research to develop lists of programs or program characteristics that are strongly supported, promising, weak or inconsistently supported, or not supported by the evidence.

This report describes research findings pertaining to best practices for subgrants awarded under the Victims of Crime Act (VOCA) funding stream administered by ICJI. The report includes a description of the federal VOCA and ICJI's program, funding history, an overview of purpose areas, types of victims served, and services provided by subgrantees. The assessment of best practices is structured according to four broad types of VOCA services— general service provision, victim advocacy, crisis response/intervention, and mental health services. These categories cover services provided under VOCA (see Table 2). The best practice assessment includes program types/characteristics, references for further reading, and concludes with recommendations.

Table 1: ICJI research partnership best practices reports

Funding stream	ICJI division	Report order	
Juvenile Accountability Block grants (JABG)	Youth Services	1	
Victims of Crime Act grants (VOCA)	Victim Services	2	
Byrne/JAG	Drug and Crime Control	3	
Sexual Assault Services Program (SASP)		4	
Sexual Assault Services Block Grant (SSBG)	Victim Services		
Sexual Assault Services (SAS/SOS)			
Title II Formula grants	Youth Services	5	
Services, Training, Officers, and Prosecutors (STOP) grants	Victim Services	6	
Domestic Violence Prevention and Treatment (DVPT)	Victim Services	7	
Federal Family Violence Grant (FFV)	vicum services	,	

Table 2: Victim service categories

General service provision	
Assistance in filing compensation claims	Making victims aware of the availability of crime victim compensation, assisting [victims] in completing the required forms, gathering the needed documentation, etc.
Emergency financial assistance	Cash outlays for [victims of crime] for transportation, food, clothing, emergency housing, etc.
Information and referral (in-person)	In-person contact with crime victim to identify available services and support
Telephone contacts, information, and referral	Telephone contact with crime victim to identify available services and support
Followup contact	In-person contacts, telephone contacts, and written communications with victims to offer emotional support, provide empathetic listening, and check on a victim's progress
Personal advocacy	Assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance; intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including worker's compensation, unemployment benefits, welfare, etc.; accompanying the victim to the hospital
Victim advocacy	
Criminal justice support/advocacy	Support, assistance, and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support
Emergency legal advocacy	Refers to the filing of temporary restraining orders, injunctions, and other protective orders, elder abuse petitions and child abuse petitions. [It] does not include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes [and] civil disputes
Crisis response/intervention	
Crisis counseling	In-person crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers
Crisis hotline counseling	Operation of a 24-hour telephone service 7 days a week that provides counseling, guidance, emotional support, information, and referral
Shelter/safe house	Short- and long-term housing and related support services to victims and families following victimization
Mental health	
Group treatment	Coordination and provision of supportive group activities, which include self-help, peer, and social support
Therapy	Intensive professional, psychological, psychiatric, or other counseling-related treatment for individuals, couples, and family members to provide emotional support in crisis arising from the occurrence of crime. Includes the evaluation of mental health needs and the delivery of psychotherapy

 $Source: Directory\ of\ Crime\ Victim\ Services\ Glossary, Office\ for\ Victims\ of\ Crime.\ Retrieved\ January\ 9,\ 2012,\ from\ http://ovc.ncjrs.gov/findvictimservices/glossary.html\#types$



VICTIMS OF CRIME ACT PROGRAM DESCRIPTION AND ICJI FUNDING HISTORY

Victims of Crime Act (VOCA) funds are administered by the Office for Victims of Crime (OVC) within the Office of Justice Programs, U.S.

Department of Justice, and support a wide array of victim services. These funds were authorized through the Victims of Crime Act of 1984. (OVC, 2012b) Since VOCA's passage, OVC has awarded funds to state victim compensation programs for direct payments to victims or their beneficiaries, and to state VOCA assistance administrators to support awards to direct service providers. The primary source of VOCA financing is the National Crime Victims Fund (Fund), which is mainly funded via offender-generated revenues (criminal fines, penalties, forfeited bail bonds, and special assessments). In FFY 2002, the Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act (U.S. Patriot Act) authorized deposits of gifts, donations, and bequests by private parties into the Fund.

According to ICJI's funding resource manual for VOCA, subgrants may be awarded to various public and nonprofit organizations, including criminal justice agencies (e.g., law enforcement agencies, prosecutor's offices, and

courts), religiously-affiliated organizations, state crime victim compensation agencies, hospitals and emergency medical facilities, and other types of agencies (e.g., mental health service organizations, state/local public child and adult protective agencies, and organizations providing legal services). Agencies and organizations must use grants to support or provide direct services to victims. These services cover a broad range of activities, including general services (telephone contact, financial assistance, and referral), victim advocacy (such as assistance with participating in criminal justice proceedings), crisis response/intervention, and mental health assistance. Additional activities and costs including skills training for staff providing victim services, training materials, equipment and furniture purchases, leasing or purchasing vehicles, and technology investments (ICJI, 2011a).

States have four years to expend an award with any balances existing at the end of the award period returned to the OVC. Therefore, ICJI may expend more or less VOCA funds than it receives in a given year. In Indiana, over the three-year period between FFY 2009 and FFY 2011, ICJI received an average of \$8.2 million each year from the OVC. According to ICJI, in FFY 2009 the federal VOCA grant was \$7,460,738; \$8,397,387 in FFY 2010; and \$8,809,602 in FFY 2011. Until the most recent funding cycle (2011), VOCA subgrants operated from July 1 through June 30. For

Table 3: Allocation of 2009, 2010, and 2011 VOCA grants by county

	2009-	2009-2010		2010-2011		2011-2012	
County	Number of grants	Award amount	Number of grants	Award amount	Number of grants	Award amount	
Adams	2	\$38,585	2	\$38,345	2	\$44,171	
Allen	7	\$335,650	7	\$329,921	7	\$414,120	
Bartholomew	4	\$162,573	4	\$197,285	4	\$188,707	
Blackford	1	\$23,391	1	\$23,391	1	\$28,305	
Boone	1	\$30,000	1	\$30,000	1	\$35,055	
Brown	2	\$60,277	2	\$60,277	2	\$71,733	
Cass	1	\$23,740	1	\$23,740	1	\$27,740	
Clark	1	\$36,346	1	\$36,346	1	\$41,353	
Clay	1	\$30,481	1	\$30,481	1	\$35,617	
Crawford	0	\$0	0	\$0	1	\$68,520	
Dearborn	2	\$122,159	2	\$122,159	2	\$131,673	
Delaware	2	\$161,757	2	\$161,757	2	\$188,278	
Dubois	2	\$124,701	2	\$124,701	2	\$177,116	
Elkhart	4	\$252,085	4	\$244,248	4	\$307,963	
Fayette	1	\$86,948	1	\$86,948	1	\$95,738	
Floyd	5	\$237,590	5	\$237,590	5	\$296,969	
Fountain	1	\$46,173	1	\$46,173	1	\$52,533	
Franklin	1	\$15,000	0	\$0	0	\$0	
Gibson	2	\$55,030	2	\$55,030	1	\$44,429	
Grant	5	\$196,827	5	\$196,828	5	\$232,889	
Greene	2	\$45,453	2	\$45,453	1	\$15,669	
Hamilton	3	\$148,442	2	\$123,173	3	\$202,473	
Harrison	1	\$48,175	1	\$48,175	1	\$59,255	
Hendricks	2	\$128,517	3	\$147,517	5	\$227,025	
Henry	1	\$51,550	1	\$51,550	1	\$62,221	
Howard	2	\$72,620	2	\$66,670	3	\$95,052	
Jackson	2	\$75,219	2	\$75,219	2	\$85,581	
Jasper	2	\$46,395	2	\$46,395	2	\$53,520	
Jay	1	\$23,683	1	\$23,683	1	\$26,946	
Jefferson	1	\$36,510	1	\$27,565	1	\$33,588	
Jennings	2	\$46,048	2	\$46,048	2	\$53,808	
Johnson	2	\$86,945	2	\$86,945	2	\$103,043	
Knox	2	\$53,652	1	\$23,500	1	\$26,015	
Kosciusko	3	\$83,890	4	\$108,888	3	\$85,514	
LaGrange	2	\$72,110	2	\$65,117	2	\$74,088	

(Continued on next page)

2011, the grant cycle period for VOCA was changed to October 1 through September 30. To transition and carry subgrantees over until the new grant cycle, ICJI awarded 3-month grants from July 1, 2011, through September 30, 2011, with traditional 12-month awards beginning October 1, 2011.

Through the Victim Services Division, for the 2009, 2010, and 2011 operating periods, ICJI has awarded \$26.2 million in VOCA subgrants. These consist of victim services agencies in law enforcement, prosecutor's offices, courts, corrections, and various nonprofit organizations. In 2011, ICJI provided VOCA grants to 185 subgrantees throughout the state. As shown in Table 3, in 2009, 69 counties were recipients of VOCA awards and in 2010 and 2011, 68 counties were recipients of VOCA awards. Several subgrantees had multi-county service areas and five VOCA awards were for statewide use in 2009 and 2011. In 2010, four were awarded for statewide purposes. In 2009, 172 VOCA grants that totaled nearly \$8.3 million were awarded to Indiana subgrantees. The overall award amount (to 171 subgrantees) declined slightly, to just below \$8 million in 2010. In 2011, 185 grants totaling approximately \$10 million were awarded. It should be noted that the total award amount in 2011 includes the three-month extension awards. The average size of grants awarded in 2009 was \$48,015, \$46,423 in 2010,

and rose to \$54,193 in 2011, including the three-month extension awards. The vast majority of VOCA subgrantees have received grants for a number of years. The average number of years of previous VOCA funding among 2011 subgrantees is 11.5 years. Ninety-three percent (173 out of 185) of 2011 subgrantees were previously awarded VOCA grants.

For this assessment, CCJR obtained copies from ICJI of 182 of 185 2011 funded VOCA subgrantee applications, and reviewed proposals with particular attention to the following areas: agency and program type, purpose areas identified, years of previous funding, whether the application was for continued or new funding, grant amounts requested and received, cash and in-kind matches, use of volunteers, whether subgrantees proposed to use an evaluation tool, and description of current or proposed evaluation tool or process. To capture the types of victims served and particular services provided, CCJR requested available subgrantee fiscal reporting from ICJI. The most recent year available was 2010. Given that the vast majority of subgrantees in 2010 received 2011 funding, ICJI indicated that the victims serviced and services offered would most likely remain constant. For all new 2011 subgrantees, ICJI provided information regarding victims served and types of services that CCJR incorporated into the assessment.

Table 3: (Continued from previous page)

	2009-	2010	2010-2011		2011-2012	
County	Number of grants	Award amount	Number of grants	Award amount	Number of grants	Award amount
Lake	5	\$297,585	5	\$297,585	6	\$343,300
LaPorte	4	\$220,191	4	\$220,191	5	\$272,744
Lawrence	1	\$29,100	1	\$29,100	1	\$32,248
Madison	5	\$248,993	4	\$218,077	5	\$288,580
Marion	20	\$1,553,196	20	\$1,561,399	24	\$2,000,821
Marshall	2	\$54,208	2	\$44,908	2	\$50,415
Martin	2	\$44,102	2	\$40,892	1	\$11,427
Miami	1	\$36,015	1	\$35,880	1	\$40,790
Monroe	3	\$120,994	3	\$120,994	6	\$271,009
Montgomery	2	\$45,376	2	\$45,376	2	\$55,296
Morgan	2	\$76,137	2	\$76,137	2	\$87,855
Owen	1	\$14,824	1	\$13,808	0	\$0
Perry	1	\$33,500	1	\$33,500	1	\$39,145
Pike	1	\$14,966	1	\$14,966	1	\$16,567
Porter	4	\$189,601	4	\$189,601	4	\$250,859
Posey	1	\$21,840	1	\$21,840	1	\$24,848
Pulaski	2	\$41,957	2	\$33,115	2	\$39,680
Putnam	2	\$65,788	2	\$65,788	2	\$76,873
Randolph	2	\$53,098	2	\$53,098	2	\$63,529
Ripley	2	\$108,282	2	\$108,020	2	\$123,827
Rush	1	\$32,265	1	\$29,100	1	\$61,550
Shelby	2	\$57,967	2	\$57,967	2	\$70,914
Spencer	1	\$23,200	1	\$23,200	1	\$26,396
St. Joseph	6	\$252,284	6	\$246,793	7	\$327,775
Starke	1	\$28,942	2	\$45,887	2	\$50,291
Steuben	1	\$21,021	1	\$21,021	1	\$24,563
Sullivan	1	\$24,024	1	\$24,024	1	\$28,072
Tippecanoe	3	\$146,178	4	\$172,137	4	\$208,670
Vanderburgh	4	\$285,132	4	\$285,132	5	\$356,816
Vermillion	1	\$24,000	1	\$24,000	1	\$27,306
Vigo	3	\$192,908	3	\$192,908	4	\$238,277
Wabash	2	\$52,318	2	\$52,318	2	\$55,734
Washington	1	\$225,533	1	\$225,533	1	\$302,585
Wayne	3	\$118,560	3	\$118,560	3	\$131,758
Whitley	1	\$17,048	1	\$17,048	1	\$19,888
Statewide	5	\$428,916	4	\$147,336	5	\$318,599
Total amount awarded	172	\$8,258,571	171	\$7,938,357	185	\$10,025,714

Source: ICJI 2009, 2010, and 2011 ICJI VOCA award documents



VOCA PURPOSE AREAS

VOCA grants must be used to address specific purpose areas. As part of the ICJI application process, potential subgrantees are required to select purpose areas that most closely match the program for which they are requesting funding from the following:

- 1. Provide services that respond to the emotional and physical needs of crime victims
- 2. Provide services that assist primary and secondary victims of crime to stabilize their lives after victimization
- 3. Provide services that assist victims to understand and participate in the criminal justice system

- 4. Provide services that give victims of crime a measure of safety and security
- 5. Help victims learn about, apply for, and/or obtain crime compensation benefits

Based on 2011 funded subgrantee proposals that were provided to CCJR (see Table 4), the majority of applicants selected four of the five purposes areas. Most subgrantees indicated their agencies or organizations provided services under purpose areas 5 (87 percent) and 1 (86 percent), followed by purpose area 3 (84 percent of applicants), and purpose area 2 (81 percent). Only 22 percent of subgrantees indicated that their programs support services that fit under purpose area 4. As Table 5 also demonstrates, a substantial majority (82 percent) of subgrantees selected three or more purpose areas.

Table 4: 2011 VOCA subgrants by purpose areas, as indicated on subgrantee applications

Purpose Areas	Number of subgrantees	Percent
1. Provide services that respond to the emotional and physical needs of crime victims	157	86.3%
2. Provide services that assist primary and secondary victims of crime to stabilize their lives after victimization	147	80.8%
3. Provide services that assist victims to understand and participate in the criminal justice system	152	83.5%
4. Provide services that give victims of crime a measure of safety and security	40	22.0%
5. Help victims learn about, apply for, and/or obtain crime compensation benefits	159	87.4%
Total number of subgrantee applications	182	

Source: 2011 VOCA subgrantee applications

Table 5: 2011 VOCA subgrants by number of purpose areas selected

Number of purpose areas selected by subgrantees	Number of subgrantees	Percent
One	8	4.4%
Two	23	12.6%
Three	40	22.0%
Four	76	41.8%
Five	34	18.7%
Total number of subgrantee applications	182	100.0%

Source: 2011 VOCA subgrantee applications

TYPES OF CRIME VICTIMIZATION

According to ICJI, for the purpose of the VOCA crime victim assistance grant program, a crime victim is a person who has suffered physical, sexual, financial, or emotional harm as a result of the commission of a crime. As previously mentioned, to ascertain the types of victims served and services offered CCJR used 2010 subgrantee reporting and estimated 2011 information based on continuation subgrants and supplemental information provided by ICJI for new awardees. As part of subgrantee reporting, VOCA subgrantees are required to indicate which priority areas (domestic violence, sexual assault, and child physical and sexual abuse) grants supported. As shown in Table 6, the majority of grants support programming across these areas. Table 6 also shows that many providers are serving many types of crime victims. Types of victims served also appeared to be pretty stable from 2010 to 2011. Subgrantees also are required to identify victims served under VOCA projects. As shown in

Table 6, the predominant type of victims served mirrors priority areas. Among 2010 subgrantees, 83 percent of agencies provided services to victims of domestic violence, 73 percent to victims of child sexual abuse, 67 percent to child physical abuse victims, and 65 percent to adult victims of sexual assault.

Table 7 includes 2010 dollar amounts, as reported by subgrantees to ICJI. At the time of this assessment, 2011 subgrantee reports were unavailable. Close to one-half of 2010 subgrantee funding supported programming for victims of sexual assault. Roughly 16 percent of funding was directed toward domestic violence, and the same proportion to support child physical and sexual abuse programming. Twenty-one percent of 2010 funding supported underserved victimization areas, including victims of assault, adults molested as children, survivors of homicide, elder abuse, robbery, DUI/DWI crashes, and other violent crimes.

Table 6: VOCA grants by crime victimization

Grants by types of victims served	Number of grants (2010)	Percent	Number of grants (2011)	Percent
Domestic violence	149	83%	147	81%
Child sexual abuse	131	73%	131	72%
Child physical abuse	120	67%	120	66%
Adult sexual assault	117	65%	114	63%
Elder abuse	89	50%	89	49%
Assault	83	46%	82	45%
Adults molested as children	81	45%	79	43%
Survivors of homicide victims	75	42%	76	42%
Other violent crime	75	42%	73	40%
Robbery	66	37%	67	37%
DUI/DWI crashes	63	35%	64	35%
Total number of subgrantees	179		182	

Source: ICJI VOCA subgrantee reporting (State-Wide VOCA Victim Assistance Grants Analysis for Fiscal Year: 2010) supplemented with new 2011 subgrantee information provided by ICJI

Table 7: VOCA subgrantee funding by crime victimization

Priority (by crime victimization) projects funded	2010 Dollar amount	Percent
Domestic violence	\$1,070,043	16.2%
Sexual assault	\$3,126,803	47.2%
Child physical and sexual abuse	\$1,029,907	15.6%
Underserved	\$1,396,392	21.1%
Total	\$6,623,145	100.0%
Underserved projects funded	2010 Dollar amount	Percent
Other violent crimes	\$411,616	29.5%
Assault	\$241,400	17.3%
Adults molested as children	\$186,238	13.3%
Survivors of homicide	\$163,556	11.7%
Elder abuse	\$155,014	11.1%
Robbery	\$136,951	9.8%
DUI/DWI crashes	\$101,617	7.3%
Total	\$1,396,392	100.0%

Source: ICJI VOCA subgrantee reporting (State-Wide VOCA Victim Assistance Grants Analysis for Fiscal Year: 2010)



VOCA SERVICES

The primary purpose of VOCA grants is to provide funding for direct services to crime victims throughout the state. As part of reporting, subgrantees are required to indicate services supported by VOCA funding. Table 8 includes services provided as reported by 2010 subgrantees and estimated for 2011 subgrantees, based on continuation grants and ICJI-provided information for new subgrantees.

The majority of subgrantees provide a range of services. All subgrantees provide assistance in filing compensation claims—a mandatory requirement for VOCA award recipients. Over three-quarters of 2010 subgrantees also indicated providing the following services: assistance with telephone contact information and referral (86 percent), information and inperson referral (88 percent) and follow-up contact (78 percent). Seventy-two

percent of subgrantees reported *providing criminal justice support/advocacy*. The latter covers "support, assistance, and advocacy provided to victims at any stage of the criminal justice process, including post sentencing services and support" (Office for Victims of Crime, 2012a). Most subgrantees also provided *personal advocacy services*. This involves "assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance and intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurer programs, including workers' compensation, unemployment benefits, and public assistance; and accompanying the victim to the hospital" (Office for Victims of Crime, 2012a). Over one-half also reported provision of *crisis counseling services*.

Table 8: 2010 and 2011 VOCA subgrants by types of services provided

Grants by services provided	Number of grants (2010)	Percent	Number of grants (2011)	Percent
Assistance in filing compensation claims	179	100.0%	182	100.0%
Information and in-person referral	157	87.7%	148	81.3%
Telephone contacts information and referral	153	85.5%	155	85.2%
Follow-up contact	140	78.2%	141	77.5%
Criminal justice support/advocacy	129	72.1%	131	72.0%
Personal advocacy	128	71.5%	125	68.7%
Crisis counseling	101	56.4%	101	55.5%
Other	66	36.9%	62	34.1%
Emergency legal advocacy	60	33.5%	59	32.4%
Group treatment	57	31.8%	55	30.2%
Shelter/Safe house	50	27.9%	51	28.0%
Emergency financial assistance	35	19.6%	34	18.7%
Therapy	22	12.3%	20	11.0%
Crisis hotline counseling	4	2.2%	4	2.2%
Total	179		182	

Source: ICJI VOCA subgrantee reporting (State-Wide VOCA Victim Assistance Grants Analysis for Fiscal Year: 2010) supplemented with new 2011 subgrantee information provided by ICJI.

Note: To capture the types of victims served and services provided, CCJR requested available subgrantee fiscal reporting from ICJI. The most recent year available was 2010. CCJR used 2010 subgrantee reporting and estimated 2011 information based on continuation subgrants and supplemental information provided by ICJI for new awardees.

BEST PRACTICE ASSESSMENTS BY SERVICE CATEGORY

In this section we discuss best practices for VOCA subgrantees across four broad categories including: general service provision, victim advocacy, crisis counseling, and mental health treatment. These four categories encompass the 14 categories of services described in Table 8. For each section, we briefly discuss the nature of the services provided and list recommendations for best practices in that area.

General Service Provisions

Description

The general services provided to victims of crime include: assistance in filing compensation claims, emergency financial assistance, information and in-person referral, telephone contacts and referral, follow-up contact, and personal advocacy. Assistance in filing compensation claims is a service that includes "making victims aware of the availability of crime victim compensation, assisting [victims] in completing the required forms, gathering the needed documentation, etc." (ICJI, 2011b). Subgrantees may also provide emergency financial assistance, which include "cash outlays for [victims of crime] for transportation, food, clothing, emergency housing, etc." (ICJI, 2011b). In addition, subgrantees can provide telephone and in-person information and referrals for services. Follow-up contacts with the victim may be done through various media (in-person, telephone, or written communication) to offer emotional support, provide empathetic listening, and check on the victim's progress. Personal advocacy involves "assisting victims in securing rights, remedies, and services from other agencies; locating emergency financial assistance; intervening with employers, creditors, and others on behalf of the victim; assisting in filing for losses covered by public and private insurance programs including worker's compensation, unemployment benefits, welfare, etc.; accompanying the victim to the hospital" (ICJI, 2011b). Currently, ICJIVOCA funding applications do not ask specific questions on whether and/or how the subgrantees have been or will provide the above general services. The following sections offer programming considerations for subgrantees.

Programming considerations for assistance in filing compensation claims and emergency financial assistance

Victim compensation helps victims and their families through the physical and emotional aftermath of a crime by alleviating the financial impacts of the crime. All subgrantees are required to assist victims in filing compensation claims, and all have been doing so. Because it may take weeks or months to process victim compensation claims, many states—including Indiana—offer emergency financial assistance to victims. Approximately 19 percent of the subgrantees in Indiana provide emergency financial assistance. The literature provides some overall considerations in the provision of either service (Arizona Coalition Against Domestic Violence, 2000; National Center for Victims of Crime, 1999; Minnesota OJP, 2010). Therefore, in the provision of either one, the subgrantee should keep in mind the following:

 Victims (and their families) should always be treated with dignity and respect throughout the entire process

- During intake, the staff should accept all definitions of income (including wages/salaries earned from jobs, child support, family support, etc.) from the victims, and address any financial issues that the victim might be concerned about
- Staff should assist the victims with gathering and completing relevant forms
- Staff should understand and be able to explain to the victims the differences between the types of financial assistance
- Financial assistance should not be offered for expenses that are covered by other sources, such as medical and auto insurance, employee benefits, other governmental programs (e.g., social security, public assistance), and restitution
- If a victim is filing a compensation claim, staff assisting with the process should verify that the claim is being filed within the proper time limitations
- If a victim is filing a compensation claim outside the time limitation, staff should assist in demonstrating good cause (if one exists) for failing to file, or that the victim is a minor
- If appropriate, staff should ensure that victims are aware of the steps necessary to pursue financial restitution in criminal cases

Programming considerations for telephone and in-person information and referrals for services

Subgrantees may also provide information to and refer relevant services to victims of crime. Services range from assistance with filing for financial assistance, to referral information regarding available support groups, to provision of information on appropriate medical/chemical/mental health treatment options. Approximately 85 percent of VOCA subgrantees provide information and referral for services either in person and/or over the telephone. The following are best practices in providing these services effectively (see Minnesota OJP, 2010):

- Maintain an up-to-date list of community resources (and their contact information) that provide victim services
- Establish and foster ongoing relationships with community resources to ensure access for victims
- Establish and maintain a set of consistent referral procedures in conjunction with community agencies and organizations
- Be conscious of cultural differences and relevance

Programming considerations for follow-up contacts

Subgrantees may also contact victims in-person, via telephone, or via some form of written communication to check on the victims' progress, provide emotional support, offer empathetic listening, or other follow-up service. Over three-quarters of VOCA subgrantees provide this service to victims. The following are best practices in providing follow-up contacts



to crime victims (Arizona Coalition Against Domestic Violence, 2000; Muldowney, 2009; Woods, 2008):

- Establish and maintain intra-organizational/intra-agency coordination and continuity between the initial and follow-up contacts
- · Follow-up contact should be optional for the victims
- During the initial contact, inquire about the victim's preferred form of follow-up contact
- Include exit appointments during which follow-up contacts can be set up
- Victims using certain services, such as hotlines and advocacy, are not required to provide personal contact information, making follow-up contacts difficult; therefore, subgrantees should try to collect data immediately post-service
- Consider collecting data electronically; this may increase victims' perception of anonymity

Programming considerations for personal advocacy

The last general service that VOCA subgrantees provide is individual support and/or assistance with a wide range of issues resulting from crime; this type of service is also known as personal advocacy. The following are best practices in personal advocacy (Minnesota OJP, 2010):

- Assist victims in strengthening their own decision-making capabilities
- Understand and correctly inform victims of all the possible civil and/or criminal justice options
- Advocate for victims' rights and choices
- Speak on behalf of the victims, if needed or requested by the victims
- Assist victims in accessing relevant and available resources
- Be culturally appropriate and sensitive

Victim Advocacy

Description

Victim advocacy involves a range of services, including criminal justice support/advocacy and emergency legal advocacy. Criminal justice support/advocacy is defined as "support, assistance, and advocacy provided to victims at any stage of the criminal justice process, to include post-sentencing services and support" (ICJI). Seventy-two percent of subgrantees provide criminal justice support/advocacy services. Emergency legal advocacy "refers to the filing of temporary restraining orders, injunctions, and other protective orders, elder abuse petitions and child abuse petitions. [It] does not include criminal prosecution or the employment of attorneys for non-emergency purposes, such as custody disputes [and] civil disputes" (ICJI). Roughly one-third of subgrantees provide emergency legal advocacy services.

Federal requirements to consider

The modes of victim advocacy addressed in this summary often involve law enforcement professionals and prosecutors. Officers and employees of the U.S. Department of Justice (DOJ) who are a part of investigative, prosecutorial, correctional, and parole activities that involve victims of and witnesses to crime can and should refer to the *Attorney General Guidelines for Victim and Witness Assistance* (U.S. Department of Justice, 2011). That document provides guidelines that are based on statutory obligations and best practices. In many cases, familiarity with the AG Guidelines is required by federal law. The Attorney General also recommends that department managers "require all contractors whose employees come into contact with crime victims to provide employee training on AG Guidelines compliance" (U.S. Department of Justice, 2011, preface). The AG Guidelines are intended to serve as a model for state and federal law enforcement agencies.

Programming considerations for criminal justice support/advocacy

Law enforcement professionals

The International Association of Chiefs of Police (IACP) has developed an industry standard, Enhancing Law Enforcement Response to Victims (IACP, 2008), with funding from and in collaboration with the Office for Victims of Crime (OVC) at the Office of Justice Programs, U.S. Department of Justice. A three volume resource, referred to as the *Strategy Package*, was created to disseminate information regarding this standard and includes an implementation guide and a resource toolkit. From this and other relevant literature, the prevalent themes that emerge are that law enforcement professionals involved with victim services should emphasize collaboration and focus on the victim.

Collaboration

Collaboration is encouraged between agencies as well as with community organizations. This is expected to improve effectiveness and efficiency for the service providers, and quality of care and service provision for the victims. Community partners in providing victim services include: advocacy organizations representing victim interests; criminal justice agencies; human service and health care agencies; school systems, college and university campuses; elected officials; businesses; faith communities; media; and community residents (IACP, 2008,26).

Law enforcement leaders can demonstrate their commitment to collaboration in a variety of ways, including:

- Creating a steering committee that includes key community stakeholders to drive the interagency and external collaborations
- Establishing a system of communication that allows service providers and other agency representatives to present their concerns and then responding to those concerns in a timely manner
- Facilitating the connection between the victim and other agencies by creating resource references that can be carried by officers on their person or in their vehicles

In all cases, law enforcement officers should be aware of the services that are available to victims; this includes services offered by community partners as well as services that are routinely provided free of charge to victims, regardless of their perceived desire to cooperate with law enforcement.

Victim-centered approach

Research from the *Enhancing Law Enforcement Response to Victims* literature identifies seven critical needs of victims that law enforcement response should address:

- 1. Safety: Protection from perpetrators and assistance in avoiding revictimization
- 2. Support: Assistance to enable participation in justice system processes and repair of harm
- 3. Information: Concise and useful information about justice system processes and victim services
- 4. Access: Opportunity to participate in justice system processes and obtain information and services
- Continuity: Consistency in approaches and methods across agencies through all stages of the justice process
- 6. Voice: Opportunities to speak out on specific case processing issues and larger policy questions
- 7. Justice: Receiving the support necessary to heal and seeing that perpetrators are held accountable for their actions (language excerpted from IACP, 2008, 11)

As the IACP notes in volume one of the online resource,

"responding effectively and appropriately to all types of crime victims is not only the right thing to do for victims, their families and communities, but it is also in law enforcement's best interests. When crime victims perceive that they have been treated with compassion, fairness, and respect, they are more likely to cooperate in the investigation of the crime making law enforcement's job easier at first response and as cases progress through the justice system. By enacting this strategy, law enforcement agencies and their leaders will have not only provided victims with the best possible treatment, but they will have improved the likelihood that their organizations will become better equipped to apprehend and prosecute perpetrators" (51).

Subgrantees should consider employing evaluation tools to gauge effectiveness in this area. Sample survey creation and data collection techniques are included in the IACP resource. Results from these tools can be used to gauge the quality of service provision and be incorporated into annual reviews, thereby emphasizing the department's commitment to victim-centered services as well as providing an opportunity to discuss necessary improvements.

Court appointed special advocates

The Court Appointed Special Advocates (CASA) Association has a number of online resources to educate local program directors on best practices. The following are best practices for organizations that provide case advocacy services, based on that association's Standards for Local CASA/GAL Programs, 2006 Edition and other internal publications:

- Advocates should reflect the diversity of the population served
- Regular self-evaluation and external evaluation are crucial to maintaining excellent advocacy services
- Consistent, documented communication should exist between the advocate and the child; between the advocate and the court; between the advocate and the organization; and between the organization and its governing and/or partner agency
- Collaboration with other volunteer agencies, the courts, public service agencies, community groups and with families and individuals should be routine and written into the program's general operating procedures
- Extensive volunteer training, both pre-service and in-service, is required to ensure that volunteers are qualified to serve and are aware of programming changes

Applications by subgrantees providing CASA services should reflect a commitment to these best practices. Program narratives should include relevant details about volunteer training and diversity, communications procedures, evaluation schedules and collaborative external relationships.

Programming considerations for emergency legal advocacy

General prosecutorial activities

VOCA funded services that are provided by the prosecutor's office are generally straightforward; the procedures are dictated by the state and the scope of services that qualify for VOCA funding are restricted by grant guidelines. Consequently, there is little variation in the types of VOCA funded activities and services offered by the victim assistants/victim advocates in individual prosecutor's offices. Within that clearly defined scope of services, victim assistants/victim advocates facilitate communications between the prosecutor's office and the victim, guide the victim through the criminal justice process and represent the prosecutor's office to the community at large.

To ensure that service delivery is victim-focused, all prosecutor's office employees and representatives should be mindful of victims' rights, as defined by the Crime Victims' Rights Act (CVRA) and related state statutes, and conduct themselves accordingly in all direct interactions with victims and witnesses. The most pertinent victims' rights include the following:

- The right to fairness, dignity, and respect throughout the criminal proceedings
- The right to freedom from harassment and intimidation



- The right to be informed, upon request, when a person who is accused or convicted of committing a crime perpetrated directly against the victim is released from custody or has escaped
- The right to confer with a representative of the prosecuting attorney's office: after a crime allegedly committed against the victim has been charged; before the trial of a crime allegedly committed against the victim; and before any disposition of a criminal case involving the victim. (This right does not include the authority to direct the prosecution of a criminal case involving the victim.)
- The right to have the victim's safety considered in determining release from custody of a person accused of committing a crime against the victim
- The right to be heard at any proceeding involving sentencing, a post-conviction release decision, or a pre-conviction release decision under a forensic diversion program
- The right to make a written or oral statement for use in preparation of the presentence report
- The right to pursue an order of restitution and other civil remedies against the person convicted of a crime against the victim
- The right to information, upon request, about the disposition of the criminal case involving the victim or the conviction, sentence, and release of a person accused of committing a crime against the victim
- The right to be informed of the victim's constitutional and statutory rights (language from Indiana Code 35-40-5)

The manner in which the victim is informed of his or her constitutional and statutory rights is at the discretion of the agency. The Office of the Monroe County Prosecuting Attorney website has an excellent example of documents, pamphlets and videos for victims (Available at www.co.monroe.in.us/tsd/Justice/Prosecutor/VictimsAssistance.aspx). All resources provided to victims should be written in clear, simple language and translated as necessary to address the needs of the local population.

Civil protection orders

Victims of domestic or family violence, stalking or sexual offenses can choose to participate in the cost-free civil protection order process. Civil protection order applications must be filed by the victim but advocates, attorneys, judges and court personnel, law enforcement officers and commanders, and prosecutors all play unique roles in ensuring that civil protection orders are efficiently processed and effectively enforced (National Council of Juvenile and Family Court Judges, 2010).

The National Council of Juvenile and Family Court Judges (NCJFCJ) has created a resource manual entitled *Civil Protection Orders: A Guide for Improving Practice* that outlines best practices for the key actors noted above. Specific recommendations and strategies are included for the various relevant professions, as are answers to practical questions regarding firearm possession, technology, and military cases. The major themes that emerge from the manual generally mirror other victim services literature; those involved in the civil protection order process should emphasize col-

laboration and focus on the victim.

Council advisors have found the following values are instrumental in guiding the creation and maintenance of an effective civil protection order process:

- The central purpose of the civil protection order system is to protect individuals from harm.
- The civil protection order system affords each victim the right to obtain relief tailored to her needs and remains petitioner-driven throughout the process.
- The civil protection order system is open, available, and barrier free.
- The civil protection order system has an obligation to provide capable assistance and respond appropriately to the unique challenges of each victim seeking issuance and enforcement of civil protection orders.
- The procedures of the civil protection order system and the protection orders issued are implemented consistently and dependably.
- The civil protection order system best protects individuals when there is cooperation on shared goals and strategies.
- An effective civil protection order system reflects the diversity of the community and responds to the specific needs, strengths, and circumstances of the litigants.
- Connected, engaged, and knowledgeable communities enhance the effectiveness of the civil protection order system. (Guiding Values language taken from NCJFJ document, 1-23)

The full resource may be accessed through the NCJFCJ website.

Crisis Response/Intervention

Description

Crisis response/intervention involves a range of services provided to victims of crime, including crisis counseling, crisis hotline counseling, and shelters/safe houses. Crisis counseling is defined as follows: "In-person crisis intervention, emotional support, and guidance and counseling provided by advocates, counselors, mental health professionals, or peers" (ICJI, 2011b). This type of service may take place at the scene of a crime, immediately after a crime, or on an ongoing basis. Crisis hotline counseling refers to the "operation of a 24-hour telephone service 7 days a week that provides counseling, guidance, emotional support, information, and referral" (ICJI, 2011b). A shelter or safe house offers "short- and long-term housing and related support services to victims and families following victimization" (ICJI, 2011b).

Counseling is provided for victims of a variety of crimes. Crisis counseling, in particular, is one of the services that the majority of the subgrantees provide. In addition, these subgrantees tend to focus on counseling victims of the following crimes: 1) domestic abuse; 2) child abuse; and, 3) sexual assault (including adults and children).

The current ICJI VOCA funding application does not ask directed questions as to whether and/or how the subgrantees have been or will provide crisis response/intervention services. The following sections offer programming considerations for subgrantees that work in these areas.

Programming considerations for crisis counseling

Over 55 percent of VOCA subgrantees provide crisis counseling. While there are various models for delivering crisis intervention, the themes that emerge from the relevant literature are that a provider of counseling services should do the following (Newmark et al., 2003; Newmark, 2004; Roberts, 1994; Roberts, 2005; Roberts & Roberts, 2005; U.S. Department of Health and Human Services, 1994; Young, 1993):

- Immediately conduct a crisis assessment, including the victim's measure of safety to self and/or others, and the victim's need for emotional and physical safety and security
- Make psychological contact and establish a relationship with the victim, which involves listening, validating, and honoring the victim's experience of victimization

The above steps often occur simultaneously. In addition, during counseling, the service provider should work with the victim to accomplish the following:

- Examine the dimensions of the problem at hand in order to define
 it with specific open-ended questions (e.g., "What event led you to
 seek help at this time?" and "When did this event occur?")
- Allow the victim to express and subsequently validate his or her feelings and emotions in a supportive and nonjudgmental environment

Most adults and youths have developed various mechanisms to cope with crisis events. A hazardous event becomes a crisis when attempts to cope fail. Thus, the service provider should focus on identifying and modifying the victim's coping behaviors. Solution-based therapy—a method that emphasizes working with the victim's strengths—should be used (Roberts, 2005). In general, aside from completing the above-stated steps, the following should be done (Greene et al., 2005):

- Set goals: the service provider should help the victim set and
 define a goal (defined as a desired future state for the victim in
 terms of his or her feeling, thinking, and behavior) as specifically as
 possible; when a victim experiences trouble setting a goal with sufficient specificity, the service provider could use *miracle*, *dream*, and
 relationship questions to facilitate the process
- Identify solutions: the service provider should use exception, coping, and past successes questions to assist the victim to identify solutions that are conducive to achieving the desired future state; at the same time, the service provider should use scaling questions to help the victim quantify and evaluate the situation and progress
- Develop and implement an action plan: the service provider should ask the victim to complete certain tasks—based on thoughts, feelings, and behaviors that he or she has used in the

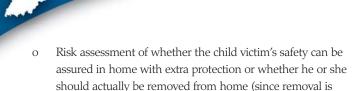
past or is using presently—for problem resolution and goal attainment; some commonly used solution-focused tasks include the following:

- o Formula first session task
- o Keep track of current successes
- o Prediction task
- o Pretend a miracle has happened
- Terminate and follow up: at this point, the service provider should assist the victim to review his or her specific goal(s), assess his or her readiness for termination, and anticipate possible future setbacks; the service provider should also inform and seek permission from the victim for follow-up contact

Additional considerations for crisis counseling based on victimization type

Because the majority of VOCA funds are used by victims of domestic violence, child abuse, or sexual assault (79 percent in 2010), the following section focuses on these victimization types.

- Domestic violence: among all victims of crime, those of domestic violence (along with those of sexual assault and drunk driving crashes) have more service needs than victims of other crime types:
 - o Emphasis on zero tolerance
 - o Assistance with immediate concrete needs to ensure safety (e.g., lock repairs, emergency housing)
 - Assistance with advocacy and information for the justice system
 - Potential use of stress management techniques (e.g., progressive relaxation, guided imagery, good nutrition)
 - Assistance in building trust and self-esteem through methods, such as modeling, reframing, stress inoculation, relaxation techniques, exercise
 - o Referrals to social service agencies and resources
 - In addition to the above-mentioned considerations, if the crisis intervention occurs through police-based crisis teams and victim assistance units, the services should also include the following:
- Advocacy
 - o Transportation to and from medical centers and shelters
- Child abuse:
 - Special attention on initial contact with the child victim's family, focusing on precipitating events, family interactions and conditions, and the family's perceived needs



traumatic and does not always ensure safety)

Sexual assault:

- O Challenge rape myths that perpetuate a sexual assault victim's feelings of guilt, shame, and self-blame
- Develop and maintain a protocol with local agencies and/or hospitals which specifies when and how forensic medical exams and/or interviews should be conducted
- Explain to the victim the procedures involved with the rape kit and forensic medical exam, as well as the legal and court procedures
- o If the victim is uncertain about forensic exams and/or interviews (because of distrust or embarrassment, or for fear of reprisal), empower the victim to make informed decisions, keeping in mind that he or she makes the final decision
- o During forensic medical exams and/or interviews, no law enforcement officer (regardless of gender) should be present, given the private and sensitive nature of the procedures; this practice does not extend to responders who are legally qualified to conduct forensic exams and/or interviews, such as Sexual Assault Nurse Examiners (SANEs), forensic nurses, registered nurses, physician's assistants, and medical doctors

Programming considerations for crisis hotline counseling

In 2010 and 2011, only four VOCA grants were awarded to subgrantees that report providing crisis hotline counseling. Calls to crisis hotlines can result in counseling, information, referrals, and crisis screening and triage. As with in-person counseling, crisis hotline staff should engage callers with empathetic responses and supportive listening skills. In addition (Eaton, 2005):

- Screening/triage forms should be completed for all callers who request further services and/or face-to-face contact; the forms should address:
 - o Clinical information (e.g., suicide or homicide risk)
 - o Safety concerns (e.g., weapons, legal history)
- All calls should be assigned an intervention code which would allow the shift supervisor to prioritize multiple requests on a clinical basis:

 - o Priority II requiring timely intervention because of the caller's inability to deal with current stressors

- o Priority III requiring intervention because of a caller's moderate level of dysfunction
- o Priority IV requiring intervention because of a caller's subjective distress and/or mild level of dysfunction
- Regardless of the intervention priority code assigned to the calls, all requests for services should be addressed as quickly as possible, and every request should be addressed within 24 hours
- The hotline should be a devoted phone line

Programming considerations for shelters/safe houses

In the context of VOCA, shelters and safe houses are mostly for victims of domestic violence and sexual assault. Twenty-eight percent of VOCA services provided support shelters/safe houses. These programs should do the following (Arizona Coalition Against Domestic Violence, 2000):

- Have unpublished locations or be secured locations
- Be culturally appropriate
- Have staff and volunteers who have had training in safety planning and confidentiality
- Have guidelines that maintain the safe environment of the shelter or safe house, allowing for staff flexibility for the enforcement of said guidelines
- Determine the victim's safety level at the initial contact
- Provide the victim with an explanation of how he or she will get to the shelter or safe house after initial contact has been made and the victim has been accepted to the program
- Provide the victim with a clarification on the available length of stay, information about whom to call in case of an emergency, and an explanation of rules, procedures, and confidentiality
- Collect appropriate intake data for purposes of funding requirements or service contracts in a sensitive and appropriate manner
- Ensure that the actual living environment is safe, comfortable, and appropriate for the victims (e.g., child safe/proof if children stay in the shelter or safe house, some private/personal space, a telephone for victims to use)
- Provide information, resources, basic needs, and referrals
- Provide advocacy at the individual and/or systems level

Mental Health Services

Description

Mental health services provided to victims of crime can be divided into crisis counseling, provided in the immediate aftermath of victimization, and longer term treatment. Although short and long term treatments are often linked, programming considerations for crisis counseling are con-

sidered above. Longer term treatment services are designed to help crime victims deal with mental health issues that result from their victimization such as depression or post-traumatic stress disorder (PTSD). Services can either be conducted one on one with a counselor or in a group setting.

As documented in Table 4, 86 percent of VOCA subgrantees claimed to be providing services that respond to the emotional and physical needs of victims and 81 percent stated they were assisting victims in stabilizing their lives following victimization. Such statements may refer to crisis counseling, longer term mental health treatment or other services for victims. As shown in Table 8, a much smaller percentage of subgrantees appear to be providing direct longer term services. In 2010, 32 percent and in 2011, 30 percent of subgrantees stated that they were *providing group treatment*. In 2010, 12 percent and in 2011, 11 percent stated they were providing *therapy*. Determination of the exact nature of the services being provided and by whom was not always easy when examining subgrantee applications. As discussed in more detail below, providers should be required to clarify the nature of the services they provide in their grant applications.

Programming considerations for mental health services

Crime victims can suffer from a variety of mental health issues such as PTSD, depression, substance abuse, and other disorders. Full discussion of appropriate treatments for each of these disorders is beyond the scope of this document. However, treatment providers should be able to document the nature of the services they provide and the evidence supporting their treatment approaches. Some resources for doing this are listed below. The following suggestions will help subgrantees clarify the mental health services provided and assure ICJI that these approaches are appropriate for the victims they serve:

- Clearly describe the nature of the treatments provide by subgrantees, including whether they are group based or individual.
- Document the credentials of those providing mental health services.
- Tailor treatment practices by victim type or symptom type as discussed below.
- Employ "evidence-based" approaches for treatment programs for crime victims. Moreover, programs should articulate the nature of the evidence supporting their treatment approaches. It is also incumbent upon treatment providers to maintain currency in treatment approaches because research is ongoing into treatment options for mental health issues associated with crime victimization. Resources for documenting that treatment services are evidence-based are listed below.

Resources for documenting that treatment services are evidence-based

There are many resources that mental health treatment providers can use to document that the services they are providing are evidence-based such as professional association guidelines, scholarly journals or books, and web resources discussing best practices.

• Professional associations

One resource for ensuring that treatments are evidence-based is the professional associations to which treatment providers belong (e.g., psychology, psychiatry). Each profession has associations that often provide treatment guidelines for various mental health conditions. For example:

- o American Psychological Association (www.apapracticecentral.org)
- American Psychiatric Association
 (www.psych.org/MainMenu/PsychiatricPractice/PracticeGui
 delines_1.aspx), guidelines and additional tools and
 resources can be found for common disorders that are often
 associated with crime victimization:
 - Acute Stress Disorder and Post-Traumatic Stress Disorder
 - Bipolar Disorder
 - Borderline Personality Disorder
 - Major Depressive Disorder
 - Obsessive-Compulsive Disorder
 - Panic Disorder
 - Schizophrenia
 - Substance Use Disorders
 - Suicidal Behaviors
- American Academy of Child & Adolescent Psychiatry (http://www.aacap.org/cs/clinical_care_quality_ improvement/practice_parameters)
- Scholarly journals or books

Scholarly journals are the primary location where research on mental health treatments is disseminated. Journals or books publish individual studies of treatments or reviews of multiple studies to summarize the current evidence on treatments. For example, Silverman et al. (2008) describe evidence-based treatments for children exposed to traumatic events (including crime). Miller (2008) describes counseling strategies for mental health professionals when treating crime victims.

CrimeSolutions.gov

Another resource for evidence-based programs is a website sponsored by the United States Office of Justice Programs called CrimeSolutions.gov (http://crimesolutions.gov/TopicDetails. aspx?ID=98). This website lists several treatment programs for victims of crime that are considered effective based on more than one evaluation. A few examples of those considered effective are listed. The descriptions below were adapted from those listed on the website¹:

¹The CrimeSolutions.org website also lists several treatment programs that are considered "promising" based on a single study showing effectiveness.

- o Cognitive Behavioral Intervention for Trauma in Schools (CBITS)
 - CBITS is a school-based program for kids ages 10 to 15. CBITS employs cognitive-behavioral therapy in a group format for 10 sessions to address symptoms related to exposure to violence such as PTSD, anxiety, and depression.
- o Trauma-Focused Cognitive Behavioral Therapy (TF–CBT) TF–CBT was created to help children and adolescents ages 3 to 18 and their parents overcome the negative effects of child sexual or physical abuse by teaching new skills to process thoughts and feelings from traumatic events. TF–CBT typically lasts 12 to 18 weeks.
- Prolonged Exposure Therapy (PET)
 PET is designed to reduce PTSD, depression, anger, guilt, and general anxiety. PET is an individual therapy designed to help clients use cognitive-behavioral therapy to process traumatic events.

Considerations for specific disorders associated with victimization or population types

The research literature also describes evidentiary support for particular mental health issues commonly associated with crime or treatments for specific victimization types or population characteristics. Although, it is beyond the scope of the current document to provide reference materials for all types of mental health issues frequently seen among people who

have suffered crime victimization or for each type of victimization, a few examples of resources for one common mental health issue (PTSD) and one type of victimization (child abuse) are provided below.

- PTSD
 Several resources focus on evidence-based practices for treating PTSD:
 - o The International Society for Traumatic Stress Studies (ISTSS) publishes guidelines for *Effective Treatments for PTSD* in print (Foa et al., 2009) as well as online (www.istss.org/ EffectiveTreatmentsforPTSD2ndEdition/3370.htm).
 - Scholarly journal articles also discuss treatments for PTSD.
 Amaya-Jackson and DeRosa (2007) focus on evidence-based practices for treating complex presentations in child trauma cases. Dorsey, Briggs, and Woods (2011) focus on treating PTSD in children and adolescents.
- Child abuse and neglect (physical and sexual)

 It is also critical to target services to the types of victims and needs identified. One of the most common victimization types seen is child abuse, both physical and sexual. Carr (2009) describes effectiveness of family therapy for children, including a section on effective treatments for child physical and sexual abuse. Goodyear-Brown (2012) developed a handbook for the identification and treatment of child sexual abuse. Chaffin and Friedrich (2012) and Shipman and Taussig (2009) document evidence-based practices for child abuse and neglect.

SUMMARY OF PREVIOUS CCJR VOCA PROGRAM ASSESSMENT RECOMMENDATIONS

CCJR previously conducted program assessments of 12 federal grant programs for ICJI. The 2007 program assessment of VOCA 2005 and 2006 programs offered a number of recommendations. Based on the current review of 2011 VOCA subgrantee proposals, CCJR suggests that the following 2007 recommendations regarding the subgrantee application process should be revisited in conjunction with the recommendations from the current review to improve overall programming:

- To improve problem statements and establish program needs, ICJI should consider providing guidance on how to build strong problem statements using local statistics.
- Continue to educate VOCA subgrantees regarding the proper definition and configuration of goals, objectives, and activities, and consider offering a recent subgrantee application as a good example.
- 3. Improve the definition and measurement of victim services provided by requiring subgrantees to conduct quality assurance measurements via survey of client satisfaction. Model pre/post assessment forms and instructions on how to complete them fully could be provided by ICJI to subgrantees.
- Subgrantees that receive multiple years of funding should be required to report data over time regarding services provided to improve understanding of subgrantee productivity when making funding decisions.
- 5. To improve forecasting and targeting of VOCA subgrantees, they should be encouraged to use available data, e.g., crime statistics, to forecast service needs.
- 6. Subgrantees should be required to submit a program assessment plan with grant applications to assist in the completion of quarterly performance reports.

RECOMMENDATIONS

The current assessment of VOCA subgrantee materials leads to the following recommendations. Some of these recommendations are similar to those noted above in the 2007 VOCA assessment by CCJR.

General Service Provision

- Require subgrantees to describe and document how they are assisting victims with emergency financial assistance, information and in-person referral, telephone contacts and referral, follow-up contact, and personal advocacy. The funding application also should include explicit and directed questions on whether and how the subgrantee is employing any best practice in general service provisions to victims of crime.
- 2. Provide subgrantees a model intake form for assisting victims with victim compensation. Currently, the descriptions for this service on the application vary greatly in length and specificity. Since this is a required purpose area for all subgrantees, there should be some level of uniformity for evaluation.

Victim Advocacy

- 3. Provide evidence that service delivery is victim focused.
- For law enforcement agencies and court appointed special advocates, document collaborations with other entities in service provision.
- 5. For prosecutors, provide evidence of ensuring that victims are aware of their rights.
- For CASA providers, provide evidence of internal and external evaluations.

Crisis Response/Intervention

7. Require subgrantees to document how the crisis response/intervention programs are actually carried out. In the current grant applications, subgrantees who engage in crisis response/intervention typically provide some data on number of victims served, units of service, number of service hours. However, most do not discuss whether and how they employ any best practice in providing crisis counseling, crisis hotline counseling, and/or shelter/safe houses. The application should be amended to require that subgrantees document their use of best practices.

Mental Health Services

- 8. Clearly describe the nature of their treatment services.
- 9. Document evidence supporting the efficacy of their treatment



approaches in relation to the disorders subgrantees treat.

Appropriate treatments for mental health issues experienced by crime victims depend on individual factors. Professional standards exist for treating disorders such as post-traumatic stress disorder, depression, and substance abuse which often follow victimization.

- 10. Require subgrantees to demonstrate that treatment approaches are tailored according to victimization type.
- **11. Clearly identify the length of services provided.** Because subgrantees may provide crisis counseling or longer term treatment, providers should clearly identify the length of services provided.

General—Best Practice Considerations across Services

- **12.** Clearly identify the length and nature of treatment services being provided. This includes distinguishing between crisis and ongoing counseling and individual and group treatment.
- 13. Require documentation of credentials for individuals providing mental health services, legal counsel, or other professional services.
- 14. Require subgrantees to distinguish between counseling provided as a routine part of case management, counseling provided under mental health services, and legal counseling offered as assistance for civil protection orders.

General—VOCA Subgrantee Application Process

- **15. Provide consistent and explicit definitions for evaluation terms, such as "objective," "results," and "goals."** Currently, subgrantees use these terms interchangeably and, at times, inconsistently.
- **16.** Require subgrantees to explain how they selected their stated goals. Although many subgrantees do provide specific and measurable goals/objectives/results, they do not provide an explanation of why and how these goals are selected. Direct links between problem documentation and program goals are lacking.
- 17. Clearly define purpose area 4 (provide services that give victims of crime a measure of safety and security). Some organizations claim to fulfill this area, but from review of applications and CCJR interpretation of the purpose area, many do not appear to provide these services.
- **18.** Require subgrantees to explain how evaluation tool(s) are used. The current application only asks the applicant to specify the tool(s) used. Consequently, many subgrantees do not explain how they evaluate their programs. If a client survey is the sole source of evaluation, ICJI should offer a third party service for clients to respond. This will encourage honest feedback, allow ICJI to compare organizations offering similar services, and reduce redundant overhead costs.
- **19. Require subgrantees to report evaluation results.** Currently few subgrantees do this.

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Victims of Crime Act (VOCA)

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