



Final Report

Massachusetts Office for Victim Assistance: 2014 Needs Assessment

June 2015

Submitted to:
Massachusetts Office for Victim Assistance

Submitted by:
ICF Incorporated
9300 Lee Highway
Fairfax, VA 22031



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The Massachusetts Office for Victim Assistance (MOVA) and the Victim and Witness Assistance Board (VWAB) sponsored the following needs assessment. The authors would like to thank MOVA staff and members of the VWAB for their ongoing guidance, support, and commitment to the project. In addition, we would like to extend a special thank you to the many service providers and crime victims who participated in this needs assessment and provided critical feedback to help inform victim services in Massachusetts.



Table of Contents

1.	Introduction	1
2.	Methodology	1
2.1	Survey of Service Providers	1
2.1.1	Identifying Service Providers	1
2.1.2	Instrument Development.....	3
2.1.3	Data Analysis.....	3
2.2	Service Provider Interviews.....	3
2.2.1	Recruitment and Outreach.....	4
2.2.2	Instrument Development.....	4
2.2.3	Data Analysis.....	5
2.3	Crime Victim Data Collection.....	5
2.3.1	Recruitment and Outreach.....	5
2.3.2	Instrument Development.....	6
2.3.3	Data Analysis.....	6
3.	Findings	6
3.1	Survey of Service Providers	6
3.1.1	Background of Respondents	7
3.1.2	Service Delivery	10
3.1.3	Funding Assistance	16
3.1.4	Training and Technical Assistance	21
3.1.5	Outreach and Awareness	23
3.1.6	Performance Monitoring and Evaluation.....	27
3.1.7	Collaboration.....	28
3.1.8	Challenges and Barriers to Service Delivery	32
3.1.9	Crime Victims' Service Delivery Needs	37
3.1.10	Future Directions	40
3.2	Service Provider Interviews.....	45
3.2.1	Challenges and Barriers to Service Delivery	45
3.2.2	Crime Victims' Service Delivery Needs	50
3.2.3	Underserved Victim Populations.....	52
3.3	Crime Victim Data Collection.....	53
3.3.1	Background of Participants.....	53
3.3.2	Awareness of Services	53
3.3.3	Experiences with Services.....	55
4.	Study Limitations	58
5.	Discussion and Recommendations from Service Providers	58



5.1 Recommendations for Policy and Practice..... 59

6. Discussion and Recommendations from Crime Victims..... 61

7. Conclusions..... 63

Appendices

Appendix A: Survey of Service Providers

Appendix B: Service Provider Interview Protocol

Appendix C: Crime Victim Focus Group and Phone Interview Protocol

1. Introduction

On behalf of the Massachusetts Office for Victim Assistance (MOVA) and the Victim and Witness Assistance Board (VWAB), the ICF research team was tasked with conducting a needs assessment of victim service providers and crime victims across the Commonwealth. MOVA, in coordination with VWAB, supports crime victims and victim service providers in Massachusetts through direct victim advocacy and assistance; legislative and policy initiatives; training and outreach; and funding opportunities and grants. As part of its grant administration activities, MOVA funds approximately 100 programs across Massachusetts that provide free counseling and advocacy services to crime victims. One of the primary funding vehicles administered by MOVA is the Federal Victims of Crime Act (VOCA) Victim Assistance Grant Program.¹

Although this report is primarily focused on informing the upcoming FY2016 VOCA Request for Response (RFR) process, the purpose of the needs assessment is to ensure that all MOVA programs and services are responsive to the needs of crime victims and service providers in Massachusetts. Therefore, this needs assessment comprised of two core components; surveys and interviews with service providers, and focus groups and phone interviews with crime victims. ICF conducted a statewide survey of service providers to assess the experiences and perspectives of service providers related to the needs of and services provided to crime victims. Following the survey of service providers, ICF conducted follow-up interviews with a small sample of respondents from the survey to better understand the survey findings and gather additional recommendations for improving victim services in Massachusetts. A subset of these services providers, and a few additional providers recommended by MOVA, gathered information on crime victims interested in participating in this project. ICF conducted focus groups and phone interviews with the interested crime victims to add a firsthand account of crime victims experiences with service provision in Massachusetts. This report provides an overview of the methodology and findings from both components of data collection, and offers recommendations for service improvement throughout the Commonwealth.

2. Methodology

2.1 Survey of Service Providers

The survey of service providers was designed to better understand the range of victim services in Massachusetts; document gaps in service provision; assess barriers and challenges to service delivery; identify emerging trends in victim services; and solicit recommendations on how to improve the field's response to victims of crime throughout the Commonwealth. The survey was broadly targeted for all providers in Massachusetts that serve crime victims in varying capacities (e.g., direct assistance, policy, referrals, victim assistance funding), as well as those service providers representing both VOCA and non-VOCA funded organizations across Massachusetts. In addition, all individuals who were familiar with their organization's service delivery to crime victims were encouraged to complete the survey regardless of their current position (i.e., front line staff vs. management staff) in order to ensure a diversity of perspectives.

2.1.1 Identifying Service Providers

To develop the initial sampling frame, ICF researchers coordinated with MOVA staff to obtain a list of all organizations and victim service programs in Massachusetts that had ever received

¹ Other grant programs administered by MOVA include: American Recovery and Reinvestment (ARRA); Antiterrorism Emergency Assistance Program; Drunk Driving Trust Fund (DDTF); Human Trafficking Trust Fund; and the SAFEPLAN Program.

VOCA funding (N=233). To capture additional service providers and ensure representation from non-VOCA funded organizations, researchers supplemented this list by searching national databases, including: the Office for Victims of Crime's (OVC's) Directory of Crime Victim Services (n=109),² the National Sexual Violence Resource Center's (NSVRC's) Directory of Sexual Assault Programs (n=4),³ the Office for Violence Against Women's (OVW's) list of local resources by state (n=1),⁴ the Rape, Abuse & Incest National Network's (RAINN's) directory of local crisis centers (n=16),⁵ and the Federal Bureau of Investigation's (FBI's) list of local field offices by state (n=1) to identify victim service providers providing assistance in Federal cases. In addition, the research team conducted online searches of District Attorneys' (DAs') Office websites to identify local victim witness assistance programs (N=11), websites for local law enforcement, and Guidestar, an online database of nonprofit organizations by state.

Through online research and phone calls, researchers verified and updated the program contact information compiled for the survey sampling frame. As part of the verification process, researchers removed duplicate entries; consolidated multiple programs and points of contact from a single organization; corrected outdated or invalid contact information; and obtained missing contact information. This process resulted in a final sample of 170 organizations.⁶

To obtain feedback from a large number of service providers, the survey was sent to providers subscribed to MOVA's general statewide listserv (N=1,300),⁷ as well as MOVA's VOCA (N=220),⁸ SAFEPLAN (N=90),⁹ and the Drunk Driving Trust Fund (DDTF) (N=16)¹⁰ listservs. MOVA staff also conducted outreach to all Victim Witness Directors within each of the 11 DAs' Offices and the Governor's Council on Domestic Violence and Sexual Violence (GCSDV) to encourage participation among their staff and members. In addition to utilizing MOVA's networks and listservs for survey dissemination, researchers also employed snowball sampling in order to generate a large response and reach service providers who may not appear in victim service directories, such as providers who do not receive government funding, faith-based providers, providers working in emerging fields of service (e.g., civil legal assistance for crime victims), and geographically isolated providers (e.g., providers in rural communities). As a result of these non-probability sampling methods (i.e., snowball sampling) and the potential overlap between data sources,¹¹ the representativeness and generalizability of the survey is limited, and a valid response rate for this survey cannot be calculated.

² The *Directory of Crime Victim Services* is an online resource designed to provide service providers and the general public with program and contact information for organizations providing nonemergency victim services. The directory is administered by the OVC Resource Center (OVCRC) and includes all VOCA-funded organizations. Organizations not funded by VOCA are also represented in the directory but must manually submit their organization's information to the OVCRC.

³ An online directory of recognized coalitions and national organizations that: significantly address some aspect of sexual violence and are committed to its elimination; are national in scope; and provide written permission to be included.

⁴ An online list of each state's domestic violence, tribal, and sexual assault coalitions.

⁵ An online database of RAINN Affiliates and referral organizations.

⁶ Some organizations had multiple contacts; therefore, the survey was originally administered to a total of 226 recipients; however, 9 contacts were undeliverable and 2 had previously opted out, resulting in 215 recipients.

⁷ Includes any individual interested in current information about victim rights and services.

⁸ At a minimum, this list includes the program contact and a fiscal representative from every VOCA-funded agency in the Commonwealth, in addition to any VOCA-funded staff member who wishes to join the listserv.

⁹ The program contact, Senior SAFEPLAN Advocate, and a fiscal representative from every funded host agency are required to join the listserv. Any other SAFEPLAN staff member – including advocates, interns, and volunteers - are strongly encouraged to join; however, only SAFEPLAN host agencies are eligible to be members.

¹⁰ This list includes the program contact and a fiscal representative from all DDTF-funded agencies, as well as any additional staff members who wish to join the listserv.

¹¹ Some degree of overlap between data sources (i.e., instances where service providers received the survey through multiple sources) may exist due to the use of MOVA's listservs, to which the research team did not have direct access.

2.1.2 Instrument Development

To develop the survey instrument,¹² researchers first conducted an in-depth review of existing needs assessment survey instruments that were designed to capture similar concepts in the field of victim services. In addition to respondent background information, the instrument included nine construct areas:

- Service Delivery
- Funding Assistance
- Training and Technical Assistance
- Outreach and Awareness
- Performance Monitoring and Evaluation
- Collaboration
- Challenges and Barriers to Service Delivery
- Crime Victims' Service Delivery Needs
- Future Directions

Prior to administration, the instrument was pilot tested with MOVA staff and a survivor member of VWAB who assessed the survey's readability and applicability to the field of victim services. The survey was primarily administered in electronic format using skip patterns to reduce burden on respondents. Paper versions were also made available upon request. The research team fielded the survey for four weeks, sending weekly reminder emails to providers through both the MOVA listserv and ICF's list of service providers.

2.1.3 Data Analysis

A total of 527 surveys were received from service providers across the Commonwealth. These data were processed and invalid responses were removed from the sample due to a high frequency of missing data (i.e., respondents opted into the survey but did not complete any survey items) and duplicate responses (n=2), which resulted in the exclusion of 156 responses.

The remaining 369 surveys were analyzed using descriptive statistics to provide basic information regarding the range of victim services in Massachusetts; perceived gaps in and challenges to service provision; emerging trends in victim services; and recommendations on how to improve the field's response to victims of crime throughout the Commonwealth.

2.2 Service Provider Interviews

The purpose of the service provider interviews was to conduct a more in-depth exploration of notable findings from the survey of service providers and better understand the context of survey responses and how they relate to practice. In addition, the interviews provided an opportunity for service providers to make recommendations regarding future directions of victim

¹² See Appendix A for the survey of service providers.

services in the Commonwealth and action steps that MOVA can take to respond to the needs of service providers and crime victims.

2.2.1 Recruitment and Outreach

As part of the survey of service providers, respondents were asked to indicate whether they would be willing to participate in a follow-up phone interview to expand upon their experiences and perspectives related to victim services in Massachusetts. A total of 67 respondents indicated an interest in participating in a phone interview and provided contact information for additional follow-up. In order to capture the perspectives of providers serving both urban and non-urban catchment areas and obtain geographic diversity in the sample, researchers selected two counties with the highest number of volunteers from Western and Eastern, Massachusetts, which included Suffolk (n=15) and Hampden (n=5) Counties.¹³ Researchers then conducted phone and email outreach to all volunteer respondents from the two selected counties in order to gauge their continued interest in participating and determine their availability during the data collection period.

2.2.2 Instrument Development

In collaboration with MOVA and VWAB, ICF created a semi-structured phone interview protocol¹⁴ that was designed to prompt respondents' reactions to and further discussion of key findings from the survey of service providers. The protocol included seven constructs:

- Background and Introductions
- Challenges and Barriers to Service Delivery
- Crime Victims' Service Delivery Needs
- Underserved Victim Populations
- Training and Technical Assistance
- Collaboration
- Future Directions and Recommendations

Researchers conducted a total of 15 phone interviews with service providers from Suffolk (n=11) and Hampden (n=4) Counties. Ten of the respondents represented organizations that have received funding through MOVA and eight respondents currently receive VOCA funding. Respondents represented a range of victim service organizations, such as community-based organizations, criminal justice government agencies, legal service organizations, hospital-based programs, and faith-based organizations.

¹³ Many of the Commonwealth's most rural and geographically isolated counties are located in Western, MA, which is comprised of Berkshire, Franklin, Hampden, and Hampshire Counties. In contrast, many of the Commonwealth's most populous and urban counties are located in Central and Eastern, Massachusetts, which includes cities, such as Boston and Cambridge.

¹⁴ See Appendix B for the service provider interview protocol.

2.2.3 Data Analysis

As part of the interview introduction, ICF requested permission from all interview respondents to audio record the interviews. The transcriptions from these recordings were then reviewed and coded to extract key themes.

2.3 Crime Victim Data Collection

The purpose of the crime victim data collection was to better understand the needs of crime victims in Massachusetts, document gaps in service provision, assess barriers and challenges to receiving services, and solicit recommendations on how to improve the field's response to victims of crime throughout the Commonwealth. Data was collected through focus groups and phone interviews.

2.3.1 Recruitment and Outreach

In order to capture the perspectives of crime victims in both urban and non-urban catchment areas and obtain geographic diversity in the sample, researchers again used Hampden and Suffolk Counties as the target communities for victim data collection efforts.

To develop the initial sampling frame, ICF reached out to service providers in these counties who participated in the service provider survey and other providers identified by MOVA to seek their assistance in recruiting victims to participate in the needs assessment. In total, 25 service providers were contacted by ICF to participate in this phase of the project. Initial contact to each service provider was via email, with an email invitation sent one week later and then a follow-up phone call the following week.

Of the 25 service providers contacted, 10 agreed to assist with victim recruitment.¹⁵ These service providers were asked to contact any crime victims they believed might be interested in participating in the focus group. In order to participate, victims were required to be at least 18 years of age, a direct victim of a crime (including immediate family members in cases of homicide), have had experience with victim services in Massachusetts, and self-identify as mentally prepared to participate in research related to their experiences receiving victim services. If the participant was not able or interested in attending the focus group, the option of a phone interview was presented. Service providers contacted potential participants, gave them very basic information about the project, and asked if they would like ICF to contact them to provide additional information. Eighteen individuals expressed interest in participating in the needs assessment. Service providers provided ICF with the contact information of these individuals.

Members of the ICF research team reached out to potential participants using their preferred method of contact. Participants were provided with additional information regarding the nature of the needs assessment and invited to participate in a focus group or phone interview. Contact with victims was done via phone or email, every three to four days until potential participants were reached or had been contacted four times. This was done to ensure that every crime victim that had indicated an interest in participating was given ample opportunity to participate in this phase of the project.

¹⁵ The remaining 15 service providers either did not respond to our efforts to contact them or responded saying that they would not be able to help with victim recruitment and outreach efforts.

The main challenge in recruiting participants was in reaching out to the service providers. Of the 25 service providers contact, 15 either did not respond or responded saying they would not be able to help recruit. Of the 10 service providers that were able to help with participant recruitment we received a total of 18 names. Seven of the 18 participants agreed to attend the focus groups. The remaining 11 participants either declined to participate in the focus group, or never responded to multiple contact attempts.

2.3.2 Instrument Development

In collaboration with MOVA and VWAB, ICF created a semi-structured interview protocol¹⁶ that was designed to elicit opinions on the current state of victim services in Massachusetts and recommendations for improvement. This protocol was informed by an in-depth review of existing instruments designed to capture similar concepts in the field of victim services. The protocol asked questions related to four main themes:

- Awareness of Services
- Access to Services
- Services Received
- Future Directions and Recommendations

In total 12 victims participated in the needs assessment, 6 victims attended focus groups, which were conducted on March 18-19, 2015, and 6 victims participated via phone interviews.

2.3.3 Data Analysis

As with the service provider interviews, ICF requested permission from all interview participants to audio record the interviews. These audio recordings were transcribed. In order to ensure the confidentiality of interview participants, identifiable information was removed and the recordings were deleted following their transcription. The transcriptions from these recordings were then reviewed, coded, and analyzed to extract key themes. All transcriptions were qualitatively coded to provide basic information regarding the range of victim services in Massachusetts; perceived gaps in and challenges to service provision; emerging trends in victim services; and recommendations on how to improve the field's response to victims of crime throughout the Commonwealth. The results of this analysis are discussed in section 3.3 following discussion of the service provider findings.

3. Findings

3.1 Survey of Service Providers

This section begins with an overview of survey respondents' background, followed by a description of service delivery to crime victims; funding sources for victim assistance programs and activities; victim services training and technical assistance requirements and needs; outreach and awareness activities; and interagency collaboration among victim-serving organizations. The section then details the perceived challenges and barriers to service delivery

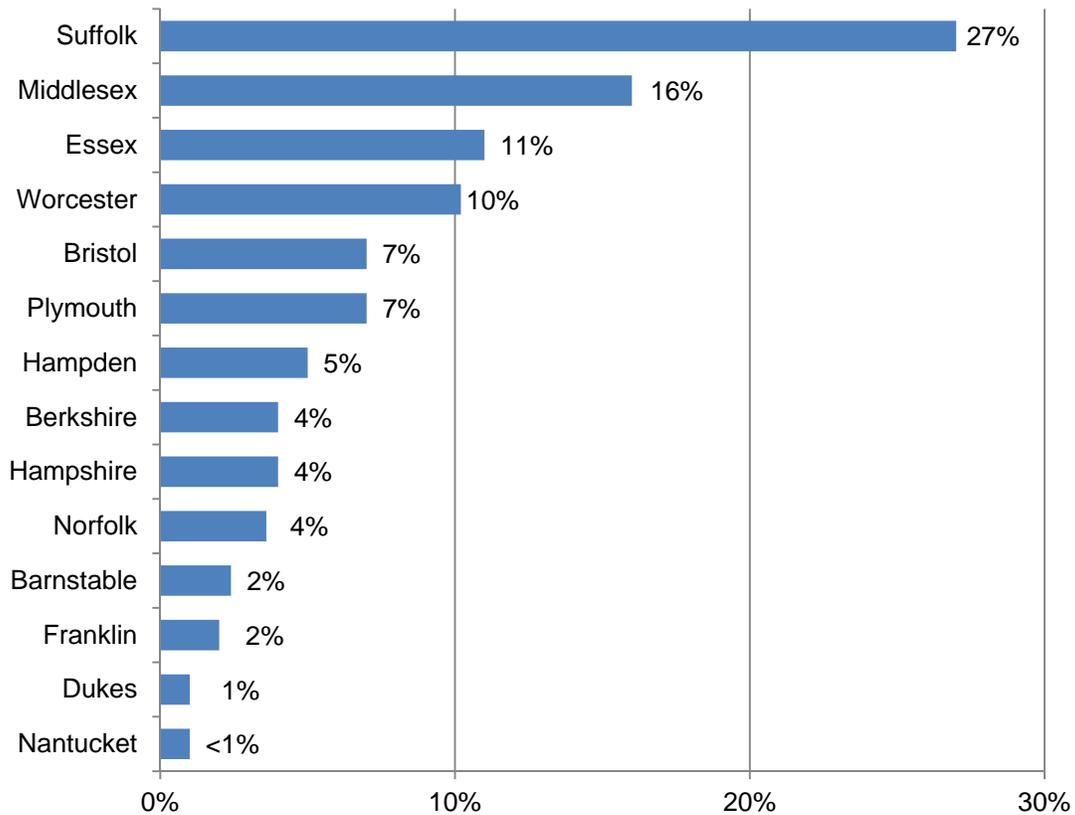
¹⁶ See Appendix C for the phone and focus group protocols.

faced by victim-serving organizations, the most critical barriers victims face in seeking services, and the need for crime victim services beyond the current capacity.

3.1.1 Background of Respondents

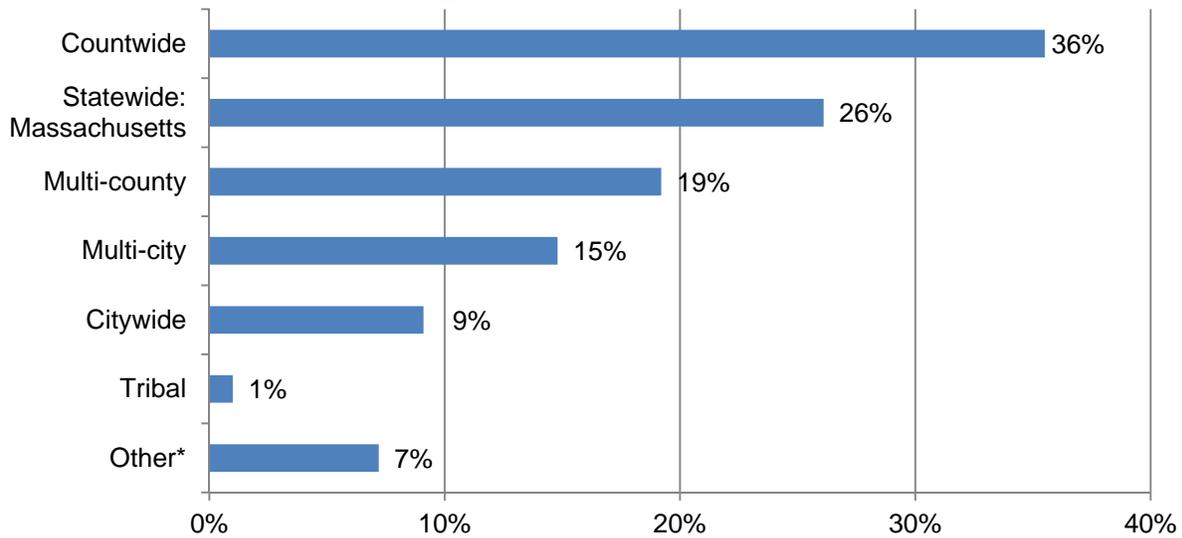
The following section provides information on respondents' background, including the county where their organization is located; the catchment area served by their organization; the type of organization where they work; their primary role in their current position; and their years of experience in the victim services field (see Exhibits 1-6).

Exhibit 1: Location of Victim Service Providers by County (n=333)



Note: The percentages shown in Exhibit 1 do not sum to 100% due to rounding.

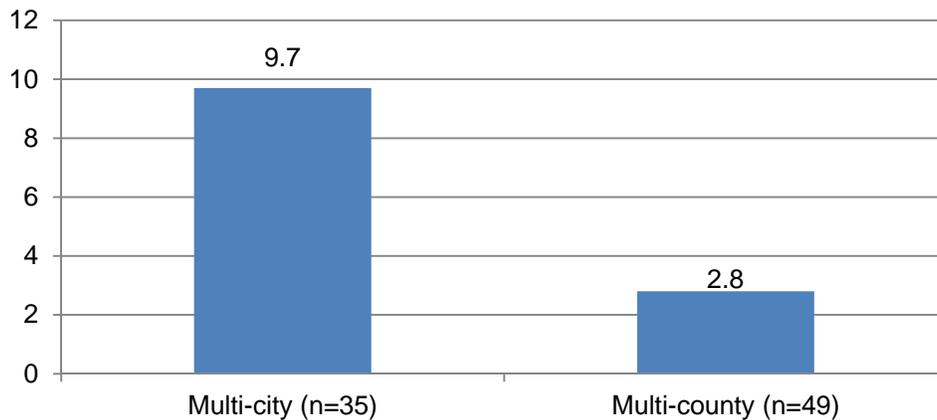
Exhibit 2: Organizational Catchment Area (n=318)



Note: The percentages shown in Exhibit 2 do not sum to 100 percent because respondents could select multiple options.

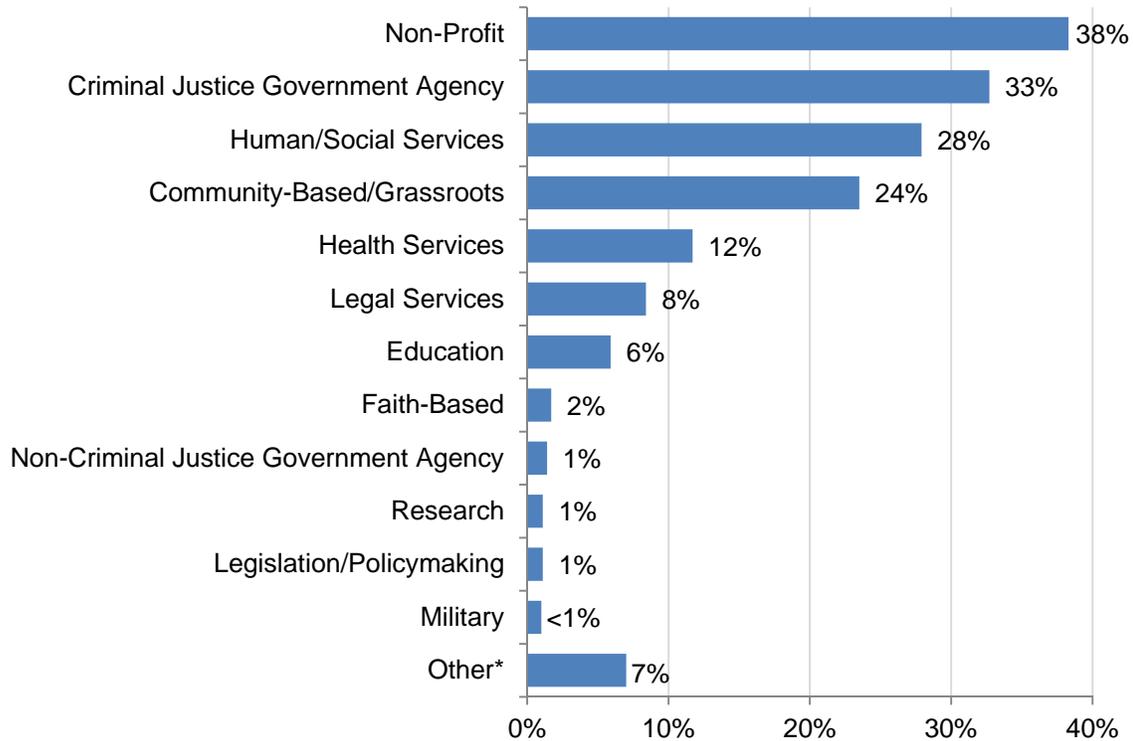
* "Other" responses included the following: "All of New England, MA, VT, RI, CT, NH, ME," "Campus," "Global," "National Hotline Service," "New England," "Open to all," "Portuguese speaking communities who live in Massachusetts," "Southcoast region," "Surviving families residing outside city/state/country at times," "University students," "We are a Massachusetts based organization, and our hotline is open to LGBTQ/T and/or poly and SM communities looking for support around partner abuse," "We serve people from all over the world," and "We work with homeless women and children regardless of where they are from if we can accommodate them."

Exhibit 3: Average Number of Communities Served within Catchment Area



Note: For those respondents who indicated serving a multi-city, multi-county, or tribal (not reported due to small sample size) catchment area, researchers coded the number of communities served within those catchment areas in order to report the average. Due to the small sample size, please use caution when interpreting these results.

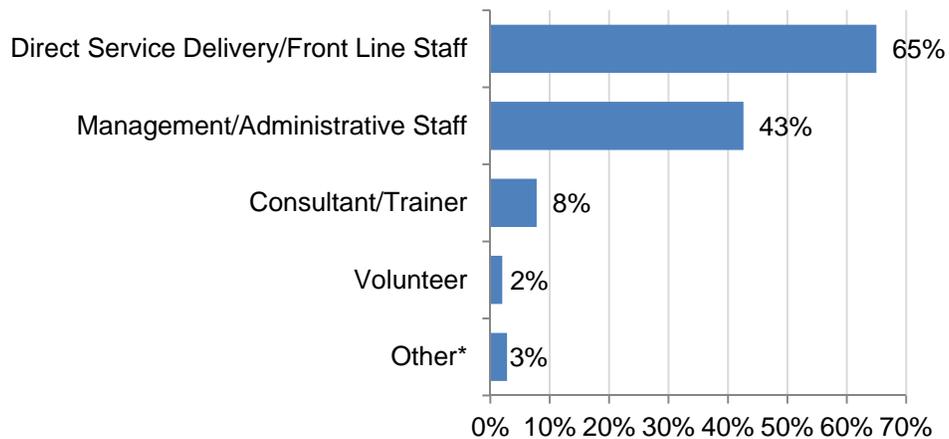
Exhibit 4: Organizational Affiliation (n=358)



Note: The percentages shown in Exhibit 4 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Advocacy," "Affordable Housing," "Anti-poverty organization," "ASAP-Area Agency on Aging Access Point," "Coalition," "Domestic and Sexual Violence Agency," "It is a Tribal government, but the DV/SA program is ran out of the HS Dept. with a foundation in the community," "Juvenile Justice," "Mental health/trauma focused," "Public/private partnership," "Religious expertise for Jewish domestic abuse clients and Russian speaking language," "Social Justice," "Substance Abuse/HIV/Youth Programs," "Survivor-led Social Justice organization," "Target to deaf community," "We provide trauma/informed med/legal exams," and "Women's Center."

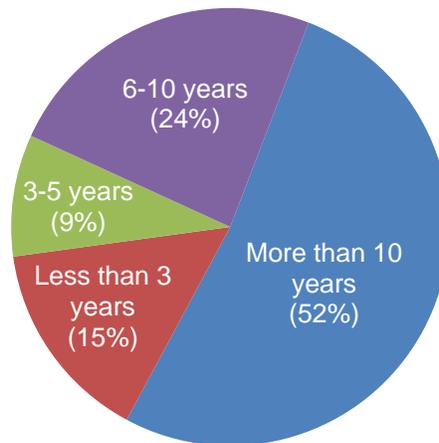
Exhibit 5: Service Providers' Primary Role within their Organization (n=357)



Note: The percentages shown in Exhibit 5 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Board Member," "Education and awareness," and "Researcher."

Exhibit 6: Years of Experience in the Field of Victim Services (n=361)



3.1.2 Service Delivery

In order to obtain detailed information regarding the types of victim populations served, service providers were asked to estimate the percentage of their victim clients that fall within various demographic categories, including age, gender, race/ethnicity, language, persons with a disability, and sexual orientation. An overview of victim client demographics is provided in Exhibit 7 below.

Exhibit 7: Victim Client Demographics (n=240)*					
	0%	1-25%	26-50%	51-75%	76-100%
Age					
Youth under 18 years of age	15%	62%	8%	4%	11%
Adults 18-21	3%	85%	9%	1%	2%
Adults 22-29	1%	71%	27%	2%	0%
Adults 30-39	1%	67%	31%	2%	1%
Adults 40-49	2%	81%	15%	1%	1%
Adults 50-59	3%	88%	9%	1%	0%
Adults 60 and older	7%	92%	1%	0%	1%
Gender					
Male	1%	73%	23%	1%	1%
Female	0%	2%	5%	26%	68%
Transgender	31%	69%	0%	0%	0%
Race/Ethnicity					
American Indian or Alaska Native	52%	48%	0%	0%	1%
Asian	9%	89%	2%	0%	0%
Black or African American	1%	69%	24%	5%	2%
Hispanic or Latino	3%	62%	27%	6%	3%
Native Hawaiian or Other Pacific Islander	65%	35%	0%	0%	0%
White, non-Hispanic	0%	23%	28%	30%	19%
Two or More Races	5%	82%	8%	2%	3%

This project is partially supported by the Massachusetts Office for Victim Assistance through a 1984 Victims of Crime Act grant from the Office for Victims of Crime, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, conclusions, and recommendations expressed in this report are those of the author(s) and do not necessarily reflect the views of the state of Massachusetts or the Office of Justice Programs.

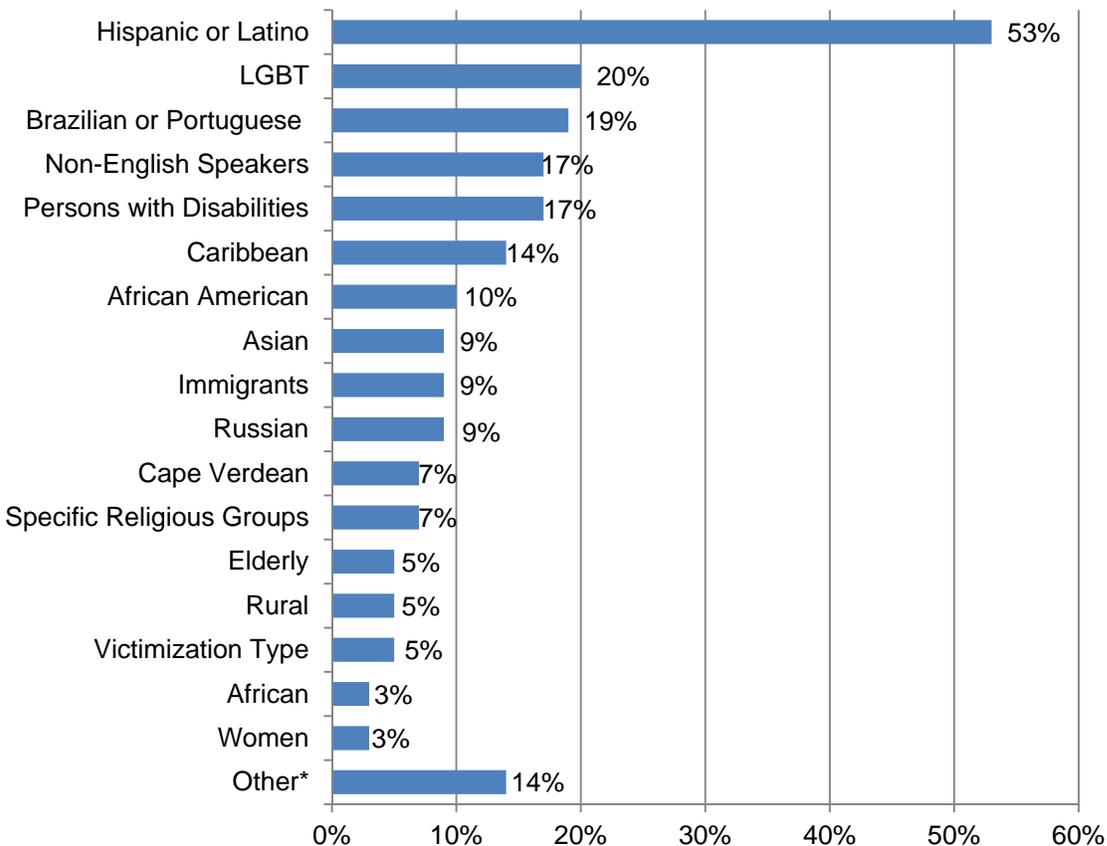
Exhibit 7: Victim Client Demographics (n=240)*					
	0%	1-25%	26-50%	51-75%	76-100%
Other**	40%	53%	5%	2%	0%
Language					
Limited English Proficient	1%	65%	23%	6%	6%
Persons with Disability					
Persons with disability	4%	72%	15%	5%	5%
Sexual Orientation					
LGBT	4%	91%	4%	1%	1%

*The listed sample size represents the number of participants who completed at least one item; individual sample sizes for each item varied from 60 to 240.

** "Other race/ethnicity" responses included the following: "Arabic," "Brazilian," "Cape Verdean/Portuguese," "Indian," "Middle Eastern," "Muslim," and "Russian."

Thirty-one percent of respondents indicated that their organization's victim service programs target culturally specific populations. Exhibit 8 provides greater detail on the types of culturally specific populations served.

Exhibit 8: Types of Culturally Specific Populations Served (n=59)



Note: Due to the small sample size, please use caution when interpreting these results.

* "Other" responses included the following: "Middle Eastern population," "other underserved populations," "indigenous," "international," "military," "persecuted indigenous groups," "Native American," and "Arabic."

Exhibit 9: Average Number of Victims Served in One Month

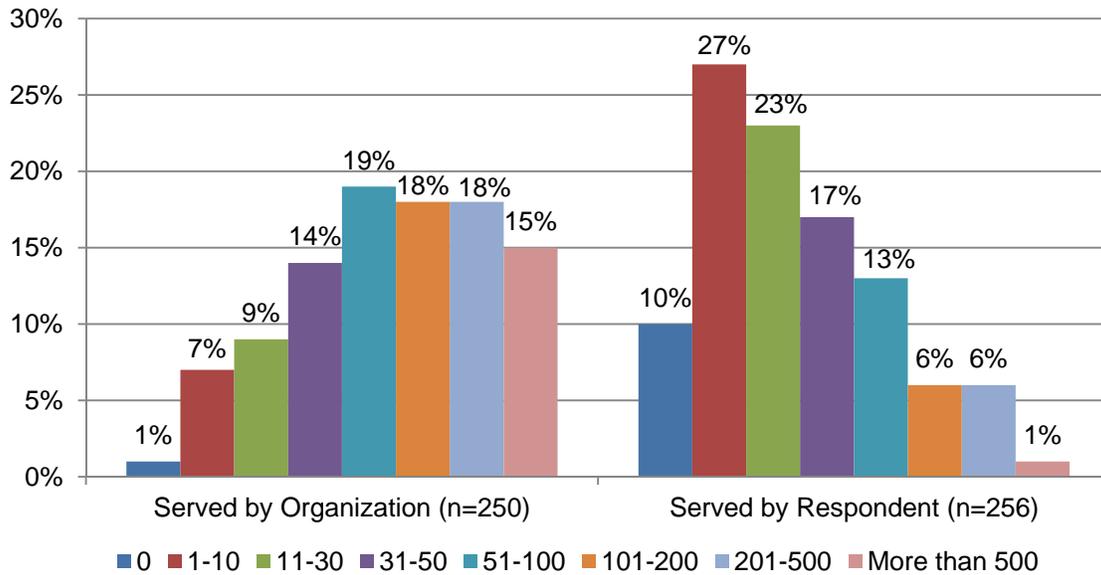
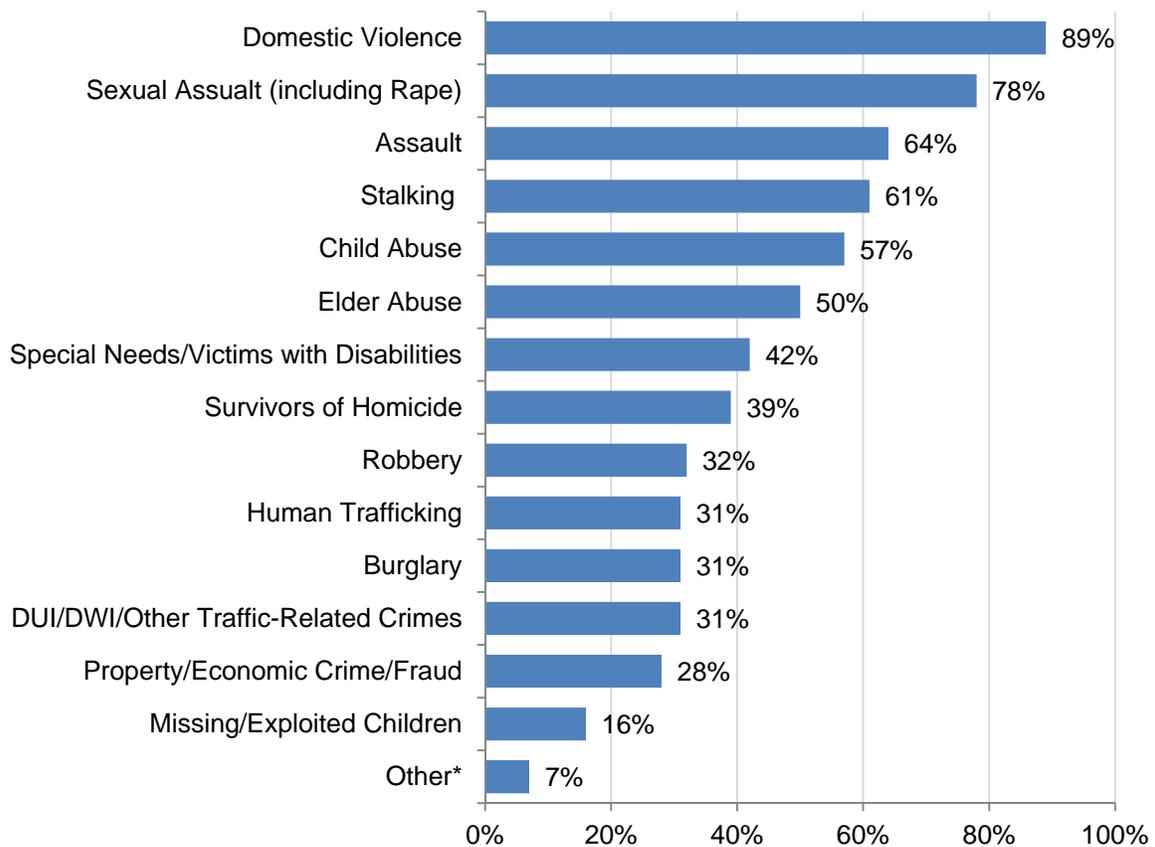


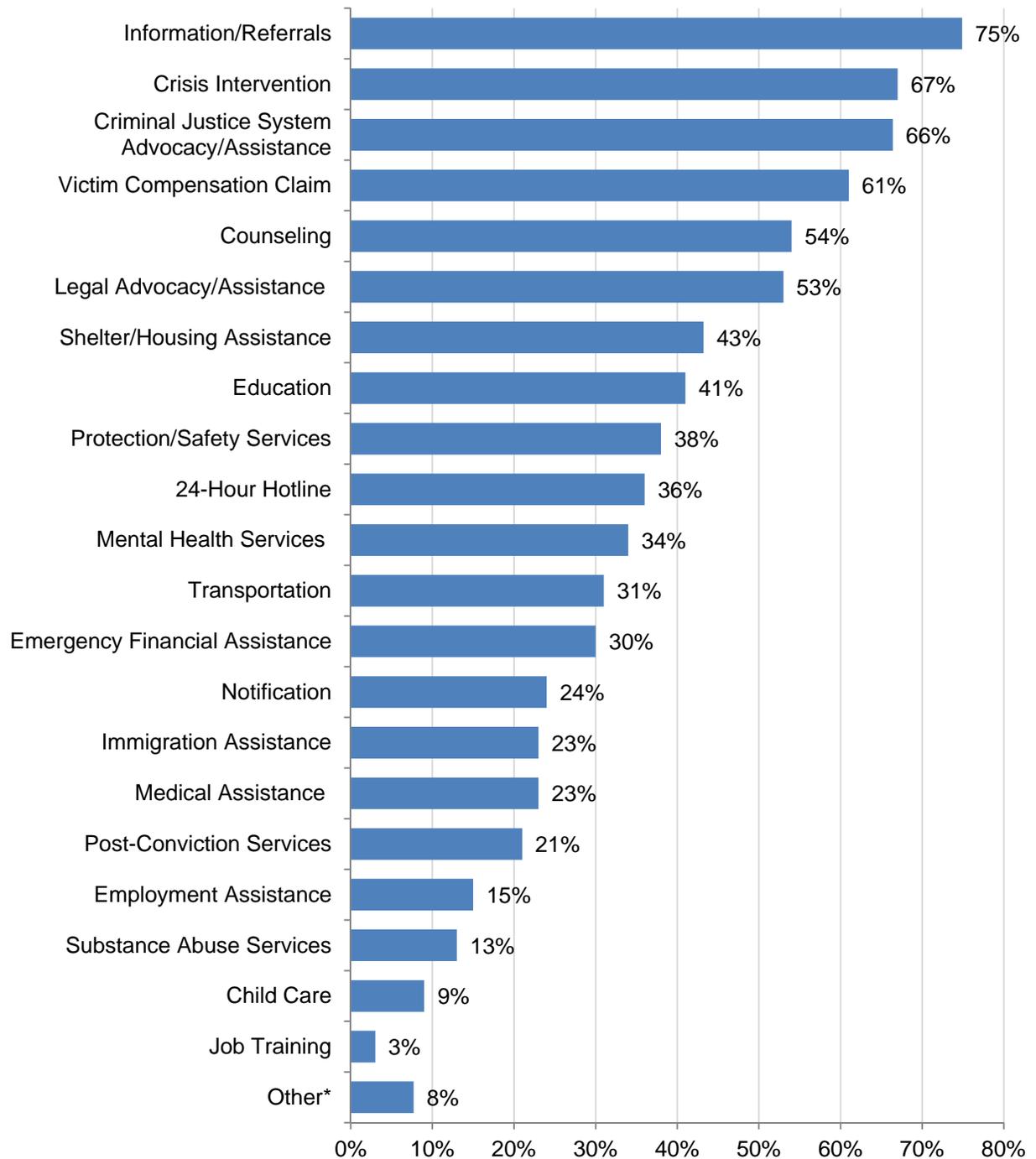
Exhibit 10: Types of Victim Populations Served (n=271)



Note: The percentages shown in Exhibit 10 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Adult survivors of child physical/sexual abuse," "All crimes resulting in state prison sentence," "Arson, kidnapping," "Boston Marathon Bombing Survivors," "Child witness to violence," "Community violence," "Hate crimes," "LGBT," "Neglect," "Sexual harassment," "Torture survivors," "Variety of crimes," and "We consider forced joint custody with a perpetrator a form of human trafficking."

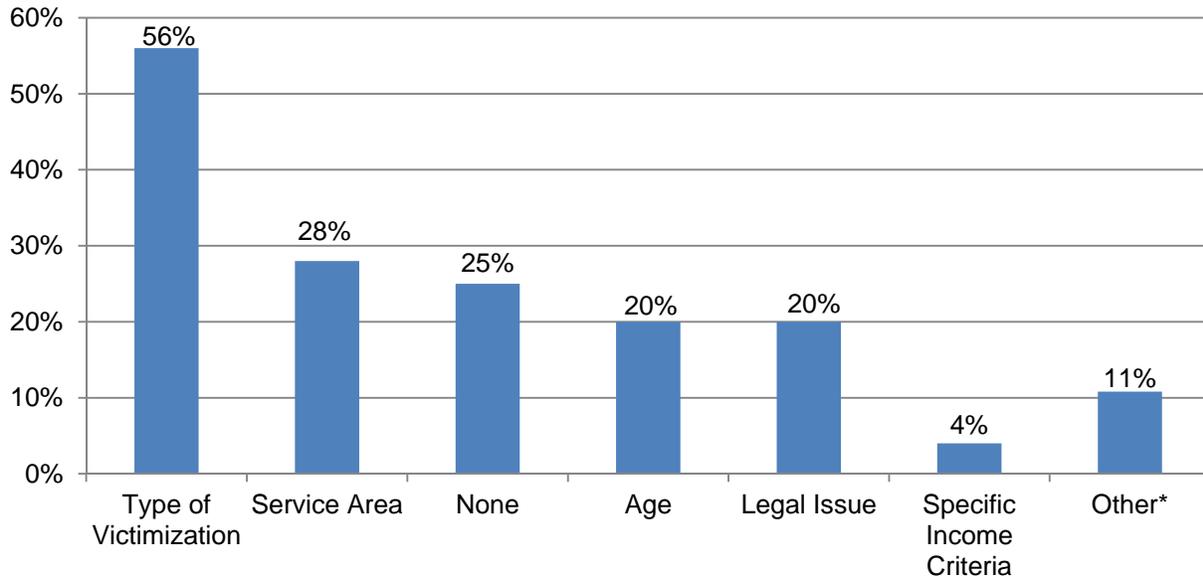
Exhibit 11: Types of Services Provided to Crime Victims (n=271)



Note: The percentages shown in Exhibit 11 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Accessible hotline for Deaf victims and some 1:1 support," "Case coordination," "Community engagement/building," "Criminal investigations," "Disability advocacy/trafficking advocacy," "Domestic violence advocacy," "Economic advocacy, incarceration services," "Interpreter services," "Law enforcement," "Legal interpreters/CART services," "Medical and personal advocacy," "Military justice system," "Services addressing substance abuse/abuse and DV combined," "Supervised visitation services," and "Support group."

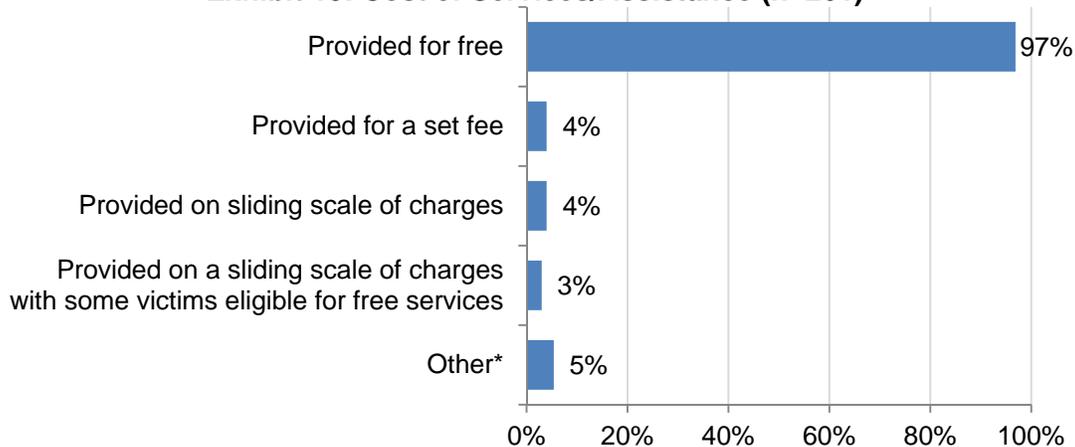
Exhibit 12: Eligibility Criteria for Services (n=259)



Note: The percentages shown in Exhibit 12 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Any victim of crime," "Anyone who identifies as a woman is welcome to obtain services with us," "CORI certified," "Criminal," "Deaf, hard of hearing or Deaf/Blind," "Defined by law and regulation," "Diagnosis/presenting problems," "Employees of Partners Healthcare," "Homeless due to domestic violence," "Homeless or in crisis," "Massachusetts Laws/Statutes," "Medical exams are limited to children under 18 or 18+ if disability is needed," "Need based prioritizing," "No income limits for elder clients," "Report to law enforcement," "Sex-only women," "VA eligibility, disability and service connected status; military sexual trauma, etc.," and "Victim or witness to a criminal matter pending in court, or under investigation."

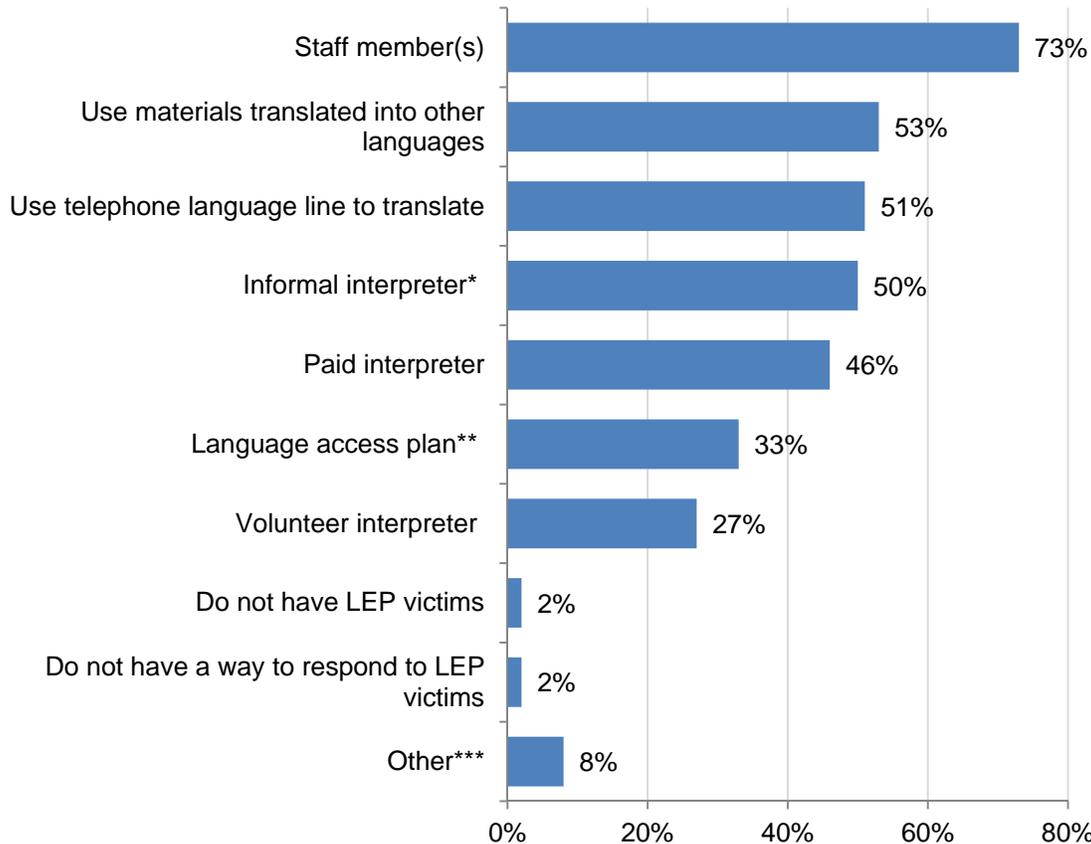
Exhibit 13: Cost of Services/Assistance (n=261)



Note: The percentages shown in Exhibit 13 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Advocacy-we find them what they need," "Billed to insurance," "Children need insurance to see the clinician," "Free for VOCA funded programs, insurance/billing for CHA," "Insurance, DCF, or DMH," "Insurance is utilized but if client has none, free services are available and we attempt to connect client with Mass Health," "Sometimes we will seek to be reimbursed," and "We are incorporated to charge but are only just beginning after 7 years of funding this organization ourselves, to contract for certain work."

Exhibit 14: Methods for Providing Assistance to Victims with Limited English Proficiency (LEP) (n=265)



Note: The percentages shown in Exhibit 14 do not sum to 100 percent because respondents could select multiple options.

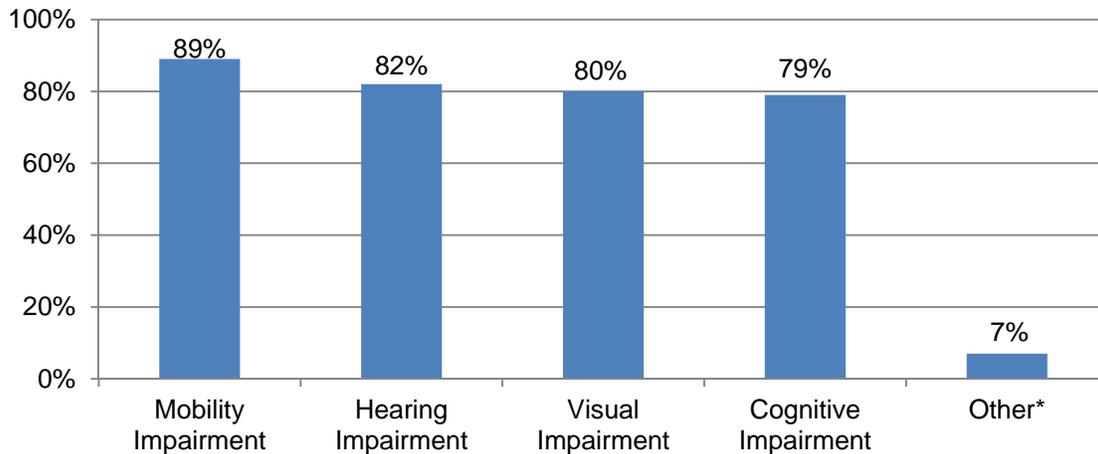
*May include individuals such as family members, friends, and caregivers.

**Policies or procedures designed to provide LEP persons with meaningful access to all programs and services.

*** "Other" responses included the following: "Ability to assist depends on language need," "American Sign Language and CDI Interpreters," "Collaborate with local health center for translation services," "Collaborate with Voices Against Violence, and use wayside for fee for service," "Court interpreters," "For deaf clients- video operator," "Hospital interpreters," "I misunderstood LEP as limited literacy, we refer to a literacy program and assist clients with reading and writing as necessary," "Language App," "SHARP program," and "Telecommunication for Deaf victims and Sign Language."

Exhibit 15 illustrates the high degree to which service providers' are able to accommodate victims with disabilities.

Exhibit 15: Accommodations for Victims with Disabilities (n=238)



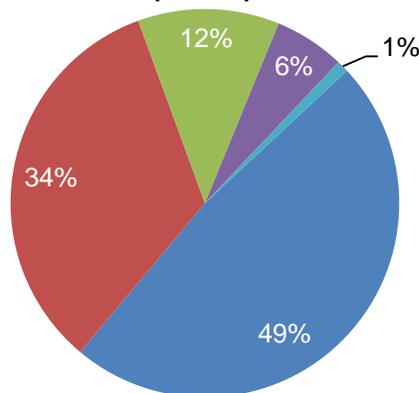
Note: The percentages shown in Exhibit 15 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Accessibility is key in providing support," "Courthouse access," "Fully accessible," "Initial assessment dependent (PHQ results; affidavit; all other concerns)," "Mental health disabilities are common among veteran population," and "We have hired sign interpreters, gotten taxis for visual impairment."

3.1.3 Funding Assistance

The following section presents information on respondents' familiarity with MOVA programs and resources, common sources of funding assistance for victim services, and strategies for program sustainability.

Exhibit 16: Familiarity with Programs and Resources Provided by MOVA (n=272)



- Extremely Familiar
- Moderately Familiar
- Somewhat Familiar
- Slightly Familiar
- Not at all Familiar

Exhibit 17: Organizations That Have Ever Received MOVA Funding Assistance (n=252)

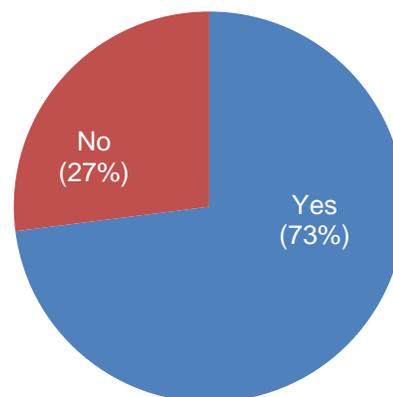
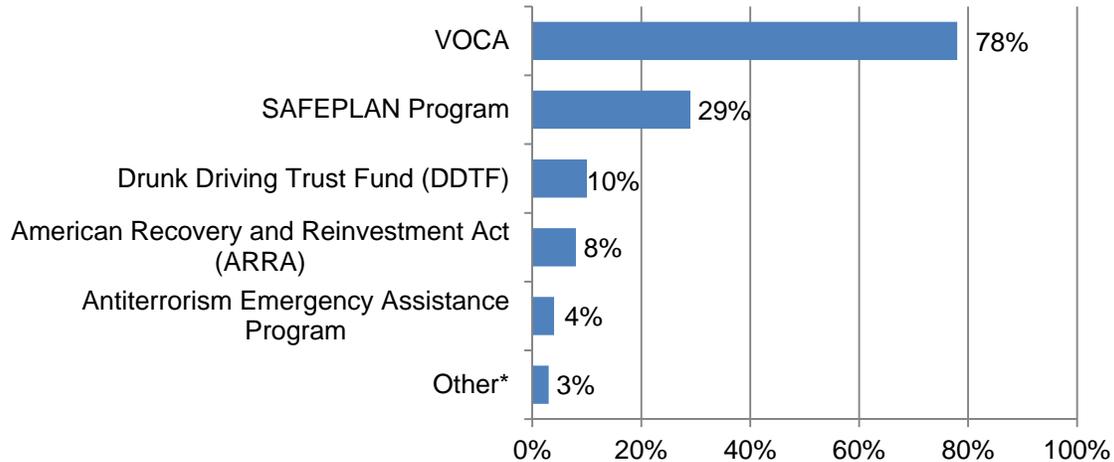


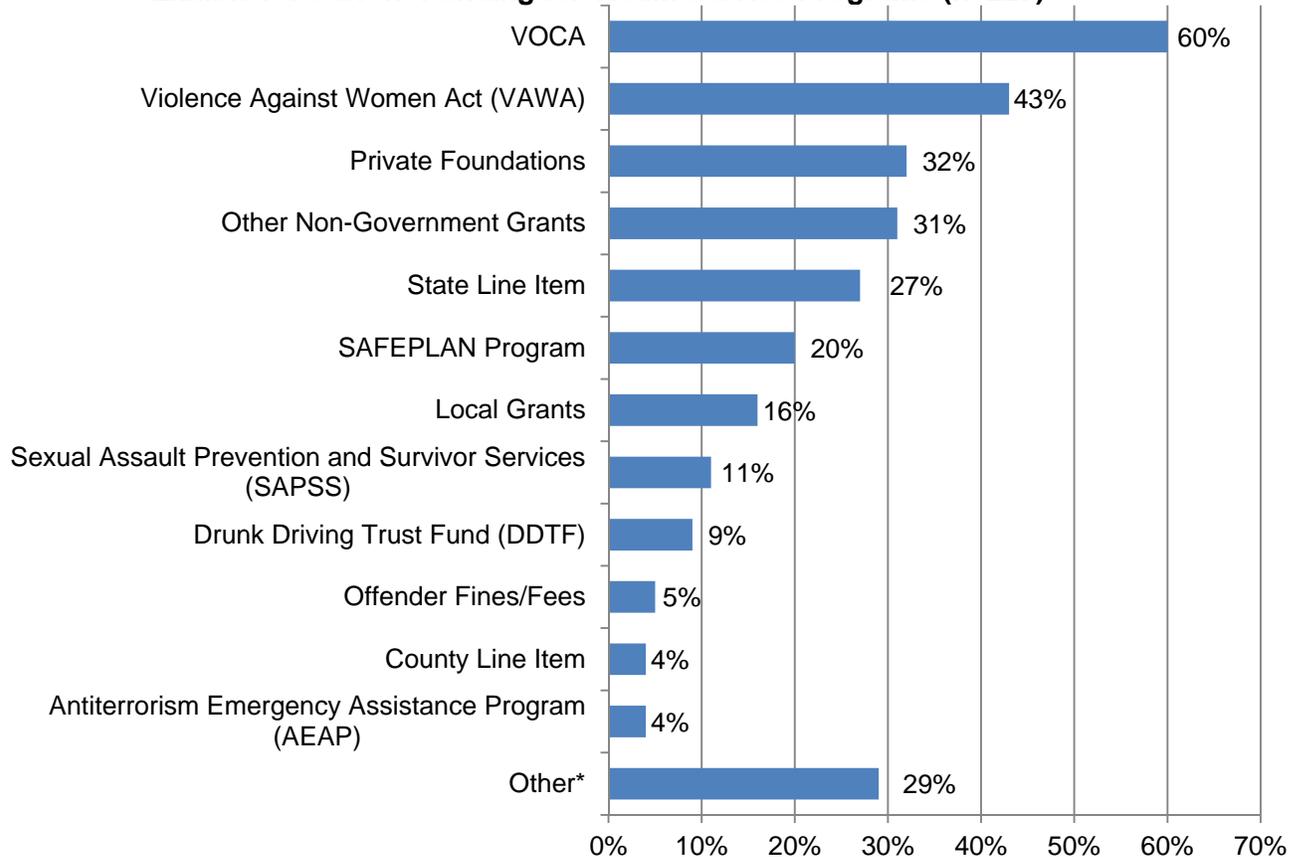
Exhibit 18: Types of Funding Received through MOVA (n=178)



Note: The percentages shown in Exhibit 18 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "911 funds," "Homicide bereavement," "Specialized ISA to handle Marathon Bombing victims," "State line item," "STOP Grant," "Training," "VAWA Grant," and "Victim Compensation."

Exhibit 19: Current Funding for Victim Service Programs (n=227)



Note: The percentages shown in Exhibit 19 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "Collaborative approach with Deaf/HOH resources in Massachusetts," "Community Benefit funds," "Corporations: Sprint, Staples, Panera," "DCF AND DPH," "Donated services," "Educational institution funds," "Federal grants: SAMHSA, OVC, ACF," "Funded internally at a hospital," "Regional/Community fund raisers, Faith Communities, Private donations," and "US Army military victims compensation fund."

When asked how they expect to sustain their program in the future should funding change, the most common responses were related to reducing programs or services (38%) and obtaining additional grant funding through public and private sources (33%).¹⁷ A selection of respondents' comments is shown below:

Reduce Programs or Services

- *"[It is] unlikely [that the] program could be sustained at [its] current level or with paid staff. Services would be mostly unavailable and would be dependent on [the] community's generosity."*
- *"It would be extremely difficult to fill the financial gap that MOVA provides without significant notification of funding changes in advance. Due to the high amount of salaries spent from these funds, a reduction would deeply impact staffing and thus reduce ability to serve victims of domestic violence and sexual assault in the community."*
- *"We are already on a 'shoe string.' Any cuts and I don't think we could survive."*
- *"If we lost VOCA funding we would need to substantially reduce the volume and scope of our free care victim services."*
- *"...Specifically, in regard to [organization's project], without continued VOCA funding, maintaining the project at the current level would not be possible. [Organization] does not have the resources to make up for any loss of VOCA funding without cutting other critical assistance that [organization] provides".*
- *"Current level of services would be reduced to the revised funding level to be able to provide basic services."*
- *"It would be impossible to continue providing the level of free services that we provide without ongoing state and federal funding (90% of our total funding)."*
- *"We would not be able to fund our program without VOCA grant."*
- *"I do not believe we would be able to fully sustain our program without VOCA funding through MOVA. Victims services would be drastically reduced at best."*
- *"There would probably be no way to sustain, at least not the SAFEPLAN program."*
- *"...funding cuts would be devastating and sexualized violence is not a topic many people [or] foundations want to fund."*

"Reductions in funding would mean reductions in programming."

¹⁷ Respondents' comments may fall into multiple categories.

- *“It would be very challenging. Funding to provide sexual assault victims with free lawyers is not a typical desire of funders. Even though we know when survivors have a lawyer it helps stabilize and rebuild their lives following sexual violence, the funding streams are very limited.”*
- *“Our group exists because of its member's contributions. MOVA provides services for our members but it is outside our group. Also, MOVA provides funds for counseling that our members use. If services were not offered anymore many people would suffer in our community, really suffer.”*
- *“If current funding was eliminated or reduced, we would lose capacity and staff as well. Victims would have fewer community based supports and resources.”*

Grant Funding

- *“[Organization] will continue its aggressive fundraising efforts to secure individual support as well as foundation and government grants to help keep the level of assistance as high as possible. In general, however, [organization] continues to face considerable fundraising challenges due to the increased competition for limited donor dollars.”*
- *“Larger grants, corporate grants, multiyear grants, sustainability grants.”*
- *“Constantly researching and writing grants as well as soliciting new donors.”*
- *“We have submitted 5 grant proposals in the past year and will continue to seek funding from a variety of federal, state, and private granting agencies.”*
- *“Increase fundraising [and] private foundation grants.”*
- *“Seek funding from donors and private foundations.”*
- *“We would continue to try to obtain other sources of funding, through foundations, mini grants, town grants, community block grants.”*
- *“Apply for funding from other government agencies and private foundations.”*
- *“Continue to look for other funding with private grants, fund raising.”*
- *“Combination of public and private grants. Would look to legislature.”*
- *“We are always seeking new avenues of revenue, including amping up our annual fund and discovering new grants to support our program.”*
- *“We would hope to generate increased revenue through private grants from foundations and corporations as well as by expanding individual donor outreach.”*

Other Comments

- *“...uncertain – [we are] moving in the direction of more private funding.”*

- *“We are seeking new program models and/or for-profit collaborations to include earned revenue or predictable, recurring streams of philanthropic revenue for our programs. These could not sustain the programs on their own, but they are potentially an important part of the funding mix.”*
- *“We would attempt to raise money from community events and individual donors.”*
- *“To sustain the program we would reach out to our Local City/Town, Governments, fund raisings, media, social network, churches, schools, and other resources that will be willing to assist our program.”*
- *“Increased individual giving, cost reduction strategies with vendors, new government grants, accessing victim increased victim services funds.”*
- *“Would need to decrease direct service staff.”*
- *“Without current funding levels (VOCA, DDTF and State budget) we would be unable to sustain our current staffing levels.”*
- *“Would have to do the same amount of work with less people. Quality of services would suffer tremendously.”*
- *“We would continue to seek other sources of funding, but we might have to eliminate some staffing and reduce clients served.”*
- *“It would require asking more of the people that currently do the work. This office must be mindful of sustaining budgets when the economy is not favorable.”*
- *“We would have to rely on insurance and self-pay.”*

3.1.4 Training and Technical Assistance

Exhibits 20-21 show the number of hours staff are required to spend attending professional education programs or trainings annually, as well as the percentage of those hours that is directly related to victim services.

Exhibit 20: Annual Required Hours for Staff Training (n=225)

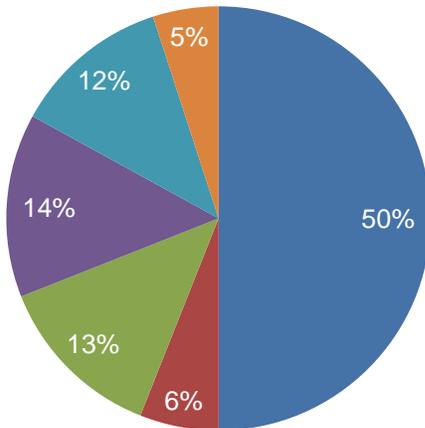
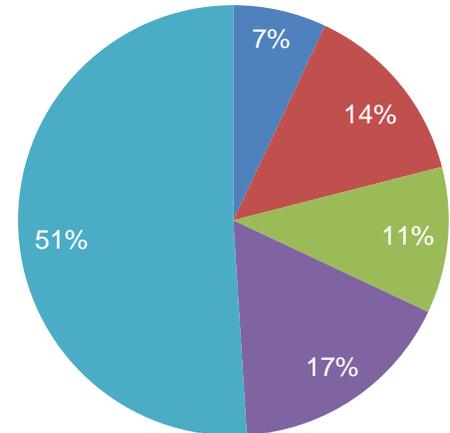


Exhibit 21: Percentage of Training Hours Directly Related to Victim Services (n=173)



■ No Formal Requirement ■ 1 - 5 hours
■ 6 - 10 hours ■ 11 - 20 hours
■ 21 - 40 hours ■ 41 or more hours

■ 0% ■ 1 - 25% ■ 26 - 50% ■ 51-75% ■ 76 - 100%

The table below provides a breakdown of respondents' participation in various MOVA TTA activities by funding status.

Exhibit 22: Participation in MOVA TTA by Funding Status		
Training or Technical Assistance	MOVA-Funded (n=161)	Non-MOVA Funded (n=58)
Have not participated in TTA provided by MOVA	15%	28%
Child Witness to Violence Forum	34%	16%
Immigration Relief Available for Victims of Crime Forum	23%	12%
Massachusetts Victim Assistance Academy (MVAA)	37%	31%
New Advocate Training, Springfield	14%	10%
Victim Rights Conference, Boston	74%	55%
Other *	11%	9%

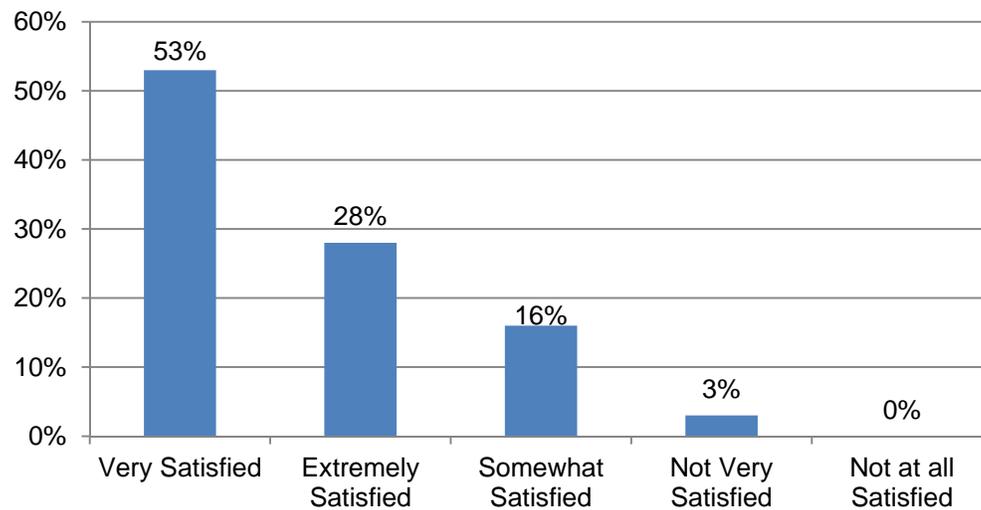
Note: The percentages shown in Exhibit 22 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "training related to VOCA funding," Plymouth County Roundtable," "MOVA and Volunteer training through SSWRC (2012)," "We are MOVA certified," "Forums provided by MOVA for different counties," "Victim Compensation Training," "Jane Doe, Inc. trainings," "I attend many non-MOVA mental health trainings," "Homicide Victims Forum, Sexual Assault Forum,"

“New Advocate Training—Boston,” “SAFEPLAN trainings,” “Various conferences pertaining to victim services,” and “Webinars.”

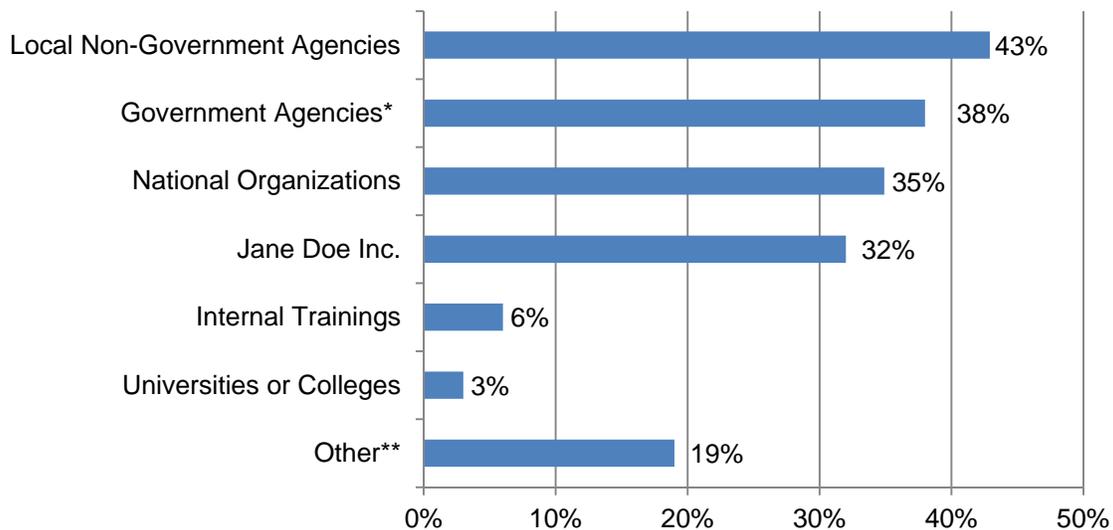
Respondents rated their satisfaction with TTA they received from MOVA using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 23 shows respondent ratings.

Exhibit 23: Respondent Satisfaction with MOVA TTA (n=180)



Sixty-nine percent of respondents reported turning to resources other than MOVA for TTA. The most common resources reported by respondents are shown in Exhibit 24 below.

Exhibit 24: Other TTA Resources (n=63)



Note: The percentages shown in Exhibit 24 do not sum to 100 percent because respondents could select multiple options. Due to small sample size, please use caution when interpreting these results.

*Government agencies include some of the following: OVC TTAC, OVW, DCF, and DPH.

** “Other” responses included the following: “On-line webinars,” “Other allied service providers,” “Other DV providers in the region,” and “Too many to list. Community-based trainings, webinars, professionals to come to our agency to provide specific training, etc.”

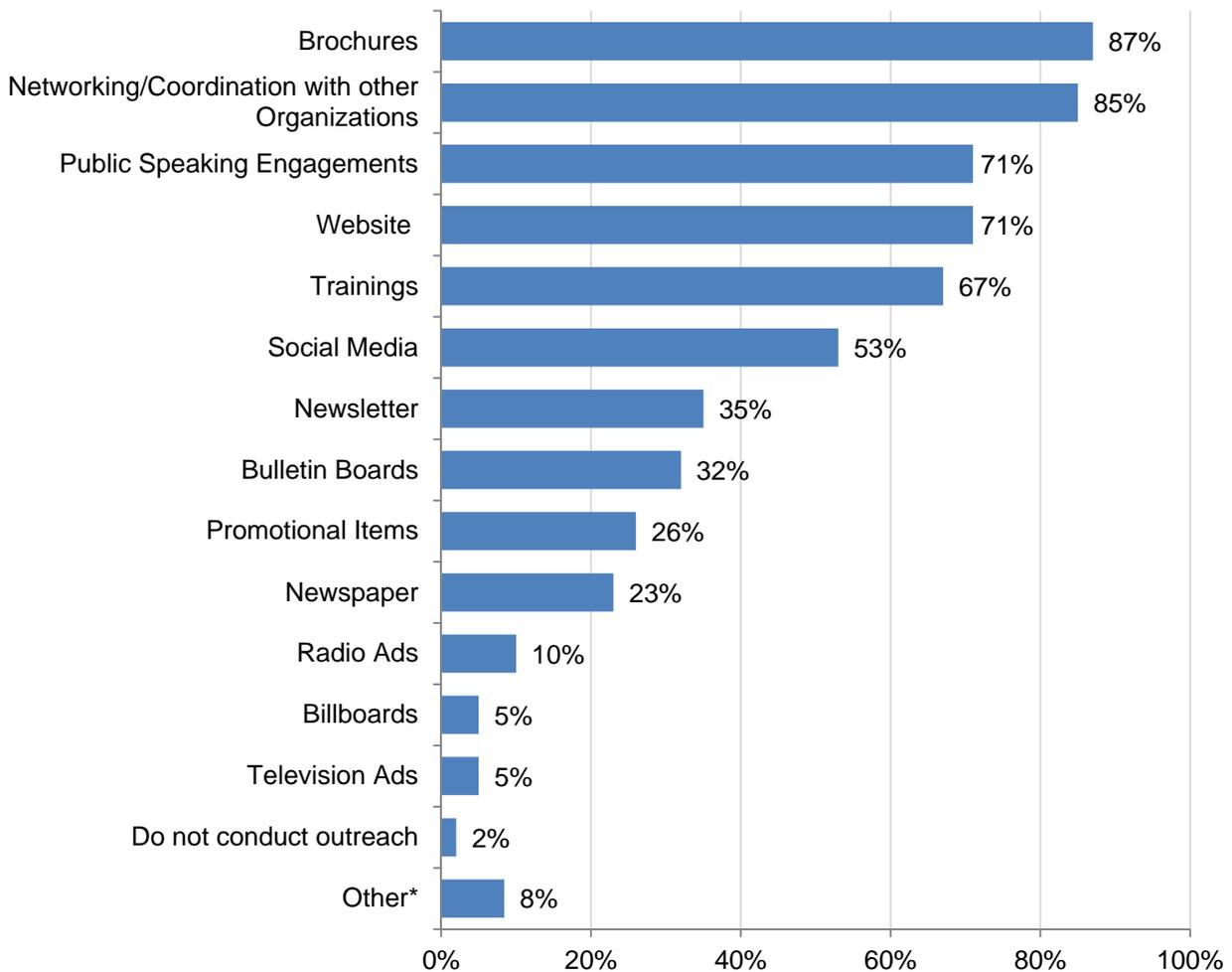
Exhibit 25: Training and Technical Assistance Needs (n=213)*	
My organization needs additional training and technical assistance related to:	Average Rating
Organizational/Program Management	3.02
Program Development	3.22
Professional Development	3.62
Technology/Case Management Systems	3.26
Program Monitoring/Evaluation	3.45

*The listed sample size represents the number of participants who completed at least one item; individual sample sizes for each item varied from 208 to 213.

3.1.5 Outreach and Awareness

This section provides information on providers' outreach strategies.

Exhibit 26: Outreach Methods (n=238)



Note: The percentages shown in Exhibit 26 do not sum to 100 percent because respondents could select multiple options.

* “Other” responses included the following: “Annul report, outreach events,” “Annual Walk-athon,” “Bathroom palm cards,” “DV Awareness Campaign videos,” “Bi-monthly announcement of program events to a growing mailing list,” “Blog,” “Direct contact with community,” “DV roundtables, Coalition meetings, mailings to schools, doctors, etc., networking events, health fairs, etc.,” “Events,” “Looking to expand in this area- cable programming,” “Mailings,” “Outreach to schools and community organizations,” “Participation in community roundtables,” “Research and send outreach to victims that can be identified,” “Tabling and local events,” and “Mothers come to us via word of mouth and mostly recommendation.”

Service providers were also given an opportunity to discuss ways to improve their organization’s outreach efforts and increase awareness regarding available services. The most common responses were related to funding (31%), staff (18%), technology (14%), and collaboration and communication (13%).¹⁸ A selection of respondents’ comments is shown below:

Funding

- *“More financial support to increase and professionalize our efforts. It would be great to do some focus groups with our target groups to know specifically what they find helpful/useful and what method they like to receive this information.”*
- *“A real website and more funding to have paid staff to do the outreach.”*
- *“Additional funding to support administrative costs for outreach.”*
- *“[We] need additional funding for personnel to do education and outreach.”*
- *“We serve a large county with three distinct hubs. We have limited staff. Time and money would help.”*
- *“It is very difficult to do effective outreach in our multimedia age without a sufficient budget.”*
- *“Monies to advertise in the local county newspapers and local TV programming.”*
- *“Need funding for capacity to do outreach. Focus more outside of Essex County.”*
- *“[We] need funds to hire people to do outreach efforts.”*
- *“Funding for more targeted types of brochures, business cards, staff time at community events.”*
- *“Concerned with more outreach, and not enough staff resources. Working with other agencies like Our Deaf Survivors Center to increase knowledge of their program especially for emergency. Need for additional funding to provide trainings to DV/Crime resources in how to develop programs to meet the needs of our low-incidence populations.”*

Staff

- *“The difficulty with outreach is time and capacity. In other words, staff are already busy doing direct service most of the time. When we pause from that to conduct outreach, we*

¹⁸ Respondents’ comments may fall into multiple categories.

create increased need, which sends us back to the office with a busier workload. If we had separate/additional staff to conduct outreach and scheduled it at regular intervals, this might help reduce the problems.”

- *“A dedicated paid staff member to concentrate solely on outreach and education within the community, working on prevention.”*
- *“Increase staffing for outreach and education activities.”*
- *“Increase staff to enable case/court coverage and improve outreach.”*
- *“The organization would need a full time outreach worker to do more than what is currently done.”*
- *“More outreach staff and funding for those positions.”*

Technology

- *“I would like to branch out into social media to connect the agency with more victims.”*
- *“Training and technical assistance with technology and social media.”*
- *“We do not use social media, but it should be considered.”*
- *“Better website and marketing tools.”*
- *“We are working to improve our website.”*
- *“We could use a web developer to maintain and update our website and create an online newsletter.”*
- *“...upgrade our technology, like computers, laptops, tablets, etc.”*

Collaboration and Communication

- *“Additional training/conference forums.”*
- *“An annual collaborative conference would be beneficial.”*
- *“Improve communication within all departments of the office. Communication within the office and with community partners is always beneficial.”*
- *“In general, the number of individuals seeking services from our program is greater than our capacity to serve them. In regards to the adolescent population, it might be helpful to connect with forum for providers who work specifically with adolescents. Our adolescent services tend to be underutilized.”*
- *“Enhanced outreach capacity to new immigrant communities through community partnerships.”*

- *“Greater coordination with allied professionals. Cross-trainings between organizations can boost referrals and understanding of available services within same geographic area.”*
- *“Increase connections [with] community providers and organizations.”*
- *“Further networking with community groups and non-governmental organizations.”*
- *“Our networking and coordinating with other organizations, including police departments, fire departments, Independence House, Safe Plan, hospitals, House of Correction, etc. have been very helpful in our communities on the Cape and Islands.”*

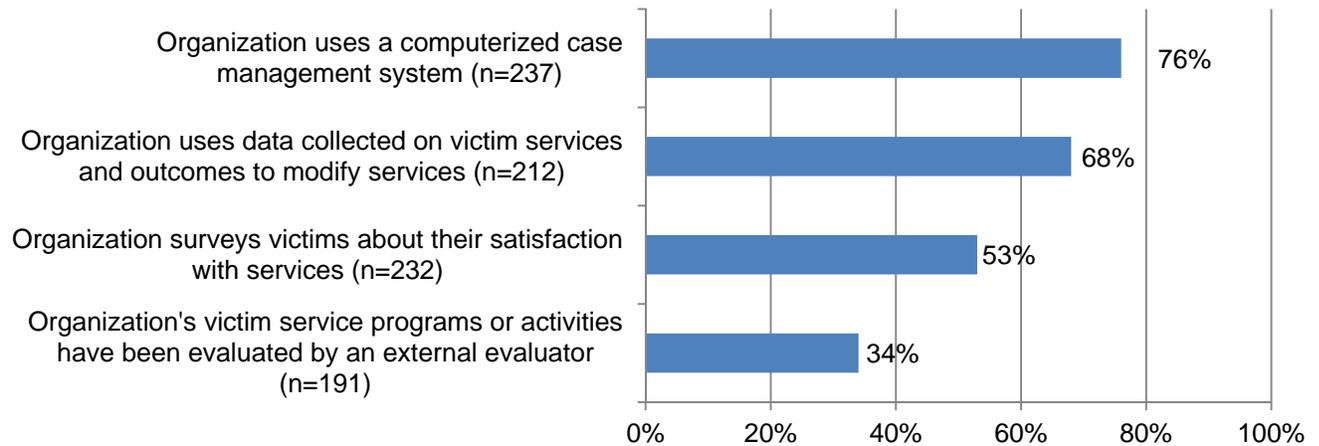
Additional Recommendations

- *“Attend more local community gatherings.”*
- *“I think we could always improve our language availability and translation of brochures. I would like to see our advocates be made available for public speaking and education programs to enrich their own professional development.”*
- *“Speak at more community meetings of services provided, TV ads.”*
- *“Social media, organized and consistent community presentations.”*
- *“To provide outreach systemically to colleges and other organizations that have affected populations.”*
- *“Perhaps some general advertising by MOVA as a central referral base through TV, newspapers, social media.”*
- *“Population specific outreach.”*
- *“Identifying the most successful strategies for specific populations i.e., outreach to teens; outreach to Latinos; parents caring for family members with disabilities etc.”*
- *“Additional free promotional items for table displays - seems to draw attention.”*
- *“Access to more state databases like death certificates so that we can find a next of kin to send the outreach [letter] to. Right now we have to locate the town where the person died and pay to have the information sent.”*
- *“More promotional items would be great to hand out to victims at different events that we participate in and organize throughout the City.”*
- *“Expand geographical catchment for funding and education.”*
- *“To use Facebook and Twitter. We are in the process of developing billboards and promotional items. Continue to network and build relationships with community members. Continue to provide outreach in locations and to people who might not otherwise know about our services.”*

3.1.6 Performance Monitoring and Evaluation

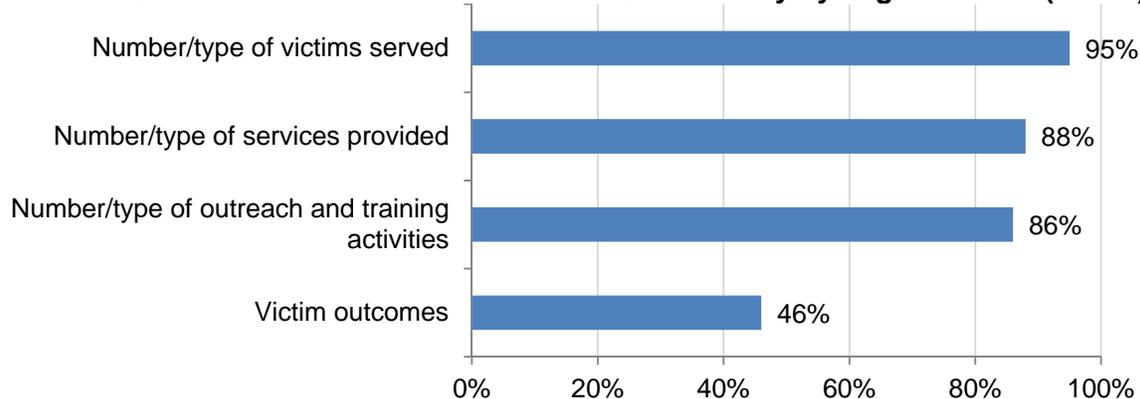
This section provides an overview of service providers' performance monitoring and evaluation activities (see Exhibits 27-28).

Exhibit 27: Performance Monitoring and Evaluation Activities



Respondents who indicated that their organization does not use a case management system were asked to provide further detail on how their organization currently tracks and reports information about victim services. The most common methods reported included other electronic databases (e.g., Excel) (59%) and hardcopy files or records (56%).

Exhibit 28: Performance Measures Tracked Consistently by Organizations (n=218)



Note: The percentages shown in Exhibit 28 do not sum to 100 percent because respondents could select multiple options.

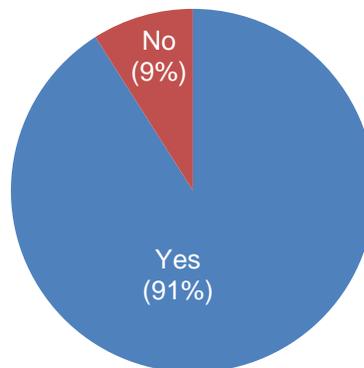
3.1.7 Collaboration

Respondents were asked to rate the degree to which they coordinate services with other organizations in their catchment area using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 29 shows the average respondent ratings.

Exhibit 29: Level of Interagency Collaboration (n=223)	
My organization routinely coordinates services with:	Average Rating
Community-Based Victim Service Organization	4.00
Other Community-Based/Grassroots Organizations	4.27
Corrections	3.50
Court	4.16
Faith-Based Organizations	3.31
Juvenile Justice	3.17
Law Enforcement	4.23
Legal Service Organizations	4.09
Medical Facilities/Providers	4.10
Mental Health Facilities/Providers	4.10
Military	2.54
Probation/Parole	3.50
Prosecution	3.88
Religious Institutions	2.97
Schools	3.82
Social Service Agencies	4.31
State, Local, and/or Tribal Government Agencies	3.75
Substance Abuse Programs	3.52

*The listed sample size represents the number of respondents who completed at least one item; individual sample sizes for each criterion ranged from 198 to 223.

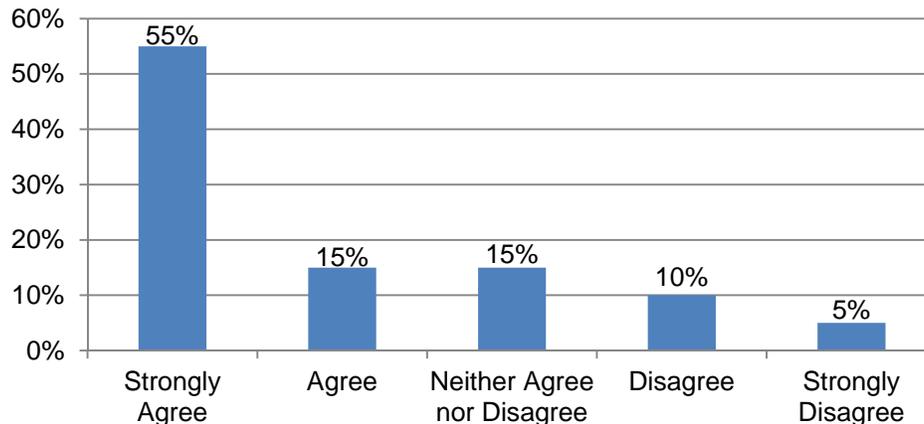
Exhibit 30: Organizational Participation in Collaborative Bodies (n=221)



Note: Collaborative bodies may include committees, task forces, workgroups, or other collaborative efforts.

Respondents rated the degree to which there is a history of interagency collaboration and cooperation among victim-serving organizations in their catchment area using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 31 shows the average respondent ratings.

Exhibit 31: History of Interagency Collaboration and Cooperation (n=218)



Service providers were also given an opportunity to provide recommendations for ways that organizations in their catchment area can improve interagency coordination and collaboration. The most common responses were related to communication (30%), coordinated multi-agency response (23%), and increased awareness of organizations and services (14%).¹⁹ A selection of respondents' comments is shown below:

Communication

- *“Hold quarterly meetings together.”*
- *“Commitment to continuing to allow for staff to attend collaborative program meetings.”*
- *“We need organizations such as (Councils on Aging, churches, Boys and Girls Clubs, YMCA, etc.) to attend the local roundtables. They are a great way to network, get trainings and to get ideas for future referrals.”*
- *“More meetings between organizations.”*
- *“Bi-annual MOVA facilitated gathering of providers in regions would be helpful.”*
- *“Provide funding for ASL interpreting services for collaborative meetings between our agency and general hearing agencies.”*
- *“Consistent roundtable meetings; clarification of roles within High Risk Teams to ensure perpetrator accountability.”*
- *“Specific task force/groups related to homicide bereavement (with children and or adolescents) would be a benefit. Perhaps a follow-up from April's conference.”*

¹⁹ Respondents' comments may fall into multiple categories.

- *“Periodic meetings, with individuals within these organizations assigned to promote this.”*
- *“Keep task force and roundtable meetings on going. Get back to regular time frame.”*
- *“Networking sessions at statewide or regional conferences or forums. Grant funded projects that bring partners together. Community calendar so that we can attend each other’s events.”*
- *“Work collaboratively with one another. To be less territorial and more cooperative and work towards providing the best possible to services to crime victims. Share resources, assist one another.”*
- *“Communicate regarding programs offered, innovative ideas for serving victims, and encouraging dialogue.”*
- *“We need to break down the traditional silos that exist between disciplines and coordinate our communications, strategies, successes and failures to help improve our overall response to crime victims.”*
- *“Participation in community roundtables.”*
- *“Continue to have open, meaningful conversations. Know what services are available and share resources and information. Our organization actively participates in round tables, triads, etc.”*
- *“Share information and resources (e.g., if one develops a ‘guide,’ share it with others so they don’t duplicate efforts); joint meetings and trainings with other organizations or agencies (e.g., training on housing options for survivors could be shared); convening groups of like-staff (e.g., advocates meet to support and share information/resources).”*
- *“I am not aware of a task force for victim services in my area, so increased communication, posting to MOVA listserv would be helpful. If none exists, the VOCA Guidelines trainings bring together many providers, so a workgroup could be added on to that annual meeting as a way to facilitate increased collaboration.”*

Multi-Agency Response

- *“More collaborative meetings - more coordinated response - knowing who is in our neighborhood to connect with.”*
- *“Encourage communication/collaboration as described in Vision 21.”*
- *“To continue to collaborate, become less territorial and strive towards better coordination of services, create a system that is victim friendly, better communication between agencies so that victims do not have to repeat their story over and over again and get their needs met.”*
- *“Continue to work together, become less territorial, put the needs of the victims first, communicate amongst each other to assist in accessing necessary services, be cooperative”*

- *“Have time for planning more joint service efforts that create peer support.”*
- *“A more tightly coordinated response among service providers and municipal and state agencies operating in Cambridge is critical and we are in the process of implementing a new city-wide position to assist in its creation.”*
- *“Developing new memorandums of agreement for tailored coordinated services - this would require additional staffing.”*
- *“Work collaboratively with one another. To be less territorial and more cooperative and work towards providing the best possible to services to crime victims. Share resources, assist one another.”*
- *“We need to break down the traditional silos that exist between disciplines and coordinate our communications, strategies, successes and failures to help improve our overall response to crime victims.”*

Awareness of Organizations and Services

- *“Evaluate current community assets and duplication of service/efforts.”*
- *“Make honest efforts to learn about the breadth and depth of services offered, and the people offering those services, within agencies/organizations.”*
- *“By learning more about what other agencies can offer and making it a point to connect with one another frequently to keep informed about ever-changing services.”*
- *“Build rapport with advocates, visit each other’s facilities to understand what they have to offer and are capable of offering. A constant automatic replenishment of current pamphlets of their services. More networking events.”*
- *“Maybe exchanging statistics regarding those they serve would be helpful.”*
- *“Increased awareness of referral process and specifics of what each agency does.”*
- *“One issue is that some staff at every organization is unaware of other services available outside of their own agency. Better awareness among staff of what agencies are nearby is an important missing piece. A centralized referral system would be ideal but just better training and possibly some more networking events would be a start.”*

Additional Recommendations

- *“Include a wider range of providers, our DV agencies are very closely affiliated and meet regularly.”*
- *“Task forces should address all victim populations and not just DV or SA.”*
- *“Willingness to participate in committees by non-traditional members i.e., mental health agencies; family planning programs; willingness to collaborate on joint funding*

proposals; funding for staff from other agencies/departments to participate (i.e., in a SART); more free local training.”

- *“Be inclusive of entities that don't identify as ‘victim services’ but are working with the same people. Homeless providers, housing agencies and authorities, state benefits offices, mental health providers, etc.”*
- *“Create more opportunities to gather and network.”*
- *“Formalize some collaborations, meet on some consistent basis.”*
- *“Tensions between victim services agencies in my area are cyclical and occur due to the limitations of funding for this work.”*
- *“If there were adequate funding, victim services agencies would not have to compete so much. And would have the time and staff capacity to coordinate services.”*
- *“When a new administrator takes over an agency there should be a mechanism for them to receive training from funding sources regarding existing victim services and how/why to collaborate with those entities without duplicating services.”*
- *“Cross-train especially the hospitals that never have time or desires to send nurse and doctors to train with the locals.”*
- *“Cross training and structured forums to network.”*

3.1.8 Challenges and Barriers to Service Delivery

Respondents rated the extent to which their organization faces barriers in providing services to crime victims using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 32 shows the average respondent ratings related to various types of service delivery challenges.

Exhibit 32: Organizational Challenges to Service Delivery (n=203)*	
The most critical barriers my organization faces in providing services to crime victims include:	Average Rating
Lack of interagency collaboration and coordination.	2.69
Lack of knowledge regarding other available services in the catchment area.	2.59
Lack of general public awareness regarding programs and services offered by my organization.	3.10
Eligibility restrictions (e.g., age, income, victimization type).	2.42
Lack of sufficient financial resources to meet demand for services.	3.92
Lack of sufficient staff to meet demand for services.	3.72
Staff retention.	2.83
Lack of training and educational opportunities for staff and volunteers.	2.70
Lack of in-house policies and procedures to guide organizational practices.	2.32
Lack of language accessible services.	3.02

Exhibit 32: Organizational Challenges to Service Delivery (n=203)*	
The most critical barriers my organization faces in providing services to crime victims include:	Average Rating
Lack of culturally accessible services.	2.94
Lack of accessible services for persons with disabilities.	2.67
Lack of transportation for victims to access services.	3.32
Lack of knowledge regarding the needs of victims of certain crimes (e.g., military sexual trauma, human trafficking).	2.80
Lack of services designed for victims of certain crimes (e.g., identity theft, stalking).	3.06
Reaching underserved victim populations.	3.31

*The listed sample size represents the number of respondents who completed at least one item; individual sample sizes for each criterion ranged from 191 to 203.

When asked to provide recommendations for overcoming organizational barriers to service delivery, the most common responses were related to funding (55%), education and training (22%), and staff size (20%), followed by transportation (16%) and service accessibility (14%).²⁰ A selection of respondents' comments is shown below:

Funding

- *"Funding for disability/language accommodations."*
- *"Funding of a statewide language line for all community organizations to utilize for a low fee or free of charge."*
- *"Funding resources. Need for increased funding to expand services to provide more staff to provide more mental health and advocacy services to more victims."*
- *"Funding to provide dedicated staff to work directly with underserved and culturally specific populations."*
- *"Ideally, we could get more financial supports for clients and have more money for staff to meet the high demand for services (which is compounded by our covering a large rural area)."*
- *"In our situation more funding for communication accessibility would greatly improve things."*
- *"Increased funding; increased salaries to recognize work we are doing."*
- *"It all comes down to money. More money would provide the ability to hire staff that could do more outreach to underserved populations. More money could provide the ability to send more staff to more trainings or hire trainers to come in-house. More money could provide better training on computer skills such as excel, data entry and collection, social media formats, etc."*
- *"More financial resources."*

²⁰ Respondents' comments may fall into multiple categories.

- *“More resources to hire bilingual staff and provide services in general.”*
- *“The lack of funding to meet the needs of all victims of crime.”*
- *“With an increased budget and staff we would be able to overcome most of the barriers.”*
- *“Government could provide more flexible funding (e.g. fund outreach and training, not just direct services; provide funds for client assistance, not just program costs; better fund salaries for program staff so they can earn a living wage).”*

Education and Training

- *“Attend more trainings and outreach into the local communities.”*
- *“More consistent education/training that has follow-up not just one dose.”*
- *“More training - gatherings for victim service providers - cross-program/service area connection.”*
- *“Training and education surrounding the needs of all communities rather than just high crime locations, i.e. military, sexual trauma etc.”*
- *“Training for community providers about services/victims needs and the barriers they face.”*

Staff Size

- *“Additional culturally and linguistically competent staff.”*
- *“Having more staff available to work with clients so that the wait for services is not as long.”*
- *“In our area we need a focused person to work with LGBT communities and provide outreach.”*
- *“Increased our services to underserved populations. Have specifically trained staff who work solely to reach out to communities that are underserved.”*

Transportation

- *“Need additional funding and community wide transportation system.”*
- *“See if MBTA will donate a certain number of bus and subway passes for victims of crimes.”*
- *“Some collaboration with FRTA to increase free transportation for people with disabilities and low or no income would be very helpful. Many types of appointments are not covered by prescribed transportation under MassHealth, so there is a very large service gap for people who cannot afford or otherwise access FRTA for transportation.”*
- *“We are located at a large urban teach hospital. Our clients are predominantly from the inner city and often have to travel through violent neighborhoods to get to us. We have one satellite office but I think we should have more.”*

Service Accessibility

- *“Develop programming that specifically addresses cultural and language barriers, create, staff and fund programs that work within the underserved communities and populations.”*
- *“Inter-agency language capacity that reflects the population in our coverage area.”*
- *“It’s not about lack of knowledge about other services; it’s about lack of ability to access. Our population is transient and coping with multiple challenges. They’re harder to serve and are often denied, turned away or unable to follow through with service from other programs.”*
- *“More effective outreach, multi- or bi-lingual staff/internships.”*

Additional Recommendations

- *“In our community, infants and toddlers as well as their caregivers are a huge underserved population that we would love to be able to work with. Expanding services to be able to work with these children and families would help alleviate that barrier.”*
- *“Making a smooth transition for the victim from one agency to the next.”*
- *“Our organization has had some trouble with staff retention due to burn out and/or insufficient compensation.”*

Respondents rated the most critical barriers victims face in seeking services using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 33 shows the average respondent ratings.

Exhibit 33: Barriers Victims Face in Seeking Services (n=202)*	
The most critical barriers victims face in seeking services include:	Average Rating
Lack of available services.	3.39
Lack of awareness regarding available services.	3.86
Victims are aware that services are offered but do not know they are eligible for assistances.	3.52
Victims do not meet income limitations or other eligibility requirements.	2.90
Jurisdiction issues prevent victims from receiving services.	2.74
Victims do not understand the process of obtaining services.	3.68
The process for obtaining services is overly burdensome for victims.	3.53
Victims have to go to many different agencies/organizations to receive services.	3.71
Service providers' hours of operations are not accessible.	3.23
Lack of transportation for victims to access services.	3.82
Victims are unable to get basic needs met, which stops them from seeking other services.	3.96
Fear of deportation/legal status.	3.89
Fear of retaliation against self and/or family.	4.13
Lack of trust in the system.	4.30
Feelings of shame or embarrassment.	4.19

Exhibit 33: Barriers Victims Face in Seeking Services (n=202)*	
The most critical barriers victims face in seeking services include:	Average Rating
Cultural barriers.	4.10
Language barriers.	4.03

*The listed sample size represents the number of respondents who completed at least one item; individual sample sizes for each criterion ranged from 191 to 202.

When asked to provide recommendations for overcoming organizational barriers to service delivery, the most common responses were related to funding (30%), cultural and language accessibility (17%), and outreach (16%).²¹ A selection of respondents' comments is shown below:

Funding

- *“Easier grants to keep language speaking people in positions.”*
- *“Funding for additional legal assistance programs; assistance with creating a panel of Pro Bono attorneys to take on cases in Central Massachusetts (currently there are NONE).”*
- *“Funding for outreach.”*
- *“Funding for victim services agencies that provide comprehensive case management and comprehensive care.”*
- *“Funding provided to help with transportation (to service providers or organizations).”*
- *“Increased social service and safety net funding.”*
- *“There needs to be more money for interpreters, but also training to improve cultural awareness and the needs of Deaf, Deaf/Blind and Hard of Hearing victims.”*

Cultural and Language Accessibility

- *“Court staff with language capacities, (DA office). Police officers need to be more sensitive to victims needs and provide appropriate referrals.”*
- *“Create incentives for organizations to become more culturally competent and to ‘meet victims where they are,’ so to speak.”*
- *“Police departments need more culturally competent officers.”*
- *“Training for cultural sensitivity.”*

²¹ Respondents' comments may fall into multiple categories.

Outreach

- *“More outreach and education.”*
- *“Networking opportunities with agencies of all types. More time in community. More outreach.”*
- *“TV ads and social media outreach, one-on-one outreach via staff and internships.”*

Additional Recommendations

- *“Assisting victims with their basic needs so that they can focus on receiving the more extensive services that they need to move forward with their lives.”*
- *“Develop programming that addresses the basic needs of victims, work more collaboratively together so that victims receive a continuum of care, rather than one that can be disjunctive. Provide programming within the non-English speaking and underserved areas that addresses the fears that many victims may have. Add funds for transportation for victims to receive services, educate the community about the various crimes and address the victim blaming. Provide outreach and education that stresses offender accountability, and promotes victim understanding rather than blaming. Start in the schools at a young age to address issues of interpersonal violence, bullying, etc.”*
- *“Let the victims [be] aware of their rights, regardless of their legal status.”*
- *“Most of these barriers in my experience involve access to a domestic violence shelter and appropriate judicial and police and criminal justice responses.”*
- *“There needs to be much more training/collaboration between ‘victim witness advocates’ from DA’s offices and advocates from community programs.”*

3.1.9 Crime Victims’ Service Delivery Needs

Respondents rated the extent to which there is a need for victim services beyond the current capacity in their catchment area using a 5-point scale (1=Strongly Disagree, 2=Disagree, 3=Neither Agree nor Disagree, 4=Agree, 5=Strongly Agree). Exhibit 34 shows the average respondent ratings.

Exhibit 34: Crime Victim Service Needs (n=189)*	
There is a need beyond the current capacity in my catchment area for crime victim services related to:	Average Rating
Child Care	4.02
Counseling (short- and long-term)	3.87
Civil Legal Assistance (e.g., civil litigation related to criminal case, child custody, divorce, immigration, landlord/tenant).	4.23
Criminal Justice System Legal Assistance/Rights Enforcement (e.g., property return, intimidation protection, compensation assistance).	3.76
Criminal Justice System Advocacy/Assistance (e.g., filing a victim impact statement, court orientation, restitution assistance).	3.48
Crisis Intervention/Counseling	3.56
Education	3.65

Exhibit 34: Crime Victim Service Needs (n=189)*	
There is a need beyond the current capacity in my catchment area for crime victim services related to:	Average Rating
Emergency Services (e.g., financial assistance, housing, medical care).	4.22
Employment Assistance	3.93
Group Treatment/Support (e.g., self-help, peer, and social support).	3.52
Immigration Assistance (e.g., VAWA petition, T-visa, U-visa).	3.75
Information/Referrals	3.20
Job Training	3.72
Medical Assistance	3.46
Mental Health Services (e.g., therapy)	3.80
Notification (e.g., offender release from custody, court notifications)	3.22
Personal Advocacy (e.g., employer intervention, landlord intervention, public benefits assistance).	3.77
Post-Conviction Services (e.g., corrections orientation, offender apology, victim-offender mediation).	3.22
Protection Safety Services (e.g., safety planning)	3.29
Shelter/Housing Assistance (e.g., rental assistance)	4.19
Substance Abuse Services	3.75
Transportation	4.01
Victim Compensation Claim Assistance	3.13

*The listed sample size represents the number of respondents who completed at least one item; individual sample sizes for each criterion ranged from 178 to 189.

When asked to provide information on additional services crime victims express a need for that are currently lacking or unavailable, the most common responses were related to housing (30%) and legal assistance (19%).²² A selection of respondents' comments is shown below:

Housing

- *"Affordable housing!!! Money for basic needs while waiting to find housing/job."*
- *"Affordable housing; once they get a job it's not enough to live and meet basic needs."*
- *"Affordable low income housing is a major concern."*
- *"Assistance with accessing the housing authority program."*
- *"HOUSING - there is never enough housing or basic needs for clients. Transportation is another major hurdle that prevents individuals from job training, housing search, or seeking other supportive services."*
- *"Lack of shelters/housing remains one of our biggest concerns."*
- *"Moms need childcare, housing, and transportation when they are victimized."*

²² Respondents' comments may fall into multiple categories.

Legal Assistance

- *“Affordable legal assistance, trauma-informed therapists.”*
- *“Family law attorneys for the non-offending parent for child abuse victim in home. Most legal services will not take this case as they do not classify this as domestic abuse to be eligible for family law services.”*
- *“Legal assistance for the non-offending parent in minor sexual assault cases.”*
- *“Legal counsel on custody issues, financial empowerment.”*
- *“The need for legal assistance is great. Our clients constantly need legal consultation and representation. We have great difficulty finding legal assistance for clients that is high quality and affordable.”*

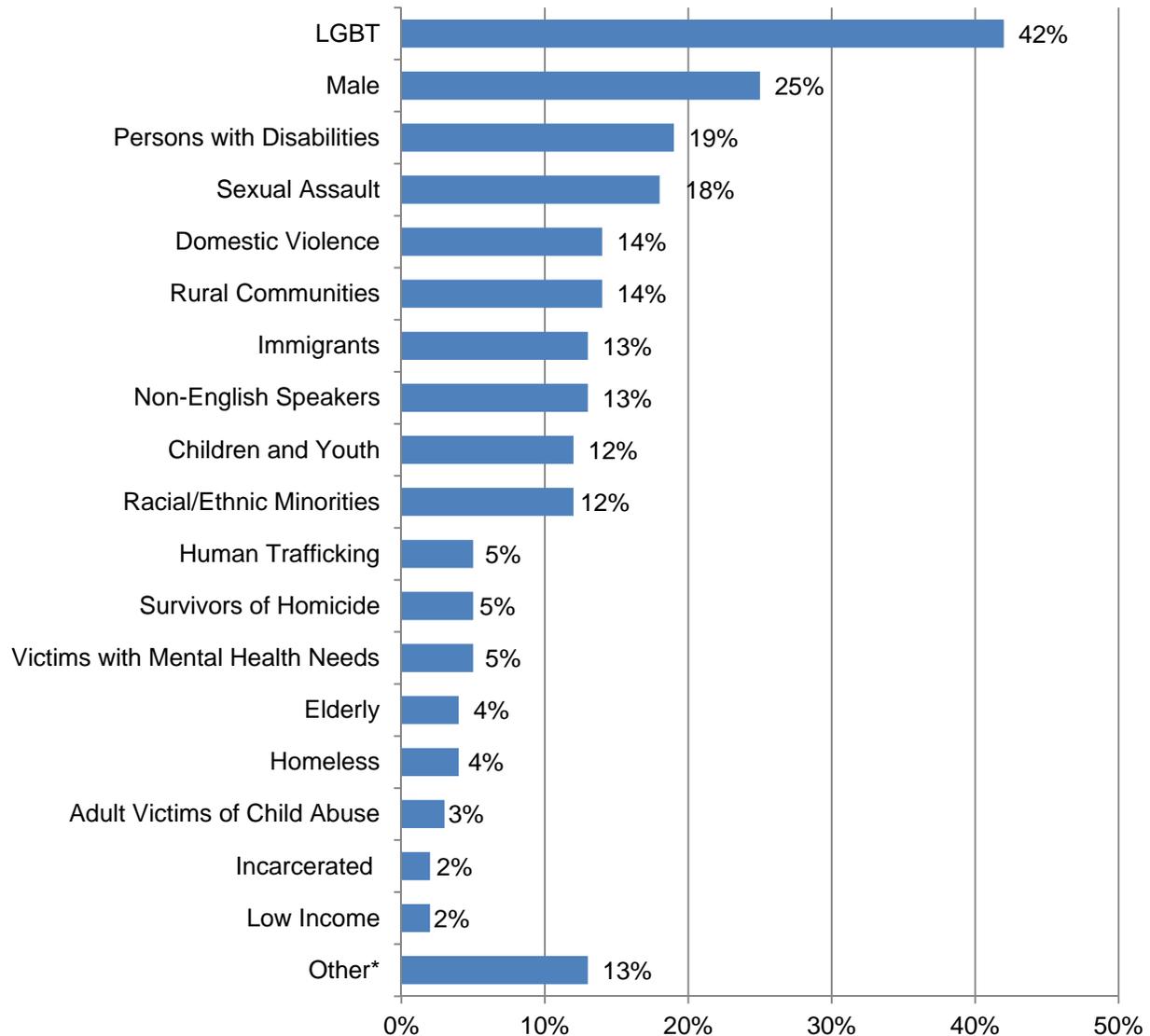
Additional Recommendations

- *“Comprehensive psychological assessment upon intake. Beds for all types of victims of human trafficking.”*
- *“Counseling specifically related to homicide bereavement.”*
- *“Food; Parenting classes (that are free and offered to both parents, not just mothers).”*
- *“More opportunities to connect with peers in a therapeutic social setting.”*
- *“Protection from harm, decent jobs, decent training, cars, income supports, employment/training assistance resources.”*

3.1.10 Future Directions

The following section explores populations identified as currently underserved in Massachusetts, emerging trends and priority areas in victim services, and respondent suggestions for how to improve the provision of victim services throughout the Commonwealth (see Exhibits 35-36).

Exhibit 35: Underserved Victim Populations (n=107)

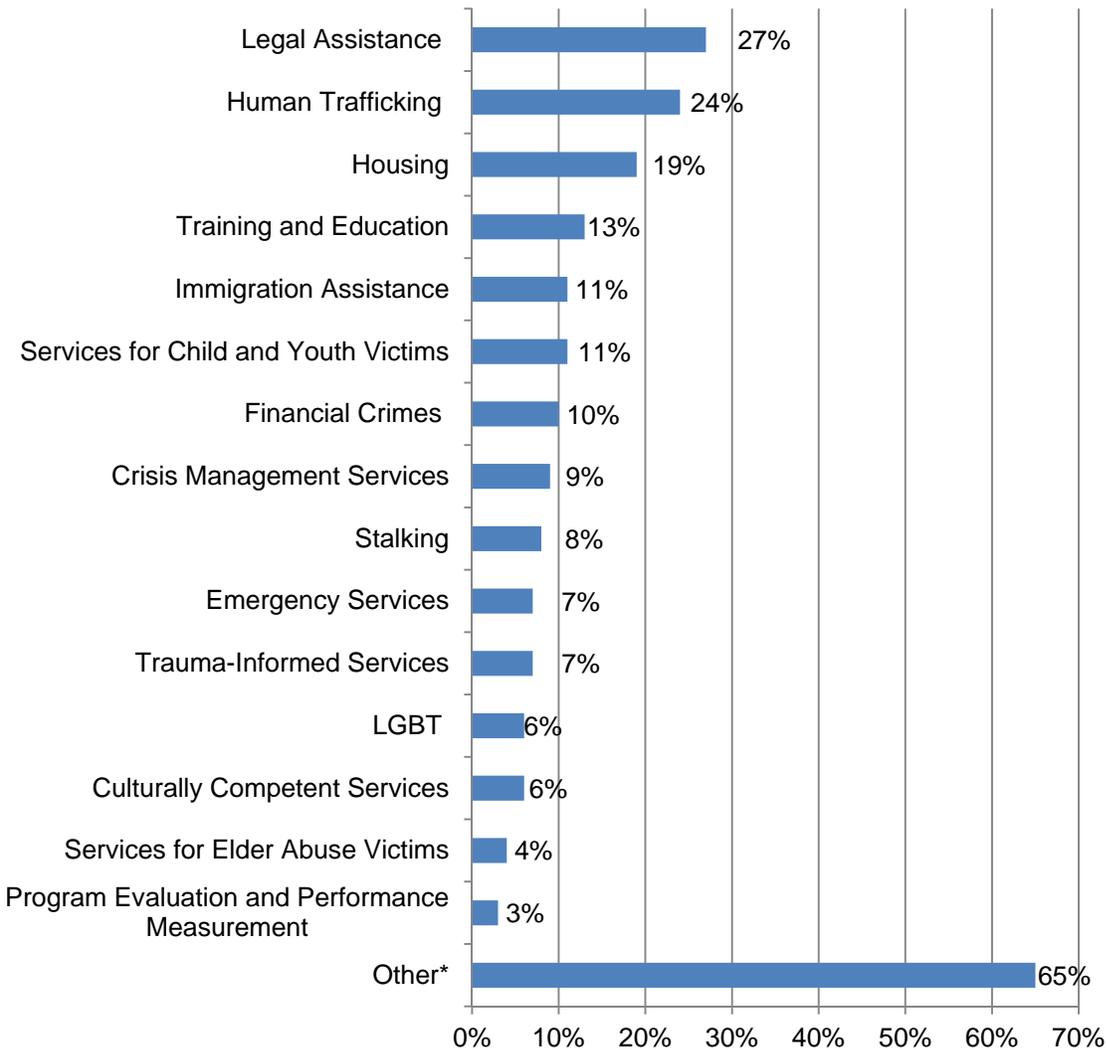


Note: The percentages shown in Exhibit 35 do not sum to 100 percent because respondents could select multiple options.

* "Other" responses included the following: "cyberstalking victims," "[victims with] cultural and language barriers," "faith-based victims," "bilingual/bicultural," "victims of a more affluent status," "international students, graduate students," "young mothers," "Those that practice religions - Orthodox Jews, Muslims," "victims of non-fatal shootings; workplace counseling services for co-workers of homicide; counseling services for families of vehicular homicide victims even when charges are pending," "Witnesses to homicides and other serious cases."

Respondents were asked based on their knowledge and experience to identify three emerging trends or priority issues in the field of victim services that they would like to see addressed through training, technical assistance, or resources for the field. The most common responses are shown below in Exhibit 36.

Exhibit 36: Emerging Trends in Victim Services (n=124)



Note: The percentages shown in Exhibit 36 do not sum to 100 percent because respondents could select multiple options.

*Other responses are listed below.

Many trends and priority areas identified by service providers could not be easily categorized; therefore, a selection of other comments is provided below.

Other Trends

- Community outreach and engagement
- Sexual assault response on campuses
- Prevention

- Effective interagency collaboration and services coordination
- Using expert witnesses for sexual assault and domestic violence cases
- Use of social media for community outreach
- Meeting the needs of transitional age youth
- Making victim services more accessible services for persons with disabilities
- Witness protection
- Teen dating violence
- The disconnect between probate and criminal court
- Assisting victims with limited English proficiency
- Employment assistance
- More accessible mental health services, especially for non-English speakers
- Domestic violence funds for relocation, emergency services, and child care.
- Cyber crimes
- Vicarious trauma of service providers
- Effective use of the High Risk Assessment Tool developed by Jackie Campbell
- Training on batterer's intervention
- How to better support trafficked undocumented victims with disabilities
- Need for low-cost probate representation
- Data management and recordkeeping
- Affordable child care
- Victims of domestic violence in relation to probate court proceedings
- Elder abuse
- Restorative justice
- Higher pay for victim service providers to reduce turnover

Respondents were asked if they had suggestions for improving provision of services to crime victims in their catchment area. A selection of respondents' comments is shown below:

- *“Allocate funding on a more equitable basis to the Islands so that more state funded services could be available.”*
- *“Better communication and coordination of services, especially within the legal system. More available and affordable legal services for victims. Change of emphasis on victim participation in criminal proceedings. More funding for housing and shelter. Task forces to explore alternatives to shelter.”*
- *“Continue to work with one another, address gaps in services, [and] develop innovative programs that specifically address the pressing issues, more funding.”*
- *“Demand more wheelchair accessible providers with numerous linguistic capacities.”*
- *“Finding more ways to strengthen the career of a victim witness advocate, providing strong educational, innovative opportunities for those professionals.”*
- *“Fund more options for services; there are very few service providers who can work with Deaf victims.”*

- *“I think there are many young, inexperienced, untrained staff working with victims in complex and high risk situations, and this is dangerous. Training or experience in the issues/crimes/victims you are working with should be a requirement for these positions. We cannot let up on making sure people in the field understand the basics (like what is provided at MVAA) and services return to being victim-centered. Programs providing high quality services need adequate funding to do what they do. Advocates need more support and opportunities to connect/network with each other as peers.”*
- *“Increased access to civil attorneys, support for participating in sexual assault response teams (SARTs).”*
- *“Increase advocate pay so they stay in their jobs, let advocates be more flexible, and if it is safe let them provide transportation or home visits or visits at a neutral place.”*
- *“Increased collaboration among services is essential- the difficulty being that many services are competing for the same funds and the same populations causing an atmosphere of self-protection rather than collaboration.”*
- *“Major issue[s] about access to all services are transportation needs and dependable child care.”*
- *“Mandatory education regarding DV and sexual assault for judges and prosecutors.”*
- *“More services accessible through technology. Having websites, pages, and apps that victims can use to research and connect with services.”*
- *“More trainings regarding working with victims who are also mentally ill (suicidal, cognitively impaired, etc.).”*
- *“Train and empower faith leaders to support victims, respond effectively and to refer to community services and resources.”*
- *“We are struggling to maintain what we have and make sure services are responsive and effective, while we keep up with new issues.”*
- *“...we need to have better communication skills with our law enforcement. In order to support and provide the victims with safety.”*
- *“While collaboration is generally excellent, it would be helpful if agencies were more knowledgeable about other services in the community.”*

Respondents were asked to provide additional comments or suggestions. A selection of respondents' comments is shown below:

- *“An agency, county wide training on all collaborating services to wrap around the victim.”*
- *“Being able to retain seasoned staff is difficult when working for a non-profit agency. Why is it that those who provide direct services to victims are often the lowest paid no matter their education, background or years of serving victims?”*

- *“Every tax dollar or insurance plan dollar spent on recovery and wellness education is returned through increased productivity and improved general wellbeing of the community.”*
- *“Funding for civil attorneys is desperately needed. We receive calls from crime victims every day in need of free attorneys to help them gain secure their basic, immediate needs. We cannot expect people to engage in the criminal justice system when they are overwhelmed by their housing, employment, education, and immigration status.”*
- *“In some count[ies] we face difficulties from ADA's to sign the U-Visa certificate for the clients victim of crimes.”*
- *“It would be a major breakthrough for our victims to have culturally and linguistically accessible services statewide. Thank you for asking.”*
- *“...Homicide bereavement is completely under served. If it were not for MOVA we would be even more isolated.”*
- *“More training for DCF staff in terms of domestic violence. Client's appear to do everything ‘right’ by obtaining a 209A, calling police, only to have DCF too often tell us that they will remove the children since they do not trust that client will not ‘take him back’....This is a historical issue for all of us working with DCF involved moms who are victimized, do their service plan and continue to have only one hour a week visits....month after month....”*
- *“Most of the crime victims I see also deal with poverty. This is a vicious cycle. The homeless need to be housed (with dignity), education and job training needs to increase.”*
- *“Our victims need housing and childcare. Too many housing programs discourage working because the smallest salary can exempt a family from qualifying for housing. The income guidelines are ridiculous. In addition, the federal government's decision to virtually end transitional housing programs and focus on ‘housing first’ simply does not work for our victims. They need the more intensive case management that is inherent in transitional programs but not in permanent housing or they will fail in those programs. Police departments and court systems too frequently do not reflect the cultural and linguistic needs of the areas and victims served.”*
- *“There has been a movement in the field to focus on in-home services-treatment providers tend to be younger and less experienced in the field as well as more transient, creating multiple transitions for children and families. In addition, more experienced providers are leaving the field of mental health with lower-income families who are victims of crime due to increased burden of documentation required by Mass Health.”*
- *“We believe the faith community has an important role to play in responding to victims and survivors.”*

3.2 Service Provider Interviews

This section provides a summary of respondents' feedback and reactions to key findings from the survey of service providers.

3.2.1 Challenges and Barriers to Service Delivery

FUNDING ASSISTANCE

According to the survey of service providers, lack of financial and staff resources were rated as the two greatest barriers to service delivery to crime victims. These barriers were closely linked, with the majority of respondents reporting that additional financial assistance could most effectively be utilized by supporting staffing. Respondents noted that additional staff are needed just to maintain their organizations' core services.

Many respondents indicated that due to strained budgets, staff are often forced to wear many hats within an organization, which causes the breadth and quality of services to suffer. One respondent broadly noted that lack of sufficient staffing directly impacts organizations' abilities to connect victims to services. This can be particularly problematic with regard to emergency or crisis services, such as emergency housing or the operation of a 24-hour hotline. As one respondent noted, "People need help when they need it and [you] can't put [a] crisis on hold." Staffing support is also critical in rural regions where a handful of staff are often tasked with serving a large catchment area that requires extensive travel to meet with and transport victims to support services and court proceedings. In addition to funding for direct service staff, a few respondents also indicated a need for dedicated funding to support education and outreach positions. In many cases, direct service providers are tasked with conducting education and outreach in addition to their normal client case load and are often not trained in this area. Some respondents noted that more robust outreach and education will also result in the need for additional direct service staff to meet the increased demand in services; therefore, there is a need for staffing at both levels to be well coordinated. Relatedly, a few providers also discussed the use of additional funds for staff training and higher compensation to increase job satisfaction and retention.

Many providers indicated that they would use additional funding to provide basic victim support services, such as: transportation (e.g., public transportation and relocation costs); shelter and housing (e.g., temporary rent assistance, hotel costs); emergency financial assistance; medical care; and child care. A few providers also discussed the need for targeted funding to support their organization's core programs and support services. Rather than attempting to provide services to meet every need, which can dilute the quality of services for all crime victims, one respondent recommended streamlining funding to support organizations' core services, stating that "funding should in some ways be targeted or strategically placed to help people beef up and fill out and re-strengthen their basic missions and [support] the basic needs [of clients]." Another provider echoed these sentiments by stating that more staff resources would help to ensure that their programs are not "running quite so thin" and that victims receive the full benefit of their services.

Service providers also cited a large need to invest in education, community outreach, and trust building within traditionally underserved communities. Providers discussed various ways to use additional funding to support community outreach, including funding victim advocates within community organizations; increased collaboration between victim service providers and community organizations; and providing time and flexibility for victim service providers to engage more directly with underserved communities (e.g., attending community events, meeting with community leaders).

"We as providers probably don't go to as many community events as we should. I encourage and make my staff go to these community events. They need access to us. They may not always come to my office. I need them to see that I will go to their neighborhood."

TRANSPORTATION

As part of the survey of service providers, lack of transportation was cited as one of the greatest barriers to effective service delivery and access to victim services. When asked about the transportation needs that are most important for crime victims, interview respondents most frequently discussed transportation needs related to accessing shelter and housing assistance. Related costs included fares for public transportation, compensation for staff time and mileage to transport victims to a shelter, and long distance travel and moving costs for crime victims to access shelter or housing in other states or jurisdictions far from their home. Due to the lack of shelter availability in Massachusetts, in some cases, providers have had to purchase bus, rail, or plane tickets to transport victims to shelters in other states. Transportation needs related to participating in the court process were the second greatest need reported by providers. In particular, transportation to court in order to obtain a restraining order was the most commonly cited need and often the most critical for ensuring victim safety. Providers also discussed victims' transportation needs related to accessing general support services, such as attending support groups, getting to medical appointments, or applying for public benefits.

Victims' transportation needs also vary greatly by location and access to public transportation. Many providers serving the Boston area reported that transportation is often not as great of a barrier to their clients in cases where services are accessible by public transit. In many instances, these providers reported utilizing taxi vouchers and fare cards to provide victims with transportation assistance; however, they also indicated that funding for transportation assistance is often not consistent or dependable and victims many times cannot pay for transportation themselves. Providers also reported that obstacles can arise when victims need to travel outside of regular service hours; reach services far from their home; travel to multiple locations to obtain services; or need to travel to locations that require multiple transfers on public transit. In contrast, transportation in rural, isolated regions of the Commonwealth is heavily dependent on victim services staff to transport victims. Even in cases where victims are provided with bus vouchers, providers often must transport victims to the bus station. Furthermore, the geographic expanse of rural communities coupled with the lengthy court process often means that providers spend an entire day transporting one victim to court and providing advocacy during a court proceeding.

GAPS IN SERVICE DELIVERY

Findings from the survey of service providers suggest that there is a lack of services designed for victims of certain crimes (e.g., stalking, assault). When asked what types of victim populations are lacking adequate services, responses varied; however, many interview respondents discussed the lack of services designed to address community violence and respond to the needs of witnesses to violence. Providers noted that both victims and witnesses to community violence experience trauma that is currently being served by a fragmented

network of providers. Respondents discussed the need for service providers to be working directly with the communities most impacted by violence to connect individuals with services and supports. Due to high levels of mistrust in the system, respondents noted that community outreach and education are important for reaching this population. One respondent also recommended connecting victims with job training, education, and job opportunities so that they are in a better position to leave violent communities.

Another population that providers indicated frequently lack services is victims of human trafficking. Because of the unique needs of this population, service providers reported that they are often not equipped to provide the adequate type and level of services. Providers also discussed a lack of awareness, training, and capacity to serve child victims and witnesses to violence; victims of identity theft and financial crimes; victims of elder abuse; robbery victims who experience trauma related to the crime incident; and victims of forced marriage and honor violence, which often encompasses many other crimes, such as kidnapping and sexual assault. In response to this question, one service provider discussed the importance of recognizing the multidimensional nature of victimization and the importance of serving the person rather than the crime, stating, "...to base everything by the name of a crime or a definition of a crime can sometimes miss some of the nuances and the experiences that people are really dealing with."

Service providers also had an opportunity to provide recommendations for ways that MOVA can help strengthen and increase the availability of services for these identified populations. Their recommendations largely centered on the provision and coordination of training opportunities, both in-person and web-based, to educate providers on the needs of and appropriate services designed for various victim populations. Relatedly, providers expressed the need for more opportunities to connect with other providers, learn about their services, and share best practices. Providers also recommended that MOVA serve as an expert resource by sharing the latest research on effective victim service strategies and providing tools that providers can use to better connect victims with appropriate services, such as a statewide database of providers that details their services and the types of victim populations served.

LANGUAGE ACCESSIBILITY

Across geographic regions and organizational type, providers reported language accessibility as a notable barrier to providing effective services to crime victims. When asked for recommendations on ways to improve language accessibility, many respondents indicated that although it is not possible to cover every possible language and dialect, it is important for organizations to employ bilingual staff who speak the most common languages spoken in the communities they serve. Likewise, providers indicated that program forms and outreach materials should also be translated into the most commonly spoken languages in their service area.

Several providers indicated that they see the greatest barriers to language access in court. Although interpreters are required to be present at all court proceedings for defendants, crime victims are often not afforded this same right unless they are testifying in court or attending a Grand Jury. In cases where court advocates speak the language, they may be asked to provide interpreter services; however, their advocacy on behalf of the victim may suffer as a result of this dual role and they may also not know the legal terminology required to accurately interpret the proceedings. If an advocate is not available who speaks the language, the cost of an interpreter then falls on the District Attorney's Office or another service provider; however, there is no recourse or accountability if an interpreter is not provided for the victim. Service providers

discussed the need for training of court personnel to reinforce the importance of and obligation to provide interpreter services for crime victims. In addition to improving interpreter services in the court, one interview respondent also expressed the importance of translating major signs within the court into the most commonly spoken languages in order to make the court process less intimidating for crime victims with limited English proficiency.

To improve access for crime victims who speak less common languages, many providers recommended the use of a language line that could be implemented statewide and accessed by service providers across the Commonwealth. Respondents did not have specific recommendation regarding what entity was best suited to subscribe to and oversee the operation of the language line, but a few providers suggested either operating the language line through a government agency or coordinating with a hospital or hotline to make an existing language line more broadly accessible to service providers. Several service providers also recommended that MOVA serve as a resource for connecting service providers with organizations that primarily work with non-English speaking communities, as well as providing training, technical assistance, and tools that organizations can use to encourage and increase their language capacity.

CULTURAL ACCESSIBILITY

In regards to improving the cultural accessibility of victim services, many service providers relayed the importance of meeting victims where they are and creating environments and services that are open, inclusive, and inviting. One respondent noted that a critical element of cultural accessibility is recognizing the varying forms that culture can take, explaining:

Just a general sense and appreciation of culture and the many ways that culture can come out...because culture could be related to age, lived experience, gender identity, sexual orientation, nationality, primary language, race/ethnicity, so many things. We might not be able to prepare for every different combination of culture that a crime victim presents [us] with but that we at least know how to create the environment and the space – both physical space as well as emotional space – that welcomes and includes those experiences.

Several service providers discussed the importance of creating a culture of inclusion to break down stereotypes and biases that may serve as a barrier to service delivery. As one respondent explained, “sometimes it’s a barrier when people don’t feel like the services are for them, whether it’s who the staffing is at the service [provider organization], or how the service is marketed or promoted, or where it’s located that makes it feel like a barrier to access those services.” To help achieve this, many interview respondents expressed a need for enhanced collaboration and coordination between traditional victim services organizations, community organizations, and community leaders that work with specific cultural populations. In this way, providers broadly expressed a need to connect with organizations and individuals who can serve as a bridge to crime victims in communities who may otherwise not seek out services. For example, one service provider discussed the importance of collaborating with and training faith leaders on how to identify crime victims and connect them with appropriate victim services. In particular, providers recommended the following methods for strengthening cultural accessibility of victim services:

- **Fund community organizations to provide victim services and advocacy.** Service providers recognize that many cultural and community organizations serve as critical first responders for crime victims who may not contact law enforcement or a traditional victim service provider; therefore, providing these organizations with funding to hire victim services staff can help to increase victims' access to services.
- **Training on providing culturally competent services.** Interview respondents indicated the need for cultural sensitivity training for all victim service providers to learn how to provide inclusive services.
- **Provide cross-training opportunities.** In order to better understand the intersection between culture and victimization, providers indicated that it would be helpful for organizations specializing in particular types of victimization and/or cultural services to co-facilitate trainings.
- **Information sharing.** Interview respondents expressed the value of sharing information and resources among victim service providers.

"I wonder if it's more of a democratization of victim services where rather than confining victim advocates to district attorneys' offices, non-profits, and hospitals, that they expand their offer to non-victim services agencies so the local Haitian American community organizations, [for example], could hire a victim advocate."

BURDEN ON CRIME VICTIMS

When asked to report what aspects of the process of obtaining services are most burdensome for crime victims, most providers discussed the burden associated with participating in the criminal court process. Respondents expressed frustration with the lack of consistency with the courts' response to crime victims (e.g., inconsistent application of restraining orders); the long

"The farther it is from home and the bigger the building is, the more impersonal it is, the harder I think it is to access services. It just gets more and more intimidating, which speaks to the need, in my opinion, for court advocates."

duration of the criminal justice process, which can make it difficult for victims to participate due to competing employment schedules, lack of child care, and other barriers; the intimidating nature of the court system for many crime victims; and the lack of cultural and language accessibility.

Several providers also cited the burden related to the intake process and eligibility criteria for accessing services. Victims may have to complete extensive paperwork and applications that ask personal and difficult questions only to find that they do not qualify for services. This experience can be traumatizing and frustrating. In particular, the eligibility criteria for victim compensation assistance can be frustrating for victims who do not qualify due to the lag time between the incident and when the crime was reported, citizenship issues, or other eligibility challenges. The lack of coordination among service providers and awareness of available services is also a significant challenge for crime victims. Victims are often referred to multiple agencies before finding appropriate services or they may give up trying altogether.

To help alleviate this burden, service providers recommended:

- Developing a statewide resource manual that details available services and contact information.

- Promoting available services on the MOVA website.
- Providing training and technical assistance on how to support victims who do not qualify for services.
- Encouraging warm referrals among service providers to promote a more seamless service delivery experience for crime victims.

"It's challenging to break down that barrier – that this isn't just about services, it's about human relationships."

Service providers also indicated a need to promote services that encourage relationship building and individualized service provision. As one service provider noted:

Sometimes, unintentionally, victims experience questioning and sometimes blame for what they have experienced, and especially that first response, whoever they might first talk with is so important to them continuing on to contact resources and continue on maybe with the criminal justice system. But then also those ongoing experiences...sometimes I feel, unintentionally, that as providers we might be so focused on getting our jobs done – for example 'I need to complete this checklist or this is the way that I enforce this law or I need to complete these forms' – that we aren't necessarily focused on the people and their primary concerns. So if we can shift our starting point to be meeting people and their primary needs that need to be met and then focusing on some of those other things that could maybe help in those situations.

Another respondent expressed this sentiment, stating:

For us this was a movement, but now it's become sort of industrialized. And I think that people who are survivors who are trying to get services are still looking for human relationships and a place that's acknowledging them for who they are and not just because of their category and what box they can check off. I think that's made it harder and harder for people to feel like reaching out is going to make it different.

The barriers related to meeting victims' basic needs also serve as an additional burden to accessing services or participating in the court process. When asked to describe the most critical basic needs for crime victims, responses varied and included: food, shelter and housing, transportation, clothing, health care, and child care.

3.2.2 Crime Victims' Service Delivery Needs

As part of the survey of service providers, respondents reported that there is the greatest need for services related to civil legal assistance, emergency services, and shelter/housing assistance.

CIVIL LEGAL ASSISTANCE

In regards to civil legal assistance, the majority of service providers reported that there is the greatest need for civil legal assistance related to family law, such as divorce, custody, child support, and alimony. Providers indicated that many victims of domestic violence cannot afford an attorney to represent them in family court proceedings and are left at a disadvantage in the courtroom where their abuser often does have an attorney. Providers also indicated that

because family law cases can span many years and abusers may often manipulate the court process to extend the process and drain victims' resources, pro bono attorneys may be apprehensive to represent victims of domestic violence in family court proceedings.

Although family law is an important area of need, several providers also stressed the importance of meeting the full range of victims' civil legal needs. For victims of sexual assault, privacy was listed as the primary area of need. Legal advocacy related to privacy can take many forms, from protecting victims' records in court to helping victims keep their name off of an employee phone list to ensure that the co-worker who assaulted them cannot access their contact information. The second greatest area of need for sexual assault victims includes legal advocacy around education. Because of the high rates of sexual assault on college campuses, attorneys are often needed to advocate on behalf of victims and negotiate with universities to ensure victims are able to stay in school and maintain their educational trajectory. Relatedly, K-12 educational legal advocacy for youth was also cited as an emerging area of need for youth victims and their families. Finally, legal advocacy and assistance related to immigration and assisting victims with visa applications and citizenship was another large area of need.

Providers listed the following recommendations for improving victims' access to civil legal assistance:

- Train victim service providers so that they are able to provide legal advocacy that does not require a lawyer, such as assisting victims with protection orders.
- Fund more attorneys to provide trauma-informed civil legal assistance to crime victims.
- Develop a broadened network of pro bono attorneys who are available to assist crime victims with their civil legal needs.
- Provide training for pro bono attorneys on providing trauma-informed legal assistance.
- Establish a victim legal assistance helpline to provide basic information and referrals.
- Include language in applications for victim assistance funding that civil legal service providers are eligible to receive funding.
- Train victim service providers to identify victims with civil legal needs and provide information on where to refer for legal assistance.
- Develop a specialized intake form and/or questions to assist victim service providers in identifying victims with civil legal needs.

HOUSING AND EMERGENCY SERVICES

When asked about the most pressing emergency services that victims express a need for as a result of their victimization, service providers most frequently discussed access to emergency shelter and housing. When discussing housing, many providers described the issue as systemic and were unsure of the best approach for improving access to housing. They stated that the greatest barrier to accessing housing is the shortage of affordable long-term housing for crime victims. Because of this shortage, victims are staying in shelter and transitional housing for longer periods of time, meaning there are fewer beds available to provide emergency shelter. This shortage is also contributing to a growing population of victims who are homeless or who

are at risk of homelessness. Some victims may seek temporary housing with friends or families, while others are placed in hotels; however, these victims often do not access additional services and supports.

Providers listed the following recommendations:

- Encourage funding and investment in prevention services to keep victims in their home.
- Provide legislative advocacy to increase affordable housing in Massachusetts.
- Increase transitional and supportive housing options for victims who do not wish to go to a shelter.

3.2.3 Underserved Victim Populations

Respondents to the survey of service providers identified Lesbian, Gay, Bisexual, and Transgender (LGBT) victims, male victims, and victims with disabilities as the three most underserved populations in Massachusetts.

LGBT VICTIMS

Interview respondents reported that LGBT victims are most commonly seeking services related to domestic violence, sexual assault, stalking, commercial sexual exploitation, and hate crimes. In large part, providers indicated that LGBT victims are in need of the same services as other crime victims, such as shelter, legal services, medical assistance, counseling, and support groups; however, there is a general lack of knowledge regarding the unique barriers that LGBT victims face and how to provide culturally competent services. Service providers indicated that there is a large need to develop services for LGBT victims, and transgender victims in particular, that are welcoming, inclusive, and non-judgmental. To help accomplish this, service providers listed the following recommendations:

- Provide funding for organizations that primarily serve the LGBT community, such as The Network/La Red and The Gay Men's DV Project, to provide training and technical assistance to victim service providers across the Commonwealth so that they can integrate culturally competent practices into their services.
- Utilize MOVA's Victim Services Bulletin to highlight the needs of and barriers faced by LGBT victims, and disseminate information on available resources and services in Massachusetts.
- Raise public awareness and visibility of LGBT victims and available services.

MALE VICTIMS

Many service providers reported a large degree of overlap between the needs of LGBT and male victims, indicating that male victims are most commonly seeking services related to domestic violence, sexual assault, robbery, assault, and community violence. According to service providers, the greatest barriers to accessing services for male victims is the stigma related to their victimization, not being believed or validated when the victimization is reported, and traditional expectations of masculinity. The services male victims most commonly express a need for as a result of their victimization mirror those reported for LGBT victims; however,

emergency shelter and housing assistance for male victims is a particularly salient need. Many shelters will not accept male victims so there is often a lack of safe emergency housing. Service providers recommended providing additional funding to support separate shelters for men that include safe, appropriate options for transgender victims. Similar to LGBT victims, providers also recommended that service providers receive training on how to create welcoming and inclusive services and environments for male victims.

VICTIMS WITH DISABILITIES

Service providers reported that victims with disabilities are most commonly seeking services related to domestic violence, sexual assault, and financial crimes. Similar to other underserved populations identified in this section, persons with disabilities have many of the same service needs as other crime victims; however, they may experience unique barriers to access. In addition to encountering communication and physical barriers to accessing services, there is also a tendency to minimize the victimization or not take it seriously. Service providers recommended the sharing of information and best practices; training on culturally competent services; and raising awareness among service providers of available services designed to meet the needs of persons with disabilities.

One provider highlighted the need for training on culturally competent services, stating:

On all these issues, the LGBT community, men, disabilities, older victims, [and] people of faith, we need to figure out how to fund technical assistance that allows service providers to integrate those issues into everything they do. A victim should never be shut down because she is talking about what's most important to her. Whether that's faith, or that's her sexual orientation, her age, her disability, whatever it is.

3.3 Crime Victim Data Collection

This section provides findings from focus groups and phone interviews conducted with crime victims in Suffolk and Hampden Counties. This section begins with an overview of participants' backgrounds, followed by information regarding participants' awareness of and experience utilizing victim services.

3.3.1 Background of Participants

In order to protect the privacy of the victims who participated in this needs assessment, interviewers limited the number of questions regarding participants' backgrounds. The sample was primarily female (73%) and included survivors of homicide (49%), domestic violence (34%) and rape (9%). This representation based on respondent gender and crime type was similar to what was reported by service providers, with females and victims of domestic violence being the largest proportion of those served in the area.

3.3.2 Awareness of Services

A minority (27%) of interviewees were told about or given contact information for services through a victim advocate or the District Attorney's Office. Three out of the 11 interviewees (27%) mentioned that they were never told about services at the time of the crime.

Not being told about services at the time of the crime led to many negative consequences

including being denied services and having to pay medical bills and child care out of pocket. One participant in particular was not told about services until the case went to trial many years later. By that time the victim was denied services due to the amount of time that had passed. Victims reported experiencing emotional and financial distress compounded on top of the distress from the crime as a result of this denial or lack of knowledge of services.

For victims who were not told about available victim services at the time of the crime, many (46%) became aware of services through friends, family, and other community members. Some victims had family members that worked in victim-related fields of employment (e.g., hospitals) or had friends that had experienced similar types of victimization. Other interviewees (27%) learned of services by doing their own research.

A selection of respondents' comments related to awareness of services is shown below:

- *"I had gone to church and there was a woman who spoke, who preached that Sunday. They were saying how they were going to offer a domestic violence seminar. I went to that and she did a 'this is what domestic violence is and these are all the red flags' and she gave a sheet basically with different categories of domestic violence. I realized that I had experienced them all. Long story short, I had to leave and she passed out her card so I took one. I called her and she offered help and counseled me in home and talked me through it. That's how I got introduced to SafeLink."*
- *"I just went to [a] hospital, went to [a] hospital and saw doctors and that's all I got."*
- *"I was in my sister's house and then we talked about my situation and there's a woman around and she said, 'Oh you're a victim [of] domestic violence, you should contact people in domestic violence to help you.' And she gave me the number to call."*
- *"I would say I wasn't aware of any services aside from the work that I did with the advocate through the District Attorney's office. That was the main point of contact for me. When I first got the news I ended up going to the hospital and [the victim advocate] came there with several detectives. "*
- *"In my case, during the trial the District Attorney's office contacted me with a number and I called the number and I decided to get help for myself."*
- *"My sister in law is a masters, bachelors, and is going for her PhD in child welfare so I have a lot of people helping me with the services, getting to know what I need. Let me see, Safe Passages helped us a lot, that was the main [organization] that helped us."*
- *"No one from a help system contacted me. I was just wallowing, drowning, literally drowning in the court system. I was not prepared for that experience and I was just wide-eyed and traumatized and hollow. I was just a shell of a person. I didn't know where I was. This is what happens and if someone had been able to pick up the phone and call me and say, '[Name] we're from so and so agency; we know exactly what's happening to you. Would you come in? We want to talk.' And I would say, 'Yes, yes, please I need to talk to someone now.'"*
- *"The services were never offered until we went to trial which was back in September of 2014 and at that time my advocate applied to the services for me but I was informed that*

because of the amount of time I couldn't get them. And it wasn't fair because I did everything right; I reported right away."

- *"Yes, the murder happened in [county] and you are assigned a victim advocate immediately which is not the case in every county in Massachusetts. The first victim advocate that was assigned to our case gave me info about victim compensation that was it in terms of letting me know what services were available."*

3.3.3 Experiences with Services

Victims reported having both positive and negative experiences when accessing victim services. Many crime victims reported that having their basic needs met was the most helpful service they received following the crime. In particular, victims appreciated the financial assistance they received (e.g., aid to cover the costs for counseling, transportation, funeral expenses, tuition, and food). Domestic violence victims in particular discussed being able to focus on other pressing needs when they knew they did not have to worry about finding money for food.

When victims were not able to get financial assistance, it was identified as a notable barrier to accessing services. Multiple interviewees were frustrated about having to pay for parking at the courthouse and reported that this felt like a "re-victimization." Some victims who tried accessing financial assistance described the financial aid forms as overly burdensome and complicated, and more often than not the victims were unaware of any financial aid that they may have been privy to.

Victims also noted the financial impact of the crime and the importance of financial assistance as it related to their employment. Interviewees mentioned having to take many days off of work due to court rescheduling. These victims reported emotional strain due to the constant rescheduling during trial. Some interviewees also mentioned feeling pressure to go back to work too soon after the victimization because they no longer had any paid time off.

Victims of domestic violence reported that housing or having a safe place to stay was critical following their victimization. This included being allowed to visit shelters on an as-needed basis, and being allowed to stay at shelters for longer than the maximum stay (e.g., three months) if victims were unable to locate alternative housing. Similarly, some co-victims of homicide mentioned wanting to move out of their neighborhoods, where the crime occurred. These interviewees reported that they encounter friends and relatives of the perpetrator and feel unsafe. These victims often mentioned financial barriers as the primary reason they were unable to move out of their neighborhoods.

Victims with disabilities reported that they sometimes had difficulty accessing services (e.g., shelters). According to respondents, many shelters lack disability accommodations, reducing the amount of shelter options available, and therefore the amount of open space in these shelters. These victims also noted challenges accessing the transportation system "RIDE." In particular, victims noted the need to allow users more than five minutes to reach the car if they have mobility difficulties.

A selection of respondents' comments related to having basic needs met is shown below:

- *"I don't want to keep living in the same city where my son was murdered. The murderer has friends and we come across each other quiet often. The city's only so big."*

- *“I would want help with relocating my family because I feel victimized every time I see one of the perpetrator’s friends or family members. I would want victim compensation and help relocating in order for me not to feel threatened. I feel like every moment something could happen and my kids are in danger.”*
- *“This is why I know Phoenix House. Every time I feel like I want to go, I go. They told me I can come anytime I want. Sometimes I feel like going there, I spend day and night and I come back home; that’s what I always do.”*
- *“Time off too, all the time off you take from work. I was faced with so many reschedules and trials. My father couldn’t be in the room with me to support me and so we used up all of my support and all the people that wanted to be with me they used all of their time off and then finding out his lawyer did this and the trial got pushed back, I almost had to testify by myself. There should be something for your time. Our time is more valuable than the person who is sitting in that other seat.”*
- *“When we go to court we have to pay for parking. Something as simple as just paying for parking. When I went through the trial for my [relative], we were at \$180 parking, just parking not lunches, just parking. And once again we are getting re-victimized. Why do I have to pay for parking when I am going there to defend my [relative’s] honor defend my [relative’s] name?”*

In addition to having their basic needs met, victims identified access to victim advocates and service providers as a critical service that helped them in the aftermath of the crime. Crime victims mentioned positive experiences with advocates when they were well trained and went above and beyond the call of duty. This included offering to drive victims to therapy appointments when they were too emotional to drive, being present at press conferences to provide emotional support, and keeping in touch even after the case had been settled. Victims spoke of the bond that was built through long-term contact with the advocate, and the comfort of having someone familiar with the case or situation checking in on them throughout the years. Victims also reported that it was helpful to have an advocate that kept them up-to-date on court proceedings, even when the trial spanned multiple years.

When asked to identify the specific elements that were important in a victim advocate, victims noted that it was helpful to have an advocate that was present immediately following the crime (e.g., showing up alongside first responders, or being present at hospitals or shelters). They also noted that continuity (i.e., having the same advocate throughout the case) was important.

Victims reported that it was helpful to have more experienced advocates who were able to represent their clients’ interests in court even if it occasionally conflicted with the interests of the District Attorney’s Office. Some interviewees also mentioned the importance of having an advocate that had background knowledge specific to their victimization. For example, victims of domestic violence reported that domestic violence advocates were often able to dispense experiential advice. Victims mentioned that each crime and each person’s response to that crime is different, and working with someone that understood and had more experience with the specific issues that arose with their particular type of victimization was helpful. Clients also mentioned feeling more comfortable with advocates that understood their culture and could speak their native language. Victims with English as a second language also mentioned feeling more comfortable when translators were present at all appointments including visits with lawyers, therapists, and shelters.

Crime victims reported having more trust and faith in the District Attorney's Office when they were provided with regular information about the status of the trial, even if it spanned multiple years, and were treated as partners. One victim, in particular, appreciated being included in decisions and being invited to attend meetings about the case.

Negative experiences with victim advocates arose when advocates were inexperienced, unsupportive, insensitive to religious beliefs, and more concerned with the needs of the District Attorney's Office than those of the victim. One interviewee mentioned a negative experience she had with the police officers, which were her first point of contact. According to this victim, these officers were unaware of and insensitive to her religious beliefs and did not understand why she wanted to see the bodies of the deceased within a day of their passing, which was a part of her religious beliefs. The officers also failed to inform her that the bodies were being moved to a different morgue until after the fact. Other crime victims mentioned feeling that their advocates did not prepare them for the possibility of a trial spanning multiple years or for the emotional distress that making a victim statement can invoke.

In addition to having a victim advocate, four interviewees identified counseling as an important service. Victims reported that it was helpful to have someone to talk to and a professional to help them deal with their emotions. Victims mentioned that being able to talk to a third party was especially useful during the long trials.

A selection of respondents' comments related to service providers is shown below:

- *"[The victim advocate] became really close with my sons and my husband, and was perceived by all of us as a really valuable family friend."*
- *"But I found the police were not well trained at all, to come and tell me what they did."*
- *"My daughter and I and [victim's] partner have felt very much alone in the process. We feel that our victim advocate has been in this job for a long, long time and has been totally desensitized. I've met a victim advocate from Springfield who I really thought was very compassionate very kind, I don't find that to be true about my victim advocate at all."*
- *"She came to our house with the investigators very early on within the first few days. Unfortunately, it wasn't a good experience. It was [a] young inexperienced person who didn't understand the nature of her job and we ended up with a new advocate. She seemed to be more interested in representing the interests for the District Attorney's Office then in representing us as an advocate with the District Attorney's office."*
- *"She was a true advocate. She would go toe to toe with the District Attorney and say, 'You need to give my client this information or you need to explain what you're doing here.' And that's a very tricky job because she worked with the District Attorney but she has to be able to stand up to them when she needs to."*
- *"We did things like we had a press conference to announce that we were offering a reward and [the victim advocate] came to that and was with us for that in our home. And I had an appointment with my therapist right after that and she said, 'Well you are not going to that by yourself so I will drive you and wait for you and bring you back.' Things like that, that were beyond the call of duty."*

4. Study Limitations

Although the needs assessment marks an important first step in understanding the range of victim services in Massachusetts, it is important to note some key limitations. A primary limitation to this assessment is its exploratory nature. The instruments used in the needs assessment are limited to self-reports, which relies on respondents' perceptions and memories. In addition, service providers and crime victims volunteered to participate in the needs assessment, which can result in self-selection bias and a group of like-minded people. Furthermore, the use of non-probability sampling methods (i.e., snowball sampling and listserv dissemination for the service providers' survey, and service provider outreach for the victim focus groups and phone interviews) in recruiting participants limits the ability to assess representativeness and generalize findings. For the above reasons, a valid response rate could not be generated.

5. Discussion and Recommendations from Service Providers

In regards to funding assistance, many service providers (76%) reported a high dependence on state and Federal funding sources to sustain their current victim service programs. When asked how they would sustain their programs in the future should funding change, providers most commonly reported that their organization would reduce programs and services or seek other grant funds, such as foundation or local government grants. A few respondents also indicated that their organization would look to private donations, reduce staffing levels, or increase demands on staff to sustain their program.

Fifty-percent of respondents indicated that their organization has no formal requirement for staff training; however, among those organizations that do require training, training hours were largely reserved for topics related to victim services. As part of the service provider interviews, many respondents indicated that the low percentage of organizations with formal training requirements is most likely linked to insufficient resources and staff time. Among providers representing MOVA-funded organizations, 15% reported that they have never participated in TTA provided by MOVA. In contrast, a high percentage of both MOVA- (74%) and non-MOVA (55%) funded providers reported participating in MOVA's Victim Rights Conference in Boston. The majority of service providers (52%) who have participated in MOVA TTA activities also reported being extremely or very satisfied with the TTA they received. The greatest TTA needs expressed by service providers were related to professional development, followed by program monitoring and evaluation.

Aside from a reported need for additional funding and staff support to improve organizational outreach, service providers also provided suggestions for improving outreach through the use of technology, such as social media and website development; enhanced communication and collaboration with other service providers; outreach focused on specific populations (e.g., youth, campus community, persons with disabilities), and improved language access for victims with limited English proficiency. In regards to performance monitoring and evaluation, many providers reported that their organization consistently tracks performance measures related to the types of victims served (95%), services provided (88%), and outreach and training activities (86%); however, less than half (46%) of respondents indicated that their organization tracks

information related to victim outcomes, such as measures of improved victim well-being (e.g., employment, health, safety, financial).

Service providers reported most frequently collaborating with social service agencies, other community-based/grassroots organizations, law enforcement, and courts, whereas the lowest levels of collaboration were reported with military and religious institutions. In addition, respondents reported a high level of involvement in collaborative bodies, such as workgroups or task forces, as well as a strong history of interagency collaboration and cooperation in their catchment areas. When asked to provide recommendations for improving interagency collaboration and coordination, providers most commonly referenced the need for greater communication through more regular meetings with other providers and stakeholders; a multi-agency response to meet the needs of victims; a greater awareness of other organizations and services; inclusion of non-traditional partners in collaborative efforts; formalization of partnerships and collaborative initiatives; and training.

The greatest organizational barriers to providing services to crime victims reported by providers included a lack of sufficient financial resources and staff to meet the demand for services, followed by a lack of transportation for victims to access services and challenges reaching underserved victim populations. When asked to provide recommendations for overcoming these barriers, service providers most frequently cited funding; education and training; more staff; especially those with specialized skills (e.g., bilingual, trained to work in underserved communities); improved transportation options; and greater accessibility of services in regards to language and cultural competency. Service providers were also asked to report what they perceive to be the most critical barriers victims face in seeking services. Respondents most commonly reported a lack of trust in the system, feelings of shame or embarrassment, fear of retaliation, and cultural barriers. Aside from additional funding support, providers recommended addressing these barriers by increasing cultural and language competency among providers and key stakeholders; more outreach to the community; and addressing victims' basic needs so that they can focus on other needed services and supports. Relatedly, service providers reported that there is the greatest need for services related to civil legal assistance, emergency services, and shelter/housing assistance.

Respondents also had an opportunity to discuss populations within their catchment area that are currently underserved. The most highly cited populations included LGBT victims (42%), males (25%), persons with disabilities (19%), and victims of sexual assault (18%). Finally, providers were asked to identify emerging trends or priority issues in the field of victim services that they would like to see addressed through training, technical assistance, or resources for the field. The most common responses included legal assistance (27%), human trafficking (24%), and housing (19%).

5.1 Recommendations for Policy and Practice

Findings from the needs assessment help to provide a better understanding of the range of victim services in Massachusetts, gaps in service provision, barriers and challenges to service delivery, and emerging trends in victim services. In addition, these findings also highlight important recommendations on how MOVA can help to improve the field's response to victims of crime throughout the Commonwealth. A selection of service providers recommendations include:

Training and Technical Assistance

- Offer trainings across the Commonwealth to ensure that training opportunities are geographically accessible.
- Deliver web-based trainings to reduce the travel time and costs associated with participation in trainings and conferences.
- Incorporate training into funding requirements to encourage organizations to prioritize more staff training.
- Reserve a portion of grant funding that is designated for training and professional development.
- Provide information and resources to help organizations connect with training opportunities.
- Host a webinar series throughout the year to provide trainings that are tailored for victim service providers at all stages of their career.
- Build in time for networking and team building at trainings.
- Support technical assistance and cross-training that will give organizations the tools and resources to integrate culturally competent practices into their services for all crime victims.
- Provide regular regional trainings that focus on service delivery to different victim populations.

Collaboration and Partnerships

- Ask organizations to collaborate as a requirement of their grant (e.g., establishing MOUs to jointly provide programs or services).
- Modify the grant application to ask providers about the outcomes of their collaborative efforts (e.g., strengthening referral mechanisms), as opposed to just asking about the types of collaborative events in which organizations participate.

Funding Assistance

- Incentivize and encourage organizations to strengthen their core programs and services as opposed to expanding or diversifying services beyond their capacity.
- Provide technical assistance to organizations that are in need of funding but are frequently denied funding assistance because of a lack of grant writing experience.
- Promote community outreach, education, and trust building through additional funding support.
- Fund non-traditional community organizations to provide victim services and advocacy.

- Specify in grant applications for victim assistance funding that civil legal service providers are eligible to receive funding.

Information Sharing and Resources

- Sponsor a forum for service providers to connect, learn about each other's services, identify gaps in services, and share information and best practices.
- Serve as an expert resource by disseminating the latest research on victimization and effective victim service strategies.
- Develop and manage a statewide database of victim service providers that can increase awareness of services and strengthen referral networks among providers.
- Utilize MOVA's Victim Services Bulletin to disseminate information and resources on available services and best practices.

6. Discussion and Recommendations from Crime Victims

Crime victims had numerous recommendations for how to improve services and crime victims' experiences in receiving services in the state of Massachusetts. The recommendations are provided below, and are grouped into four topic areas: awareness of services, service providers, financial compensation, and additional recommendations.

Awareness of Services

All interviewees mentioned the need to increase the awareness and accessibility of information about available victim services. Interviewees reported that awareness should be increased not just among victims but also the general public. Interviewees reported that greater awareness would allow crime victims to more easily reach the services they require. Suggestions for improving awareness included:

- Increase advertisement about services; this includes putting up billboards and producing commercials.
- Provide additional training to first responders and other providers (e.g., nurses, doctors, social workers, police officers, lawyers) in order to ensure that they are aware of available victim services.
- Ensure that the printed information on available services is tailored to a variety of audiences, accessible in a variety of languages, and the appropriate reading level.
- Create a booklet or pamphlet that includes general information and contact numbers on a variety of services available for all crime victims.
- Increase youth's awareness (e.g., hold a forum, have a survivor speak at schools) of crime, victimization, and available victim services.
- Have first responders ask victims if they would like a service provider to contact them at a later date in instances when an advocate cannot be present immediately following a crime, and then ensure that this follow-up takes place. This can be done by having

release forms available for the victim to sign. This would ensure that all victims that would like information about services can receive it without having to search.

Service Providers

The majority of victims (91%) made recommendations related to service providers. These recommendations included:

- Have a survivor who has already gone through the criminal justice process present with the advocate or available for victims to speak with and process the emotional triggers that advocates may not be aware of.
- Ensure that all victims are provided with a victim advocate immediately following the crime.
- Have advocates continue to check in on victims even after the criminal justice process has concluded.
- Increase training on victimization, sensitivity, cultural competency, victims' rights, and available victim services for police officers, judges, lawyers, and victim advocates.

Financial Compensation

Many interviewees discussed the importance of and need to increase financial compensation in order to allow victims to focus on their recovery and resume a normal life sooner, instead of worrying about meeting basic needs. Recommendations included:

- Provide assistance with travel and parking costs for court dates.
- Improve laws to mandate that employers provide paid leave from work for crime victims.
- Provide relocation assistance for victims, including co-victims of homicide.

Additional Recommendations

- Increase the number and awareness of evidence-based programs, such as Safe Plan and Sexual Assault Nurse Examiner (SANE) programs.
- Offer more support groups, including support groups where family members and friends can participate to learn about victimization and how they can help.
- Provide alternative shelters for domestic violence victims who have children (e.g., a house or apartment), so that they are able to lead as normal a life as possible without compromising their privacy or having to cope with the stigma of living in a shelter.

"I felt like I needed somebody who had been through what I went through. And I feel like if I had that I probably wouldn't even need any mental help. I am a very strong person and I feel like I got through it as a kid and to this moment every time I think about being in that courtroom; that was the worst. Testifying was the worst and there was nothing that they could do to prepare me. If I had spoken with somebody who had been a victim before I would have been better prepared."

"I think you're not in tune to what the person is going through unless you've been through it yourself. It's just not possible for that person, no matter how much education they have, unless you've been through it. Books can't teach you how we're feeling, what we're thinking. And these are just the beginning moments. We have the rest of our lives. We have our kids, our spouses and we hurt. They don't understand our hurt."

- Increase the capacity of organizations to provide holistic services that include medical care, counseling, and financial assistance so that victims are able to have all of their needs met in one place.
- Develop a network of service providers so that everyone is aware of which organizations provide what type of service so that victims can receive referrals more easily.
- Make sure that services are tailored to each victim's specific set of needs.

"I think it's a very individual thing that different people have different needs, different families have different circumstances. I would like to see a team immediately come and evaluate what exactly you do need. And also create bridges. One of the things I've been realizing is many of these agencies do not have bridges to each other."

7. Conclusions

The findings from this needs assessment are intended to provide MOVA with a strong foundation of knowledge from which to inform the FY2016 VOCA RFR process. Additionally, in order to ensure that all MOVA programs and services are responsive to the needs of crime victims and service providers in Massachusetts, the themes and recommendations generated from this needs assessment are designed to provide a better understanding of the range of victim services in Massachusetts; challenges to and gaps in service provision; and emerging trends in victim services throughout the Commonwealth.

Appendix A: Survey of Service Providers

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

Introduction:

On behalf of the Massachusetts Office for Victim Assistance (MOVA) and the Victim and Witness Assistance Board (VWAB), ICF International (ICF), an independent research and consulting firm, is conducting a needs assessment of victim service providers across the Commonwealth. The purpose of the needs assessment is to: (1) better understand the range of victim services in Massachusetts; (2) document gaps in service provision; and (3) inform the Victims of Crime Act (VOCA) grant program administered by MOVA. As part of this needs assessment, the ICF research team is conducting this survey of service providers to assess the experiences and perspectives of victim service providers. Findings from this survey will be used to inform the upcoming FY2016 VOCA Request for Response (RFR) process.

*Participation in this survey is voluntary; you may choose not to answer any question, or stop participating at any time. Your participation in this process, or inability to do so, will in no way influence VOCA funding decisions. The information you provide is confidential. Responses to survey questions will be aggregated and **will never identify you or your organization**. We will only report survey findings for the Commonwealth of Massachusetts as a whole (e.g., what % of all service providers serve victims of elder abuse) and will **NOT** report information at the county, organization, or individual respondent level.*

If you have any questions about the survey or this process, please feel free to contact the ICF Survey Administrator at ICFResearchTeam@icfi.com or by telephone at 703-934-3000 or the Chairperson of ICF's Institutional Review Board, Janet Griffith, at Janet.Griffith@icfi.com or by telephone at 703-934-3000.

- I understand the above statements and agree to continue.
- I do not wish to continue.

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

If your organization provides services other than crime victim services (e.g., medical assistance, employment services), please respond to survey questions based on those divisions and/or programs within your organization that are responsible for serving victims of crime.

Background

1. What is the name of your organization? (*Optional*)

If applicable, what is the name of the division or program within your organization responsible for serving victims of crime?

2. In what county is your organization located? Dropdown

3. Please specify the catchment area served by your organization: (*Select only one*)

- Statewide: Massachusetts
- Countywide (*please specify*): _____
- Multi-county (*please specify*): _____
- Citywide (*please specify*): _____
- Multi-city (*please specify*): _____
- Tribal (*please specify*): _____
- Other (*please specify*): _____

4. Which of the following best describes the organization in which you work? (*Select all that apply*)

- | | |
|---|---|
| <input type="checkbox"/> Community-Based/Grassroots | <input type="checkbox"/> Legislation/Policymaking |
| <input type="checkbox"/> Criminal Justice Government Agency | <input type="checkbox"/> Military |
| <input type="checkbox"/> Education | <input type="checkbox"/> Non-Criminal Justice Government Agency |
| <input type="checkbox"/> Faith-Based | <input type="checkbox"/> Non-Profit |
| <input type="checkbox"/> Human/Social Services | <input type="checkbox"/> Research |
| <input type="checkbox"/> Health/Medical Services | <input type="checkbox"/> Other (<i>please specify</i>): _____ |
| <input type="checkbox"/> Legal Services | |

5. Which of the following best describes your primary role in your current position? (*Select all that apply*)

- Direct Service Delivery/Front Line Staff
- Management/Administrative Staff
- Consultant/Trainer
- Volunteer
- Other (*please specify*): _____

6. Which of the following best describes the number of years of experience you have in the victim services field? (*Select only one*)

- Less than 3 years
- 3 to 5 years
- 6 to 10 years
- More than 10 years

Service Delivery

7. Approximately what percentage of your victim clients are:

- Gender:
 - Females: ____%
 - Males: ____%
 - Transgender: ____%
- Sexual Orientation:
 - LGBT: ____%
- Race/Ethnicity:
 - American Indian or Alaska Native: ____%
 - Asian: ____%
 - Black or African American: ____%
 - Hispanic or Latino: ____%
 - Native Hawaiian or Other Pacific Islander: ____%
 - White, non-Hispanic: ____%
 - Two or More Races: ____%
 - Other (*please specify*): _____
- Persons with a disability: ____%
- Age:
 - Youth under 18 years of age: ____%
 - Adults 18-21: ____%
 - Adults 22-29: ____%
 - Adults 30-39: ____%
 - Adults 40-49: ____%
 - Adults 50-59: ____%
 - Adults 60 and older: ____%
- Language:
 - Limited English Proficiency: ____%

8. Does your organization's victim service program(s) target culturally specific population(s)?

- Yes
- No

If **yes**, please specify: _____

9. On average, approximately how many crime victims does your organization serve in one month? (*Select only one*)

- 0
- 1-10
- 11-30
- 31-50
- 51-100
- 101-200
- 201-500
- More than 500

10. On average, approximately how many crime victims do you serve in one month? (*Select only one*)

- 0
- 1-10
- 11-30
- 31-50
- 51-100
- 101-200
- 201-500
- More than 500

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

11. Which of the following best describes the types of victim populations that your organization serves? *(Select all that apply)*

- | | |
|---|--|
| <input type="checkbox"/> Assault | <input type="checkbox"/> Property/Economic Crime/Fraud |
| <input type="checkbox"/> Burglary | <input type="checkbox"/> Robbery |
| <input type="checkbox"/> Child Abuse | <input type="checkbox"/> Sexual Assault (including Rape) |
| <input type="checkbox"/> Domestic Violence | <input type="checkbox"/> Special Needs/Victims with Disabilities |
| <input type="checkbox"/> DUI/DWI/Other Traffic-Related Crimes | <input type="checkbox"/> Stalking |
| <input type="checkbox"/> Elder Abuse | <input type="checkbox"/> Survivors of Homicide Victims |
| <input type="checkbox"/> Human Trafficking | <input type="checkbox"/> Other <i>(please specify)</i> : _____ |
| <input type="checkbox"/> Missing/Exploited Children | |

12. What types of services does your organization provide for crime victims? *(Select all that apply)*

- | | |
|---|--|
| <input type="checkbox"/> 24-Hour Hotline | <input type="checkbox"/> Legal Advocacy/Assistance |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Medical Assistance |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Mental Health Services |
| <input type="checkbox"/> Criminal Justice System
Advocacy/Assistance | <input type="checkbox"/> Notification |
| <input type="checkbox"/> Crisis Intervention | <input type="checkbox"/> Post-Conviction Services |
| <input type="checkbox"/> Education | <input type="checkbox"/> Protection/Safety Services |
| <input type="checkbox"/> Emergency Financial Assistance | <input type="checkbox"/> Shelter/Housing Assistance |
| <input type="checkbox"/> Employment Assistance | <input type="checkbox"/> Substance Abuse Services |
| <input type="checkbox"/> Immigration Assistance | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Information/Referrals | <input type="checkbox"/> Victim Compensation Claim Assistance |
| <input type="checkbox"/> Job Training | <input type="checkbox"/> Other <i>(please specify)</i> : _____ |

13. Please select the types of eligibility criteria your organization uses to deliver services: *(Select all that apply)*

- Age
- Legal Issue (e.g., protective orders, immigration, landlord/tenant)
- Service Area
- Specific Income Criteria
- Type of Victimization
- None
- Other *(please specify)*: _____

14. Are the services/assistance you provide to crime victims: *(Select all that apply)*

- Provided for free
- Provided on a sliding scale of charges
- Provided on a sliding scale of charges with some victims eligible for free services
- Provided for a set fee
- Other *(please specify)*: _____

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

15. What are the methods used to provide assistance to victims who are Limited English Proficiency (LEP)? (*Select all that apply*)
- Do not have a way to respond to LEP victims
 - Do not have LEP victims
 - Language access plan (i.e., policies/procedures to provide LEP persons with meaningful access to all programs and services)
 - Informal interpreter (e.g., family member, friend, caregiver, advocate of victims)
 - Paid interpreter
 - Volunteer interpreter (i.e., a person who has no relationship with the victims and performs this specific service free of charge)
 - Staff member(s)
 - Use materials translated into other languages
 - Use telephone language line to translate
 - Other (*please specify*): _____
16. Can your organization accommodate victims with the following physical disabilities? (*Select all that apply*)
- Cognitive Impairment
 - Hearing Impairment
 - Mobility Impairment
 - Visual Impairment
 - Other (*please specify*): _____

Funding Assistance

17. How familiar are you with the programs and resources provided by the Massachusetts Office for Victim Assistance (MOVA)? (*Select only one*)
- Extremely Familiar
 - Moderately Familiar
 - Somewhat Familiar
 - Slightly Familiar
 - Not at all Familiar
18. Has your organization *ever* received funding assistance through MOVA?
- Yes
 - No

If **yes**, please select the types of funding your organization has received through MOVA: (*Select all that apply*)

- American Recovery and Reinvestment Act (ARRA)
- Antiterrorism Emergency Assistance Program
- Drunk Driving Trust Fund (DDTF)
- Human Trafficking Trust Fund
- SAFEPLAN Program
- Victims of Crime Act (VOCA)
- Other (*please specify*): _____

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

19. How does your organization *currently* fund its victim services programs and activities? (*Select all that apply*)

- Federal and State Grants
 - Antiterrorism Emergency Assistance Program (AEAP)
 - Drunk Driving Trust Fund (DDTF)
 - Human Trafficking Trust Fund
 - Justice Assistance Grant (JAG)
 - SAFEPLAN
 - Sexual Assault Prevention and Survivor Services (SAPSS)
 - Victims of Crime Act (VOCA)
 - Violence Against Woman Act (VAWA)
- Local (City/Town) Grants (please specify): _____
- Other Non-Government Grants (e.g., United Way) (please specify):

- Private Foundations (please specify): _____
- State Line Item
- County Line Item
- Offender Fines/Fees
- Other (please specify): _____

20. If current funding was to change, how do you expect to sustain your program in the future?

Training and Technical Assistance

21. How many hours per year are staff in your organization or program area required to attend professional education programs/training? (*Select only one*)

- | | |
|---|--|
| <input type="radio"/> No formal requirement | <input type="radio"/> 11-20 hours |
| <input type="radio"/> 1-5 hours | <input type="radio"/> 21-40 hours |
| <input type="radio"/> 6-10 hours | <input type="radio"/> 41 or more hours |

What percentage of those hours is directly related to victim services (e.g., trauma assessment, victim compensation)? (*Select only one*)

- | | |
|------------------------------|-------------------------------|
| <input type="radio"/> 0% | <input type="radio"/> 51-75% |
| <input type="radio"/> 1-25% | <input type="radio"/> 76-100% |
| <input type="radio"/> 26-50% | |

22. Please specify whether you have participated in any of the following types of training or technical assistance (TTA) provided by MOVA: (*Select all that apply*)

- Have not participated in any TTA provided by MOVA
- Child Witness to Violence Forum
- Immigration Relief Available for Victims of Crime Forum
- Massachusetts Victim Assistance Academy (MVAA)
- New Advocate Training, Springfield
- Victim Rights Conference, Boston
- Other (please specify): _____

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

If **participated**, overall, how satisfied are you with the TTA you have received from MOVA? (*Select only one*)

- Extremely Satisfied
- Very Satisfied
- Somewhat Satisfied
- Not Very Satisfied
- Not at all Satisfied

23. Has your organization turned to resources other than MOVA for TTA?

- Yes
- No

If **yes**, please list: _____

Please rate the extent to which you agree or disagree with the statements below:

My organization needs additional training and technical assistance related to:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
24. Organizational/Program Management (e.g., staff and budget management, leadership and governance, collaboration)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Program Development (e.g., strategic planning, establishing referral mechanisms, staffing, funding, education, outreach)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
26. Professional Development (e.g., certification, networking, leadership, compassion fatigue/vicarious trauma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
27. Technology/Case Management Systems (e.g., data management, recordkeeping, website development)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
28. Program Monitoring/Evaluation (e.g., data collection and reporting, performance measurement, assessing victim satisfaction)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Outreach and Awareness

29. What outreach methods does your organization use to distribute information about crime victims' rights, your organization's services, or related topics? (*Select all that apply*)

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="radio"/> Do not conduct outreach <input type="radio"/> Billboards <input type="radio"/> Brochures <input type="radio"/> Bulletin Boards <input type="radio"/> Networking/Coordination with other Organizations <input type="radio"/> Newsletter <input type="radio"/> Promotional Items | <ul style="list-style-type: none"> <input type="radio"/> Public Speaking Engagements <input type="radio"/> Radio Ads <input type="radio"/> Newspaper (ads, story/column) <input type="radio"/> Television Ads <input type="radio"/> Trainings <input type="radio"/> Social Media (e.g., Facebook, Twitter) <input type="radio"/> Website <input type="radio"/> Other (<i>please specify</i>): _____ |
|--|---|

30. What do you think could be done to improve your organization's outreach efforts?

Performance Monitoring and Evaluation

31. Does your organization use a computerized case management system?

- Yes
- No

If **no**, please describe how your organization currently tracks and reports information about victim services: _____

32. Do you survey victims about their satisfaction with services?

- Yes
- No

33. Which of the following performance measures are tracked consistently by your organization?

	Yes	No
Number/type of victims served.	<input type="radio"/>	<input type="radio"/>
Number/type of services provided.	<input type="radio"/>	<input type="radio"/>
Number/type of outreach and training activities.	<input type="radio"/>	<input type="radio"/>
Victim outcomes (e.g., # of victims obtaining long-term housing, amount of compensation/restitution received).	<input type="radio"/>	<input type="radio"/>

34. Does your organization use data collected on victim services and outcomes to modify services?

- Yes
- No

35. Has any aspect of your organization's victim service programs or activities ever been evaluated by an external evaluator?

- Yes
- No

Collaboration

Please rate the extent to which you agree or disagree with the statements below.

My organization routinely coordinates services with:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
36. Community-Based Victim Service Organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
37. Other Community-Based /Grassroots Organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
38. Corrections	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
39. Court	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
40. Faith-Based Organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
41. Juvenile Justice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
42. Law Enforcement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
43. Legal Services Organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
44. Medical Facilities/Providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
45. Mental Health Facilities/Providers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
46. Military	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
47. Probation/Parole	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
48. Prosecution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
49. Religious Institutions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

My organization routinely coordinates services with:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
50. Schools	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
51. Social Service Agencies (e.g., child welfare)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
52. State, Local, and/or Tribal Government Agencies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
53. Substance Abuse Programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

54. Does your organization *currently* participate in any collaborative bodies related to victim services (e.g., committee, task force, workgroup)?

- Yes
- No

55. Please rate the extent to which you agree or disagree that there is a history of collaboration and cooperation among victim-serving organizations in your catchment area.

- Strongly Agree
- Agree
- Neither Agree nor Disagree
- Disagree
- Strongly Disagree

56. How can agencies/organizations in your catchment area better coordinate to serve crime victims?

Challenges and Barriers to Service Delivery

Please rate the extent to which you agree or disagree with the statements below.

The most critical barriers my organization faces in providing services to crime victims include:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
57. Lack of interagency collaboration and coordination.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
58. Lack of knowledge regarding other available services in the catchment area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
59. Lack of general public awareness regarding programs and services offered by my organization.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
60. Eligibility restrictions (e.g., age, income, victimization type).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
61. Lack of sufficient financial resources to meet demand for services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
62. Lack of sufficient staff to meet demand for services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
63. Staff retention.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
64. Lack of training and educational opportunities for staff and volunteers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
65. Lack of in-house policies and procedures to guide organizational practices.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
66. Lack of language accessible services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
67. Lack of culturally accessible services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
68. Lack of accessible services for persons with disabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
69. Lack of transportation for victims to access services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
70. Lack of knowledge regarding the needs of victims of certain crimes (e.g., military sexual trauma, human trafficking).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
71. Lack of services designed for victims of certain crimes (e.g., identity theft, stalking).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
72. Reaching underserved victim populations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

73. What do you think could be done to alleviate the barriers to service delivery identified above?

Please rate the extent to which you agree or disagree with the statements below.

The most critical barriers victims face in seeking services include:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
74. Lack of available services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
75. Lack of awareness regarding available services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
76. Victims are aware that services are offered but do not know they are eligible for assistance.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
77. Victims do not meet income limitations or other eligibility requirements.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
78. Jurisdiction issues (e.g., the crime occurring in a different county) prevent victims from receiving services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
79. Victims do not understand the process of obtaining services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
80. The process for obtaining services is overly burdensome for victims.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
81. Victims have to go to many different agencies/organizations to receive services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
82. Service providers' hours of operation are not accessible (e.g., after work).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
83. Lack of transportation for victims to access services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
84. Victims are unable to get basic needs met (e.g., housing, food, medical care), which stops them from seeking other services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
85. Fear of deportation/legal status.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
86. Fear of retaliation against self and/or family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
87. Lack of trust in the system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
88. Feelings of shame or embarrassment.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
89. Cultural barriers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
90. Language barriers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

91. What do you think could be done to alleviate the barriers victims face in seeking services?

Crime Victims' Service Delivery Needs

Please rate the extent to which you agree or disagree with the statements below.

There is a need beyond the current capacity in my catchment area for crime victim services related to:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
92. Child Care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
93. Counseling (short- and long-term)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
94. Civil Legal Assistance (e.g., civil litigation related to criminal case, child custody, divorce, immigration, landlord/tenant).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
95. Criminal Justice System Legal Assistance/Rights Enforcement (e.g., property return, intimidation protection, compensation assistance).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

There is a need <u>beyond</u> the current capacity in my catchment area for crime victim services related to:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
96. Criminal Justice System Advocacy/Assistance (e.g., filing a victim impact statement, court orientation, restitution assistance).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
97. Crisis Intervention/Counseling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
98. Education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
99. Emergency Services (e.g., financial assistance, housing, medical care).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
100. Employment Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
101. Group Treatment/Support (e.g., self-help, peer, and social support).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
102. Immigration Assistance (e.g., VAWA petition, T-visa, U-visa).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
103. Information/Referrals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
104. Job Training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
105. Medical Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
106. Mental Health Services (e.g., therapy)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
107. Notification (e.g., offender release from custody, court notifications)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
108. Personal Advocacy (e.g., employer intervention, landlord intervention, public benefits assistance).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
109. Post-Conviction Services (e.g., corrections orientation, offender apology, victim-offender mediation).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
110. Protection Safety Services (e.g., safety planning)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
111. Shelter/Housing Assistance (e.g., rental assistance)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
112. Substance Abuse Services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
113. Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
114. Victim Compensation Claim Assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

115. What other services do crime victims express a need for that are currently lacking or unavailable in your catchment area?

Future Directions

116. What populations are *currently* underserved in your community (e.g., male victims of sexual assault, LGBT victims, persons with disabilities, crime victims in rural areas)?

Massachusetts Office for Victim Assistance
2014 NEEDS ASSESSMENT: SURVEY OF SERVICE PROVIDERS

117. Based on your knowledge and experience, what are three emerging trends or priority issues in the field of victim services that you would like to see addressed through training, technical assistance, or resources for the field (e.g., crisis management, identity theft, civil legal assistance, human trafficking)?

1)

2)

3)

118. Do you have suggestions for improving the provision of services to crime victims in your catchment area?

119. Do you have any additional comments or suggestions?

Follow-Up

As part of this needs assessment, ICF researchers are planning to conduct brief follow-up telephone interviews and/or focus groups with victim service providers in order to gather more in-depth information on victim services and crime victim needs in Massachusetts.

If you would be willing to participate in a brief follow-up interview and/or focus group, please provide your contact information below:

Name: _____

Email: _____

Phone: _____

If you would like to receive additional information on MOVA resources and services, and/or sign up for the MOVA listserv, please contact Kristen Tavano, Senior Grants Program Specialist at kristen.tavano@state.ma.us.

Thank You

Thank you for taking the time to complete this survey. Your responses are critical to ensuring that MOVA programs and services are responsive to the needs of crime victims and service providers in Massachusetts.

As a reminder, if you have any questions or feedback regarding the survey or this needs assessment, please contact the ICF Survey Administrator at ICFResearchTeam@icfi.com.



Appendix B: Service Provider Interview Protocol



Introduction Script:

Hello, my name is (introduce self). Thank you for agreeing to participate in this phone interview as part of the Massachusetts Office for Victim Assistance (MOVA) 2014 Needs Assessment. This needs assessment is being conducted by ICF International, an independent research and consulting firm, in partnership with MOVA and the Victim and Witness Assistance Board (VWAB).

The purpose of the needs assessment is to: (1) better understand the range of victim services in Massachusetts; (2) document gaps in service provision; and (3) inform the Victims of Crime Act (VOCA) grant program administered by MOVA. As part of this needs assessment, the ICF research team is conducting phone interviews with service providers to gather feedback and reactions to survey findings from a recent statewide survey of service providers. In addition, this is an opportunity for service providers to make recommendations for action steps MOVA can take to respond to the needs of service providers and crime victims, and help to shape future directions of victim services in Massachusetts.

Your participation in this interview is voluntary; you may choose not to answer any questions, or stop participating at any time. Your participation in this process, or inability to do so, will in no way influence VOCA funding decisions. The information you give us is confidential; nothing said during this interview will ever be associated with you or your organization. The results of these interviews will be combined with findings from the survey of service providers to produce a report that will be used to help understand the landscape of victim services in Massachusetts and how to improve service provision to crime victims.

With your permission, we would like to record the audio of this interview so that we can transcribe the conversation for accuracy. Only the ICF research team will have access to this audio recording. Upon transcription of these recordings, we will destroy the recordings themselves, maintaining only written records that do not personally identify any individual.

If you have any questions about this interview or the needs assessment, please feel free to contact the Principal Investigator, Emily Niedzwiecki, at Emily.Niedzwiecki@icfi.com or by telephone at 703-225-2175.

I. Background and Introductions

Before we begin, can you please tell me a little bit about your organization and the services you provide to crime victims?

II. Challenges and Barriers to Service Delivery

Lack of sufficient financial and staff resources were cited as the greatest barriers to service delivery to crime victims.

1. If MOVA were to provide additional funding assistance, how could service provider organizations utilize this funding most effectively to meet the current demand for services (e.g., increased staff, additional programs, fewer eligibility restrictions)?

Lack of transportation was cited as a critical barrier to effective service delivery and access to victim services.

2. What types of transportation needs are most important for victims? *Probe into specific transportation needs (e.g., employment, medical appointments, child care, counseling, shelter) how these impact access to services.*
3. What are victims' transportation needs related to participating in the court process? *Probe into the types of court proceedings victims most frequently need transportation for or lack access to due to transportation barriers (e.g., criminal, probate/family, obtaining a restraining order).*

Survey respondents indicated that there is a lack of services designed for victims of certain crimes (e.g., identity theft, stalking).

4. What types of victim populations are lacking adequate services?
5. What types of services are lacking for these identified victim populations?
6. What do you think MOVA can do to increase the availability of these services?

Cultural and language barriers were rated as two of the most critical barriers victims face in seeking services. In contrast, when asked about organizational barriers to service delivery, survey respondents did not rate cultural and language accessibility as a critical challenge, indicating that service providers feel their organizations are able to provide cultural and language accessible services.

7. Given this disconnect, what do you think MOVA can do to improve the language accessibility of victim services? *Probe into whether certain solutions would be effective and feasible (e.g., statewide language line, bilingual staff, translators).*
8. Given this disconnect, what do you think MOVA can do to improve the cultural accessibility of victim services (e.g., effective cross-cultural communication, understanding value differences and communication styles, breaking down stereotypes that impede effective service delivery)?



Some survey respondents indicated that the process for obtaining services is overly burdensome for victims.

9. What parts of the process do you believe are most burdensome to victims (e.g., referred to multiple agencies for assistance, inconsistent eligibility requirements between different organizations)?
10. What do you think MOVA can do to reduce the burden on crime victims seeking services?

Survey respondents also indicated that victims may not access services because they are unable to get their basic needs met.

11. What do you believe are the most critical basic victim needs that are going unmet (e.g., access to affordable child care, housing/shelter, public benefits)? *Probe into the specific issue of childcare, as this was mentioned frequently in the survey comments.*

III. Crime Victims' Service Delivery Needs

Survey respondents reported that there is the greatest need for services related to civil legal assistance, emergency services, and shelter/housing assistance. For this next set of questions, I'm going to ask you about the specific needs of victims related to these three service areas.

Civil Legal Assistance

12. What types of civil legal assistance do victims most frequently express a need for as a result of their victimization (e.g., immigration assistance, child custody proceedings, employment, landlord/tenant)?
13. What are the most critical barriers victims face in seeking legal assistance?
14. What recommendations do you have for improving legal assistance for crime victims in Massachusetts?
15. What do you think MOVA can do to improve legal assistance for crime victims?

Emergency Services

16. What types of emergency services do victims most frequently express a need for as a result of their victimization (e.g., financial assistance, medical care)?

How are these emergency needs currently being addressed in your catchment area (e.g., through housing, financial assistance, transportation assistance, child care, food and clothing assistance, legal assistance)?

17. What are the most critical barriers victims face in seeking emergency services?
18. What recommendations do you have for improving emergency services for crime victims in Massachusetts?



19. What do you think MOVA can do to improve emergency services for crime victims?

Shelter and Housing Assistance

20. What types of shelter/housing assistance do victims most frequently express a need for as a result of their victimization?

21. What are the most critical barriers victims face in seeking shelter/housing assistance?

22. What recommendations do you have for improving shelter/housing assistance for crime victims in Massachusetts?

23. What do you think MOVA can do to improve shelter/housing assistance for crime victims?

IV. Underserved Victim Populations

Survey respondents identified LGBT victims, males, and victims with disabilities as the three most underserved victim populations in Massachusetts. For this next set of questions, I'm going to ask you about the specific needs of these underserved victim populations.

LGBT Victims

24. What types of crimes are LGBT victims most commonly seeking services for?

25. What types of services do LGBT victims most commonly express a need for as a result of their victimization?

26. What recommendations do you have for improving services for LGBT victims in Massachusetts?

27. What do you think MOVA can do to improve services for LGBT victims?

Male Victims

28. What types of crimes are male victims most commonly seeking services for?

29. What types of services do male victims most commonly express a need for as a result of their victimization?

30. What recommendations do you have for improving services for male victims in Massachusetts?

31. What do you think MOVA can do to improve services for male victims?

Victims with Disabilities

32. What types of crimes are victims with disabilities most commonly seeking services for?

33. What types of services do victims with disabilities most commonly express a need for as a result of their victimization?
34. What recommendations do you have for improving services for victims with disabilities in Massachusetts?
35. What do you think MOVA can do to improve services for victims with disabilities?

V. Training and Technical Assistance

According to findings from the survey of service providers, 50% of service provider respondents indicated that their organization has no formal requirement for the number of hours staff must spend attending professional education programs or trainings annually.

36. Why do you believe so few respondents reported having a formal training requirement at their organization (e.g., insufficient funding or staff time, lack of available trainings in geographic location or in desired topical areas)?
37. What do you think MOVA can do to facilitate the formalization of training and professional education in the field of victim services?

VI. Collaboration

In regards to interagency collaboration and coordination, many survey respondents indicated that there is a strong history of interagency collaboration and coordination, as well as high participation in collaborative efforts in their catchment areas. However, when asked how interagency collaboration and coordination could be improved, many respondents indicated a need for more frequent communication and networking; a holistic, multi-agency response; and a greater awareness of other organizations' programs and services.

38. What do you think MOVA can do to facilitate enhanced interagency collaboration and coordination among service providers in Massachusetts?

Specifically, are there ways that you think MOVA can use its grant structure or funding to encourage collaboration (e.g., networking events, regional meetings, increased training forums)?

VII. Future Directions and Recommendations

39. Overall, what recommendations do you have for improving victim services in Massachusetts?
40. What action steps do you think MOVA should prioritize in its efforts to improve services and supports for crime victims in Massachusetts?

Appendix C: Crime Victim Focus Group and Phone Interview Protocol

Interview Consent Form

Please review the following information and maintain a copy for your records.

Overview and Purpose of the Study

This interview is being conducted by ICF International, an independent research and consulting firm, in partnership with the Massachusetts Office for Victim Assistance (MOVA) and the Victim and Witness Assistance Board (VWAB). This interview is part of a larger study to learn about the needs and experiences of crime victims/survivors in Massachusetts and improve victim services and supports.

Description of Participant Involvement

The questions in this interview will ask about your experience seeking services, including potential barriers, what services were most helpful, and what can be done to improve services for crime victims/survivors in Massachusetts. The interview will last between 45 minutes to one hour. With the permission of interview participants, the interview discussion will be audio recorded for note taking purposes so that the ICF research team can be sure to capture the information accurately. Only the ICF research team will have access to this recording. Upon transcription of these recordings, ICF will destroy the recordings themselves, and only keep written records that do not personally identify any individual.

Benefits

While you may not receive a direct benefit from participating in this interview, the findings from this study will help shape future directions of victim services in Massachusetts and improve service delivery to crime victims/survivors.

Risks and Discomforts

There are no anticipated risks or discomforts associated with participation in this interview. We will only be asking questions regarding services (not victimization). However, if at any time you experience unease or are concerned about your safety, please contact your local victim service provider or the National Center for Victims of Crime to be connected to a local service provider: National Center for Victims of Crime (www.ncvc.org) – 1-800-FYI-CALL (1-800-394-2255). We can provide you with a list of services at the conclusion of the interview via email or by phone.

Confidentiality

We will not repeat the information you share with us today; it will be kept confidential (secret). Nothing said will ever be associated with you or anyone else by name. Confidential information will only be disclosed as it is required under Federal, state, and local human subjects laws and regulations. We will not tell anyone (including family and friends) that you spoke to us today. However, if we learn about child abuse or neglect we will report it to Child Protective Services. Additionally, if you tell someone from ICF (me) that you plan to harm yourself or someone else, we will tell the appropriate authorities to keep people safe.

Voluntary Nature of the Interview

Massachusetts Office for Victim Assistance
2015 STUDY OF SERVICES IN MASSACHUSETTS

Participation in this interview is voluntary, which means you do not have to participate; you may choose not to answer any questions, or stop participating at any time without any penalties.

Contact Information

If you have any questions about this interview or the needs assessment, please feel free to contact the Project Manager, Lisa Feeley, at lisa.feeley@icfi.com or by telephone at (703) 251-0912.

If you have any questions about your rights as a research participant, please contact the chairperson of ICF International's Institutional Review Board, Janet Griffith, at Janet.Griffith@icfi.com or by telephone at 703-934-3000.

Focus Group Consent Form

Please review the following information and maintain a copy for your records.

Overview and Purpose of the Study

This focus group is being conducted by ICF International, an independent research and consulting firm, in partnership with the Massachusetts Office for Victim Assistance (MOVA) and the Victim and Witness Assistance Board (VWAB). This focus group is part of a larger study to learn about the needs and experiences of crime victims/survivors in Massachusetts and improve victim services and supports.

Description of Participant Involvement

The questions in this focus group will ask about your experience seeking services, including potential barriers, what services were most helpful, and what can be done to improve services for crime victims/survivors in Massachusetts. The focus group will last between 45 minutes to one hour. With the permission of focus group participants, the focus group discussion will be audio recorded for note taking purposes so that the ICF research team can be sure to capture the information accurately. Only the ICF research team will have access to this recording. Upon transcription of these recordings, ICF will destroy the recordings themselves, and only keep written records that do not personally identify any individual.

Benefits

While you may not receive a direct benefit from participating in this focus group, the findings from this study will help shape future directions of victim services in Massachusetts and improve service delivery to crime victims/survivors.

Risks and Discomforts

There are no anticipated risks or discomforts associated with participation in this focus group. We will only be asking questions regarding services (not victimization). However, if at any time you experience unease or are concerned about your safety, please contact your local victim service provider or the National Center for Victims of Crime to be connected to a local service provider: National Center for Victims of Crime (www.ncvc.org) – 1-800-FYI-CALL (1-800-394-2255). We will provide you with a list of services at the conclusion of our discussion.

All focus group members are asked to respect the privacy of other group members. You may tell others that you were in a focus group and the general topic of the discussion but actual names and stories of other participants should not be repeated. Although it is unlikely, ICF cannot guarantee that another member of the focus group will not reveal something about you that they learned from the discussion.

Confidentiality

We will not repeat the information you share with us today; it will be kept confidential (secret). Nothing said will ever be associated with you or anyone else by name. Confidential information will only be disclosed as it is required under Federal, state, and local human subjects laws and regulations. We will not tell anyone (including family and friends) that you spoke to us today. However, if we learn about child abuse or neglect we will report it to Child Protective Services.

Additionally, if you tell someone from ICF (me) that you plan to harm yourself or someone else, we will tell the appropriate authorities to keep people safe.

Voluntary Nature of the Focus Group

Participation in this focus group is voluntary, which means you do not have to participate; you may choose not to answer any questions, or stop participating at any time without any penalties.

Contact Information

If you have any questions about this focus group or the needs assessment, please feel free to contact the Project Manager, Lisa Feeley, at Lisa.feeley@icfi.com or by telephone at 703-251-0912.

If you have any questions about your rights as a research participant, please contact the chairperson of ICF International's Institutional Review Board, Janet Griffith, at Janet.Griffith@icfi.com or by telephone at 703-934-3000.

Focus Group Introduction Script:

Hello, my name is (introduce self). I work for ICF International, an independent research and consulting firm. Thank you for agreeing to participate in today's focus group. This focus group is part of a larger needs assessment being funded by the Massachusetts Office for Victim Assistance (MOVA) to better understand the needs and experiences of crime victims/survivors in Massachusetts and improve victim services and supports.

You were selected to participate in this focus group because we believe that it is important to hear from crime victims/survivors directly so that your voices and experiences can inform the needs assessment findings and help shape victim services in Massachusetts. The questions in this focus group will ask about your experience seeking services, including potential barriers, what services were most helpful, and what can be done to improve services for crime victims/survivors in Massachusetts. The focus group will last between 45 minutes to one hour.

Participation in this focus group is voluntary; you may choose not to answer any questions, or stop participating at any time. The results of the focus groups will be combined with other information gathered through the needs assessment to produce a report that will be used to help understand the needs and experiences of crime victims/survivors in Massachusetts. Although the questions in this focus group ask about your personal experiences, the information you give us is confidential; nothing said during this focus group will ever be associated with you or anyone else by name.

Please respect the privacy of other participants. You may tell others that you were in a focus group and the general topics of discussion but the names and stories of other participants should not be repeated.

With your permission, we would like to audio record this focus group so that we can transcribe the conversation for accuracy. Only the ICF research team will have access to this recording. Upon transcription of these recordings, we will destroy the recordings themselves, and only keep written records that do not personally identify any individual.

If you have any questions about the focus group or the needs assessment, please feel free to ask them now or contact the Project Manager, [NAME], at [EMAIL] or by telephone at [PHONE].

Before we begin, do you have any questions?

If you agree, we will begin the tape now. (Ask permission to begin taping and proceed with taping according to focus group agreement)

VIII. Awareness of Services

1. Where did you first learn about the types of services and resources available to you? (*e.g., law enforcement, organization referral, court referral, family/peer, internet, printed advertisement, signage, others*)
2. How soon after your victimization did you become aware of these services and resources?
3. Do you believe that you were made aware of all the services and resources available to crime victims/survivors in your community?
4. Is there a better method for telling crime victims/survivors about available services and resources?

IX. Access to Services

5. Once you became aware of available services, were they easy to access?
 - a. If not, what types of services were most difficult to access?
6. Were you ever denied services?
 - a. If yes, why were you denied (*e.g., financial, victimization type*)?
 - b. Were you referred to another service provider after being denied? If yes, who?
7. What are the greatest barriers to accessing victim services?
8. What would make it easier to access services?

X. Services Received

9. What type of services have you received? (*i.e., family assistance, donations, shelters, emergency financial assistance, legal services, advocacy*)
10. Were the services you received sensitive to your individual needs? *For example, if you required a translator, handicap accessibility, cultural considerations, or other individualized services, were service providers able to meet your needs?*
11. In your opinion, were services provided in a way that was welcoming and made you feel comfortable?

- a. Please describe.
12. Did you have any needs that were not met? (e.g., family assistance, donations, shelters, emergency financial assistance, legal services)
 - a. If yes, what types of services would have been helpful?
 - b. In your opinion, why were you not able to receive needed services?
 13. How would you describe your experience with the services received?
 14. Were the services you received helpful? Why/why not?

XI. Future Directions and Recommendations

15. Overall, what recommendations do you have for improving victim services in Massachusetts?
16. What do you think is the most helpful service for crime victims/survivors?
17. What is the most important thing for service providers to know about crime victim/survivor experiences with their services?

Phone Interview Introduction Script:

Hello, my name is (introduce self). I work for ICF International, an independent research and consulting firm. Thank you for agreeing to participate in an interview. This interview is part of a larger needs assessment being funded by the Massachusetts Office for Victim Assistance (MOVA) to better understand the needs and experiences of crime victims/survivors in Massachusetts and improve victim services and supports.

You were selected to participate in this interview because we believe that it is important to hear from crime victims/survivors directly so that your voices and experiences can inform the needs assessment findings and help shape victim services in Massachusetts. The questions in this interview will ask about your experience seeking services, including potential barriers, what services were most helpful, and what can be done to improve services for crime victims/survivors in Massachusetts. The interview will last between 45 minutes to one hour.

Participation in this interview is voluntary; you may choose not to answer any questions, or stop participating at any time. The results of the interviews will be combined with other information gathered through the needs assessment to produce a report that will be used to help understand the needs and experiences of crime victims/survivors in Massachusetts. Although the questions in this interview ask about your personal experiences, the information you give us is confidential; nothing said during this interview will ever be associated with you or anyone else by name.

With your permission, I would like to audio record this interview so that we can transcribe the conversation for accuracy. Only the ICF research team will have access to this recording. Upon transcription of these recordings, we will destroy the recordings themselves, and only keep written records that do not personally identify any individual.

If you have any questions about this interview or the needs assessment, please feel free to ask them now or contact the Project Manager, [NAME], at [EMAIL] or by telephone at [PHONE].

Before we begin, do you have any questions?

If you agree, we will begin the tape now. (Ask permission to begin taping and proceed with taping according to interview agreement)

XII. Awareness of Services

18. Where did you first learn about the types of services and resources available to you? (*e.g., law enforcement, organization referral, court referral, family/peer, internet, printed advertisement, signage, others*)
19. How soon after your victimization did you become aware of these services and resources?
20. Do you believe that you were made aware of all the services and resources available to crime victims/survivors in your community?
21. Is there a better method for telling crime victims/survivors about available services and resources?

XIII. Access to Services

22. Once you became aware of available services, were they easy to access?
 - a. If not, what types of services were most difficult to access?
23. Were you ever denied services?
 - a. If yes, why were you denied (*e.g., financial, victimization type*)?
 - b. Were you referred to another service provider after being denied? If yes, who?
24. What are the greatest barriers to accessing victim services?
25. What would make it easier to access services?

XIV. Services Received

26. What type of services have you received? (*i.e., family assistance, donations, shelters, emergency financial assistance, legal services, advocacy*)
27. Were the services you received sensitive to your individual needs? *For example, if you required a translator, handicap accessibility, cultural considerations, or other individualized services, were service providers able to meet your needs?*
28. In your opinion, were services provided in a way that was welcoming and made you feel comfortable?

- a. Please describe.
29. Did you have any needs that were not met? (e.g., family assistance, donations, shelters, emergency financial assistance, legal services)
- a. If yes, what types of services would have been helpful?
 - b. In your opinion, why were you not able to receive needed services?
30. How would you describe your experience with the services received?
31. Were the services you received helpful? Why/why not?

XV. Future Directions and Recommendations

32. Overall, what recommendations do you have for improving victim services in Massachusetts?
33. What do you think is the most helpful service for crime victims/survivors?
34. What is the most important thing for service providers to know about crime victim/survivor experiences with their services?