



A MULTI-SITE EVALUATION OF ILLINOIS POLICE DEPARTMENT- BASED VICTIM ASSISTANCE PROGRAMS

SUBMITTED JUNE 2020
RELEASED JULY 2022

A Multi-Site Evaluation of Illinois Police Department-Based Victim Assistance Programs

Funded by the Illinois Criminal Justice Information Authority

Co-Principal
Investigators:

Jessica Shaw, Ph.D.
University of Illinois at Chicago

Nicole Allen, Ph.D.
University of Illinois at Urbana-Champaign

Research
Associates:

Caroline Bailey, M.S.W.
University of Illinois at Chicago

Hope Holland, M.S.
University of Illinois at Urbana-Champaign

Consultant:

Theodore P. Cross, Ph.D.
University of Illinois at Urbana-Champaign

This project was supported by Award #16-DJ-BX-0083, awarded to the Illinois Criminal Justice Information Authority by the U.S. Department of Justice Office of Justice Programs' Bureau of Justice Assistance. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the Department of Justice or grant-making component, or the Illinois Criminal Justice Information Authority.

TABLE OF CONTENTS

Contents

Introduction	1
Evaluation Design	3
Phase 1: Articulate program theory	3
Phase 2: Assess how well-defined and evaluable the program is	4
Phase 3: Explore the potential for future evaluation work	4
Methods	5
Document review	5
Stakeholder interviews	5
Police questionnaire	6
Theory of Change modeling	7
Review of client case data	8
Literature review	8
Results	9
Phase 1: How is each program designed to operate?	9
Program Descriptions	9
Research Questions and Answers	13
Theory of Change Models	15
Phase 2: Are services being provided as intended?	22
Service Provision	22
Research Questions and Answers	36
Police Questionnaire Reports	39
Phase 3: What are the intended benefits of the program, and how can they most appropriately be measured?	40
Measuring Success and Evaluation Capacity	40
Research Questions and Answers	49
Future Evaluation Work	50
Considerations for Program Improvement	61
References	63

TABLE OF CONTENTS

Appendices	66
Appendix A: Phases vis-à-vis ICJIA Services Sought and Research Questions	67
Appendix B: Stakeholder Interview Protocols	71
Appendix C: Police Questionnaire	77
Appendix D: Logic Model Meeting Guide	82
Appendix E: Arlington Heights Theory of Change Logic Model	85
Appendix F: Elgin Theory of Change Logic Model	87
Appendix G: Mundelein Theory of Change Logic Model	89
Appendix H: Wheeling Theory of Change Logic Model	91
Appendix I: Arlington Heights Police Questionnaire Report	93
Appendix J: Elgin Police Questionnaire Report	110
Appendix K: Mundelein Police Questionnaire Report	127
Appendix L: Wheeling Police Questionnaire Report	143

INTRODUCTION

Introduction

At the time of collecting data for this project and the writing of this report, communities across the country were organizing, calling for a re-examination of how the police interface with citizens. In organizing, individuals and communities offered a range of models and potential paths forward for ensuring all citizens are able to thrive in free and just communities. Research and evaluation can help inform these conversations by examining existing innovative models within police departments that impact interactions between police departments and the public. This evaluation report presents the findings of an evaluability assessment of one such model: Police Department Based Victim Assistance Programs (VAPs).

Crime victims need and deserve assistance. Helping address their needs is a critical component of supporting their healing and recovery, and achieving justice. Victim advocates are trained to support victims of crime, and have been most firmly established and most thoroughly studied in the context of domestic violence shelters and rape crisis center services (e.g., Allen, Bybee, & Sullivan, 2004; Allen, Larsen, Trotter, & Sullivan, 2013; Bennett et al., 2004; Campbell, 2006; Goodman & Epstein, 2008; Sullivan & Bybee, 1999). Co-located advocacy services within the criminal justice system (e.g., police departments; prosecutors' offices) provide an added approach to increasing accessibility and access to resources for victims who choose to engage with the criminal justice system (e.g., Smith Stover, 2012; Stover, Rainey, Berkman, 2008; Stover, Berkman, Desai, & Marans, 2010; Weisz, Canales-Portalatin, & Nahan 2004). Victim advocates affiliated with police departments have substantial access to victims and can use their knowledge and relationships within the criminal justice system to advocate on victims' behalf.

Seeking to expand the use of victim advocacy in police departments, the Illinois Criminal Justice Information Authority (ICJIA) has funded VAPs in Arlington Heights, Elgin, Mundelein, and Wheeling, Illinois, as well as an evaluability assessment to promote the evaluation of these VAPs. A research team from the University of Illinois at Chicago and the University of Illinois at Urbana-Champaign conducted the evaluability assessment. This report presents results from the evaluability assessment, addressing three overarching evaluation questions:

1. How is each program designed to operate?
2. Are services being provided as intended?; and
3. What are the anticipated benefits of the program, and how can they most appropriately be measured?

We chose these guiding questions to encompass and organize the specific services sought and research questions articulated by ICJIA (see Appendix A). We aimed to conduct an initial evaluation of each VAP that would create the foundation for ongoing evaluation beyond the first year of funding.

INTRODUCTION

The evaluability assessment may help pioneer knowledge development on victim advocacy in police departments, since the relevant research literature is sparse. It consists mainly of case studies or descriptive reviews of different victim service programs within police agencies (e.g., Parker, 2001; Wilson & Segrave, 2011). Moreover, much of the literature describes different types of advocacy programs, however the programs described are unrepresentative of the four Illinois programs we evaluated here. Some studies examine programs in which advocates routinely accompany police officers to crime scenes (Carr, 1982; Ekman & Seng, 2009; Young, Fuller, & Riley, 2008), an intervention that is used only occasionally across these four communities. Other studies examine programs that use sworn officers for victim assistance rather than civilians (Winkel & Vrij, 1993); or volunteers rather than paid staff (Corcoran & Allen, 2005). Another study examined proactive advocacy follow-up to domestic violence incidents rather than referrals to victim advocates (Koppensteiner, Matheson, & Plugor, 2019). None of these features is characteristic of the four Illinois programs.

One relevant document that suggests the potential value of supporting victim services in police agencies is Littell's (2009) report on the effects of a federal Office for Victims of Crime grant program. This program supported 17 different victim service initiatives in sheriff's offices and police departments in rural communities. Grantees used funds in a variety of ways, from expanding existing victim service programs, to beginning new ones, to increasing their partnership with non-profit agencies supporting victims. Most participating communities reported that the grant program dramatically expanded their services to victims at the crime scene and soon after the incident report. Victims provided positive feedback on many of these initiatives. Site visits and stakeholder interviews suggested improvements in officers' victim-centered attitudes and practices, public awareness of the program, and public perception of police agencies. Another study that is relevant is Hatten and Moore (2010)'s assessment of officers' reactions to a victim service unit in a police agency participating in the study. They found that 98% of officers felt that victim services were important for the community, 96% had positive experiences with the advocates in their department, 77% felt that advocates were well trained, and 92% felt they were knowledgeable about the victim services program.

This limited research literature provides some encouragement that helping to develop victim services capability within police departments is worth undertaking and evaluating. The current project will contribute to this nascent literature. The findings may also inform ongoing conversations on how best to meet the varied needs of crime victims, and enhance the relationship between police agencies and the public. Below, we discuss our findings from the study, our recommendations for future evaluation work, and recommendations for program improvement.

Evaluation Design

ICJIA's request for an evaluation of the VAPs in Arlington Heights, Elgin, Mundelein, and Wheeling included a list of "services sought" through the evaluation and "research questions" to be answered by the evaluation (see Appendix A). After reviewing the requested services and identified research questions, we determined an evaluability assessment was best suited to respond to ICJIA's informational needs. Evaluability assessments are used to examine program theory, design, and implementation (Rossi, Lipsey, & Henry, 2019). They are particularly useful for programs in which stakeholders may vary in their understanding of program goals, objectives, and activities and programs may look very different from site to site. This evaluation design was selected for this project because sites had minimal prior evaluation experience and varied considerably in their organization, number of program staff, resource infrastructure, communities served, and length of time they had been in operation. Evaluability assessments help to articulate and build a shared understanding of operations with a program, and prepare the program for future evaluation work.

Evaluability assessments involve three major activities, or phases. The evaluators:

1. Articulate program theory and program components;
2. Assess how well-defined and evaluable the program is; and
3. Explore potential for future evaluation work.

It is important to note that while these numbered phases suggest a linear process, there is overlap and iteration in practice. Below, we describe each of these phases, and identify the evaluation question, goal, and deliverables that are specific to each phase. Appendix A provides a table to show how the "services sought" and "research questions" from ICJIA map onto the evaluability assessment phases.

PHASE 1: ARTICULATE PROGRAM THEORY

Evaluability assessment begins with the articulation of program theory, or *why* and *how* a program will achieve its desired outcomes. Through document review, stakeholder interviews, and Theory of Change modeling (see Hodges & Hernandez, 2003; Knowlton & Phillips, 2013), we worked with each site to identify key victim, police, and community outcomes expected to result from particular program activities. This involved significant involvement and input from key stakeholders who are engaged in the program on a daily basis. The Theory of Change model was used to develop a shared understanding of the program among participants, reveal where program theory requires additional development, and provide a framework for future evaluation work.

- ✚ **Evaluation Question:** How is each program designed to operate?
- ✚ **Goal:** Make explicit each site's program theory, the context in which the program operates, and the extent to which there is congruence or variation across sites.

EVALUATION DESIGN

- ✦ **Deliverables:** Site-specific Theory of Change models; Phase 1 results section

PHASE 2: ASSESS HOW WELL-DEFINED AND EVALUABLE THE PROGRAM IS

Following the articulation of program theory, an evaluability assessment calls for evaluators to assess the program for its likelihood of achieving its intended outcomes, through consideration of social needs, comparison with research and practice, and preliminary observation of how the program actually operates (see Rossi et al., 2019). We used stakeholder interviews, a police questionnaire, and review of client case data, to examine the extent to which actual program operations align with the Theory of Change models. We also examined if the activities are likely to result in the desired outcomes, and if necessary organizational practices are established to support achieving program outcomes in consideration of what is known from empirical research and best practice standards.

- ✦ **Evaluation Question:** Are services being provided as intended?
- ✦ **Goal:** Document current service provision, including what services are being provided, to whom, amid what challenges and solutions, and the extent to which service provision aligns with evidence-based practices and program.
- ✦ **Deliverables:** Site-specific police questionnaire reports; Phase 2 results section

PHASE 3: EXPLORE THE POTENTIAL FOR FUTURE EVALUATION WORK

Typically, the third activity in evaluability assessment is to gauge systematically the level of interest in, enthusiasm for, and potential obstacles to evaluation, as well as the likelihood and commitment to use the evaluation findings once produced (Rossi et al., 2019). Given the scope of this project and sites' limited prior experience with evaluation, we took a more exploratory approach that could inform conversations on future evaluation work. Through stakeholder interviews and review of client case data, we identified how program stakeholders would define success, providing insight into potential outcomes and indicators for future evaluation work. We also assessed each site's current evaluation capacity, and identified specific ways to build evaluation capacity.

- ✦ **Evaluation Question:** What are the anticipated benefits of the program, and how can they most appropriately be measured?
- ✦ **Goal:** Document anticipated benefits of the program based on stakeholder perspectives and existing literature, and develop a future evaluation plan for an outcome evaluation.
- ✦ **Deliverables:** Cross-site evaluation plan; Cross-site recommendations; Phase 3 results section

METHODS

Methods

We employed multiple methods to achieve the goals of this evaluability assessment. This included: document review, stakeholder interviews, Theory of Change modeling, a police questionnaire, review of client case data, and a literature review. The University of Illinois at Urbana-Champaign (UIUC) Institutional Review Board (IRB) was the IRB of record for this project. All methods and corresponding protocols, including informed consent procedures, were implemented consistent with our IRB-approved protocol.

Prior to implementing the methods below, the evaluation team had an introductory call with the VAP staff and administrators at each site. During this call, the evaluation team gathered background information about each VAP to inform further development and detailed revisions to the evaluation plan and tools. The evaluation team also provided information on what sites could expect throughout the evaluation process.

DOCUMENT REVIEW

In chronological order, the first method employed by our team was document review. This began at the start of the project period with a collection of any documents or materials available online (e.g., site organizational chart; description of VAP services; etc.), and continued over the course of the evaluation as we obtained documents from each site (e.g., VAP brochures, intake forms, community resource pages, etc.). Documents were reviewed to gain a greater understanding of each VAP's organization and operation.

STAKEHOLDER INTERVIEWS

The second method was stakeholder interviews. All interviews were conducted in-person during site-visits by 2-3 members of the evaluation team; one of the Co-Principal Investigators led each interview, with other team members playing a supporting role and taking notes. In the interviews, stakeholders were asked about (1) program structure, purpose, and development; (2) referral, eligibility, and intake processes; (3) assessment of and response to victims' needs; (4) coordination and referral to outside agencies; (5) successes, benefits, and challenges in providing victim services within a policy agency; (6) training; (7) perceived program impact; and (8) self-care (see Appendix B for interview protocols).

The evaluation team conducted a total of seven site visits to complete these interviews, visiting each site 1-2 times. The evaluation team interviewed VAP staff and other police department personnel. A total of 37 people were interviewed across 27 interview sessions (i.e., 19 individual interviews and eight group interviews). Individual interviews were primarily used with police department leadership, and when VAP staff consisted of a single individual. Group interviews were used to interview several individuals of the same rank (e.g., three patrol officers), and when there were

METHODS

multiple VAP staff members. The number of visits, interviews, and participants for each site is provided below.

Stakeholder Interviews: Number of Visits, Interviews, and Participants					
	# Visits	# Individual Interviews	# Group Interviews	Total # Interviews	# Interview Participants
Arlington Heights	1	5	1	6	7
Elgin	2	5	2	7	9
Mundelein	2	3	3	6	10
Wheeling	2	6	2	8	11
TOTAL	7	19	8	27	37

Stakeholder interview data were used in two ways. First, stakeholder interview data were used to understand each VAP and site better. Stakeholders interviews were transcribed, cleaned, and systematically coded. Each transcript was coded for the anticipated victim, police, and community outcomes thought to result from the program, as well as challenges in program implementation and service delivery (see *Results*). Second, these data were used to develop the initial Theory of Change models. These first drafts were shared, discussed, and revised with each site during the Theory of Change modeling process (see *Theory of Change modeling*, below).

POLICE QUESTIONNAIRE

Following the site visits, a questionnaire was administered to police personnel at each site. The police questionnaire was designed to allow us to hear from a wider, more diverse sample of sworn police personnel at each site, since only a subset of police personnel had an opportunity to participate in stakeholder interviews. The questionnaire asked about police officers' (1) awareness, (2) utilization, and (3) opinions of the VAP (see Appendix C for police questionnaires). The questionnaire also collected information on the respondent's rank, shift assignment, and tenure at their police agency.

The evaluation team worked with each site to determine the best way to administer the police questionnaire. At three sites, the evaluation team made a series of site visits to administer a paper copy of the questionnaire. To ensure that as many sworn personnel as possible had the opportunity to complete the questionnaire, the evaluation team administered the paper questionnaire at roll call prior to each shift change across two 24-hour periods (i.e., 6:30 am; 2:30 pm; and 10:30 pm). At some sites, the evaluation team member also administered the survey to a team of investigators in their separate meetings. Across these three sites, the evaluation team administered the survey a total of 17 times across six different days. At the fourth site, the survey was administered using Qualtrics online survey software. VAP staff and a Deputy Chief worked together to provide

METHODS

information on how to complete the survey to their sworn personnel. The number of survey respondents across sites is provided below.

Police Questionnaire: Number of Respondents				
Arlington Heights	Elgin	Mundelein	Wheeling	TOTAL
71	74	42	37	224

THEORY OF CHANGE MODELING

Theory of Change (TOC) logic models offer a big picture of strategies employed by a program in order to achieve intended results (Knowlton & Phillips, 2013). They do not detail a program's operational elements, but instead depict how the program conceptualizes promoting change. They focus on what the program does (i.e., strategies) and what the program hopes to achieve (i.e., intended results). Initial drafts of site-specific TOC models were developed based on what was learned in the stakeholder interviews. The evaluation team then worked with each site to identify a select group of personnel that know the VAP well and could participate in a group meeting to provide feedback on the initial drafts. This select group included VAP staff, the Chief of Police, patrol officers, investigators, supervising officers, and non-sworn administrators.

TOC modeling meetings lasted 90-120 minutes. Each meeting was facilitated by one of the Co-Principal Investigators, with 1-2 additional evaluation team members playing supporting roles and taking notes. Between seven and 12 people participated at each site. In the meetings, participants were provided copies of their site-specific TOC model. The evaluation team then led participants through a guided feedback session to confirm whether the content of the model was accurate and to identify inaccuracies, misspecifications, and missing items (see Appendix D for Logic Model Meeting Guide). Participants were also provided a copy of a combined model that contained model elements from all four sites to allow participants to see if anything from another site needed to be added to their own site-specific model. On these site visits, the evaluation team also met exclusively with the VAP staff, separate from the full meeting, to solicit their feedback. This additional meeting enabled VAP staff to provide more detailed feedback.

Following these site visits, the evaluation team modified the initial models in response to the feedback from each site. The evaluation team then worked with each site in an iterative process of revising and reviewing until each site was satisfied that the model accurately represented their VAP. The versions of the TOC models included in this report were developed in concert with each VAP and represents how the VAP staff believe the program operates.

METHODS

REVIEW OF CLIENT CASE DATA

Next, the evaluation team requested access to de-identified client case data from each site to understand better the nature (i.e., type and range of services), frequency (i.e., number of recorded staff activities i), and intensity (i.e., length of time over which services were provided and other complexities) of services provided. In discussions with the sites, we learned that client case data documenting service provision contained information that identified clients and could not easily be removed. VAP staff did not have the resources to de-identify the data for the evaluation team, and the evaluation team could not de-identify the data themselves due to restrictions specified in the [Illinois Mental Health and Developmental Disabilities Confidentiality Act](#).

Together, the evaluation team and the VAP staff determined it would be feasible for VAP staff at each site to de-identify a purposive sample of ten cases. For the service years 2018-2019, VAP staff were asked to identify 3-4 cases that typified a higher-activity case; 3-4 cases that typified a moderate-activity case; and 3-4 cases that typified a lower-activity case. Because what constitutes 'higher-activity,' 'moderate-activity,' and 'lower-activity' may vary across sites, the evaluation team left it to each site to determine which cases fell into which categories. To understand service provision at each site, the evaluation team then analyzed these data by coding each case for the type of services provided, number of case notes and services rendered, and length of time the case was active.

LITERATURE REVIEW

Finally, the evaluation team made use of a targeted literature review to determine what is known about Police Based VAPs and best practices in serving crime victims. Due to the limited research and literature available on police-based victim assistance programs, results of our review are spread throughout the report, rather than in a designated section. We conducted a thorough search to ensure we were not missing literature relevant to VAPs within police departments. Search terms included: victim assistance police department; victim advocacy police department; police social worker victim response; police-based victim services; and victim services police department. The search yielded 46 unique papers that were at least peripherally related. Of those papers, only a few were explicitly related to VAP within police departments and are discussed and references throughout this report.

RESULTS

Results

As discussed in the section on *Evaluation Design*, ICJIA's request for this evaluation included a list of "services sought" and "research questions" to be answered with the evaluation study. In Appendix A, we map "services sought" and "research questions" onto the three phases of this evaluability assessment. As we discuss the results for each phase of the evaluability assessment in this section of the report, information responsive to the "services sought" from ICJIA's request for an evaluation is embedded in the text provided. The results section for each phase of the evaluability assessment also includes a list of the applicable "research questions" from ICJIA's request for an evaluation, and provides a direct, succinct answer to each one. Additional deliverables for each phase of the evaluability assessment, as listed in the section on *Evaluation Design*, are also provided.

PHASE 1: HOW IS EACH PROGRAM DESIGNED TO OPERATE?

The goal of Phase 1 was to make explicit the program theory for each site, the context in which the program operates, and the extent to which there is congruence or variation across sites. Below, we describe the history, context, organization, and scope of each program; provide succinct, direct answers to relevant "research questions" from ICJIA's request for an evaluation for this phase; and provide the site-specific TOC models.

Program Descriptions

Arlington Heights Police Department Victim Services Program

The Arlington Heights Police Department Victim Services Program has been in operation since 2003. The program was initially developed through a Victims of Crime Act (VOCA) grant. Since its inception, the program has consisted of a single full-time staff member who is a licensed clinical professional counselor and acts as the Victim Services Coordinator. The program is designed to help crime victims understand and navigate the criminal justice system. Its goals are to ensure victims are safe, address their basic needs through referrals to community resources, and support their participation in the criminal justice system.

The Victim Services Coordinator's office is located inside the Arlington Heights Police Department. It cannot be accessed directly by anyone entering the building; individuals must first check in at the front desk. Arlington Heights police officers become familiar with the Victim Services Program through field training; roll call training; and opportunities to shadow the Victim Services Coordinator. The Victim Services Coordinator also invites in outside agencies to co-train police during an annual week-long required training for all police personnel. Historically, the Victim Services Program has been overseen by the Criminal Investigations Bureau of the Criminal Investigations Division of the Arlington Heights Police Department. Following a reorganization, the

RESULTS

Program is now under the Community Services Bureau of the Criminal Investigations and Community Services Division.

Anyone who is a victim of a crime in Arlington Heights is eligible for services from the Victim Services Program. Program staff indicated that most often crime victims being served are those who have reported domestic violence. According to the Victim Services Coordinator, the most common services provided are follow-up and case management with crime victims, court advocacy and accompaniment, and assistance with court paperwork. When victims' needs extend beyond the scope of what the Victim Services Coordinator is allowed to provide under the terms of the VOCA grant that funds the program, the victim is referred to a range of outside agencies. The Victim Services Coordinator works closely with and coordinates victim services with the Social Services Coordinator of the Arlington Heights Health and Human Services Department. Additional detail on specific ways in which victims are connected to this VAP; the full array of services provided by the VAP; and the intended results of the VAP are provided in the site-specific TOC model on page 16.

Elgin Police Department Social Services Unit

The Elgin Police Department Social Services Unit has been in operation since the early 1990s when the current Social Services Supervisor was hired with Elgin city funds. The Unit expanded over the years with the addition of external funds to support domestic violence services. The Unit currently has one full-time licensed social worker funded through the city of Elgin (the Social Services Supervisor) and three full-time social workers funded through VOCA. Interns from several universities also provide critical support each semester by taking on additional cases. The program is designed to provide assistance to individuals so that they may function at their best with their families, at their place of work, and at school.

The Social Services Unit is located in its own wing inside the Elgin Police Department. The area cannot be accessed directly by anyone entering the building; individuals must first check in at the front desk. Elgin police officers become familiar with the Unit through training provided as part of onboarding with the police department. Police officers are required to provide a tear-off sheet about the Social Services Unit to every victim they encounter. The Elgin Police Department also recently implemented a Collaborative Crisis Services Unit (CCSU). CCSU pairs a police officer with a mental health professional to provide a co-response in situations that would benefit from mental or behavioral health services. Though these programs are distinct, CCSU interfaces with the Social Services Unit to connect individuals with appropriate services. Both the CCSU and Social Services Unit are overseen by the Strategic Initiatives Division of the Elgin Police Department.

The Social Services Unit offers services to anyone who has experienced a crime, and as long as the victimization occurred in the city of Elgin, or the victim resides in the city of Elgin. Social Services Unit staff explained that they provide an array of services that attend to the varied needs of crime victims and their families. Services include court advocacy and accompaniment; crisis intervention and trauma counseling; and assistance related to employment, housing, and finances. Staff are able

RESULTS

to provide these services in both English and Spanish. Services are not time-limited, and staff explained that they often work with individuals and their families for several months or years. While the Unit does refer to outside agencies, staff stated that they continue providing services until they can confirm that the victim is receiving services from another agency. Staff explain that this is particularly important given that other service providers often have waitlists and additional limitations on service provision (e.g., insurance limits). Additional detail on specific ways in which victims are connected to this VAP; the full array of services provided by the VAP; and the intended results of the VAP are provided in the site-specific TOC model on page 17.

Mundelein Police Department Victim Advocacy Program

The Mundelein Police Department Victim Advocate, a licensed clinical social worker, started in April 2018. Prior to the creation of this full-time VOCA-funded position, the Mundelein Police Department did not have a VAP, though they have been involved in efforts to enhance the police response to victims over the years. The program is designed to meet the needs of crime victims; help them navigate the criminal justice system and other related systems; and facilitate their participation in criminal justice processes.

The Victim Advocate's office is located inside the Mundelein Police Department. It can be accessed directly by individuals entering the building and does not require that they first check in at a front desk. Mundelein police officers become familiar with the Victim Advocate through roll call training, ride-alongs, and the Victim Advocate's ongoing efforts to meet all police personnel. Being relatively new, the Victim Advocate also invests time in building relationships with outside agencies and making the community aware of the services offered. This includes participation in Mundelein Police Department's Latino Citizen Police Academy, a ten-week program offered primarily in Spanish that is designed to provide citizens with an understanding of the day-to-day operations of the police department. The Victim Advocacy Program is overseen by the Support Services Division of the Mundelein Police Department.

Anyone who is a victim of a crime in Mundelein is eligible for Victim Advocacy. Most often, the Victim Advocate works with those impacted by domestic violence or sexual assault. The Victim Advocate explained that they work with each victim to provide services responsive to their individual needs. Services include but are not limited to crisis intervention; safety planning; court advocacy and accompaniment; assistance in securing personal protection orders; and connecting the victim to other service providers. The Victim Advocate is bilingual in English and Spanish, which is particularly important given Mundelein's large Latino population. Additional detail on specific ways in which victims are connected to this VAP; the full array of services provided by the VAP; and the intended results of the VAP are provided in the site-specific TOC model on page 18.

RESULTS

Wheeling Department of Human Services

Since 1991, the village of Wheeling has funded one full-time social worker position to respond to the needs of crime victims and provide health services to entire Wheeling community. In 2003, a second social worker position was secured with the support of VOCA funds. These two positions, once overseen by the Wheeling Police Department, now operate within the Social Services Division of the Wheeling Department of Human Services. The director of the Department of Human Services, funded by the village of Wheeling, oversees the work of these two social workers. The Social Services Division of the Department of Human Services is designed to work together with an array of Wheeling departments to ensure citizens are provided the information and support they need to thrive. This includes providing free and confidential services to victims of crime to ensure their basic needs are met, to help them navigate and understand the criminal justice system, and to support their participation in the criminal justice process.

The Department of Human Services, consisting of the director and two full-time social workers, is co-located in its own designated area in the Wheeling Police Department. The area cannot be accessed directly by anyone entering the building. A phone is available in the lobby of the Wheeling Police Department. Individuals may pick up this phone and be connected directly to Human Services, negating the need to check in with someone at the front desk of the police department. Wheeling police officers become familiar with Human Services through field training and regular roll call training. A requirement that officers indicate in all police reports when a referral has been made to Human Services also serves to connect police to Human Services because supervising officers review these reports and follow-up if referrals are not made when they should be.

Anyone who is a victim of a crime in Wheeling is eligible for services. Both VOCA-funded and village-funded staff serve crime victims. Individuals who have not experienced a crime are also eligible for an array of services offered by the Department of Human Services, though staff explained that these individuals would be served exclusively by the staff member who is funded through the village. Human Services staff explain that they work with each crime victim individually to assess their needs and provide those services in the array that best meets the victim's needs. Service includes court advocacy and accompaniment; assistance in securing personal protection orders; helping the victim understand the criminal justice process; and providing a limited number of counseling sessions. Human services staff also provide referrals to an array of outside agencies. Additional detail on specific ways in which victims are connected to this VAP; the full array of services provided by the VAP; and the intended results of the VAP are provided in the site-specific TOC model on page 19.

RESULTS

Research Questions and Answers

What is the level of awareness of the programs and how are the programs providing training or information to their partners and at what points?

The level of awareness of each VAP varies across sites, largely in relation to the age of the VAP. Older programs have had more time to develop relationships with external programs and organizations. All VAPs describe engaging in community outreach and training to develop and maintain critical relationships with agencies that serve the same population.

How do the programs fit within the police departments in terms of their role, oversight, perceptions, and placement?

VAPS also vary on how they fit into the police departments' organizational structure and its physical space. One VAP is a multi-person unit of the police department (Elgin), two consist of a single VAP employee of the police department (Arlington Heights and Mundelein), and one is a multi-person unit of the village Department of Human Services (Wheeling). In two VAPs, individuals can walk into the police department and access the VAP through the police front desk (Arlington Heights and Elgin); in another individuals can walk in and access the VAP through a telephone in the lobby of the police department (Wheeling); and in the other (Mundelein), individuals can walk into the police department and access the VAP staff office directly.

All VAPs spoke about how police perception of the VAP has changed over time, with police having increasingly positive valuations of the role and contribution of each VAP. This is thought to be a result both of police having more opportunity to learn about the value of the VAP over time and the police force changing to become more aware of victims' needs. As police retire and new recruits come in, the perspective on the role of policing in relation to social service provision has been shifting.

How do practices within the police departments (regarding arrest and crime determination) and within the courts (such as, felony review and charging decisions) affect the programs and the services they can provide?

Staff from all VAPs indicated that their program provides services to all crime victims. This is *not* dependent on the victim reporting the crime, the crime being substantiated, or the criminal case moving forward in the criminal justice system. Thus we see little or no impact of police and court practices on the VAPs and services provided.

How do the programs facilitate awareness and positive relationships with the community and law enforcement?

All VAPs described providing an array of training and outreach efforts, both within their police departments and in the community. They all conduct roll call training, with some VAPs

RESULTS

providing this more regularly than others. Some sites also made their VAP a subject of field training for all new police personnel. Staff within some VAPs also pursued additional means for developing relationships with police officers. This included going on ride-alongs, and providing consulting or support for their departments' officer wellness and peer support programs. To build awareness and positive relationships with the community, all VAPs describe engaging in community outreach and education efforts. This includes attending and tabling at community events; partnering with other service providers to develop and provide information sessions and training in public venues (e.g., the public library); participating in Citizen's Police Academies and other police department-based programming; and relationship-building with select community organizations.

How do the programs provide staff support and training to promote self-care?

Half of the VAPs described providing or participating in formal self-care and wellness efforts within their police departments. This most often took the form of VAP staff providing consultation and support for officer wellness and peer support programs, if they existed. In two departments, police personnel discussed the critical role that VAP staff played in providing informal support to them. These officers knew that they could seek out assistance and support from the VAP staff when needed.

RESULTS

Theory of Change Models

The following is a detailed description of the site-specific TOC models. Directly following this description are graphics presenting the TOC models for each site. The models are also included as standalone documents with appropriate date and funding notations in Appendices F-I and have been included to be used by the specific sites as stand-alone documents. Each model includes a description of how victims get connected to the VAP; the services provided by the VAP; outcome pathways for the victim, community, and police; and a series of ultimate intended impacts that unite victims, the community, and police.

Connecting Victims to the VAP

There are six ways in which victims can be connected to the VAP. At the top of each site-specific TOC model, those ways of connecting that apply to each site are listed.

- ✚ **Police Department:** Police connect victims to the VAP either by providing the victim with a tear-off sheet, pamphlet, or the VAP staff's contact information; or by providing the victim's information to the VAP staff via email, phone call, or in-person. Victims can also be connected directly to VAP staff by the responding officer transporting the victim to the police department, or by requesting VAP staff to respond on-scene.
- ✚ **Word of Mouth/Previously Assisted Victims:** Victims are connected to the VAP by referral from those who have previously received services, or are otherwise familiar with the VAP.
- ✚ **Outside Agency/Community Agency:** Outside and community agencies refer their clients/participants, or other community members to the VAP. Such community and outside agencies include but are not limited to local rape crisis centers, civil legal service providers, and child advocacy centers.
- ✚ **Program Staff:** VAP staff review police reports to identify victims who qualify for VAP services, and reach out to these victims to offer services.
- ✚ **Community Outreach:** VAP staff participate in community outreach events (e.g. training, tabling at community events) where they provide resources and information about the VAP. Victims get connected to the VAP in-person at community events or they contact VAP staff after learning about them at community events.
- ✚ **Online:** Victims get connected to the VAP by contacting VAP staff after learning about the VAP through the VAP website.

VAP Services

Based on VAP staff descriptions of how their programs are designed to operate, an array of services are provided to victims across five domains. The domains of service that apply for each site appear on each site-specific TOC model directly below connection mechanisms. Three of the four VAPs have a bilingual staff member, enabling the VAP to provide their full array of services in both English and Spanish. This is indicated through the use of the term, "bilingual services," instead of just "services."

RESULTS

- ✦ **Advocacy and Accompaniment:** VAP staff provide advocacy and accompaniment in conjunction with criminal and civil proceedings, as well as personal advocacy for the victim as the victim's needs arise. Advocacy connected to civil and criminal proceedings includes but is not limited to assistance with orders of protection; guidance on court processes and victims' rights; assistance with applying for and securing crime victim compensation; and help with communication between the victim and police. Examples of personal advocacy include advocating on behalf of the victim with a landlord, creditor, government agency, or other party; or communicating with an outside service agency to ensure that the victim's rights are being honored and their needs are being met.
- ✦ **Crisis Intervention and Emotional Support:** VAP staff provide crisis intervention; emotional support and follow-up; safety planning; and psychoeducation. Some VAPs also provide short- and long-term counseling.
- ✦ **Education and Outreach:** VAP staff provide education and training both within the police department and in the community. This includes but is not limited to providing training at police department roll calls; providing training for community agencies; and tabling at community events and in community spaces.
- ✦ **Referrals:** VAP staff refer victims to outside agencies and community agencies as a victim's needs arise. Services that are the target of referrals include but are not limited to housing or emergency shelter services; transportation services; victim witness coordination; and civil legal services.
- ✦ **Cross-Agency Coordination:** VAP staff coordinate specific services to allow for continuity and ease of access for the victim. This may include contacting an outside agency with the victim and coordinating the receipt of services with the agency contact.

Outcome Pathways for the Victim, Community, and Police

In each of the site-specific TOC models, there are distinct outcome pathways for the victim, community and police. These pathways extend from the VAP services to the ultimate intended impacts. The outcome pathways for the victim and police appear on the left and right side of each model, respectively. These two pathways often begin with changes in access to services, knowledge, and how police work with the VAP that lead to changes in attitude, emotion, and behavior. For example, VAP services lead to victims' increased access to needed services (increase in access), which then lead to the development of coping strategies that enable victims to continue to heal on their own (change in behavior). The outcome pathway for the community appears in the middle of the model and includes changes in access, knowledge, attitudes, and emotion. For example, communities have greater awareness of services and resources provided by the police department (change in knowledge) and increased confidence that the police will be responsive to their needs (change in attitude). Each pathway of impact then leads to the ultimate intended impact, with an accompanying feedback loop.

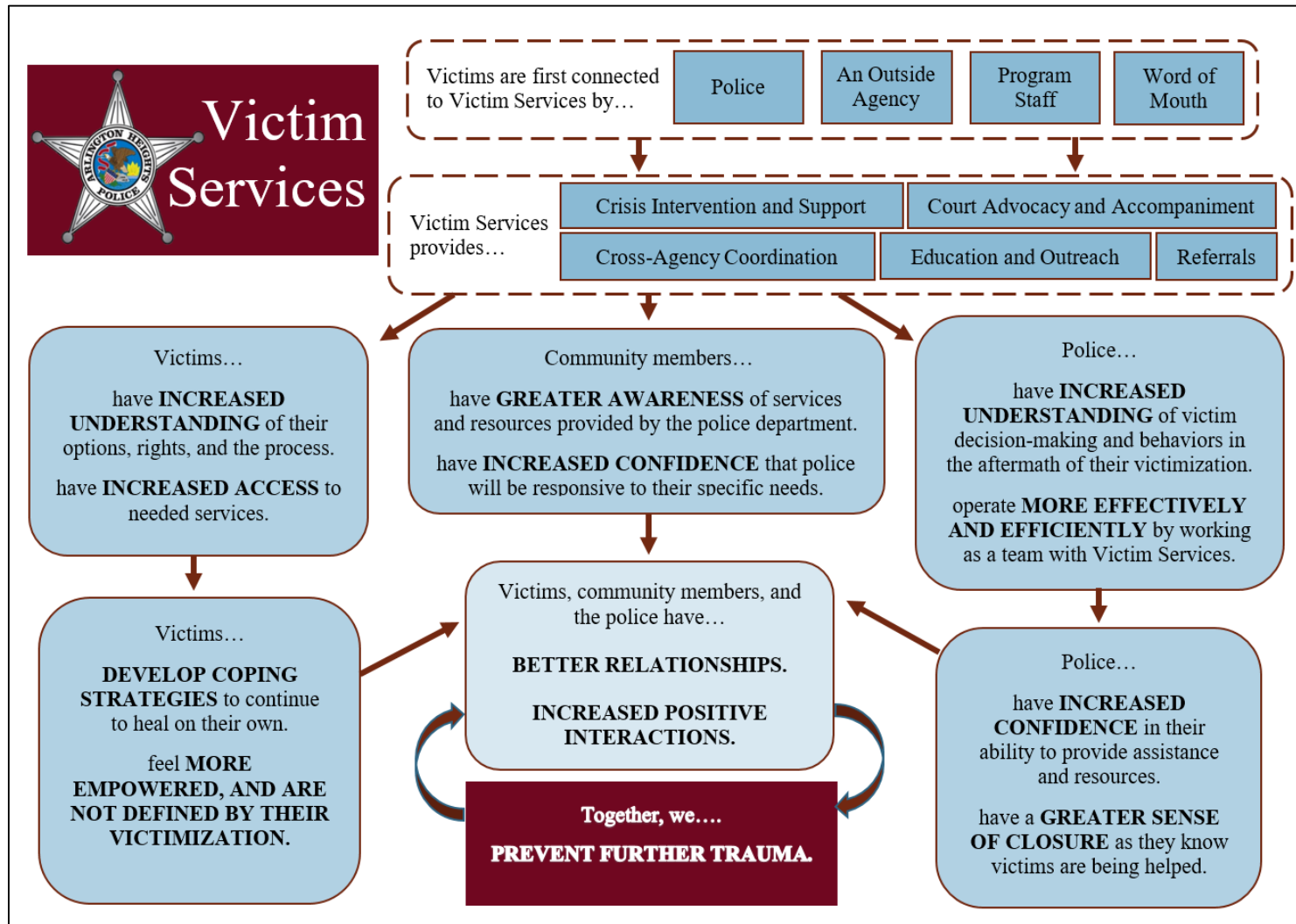
RESULTS

Ultimate Intended Impact and Feedback Loop

The outcome pathways unite with one another in the center of each site-specific TOC model, arriving at the ultimate intended impacts of each VAP. The ultimate intended impacts appear in a pair of boxes in each TOC model. The first box indicates intended impacts in relation to the relationships and interactions among the victims, community, police, and VAP; the second box indicates what results. The feedback loop is included to indicate how these changes are not linear, but reciprocal and reinforcing. For example, as victims, community, and the police have increased positive interactions (first ultimate intended impact box), further trauma is prevented (second ultimate intended impact box), contributing to more positive interactions between victims, the community, and police (first ultimate intended impact box).

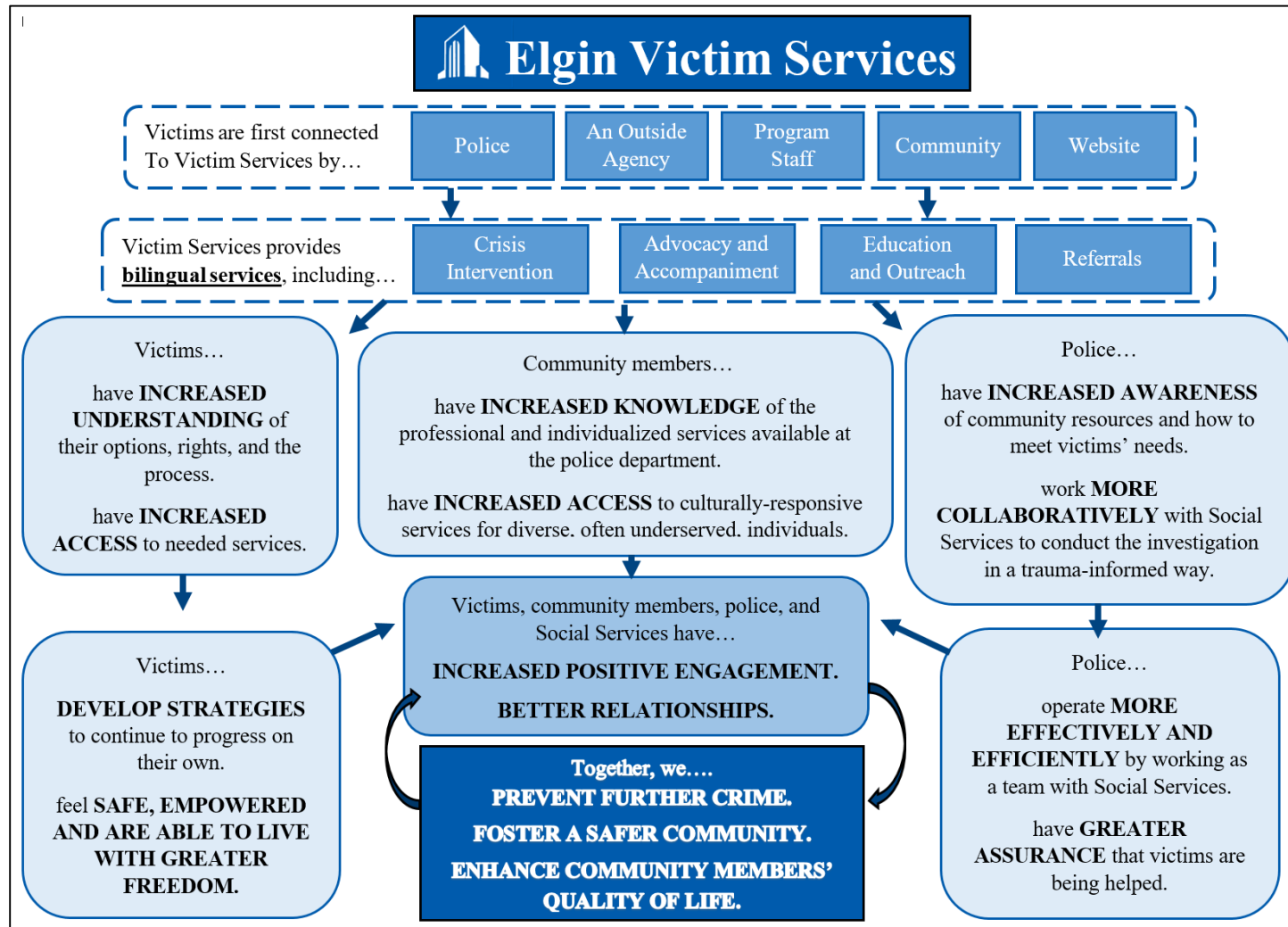
RESULTS

Arlington Heights Theory of Change Model



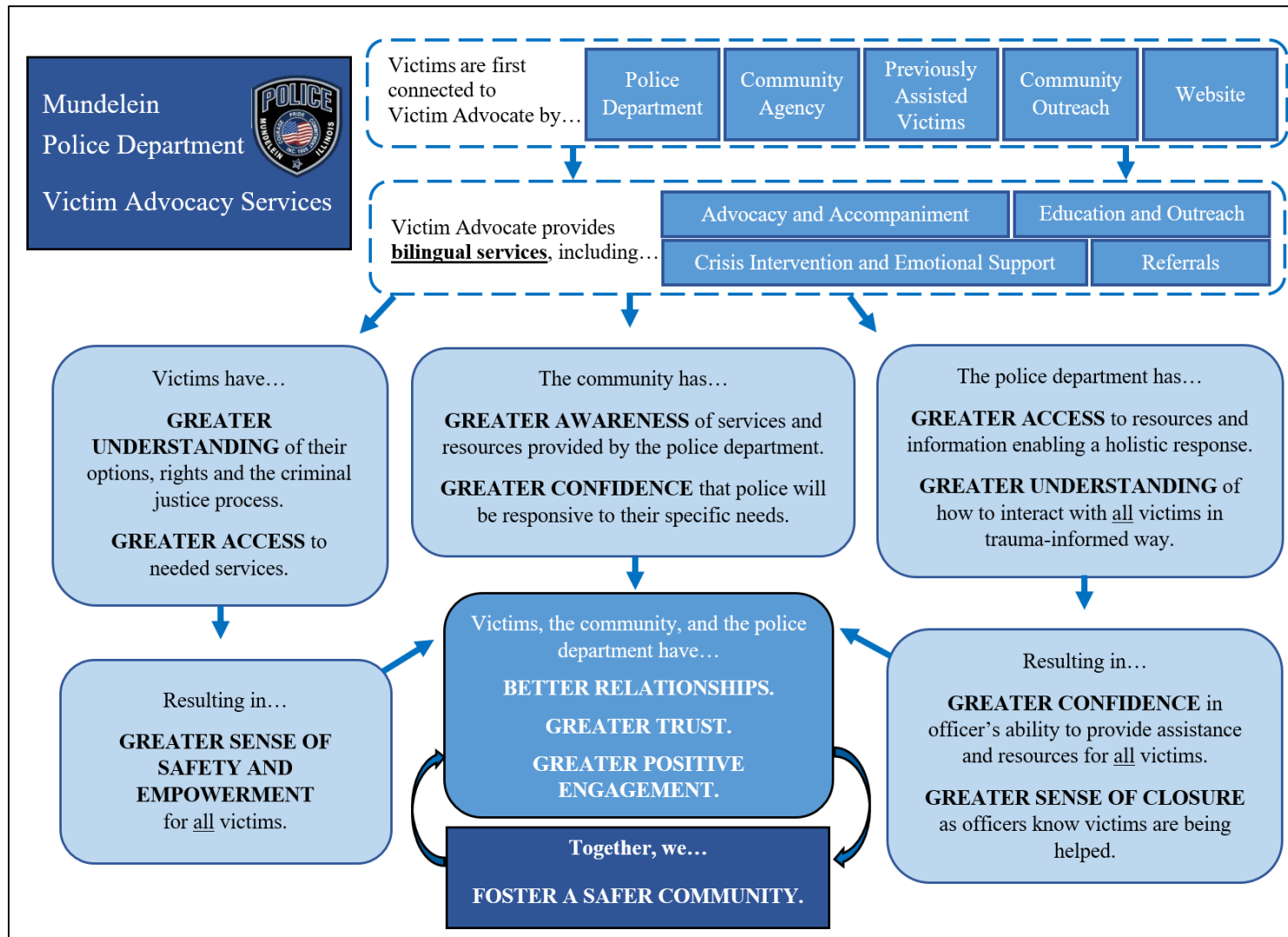
RESULTS

Elgin Theory of Change Model



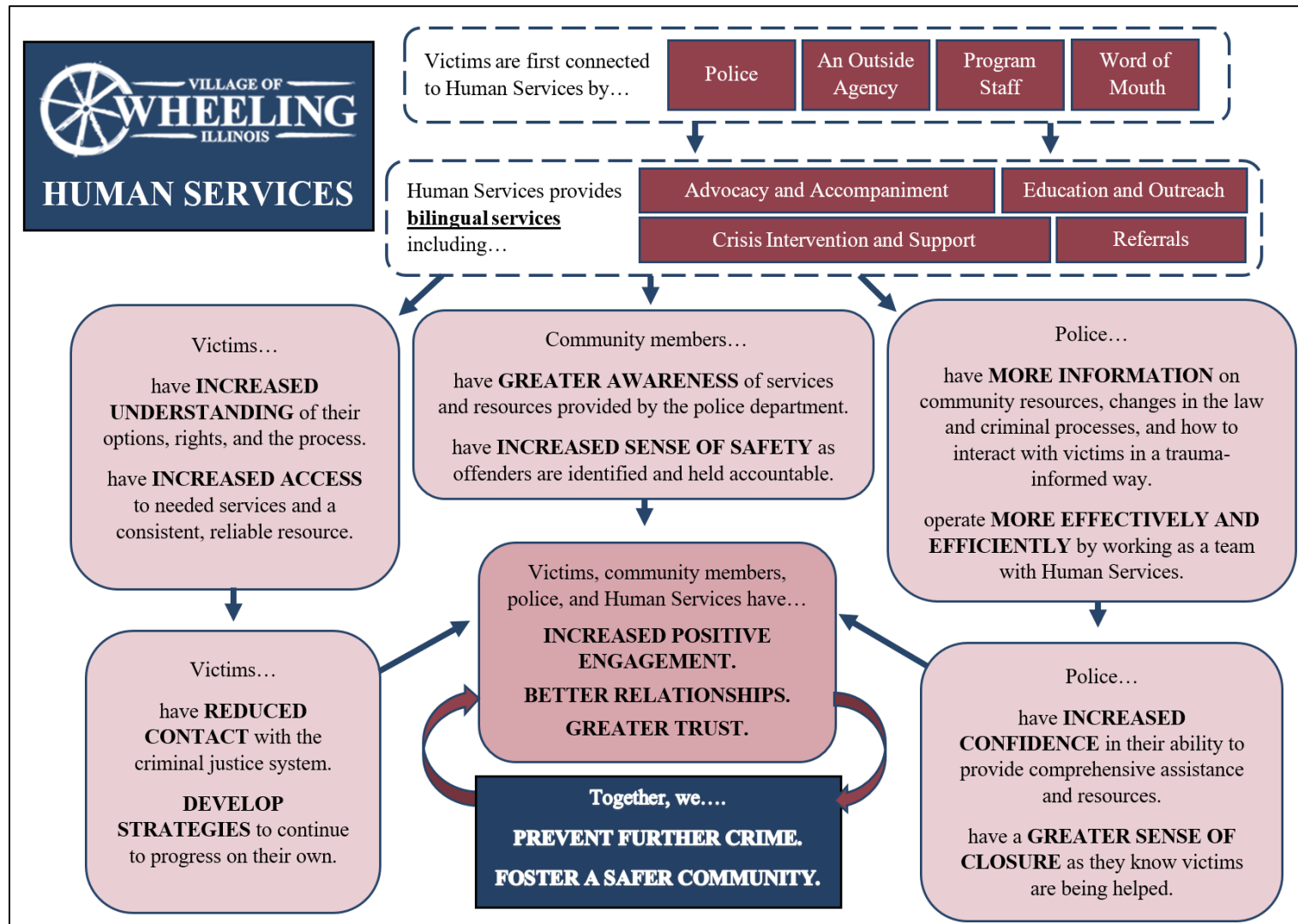
RESULTS

Mundelein Theory of Change Model



RESULTS

Wheeling Theory of Change Model



RESULTS

PHASE 2: ARE SERVICES BEING PROVIDED AS INTENDED?

The goal of Phase 2 was to document current service provision, including what services are being provided, to whom, and amid what challenges and solutions. We also document the extent to which service provision aligns with evidence-based practices and programs. Below, we describe these different elements for each site, using an analysis of client case data to understand better the nature, frequency, and intensity of service provision. We also provide succinct, direct answers to relevant “research questions” from ICJIA’s request for an evaluation for this phase, and provide site-specific findings from the police questionnaire.

Service Provision

Each of the four VAPs demonstrated congruence between *intended service provision*, as presented in the Phase 1 results, and *actual service provision*, as presented here. Key informants across all four sites reported that although victims of any crime are eligible to receive services, victims of intimate partner violence or sexual assault are referred more often than victims of any other type of crime. The higher proportion of referrals for these types of victimizations, then, directly relates to the types of clients who ultimately become engaged in VAP services. This was verified with our review of the supplied client case data, and is consistent with prior research on the odds of seeking victim services after experiencing violent crime. Specifically, Zaykowski’s (2014) research using a subset of National Crime Victimization Survey (NCVS) data found that, although fewer than 10% of victims of violent crime engaged in victim services, victims who were attacked by an intimate partner were 4.5 times more likely to seek help from victim services than victims who were attacked by a stranger.

Importantly, considerable variation exists in the nature and duration of service provision, even among victims of the same category of crime. For example, program staff may have contact with a client only one time, or they may have weekly contact for a number of months. This variation in the nature and intensity of services provided, even among victims of the same type of crime, is consistent with prior research identifying victim profile ‘clusters’ that reflect different victim-identified priorities (Allen, Bybee, & Sullivan, 2004). This variation is also consistent with what we observed in our review of client cases data for these VAPs.

Site-Specific Service Provision Descriptions

In order to better understand the nature, frequency, and intensity of services provided by these four VAPs, a small subset of de-identified client case files from each program was examined. Each case was coded for the number and type of services provided. Eleven service types were identified, and were conceptually grouped into three domains of service provision based on the parties involved when the service was rendered. This taxonomy of services differs from that provided in the TOC models. This is because the TOC models taxonomy was based on how site personnel described their program design. This taxonomy was created inductively through review of client case files.

RESULTS

Service Provision as Coded from Case Notes: Domains and Types of Services

Domain	Service	Definition
Victim Domain	Meet with Victim	Staff meet with victim or victim's family in-person, separate from attending court proceedings or other interactions with a third party.
	Provide Crisis Intervention and Support	Staff provide crisis intervention, counseling, psychoeducation, safety planning, or emotional support to victim or victim's family.
	Provide and Discuss Information	Staff provide and discuss information with the victim on resources, services, the victim's case, or system processes.
	Provide Tangible Support	Staff provide tangible, or instrumental, support to the victim. This includes but is not limited to helping to fill out forms, securing transportation, assisting in writing victim impact statements, and compiling and mailing forms on behalf of the victim.
	Provide Referrals	Staff provide referrals for other service providers to the victim.
	Translation and Interpretation	Staff provide interpretation and translation services for the victim, or secure a third party to provide these services.
Victim and Police Domain	Communicate with Police	Staff communicate, exchange information, or coordinate with the police on behalf of the victim. Only program staff and the police are involved in the interaction.
	Facilitate Police-Victim Interaction	Staff facilitate or participate in an interaction between the police and the victim. Program staff, the police, and the victim are involved in the interaction.
Victim and Outside Agency Domain	Communicate with Outside Agency	Staff communicate, exchange information, or coordinate with an outside agency on behalf of the victim. Only program staff and the representatives of the outside agency are involved in the interaction.
	Facilitate Outside Agency-Victim Interaction	Staff facilitate or participate in an interaction between an outside agency and the victim. Program staff, representatives from the outside agency, and the victim are involved in the interaction.
	Accompany Victim to Court Proceedings	Staff attend a civil, criminal, or other court proceeding on behalf of or with the victim.

RESULTS

In the following site-specific service provision descriptions, cross-site comparisons should **not** be made. This is because the descriptions provided are based on what appears in the client case records, and VAPs varied tremendously in the level of detail in their records. Based on our review, we think it likely that some VAPs provided services that were not recorded in their case notes, and thus are not counted here. Additionally, each site was asked to provide records of services rendered for ten cases between the dates of January 1, 2018 and December 31, 2019. In providing case records to the evaluation team, some VAPs limited what they shared to client case data for services rendered between these dates, even if service provision extended beyond them. Other sites provided full client case data from the first to the last service rendered, even if the dates of those services extended outside of the specified timeframe. Due to variation in record-keeping across sites and in what was provided to the evaluation team, cross-site comparisons of service provision should **not** be made. Additionally, because sites provided us a select subset of their case records, we cannot definitively state that the records we reviewed are representative of site's overall caseload.

Arlington Heights Police Department Victim Services Program

Across all sites, including Arlington Heights, the most common service provided was for VAP staff to provide and discuss information with the victim. VAP staff did this in all ten cases. Information was provided to and discussed with the victim between two and 33 times on each case over the course of service provision. In descending order, the next most common services provided were: accompanying the victim for court proceedings (8 out of 10 cases); communicating with police (8 out of 10 cases); communicating with an outside agency (7 out of 10 cases); meeting with the victim (5 out of 10 cases); providing referrals (4 out of 10 cases); facilitating outside agency-victim interactions (4 out of 10 cases); and providing tangible support for the victim (2 out of 10 cases).

Lower-activity Cases. Lower-activity cases ($n = 3$) included 3-6 separate entries in the case notes over a time period of one week up to three and a half years. In all of these cases, VAP staff provided and discussed information with the victim. In two of these cases, VAP staff noted providing referrals and communicating with police. Less common in this small sample of cases, one of these lower-activity cases included a note of accompanying the victim to court proceedings.

For example, in one lower-activity case, VAP staff worked with a victim of domestic battery. In the week following the incident, VAP staff made note of three separate phone calls or phone call attempts with the victim. Information was provided on each call, including information on personal protection orders. VAP staff also provided referrals on one of these calls. Service provision ended when the victim indicated they would be in touch if new incidents caused them to feel unsafe and after VAP staff left a follow-up voicemail.

Moderate-Activity Cases. Moderate-activity cases ($n = 4$) included 7-27 separate entries in the case notes over a time period of two weeks up to six months. In all of these cases, VAP staff provided and discussed information with the victim, accompanied the victim to court proceedings, and

RESULTS

communicated with an outside agency. In three of these four cases, VAP staff met with the victim and communicated with the police. In half of the moderate-activity cases, VAP staff also provided tangible support for the victim and facilitated outside agency-victim interactions.

For example, in one moderate-activity case, VAP staff worked with a victim of domestic battery over a five-month period. During this time, VAP staff recorded 22 separate entries in the case notes. This particular case went forward with prosecution, and thus, the majority of activities performed by VAP staff involved accompanying the victim to court proceedings or attending court proceedings on behalf of the victim; providing or discussing information about the criminal justice process and crime victim compensation; and assisting the victim in acquiring an order of protection from the offender. Service provision ended when the criminal charges were dropped against the offender; however, VAP staff noted that the order of protection will stay in place and will be modified at a later date due to the offender moving.

Higher-activity Cases. Higher-activity cases (n = 3) included 40-52 separate entries in the case notes over a time period of eleven months to two and a half years. Like the moderate-activity cases, in all of these cases, VAP staff provided and discussed information with the victim, accompanied the victim for court proceedings, and communicated with an outside agency. In addition, for all these cases VAP staff communicated with police. In two of these three cases, VAP staff met with the victim, provided referrals, and facilitated outside agency-victim interactions.

For example, in one higher-activity case, VAP staff worked with a victim of stalking and harassment over a one-year period. During this time, VAP staff recorded 43 separate entries in the case notes. This case moved forward to prosecution, taking additional time to go to trial as the offender's fitness to stand trial was assessed. Due to the nature of the case, the first part of service provision by VAP staff was communicating and exchanging information with police for case development and investigation; and providing and discussing information with the victim on what the prosecution process would entail as changes were made to the criminal charges. The latter half of the case period included VAP staff attending court on behalf of the victim and providing case updates to the victim after each court proceeding. Upon receipt of this case file, service provision by VAP staff was ongoing while awaiting trial.

Elgin Police Department Social Services Unit

Like all sites, the most common service provided by Elgin VAP staff was providing and discussing information with the victim. This happened in all ten of the cases they provided. Information was provided to and discussed with the victim between one and 18 times on each case over the course of service provision. In descending order, the next most common services provided include: meeting with the victim (9 out of 10 cases); providing tangible support for the victim (9 out of 10 cases);

RESULTS

providing crisis intervention and support (8 out of 10 cases); communicating with an outside agency (7 out of 10 cases); providing referrals (6 out of 10 cases); accompanying the victim for court proceedings (4 out of 10 cases); communicating with police (4 out of 10 cases); facilitating police-victim interactions (4 out of 10 cases); facilitating outside agency-victim interactions (4 out of 10 cases); and providing translation and interpretation services (2 out of 10 cases).

Lower-Activity Cases. Lower-activity cases (n = 4) included 2-7 separate entries in the case notes over a time period of two days up to one month. In all of these cases, VAP staff provided and discussed information with the victim. In three of these four cases, VAP staff met with the victim, provided crisis intervention and support, and provided tangible support. In half of these lower-activity cases, VAP staff communicated with police, an outside agency, and accompanied victims for court proceedings. Providing referrals and facilitating outside agency-victim interactions were less common with lower-activity cases, happening in only one of these four lower-activity cases.

For example, in one lower-activity case for which service provision lasted two days, VAP staff worked with a victim of domestic battery. Immediately following the report of the incident, VAP staff made note of conducting an intake with the victim and working with the police on gathering the victim's statement of the incident. After these activities were performed, VAP staff coordinated with community agencies to provide support to the victim throughout the court process and noted that no other services were needed at this time from VAP staff.

Moderate-Activity Cases. Moderate-activity cases (n = 3) included 12-20 separate entries in the case notes over a time period of two weeks up to six months. Like lower-activity cases, VAP staff provided and discussed information with the victim in all of these moderate-activity cases. In addition, VAP staff met with the victim, provided tangible support, provided referrals, and communicated with an outside agency for each of these cases. In two of these three cases, VAP staff provided crisis intervention and support, facilitated police-victim interactions, and facilitated outside agency-victim interactions. Less common, VAP staff accompanied victims for court proceedings, communicated with police, and provided translation and interpretation services in only one of these four moderate-activity cases.

For example, in one moderate-activity case, VAP staff worked with a victim of domestic battery over a seven-month period. During this time, VAP staff recorded 16 separate entries in the case notes. For the duration of this case, VAP staff provided and discussed information with the victim about community services and resources, and provided tangible support to the victim and their family as needs arose. Specifically, due to the nature of the crimes against the victim, VAP staff provided financial, housing, and medical assistance. Service provision for this case ended when the victim informed VAP staff that they no longer needed additional services as their immediate needs had been met.

RESULTS

Higher-activity Cases. Higher-activity cases (n = 3) included 12-35 separate entries in the case notes over a time period of seven months to almost two years. In each of these cases, VAP staff met with the victim, provided crisis intervention and support, provided and discussed information, and provided tangible support. In two of these three cases, VAP staff provided referrals, facilitated police-victim interactions, and communicated with an outside agency. Less common, and occurring in one of these higher-activity cases, VAP staff accompanied victims for court proceedings, communicated with police, and facilitated outside agency-victim interactions.

For example, in one higher-activity case, VAP staff worked with a victim of aggravated sexual assault over a ten-month period. During this time, VAP staff recorded 35 separate entries in the case notes. Because the case moved forward with prosecution, VAP staff provided and discussed information pertaining to the criminal justice process and available resources and services in the community for the entirety of the case. VAP staff also provided crisis intervention and ongoing counseling, referrals to outside community agencies, interpretation and translation support with outside providers, and assistance with applying for a U-Visa. Service provision ended with the completion of the criminal case.

Mundelein Police Department Victim Advocacy Program

Like the other sites, providing and discussing information with the victim was the most common service provided by the Mundelein VAP staff; VAP staff did this in all ten cases. Information was provided to and discussed with the victim between two and 48 times over the course of service provision. In descending order, the next most common services provided include: Providing crisis intervention and support (8 out of 10 cases); providing tangible support (8 out of 10 cases); accompanying victims for court proceedings (8 out of 10); communicating with police (8 out of 10 cases); communicating with outside agencies (8 out of 10); meeting with the victim (6 out of 10 cases); providing referrals (6 out of 10 cases); facilitating police-victim interactions (6 out of 10 cases); providing interpretation and translation (6 out of 10 cases); and facilitating outside agency-victim interactions (5 out of 10 cases).

Lower-activity Cases. Lower-activity cases (n = 2) included 2 separate recorded activities each, taking place over a time period of eight to nine days. In each of these cases, VAP staff provided and discussed information with the victim.

For example, in one lower-activity case, VAP staff worked with a victim of domestic battery. In the week following the incident, VAP staff identified this case for follow-up and attempted to connect with the victim via phone and left a voicemail. VAP staff then attempted contact again the following week and were able to provide information to the victim on orders of protection. During that phone call, the victim stated they were not in need of any additional services.

RESULTS

Moderate-Activity Cases. Moderate-activity cases (n = 4) included 12-29 separate entries in the case notes over a time period of three to six months. In each of these cases, VAP staff provided and discussed information with the victim, provided crisis intervention and support, provided tangible support, accompanied the victim for court proceedings, communicated with police, and communicated with outside agencies. In three of these four cases, VAP staff provided referrals, facilitated police-victim interactions, and provided interpretation and translation services. VAP staff met with the victim in half of these cases, and facilitated outside agency-victim interactions in one case.

For example, in one moderate-activity case, VAP staff worked with a victim of a domestic dispute over a six-month period. During this time, VAP staff recorded 26 separate entries in the case notes. This case moved forward to prosecution. Accordingly, the majority of services revolved around providing and discussing information with the victim about the criminal justice process and crime victims' rights. Service provision also included coordinating with outside agencies, court accompaniment for the victim, and assistance in attaining an order of protection. Service provision concluded with the close of the criminal case, and after VAP staff left voicemails providing the case disposition with no response from the victim.

Higher-activity Cases. Higher-activity cases (n = 4) included 29-66 separate entries in the case notes over a time period of eight to fifteen months. Like the moderate-activity cases, VAP staff provided and discussed information with the victim, provided crisis intervention and support, provided tangible support, accompanied the victim for court proceedings, communicated with police, and communicated with outside agencies in every one of these higher-activity cases. In addition, VAP staff met with the victim and facilitated outside agency-victim interactions on each of these cases. In three of these four higher-activity cases, VAP staff also provided referrals, facilitated police-victim interactions, and provided interpretation and translation services.

For example, in one higher-activity case, VAP staff worked with a victim of criminal sexual assault across a 14-month period. During this time, VAP staff provided 29 separate entries in the case notes. In the beginning, service provision primarily involved VAP staff coordinating and communicating with the police for case development and investigation; and providing and discussing information with the victim about the criminal justice process and crime victims' rights and compensation. As the case moved forward in the criminal justice process, and due to the sensitive nature of the crime, VAP staff primarily provided emotional support and information regarding the criminal case against the offender. Service provision ended with the completion of the criminal case and the VAP staff offering needed support and services in the future when the victim was ready.

RESULTS

Wheeling Department of Human Services

Similar to the other sites, providing and discussing information with the victim was the most common service provided by Wheeling VAP staff. VAP staff provided this service in nine of the ten cases between one and 22 times over the course of service provision. In descending order, the next most common services provided include: Providing referrals (6 out of 10 cases); accompanying victims for court proceedings (5 out of 10 cases); communicating with police (5 out of 10 cases); communicating with outside agencies (5 out of 10 cases); meeting with the victim (4 out of 10 cases); providing tangible support (4 out of 10 cases); providing crisis intervention and support (3 out of 10 cases); facilitating police-victim interactions (3 out of 10 cases); providing interpretation and translation (3 out of 10 cases); and facilitating outside agency-victim interactions (2 out of 10 cases).

Lower-activity Cases. Lower-activity cases ($n = 4$) included 1-6 separate recorded activities, taking place over a time period of one day to fifteen months. VAP staff provided and discussed information with the victim in three of these four lower-activity cases. VAP staff facilitated police-victim interactions and provided interpretation and translation in half of these cases. Less common and occurring in one of the four lower-activity cases, VAP staff met with the victim, accompanied the victim for court proceedings, and provided referrals.

For example, in one lower-activity case that was active for 11 days, VAP staff worked with a victim of domestic battery. Immediately following the incident, VAP staff contacted the victim and set up an appointment for the victim to receive counseling from VAP staff. The victim missed the scheduled counseling appointment and the case was closed as VAP staff was unable to reach the victim to reschedule.

Moderate-Activity Cases. Moderate-activity cases ($n = 3$) included 5-19 separate recorded sets of activities taking place over a time period of two months to over four years. In each of these cases, VAP staff provided and discussed information with the victim and provided referrals. In two of these three moderate-activity cases, VAP staff provided tangible support, communicated with police, and communicated with an outside agency. Finally, less common were VAP staff accompanying the victim for court proceedings and facilitating outside agency-victim interactions. These services each occurred in one of the three moderate-activity cases.

For example, in one moderate-activity case, VAP staff worked with a victim of domestic battery over a two-month period. During this time, VAP staff recorded 10 separate entries in the case notes. Because this case went forward with prosecution, VAP staff primarily provided and discussed information with the victim about the criminal justice process and senior services available to the victim in the community; attended court with the victim or on behalf of the victim; and provided tangible support to the victim regarding criminal justice proceedings (e.g. transporting the victim to and from court). Service provision concluded after the

RESULTS

offender plead guilty and the criminal case was closed. VAP staff provided senior resources to the victim with the conclusion of services.

Higher-activity Cases. Higher-activity cases (n = 3) included 26-43 separate entries in the case notes over a time period of six months to one and a half years. Like the moderate-activity cases, VAP staff provided and discussed information with the victim in each of these cases. Additionally, in every one of these cases VAP staff met with the victim, provided crisis intervention and support, accompanied the victim to court proceedings, communicated with the police, and communicated with outside agencies. VAP staff provided referrals and tangible support in two of the three higher-activity cases. Less commonly, VAP staff facilitated police-victim interactions, facilitated outside agency-victim interactions, and provided translation and interpretation in one of these three cases.

For example, in one higher-activity case, VAP staff worked with a victim of child abuse and sexual assault across a year and half period. During this time, VAP staff recorded 43 separate entries in the case notes. Because the case moved forward with prosecution and the crime committed had a sensitive nature, VAP staff primarily provided and discussed information to the victim and their family about the criminal justice process; attended court with the victim and their family, or on behalf of the victim; and coordinated and communicated with outside agencies as needed for the victim's criminal case. Service provision ended with the conclusion of the criminal case and the victim and their family stating they no longer needed services.

Incorporating Best Practices

Currently, there is a dearth of research related to best practices for victim service delivery in police departments. However, there are well-established best practices related to victim advocacy outside of a police department context. In particular, best practices for working with survivors of domestic violence in a community setting may be especially relevant for the current study given the high frequency of domestic violence victims who engage with services in the Arlington Heights, Elgin, Mundelein, and Wheeling VAPs (e.g., Sullivan & Bybee, 1999; Allen, Bybee and Sullivan, 2004).

Additionally, there are general guidelines for best practices related to victim assistance broadly. The National Victim Assistance Standards Consortium was established in 1999 as a partnership between the Office for Victims of Crime and the University of South Carolina. Originally published in 2003 and revised in 2010, the Consortium developed a set of standards to promote victim assistance provider "competence and ethical integrity, as well as high-quality and consistent service" (Office for Victims of Crime, 2016). The guidelines are intended to be detailed but flexible in how a given program may adopt them.

VAPs incorporate established best-practices throughout their work in a variety of ways. For example, research has established that advocacy services for victims of domestic violence are most

RESULTS

effective when they are individualized, comprehensive, and driven by survivors' self-identified priorities (as opposed to priorities identified by a service provider) (Allen, Bybee, and Sullivan, 2004; Davies et al., 1998). Standards published by the NVASC similarly reflect an emphasis on client self-determination, explicitly stating in Ethical Standard 3.4 that "the victim assistance provider's role is ultimately to encourage the victim/survivor to make his or her own decisions, and to support the victim/survivor in those decisions." The four VAPs in the current study make this principle explicit by offering services that are not contingent on whether a victim chooses to participate in criminal or civil proceedings against an abusive partner.

Other best practices appear to be integrated into VAP work in both formal and informal ways. For example, VAP staff routinely foster interagency linkages, emphasize working within the bounds of one's professional competence (and referring out when necessary), adequately preparing victims for interacting with the criminal justice system, and facilitating preliminary and ongoing assessment of client needs (See Allen, Bybee, and Sullivan, 2004; OVC, 2016; Davidson & Rappaport, 1978; Sullivan, 1991a, 2000; Sullivan & Bybee, 1999). Additionally, as a result of participation in the current project and consistent with best practices, all four VAPs now have a site-specific TOC logic model to use as a basis for future evaluation efforts (described in OVC Program Standard 1.1).

Challenges and Solutions

The VAPs described encountering a variety of challenges in the course of their work. Specifically, VAP staff reported challenges related to (1) sustainability and limited resources; (2) providing victim services within a police agency; and (3) coordination and collaboration with external agencies.

Challenges Related to Sustainability and Limited Resources

Unsurprisingly, given that sustainability concerns are pervasive in victim services, police and VAP staff noted a variety of challenges related to limited resources. Although police and VAP staff described the VAPs as important and successful complements to police work, leadership recognized that VAPs are in a vulnerable position, funding-wise. Police and VAP leadership specifically mentioned the inherently political nature of federal funding, and how resources available today may not be next year. Informants also described smaller-level political influences impacting VAPs, such as local governments' (e.g., city council) budget priorities (e.g., hiring another police officer or hiring another social worker). Recent organizing efforts across the country to evaluate interactions between police and the public are also undoubtedly influencing budget conversations, though it is unclear what this might mean for VAPs.

VAP staff also experience limited availability of external resources as an ongoing challenge. Staff across the VAPs noted that external service providers often have long waitlists. This requires VAP staff to consider how they can ensure continuity of essential services for their clients, while operating within the set of allowed services dictated by the VOCA grants that fund the VAPs. VAP staff and police leadership noted that this tension arises when trying to attend to the needs of crime

RESULTS

victims over time, while wanting to be responsive to citizens who are in need of a wide array of services, but who are not crime victims. VAPs have more flexibility to respond when they are funded through both VOCA and their city or village, and when they have cohorts of interns supporting their work. Such VAPs report that they are able to provide services for a wider range of clients, only terminating service provision once it is confirmed the client is receiving needed services elsewhere.

Challenges Related to Providing Victim Services Within a Police Agency

Police and VAP staff reported multiple challenges related to providing victim services within a police agency, including police skepticism of the program; location as a potential barrier; and differing perspectives between the VAP and police.

Police Skepticism of the Program. Notably, both police and VAP staff described police skepticism as a real barrier during different points of the VAPs' tenures. Police were sometimes unsure and skeptical of the role of the VAPs within the police departments. Police and VAP staff reported that the VAPs were able to successfully address this barrier in a variety of ways: making the benefits of the VAP to officers explicit; being respectful of the police hierarchy; and demonstrating competence, reliability, and consistency over time.

Importantly, both police and VAP staff emphasized that police administration's explicit support of the program is often critical for success. VAP staff and police leadership suggest leadership should demonstrate support by developing processes to support connections between police and the VAP, incorporating VAP training into new officer initial training, and implementing and enforcing accountability practices for officer use of the program. One VAP described specific initiatives undertaken by leadership to ensure the integration of the VAP into the police department. These included regular supervisory review of case files to ensure officers are appropriately making referrals to the program, and supplying VAP staff with a radio so they can hear incoming calls.

Location as a Potential Barrier to Client Engagement. Police and VAP staff identified benefits and challenges to providing co-located victim services within the police department. For example, while co-location was identified as a benefit for police-victim assistance collaboration and for timeliness of program-client contact, nearly every program commented on co-location as a potential barrier to victim engagement, particularly for those with immigration concerns. One member of police leadership explained,

"To me the only challenge [with co-located services] is fear of law enforcement, especially by [undocumented immigrants]. They fear that [if] they go into a law enforcement building, they're not coming out."

Programs described attempts to mitigate this potential barrier by emphasizing the civilian role of the VAP staff and through frequent community outreach and training.

RESULTS

Differing Perspectives and Mandates. Officers and VAP staff described the challenges that come with having different perspectives and mandates, though this was also described as a strength. For example, VAP staff are well-versed in trauma-informed care. They bring this perspective to how to approach interactions with victims. This might conflict, at times, with a police mandate to investigate and discern the truth (which can be stressful for victims). Police noted that it was helpful that,

"[The VAP staff was] not coming in questioning things, trying to push...beliefs" [on officers]."

Rather, police and VAP staff have created respectful relationships in which VAP can share their perspectives on trauma-informed practice and how to understand victim behavior in ways that can enhance police work.

Challenges Related to Coordination and Collaboration with External Systems and Agencies

Lastly, VAP staff described multiple challenges related to victim assistance work within external systems, including an inefficient and inconsistent court system; ever-changing systems with a lack of explicit, written protocols; and territoriality.

Inefficient and Inconsistent Court System. Many VAP staff expressed frustration related to navigating an inefficient and inconsistent court system. The court system was described as "out of control," a place of "chaos," and something that was beyond what VAP staff could "fix." As one VAP staff member described it at multiple times during their interview,

"The, the one major thing that just, I know my blood pressure goes up, is the court system and in learning more about the system and becoming more familiar, the barriers, and they're completely out of our control. [...] There have been some [excellent] state's attorneys and then there's some state's attorneys that...I don't [want to] bring my clients."

"The court system, again... orders of protection forms, we can't find them. [...] I shouldn't come to court and have to make copies for the entire courthouse. I just shouldn't... And I try to be as prepared as I can for my clients, but I go, I can't fix the court system. And that's a, you know, that's a huge hurdle."

"When I'm with the victims, I really protect my victims. I don't want them to have to suffer any more than they already have for their own incident, let alone other chaos that's going in the courthouse."

RESULTS

Ever-Changing Systems with a Lack of Explicit Protocols

Challenges in navigating the court system, and other external systems, were often exacerbated because system operations and the service delivery system itself seemed to be constantly changing. Such changes weren't always announced, and too often, these changes seemed to be made without clear, explicit protocols dictating practice. As a result, different parties within these systems often provide contradictory or conflicting information. One VAP staff member described how this relates to violations of the conditions of bond. They explained,

"Like even with the violation of conditions of bond, I'll get different answers from different people. The state attorney's office, it should be getting one answer. Everyone should know what the process is here. I get different answers from officers for what they think we should do. I should be getting one answer for what our processes are...It's just like every time I try to fill in a gap... I think we should be able to work together."

Another VAP staff member described how the ever-changing delivery system impacted victim referrals and required VAP staff to be proactive to ensure they always knew the current state of each part of the service delivery system.

"It would be really hard if every person I referred to it was...a dead end. So I try really hard to do a lot of the networking and you know, create colleagues and friendships and every meeting I go to look for someone I haven't met before to at least try to make another connection there because...you've got to know someone who knows someone and that resource is close there. I hate doing that part because I wished that our systems were better, but I know it's important. So I would say that is also invaluable to the program."

A third VAP staff member described how a cumbersome chain of command made it difficult to understand exactly why specific changes were made, and to have those most impacted by the change be a part of the decision to make the change.

"I have been known to get in trouble for the chain of command...because by the time you get through that chain, you coulda' got what you need by going to the person direct, instead of, 'go with that person,' who says, 'go to that person,' then, 'go to that person,' 'go to that person,' who says 'okay, now you can go to that person.'"

Territoriality

VAP staff also described a sense of "territoriality" and competition about funding from other agencies and systems with similar service provisions. One VAP staff member described it as,

RESULTS

“Territorial.. that’s like some of the issues we’ve had with some agencies who are getting funding from some of the same sources. There’s a sense of competition instead of cooperating, they want to compete.”

Two additional VAP staff members described how they overcome this territoriality by encouraging cooperation rather than competition. They explained,

“I think too is building a relationship with our resources. I mean because I think that we do have a really good relationship with other agencies in the community. You know, sometime it’s very, very hard for us all to play in the sandbox. We keep on throwing the sand. So you know, um, because sometime it’s just going to come to territorial because we don’t charge people money so they don’t want everybody running to us. You know, they want to make sure that you know, that they’re getting what they need to get to and we try to push those things out (referrals) to those agencies that need it. So keeping that good rapport with the community, with, you know, the resources...”

“We collaborate with the county state’s attorney. And I say this constantly, you cannot do this work without the community working with you...so we reached out to them and say, okay how we, we want to be, make sure we are servicing ...residents.”

Sites described addressing these challenges through taking advantage of established feedback channels (e.g., domestic court services meeting), and creating formal and informal support systems. For example, almost all programs described involvement with the local Association of Police Social Services (formerly Association of Police Social Workers) as critical for improving their knowledge of therapeutic interventions and community resources.

RESULTS

Research Questions and Answers

What victimization trends are emerging and how should those types of crimes inform service plans?

Given the limits on available data related to victimization, it is difficult to assess emerging victimization trends accurately. However, police and VAP informants at multiple sites reported perceptions of increasing calls related to mental health and emotional distress, including suicide attempts and completions. One member of police leadership explained

“I think that it’s really changed to the point where we’re seeing injured or distressed people a lot.”

This increase has influenced VAP procedures for at least one site, where a staff person explained,

“We’ve been having an ongoing discussion about what to do about survivors of suicide. Suicide is technically against the law, but it’s not what most people would consider a crime. But we have been having more frequent suicides in the community and it has finally gotten to the point where we realized we really need to reach out to these survivors, because that is a traumatic experience. So, we started including them in the scope of the population of victims. And we’ve had a lot more than usual this last couple of years.”

Multiple sites also described observing a recent increase in financial crimes targeting elderly residents.

Lastly, while not described so much as an emerging trend but as a consistent issue, police and VAP staff repeated perceptions of police responding to the “same houses” for the “same issues,” emphasizing the need for police to have more effective ways of responding to people on these calls. One officer explained that over monthly staff meetings,

“[There] started to become clearer evidence [for a need to change] because we were reporting on the same people, you know, the same issues. And they were victims. They were in bad situations. They were in recurrent alcohol or drug abuse situations. So all of those mental health and recurring domestics were coming up time and time again. What are we doing to deal with them? So that’s when it became apparent that we weren’t reaching them. We weren’t making the head road that we would like to prevent those recurrences.”

RESULTS

What are the best-practices in victim service delivery within police departments and what are the standards for service provision? How are these currently being implemented?

Research into best practices for victim service delivery within police departments is limited. However, VAPs in the current study incorporate processes reflecting best practices for domestic violence advocacy and victim assistance service delivery more generally in a variety of ways.

For example, at some point each of the four VAPs in the current study described an emphasis on client self-determination and a “...focus on meeting survivors’ self-defined needs and wants” throughout the process (Allen, Bybee & Sullivan, 2004, p.1018). Programs also implemented other best practices such as assessing victims’ unmet needs and intervention priorities, fostering interagency linkages whenever possible, engaging in routine record keeping, and implementing organizational accountability processes.

Critically, all four VAPs currently offer a diverse service array that both encompasses and expands beyond the formal criminal justice system response. This is important because, although engagement with the criminal justice system may be an important outcome for various reasons (e.g., increasing abuser accountability), research suggests that effective victim assistance should provide a comprehensive service array with a variety of services beyond the criminal justice system. For example, best practices in victim advocacy assert the importance of individualized, flexible service provision that can address a variety of victim-identified presenting concerns and that can increase victim access to resources to meet those identified needs (Allen, Bybee & Sullivan, 2004). Importantly, meeting victim-identified needs “may foster survivors’ safety to a greater extent than an exclusive focus on an improved criminal justice response; that is, connecting women broadly to the resources they identify as important may play a greater role in fostering their safety than focusing only on pursuing criminal action against the batterer” (Allen, Bybee & Sullivan, 2004 p. 1030).

What are the sustainability issues within the programs, especially with regard to continued awareness of the programs, staff turnover and political influences? How do the programs address these and other barriers to sustainability?

Informants reflected a variety of concerns related to program sustainability. Particularly salient concerns related to ongoing funding for the VAP, and the limited availability of external resources to which clients may be referred.

Of the four funded programs described in the current study, only one was newly implemented (April 2018) as a result of VOCA/ICJIA funds. The other three programs are longstanding, with program tenure of between 17 and 28 years. Additionally, these three programs have experienced a remarkably small amount of staff turnover over time; all three have one staff member currently working with the VAP who was employed during implementation of the program. Similarly, police turnover at these sites is relatively low, with officers typically remaining in the police department for a significant number of years. Stakeholders reflected

RESULTS

positively on the limited turnover of VAP staff and police officers, explaining that the consistency in personnel contributes to police buy-in by allowing VAP staff to display their competence, resulting in increased trust and utilization of the program by police. While turnover is remarkably low, both police and VAP staff saw a benefit of turnover, because it allows for “old school” highly authoritarian mindsets to move on at the time of retirement while encouraging a more modern, victim-responsive police culture. Of course, this is also dependent on police leadership’s clear and explicit support of the VAP, and implementation of organizational scaffolding for officer training and accountability around VAP utilization.

At least one program commented specifically on political influences related to sustainability of the program. One member of police leadership stated,

“Well, it's politics, right? I mean, this is a political program. The funding comes through a funding mechanism that comes out of federal legislation and that can change at any given time.”

Other programs alluded to the impact of political influences within the police department more broadly. For example, they described changes in the agency over time that reflected changes in police culture.

How successful are the programs in reaching underserved clients, particularly those with immigration concerns?

While none of the four VAPs excluded potential clients based on immigration status, significant barriers exist in understanding how successful the programs are in reaching clients with immigration concerns. Research into Latino immigrants’ use of public health and social services has identified provider “frustrations with the dearth of available statistics on these trends, making it difficult to assess” potential changes in engagement in services over time (Hardy et al., 2012 p. 1252). In order to appropriately explore this question, a number of concerns related to client safety and confidentiality would need to be addressed, given the particular vulnerability of undocumented immigrants in the United States (Birman, 2006; Lahman, Mendoza, Rodriguez, & Schwartz, 2011). Thus, we are unable to address the question within the project parameters.

However, research on four urban counties in the United States (including Chicago) indicates that many immigrant and non-immigrant Latinos experience fear and mistrust of police, with “a substantial portion of Latino respondents report[ing] that they would be less likely to voluntarily contact the police if they are the victim of a crime, or to provide information about a crime, because they fear that police would use this contact as an opportunity to investigate their immigration status or that of their friends and family members” (Theodore & Habans, 2016).

RESULTS

Police Questionnaire Reports

A questionnaire asking about police (1) awareness, (2) utilization, and (3) opinions of the VAP was administered to a wide sample of sworn police officers at each site (see individual reports for each site in Appendices J to M). Specifically, the questionnaire was developed to assess police awareness of the scope of services provided by the VAP, the nature and frequency of police engagement with the program (i.e., how do police connect victims to the program? How often do police make referrals?), and, when relevant, potential reasons police may not utilize the program.

Across sites, we found the following:

- ✦ Sworn personnel at all levels and across all shifts participated in the survey, though day and afternoon shift are slightly overrepresented.
- ✦ Across sites, 100% of officers who participated in the survey were aware of the VAP.
- ✦ Participants were made aware of the VAP through department-related training and during roll call.
- ✦ While officers were almost uniformly aware that the VAP was available, they were not always aware of all of the specific programming offered. Awareness of which services are available varied from site to site. For example, in one site participants knew that the VAP provided crisis counseling, court accompaniment and referrals to outside agencies, but fewer than half were aware of some VAP activities including community outreach and events, crime victim compensation, and preparing victim impact statements.
- ✦ Typically, victims of crime and VAP staff are connected to one another in one of two ways: 1) information is provided directly to the victim so that the victim may contact the VAP, or 2) information is provided to VAP staff so they may reach out to the victim. Officers commonly made referrals to the VAP via email, phone and in-person contact with the VAP office. Officers provide information to victims about the VAP by providing the victim with a pamphlet or tear sheet, or a business card. Other times they verbally provide the information without providing written information. Sites varied somewhat with how regularly written information was provided. All VAP staff also reviewed police reports to identify victims for follow-up. So, while referrals from officers were common, this was not the only mechanism for victims to be linked to services.
- ✦ While most officers across sites seemed to refer most victims to the VAP, relatively few officers referred 100% of the time. Referral rates and reasons for not referring varied from site to site. This included not referring for certain types of crimes (e.g., non-violent crimes property crimes); only referring for certain types of crimes (e.g., domestic violence); a perception that the case is not relevant for victim assistance; the victim already being connected to victim assistance; or a perception that the victim was being uncooperative or showing no interest in assistance.

RESULTS

PHASE 3: WHAT ARE THE INTENDED BENEFITS OF THE PROGRAM, AND HOW CAN THEY MOST APPROPRIATELY BE MEASURED?

The goal of Phase 3 was to document the anticipated benefits of the program based on stakeholder perspectives and existing literature, and develop a future evaluation plan for an outcome evaluation. Below, we describe what we learned about how stakeholders define program success, how success might be measured in future evaluation work, and the extent to which sites are ready and have the capacity to conduct evaluation. Again, we provide succinct, direct answers to a list of the relevant “research questions” from ICJIA’s request for an evaluation for this phase. We also provide a cross-site evaluation plan and recommendations for future evaluation work.

Measuring Success and Evaluation Capacity

Anticipated Benefits

Police and VAP staff were asked to describe the benefits or outcomes they anticipated as a result of VAP activities. Specifically, informants were prompted to describe the outcomes that they might expect to see, and have already observed for three distinct groups: victims, the community, and police. Anticipated benefits reported by police and VAP staff were largely consistent across the four sites; even with existing variations in program structure and service processes, programs articulated many of the same desired outcomes. In the sections for victim-, police-, and community-related outcomes below, we provide a table that lists each outcome, the site-specific outcome phrasing as presented in the TOC models, and key informant quotes that contributed to the identification of each outcome. Typically, there are one to two quotes provided for each outcome pathway, though typically more people expressed the same idea. At times, multiple quotes are provided when they highlight slightly different facets of the pathway of interest.

Victim-Related Outcome Pathways

The most salient shorter-term outcomes described by key informants relate to increasing victim awareness of their options and rights, and increased victim access to needed services. VAP staff and police described a streamlined process for achieving shorter-term outcomes as important for preventing secondary victimization, with one member of police leadership stating,

“They’re already victims. You don’t want them to be re-victimized by how the system works or not knowing [something] and now it’s piling on...”

Relatedly, most stakeholders describe their VAP program as providing critical and effective support as people navigate various complex systems post-victimization. Stakeholders have observed more successful connections between victims and needed external services when facilitated by VAP staff; one member of police leadership explained,

“I can guarantee that if we did not have this program [...] there would be probably 80 to 90% of the victims would not do anything further. They might go to court and just

RESULTS

say, I don't want to pursue anything. They wouldn't call any [more] services, especially if they called one that we gave them and [the referral service] said "No, we don't handle this." If we're lucky, they might call the second [resource we gave them], but that's about it. They would stop calling and just be done with it."

Although service provision is not contingent on a victim's involvement in the criminal justice system, many stakeholders did express a desire to see increased victim participation in the system. Stakeholders articulated various ways that the VAP might help people to maintain involvement throughout the duration of a case, including providing transportation and reminders of court dates, "translating" court jargon into more easily accessible language, and clearing up miscommunications and inaccurate information that legal professionals may convey to victims.

Victim Outcome Pathways	Key Informant Quotes
Increased Victim Awareness and Understanding Victims have increased understanding of their options, rights, and the process (Arlington Heights, Elgin, & Wheeling) Victims have greater understanding of their options, rights, and the criminal justice process (Mundelein)	<i>"The [program goal] is to make sure that the victim is very well educated about what the process is, what their rights are, and to answer questions along the way." -VAP staff</i> <i>"And I know for a fact, I personally [...] fall short with keeping victims up to date on [...] what the status of their case is, or just translating court lingo into what a normal citizen would understand, kind of lose the police jargon and get a little bit more personality and compassion in the process. I think the program definitely fills in that gap." -Police officer</i>
Increased Victim Access to Needed Services Victims have increased access to needed services (Arlington Heights, Elgin, & Mundelein) Victims have increased access to needed resources and a consistent, reliable resource (Wheeling)	<i>"We definitely fall short with providing for the victim after the fact [of the crime]. We conduct the investigation, we make an arrest and that's pretty much that. [...] It's nice to have somebody, the same coordinator, same victim advocate that you would be speaking with throughout the entire duration of your involvement with that investigation." -Police officer</i> <i>"[One client...] had no money, no car [and] needed an order of protection and was trying to get one, and [the VAP staff] offer[ed] to take her up. I mean, [...] she can spend the time and go out of town and assist people with something that we [police] couldn't, where we're just like "Hey, go to [Courthouse Name]. Um, good luck. I mean, you really need to get this, I hope you do." You know, you're kind of crossing your fingers, but at least you know you know there is that opportunity [to receive transportation from the VAP] if they're stuck. So there's a whole gamut of things [the VAP may provide for victims]." -Police officer</i>

RESULTS

Victim Outcome Pathways	Key Informant Quotes
Increased Victim Independence and Continued Growth Victims develop coping strategies to continue to heal on their own (Arlington Heights) Victims develop strategies to continue to progress on their own (Elgin; Wheeling)	<i>"We hope that the victims get the support they need to continue the lives that they deserve. I have to say that's one of our primary focuses. We want them to be back to where they need to be and to be contributing members of the community. If we can help them facilitate that, I mean that's, it's a high five in our book, you know, lock up offender and, uh, you know, counsel, our victim, the best that she can do should go about her life. I mean, that'd be my primary goal. [...] We're here to have a resolution to a problem and [have the victim] continue with their life." -Police officer</i>
Increased Victim Perceptions of Empowerment and Safety Resulting in greater sense of safety and empowerment for all victims (Mundelein) Victims feel safe, empowered, and are able to live with greater freedom (Elgin) Victims feel more empowered, and are not defined by their victimization (Arlington Heights)	<i>"[I hope to see] victims not being revictimized. I think that it's not just helping them through the [criminal justice-related] process, but helping them be able to help themselves to know that, "Hey, I'm not going to..., I got these other resources if something happens." -Police officer</i> <i>[I think] probably the biggest part of this is to navigate through so [the victim is] not victimized after they make a report [...] they might be upset and they don't know how things are going to work, but that they are able to help themselves and be put in touch with those resources [...]they're going to be that much quicker to reach out for that kind of help [in the future]. -Police leadership</i>
Reduced Victim Contact with Criminal Justice System Victims have reduced contact with the criminal justice system (Wheeling)	<i>"Well, really our goal is to prevent additional police contact. [...]So in whatever it is that we do [...] our goal is to be] preventing police officers having to go out and respond in another domestic situation [...] we are preventing additional calls to that home." -VAP staff</i>

Police-Related Outcome Pathways

Police and VAP staff reported anticipated benefits for police as a result of VAP collaboration. These include increased understanding of trauma and victim behavior, increased police awareness of and access to victim-relevant resources, and increased police efficiency. One particularly salient benefit described by multiple police is the potential for co-located VAPs to simultaneously decrease the burden on police officers while improving the experience for victims. Police interviewees often used the analogy of the various roles for police as different "hats" the officer is required to wear at different times. As one member of police leadership described it,

RESULTS

“Police work has morphed so much from, you know, ‘the authority figure’ to now we [are expected to] wear so many hats. [Police are] the social worker, [they’re] the parent, [they’re] the enforcer...”

Another police officer expanded on this point to illustrate the benefit of the VAP for police, explaining

“It’s hard from an officer’s standpoint because we have to switch the hat so often, you know? We’re the law enforcer, but then we have to switch the hat for the [mentally distressed] subject that we come into contact with out on the street, and we have to try to backtrack and not be the hard-charger and we got to draw our conversation out. [Then] we come across a victim and we got to put on that other hat and become, you know, as much of a social worker to help them through that process as much as we can. This helps us... not remove a hat, but it’s not as big of a hat. It’s like, we have help now.”

Police Outcome Pathways	Key Informant Quotes
<p>Increased Police Understanding of Trauma and Victim Behavior</p> <p>Police have increased understanding of victim decision-making and behaviors in the aftermath of their victimization (Arlington Heights)</p> <p>The police department has greater understanding of how to interact with all victims in a trauma-informed way (Mundelein)</p> <p>Police have more information on community resources, changes in the law and criminal processes, and how to interact with victims in a trauma-informed way (Wheeling)</p>	<p><i>“...And so she in the victim role, met [her abuser in a public place] and [she] had [a] conversation with him. He didn't give her back her [belongings]. He was just trying to engage to continue to harass her and she eventually ended up leaving and driving away and the investigator was totally appalled. “Why would she meet up with him?” And I’m like, I don't understand either, I don't know. But when I ended up talking to her, it made sense. It made sense from a victim perspective. So, it was a matter of coming back to the officer and saying, “It does make sense. I can't say I wouldn't have done the same thing. I know it sounds crazy, but in her mind at that time when he was contacting her, it wasn't about getting the tangible thing back. It was trying to protect her kids from having to see what she thought he could be potentially able to do.” -VAP staff</i></p> <p><i>“There have been times where I’m like “Hey, I need to go interview this victim and I need to show them something,” and I don't know if it's going to be traumatic or they're not going to give me any answers or whatever [... and the victim assistance provider gave advice on how to proceed...]And it makes me think twice; before the program I would have been like, “I just have to get the interview done” [...] but having a different perspective is showing me, uh, you know, a few other ways to [do things].” -Police officer</i></p>

RESULTS

Police Outcome Pathways	Key Informant Quotes
<p>Increased Police Awareness of and Access to Victim- Relevant Resources</p> <p>Police have increased awareness of community resources and how to meet victims' needs (Elgin)</p> <p>The police department has greater access to resources and information enabling a holistic response (Mundelein)</p> <p>Police have more information on community resources, changes in the law and criminal processes, and how to interact with victims in a trauma-informed way (Wheeling)</p>	<p><i>"[Police say] Man, I'm glad I knew we could [refer to victim assistance], that this is an option." [...] In the past you would hear their frustration of "what do we do? How do we fix this?" Because policemen come to work every day they really do care; they really want to help people. And it's very frustrating from the police standpoint when you're like, "man, there's nothing I can do for this person. This sucks." They really want to make a difference, and so having this [program] gives them something to where they don't just walk away and say, "man, there's nothing I can do." -VAP staff</i></p> <p><i>"I also feel like [the VAP staff] has been a good resource [...] for other resources] within the [community ...] She might be able to steer me in the right direction or give me some idea when it comes to mental health. Like "Is there someone I can get involved in their home or with their kids?" or those kinds of things. I don't know if that's her wheelhouse, but that's just something she always seems to have resources for. So when in doubt, go to [VAP staff]." -Police officer</i></p>
<p>Increased Police and VAP Collaboration</p> <p>Police operate more effectively and efficiently by <u>working as a team</u> with Victim/Human/Social Services (Arlington Heights; Elgin; Wheeling)</p> <p>Police operate more effectively and efficiently by <u>working as a team</u> with Social Services (Elgin)</p>	<p><i>"...and this is where I see good [collaboration] between the victim advocates and the police. And sometimes we need to have a victim advocate tell me as a police officer say "Hey, maybe you should look at it from this way." Because again, we're very regimented and we're kind of like pulling in one direction and it's good to have somebody that's not part of the traditional law enforcement environment to [...] at least bring a different perspective to it." - Police officer</i></p> <p><i>"[...] instead of somebody calling 9-1-1 again looking for advice, they'll call [the VAP staff] direct because they already have a connection there. [...] VAP staff] being able to take a telephone call and offer advice could save us a 9-1-1 call for someone saying, "uh, I don't know what to do, but you know, 9-1-1 is my last resource. What can you do for me?" So [the VAP staff is] a good part of the department." - Police leadership</i></p>

RESULTS

Police Outcome Pathways	Key Informant Quotes
<p>Increased Police Confidence</p> <p>Police have increased confidence in their ability to provide assistance and resources (Arlington Heights)</p> <p>Police have greater confidence in their ability to provide comprehensive assistance and resources (Wheeling)</p> <p>Police have increased confidence in their ability to provide assistance and resources for all victims (Mundelein)</p>	<p><i>"[The victim assistance provider] is very critical [...] I refer people a lot because[...] we go in, we make an arrest, we're there for a short period of time and they don't see us until the court date. And even then there's not really any interaction. Whereas with this [program] we have that next step to where we can say, "okay, here we have a victim services coordinator and she can walk you through all this and help you through what your next step is."</i></p> <p><i>-Police officer</i></p> <p><i>"[The victim assistance program] can help me resolve this problem. And as you know, as time went by, the more we move towards [understanding] mental health issues [and] getting people mental health services, the officers need the resources [from the VAP] cause they don't know either, right? They don't know what to do. When it comes down to it, we're not social workers, we're not psychologists...we just don't know what to do with people. So I think, you know, historically social services, it's been really well received, and as time goes by police officers understand the need [for social services] more and more and rely on them and lean on that group more and more for help to do their job."</i></p> <p><i>-Police officer</i></p>
<p>Increased Police Efficiency</p> <p>Police operate more <u>effectively</u> and <u>efficiently</u> by working as a team with Victim/Human/Social Services (Arlington Heights; Elgin; Wheeling)</p>	<p><i>"[The goals of] our investigation is get the guy off the street and make sure he doesn't reoffend, you know? I'm all about victim support, but unfortunately I've had five more investigations [assigned] since we've been sitting here talking. So, I mean there's always the next one. I'm not sure what our caseload is, but I mean we get a lot of cases. I think [the VAP] does a great job of kind of bridging that gap, and saying "Hey, you can do better. You can go a little further and provide these resources." [The VAP] has done lot of education and training [for police]. I mean there's definitely programs I didn't even know about [before the VAP training]."</i></p> <p><i>-Police officer</i></p>
<p>Increased Police Knowledge that Victims are Being Helped</p> <p>Police have a greater sense of closure as they know victims are being helped (Arlington Heights; Mundelein; Wheeling)</p> <p>Police have greater assurance that victims are being helped (Elgin)</p>	<p><i>"But I think more and more now it's that the officers are figuring out [that the victim assistance provider] can be so helpful. I don't have to worry about this, but then I also know that I'm not just letting this victim hang."</i></p> <p><i>-Police leadership</i></p>

RESULTS

Community-Related Outcomes

VAP staff and police were cautious in articulating their impact on the broader community, recognizing that the VAP was only one component of what can contribute to safe, just, and healthy communities. When asked to describe the contribution of the VAP, VAP staff and police mentioned several community benefits: increased community awareness of and access to resources; increased community confidence and trust in the police response; and improved community perceptions of safety. These short term outcomes were thought to contribute to greater reciprocal trust and better relationships between the community and police.

One VAP staff member described how through the VAP, community members are more aware of available services. The staff member explained,

"I think it's just awareness, awareness, and I'm here and that although I might be victim services, I have resources that might, could be afforded to them that they don't necessarily know about and they might want to learn more about."

A member of police leadership described how the VAP helped to improve the public perception of police and their relationship with the community. In discussing community-related outcomes of the VAP, this member of police leadership explained,

"I think the biggest thing is... its greatly enhanced perception here in the community that we're here to help. We offer quite...a variety of different programs...we're out in the community, we're working with them and stuff. And that's the biggest thing. And you just gotta' keep going and driving that home."

Another VAP staff member went on to discuss how the community could become safer, healthier, and happier as a function of the VAP. They explained,

"We need to have more of those meaningful types of connections with everyone in the community, from the police to the school teachers to the, yeah, the doctors to whoever, and we'll make a safer community and healthier and happier and hopefully more prosperous community as well."

RESULTS

Community Outcome Pathways	Key Informant Quotes
<p>Increased Community Awareness of and Access to Resources</p> <p>Community members have greater awareness of services and resources provided by the police department (Arlington Heights; Mundelein; Wheeling)</p> <p>Community members have increased knowledge of the professional and individualized services available at the police department (Elgin)</p> <p>Community members have increased access to culturally-responsive services for diverse, often underserved, individuals (Elgin)</p>	<p><i>"I think that as far as the community as a whole [...] it may make things to where [victimization] will happen less often because people are actually going to get the resources that they need and get the counseling. [...] even if they don't want to involve the police they can go in and talk to her and say, "Hey, I just am curious about these resources" without even saying "I'm in a situation." -Police Officer</i></p> <p><i>"[...]if they know that they can maybe get help without necessarily involving us, then I think that's good for a community in whole." -Police Officer</i></p> <p><i>"[...] having a community that has safety measures [in place where community members] know that there's compassionate workers in their community who are providing services to the residents...that there's resources for them, that there's a place that is nonjudgmental for them [during] different situations in their lives." -VAP Staff</i></p>
<p>Increased Community Confidence in Police Response</p> <p>Community members have increased/greater confidence that police will be responsive to their specific needs (Arlington Heights; Mundelein)</p>	<p><i>"[The VAP] adds credibility to what we [the police] are doing- we aren't just trying to arrest everybody." -Police Leadership</i></p> <p><i>"I think just us being here creates that, you know, idea or I think it really conveys that the police department is not just here to lock people up. We're here. It also would help heal as a community. Uh, we're using a lot of different ways as far as when there's incidents and crisis response is needed." -VAP staff</i></p>
<p>Increased Community Perceptions of Safety</p> <p>Community members have increased sense of safety as offenders are identified and held accountable (Wheeling)</p>	<p><i>"I think it makes for a better standard of living. Same thing as the broken windows theory for law enforcement. [In the example of the hoarder, the] hoarder affects [the community] in so many different ways. The older person who can't take care of themselves and their property, [...]the homeless person who is [...]sleeping and washing in the library... And all of a sudden nobody wants to use anything in there. So, it makes for a nicer place for everyone if those problems can be addressed. And most of them are mental health and social issues."-Police Leadership</i></p>

RESULTS

Community Outcome Pathways	Key Informant Quotes
<p>Better Relationships Between the Police, Victims and the Community</p> <p>Victims, community members, and the police have better relationships (Arlington Heights; Mundelein)</p> <p>Victims, community members, police, and Social/Human Services have better relationships (Elgin; Wheeling)</p>	<p><i>"I think also another one of our goals [...] is to really kind of be that bridge between law enforcement and the victim and the community." -VAP staff</i></p> <p><i>"Having the [VAP] here has a positive impact [...] on our engagement with the community and building relationships and building bridges and going to different communities." -Police officer</i></p>
<p>Increased Positive Engagement Between the Police, Victims, and the Community</p> <p>Victims, community members, the police and Social/Human Services have increased positive interactions (Elgin; Wheeling)</p> <p>Victims, the community and the police department have greater positive engagement (Mundelein)</p> <p>Victims, community, and the police have increased positive interactions (Arlington Heights)</p>	<p><i>"I think if anything, it's just a second source [of support] if someone doesn't feel like their police officer was sympathetic or didn't hear them the right way or wasn't listening or isn't providing them the information they need. It's a comfort to know there's someone else who's also on your team and trying to work on that. I mean, I'm imperfect. There are times where the communication just wasn't good [...] and I learned that through [VAP staff] because [the victim] reached out to say "what the heck?" about it. And I'm like "No, that's not the conversation we had, but we'll readdress it." I think it helps us in that regard because you have people who have some other outlets still connected to the police. If [the police] said something inappropriate or judgmental, and then in your mind you're like, I'm done with that. I don't want to use that, that's a problem. I feel like [the VAP] just kind of puts that to rest. We don't have to have those issues." -Police officer</i></p>
<p>Greater Trust Between the Police, Victims, and the Community</p> <p>Victims, community members, and the police department have greater trust (Mundelein)</p> <p>Victims, community members, police, and Human Services have greater trust (Wheeling)</p>	<p><i>[...] just knowing that there's someone in house [at the police department but] that they don't have to go through law enforcement. I always use the example for domestic violence because people don't know that if there's enough physical evidence the officer has to make an arrest, so if it's an adult [domestic violence] situation where there's no children in danger, they can talk to me what their options are without having a partner arrested or something they're not ready for. Hopefully [...] increasing their trust in law enforcement. -VAP staff</i></p> <p><i>"The impact [of the program] on our police then impacts the way they interact in the community, then it builds more trust. So I'd like to see more of that." -VAP Staff</i></p>

RESULTS

Impact of Losing the Program

Many VAP staff and police, particularly those in roles of police leadership, expressed concerns that losing the program would result in an uptick in crime and victimization, thus increasing the number of calls police are required to respond to while decreasing overall police effectiveness. VAP staff and police explained that without the VAP, officers would not be prepared to effectively respond to many of the problems they may encounter over the course of a shift because (1) time constraints and high call volume impede officers' ability to provide a thorough response on scene, (2) it is unreasonable to expect officers to maintain consistent awareness of current service provision, waitlist times, and other data on different community resources, and (3) officers are trained to respond to the criminal components of a situation, and thus they understandably prioritize the law enforcement aspects of a call. Officers are not necessarily equipped to respond to the complex psychosocial needs that victims may present.

VAP staff and police emphasized that the “bandaid” approach police are trained to utilize is not equipped for long-term intervention to address the issues contributing to victimization and re-victimization. One police leader explained,

“I mean to a certain degree that’s all they can do. They’re just here to calm the situation, put a bandaid on it. [Without the program], I think that we would have more victims, the magnitude of victimization would increase, the level of violence potential would increase...”

Research Questions and Answers

What benefits do the programs provide and how would the provision of service be affected without the programs? How would this impact police and court operations?

Overall, there is considerable similarity in the anticipated benefits and/or observed outcomes identified by informants across the four programs. The most common shorter-term anticipated benefits and/or observed outcomes reported for victims relate to increased access to needed services and increased awareness of options and rights as related to their victimization. The longer-term victim-related outcomes identified by stakeholders related to clients continuing to make progress, including identifying and using effective coping strategies, and experiencing increased feelings of safety. Stakeholders identified community-related outcomes that include more positive perceptions of and confidence in police, as well as greater community awareness of available resources. Anticipated benefits for police largely related to increased police efficiency and increased police knowledge of victim behavior and trauma-informed practice. Stakeholders explained the program’s impact on police efficiency in a variety of ways, including decreasing the burden on police officers to hold roles for which they are not trained.

RESULTS

Future Evaluation Work

Indicators of Success

A critical first step in building evaluation capacity is the development of Theory of Change models. In the models developed for each site in this project, specific pathways were identified for victims, police and the community-at-large based on our assessment of anticipated and observed outcomes from key informants. Once the foundational work of TOC modeling is done, each identified outcome can be operationalized (i.e., defined in terms of how it can be measured) and then indicators can be developed so that the outcome can be systematically examined in evaluation. For each indicator, there are usually multiple ways to assess the outcome and multiple sources of information to draw on. Victim, police, and community outcomes associated with the VAP may be measured in myriad ways depending on goals and resources.

In the tables on the following pages, we illustrate for each identified outcome how it could be assessed. As an example, potential indicators of the outcome ‘increased victim awareness and understanding’ include, an increase in the number and complexity of questions victims pose about the criminal justice system. Information about this indicator could be gathered via an archival analysis of systemized case notes in which victims’ questions are routinely recorded. For all outcomes, information assessing indicators of change may be collected through archival analysis, questionnaires, interviews, and observation. Outcomes, data collection methods, and sources of information used will necessarily vary based on both the available resources (e.g., time, staff power, money) and purpose of evaluation (e.g., for improving individual-level case management; for understanding how best to expand programmatic services; for identifying how to increase police referrals).

While it is often appropriate to assess some of these outcomes directly from the victims being served, we encourage programs to exhaust all other possible indicators to avoid unduly burdening victims. Further, victims can be traumatized during a research process if not done with extreme care and intentionality, so any evaluation that would directly involve victims must be done with clear plans and intentions, and implemented by well-trained program or evaluation staff.

RESULTS

Indicators for Evaluating Victim Outcome Pathways			
Victim Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
What is the victim-related outcome to be evaluated?	What change or occurrence would indicate that the outcome has been achieved?	How could this information be collected (e.g., interviews; questionnaires)?	From whom or where could this information be collected (e.g., law enforcement, clients)?
Increased Victim Awareness and Understanding	Increased number and complexity of questions posed	Archival analysis	Systematized VAP case notes in which questions posed are recorded and assessed
	Increased awareness of impact of victimization	Questionnaire	VAP Staff Victims
		Interviews	VAP Staff Victims
	Increased knowledge of community resources	Archival analysis	VAP and/or Community Agency case records
		Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims
		Interviews	Victims

RESULTS

Victim Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
Increased Victim Access to Needed Services	Increased number of needed services available in community	Descriptions of available services/Assessment of service array	Community service professionals
	Increased referrals to needed services	Counts/rates of referrals	VAP services case records
	Increased completed connections to needed services	Counts/rates of confirmed connections to services	VAP and/or Community Agency case records
		Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims
Increased Victim Independence and Continued Growth	Increased contact with supportive family and friends	Archival Analysis	Systematized VAP case notes in which contact with natural supports are recorded
		Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims
	Increased opportunity (employment, education, housing stability, resources)	Archival Analysis	Systematized VAP case notes in which markers of opportunity are recorded (safe and stable housing; employment, education)
		Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims

RESULTS

Victim Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
Increased Victim Perceptions of Empowerment and Safety	Increased perceived safety	Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims
	Behaviors (e.g., travel, contact with friends and family) indicating greater sense of safety	Archival Analysis	Systematized VAP case notes in which behaviors indicating a greater sense of safety are recorded (e.g., travel, contact with friends and family)
		Interviews	VAP Staff Victims
		Questionnaires	VAP Staff Victims
Reduced Victim Contact with Criminal Justice System	Reduction in repeat contact with criminal justice system*	Archival Analysis	VAP service case notes Police reports Prosecution case records

*Note: This is a difficult outcome to assess because repeat contact with the criminal justice system is not up to the victim, but because of the actions of the perpetrator. Any evaluation including this outcome should avoid placing the burden of reduced contact with the criminal justice system on the perpetrator, not the victim.

RESULTS

Indicators for Evaluating Police Outcome Pathways			
Police Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
What is the police-related outcome to be evaluated?	What change or occurrence would indicate that the outcome has been achieved?	How could this information be collected (e.g., interviews; questionnaires)?	From whom or where could this information be collected (e.g., law enforcement, clients)?
Increased Police Understanding of Trauma and Victim Behavior	Police have greater knowledge regarding the effects of trauma	Interviews	VAP Staff Police Victims
		Questionnaires	VAP Staff Police Victims
	Police behaviors that increase/reduce effect of victims' trauma	Observation	VAP Staff Police
		Archival Analysis	Systematized VAP case notes in which trauma-informed behaviors are recorded Police records Court records
Increased Police Awareness of and Access to Victim-Relevant Resources	Police have greater knowledge of victim relevant resources	Interviews	VAP Staff Police Victims
		Questionnaire	VAP Staff Police Victims
	Police make appropriate referrals for victims	Archival Analysis	Police records

RESULTS

Police Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
Increased Police and VAP Collaboration	Police consistently refer to victim services	Questionnaire	VAP Staff Police
		Archival Analysis	Police records
	Police and VAP communicate on cases	Questionnaires	VAP Staff Police
		Archival Analysis	Police records
Increased Police Confidence	Police report greater confidence	Interviews	Police
		Questionnaires	Police
Increased Police Efficiency	Increase clearance rate	Archival Analysis	Police Records
		Interviews	Police
	Decreased time to clearance	Archival Analysis	Police Records
	Police report greater efficiency	Interviews	Police
		Questionnaires	Police
Increased Police Knowledge that Victims are Being Helped	More police report that victims are being helped	Interviews	VAP Staff Police
		Questionnaires	VAP Staff Police

RESULTS

Indicators for Evaluating Community Outcome Pathways			
Community Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
What is the community-related outcome to be evaluated?	What change or occurrence would indicate that the outcome has been achieved?	How could this information be collected (e.g., interviews; questionnaires)?	From whom or where could this information be collected (e.g., law enforcement, clients)?
Increased Community Awareness of and Access to Resources	More referrals/contacts with VAP from external agencies	Archival analysis	VAP services records
	More referrals to VAP from community members	Archival analysis	VAP services records
	Public self-report of awareness	Questionnaire	Community leaders Public
Increased Community Confidence in Police Response	Increased reporting of crimes to police	Archival Analysis	Police records
	Public self-report of confidence in police	Interviews	Public Victims
		Questionnaires	Public Victims
Increased Community Perceptions of Safety	Increased behavior indicating perception of safety (e.g., travel at night)	Observation	Public Spaces (e.g., downtown)
		Archival Analysis	Archives of consumer behavior (e.g., spending on downtown retail or restaurants)
	Public self-report of perceived safety	Interviews	Public Victims
		Questionnaires	Public Victims

RESULTS

Community Outcome	Possible Indicator(s)	Possible Data Collection Methods	Source of Information
Better Relationships Between Police, Victims, and the Community	More people attend public outreach events by police	Archival Analysis	Meeting Records (attendance)
	Better reported relationship with police	Interviews	Public Police Victims
		Questionnaires	Public Police Victims
Increased Positive Engagement Between Police, Victims, and the Community	More people attend public outreach events by police	Archival Analysis	Meeting Records (attendance)
	Increase positive engagement and interaction with police	Interviews	Public Police Victims
		Questionnaires	Public Police Victims
Greater Trust Between Police, Victims, and the Community	Increase perceived trust between police, victims and the community	Interviews	Public Police Victims
		Questionnaires	Public Police Victims

RESULTS

Next Steps

It is important to make a few notes about specific next steps for each program and their funders as they look ahead and consider how best to understand if they are having their intended impact. Specifically, each site and their funders should consider (1) improving client case record databases and other administrative records so they are amenable to future evaluation work; (2) examining how this evaluation project fits into a broader evaluation plan; and (3) building continuously on the Theory of Change model; and (4) investing in their evaluation capacity.

Improving Records and Databases

In this project, the evaluation team found the ten client case records shared from each site to be tremendously valuable in understanding how each program operated and what service provision looks like in action. However, we are unable to know the extent to which the ten cases provided are representative of each VAP's full client caseload. Client case records, as maintained by site, contain identifying information and are not easily de-identified. The Illinois Mental Health and Developmental Disabilities Confidentiality Act prevented the evaluation team from accessing the records to de-identify them, and it was not feasible for each site to de-identify all of their client case data for a given time period. As such, the evaluation had to work with each site to help them de-identify a small, purposive sample of cases. As the sites and their funders look ahead to future evaluation work, it would be helpful to consider how client case data can be stored in such a way to enable easy and effortless de-identification. For example, each client could be assigned a unique identifier (e.g., 101, 102, 103) that appears on all documents related to the client. Identifying information for each client could be stored separately from the rest of the client data, or in a specific location in case files that could easily be deleted (e.g., a specific set of columns in Excel). This would allow for quick de-identification of case files for the purposes of evaluation.

Ideally, such databases would be developed for the sites so that there is consistency across sites in what and how information is being collected. This removes the burden of this resource-intensive task (i.e., developing client case databases) from VAP staff whose priority is serving crime victims. This also will enable systematic comparisons to be made across sites in the future as each site will be tracking information in the same way. Development of such databases should also consider how to build in specific indicators that can later be used to measure success, as listed in the Outcome Pathway tables on the preceding pages.

Placing This Project within a Broader Evaluation Plan

This project was an evaluability assessment of the four VAPs. The products from an evaluability assessment, including logic models and future evaluation plans, are intended to prepare programs for future evaluation work. Not surprisingly, the National Victim Assistance Standards Consortium identifies the development of a logic model as the very first step in assuring effective programming (Office for Victims of Crime, 2016). This is not surprising, because the TOC logic model provides a

RESULTS

road map for identifying specific anticipated outcomes that should result from programmatic efforts, and how those outcomes lead to desired longer-term change. However, though the products that are generated from an evaluability assessment may suggest the next step is an evaluation of program impacts, additional evaluation projects should be pursued first.

Specifically, evaluability assessment is one domain of practice within evaluation. Other domains of practice include needs assessments, process evaluation, outcome evaluation, and efficiency assessments (Rossi et al., 2019). Each of these domains, their purpose, and the order in which they should be conducted appear in the table below.

Domains of Evaluation Practice	
Needs Assessment	Assesses the nature and scope of a social problem, the need for intervention, and what the intervention should entail
Evaluability Assessment	Assesses how a program is conceptualized and designed
Process Evaluation	Assesses program activities, operations, and implementation
Outcome Evaluation	Assesses program outcomes and impacts
Efficiency Assessment	Assess program cost and effectiveness

As can be seen, before moving on to an outcome evaluation that assesses program outcomes and impacts, it is essential to first examine if the program is being implemented as it was designed. This is done with a process evaluation. While this project began to examine program activities and operations, limitations in the current state of VAP records prevented us from getting a comprehensive understanding of program activities, operations, and implementation. Thus, VAPs should consider pursuing process evaluation next before moving on to outcome evaluation. This is an essential step given that the services provided are quite varied across programs and individualized from one victim to another (as is appropriate). Process evaluation can be a critical step in understanding the nature of services and enabling better estimation of the anticipated outcomes that would result. The improvements in VAP record-keeping discussed above would enable a process evaluation that could provide a comprehensive understanding of program activities, operations and implementation. Such work may include answering questions like:

- ✚ Are policies regarding referral to the program (e.g., who is referred; how they are referred; who is referring) being implemented as intended?
- ✚ Is the full array of services being consistently offered and provided to the designated client population?
- ✚ Are there individuals eligible for and in need of services that are currently not or inconsistently being served?

RESULTS

Following process, there are many approaches that can be taken to begin to examine outcomes, not only for victims, but also for the police and for the community-at-large. While the most obvious outcome from victim assistance programming might be benefits to victims who might otherwise be unsupported as they navigate the complexity of the criminal justice system, the anticipated outcomes for police and for the broader community were quite salient for stakeholders. Subsequent evaluation efforts should certainly attend to these multi-level effects.

Building Continuously on the Theory of Change Model

Ideally, the TOC model is a living document. The TOC model should serve to make programmatic goals and objectives clear, but should also be continually revised to reflect current practices and current theories about how VAPs work and what outcome pathways they envision. In this way, the TOC should be referenced and updated to guide subsequent evaluation, and program development.

Investing in Building Evaluation Capacity

While this project has made considerable headway in the first stages of building evaluation capacity, there are many additional steps required to foster such capacity. Preskill and Boyle (2008) provide a comprehensive model for conceptualizing the critical steps involved in building evaluation capacity and Andrews et al. (2005) provide an alternative model. The need for building evaluation capacity assumes that at least some of the evaluation activities VAPs will pursue will be done internally through the normal course of program implementation. Hiring and maintaining external evaluators is also an option, but is more feasible for one-time studies than for ongoing evaluation activities. Having external evaluation and ongoing internal evaluation capacity can also be done in tandem. Each can complement the other.

In thinking about evaluation capacity-building, Preskill and Boyle bring our attention to a multi-level process in which we must attend to leadership, culture, systems and structures, and communication. Critically, leadership must express support for evaluation and provide the requisite resources (staff time, technology) to make evaluation possible. There must also be appropriate attention to building the skills and knowledge of providers so that they are prepared to engage in evaluation activities. Ideally, the program would build those activities as much as possible into regular implementation processes (e.g., via intake and case notes). Finally, there must be attention to using data from evaluation efforts to “close the loop” to inform programmatic efforts in an ongoing way.

At this stage, the sites involved in this project were responsive and engaged in the evaluability assessment. They demonstrate willingness to engage in evaluation related efforts, but more support would be required to ensure successful evaluation capacity building. This would involve, at a minimum, improving data collection systems connected to routine service provision, as described herein. This would also require continued commitment from each site and their funders to support these important evaluation efforts.

CONSIDERATIONS FOR PROGRAM IMPROVEMENT

Considerations for Program Improvement

In addition to guidance provided in the prior section regarding future evaluation efforts, we provide five recommendations below that may improve program operations.

Develop means of accountability to ensure consistency in officer's referrals to the VAP

The majority of officers engaged in regular referral to the VAP. However, this was not uniform across officers and some officers indicated they did not refer when they did not think the victim was interested or cooperative. While this was relatively rare, given the range of assistance the VAP can provide, uniform referral seems valuable and provides all victims the opportunity to choose if they would like to receive or decline VAP services. Mechanisms to ensure that officers are consistently referring to the VAP in accordance with program policies should be developed and implemented. This could include supervising officers checking for documentation of referrals to the VAP during case review, and following up with officers when reviews are not made or documented properly.

Make explicit police leadership support for the VAP through formally integrating training on the VAP into new hire training.

Most officers were introduced to the VAP through training. In some departments, all police learn about the program during initial field training when they were onboarded into the department. In other departments, police learned about the VAP during select roll call training. The early introduction of the VAP to incoming officers by integrating it into initial field training builds the VAP into routine police work rather than an optional program. The integration of the VAP into the department should be standard across sites to communicate police leadership's commitment to the program.

Review confidentiality practices as it concerns the boundaries between VAP services and what occurs in the context of the criminal justice system.

For the most part, there were clear boundaries on confidentiality for victims receiving services through the VAP. Yet, in a context of coordination and collaboration, issues of confidentiality can become challenging. All programs should develop and ensure compliance with explicit protocols that define the boundaries of what information can be shared, with whom, and under what conditions.

CONSIDERATIONS FOR PROGRAM IMPROVEMENT

Continue to partner with external agencies to support comprehensive, coordinated responses to crime victims.

Crime victims' needs are varied, as indicated by the array of external agencies that refer to and receive referrals from the VAP. When a crime victims' needs cannot be met by a specific service provider, it is possible that another provider in the service delivery array is equipped to respond. These different services are often complementary to one another. VAPs should continue to partner with external agencies to identify where they might fill the gap in services provided by such agencies, and where external agencies can provide services that the VAP is not able to provide due to varied constraints. The VAP and these other agencies should consider developing and formalizing coordinated, comprehensive responses for crime victims to ensure they receive needed services and don't slip through the cracks.

Use the OVC model standards for VAPs to continue to develop each program.

While the VAPs have various iterations of best practices in place, OVC provides a comprehensive overview of what constitutes best practices in programming. VAPs should self-assess to examine the extent to which their current victim services are aligned with these recommendations (https://www.ovc.gov/model-standards/program_standards_1.html).

REFERENCES

References

- Allen, N.E., Bybee, D.I., & Sullivan, C.M. (2004). Battered women's multitude of need: Evidence supporting the need for comprehensive advocacy. *Violence Against Women, 10*(9), 1015-1035.
- Allen, N. E., Larsen, S., Trotter, J., & Sullivan, C. M. (2013). Exploring the core service delivery processes of an evidence-based community advocacy program for women with abusive partners. *Journal of community psychology, 41*(1), 1-18.
- Andrews, A. B., Motes, P. S., Floyd, A. G., Flerx, V. C., & Fede, A. L. D. (2005). Building evaluation capacity in community-based organizations: Reflections of an empowerment evaluation team. *Journal of Community Practice, 13*(4), 85-104.
- Bennett, L., Riger, S., Schewe, P., Howard, A., & Wasco, S. (2004). Effectiveness of hotline, advocacy, counseling, and shelter services for victims of domestic violence: A statewide evaluation. *Journal of Interpersonal Violence, 19*(7), 815-829.
- Birman, D. (2006). With Immigrants and Refugees. *The handbook of ethical research with ethnocultural populations and communities*, 155.
- Campbell, R. (2006). Rape survivors' experiences with the legal and medical systems: Do rape victim advocates make a difference? *Violence against women, 12*(1), 30-45.
- Carr, J. (1982). *The abusive partner: An analysis of domestic battering*. New York: Van Nostrand Reinhold.
- Corcoran, J., & Allen, S. (2005). The effects of a police/victim assistance crisis team approach to domestic violence. *Journal of Family Violence, 20*(1), 39-45.
- Davidson, W. S., & Rappaport, J. (1978). *Advocacy and community psychology. Social scientists as advocates: Views from the applied disciplines*. Beverly Hills, CA: Sage.
- Davies, J., Lyon, E., & Monti-Catania, D. (1998). *Safety planning with battered women: Complex lives/difficult choices* (Vol. 7). Sage.
- Ekman, M. & Seng, M. (2009). On-scene victim assistance units within law enforcement agencies. *Policing: An International Journal of Police Strategies Management, 32*, 719-738.
- Goodman, L. A., & Epstein, D. (2008). *Psychology of women. Listening to battered women: A survivor-centered approach to advocacy, mental health, and justice*. American Psychological Association.

REFERENCES

- Hardy, L. J., Getrich, C. M., Quezada, J. C., Guay, A., Michalowski, R. J., & Henley, E. (2012). A call for further research on the impact of state-level immigration policies on public health. *American journal of public health*, 102(7), 1250-1253.
- Hatten, P., & Moore, M. (2010). Police officer perceptions of a victim-services program. *Journal of Applied Social Science*, 4(2), 17-24.
- Knowlton, LW., & Phillips, C.C. (2013). *The logic model guidebook: Better strategies for great results*. Thousand Oaks, CA: Sage Publications.
- Hernandez, M., & Hodges, S. (2003). Building upon the theory of change for systems of care. *Journal of Emotional and Behavioral Disorders*, 11(1), 19-26.
- Koppensteiner, M.F., Matheson, R., & Plugor, J.A. (2019). *Project 360: An intervention to address victim-police engagement in repeat domestic violence cases*. Final policy report. Surrey, U.K: University of Surrey. Retrieved from https://www.researchgate.net/publication/333172630_Project_360_An_intervention_to_address_victim-police_engagement_in_repeat_domestic_violence_cases
- Lahman, M. K., Mendoza, B. M., Rodriguez, K. L., & Schwartz, J. L. (2011). Undocumented research participants: Ethics and protection in a time of fear. *Hispanic Journal of Behavioral Sciences*, 33(3), 304-322.
- Littell, K. (2009). *Victim services in rural law enforcement*. Washington, DC: Office for Victims of Crime. Retrieved from <https://www.ovc.gov/publications/infores/RuralVictimServices/welcome.html>
- Office for Victims of Crime, U.S. Department of Justice, Office of Justice Programs. (2016). *Achieving excellence: Model standards for serving victims and survivors of crime*. Retrieved from <https://www.ovc.gov/model-standards/>
- Parker, S. G. (2001). *Establishing victim services within a law enforcement agency: The Austin experience*. U.S. Department of Justice, Office of Justice Programs, Office for Victims of Crime. Retrieved from https://www.ncjrs.gov/ovc_archives/bulletins/evs_3_2001/NCJ185334.pdf
- Preskill, H., & Boyle, S. (2008). A multidisciplinary model of evaluation capacity building. *American journal of evaluation*, 29(4), 443-459.
- Rossi, P. H., Lipsey, M. W., & Henry, G. T. (2019). *Evaluation: A systematic approach, 8e*. Thousand Oaks, CA: Sage publications.

REFERENCES

- Smith Stover, C. (2012). Police–advocacy partnerships in response to domestic violence. *Journal of Police Crisis Negotiations*, 12(2), 183-198.
- Stover, C. S., Berkman, M., Desai, R., & Marans, S. (2010). The efficacy of a police-advocacy intervention for victims of domestic violence: 12 month follow-up data. *Violence Against Women*, 16(4), 410-425.
- Stover, C. S., Rainey, A. M., Berkman, M., & Marans, S. (2008). Factors associated with engagement in a police-advocacy home-visit intervention to prevent domestic violence. *Violence against women*, 14(12), 1430-1450.
- Sullivan, C. M. (1991a, August). Battered women as active helpseekers. *Violence Update*, pp. 1-1, 8-8.
- Sullivan, C. M. (2000). A model for effectively advocating for women with abusive partners. In J. P. Vincent & E. N. Jouriles (Eds.), *Domestic violence: Guidelines for research in formed practice* (pp. 126-143). London: Jessica Kingsley Publishers.
- Sullivan, C.M., & Bybee, D.I. (1999). Reducing violence using community-based advocacy for women and abusive partners. *Journal of Consulting and Clinical Psychology*, 67(1), 43-53.
- Sullivan, C.M., Bybee, D.I., & Allen, N.E. (2002). Findings from a community-based program for battered women and their children. *Journal of Interpersonal Violence*, 17(9), 915-936.
- Theodore, N., & Habans, R. (2016). Policing immigrant communities: Latino perceptions of police involvement in immigration enforcement. *Journal of Ethnic and Migration Studies*, 42(6), 970-988.
- Weisz, A. N., Canales-Portalatin, D., & Nahan, N. (2004). An evaluation of victim advocacy within a team approach. *Violence Against Women and Family Violence: Developments in Research, Practice, and Policy*.
- Wilson, D. & Segrave, M. (2011). Police-based victim services: Australian and international models, *Policing: An International Journal*, 34, 479-496.
- Winkel, F. W., and A. Vrij. 1993. Facilitating problem- and emotion-focused coping in victims of burglary: Evaluating a police crisis intervention program. *Journal of Community Psychology* 21(2): 97-112.
- Young, A., Fuller, J., & Riley, B. (2008). On-scene mental health counseling provided through police departments. *Journal of Mental Health Counseling*, 30(4), 345-361.
- Zaykowski, H. (2014). Mobilizing victim services: The role of reporting to the police. *Journal of Traumatic Stress*, 27(3), 365-369.

Appendices

APPENDICES

APPENDIX A: PHASES VIS-À-VIS ICJIA SERVICES SOUGHT AND RESEARCH QUESTIONS

Evaluation Design	Services Sought	Research Questions
<p>Evaluability Assessment Phase 1: Articulate Program Theory</p> <p>Evaluation Question 1: How is each program designed to operate?</p> <p>Goal 1: Make explicit the program theory for each site, the context in which the program operates, and the extent to which there is congruence or variation across sites.</p> <p>Deliverables: Site-specific Theory of Change models; Phase 1 results section</p>	<ul style="list-style-type: none"> (a) Document program design and implementation using multiple methodologies. <ul style="list-style-type: none"> a. Outline milestones and key phases of development. b. Assess how stakeholders determined the scope of the program. c. Assess how resources for the program were identified and obtained, including staff and partner training. d. Describe the jurisdiction, administrative commitment and criminal justice context in which the program operates, particularly as it relates to the physical location of the program in relation to the police department location. e. Describe the flow of information and referrals between the program and collaborating partners both inside and outside the policing agency. f. Describe the screening criteria and acceptance into the program. g. Describe client assessment of service needs and service planning. h. Describe the program's ability to identify and coordinate services and the extent to which service plans include client input and are reflective of client needs as opposed to strict availability of services. i. Assess the overall consistency in program operations and development of protocols as it relates to victim voice and victim choice. (b) Develop a program logic model that depicts the sites' inputs, outputs, and expected short and long-term outcomes. 	<ul style="list-style-type: none"> (b) What is the level of awareness of the programs and how are the programs providing training or information to their partners and at what points? (c) How do the programs fit within the police departments in terms of their role, oversight, perceptions and placement? (d) How do practices within the police departments (regarding arrest and crime determination) and within the courts (such as, felony review and charging decisions) affect the programs and the services they can provide? (f) How do the programs facilitate awareness and positive relationships with the community and law enforcement? (g) How do the programs provide staff support and training to promote staff self-care? (h) How are programs triaging cases and what are the criteria that departments are using to determine whether or not to take a case? When workload is high, or capacity limited, how are they making determinations or adjusting criteria?

Evaluation Design	Services Sought	Research Questions
<p>Evaluability Assessment Phase 2: Assess How Well-Defined and Evaluable the Program Is</p> <p>Evaluation Question 2: Are services being provided as intended?</p> <p>Goal 2: Document current service provision, including what services are being provided, to whom, amid what challenges and solutions, and the extent to which service provision aligns with evidence-based practices and programs.</p> <p>Deliverables: Site-specific police questionnaire reports; Phase 2 results section</p>	<p>(c) Analyze administrative program data, client-level data and other data to determine how, and to what extent, the programs operate with fidelity, provide needed services to victims within the police department environment, and maintain compliance with other established program criteria.</p> <p>(d) Detail the types of evidence-based or evidence-informed practices and programs used by the sites and fidelity to these practices or programs.</p> <p>(e) Detail the successes as well as the challenges and limitations experienced by the sites and how the programs addressed or overcame the challenges and limitations.</p>	<p>(a) What victimization trends are emerging and how should those types of crimes inform service plans?</p> <p>(e) What are the best-practices in victim service delivery within police departments and what are the standards for service provision? How are these currently being implemented?</p> <p>(i) What are the sustainability issues within the programs, especially with regard to continued awareness of the programs, staff turnover and political influences? How do the programs address these and other barriers to sustainability?</p> <p>(j) How successful are the programs in reaching underserved clients, particularly those with immigration concerns?</p>

Evaluation Design	Services Sought	Research Questions
<p>Evaluability Assessment Phase 3: Explore the potential for future evaluation work</p> <p>Evaluation Question 3: What are the anticipated benefits of the program, and how can they most appropriately be measured?</p> <p>Goal 3: Document anticipated benefits of the program based on stakeholder perspectives and existing literature, and develop a future evaluation plan for an outcome evaluation.</p> <p>Deliverables: Cross-site evaluation plan; Cross-site recommendations; Phase 3 results section</p>	<p>(f) Assess short-term program outcomes (initial outcome evaluation) associated with program participation.</p> <p style="padding-left: 40px;">a. Assess the ability of the programs to have a positive impact on victims' lives, including improvements in housing, financial stability, and safety planning.</p> <p>(g) Develop a suggested research design that is rigorous and will assess longer-term program outcomes.</p>	<p>(k) What benefits do the programs provide and how would the provision of service be affected without the programs? How would this impact police and court operations?</p>

APPENDICES

APPENDIX B: STAKEHOLDER INTERVIEW PROTOCOLS

Key Informant Interview with Chief of Police or Law Enforcement

Our goal today is to better understand how your victim assistance program operates and the types of outcomes you have observed to date or expect to observe as the program continues to develop.

1. To begin, can you tell me about the overall organization of your agency? [REQUEST DOCUMENTS]
2. Where does the victim assistance program fit into the overall agency/structure?
3. Can you tell me about the scope of the victim assistance program? What are its aims? How were those aims determined?
4. What are some of the key developmental milestones in the program so far?
5. What are the key program criteria that govern your work with victims?
6. I want to get a better understanding of how the victim assistance program works. Can you describe to me how individuals are typically referred to the victim assistance program? [REQUEST DOCUMENTS/BROCHURES, ETC]
7. How do you determine who is eligible for services? What are your screening processes like? [REQUEST DOCUMENTS]
8. What factors affect the decision you make about which victims to refer to the program? For example, if you have a high volume of victims who might be eligible, how do you prioritize?
9. In what ways, if at all, does the victim assistance program come into conflict with the agency's needs from a law enforcement perspective?
10. What resources are you currently utilizing to run the victim assistance program?
11. What types of training have you and other law enforcement received?
12. Do you know what best practice models or guidance you are drawing on to develop and run the program?
13. Are there supports provided by the victim assistance program, or broader organization, to support self-care?
14. How has the victim assistance program been received by [THE LAW ENFORCEMENT AGENCY]?
15. What has worked particularly well in offering victim assistance within the agency?
16. What has proven to be challenging in offering victim assistance within the agency?
17. Are there particular barriers to your work that emerge because you are offering victim assistance within [LAW ENFORCEMENT AGENCY]?
18. Are there particular facilitators to your work that emerge because you are offering victim assistance within [LAW ENFORCEMENT AGENCY]?
19. In what ways does the physical location of the victim assistance program affect the services you provide and how the program relates to the [LAW ENFORCEMENT AGENCY]?
20. In what ways would your work be different, if at all, if the victim assistance program didn't exist?
21. In what ways do you think the experiences of victims would be different, if at all, if the victim assistance program didn't exist?

22. How has the victim assistance program changed your agency's relationship with other community agencies?
23. Which agencies do you wish you had ties to, but where they have not developed yet?
24. Which agencies does the program make referrals to the most?
25. Do you have a list of agencies that comprise your service array for responding to victims' needs?
26. In what ways, if at all, have you worked to educate those in the service array about the services you provide or about victims' needs?
27. How do you currently make judgements about whether the victim assistance program is effective?
28. What outcomes do you expect from the victim assistance program? What have you observed so far?
 - a. For victims?
 - b. For [LAW ENFORCEMENT AGENCY]?
 - c. For the community?
 - d. For the relationship of the community with the police?
29. You mentioned that the victims with whom you are working experience [CRIMES]. How does your response vary depending on the particular crime a victim has experienced?
30. Does [LAW ENFORCEMENT AGENCY] have different or specialized response units for different types of crime?
31. Are you tracking data regarding the demographic information of the people you have served? How does this correspond to the demographics of your community?
32. Are there populations you see less frequently? Have greater difficulty engaging or following up with?
33. What do you think is key to sustainability for the victim assistance program? Has the program had any staff attrition?
34. Who else should I be talking to, to understand the victim assistance program?
35. What else would you like me to know about the victim assistance program?

Initial Key Informant Interview with Victim Assistance Program Staff

Our goal today is to better understand how your victim assistance program operates and the types of outcomes you have observed to date or expect to observe as the program continues to develop.

1. To begin, tell me about the scope of your program? What are your aims?
2. How were those aims determined?
3. What are some of the key developmental milestones in your program so far?
4. What are the key program criteria that govern your work with victims?
5. I want to get a better understanding of how your work with victims happens. Can you describe to me how clients are typically referred to the victim assistance program?
[REQUEST DOCUMENTS IF BROCHURES, ETC.]
6. How do you determine who is eligible for services? What are your screening processes like? [REQUEST DOCUMENTS]
7. What factors affect the decision you make about with whom to work? For example, if you have a high volume of referrals, how do you prioritize?
8. What is your intake process like following referrals? [REQUEST DOCUMENTS]
9. How do you determine what a client's needs are? How are these identified? Who decides what to focus on?
10. What happens when a victim needs something that is not easily available in the service array? What do you do?
11. In what ways do your responsibilities to the agency very come into conflict with your work with clients?
12. What resources are you currently utilizing to run the victim assistance program?
13. What types of training have you and other staff received?
14. What best practice models or guidance are you drawing on to develop and run the program?
15. How do you and other staff manage self-care?
16. Are there supports within the program to engage in self-care?

17. How has the victim assistance program been received within the [LAW ENFORCEMENT AGENCY]?
18. What has worked particularly well in offering victim assistance within the agency?
19. What has proven to be challenging in offering victim assistance within the agency?
20. Are there particular barriers to your work that emerge because you are offering victim assistance within a [LAW ENFORCEMENT AGENCY]?
21. Are there particular facilitators of your work that emerge because you are offering victim assistance within a [LAW ENFORCEMENT AGENCY]?
22. In what ways does your physical location affect the services you provide and how you relate to the [LAW ENFORCEMENT AGENCY]?
23. With which agencies are you connected in the community? For example, who sends you referrals? And to which to you refer? [GATHER SPECIFIC NAMES TO INFORM NETWORK DATA COLLECTION.]
24. Which agencies do you wish you had ties to, but where they have not developed yet?
25. Which agencies do you make referrals to the most?
26. Do you have a list of agencies that comprise your service array for responding to victims' needs?
27. In what ways do you work with other advocacy programs, for example, from domestic violence shelter programs or rape crisis agencies in your community?
28. In what ways, if at all, have you worked to educate those in the service array about the services you provide or about victims' needs?
29. How do you currently make judgements about whether what you are doing is effective?
30. In what ways do you interface with other facets of the criminal justice system (e.g., state's attorneys and judges).
 - a. How do these interactions facilitate your work?
 - b. How do these interactions constrain your work?
 - c. What would you like to see happen more in these relationships?
31. What outcomes do you expect when you are working with victims? What have you observed so far?
 - a. for victims?
 - b. for the [LAW ENFORCEMENT AGENCY]?

- c. for the community?
 - d. for the relationship of the community with the police?
- 32. What records and/or data are you currently keeping about the clients you serve?
 - a. Case notes
 - b. Intervention/treatment plans
 - c. Outcome data
- 33. You mentioned that the victims with whom you are working experience [CRIMES]. How does your response vary depending on the particular crime a victim has experienced?
- 34. Are you tracking data regarding the demographic information of the people you have served? How does this correspond to the demographics of your community?
- 35. Are there populations you see less frequently? Have greater difficulty engaging or following up with?
- 36. What do you think is key to sustainability for your program? Has the program had any staff attrition?
- 37. Who else should I be talking to, to understand the victim assistance program?
- 38. What else would you like me to know about the victim assistance program?

APPENDICES

APPENDIX C: POLICE QUESTIONNAIRE

Questionnaire on Victim Services

An external team of researchers is documenting how victim assistance programs/services operate at four police agencies, including [LOCATION NAME]. This short survey asks about your awareness, utilization, and opinions of the victim assistance program at [LOCATION NAME].

Please answer each question as completely and honestly as possible. Your answers will be kept confidential and will not be shared in a way that can be linked back to you.

[ITEM 1 ONLY INCLUDED IF RELEVANT TO DEPARTMENT]

1. What bureau are you in? Check one.

Patrol

Crime Prevention

Criminal Investigations

2. What is your rank/role? Check one.

Crime Prevention Officer

Evidence Property Officer

Patrol Officer

Community Service Officer

School Resource Officer

Traffic Officer

Commander

Sergeant

Investigator

Corporal

School Liaison Officer

Other: _____

3. What is your current shift assignment? Check one.

Day Shift (7:00am)

Afternoon Shift (3:00pm)

Midnight Shift (11:00pm)

Other _____

4. How long have you been with [LOCATION NAME] Police Department? Check one.

Less than a year

1-5 years

6-10 years

11-20 years

More than 20 years

5. Prior to taking this survey, did you know there was a [VICTIM ASSISTANCE PROGRAM TITLE] in the [LOCATION NAME] Police Department? Check one.

Yes

No

6. How did you first learn about the [VICTIM ASSISTANCE PROGRAM TITLE]? Check one.

I did not know that [LOCATION NAME] had a [VICTIM ASSISTANCE PROGRAM TITLE].

I don't remember.

During Roll Call

During a training provided by the [VICTIM ASSISTANCE PROGRAM NAME]

During initial in-house or field training when you first started with [LOCATION NAME] PD

From another sworn officer at the same or lesser rank than you

From a superior sworn officer

General

Page 1

From a civilian staff member

Other: _____

7. Based on your current understanding of the [VICTIM ASSISTANCE PROGRAM NAME] in what ways do they assist victims and serve the community?

*Check **one** of the boxes in Response Section A **OR** Check **all that apply** in Response Section B.*

Response Section A	I did not know that [LOCATION NAME] PD had a [VICTIM ASSISTANCE PROGRAM NAME]. I know [LOCATION NAME] PD has a [VICTIM ASSISTANCE PROGRAM NAME], but I do not know what they do.	
Response Section B	<div>Crisis counseling</div> <div>Court accompaniment</div> <div>Safety planning</div> <div>Long-term counseling</div> <div>Budget management</div> <div>Finding safe housing</div> <div>Translation Services</div> <div>Crime victim compensation</div> <div>Obtaining employment</div> <div>Other: _____</div>	<div>Referrals to outside agencies</div> <div>Securing Orders of Protection</div> <div>Notification of case status and court events</div> <div>Community outreach and education</div> <div>Securing transportation for court events</div> <div>Preparing victim impact statements</div> <div>Provides information on criminal justice system</div> <div>Provides information on other services</div> <div>Obtaining child or elder care for dependents</div>

8. How often do you provide information on available victim services directly to crime victims so victims can reach out to the [VICTIM ASSISTANCE PROGRAM NAME] if they choose? *Check **one.***

I did not know that [LOCATION NAME] PD had a [VICTIM ASSISTANCE PROGRAM NAME].

100% of the time—to every crime victim I encounter

More than half of the time, but not always

About half of the time

Less than half of the time

Almost never

9. In what ways do you provide information on [VICTIM ASSISTANCE PROGRAM NAME] directly to victims?

*Check **one** of the boxes in Response Section A **OR** Check **all that apply** in Response Section B.*

Response Option A	I did not know that [LOCATION NAME] PD had a [VICTIM ASSISTANCE PROGRAM NAME]. I do not provide information on victim services directly to victims.	
Response Section B	<div>Provide victim with a pamphlet, flyer, or tear-off sheet</div> <div>Provide victim with [VICTIM ASSISTANCE PROGRAM NAME]'s phone number</div> <div>Write down information on a piece of paper and give it to the victim</div> <div>Verbally tell victim about [VICTIM ASSISTANCE PROGRAM NAME] without providing any written information</div> <div>Transport (or facilitate transport for) the victim to the police station to walk-in and meet with [VICTIM ASSISTANCE PROGRAM NAME].</div> <div>Other: _____</div>	

General

Page 2

--	--

10. In what circumstances do you choose not to provide information on the [VICTIM ASSISTANCE PROGRAM NAME] directly to a crime victim? *Check response option A **OR** provide a written answer in the box.*

Response Option A	I provide every victim with information on the [VICTIM ASSISTANCE PROGRAM NAME].
Response Section B	

11. How often do you share victim information with the [VICTIM ASSISTANCE PROGRAM NAME] so that they can reach out to and follow-up with the victim? *Check **one**.*

- I did not know that [LOCATION NAME] PD had a [VICTIM ASSISTANCE PROGRAM NAME].
- 100% of the time—to every crime victim I encounter
- More than half of the time, but not always
- About half of the time
- Less than half of the time
- Almost never

12. In what ways do you share information on a victim with the [VICTIM ASSISTANCE PROGRAM NAME] so that they can reach out to and follow-up with the victim?

*Check **one** of the boxes in Response Section A **OR** Check **all that apply** in Response Section B.*

Response Option A	<p>I did not know that [LOCATION NAME] PD had a [VICTIM ASSISTANCE PROGRAM NAME].</p> <p>I do not share victim information with staff from [VICTIM ASSISTANCE PROGRAM NAME] to follow-up with victims.</p>
Response Section B	<p>By emailing [VICTIM ASSISTANCE PROGRAM NAME]</p> <p>By phoning [VICTIM ASSISTANCE PROGRAM NAME]</p> <p>By visiting [VICTIM ASSISTANCE PROGRAM NAME]'s office (in-person)</p> <p>Through a department referral/follow-up request form that is sent to [VICTIM ASSISTANCE PROGRAM NAME]</p> <p>By noting the need for follow-up in the police report</p> <p>Other: _____</p>

--	--

13. In what circumstances do you choose not to share victim information with the [VICTIM ASSISTANCE PROGRAM NAME] to follow-up with victims? *Check response option A **OR** provide a written answer in the box.*

Response Option A	I provide victim information to the [VICTIM ASSISTANCE PROGRAM NAME] for every victim.
Response Section B	

APPENDICES

APPENDIX D: LOGIC MODEL MEETING GUIDE

Logic Model Focus Group Guide

Note: The following is intended as a basic guide for the facilitator. The process will be iterative and dynamic based on responses from the group. As such, items may be asked in a different order or using slightly different phrasing. However, facilitation will not significantly deviate from the content included below.

As you may know, one of our goals from this project is to work with programs to develop a Theory of Change (TOC) logic model. The goal of this kind of logic model is to visually illustrate the theory of change underlying the program- that is, to visually illustrate the goals you (the program) hope to achieve, the intermediary outcomes that help get you there, and the program activities that are related to those outcomes.

In our line of work, we often pay particular attention to the intermediary outcomes as a) they are more proximal to the activities we are engaged in, and b) since the types of longer-term outcomes we are interested in may not be observable in the scope of our work.

During initial site visits the research team met with a variety of key informants with important perspectives on the work that you do. Based on what we heard in those interviews, we put together a logic model that reflects our current understanding of this program.

During our time together today, we are going to move through each of these pieces with you to get your reflections in order to refine the model.

i. [Longer-term outcomes]

[prompt for inaccuracies] We are going to start over here on the right-side. Looking at these longer-term outcomes, is there anything up here that you think *shouldn't* be here?

[prompt for miscategorized] Are any of these outcomes actually shorter-term outcomes, and we have them in the wrong category?

[prompt for missing] Are there any important long-term outcomes missing from the model?

ii. [Shorter-term outcomes]

[prompt for inaccuracies] Now moving to these intermediary, shorter-term outcomes- is there anything up here that you think *shouldn't* be here?

[prompt for miscategorized] Are any of these outcomes actually longer-term outcomes, and we have them in the wrong category?

[prompt for missing] Are there any important shorter-term outcomes missing from the model?

iii. **[Arrows]**

Now, let's think about the connections between these different activities and outcomes.

So, we said [activity] leads to [outcome]; does that seem right to you? Does [activity] lead to anything else up here?

[repeat as necessary]

iv. **[General Reflections]**

What resonates with you here? Does this accurately capture the work of your program?"

If not: what is inaccurate, doesn't resonate, feels too simplistic, etc?

APPENDICES

APPENDIX E: ARLINGTON HEIGHTS THEORY OF CHANGE LOGIC MODEL



Victims are first connected to Victim Services by...

Police

An Outside Agency

Program Staff

Word of Mouth

Victim Services provides...

Crisis Intervention and Support

Court Advocacy and Accompaniment

Cross-Agency Coordination

Education and Outreach

Referrals

Victims...

have **INCREASED UNDERSTANDING** of their options, rights, and the process.
have **INCREASED ACCESS** to needed services.

Community members...

have **GREATER AWARENESS** of services and resources provided by the police department.
have **INCREASED CONFIDENCE** that police will be responsive to their specific needs.

Police...

have **INCREASED UNDERSTANDING** of victim decision-making and behaviors in the aftermath of their victimization.
operate **MORE EFFECTIVELY AND EFFICIENTLY** by working as a team with Victim Services.

Victims...

DEVELOP COPING STRATEGIES to continue to heal on their own.
feel **MORE EMPOWERED, AND ARE NOT DEFINED BY THEIR VICTIMIZATION.**

Victims, community members, and the police have...

BETTER RELATIONSHIPS.
INCREASED POSITIVE INTERACTIONS.

Police...

have **INCREASED CONFIDENCE** in their ability to provide assistance and resources.
have a **GREATER SENSE OF CLOSURE** as they know victims are being helped.

Together, we....

PREVENT FURTHER TRAUMA.

APPENDICES

APPENDIX F: ELGIN THEORY OF CHANGE LOGIC MODEL



Elgin Victim Services

Victims are first connected
To Victim Services by...

Police

An Outside
Agency

Program
Staff

Community

Website

Victim Services provides
bilingual services, including...

Crisis
Intervention

Advocacy and
Accompaniment

Education
and Outreach

Referrals

Victims...

have **INCREASED
UNDERSTANDING** of
their options, rights, and the
process.

have **INCREASED
ACCESS** to needed services.

Victims...

DEVELOP STRATEGIES
to continue to progress on
their own.

feel **SAFE, EMPOWERED
AND ARE ABLE TO LIVE
WITH GREATER
FREEDOM.**

Community members...

have **INCREASED KNOWLEDGE** of the
professional and individualized services available at
the police department.

have **INCREASED ACCESS** to culturally-responsive
services for diverse, often underserved, individuals.

Victims, community members, police, and
Social Services have...

**INCREASED POSITIVE ENGAGEMENT.
BETTER RELATIONSHIPS.**

**Together, we....
PREVENT FURTHER CRIME.
FOSTER A SAFER COMMUNITY.
ENHANCE COMMUNITY MEMBERS'
QUALITY OF LIFE.**

Police...

have **INCREASED AWARENESS**
of community resources and how to
meet victims' needs.

work **MORE
COLLABORATIVELY** with Social
Services to conduct the investigation
in a trauma-informed way.

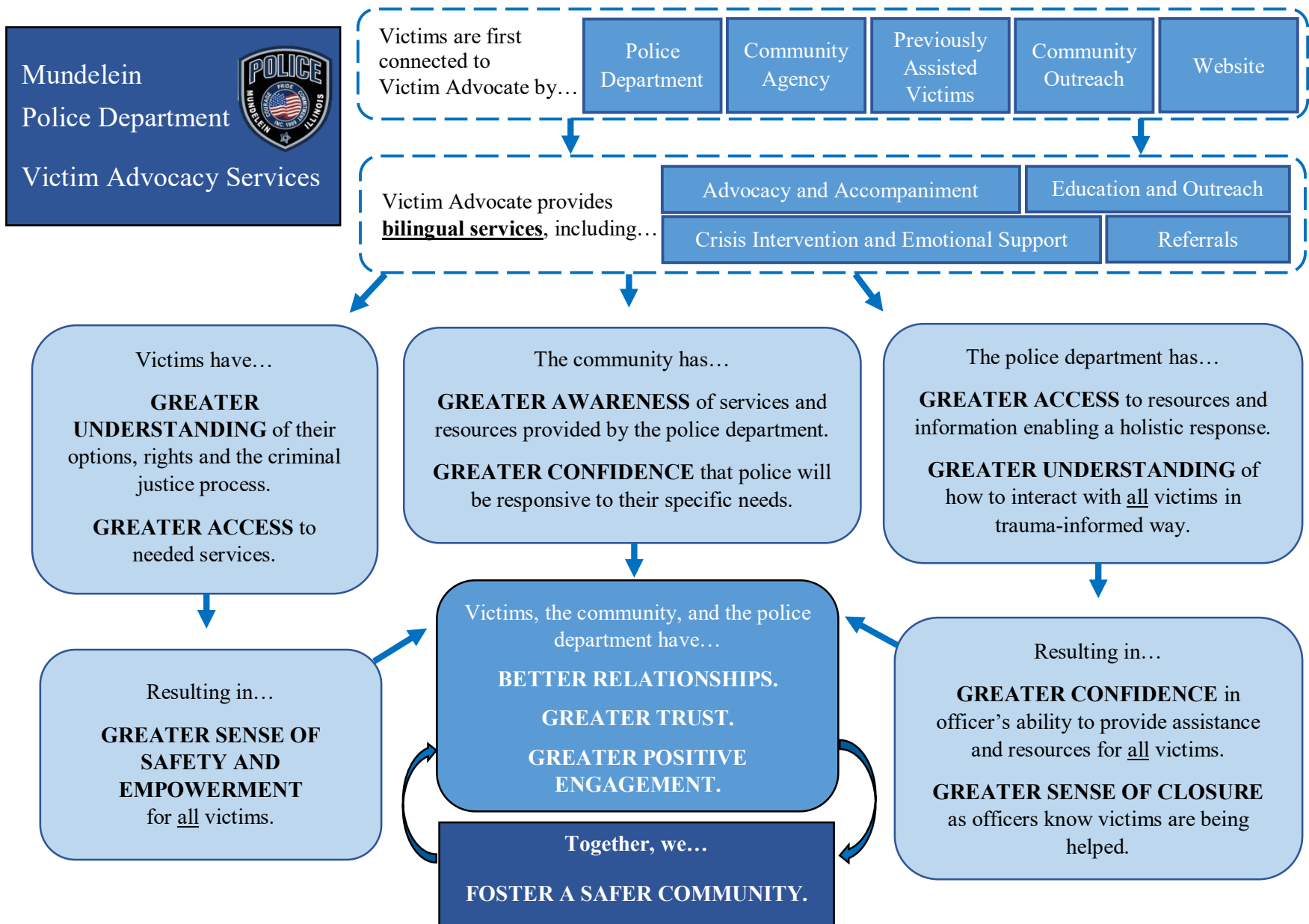
Police...

operate **MORE
EFFECTIVELY AND
EFFICIENTLY** by working as
a team with Social Services.

have **GREATER
ASSURANCE** that victims are
being helped.

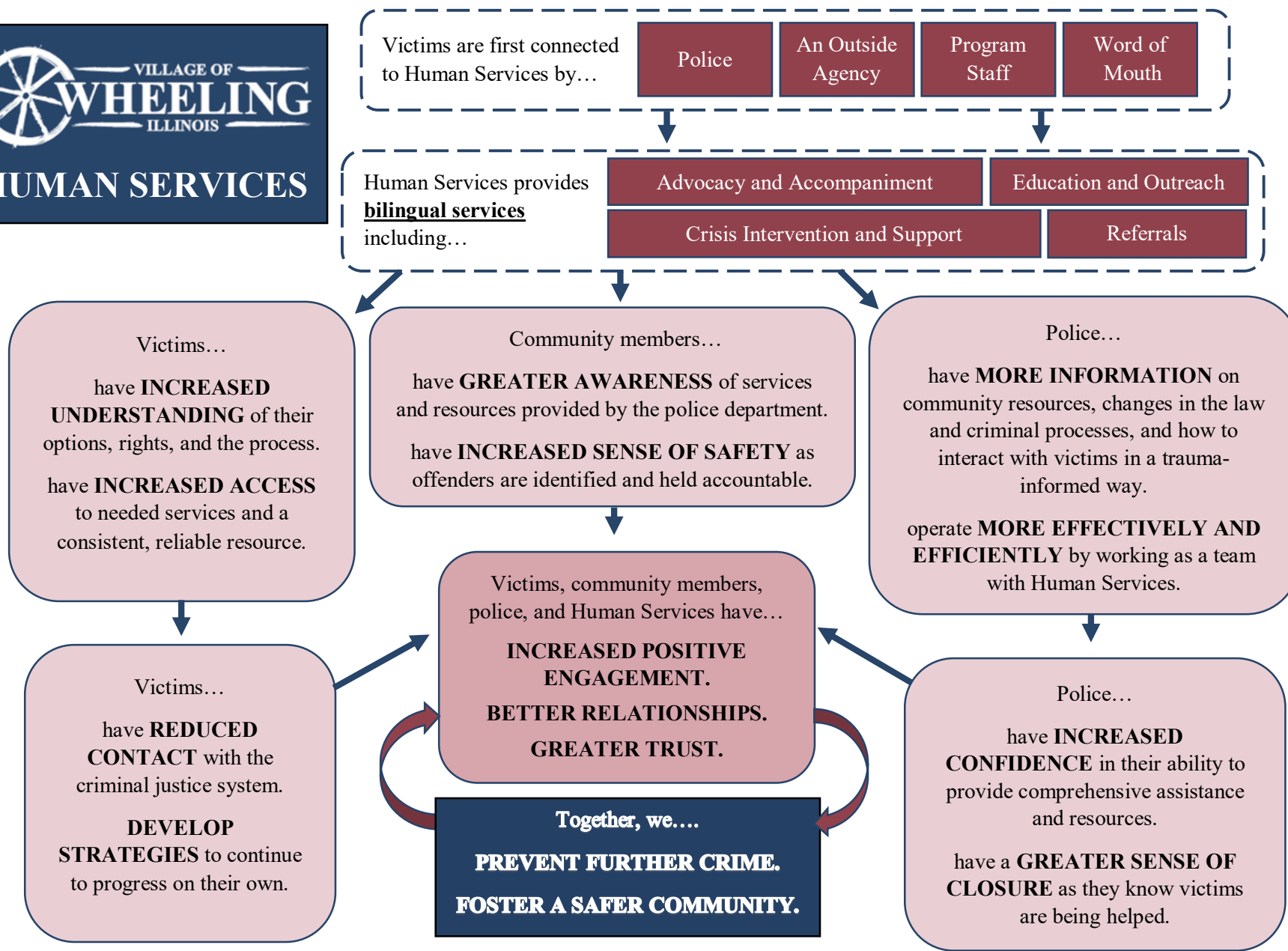
APPENDICES

APPENDIX G: MUNDELEIN THEORY OF CHANGE LOGIC MODEL



APPENDICES

APPENDIX H: WHEELING THEORY OF CHANGE LOGIC MODEL



APPENDICES

APPENDIX I: ARLINGTON HEIGHTS POLICE QUESTIONNAIRE REPORT

Police Utilization of the Arlington Heights Police Department Victim Assistance Program (VAP)

A Report Provided by the Victim Assistance Program Evaluation Team

Funded by the Illinois Criminal Justice Information Authority (ICJIA)

June 2020

Background

- As part of an evaluability assessment of Victim Assistance Programs (VAP) located within police departments, we examined police officers' perspectives via questionnaire. This was part of a larger study and complemented interviews done with officers and VAP staff.
- To generate a wider sample of police perspectives on the victim assistance program, a questionnaire was administered to 71 sworn officers of the Arlington Heights Police Department in January 2020. The questionnaire asked about police officer's (1) awareness, (2) utilization, and (3) opinions of the victim assistance program. The following is a summary of these results.
- When relevant, tables in the current report display results in the order in which the questions were asked (e.g., 100% of the time, more than half of the time, etc.). Otherwise, table output is organized by frequency of responses, with the highest frequency response options described first. In order to preserve participant confidentiality, groups of two or fewer respondents have been combined. Additionally, as participants were given the option to either skip an item or select "I prefer not to respond," the total participant size shifts slightly across the questionnaire.

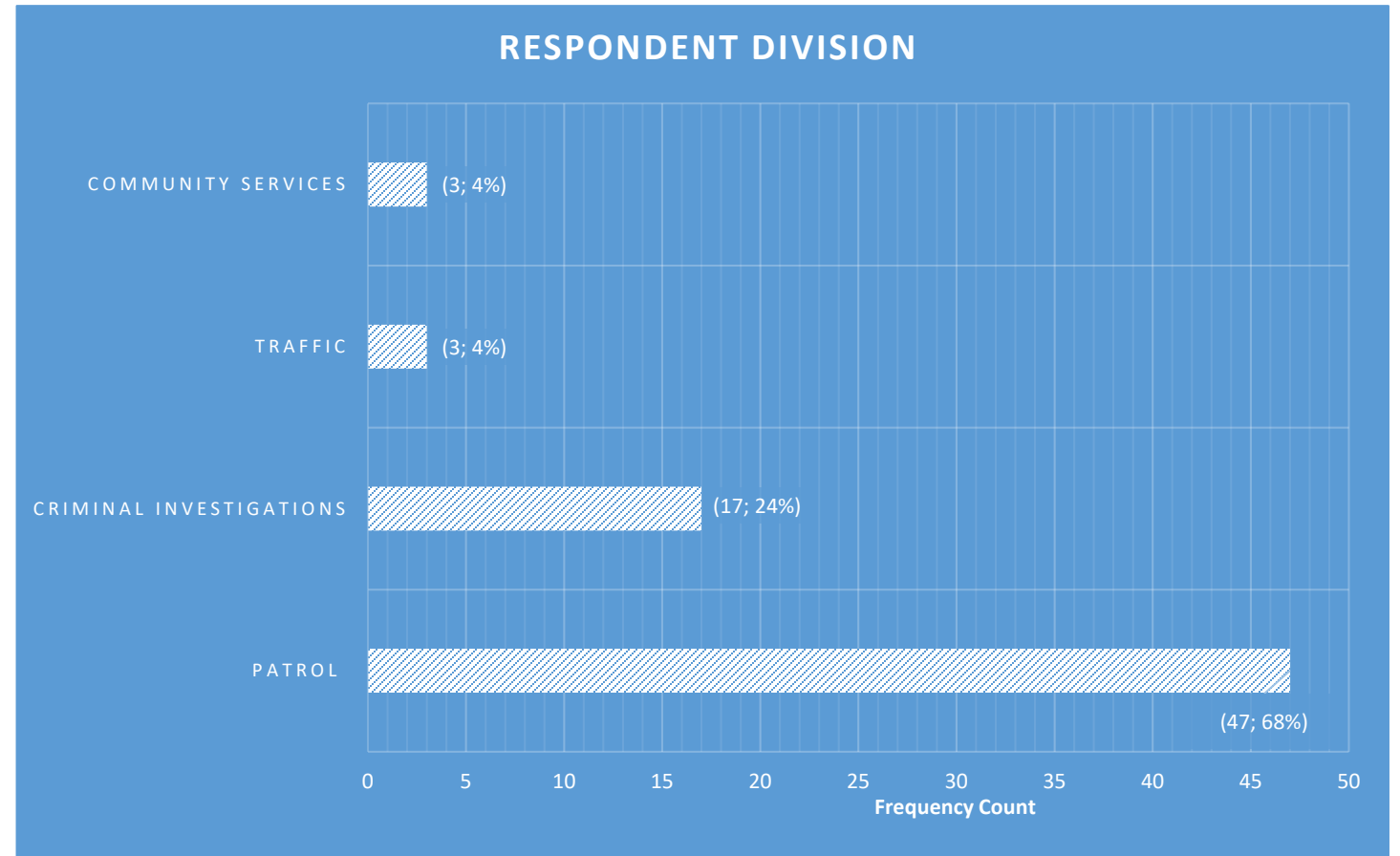
Key Questions

- Who took the survey?
- How familiar are officers with the VAP?
- How were police officers introduced to the VAP?
- How familiar were officers with specific VAP services?
- How often are officers connecting victims with the VAP?
- How often and how do officers provide information about the VAP directly to the victim?
- How often and how do officers provide information about the victim to VAP staff?
- Why do officers sometimes choose NOT to connect a victim to the VAP?

Who took the survey?

Division

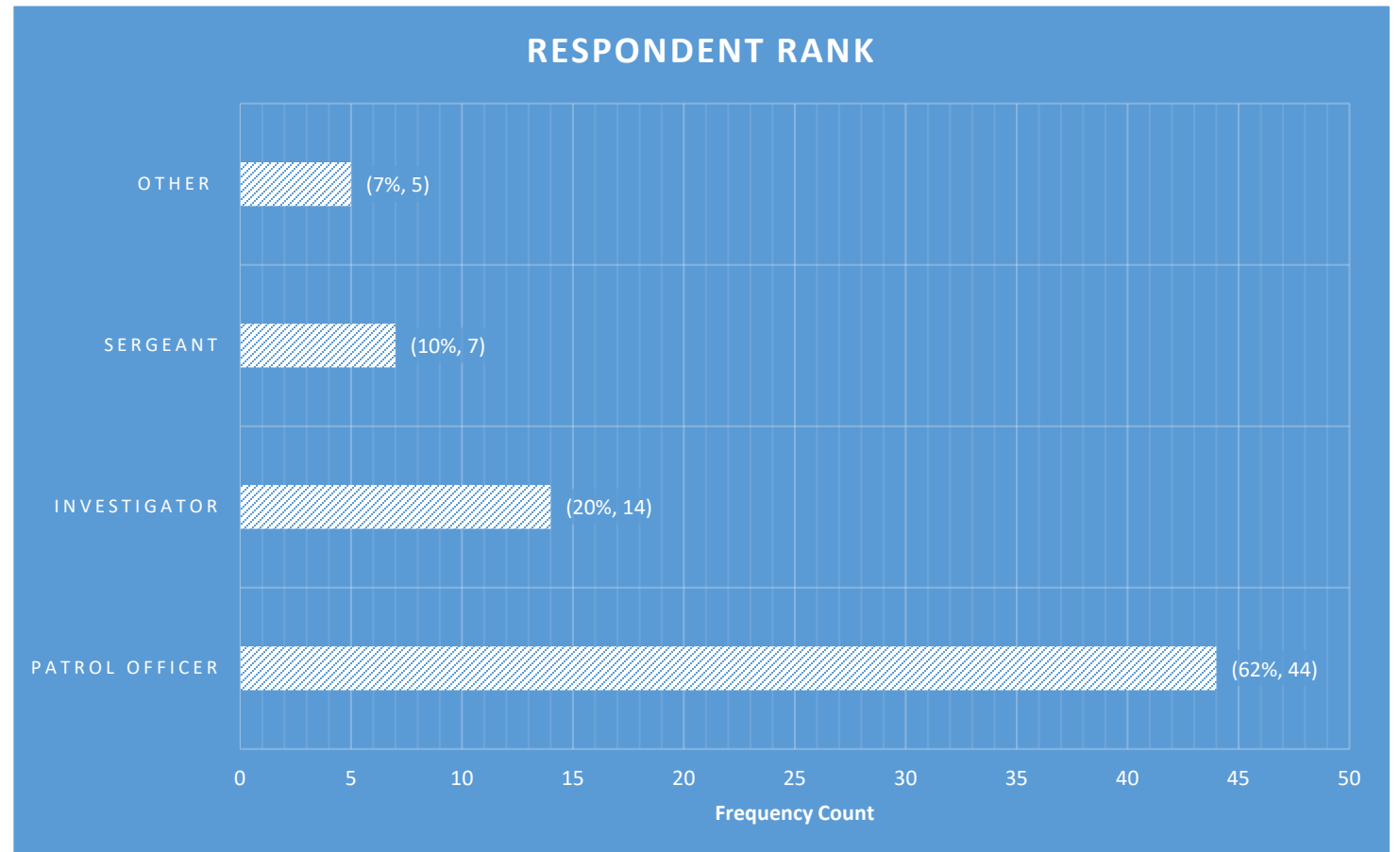
Most respondents were in the patrol division. Other respondents were in criminal investigations, traffic and community services.



Who took the survey?

Rank

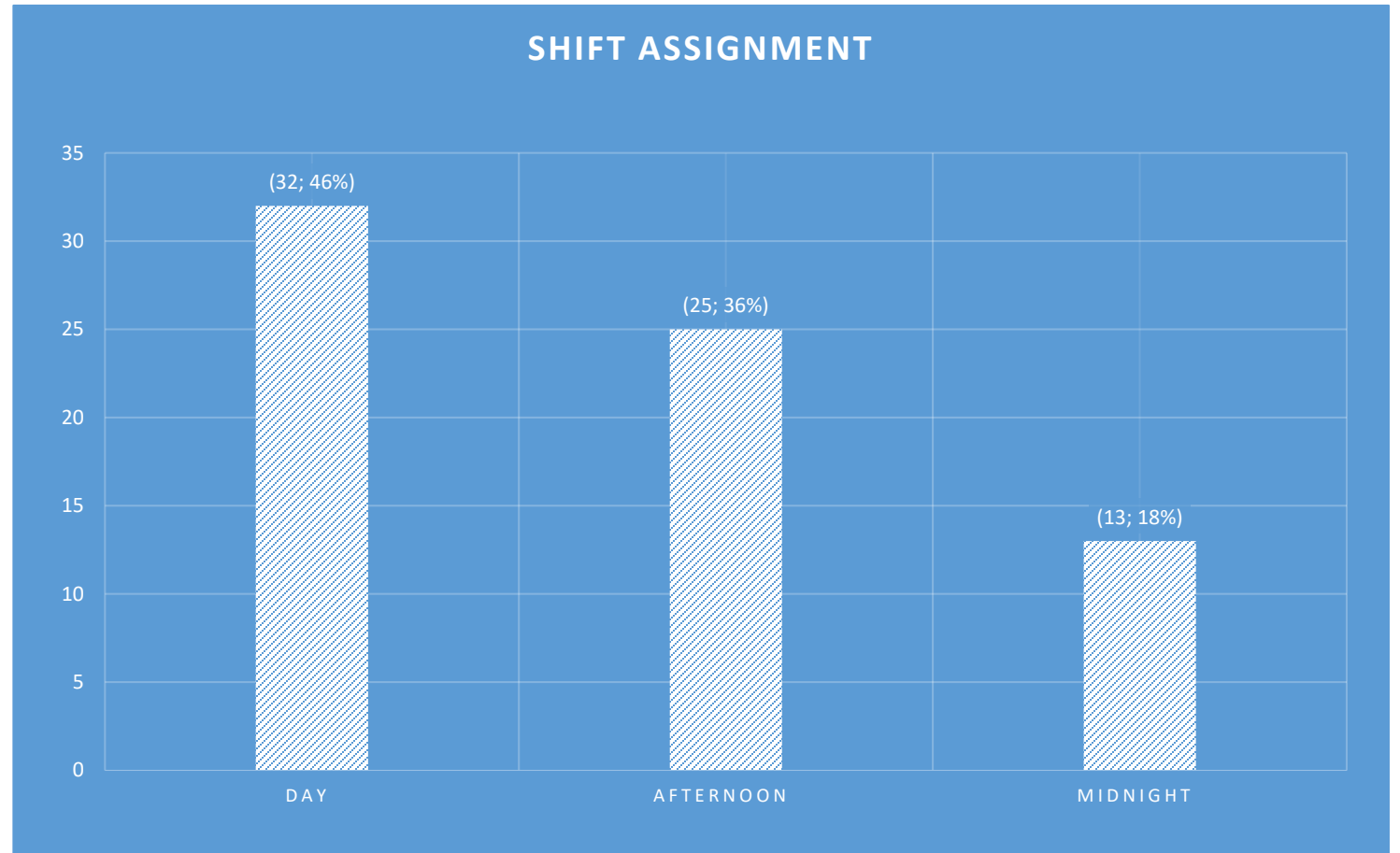
Most respondents were patrol. Some investigators and sergeants also completed the survey.



Who took the survey?

Shift

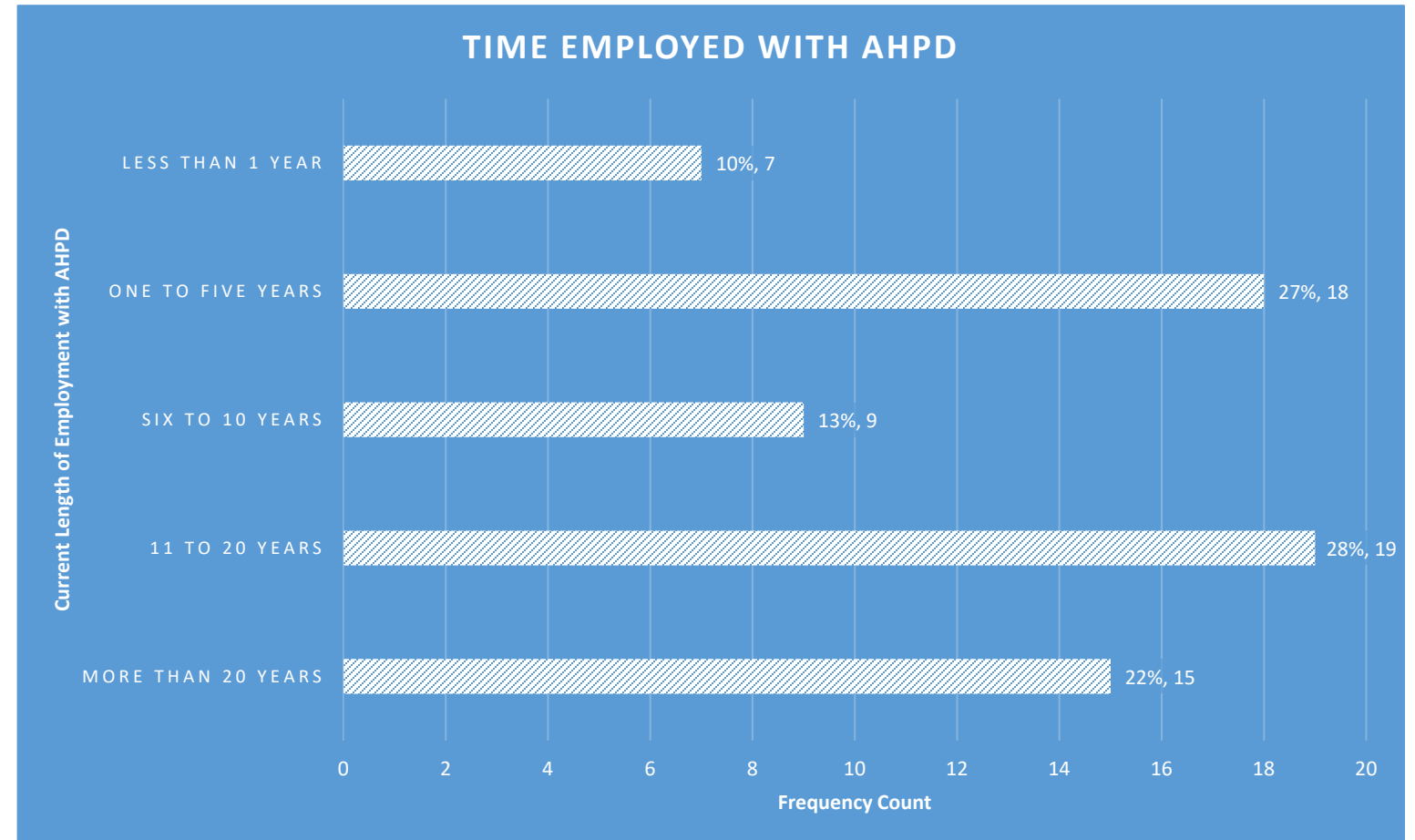
Most respondents work the day or afternoon shift, though many respondents from the midnight shift completed the survey, too.



Who took the survey?

Tenure

About half of the respondents have been employed with Arlington Heights PD for 11 years or more. The other half have been employed for 10 years or less.

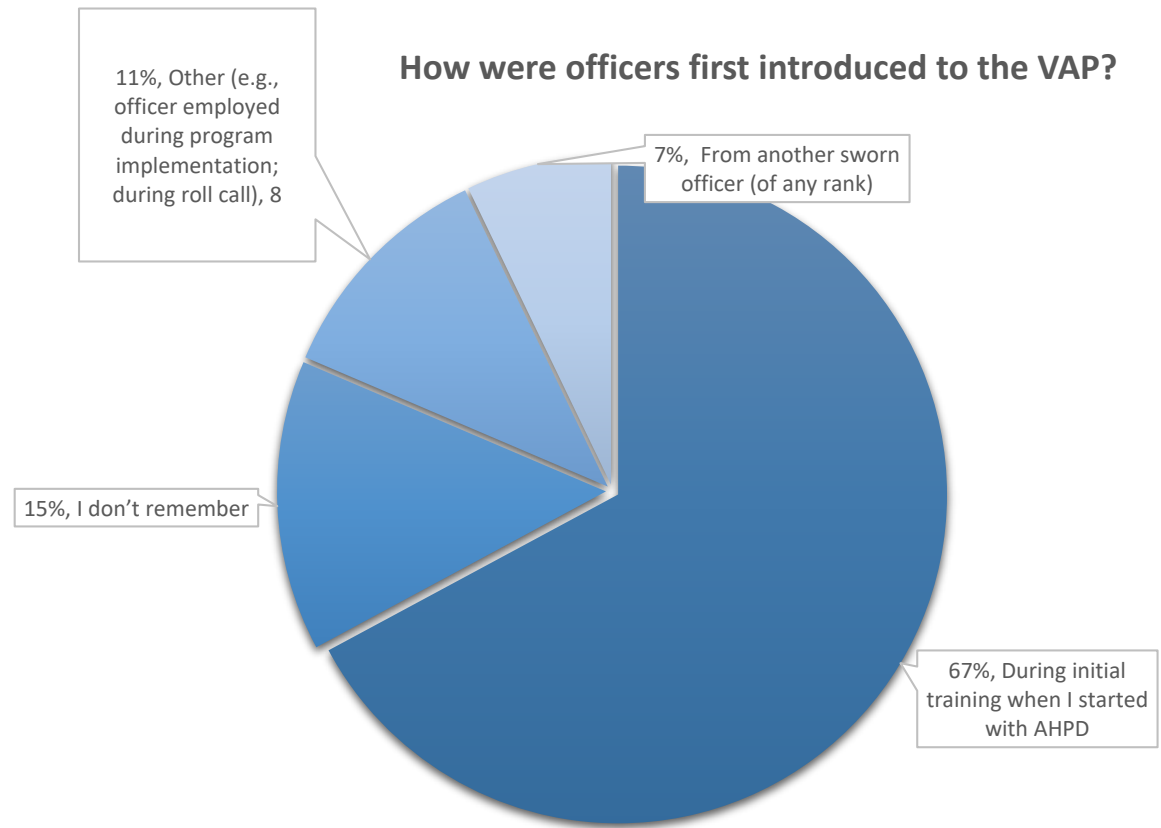


How well do police officers know the VAP?



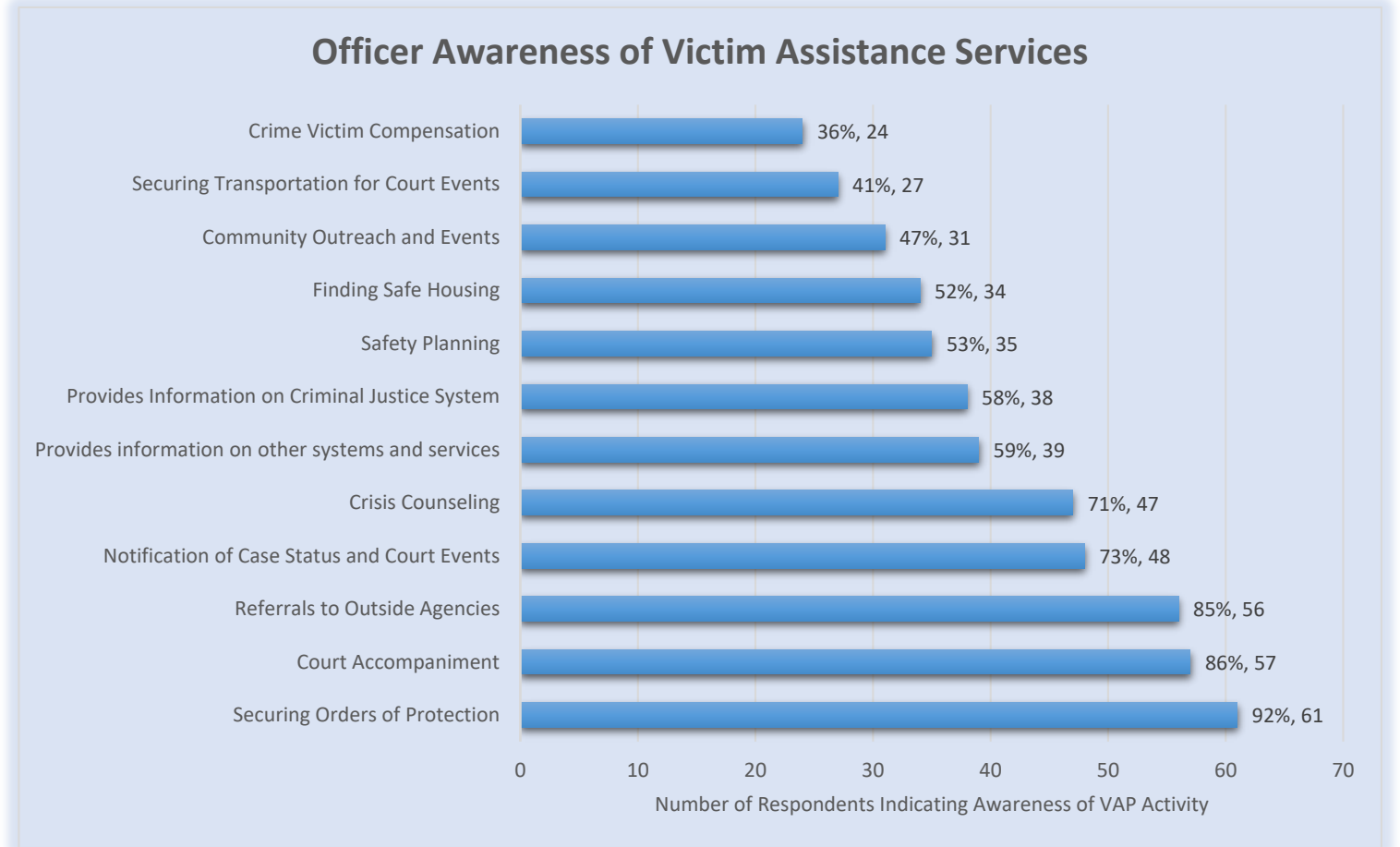
How were officers introduced to the VAP?

Two-thirds of respondents first learned of the VAP during training when they started at AHPD. The remaining officers learned about it from another officer, were already employed at the department when the program was started, or couldn't remember how they learned of the program.



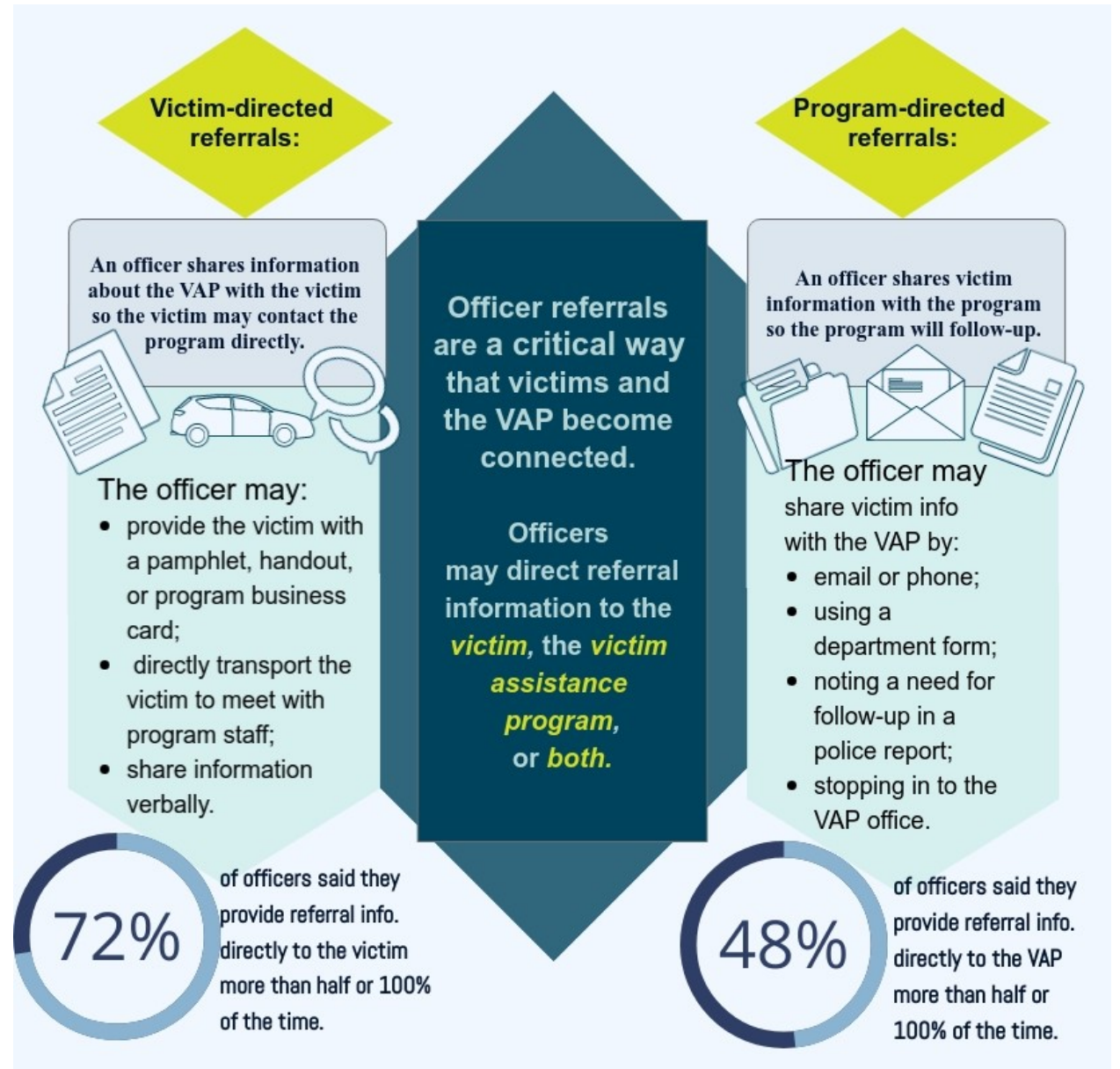
How familiar were officers with specific VAP services?

Respondents indicated that the program provides a wide array of services, most often mentioning securing orders of protection, court accompaniment and referrals to outside agencies.



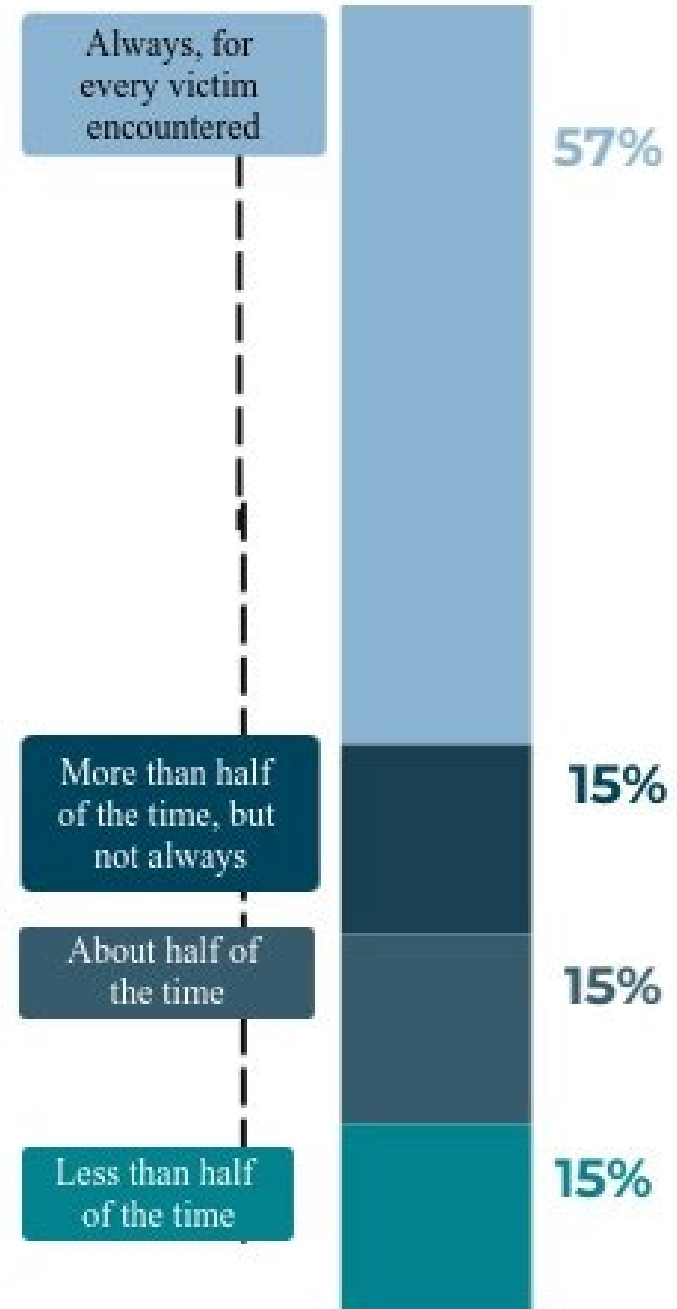
How often are officers connecting victims with the VAP?

Officers connect victims to the program by providing information about the program directly to victims, or by providing information about the victim directly to program staff so program staff can contact the victim.

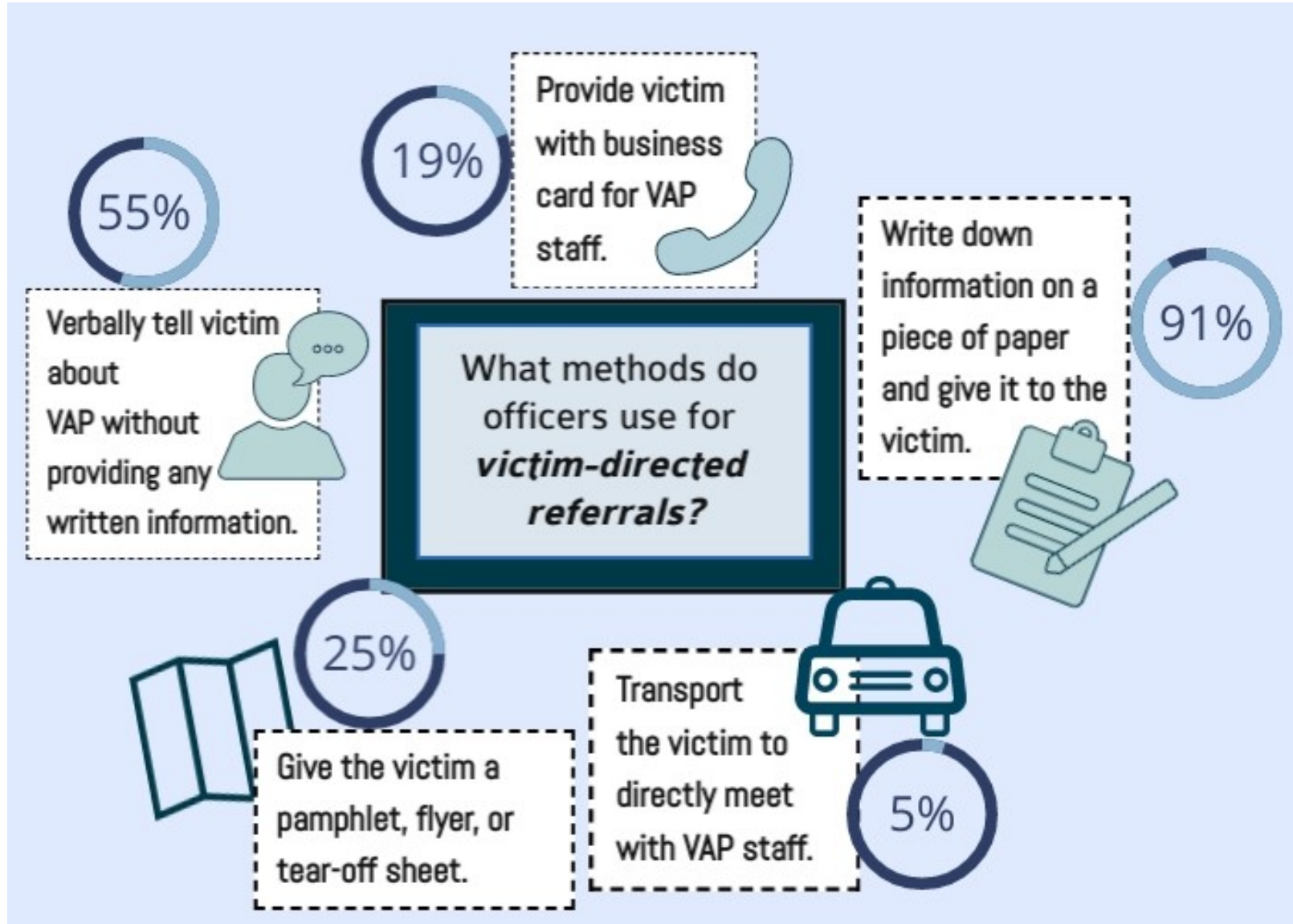


How often do officers provide information about the VAP directly to the victim?

Officers frequently provide information about the VAP directly to the victim. Fewer than one-third of officers say they only do this about half the time or less.

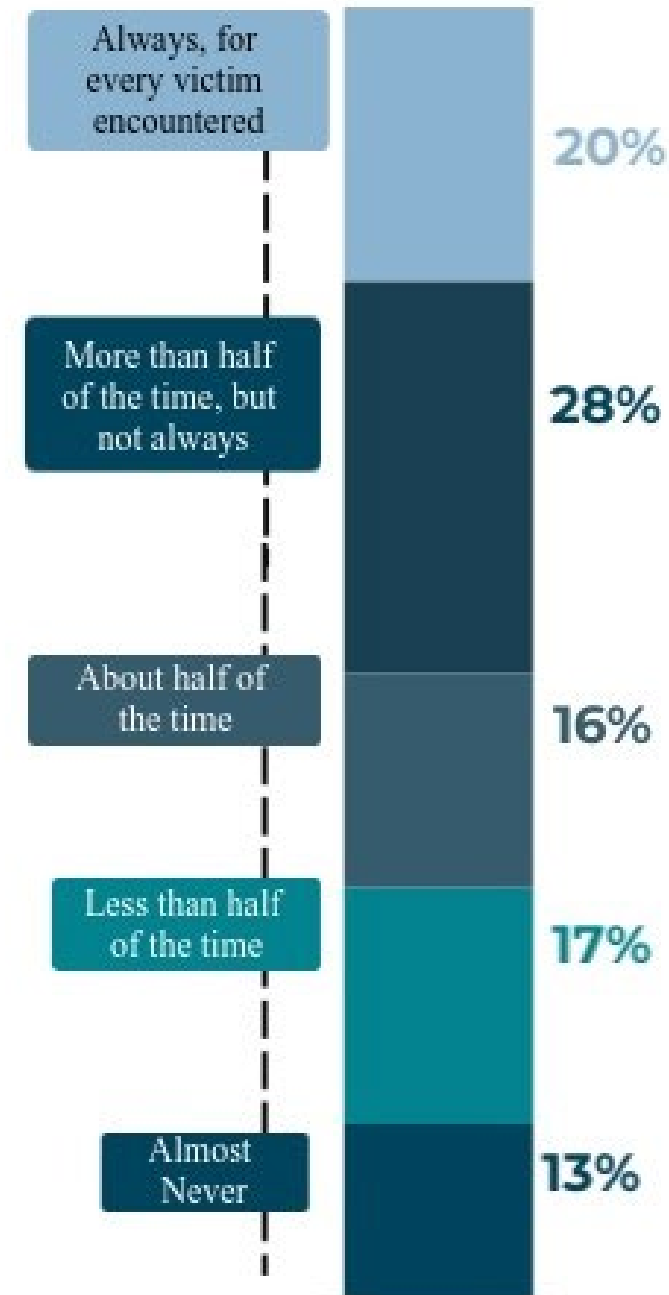


How do officers provide information about the VAP directly to the victim?

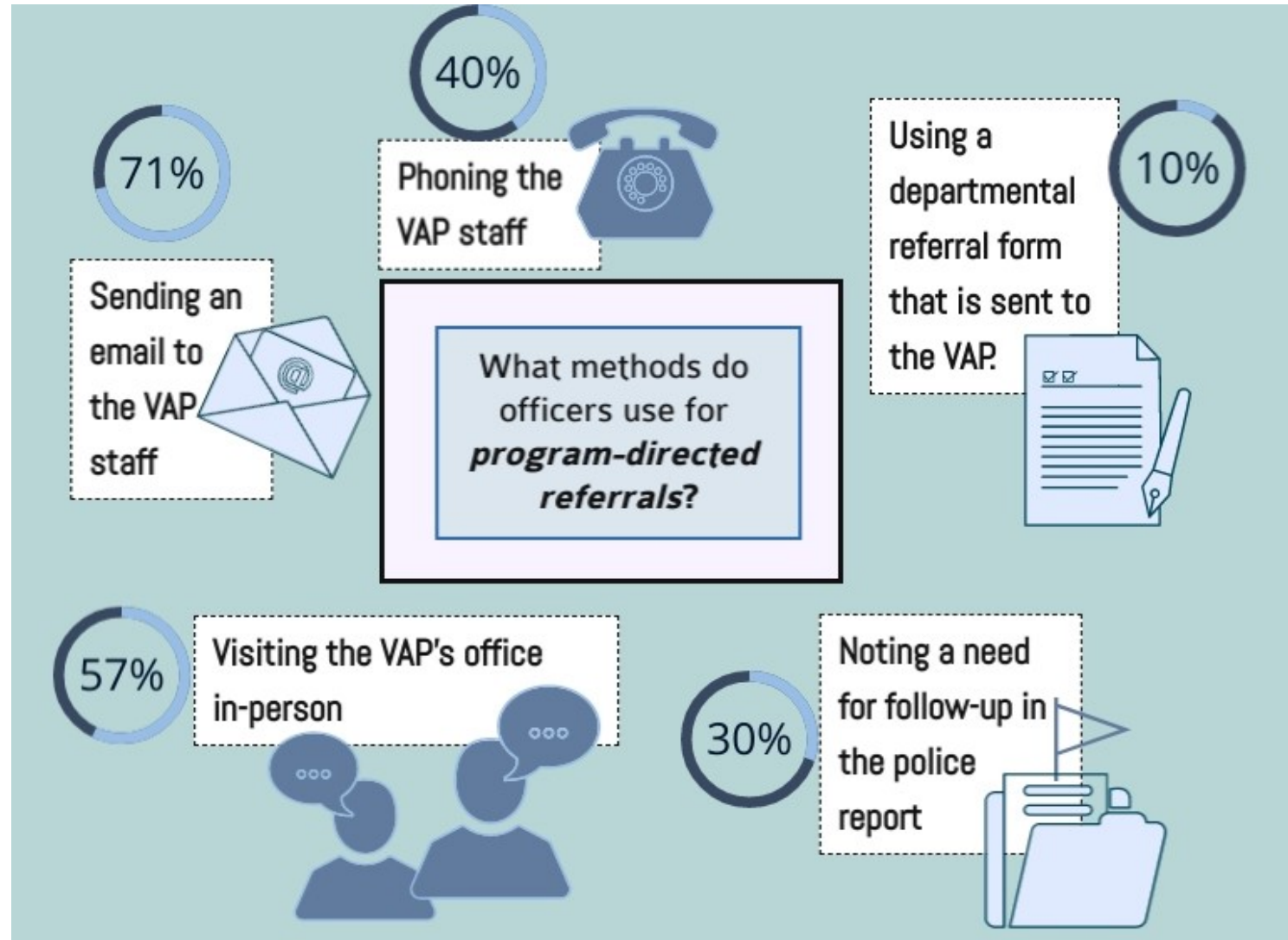


How often do officers provide information about the victim to VAP staff?

Half of the officers provide information about the victim to the VAP for at least half of the victims they encounter. The other half of officers do this less regularly.



How do officers provide information about the victim to VAP staff?



Why do officers sometimes choose NOT to connect a victim to the VAP?



Some officers indicated they do not refer to the VAP because they typically:

- Do not refer if the situation does not seem to apply
- Do not refer if they can assist the victim personally
- Only refer victims of certain types of crime (e.g., domestic violence)
- Do not refer to the VAP for some types of crime (e.g., non-severe crime)
- May forget to refer (but know that the VAP checks police reports so there is a back-up for victims to become connected to the VAP)

APPENDICES

APPENDIX J: ELGIN POLICE QUESTIONNAIRE REPORT

Police Utilization of the Elgin Police Department Victim Assistance Program (VAP)

A Report Provided by the Victim Assistance Program Evaluation Team

Funded by the Illinois Criminal Justice Information Authority (ICJIA)

June 2020

Background

- As part of an evaluability assessment of Victim Assistance Programs (VAP) located within police departments, we examined police officers' perspectives via questionnaire. This was part of a larger study and complemented interviews done with officers and VAP staff.
- To generate a wider sample of police perspectives on the victim assistance program, a questionnaire was administered to 74 sworn officers of the Elgin Police Department in January 2020. The questionnaire asked about police officer's (1) awareness, (2) utilization, and (3) opinions of the victim assistance program. The following is a summary of these results.
- When relevant, tables in the current report display results in the order in which the questions were asked (e.g., 100% of the time, more than half of the time, etc.). Otherwise, table output is organized by frequency of responses, with the highest frequency response options described first. In order to preserve participant confidentiality, groups of two or fewer respondents have been combined. Additionally, as participants were given the option to either skip an item or select "I prefer not to respond," the total participant size shifts slightly across the questionnaire.

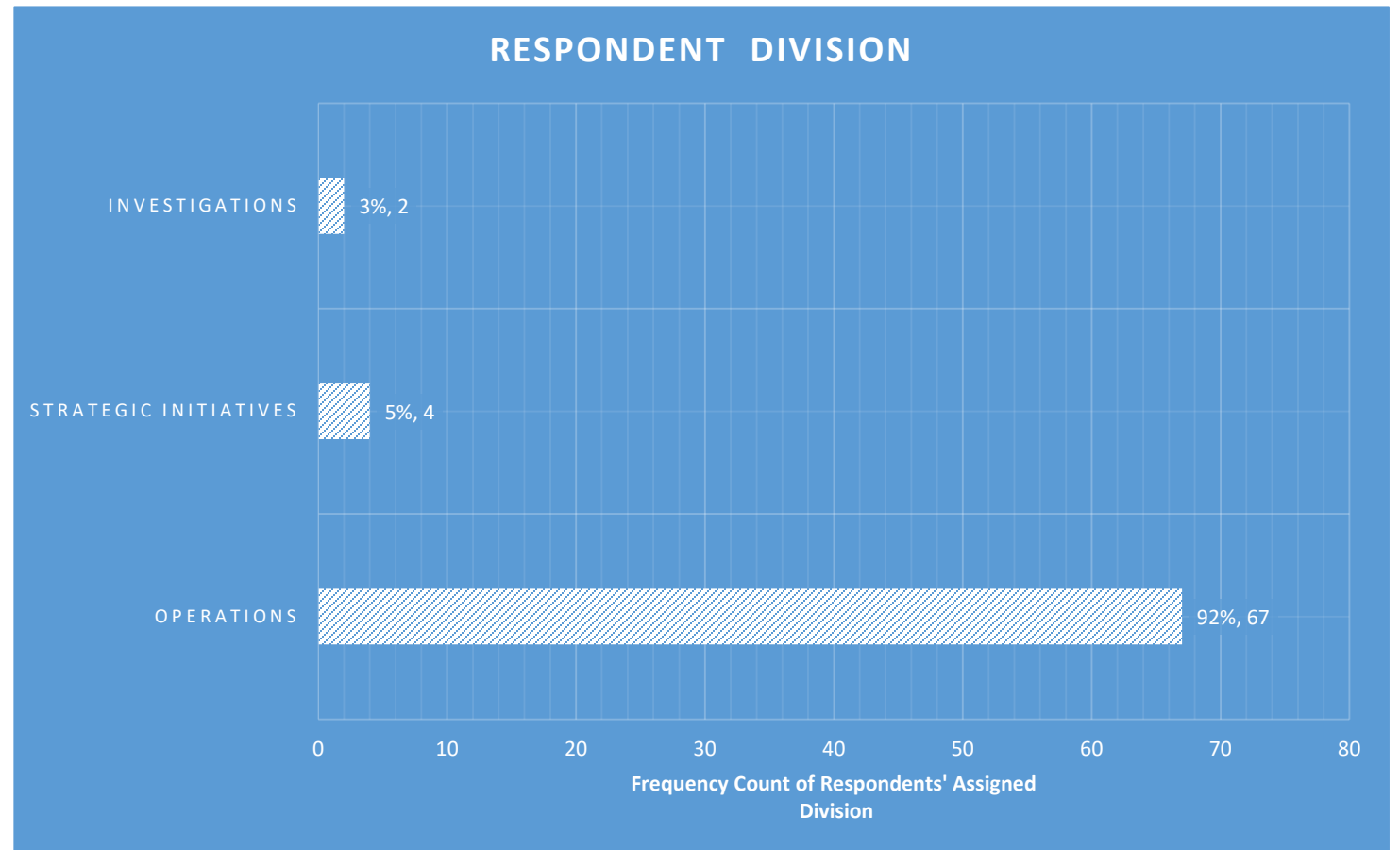
Key Questions

- Who took the survey?
- How familiar are officers with the VAP?
- How were police officers introduced to the VAP?
- How familiar were officers with specific VAP services?
- How often are officers connecting victims with the VAP?
- How often and how do officers provide information about the VAP directly to the victim?
- How often and how do officers provide information about the victim to VAP staff?
- Why do officers sometimes choose NOT to connect a victim to the VAP?

Who took the survey?

Division

Most respondents were in the Operations Division. A few respondents were in Strategic Initiatives or Investigations.

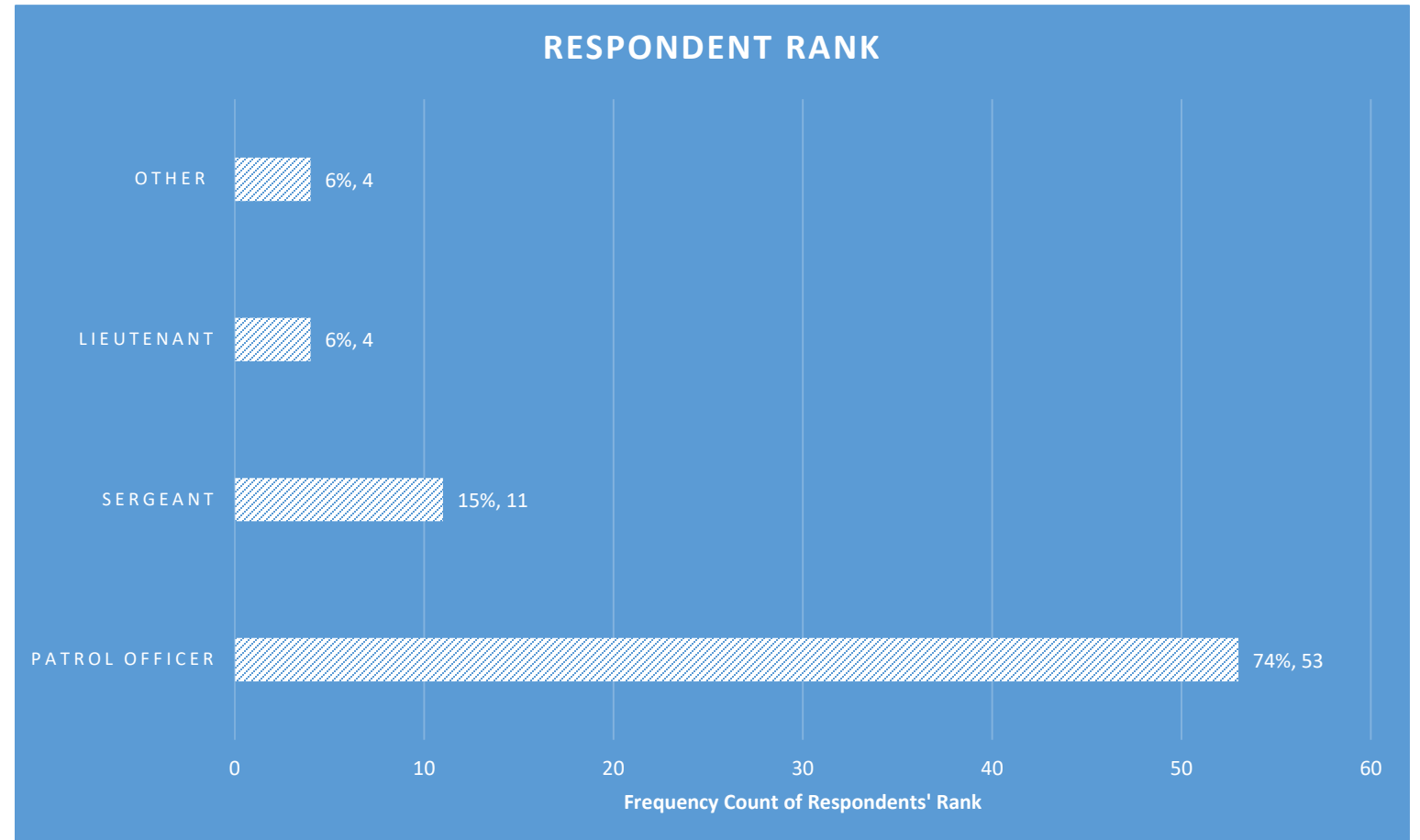


Who took the survey?

Rank

Most respondents were patrol officers.

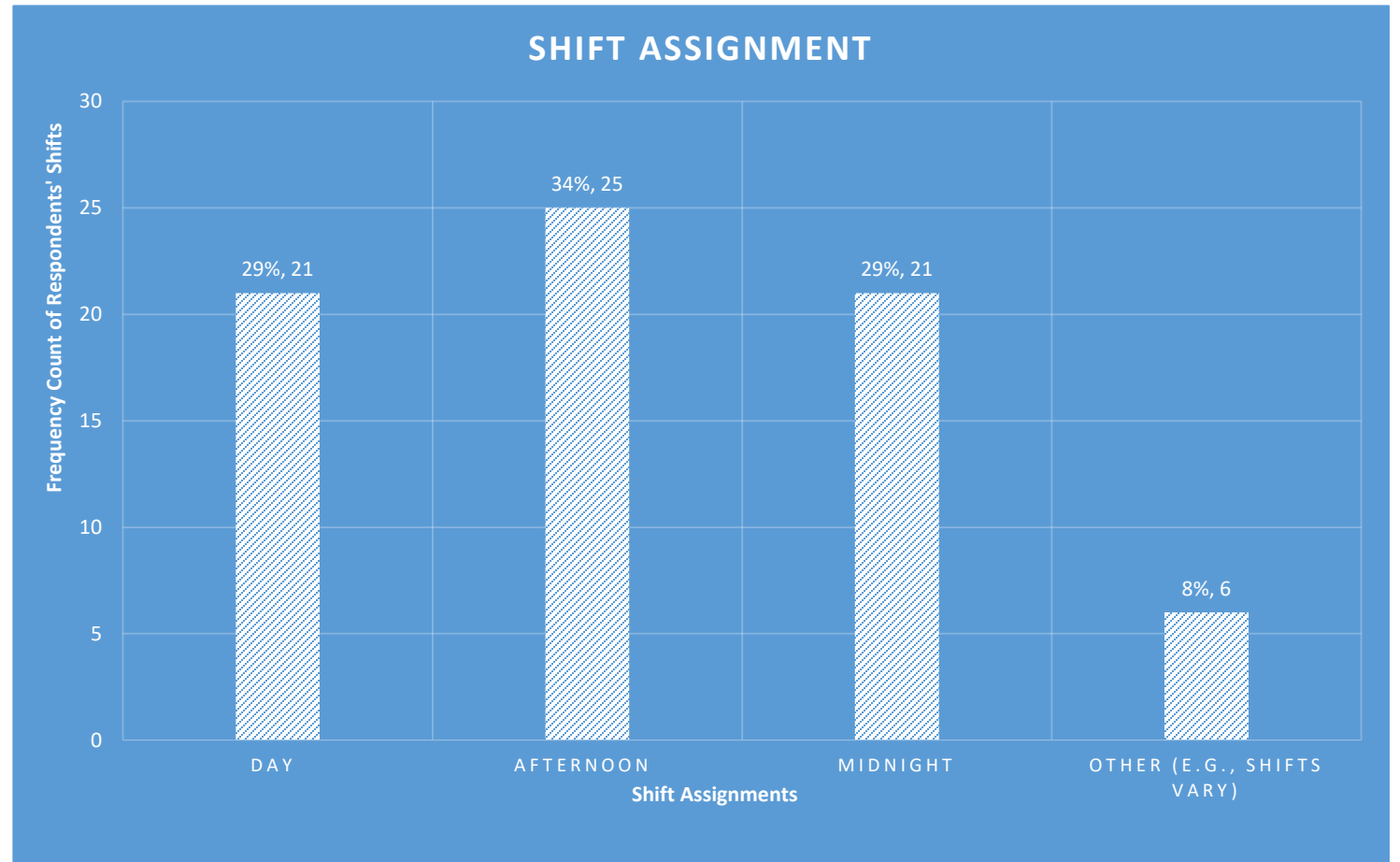
A number of sergeants and lieutenants also completed the survey.



Who took the survey?

Shift

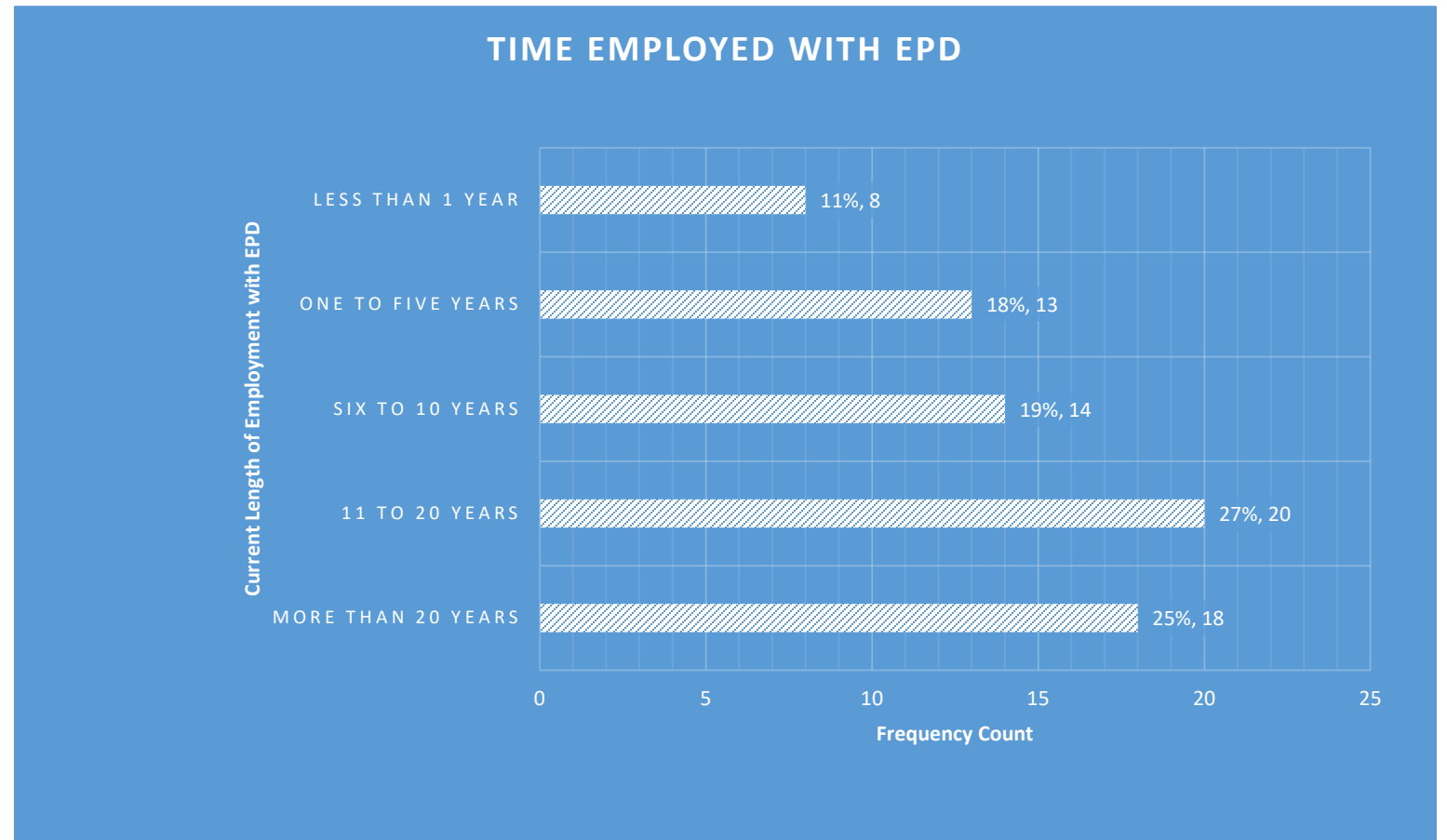
Respondents were fairly evenly represented across the day, afternoon, and midnight shifts.



Who took the survey?

Tenure

Just over half of the respondents have been employed with Elgin PD for 11 years or more. The other half have been employed for 10 years or less.

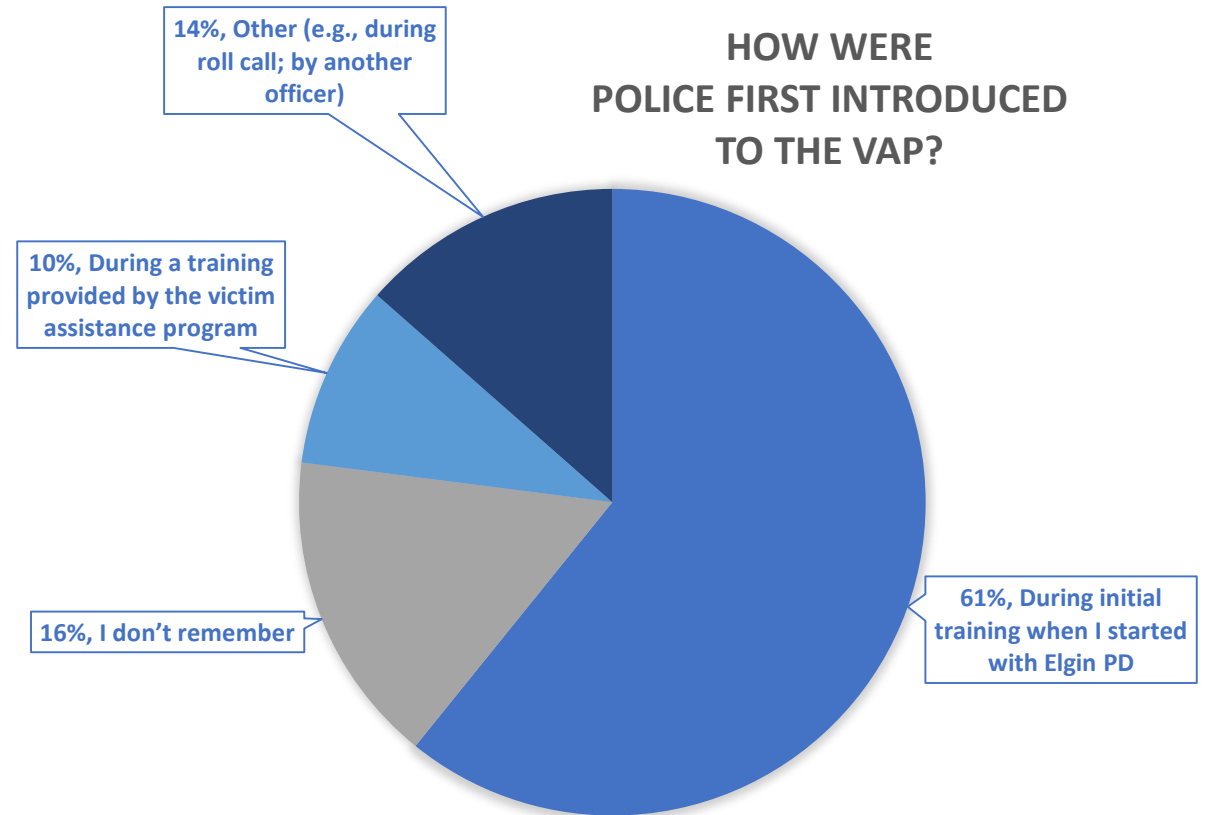


How well do police officers know the VAP?



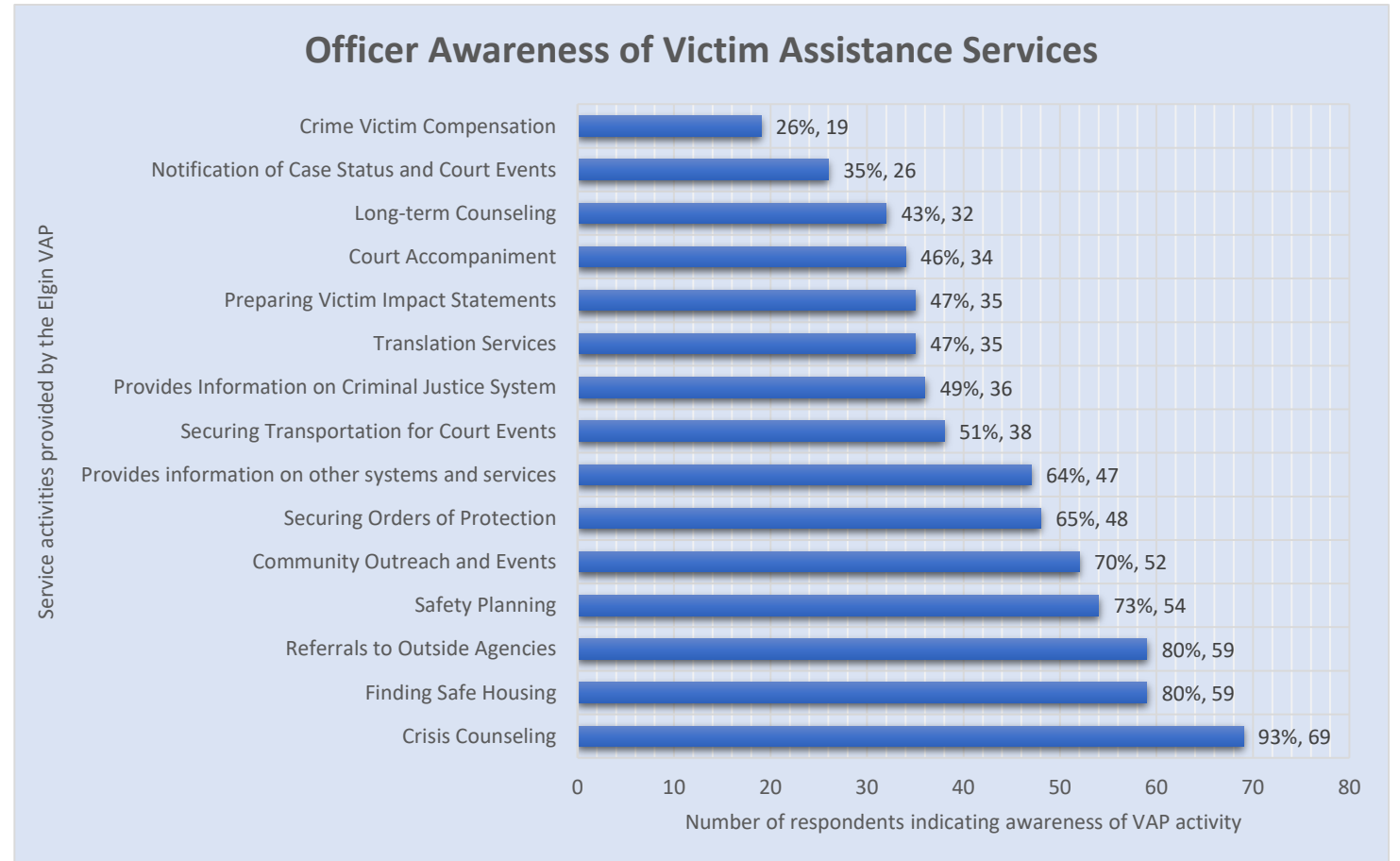
How were officers introduced to the VAP?

Just under two-thirds of respondents first learned of the VAP during training when they started at the EPD. The remaining respondents learned about the program from another officer, during roll call or other training provided by the VAP, or couldn't remember how they learned of the program.



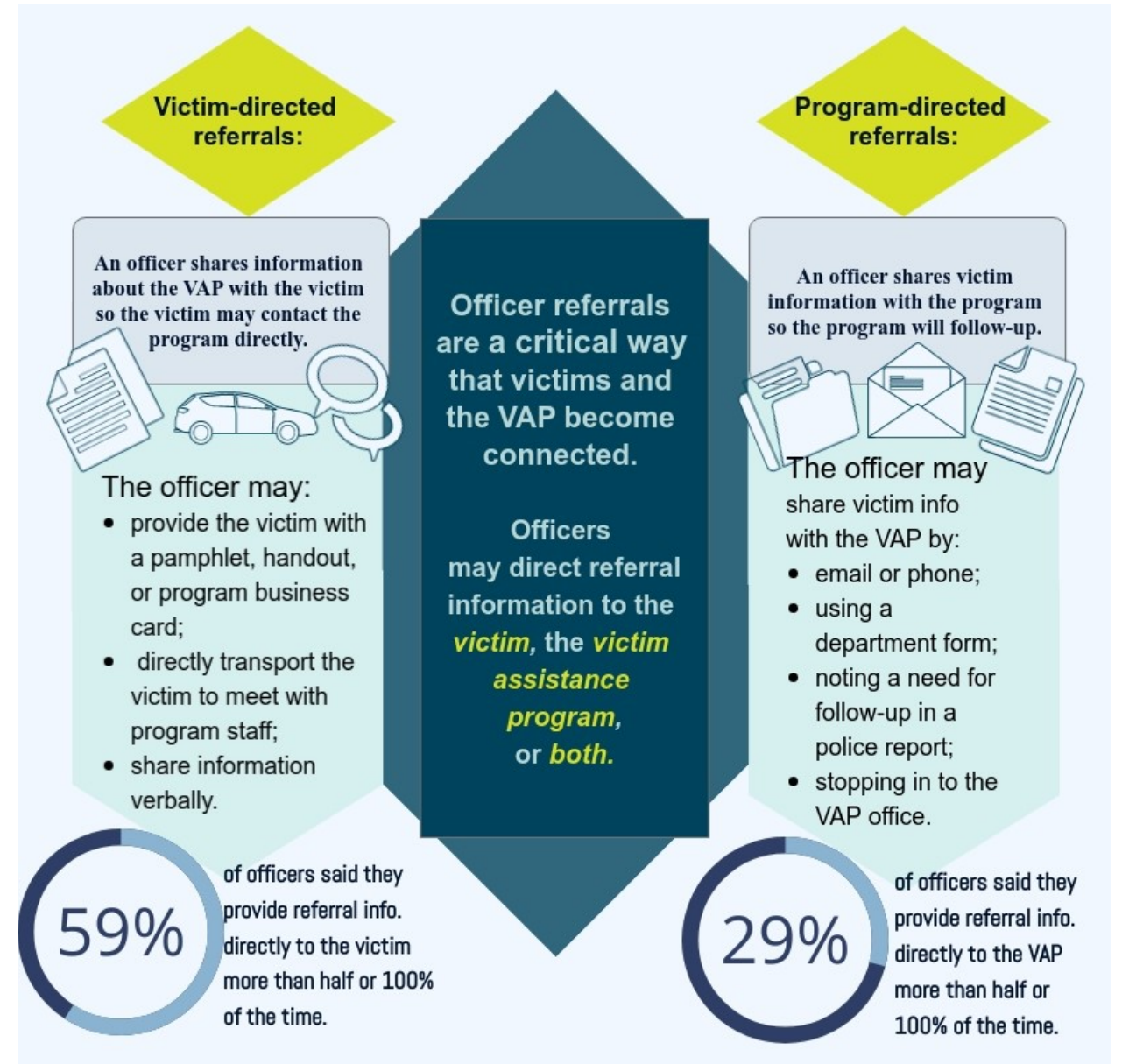
How familiar were officers with specific VAP services?

Respondents indicated that the program provides a wide array of services, most often mentioning crisis counseling, finding safe housing, and referrals to outside agencies.



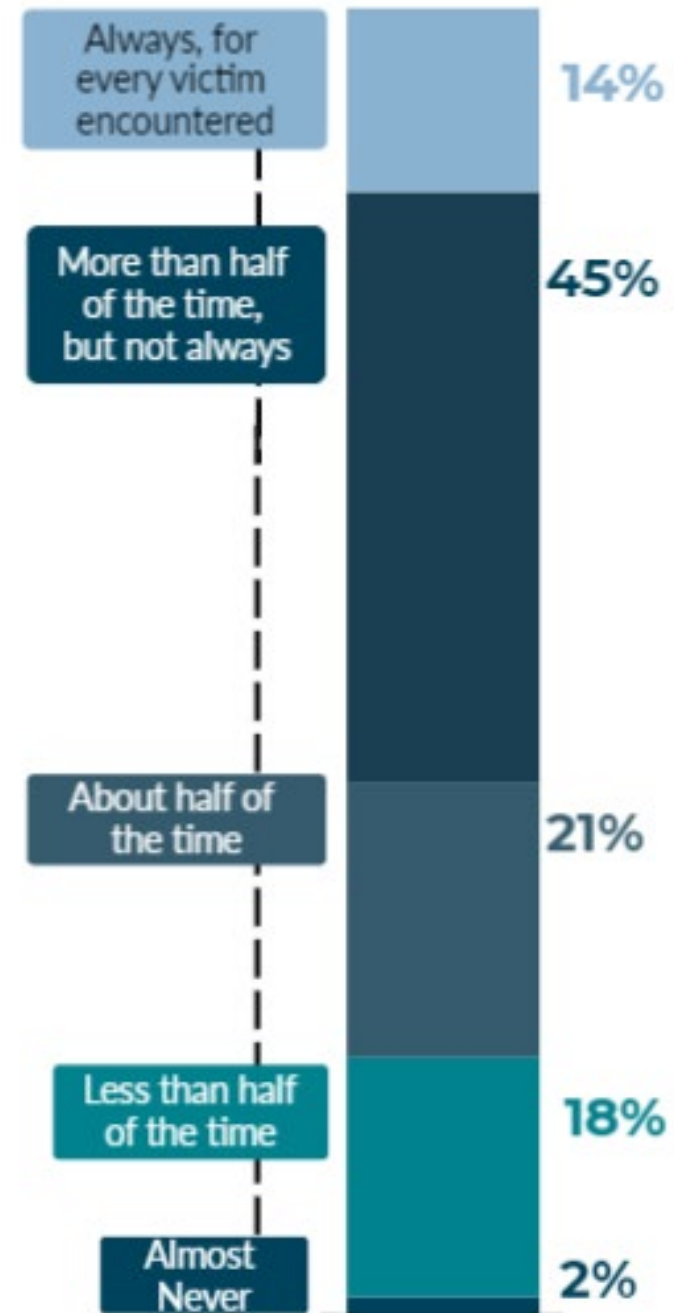
How often are officers connecting victims with the VAP?

Officers connect victims to the program by providing information about the program directly to victims, or by providing information about the victim directly to program staff so program staff can contact the victim.

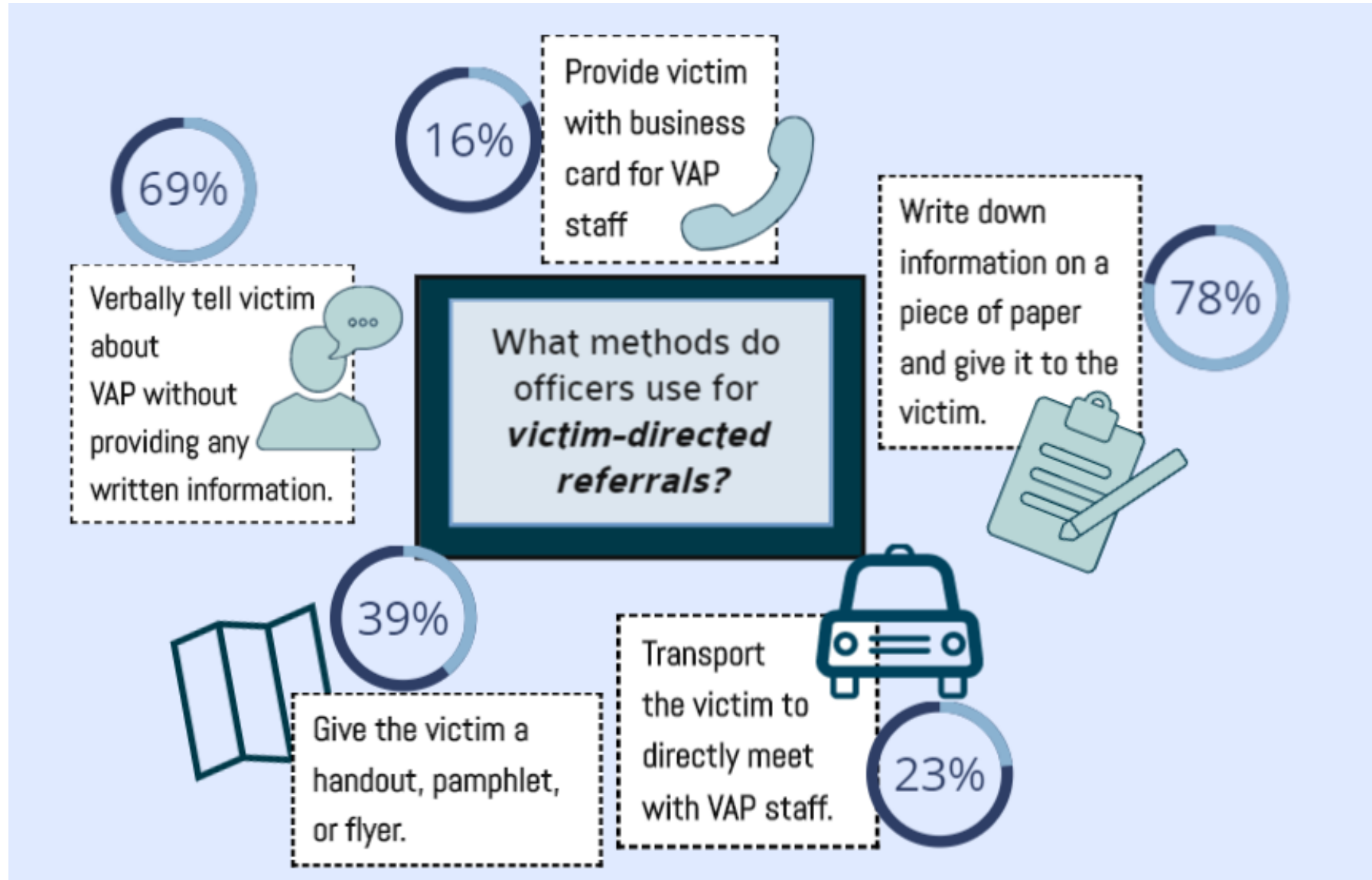


How often do officers provide information about the VAP directly to the victim?

About half of the officers provide information about the VAP directly to the victim for more than half of the victims they encounter. The other half of officers do this less regularly.

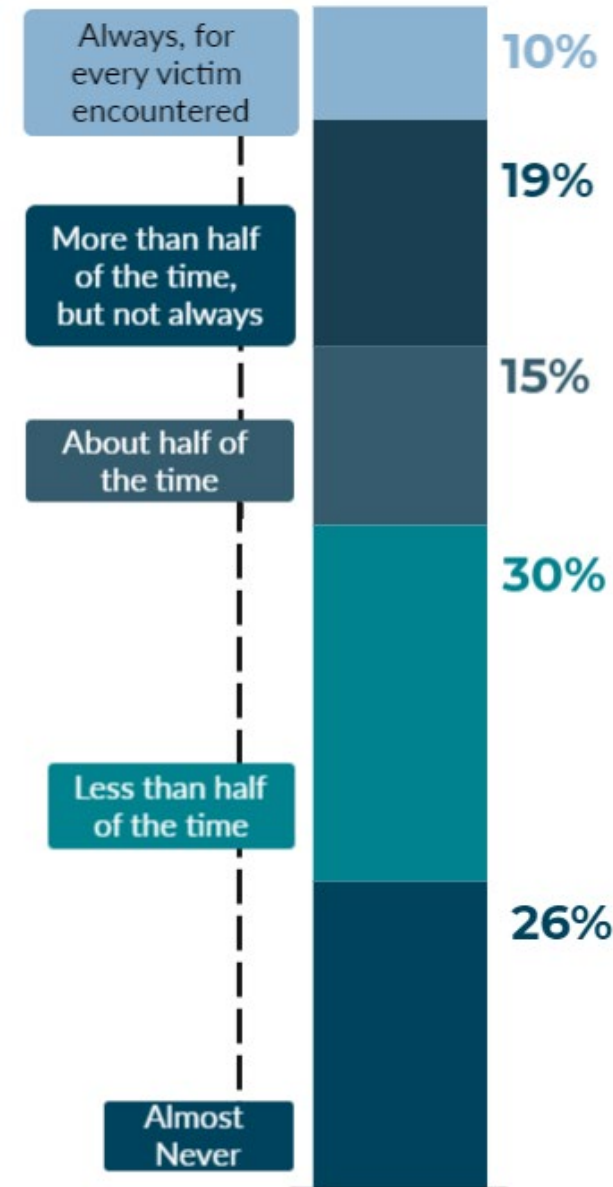


How do officers provide information about the VAP directly to the victim?

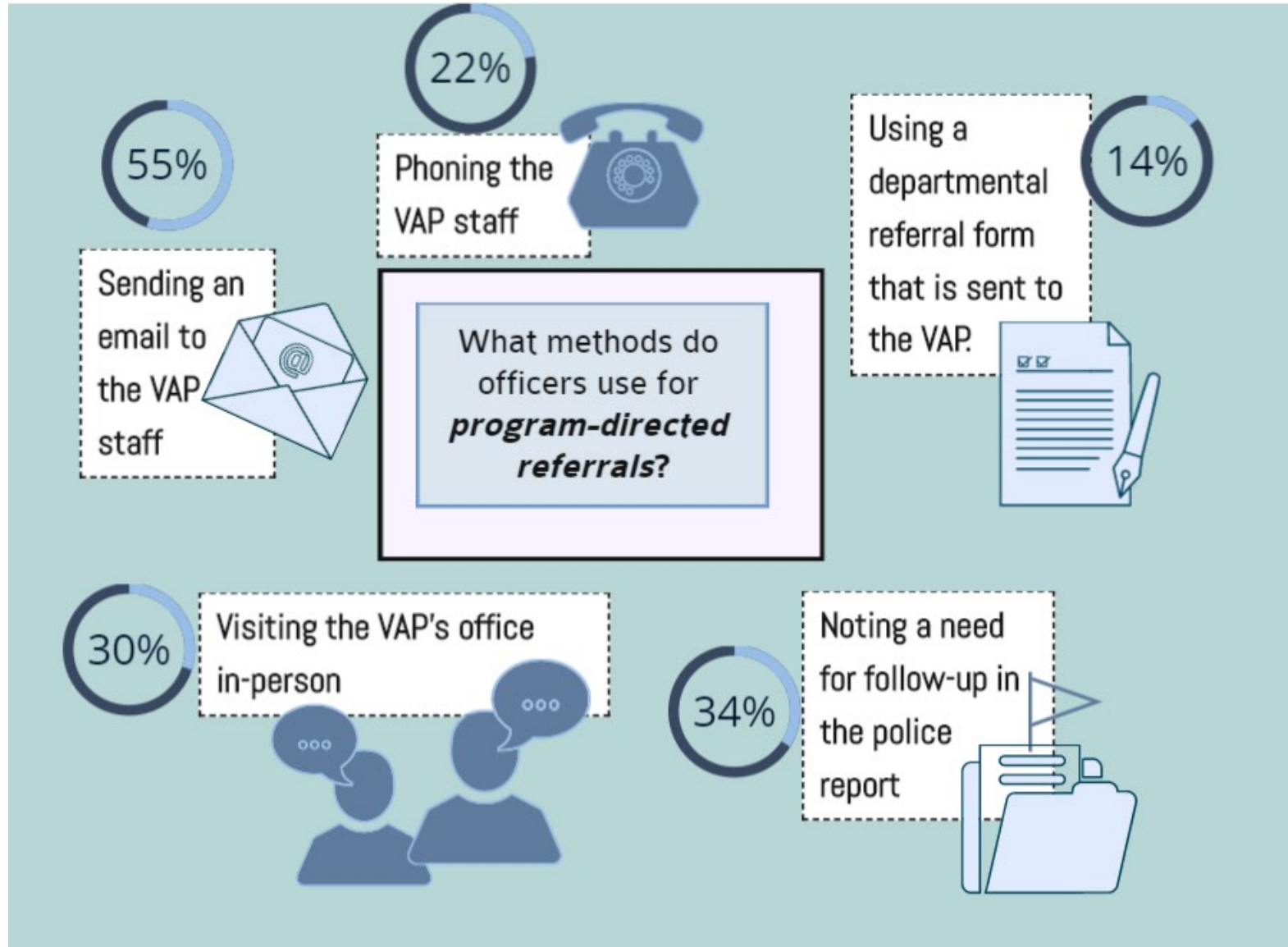


How often do officers provide information about the victim to VAP staff?

Under one third of officers provide information about the victim directly to the VAP for more than half of the victims they encounter. The rest of officers do this less regularly.



How do officers provide information about the victim to VAP staff?



Why do officers sometimes choose NOT to connect a victim to the VAP?



Some officers indicated they do not refer to the VAP because they typically:

- Only refer victims of certain types of crime (e.g., domestic violence)
- Do not refer to the VAP for some types of crime (e.g., non-violent or property crime)
- Do not refer if the situation does not seem to apply
- Do not refer if they can handle the situation on their own
- Do not refer if the victim already has assistance
- Do not refer if the victim is uncooperative, shows no interest in getting help, or has ignored previous information
- Do not refer because they know the VAP will follow up via police reports to reach out to victims

APPENDICES

APPENDIX K: MUNDELEIN POLICE QUESTIONNAIRE REPORT

Police Utilization of the Mundelein Police Department Victim Assistance Program (VAP)

A Report Provided by the Victim Assistance Program Evaluation Team

Funded by the Illinois Criminal Justice Information Authority (ICJIA)

June 2020

Background

- As part of an evaluability assessment of Victim Assistance Programs (VAP) located within police departments, we examined police officers' perspectives via questionnaire. This was part of a larger study and complemented interviews done with officers and VAP staff.
- To generate a wider sample of police perspectives on the victim assistance program, a questionnaire was administered to 42 sworn officers of the Mundelein Police Department in January 2020. The questionnaire asked about police officer's (1) awareness, (2) utilization, and (3) opinions of the victim assistance program. The following is a summary of these results.
- When relevant, tables in the current report display results in the order in which the questions were asked (e.g., 100% of the time, more than half of the time, etc.). Otherwise, table output is organized by frequency of responses, with the highest frequency response options described first. In order to preserve participant confidentiality, groups of two or fewer respondents have been combined. Additionally, as participants were given the option to either skip an item or select "I prefer not to respond," the total participant size shifts slightly across the questionnaire.

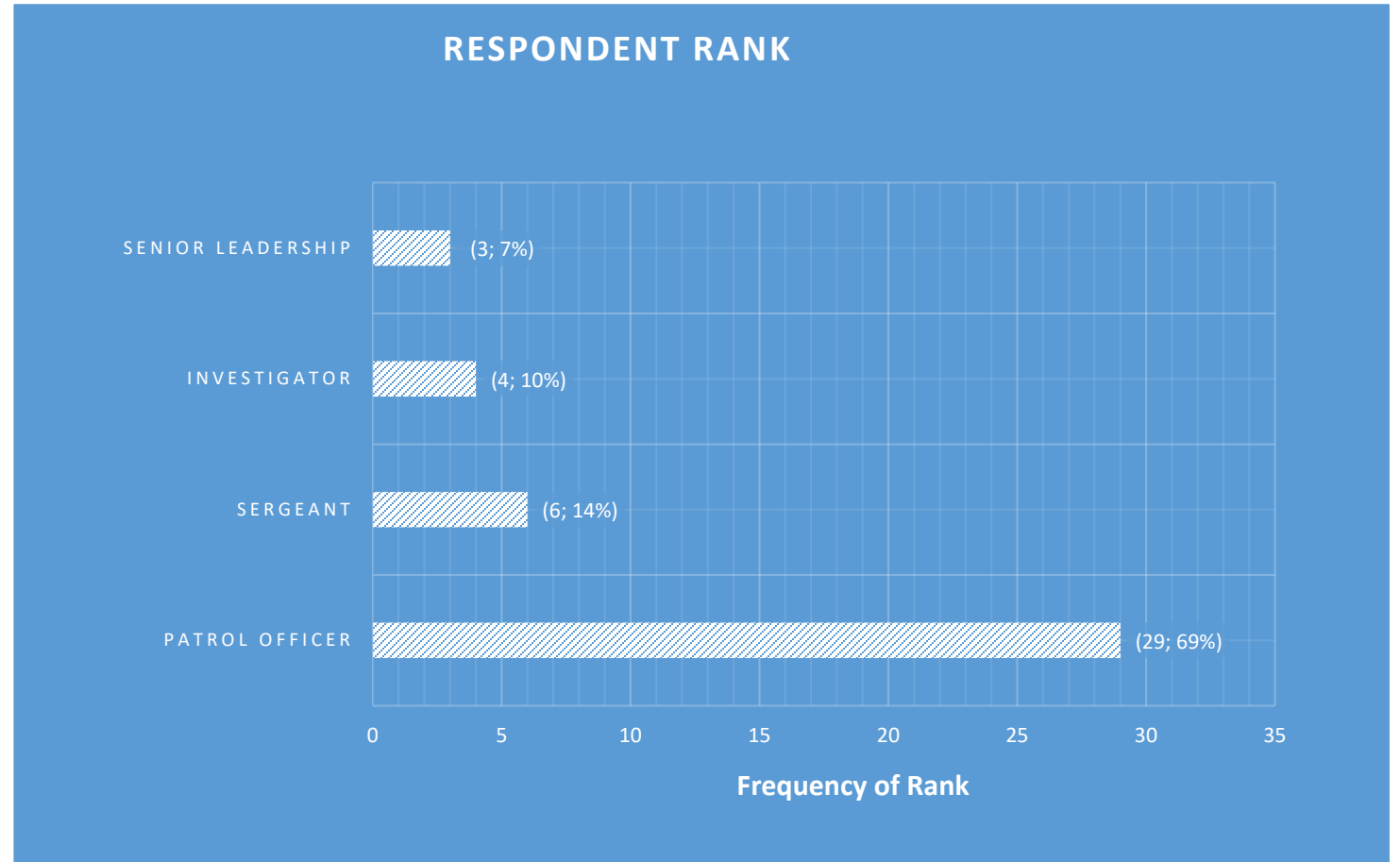
Key Questions

- Who took the survey?
- How familiar are officers with the VAP?
- How were police officers introduced to the VAP?
- How familiar were officers with specific VAP services?
- How often are officers connecting victims with the VAP?
- How often and how do officers provide information about the VAP directly to the victim?
- How often and how do officers provide information about the victim to VAP staff?
- Why do officers sometimes choose NOT to connect a victim to the VAP?

Who took the survey?

Rank

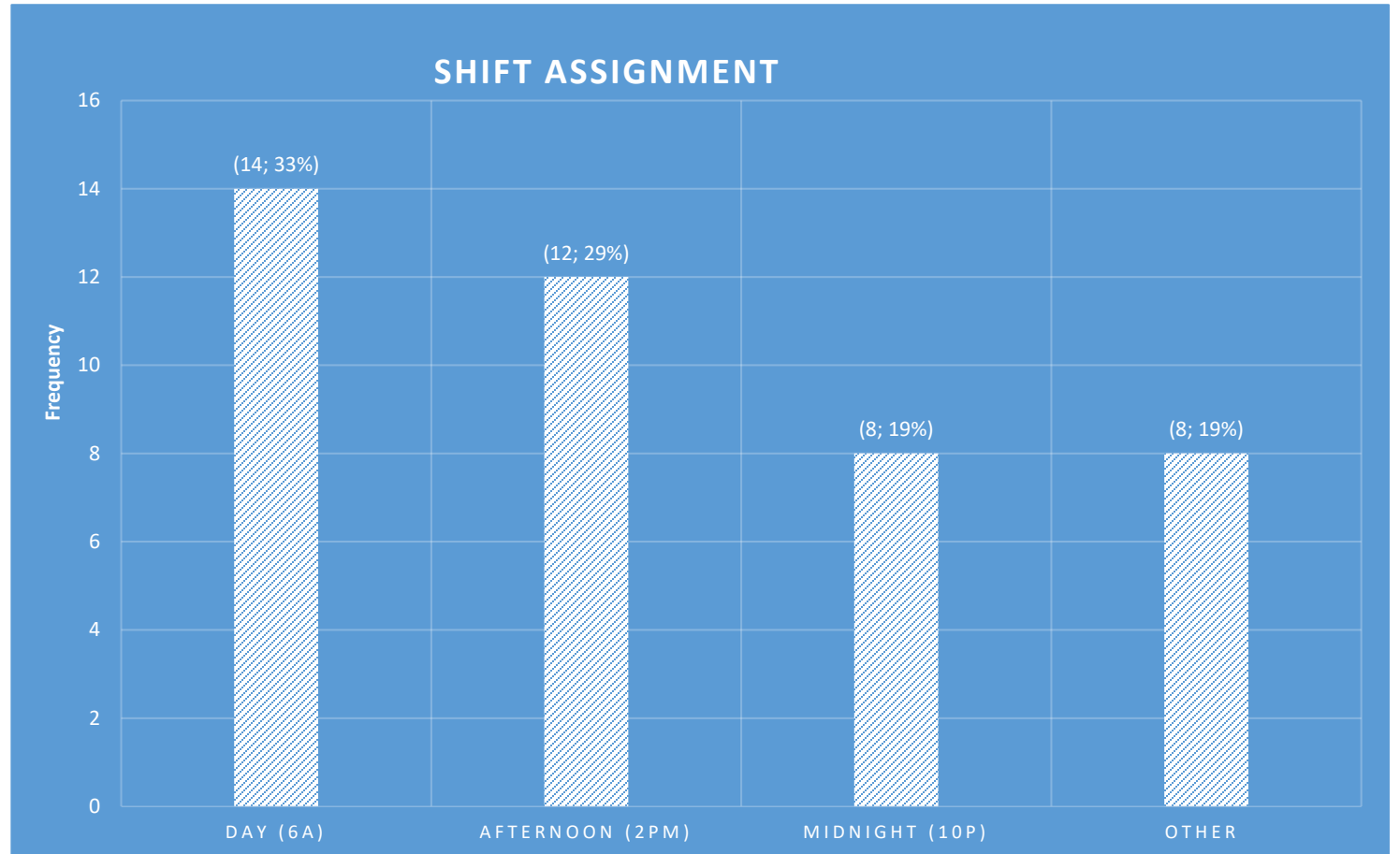
Most respondents were patrol. Some senior leadership, investigators, and sergeants also completed the survey.



Who took the survey?

Shift

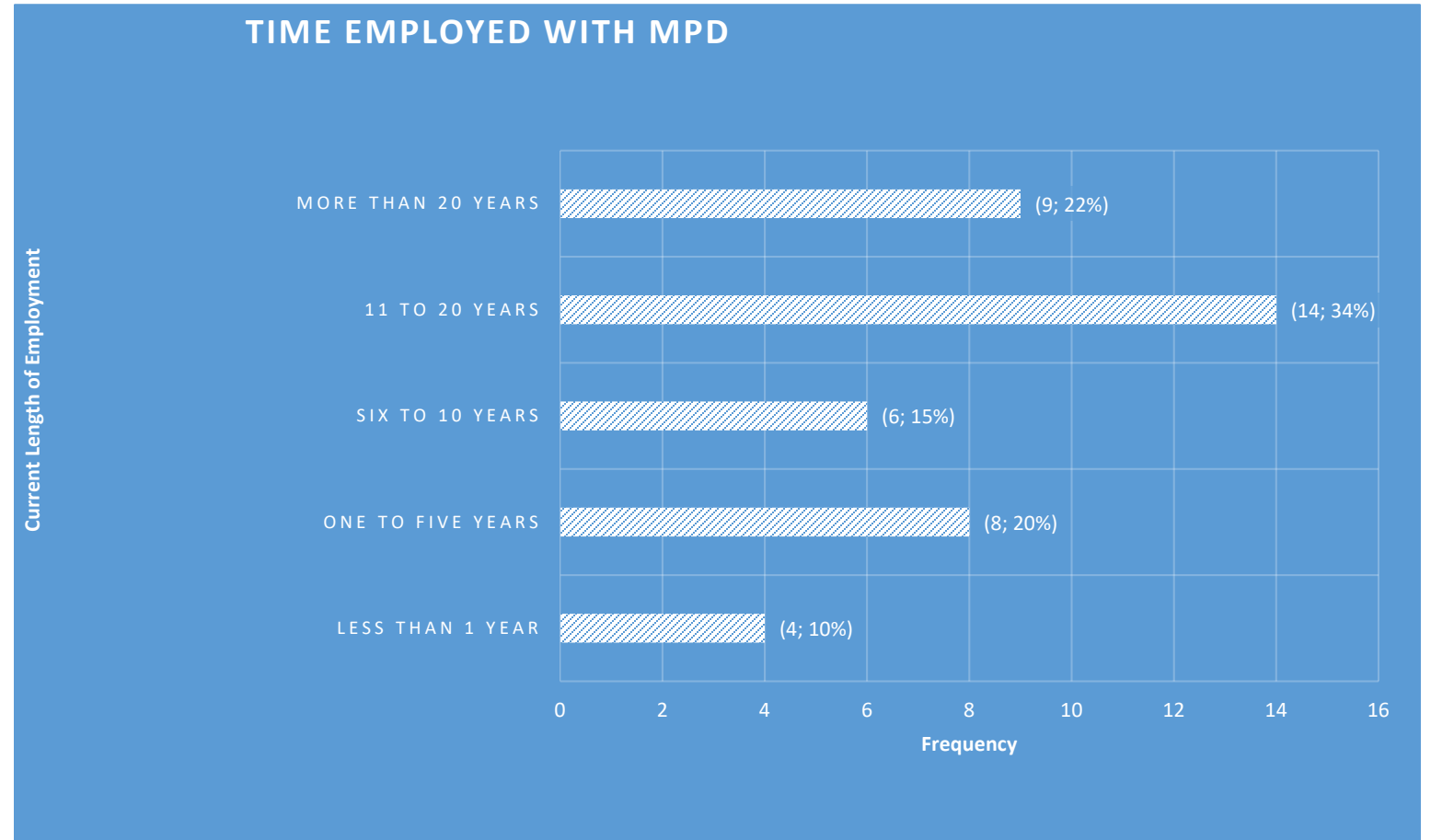
Most respondents work the day or afternoon shift, though many respondents from the midnight and other shifts completed the survey, too.



Who took the survey?

Tenure

Half of the respondents have been employed with Mundelein PD for 11 years or more. The other half have been employed for 10 years or less.



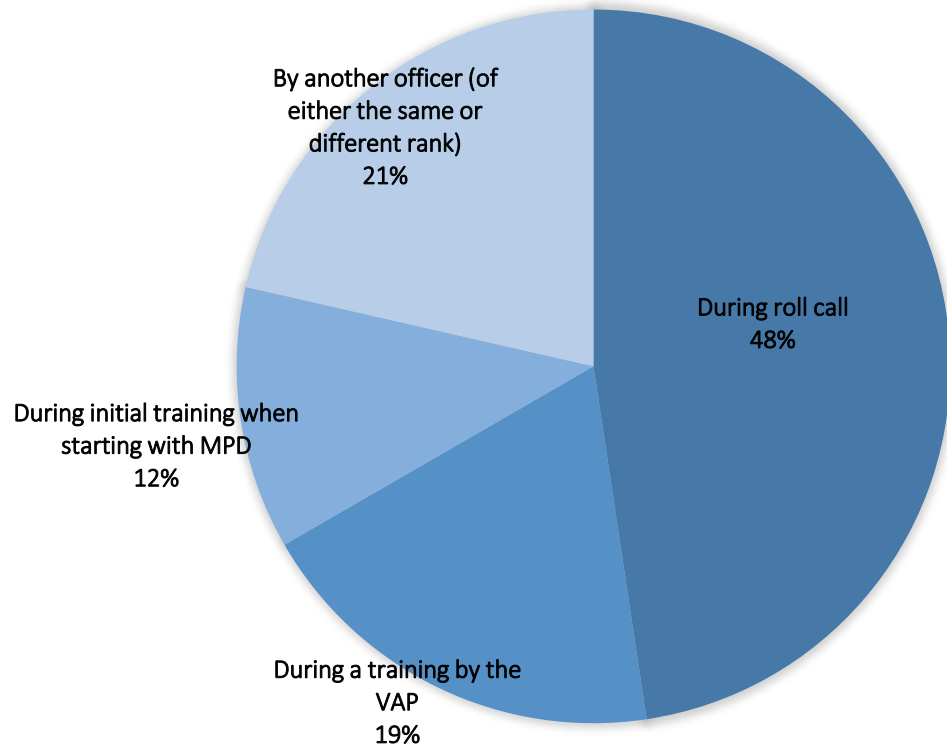
How well do police officers know the VAP?



How were officers introduced to the VAP?

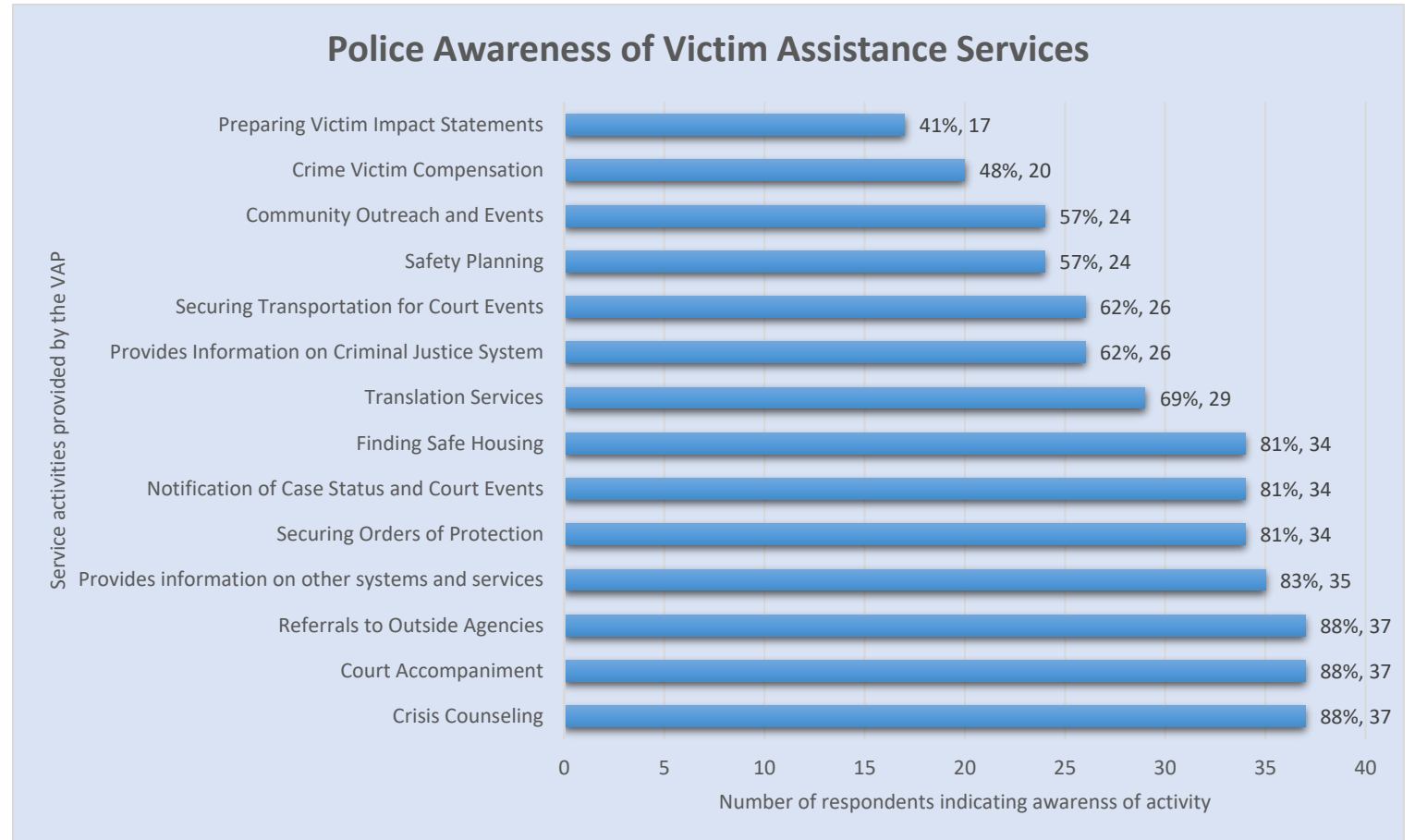
Half of the respondents first learned of the program during roll call. The rest of the respondents learned about the program from another officer, during a training provided by the VAP, or during initial training when they were hired with MPD.

HOW WERE POLICE INTRODUCED TO THE VAP?



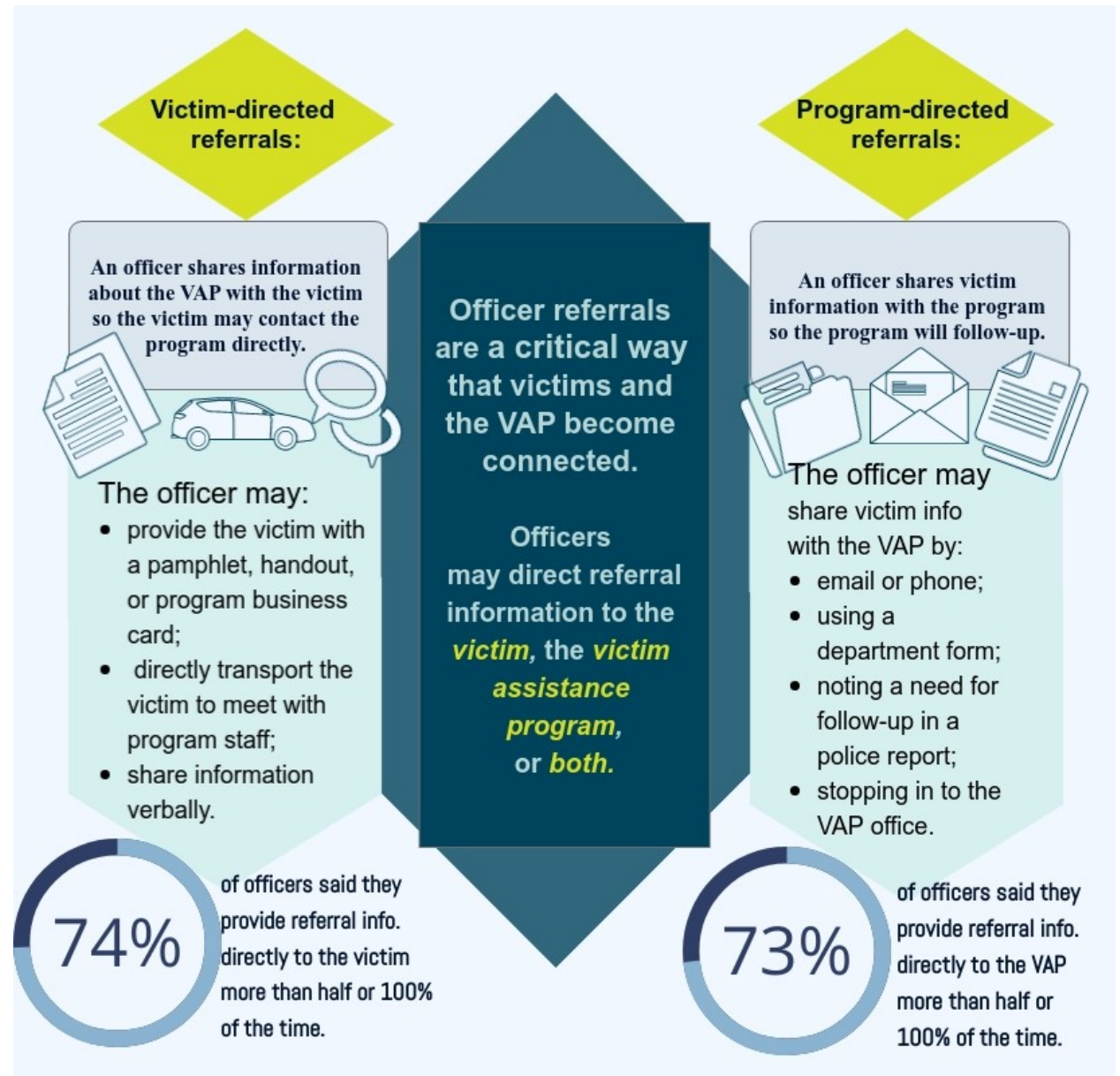
How familiar were officers with specific VAP services?

Respondents indicated that the program provides a wide array of services, most often mentioning referrals to outside agencies, court accompaniment, and crisis counseling.



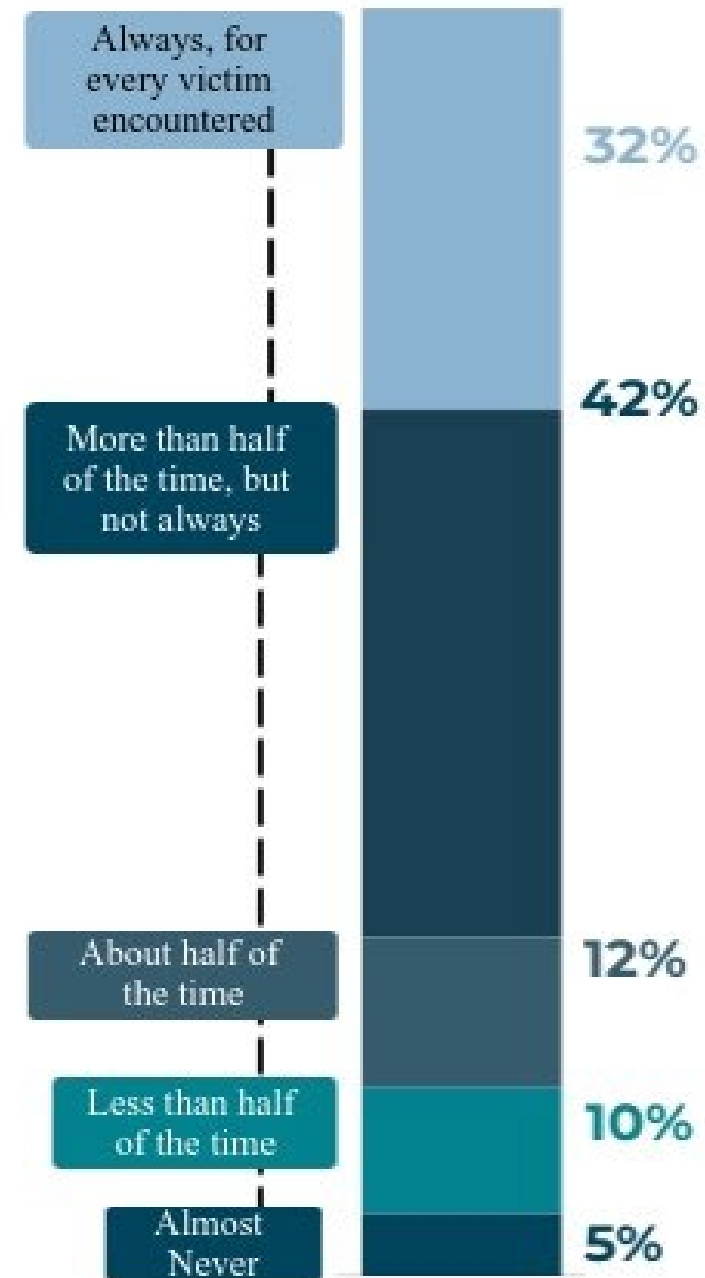
How often are officers connecting victims with the VAP?

Officers connect victims to the program by providing information about the program directly to victims, or by providing information about the victim to program staff so program staff can contact the victim.

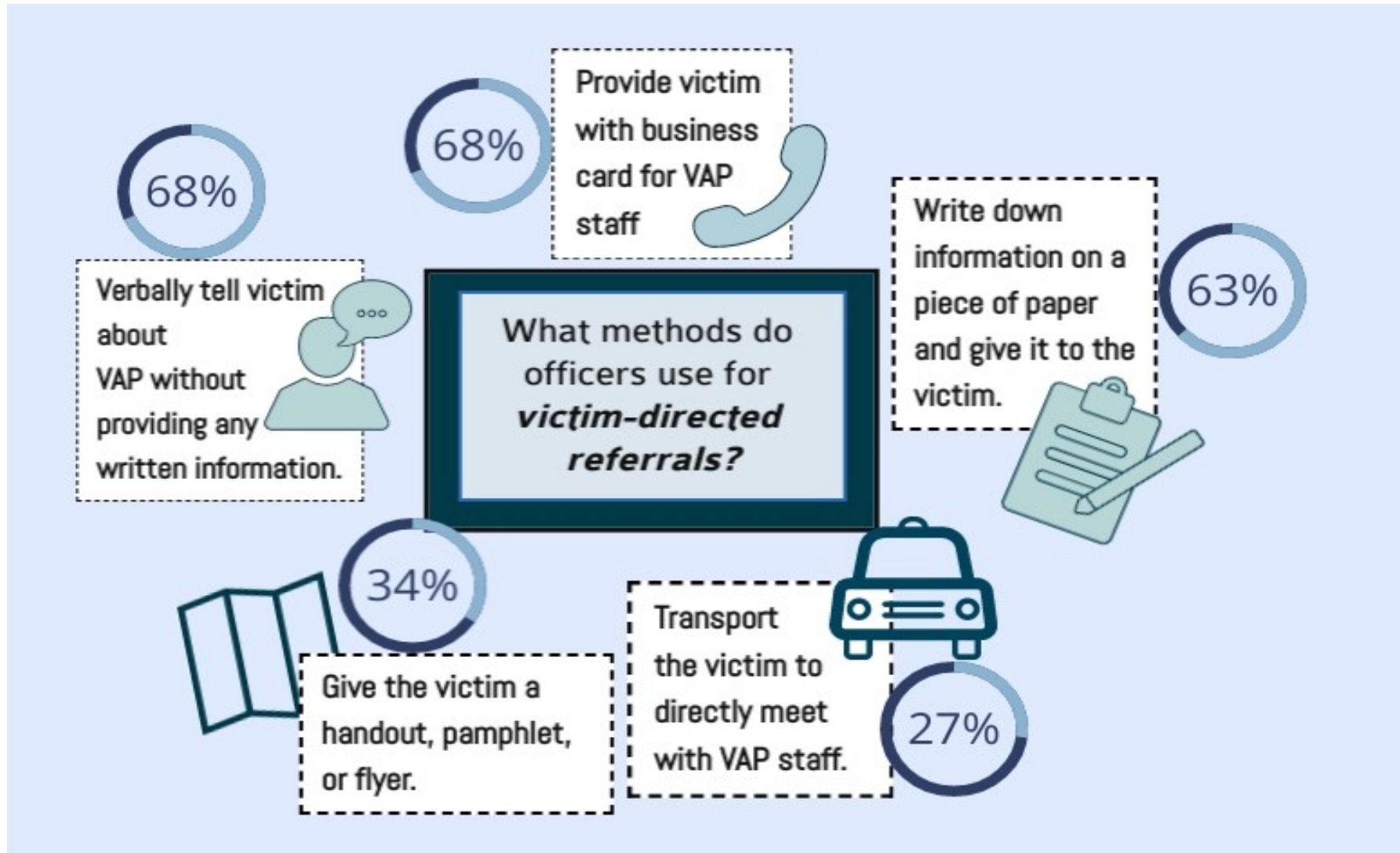


How often do officers provide information about the VAP directly to the victim?

Officers frequently provide information about the VAP to the victim. Only about one-quarter of officers say they do this about half the time or less.

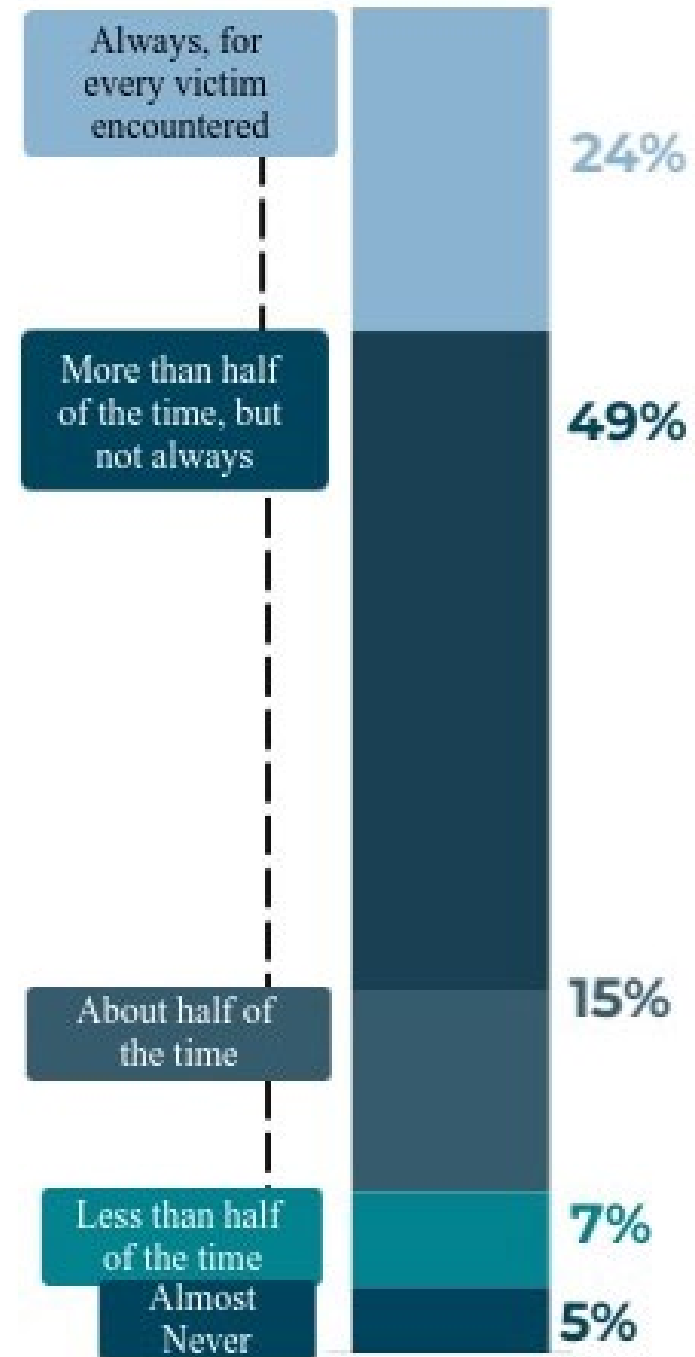


How do officers provide information about the VAP directly to the victim?

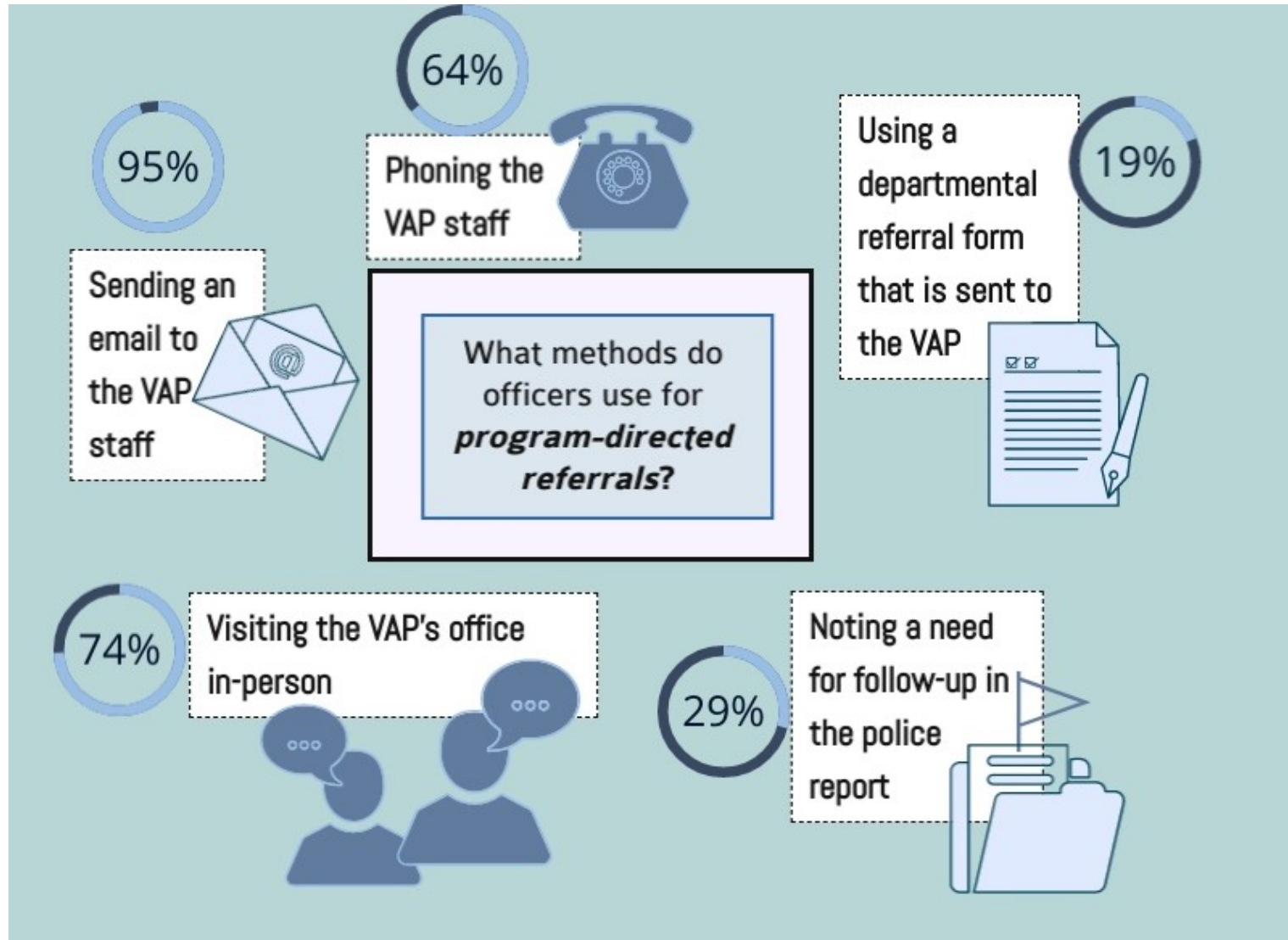


How often do officers provide information about the victim to VAP staff?

Officers frequently provide information about the victim to the VAP. Only about one-quarter of officers say they do this about half the time or less.




How do officers provide information about the victim to VAP staff?



Why do officers sometimes choose NOT to connect a victim to the VAP?

Some officers indicated they do not refer to the VAP because they:

- Have limited contact with victims, so they rarely have an opportunity to refer
- Typically only refer victims of certain types of crime (e.g., domestic violence)
- Typically do not refer to the VAP for some types of crime (e.g., property crime)
- May not refer if a victim was already offered services and declined



Why don't police
refer 100% of the
time?

APPENDICES

APPENDIX L: WHEELING POLICE QUESTIONNAIRE REPORT

Police Utilization of the Wheeling Police Department Victim Assistance Program (VAP)

A Report Provided by the Victim Assistance Program Evaluation Team

Funded by the Illinois Criminal Justice Information Authority (ICJIA)

June 2020

Background

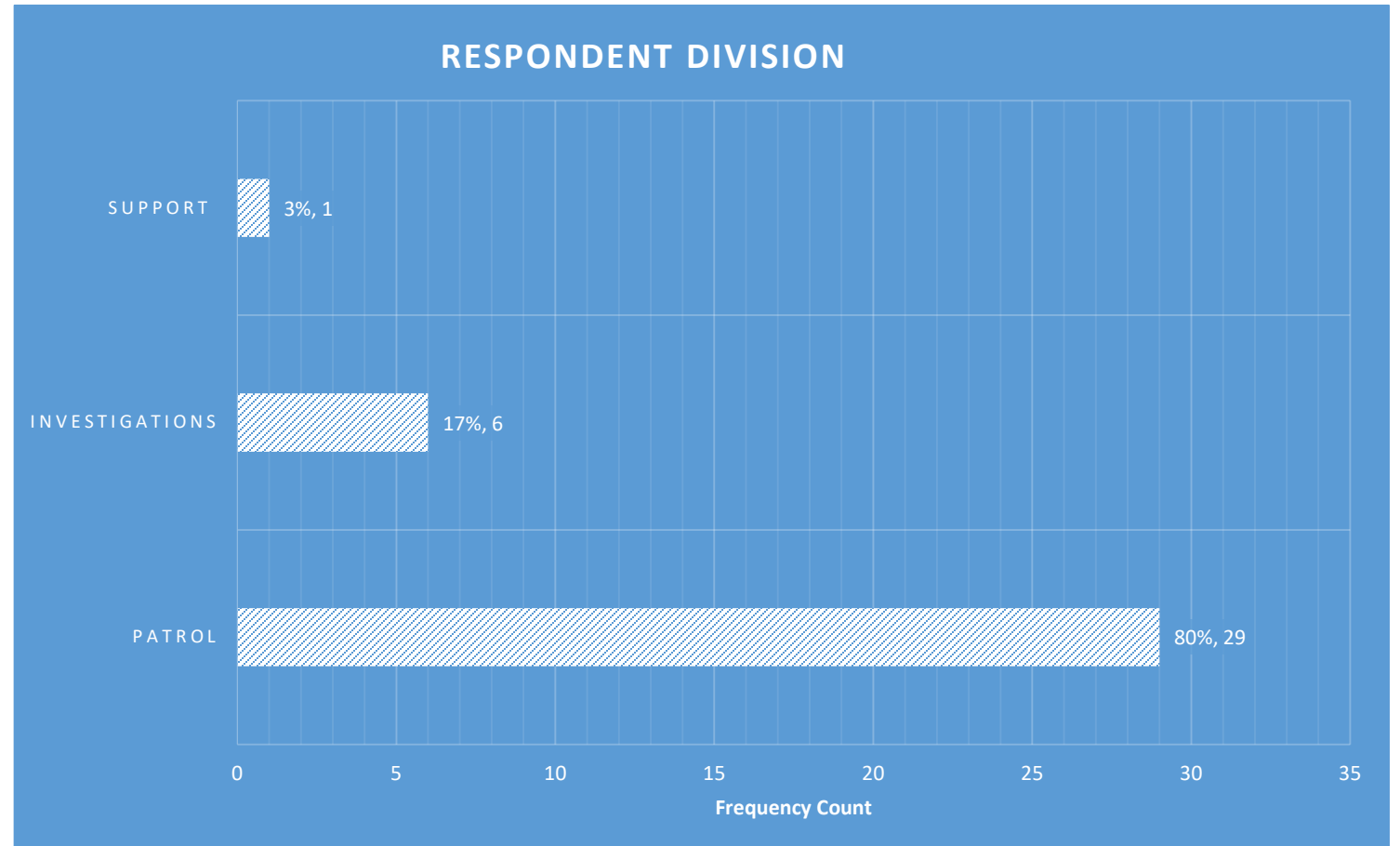
- As part of an evaluability assessment of Victim Assistance Programs (VAP) located within police departments, we examined police officers' perspectives via questionnaire. This was part of a larger study and complemented interviews done with officers and VAP staff.
- To generate a wider sample of police perspectives on the victim assistance program, a questionnaire was administered to 37 sworn officers of the Wheeling Police Department in January 2020. The questionnaire asked about police officer's (1) awareness, (2) utilization, and (3) opinions of the victim assistance program. The following is a summary of these results.
- When relevant, tables in the current report display results in the order in which the questions were asked (e.g., 100% of the time, more than half of the time, etc.). Otherwise, table output is organized by frequency of responses, with the highest frequency response options described first. In order to preserve participant confidentiality, groups of two or fewer respondents have been combined. Additionally, as participants were given the option to either skip an item or select "I prefer not to respond," the total participant size shifts slightly across the questionnaire.

Key Questions

- Who took the survey?
- How familiar are officers with the VAP?
- How were police officers introduced to the VAP?
- How familiar were officers with specific VAP services?
- How often are officers connecting victims with the VAP?
- How often and how do officers provide information about the VAP directly to the victim?
- How often and how do officers provide information about the victim to VAP staff?
- Why do officers sometimes choose NOT to connect a victim to the VAP?

Who took the survey?

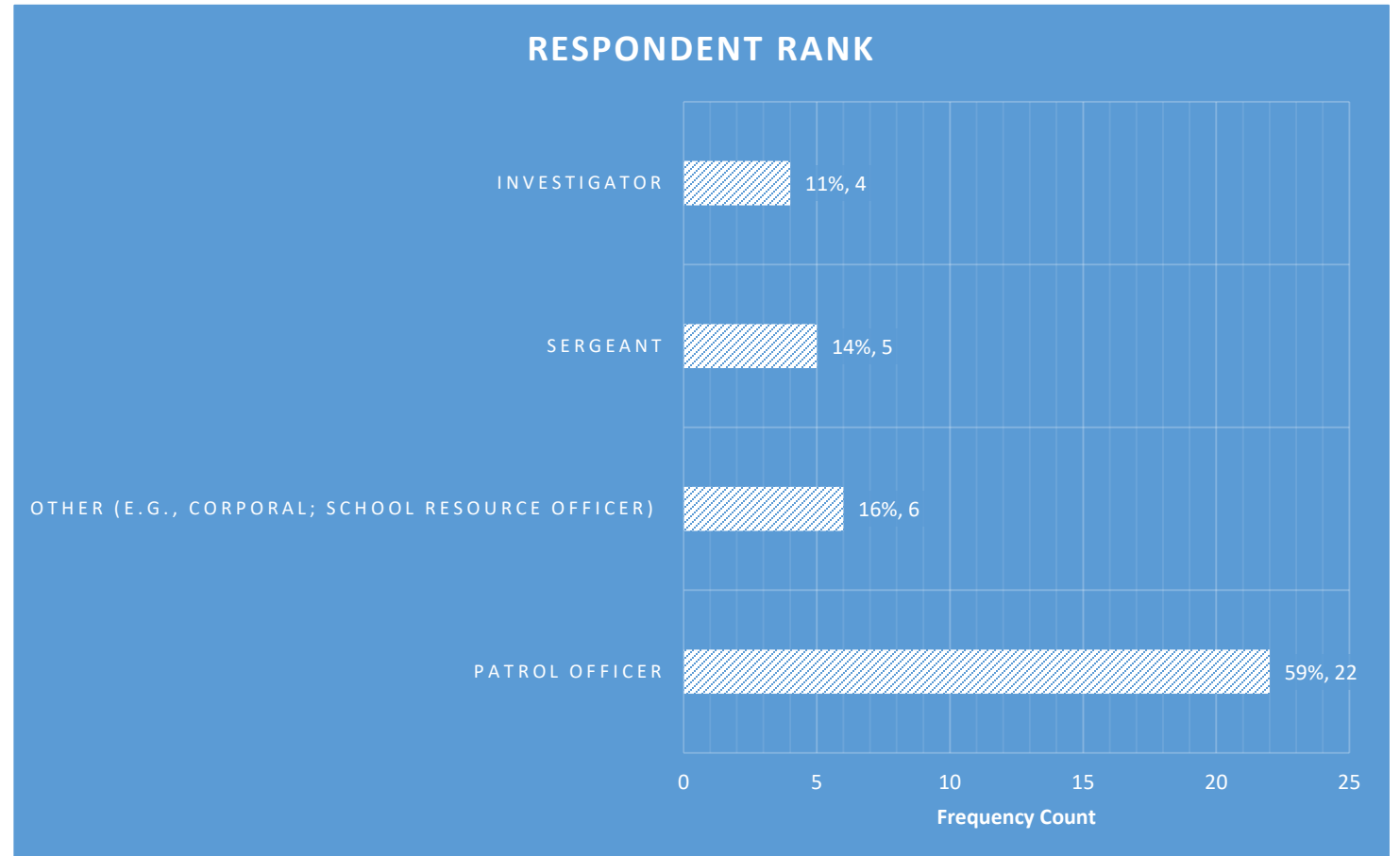
Division
Most respondents were in the Patrol Division. Other respondents were in Investigations and Support.



Who took the survey?

Rank

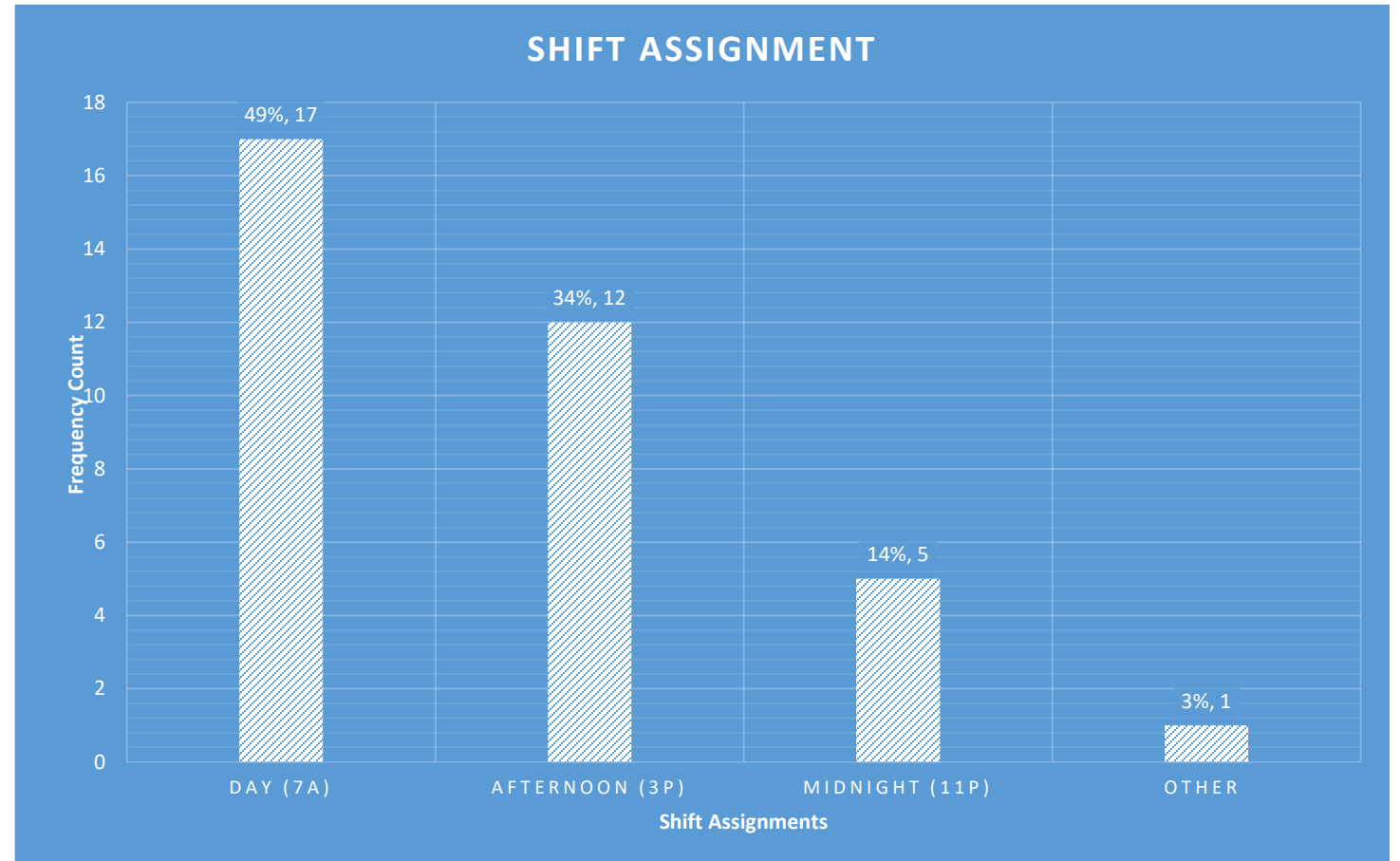
Most respondents were patrol officers. Some investigators and sergeants also completed the survey.



Who took the survey?

Shift

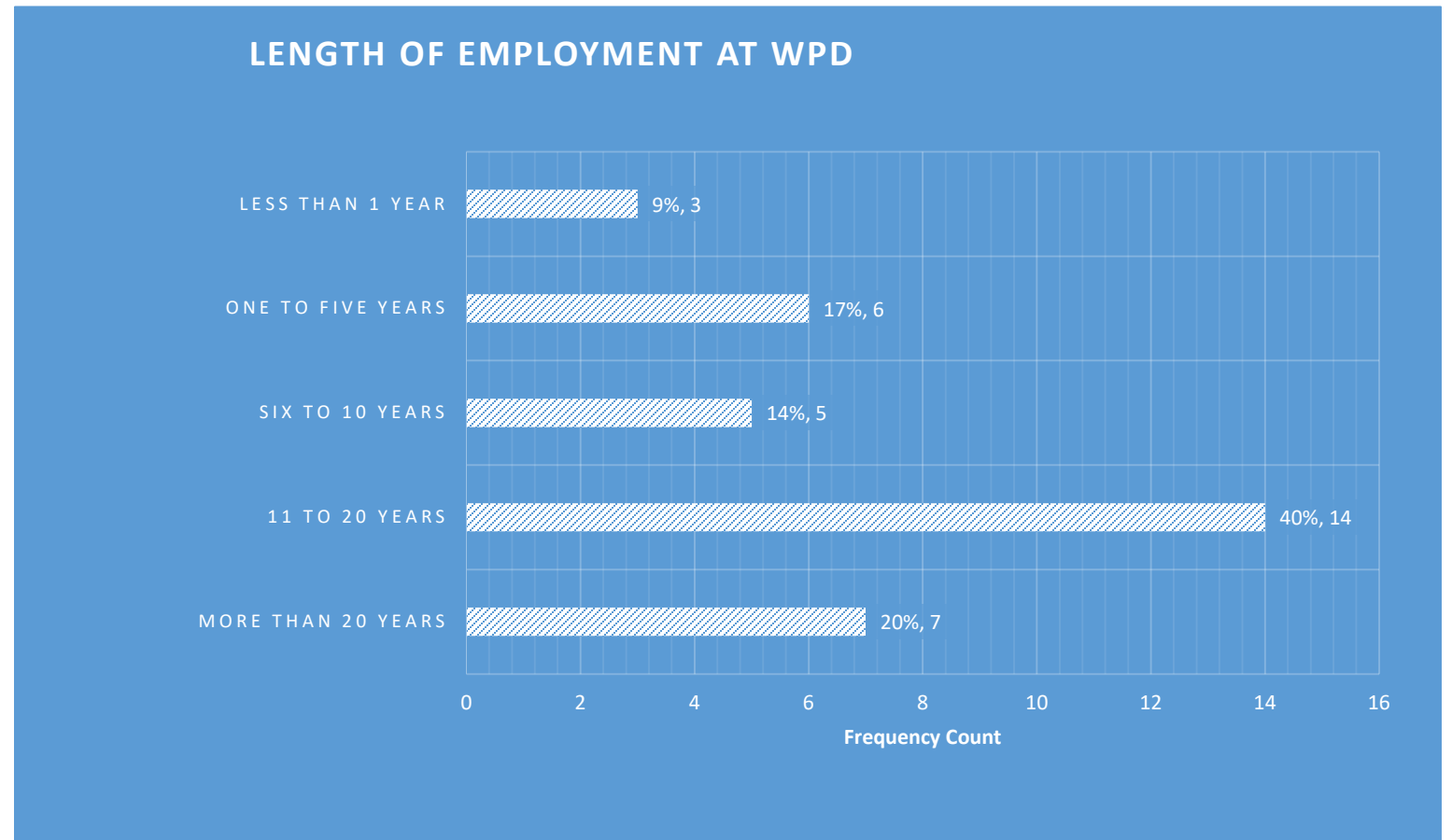
Most respondents work the day or afternoon shift, though several respondents from the midnight shift completed the survey, too.



Who took the survey?

Tenure

Over half of the respondents have been employed with Wheeling PD for 11 years or more. Less than half have been employed for 10 years or less.



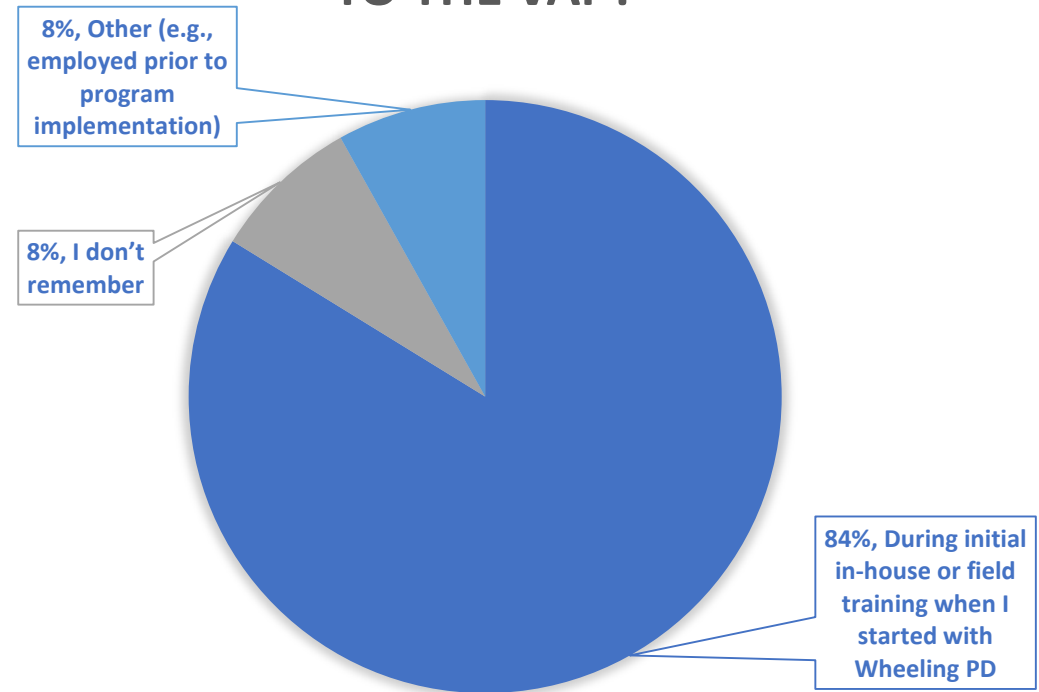
How well do police officers know the VAP?



How were officers introduced to the VAP?

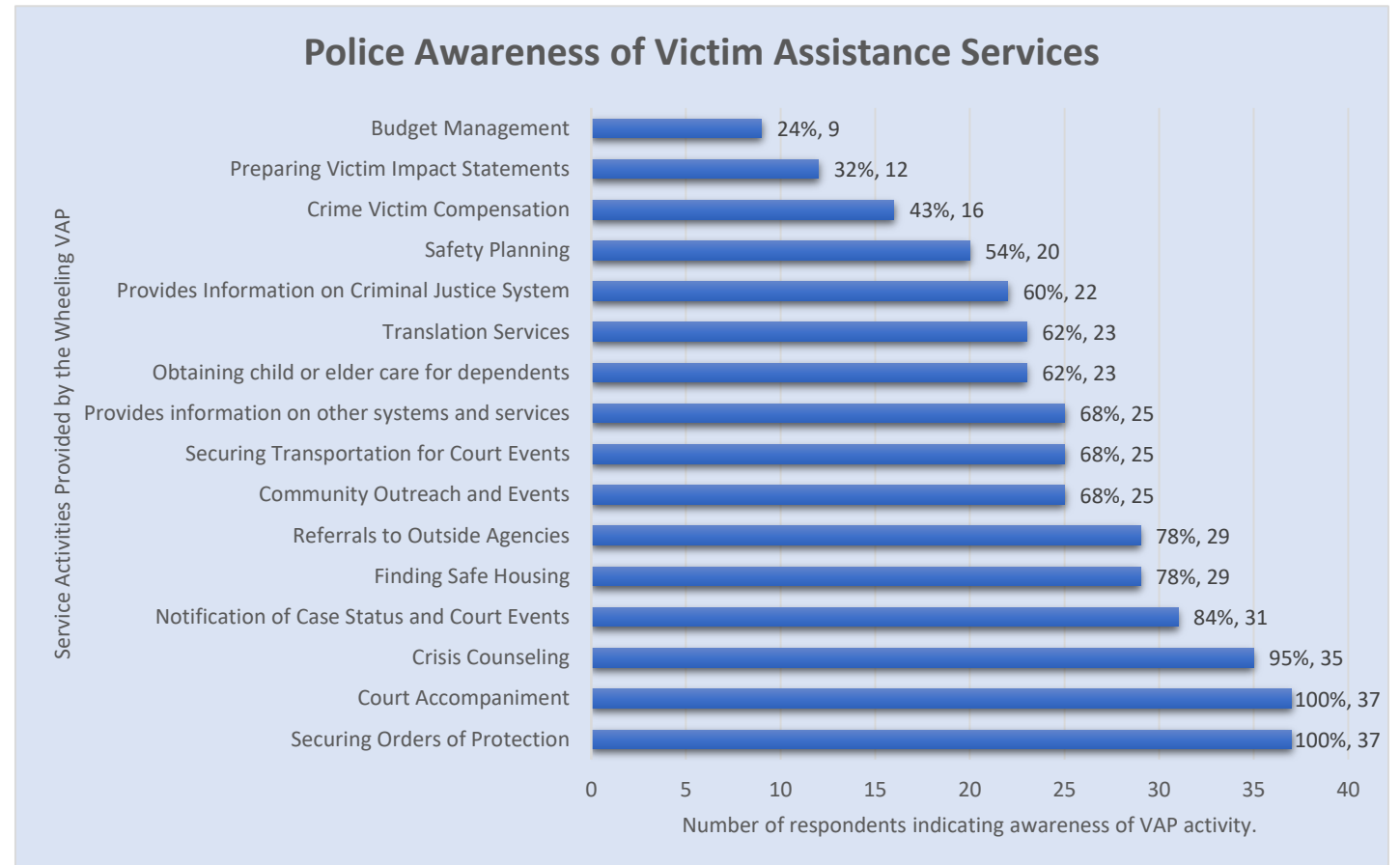
The vast majority of respondents first learned of the VAP during training when they started at the WPD. The rest of the respondents learned about it from another officer or during roll call, were employed prior to the start of the program, or couldn't remember how they learned about it.

HOW WERE POLICE FIRST INTRODUCED TO THE VAP?



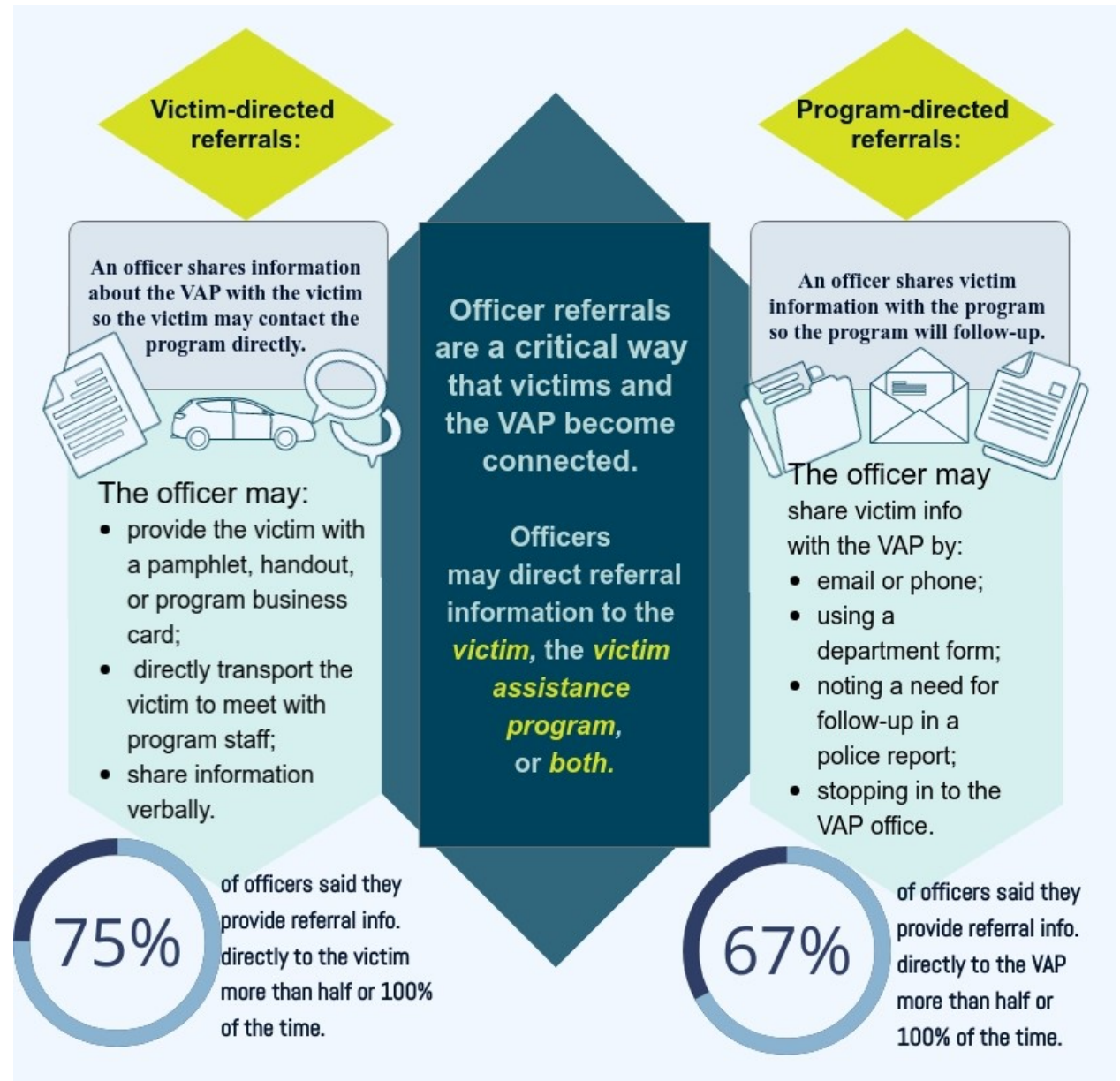
How familiar were officers with specific VAP services?

Respondents indicated that the program provides a wide array of services, most often mentioning securing orders of protection, court accompaniment and crisis counseling.



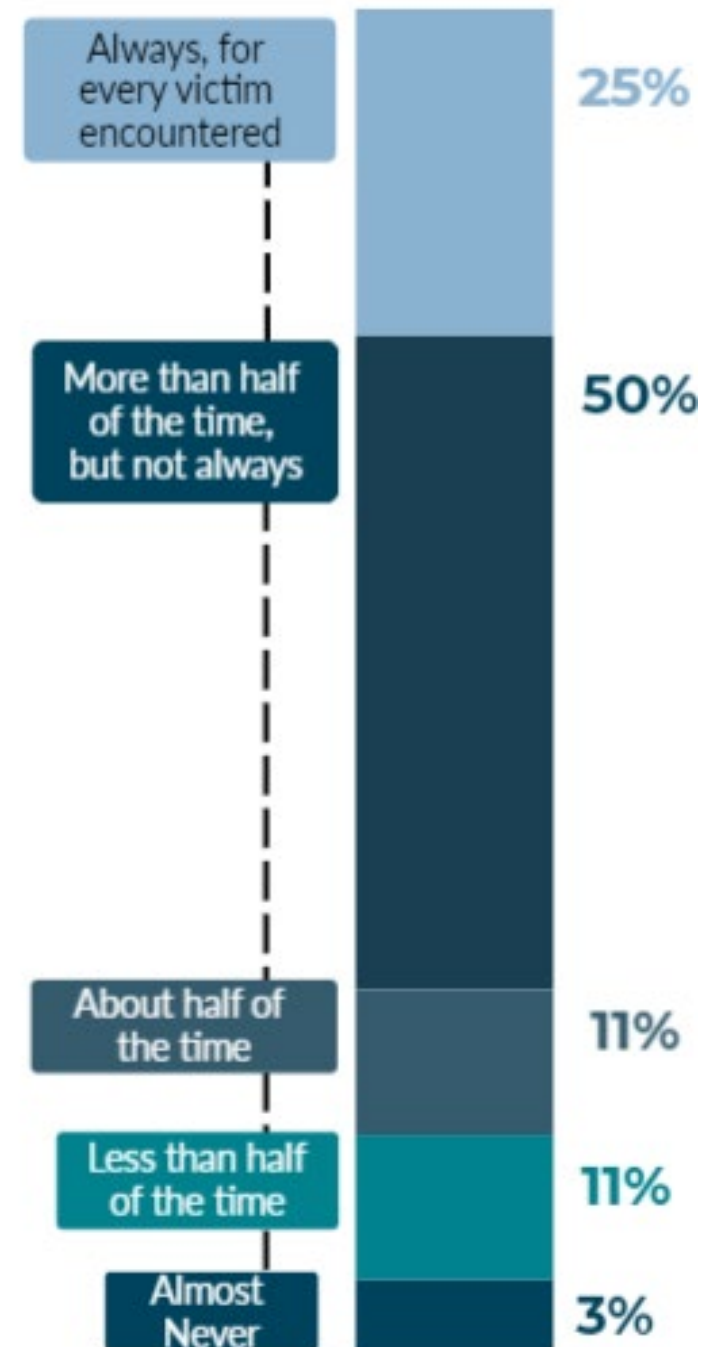
How often are officers connecting victims with the VAP?

Officers connect victims to the program by providing information about the program directly to victims, or by providing information about the victim directly to program staff so program staff can contact the victim.

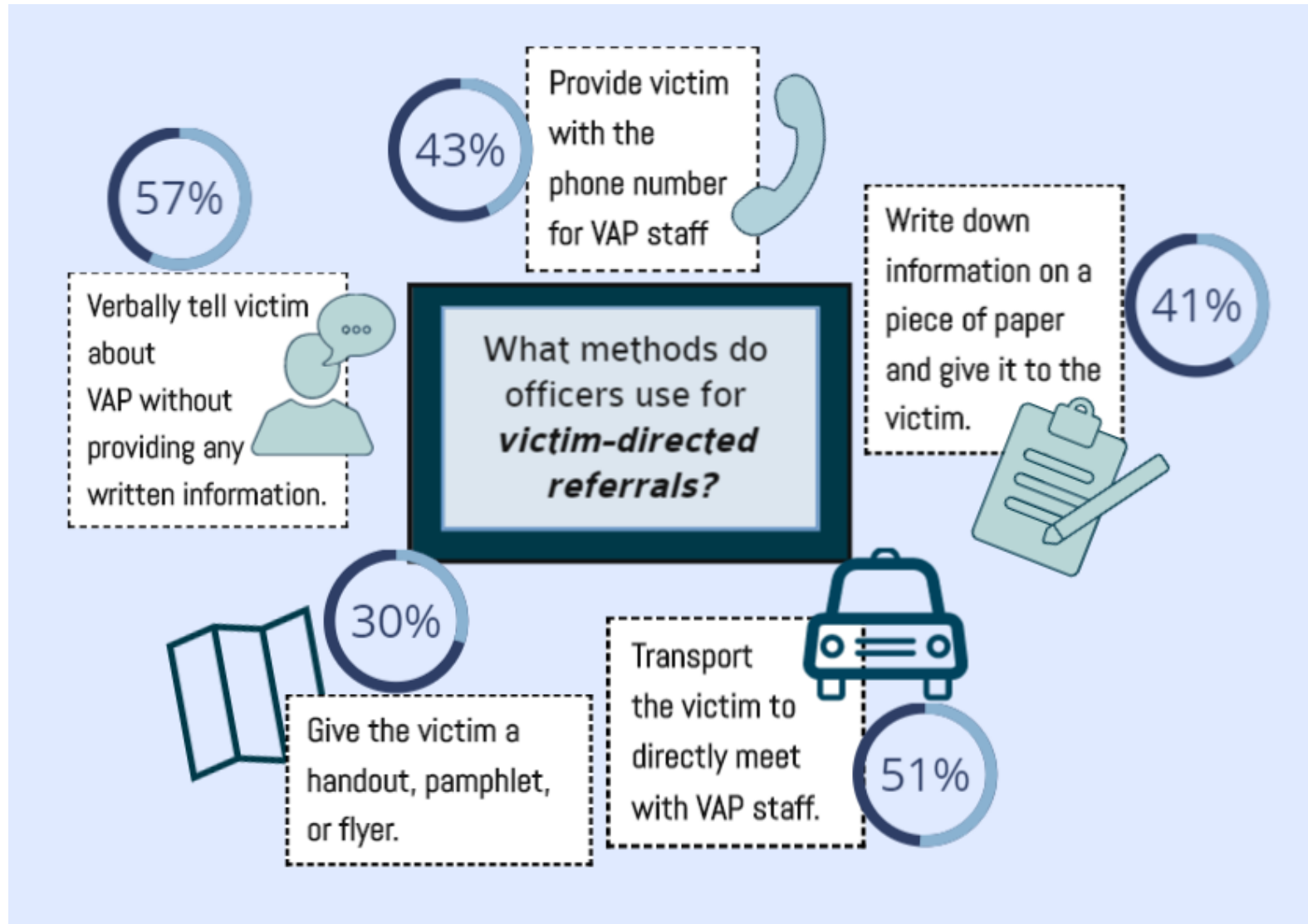


How often do officers provide information about the VAP directly to the victim?

Officers frequently provide information about the VAP directly to the victim. Fewer than one-third of officers say they do this about half the time or less.

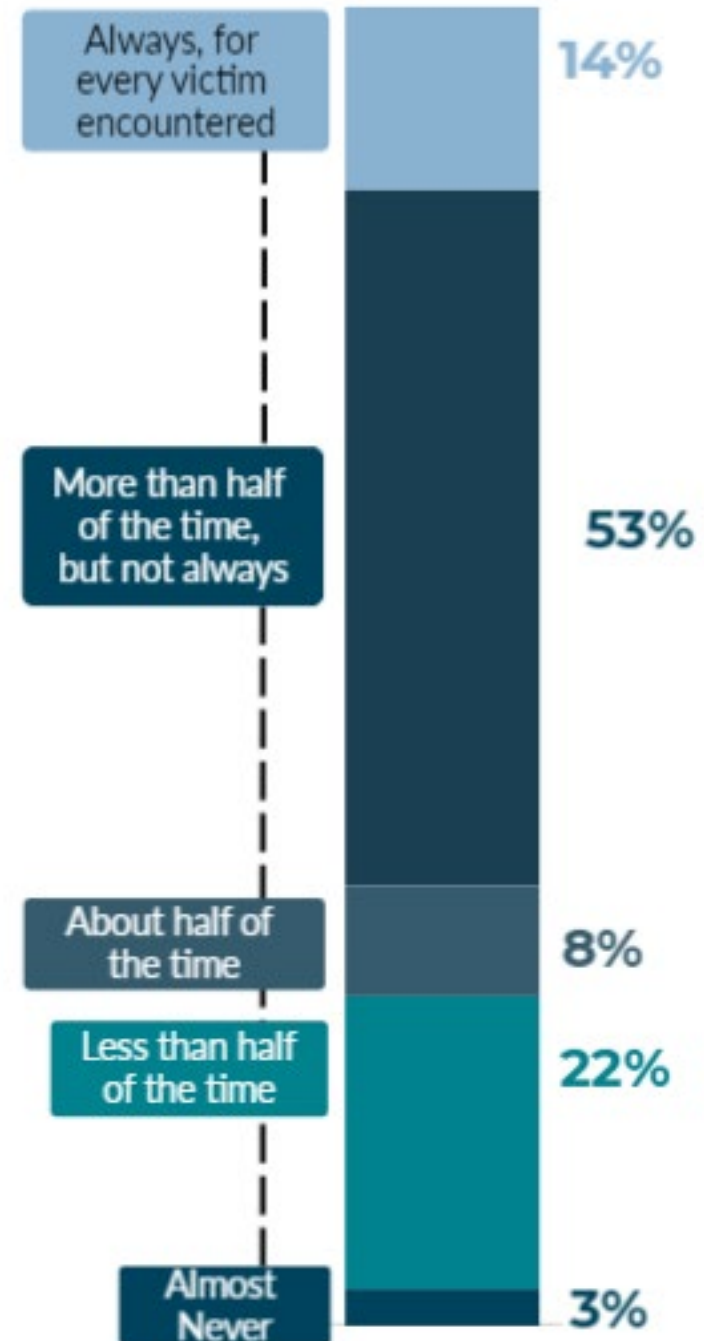


How do officers provide information about the VAP directly to the victim?

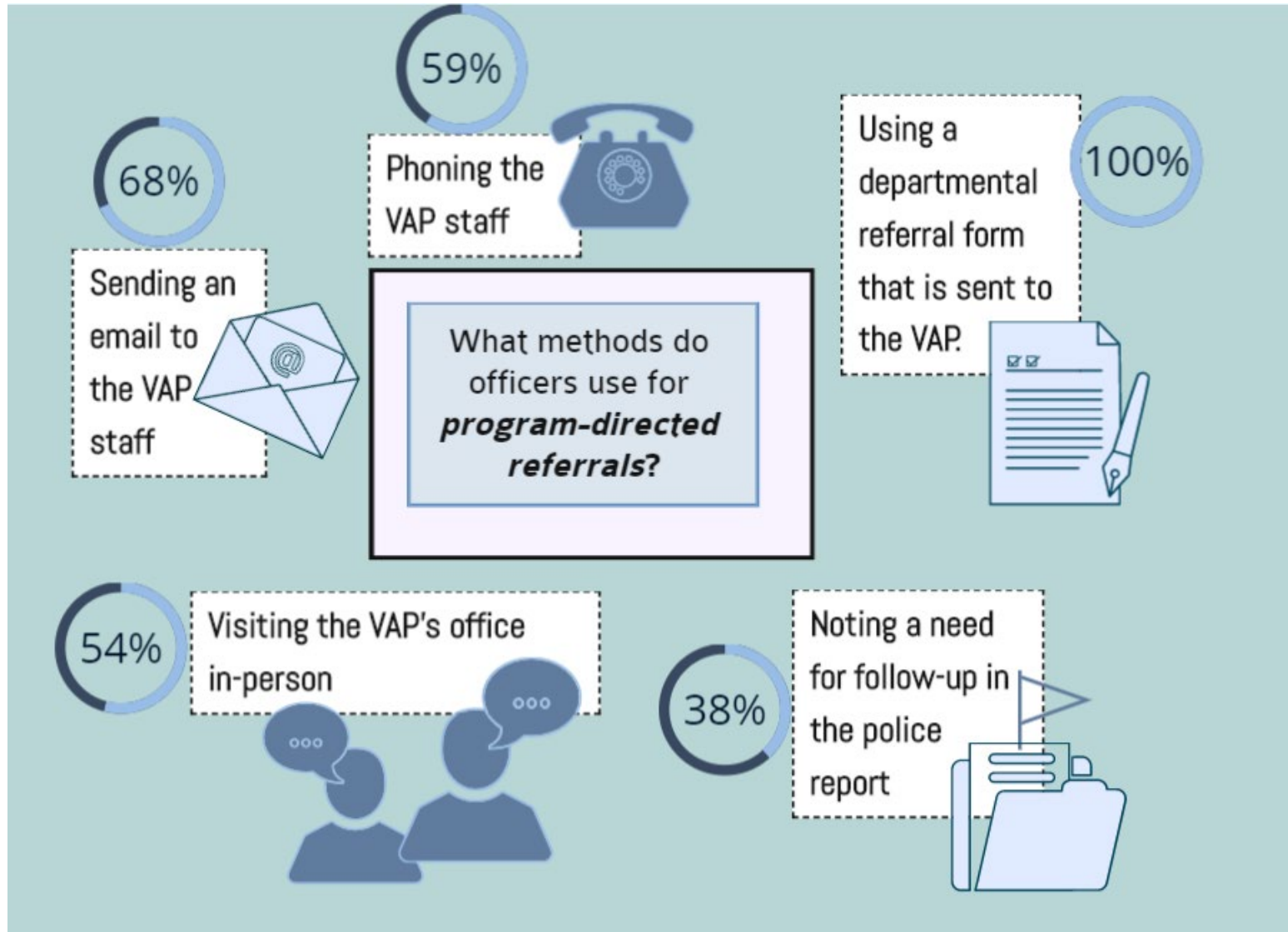


How often do officers provide information about the victim to VAP staff?

Two thirds of officers provide information on about the victim directly to the VAP for more than half of the victims they encounter. And one third of officers say they do this about half the time or less.



How do officers provide information about the victim to VAP staff?



Why do officers sometimes choose NOT to connect a victim to the VAP?



Some officers indicated they do not refer to the VAP because they typically:

- Do not refer to the VAP for some types of crime (e.g., property crime)
- Do not refer if, “based on the incident,” the program can’t provide relevant assistance
- Do not refer if the victim has already been in contact with the program
- Do not refer because they know the VAP will follow up via police reports to reach out to victims



Illinois Criminal Justice Information Authority

60 E. Van Buren Street, Suite 650
Chicago, Illinois 60605
Phone: (312) 793-8550
Fax: (312) 793-8422
TDD: (312) 793-4170

www.icjia.illinois.gov