Connecting to Safety and Stability: Domestic Violence Needs Assessment of Chicago

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Report Information

**Research Team:** Mary O’Brien, Katie Buitrago, Lindy Carrow, Suniya Farooqui, Alexis Carella, Sasha Pierson (formerly), F. Abidemi Abioye (formerly), Anjani Sheth (formerly), Michael Falk, and David Li.

**Report Author:** Mary O’Brien


Thank you to all research participants and the study advisory group for your vital contribution to this study.

Advisory Group Members:
Frank Baiocchi, Polk Bros. Foundation
Kathy Doherty, Chicago Metropolitan Battered Women’s Network
Mike Feinerman, Center for Advancing Domestic Peace
Christine George, Loyola University
Neha Gill, Apna Ghar
Leslie Landis, Office of the Chief Judge of Cook County, IL
Stephanie Love-Patterson, Connections for Abused Women and Their Children
Yesenia Maldonado, Between Friends
Agnes Meneses, Chicago Foundation for Women
Christy Prahl, Crown Family Philanthropies
Jennifer Rosenkranz, Michael Reese Health Trust
Vickie Smith, Illinois Coalition Against Domestic Violence
Jennifer Welch, City of Chicago (formerly)
Lindsey Whitlock, Crown Family Philanthropies

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The Social IMPACT Research Center conducts applied research for nonprofits, foundations, advocacy groups, governments, coalitions, and the media to help them measure, inform and grow their social impact. IMPACT also regularly reports on key poverty trends to equip decision makers with sound data to inform public policy.
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Domestic violence is pervasive. Approximately 1 in 3 women have experienced physical violence by an intimate partner in the United States. It is estimated that more than 2 million Illinoisans have experienced domestic violence in their lifetime. Domestic violence impacts individuals and communities throughout Chicago. A comprehensive assessment of the domestic violence response system, however, has not been conducted in Chicago since 2007. In light of changes in service capacity and practice over the past decade, as well as the protracted state budget crisis, a needs assessment serves to document the existing domestic violence response system and highlight gaps that need to be filled. To this end, Crown Family Philanthropies, Polk Bros. Foundation, and Michael Reese Health Trust came together and hired Heartland Alliance’s Social IMPACT Research Center (IMPACT) to conduct a domestic violence needs assessment. To identify the scale of need for domestic violence services in Chicago, IMPACT partnered with local researchers and service providers to access, analyze, and present secondary data. The study also includes primary data collection and analysis to illustrate prevalence, survivor experience, service capacity, and outstanding needs.

What is the scale of the problem?
In 2016, Chicago police responded to 46,301 reported incidents of domestic violence; a rate of 1,704 domestic incidents per 100,000 Chicagoans. On average, Chicago police responded to 127 incidents and made 23 domestic-related arrests per day in 2016.

Where is violence happening?
Domestic violence incidents occurred in every community area of Chicago; domestic violence crime rates by community area ranged from 0.2% to 6.0%. However, survivors have disparate access to services. In fact, communities with some of the highest rates of domestic violence have the least physical access to services in Chicago. Importantly, communities with high rates of domestic violence are some of the same communities experiencing high rates of community violence and poverty.
**Who is impacted?**

Women and their children are, overwhelmingly, the recipients of domestic violence services in Chicago. In 2016, 10,194 individuals, including more than 1,000 children, received domestic violence services. Survivors were most likely to be women (96.4%), between the ages of 30 and 64, and either single (47.0%) or married (42.4%). Individuals accessing domestic violence services in 2016 were diverse; 50.4% of survivors were white and 42.0% were black, and 43.9% of all survivors receiving services were Latino in 2016. In 2016, 93.1% of survivors had dependents. Data indicate that survivors of domestic violence have significant financial barriers to reaching safety and stability. In 2016, 43.8% of domestic violence survivors reported a monthly income of $500 or less, and 30.8% reported no financial resources.

**What is the service response?**

Existing domestic violence service providers offer a wide-range of services to survivors of domestic violence. While the unique needs of survivors may vary, there are trends in service requests and utilization. In total, there were 26,389 calls from Chicago to the domestic violence Hotline, a 24/7 resource connecting Illinoisans to needed services. More than half of the calls were from survivors themselves. Hotline callers most commonly requested information, domestic violence shelter, or were linked to other support services. In 2016, 28.1% of domestic violence Hotline calls in Chicago requested information, and 25.2% requested domestic violence shelter. These services are offered in multiple languages; in 2016, the Hotline provided services in 32 languages.

Eighteen organizations provide most of the domestic violence supports available in Chicago. In total, survivors received 149,864 hours of direct services in 162,022 unique service contacts in 2016. On an average day in 2016, 411 hours of direct services were provided by the 18 domestic violence service providers in Chicago. A total of 10,194 individuals received domestic violence services in 2016. In addition to direct services, domestic violence service providers deliver advocacy, education, and training to a variety of community and institutional actors.

There is a network of strong providers offering services to survivors of domestic violence in Chicago, and, overwhelmingly, providers report working together to meet the diverse needs of survivors. The service providers surveyed for this needs assessment identified 95 unique organizations that they have strong or established partnerships with in order to meet the needs of survivors. However, stakeholders identified the persistent need for improved and continued collaboration with systems actors, including the police, judges, and other government entities.
What are the service gaps?
Despite strong networks and service provision, there remain significant gaps in services for survivors of domestic violence. A reinvestment in all communities and services is imperative to support short- and long-term solutions and to provide needed domestic violence services. Additional research is needed to better understand the needs and barriers for survivors who do not interact with the existing domestic violence response system.

There are insufficient resources to meet the counseling needs of survivors. In-person counseling was the most common direct service provided to survivors of domestic violence in both 2015 and 2016. Importantly, research suggests that counseling services are used by survivors even after they have reached immediate safety. Twenty-seven percent of service providers surveyed reported that, of the needs they could not meet, counseling was in high demand.

Emergency and permanent housing are pressing needs for survivors. The demand for shelter consistently outweighs the supply in Chicago. In 2016, for every 1 person sheltered, 5 were turned away. Nearly 5,000 individuals—2,292 adults and 2,556 children—were turned away from shelter in 2016. However, housing needs are not limited to emergency shelter. Stakeholders identified the persistent need for affordable permanent housing options for survivors. A recent local study found that 31% of survivors had a need for permanent housing 6 months after initial service receipt.

While legal services are commonly used by domestic violence survivors, additional outreach and support may be needed. Only a fraction of survivors that called the Hotline in 2016 had an order of protection or previously had an order of protection. Many of these survivors receive assistance in obtaining an order of protection or with other legal needs, however additional legal needs remain. In addition to the immediate civil and criminal legal needs reported by survivors, there are also longer-term legal needs for people experiencing domestic violence.

Research indicates that abusers often use tactics of economic abuse. Financial needs related to repairing credit, building assets, or other financial needs are common for survivors. As illustrated in the Survivor Demographics section of this report, survivors of domestic violence in Chicago have significant economic needs. Continued support of comprehensive case management and referrals to other economic and financial services is needed for survivors to reach safety and stability.
How can the response to domestic violence be strengthened?

In order to address pervasive domestic violence in Chicago, and to continue to support a strong response system, IMPACT recommends the following:

- Continue to fund services aimed at meeting the immediate needs of survivors, and invest in long-term solutions that address barriers to safety and stability.

- Support and encourage flexibility in response and service provision to allow for individualization of response to meet the wide range of supports needed to reach safety and stability.

- Support policies and programs that will contribute to long-term safety and stability of survivors, including policies to address poverty and the economic needs of survivors.

- Address the systemic inequities that exist in the availability and access to domestic violence services and support.

- Continually assess and improve coordinating efforts among relevant stakeholders in order to ensure a cohesive response to domestic violence.

- The State of Illinois must adequately and consistently fund human services.

- Support research aimed at uncovering the needs and experiences of domestic violence survivors who do not engage with traditional response systems.

A full discussion of the specific strategies to achieve these recommendations is included in the Conclusion and Recommendations section of this report.
This report begins with an overview of the prevalence and scope of domestic violence in Chicago. Following is an examination of the demographic and additional characteristics of survivors and abusers. From there, the supply and demand of domestic violence services, including the network and referral systems in Chicago and an in-depth look at one community area in Chicago. Next is an analysis of the funding landscape for domestic violence services, and data on how the current Illinois state budget impasse is impacting the domestic violence service community. Finally, we propose recommendations to better serve individuals experiencing domestic violence and areas for future research.

An accompanying toolkit provides materials and resources aimed at summarizing key findings from the report. Toolkit components are designed to be used as stand-alone summaries of the specific topics covered, and can be used in combination with or as supplement to the full report.

**Toolkit components include:**

**Factsheets**
Survivor Experience and Demographics  
Service Provision and Utilization  
Justice System Response  
Funding Landscape

**Infographics**
Prevalence and Scope of Domestic Violence in Chicago

**Maps**
Spread of Service and Relevant Demographic Indicators  
Domestic Violence Crime Data
METHODS

Key research questions:

1. What does the landscape of domestic violence services look like in Chicago?
2. What is the need for domestic violence services in Chicago?
3. What do we know about what ultimately gets survivors to safety and stability?
4. What does quality service delivery look like?
5. How do we best target limited resources toward optimal outcomes?

This study uses a mixed methods approach. Approximately 20 secondary data sources were reviewed for inclusion in this study. Specific data notes on these sources are included in the relevant section or citation.

In addition to the collection, analysis, and synthesis of relevant secondary data, qualitative and quantitative data were also collected and analyzed for the scope of the study. The following data collection methods were employed:

**Literature review:** A review of local and national literature was conducted to discover the latest research and promising practices related to domestic violence and service provision. The collection and analysis of existing research helped inform all aspects of this report and also guided primary data collection.

**Survey:** Forty-four Chicago-based service providers completed a survey for the scope of this study. The survey included qualitative and quantitative data related to supply of services, service provision, gaps in services, experiences of service recipients, and the funding landscape. The sample of included service providers includes recipients of federal, state, or private grants for domestic violence services; organizations that use InfoNet, the standardized database for victim service providers, and organizations that were identified as a referral source in InfoNet. The survey was administered February–March, 2017.

**Semi-structured key informant interviews:** 10 semi-structured key informant interviews were conducted. Key informant interviews included qualitative data on the domestic violence response system in Chicago and the specific role and capacity of the organization. Interviews were conducted with key stakeholders in the domestic violence response system throughout the city. One interview was conducted with a national stakeholder.

**Focus groups:** Four focus groups were carried out during the scope of the study. Focus groups were held with front line staff at domestic violence services agencies and community members to collect qualitative data related to service provision and experiences of individuals experiencing domestic violence.

Quantitative data were analyzed using Microsoft Excel and the statistical software, PSPP. Qualitative data were coded manually for themes. All included quotations are presented without alteration.

This study has IRB approval from the Heartland Alliance Institutional Review Board.
DEFINITIONS AND LIMITATIONS

**Domestic Violence**
Illinois first passed legislation criminalizing domestic violence in 1986. Under Illinois law, domestic violence is defined as the abuse of a family or household member; family or household member includes “spouses, former spouses, parents, children, stepchildren and other persons related by blood or by present or prior marriage, persons who share or formerly shared a common dwelling, persons who have or allegedly have a child in common, persons who share or allegedly share a blood relationship through a child, persons who have or have had a dating or engagement relationship, persons with disabilities and their personal assistants and caregivers.” Throughout this report, data is included in accordance with the Illinois domestic violence law or as it is delineated in the specific data source.

**Limitations**
Understanding the scope and prevalence of domestic violence is complex. In addition to the varying definitions of domestic violence, data capturing experiences of domestic violence have limitations. Namely, individuals are only counted in domestic violence data if they self-identify as a survivor of domestic violence or if they interact with a system that both correctly recognizes their experience as domestic violence and then also captures these data. Notably, there are survivors who may never call the police, receive services, or otherwise be identified in any of the available datasets, and therefore will not be counted in rates of domestic violence or service utilization. Therefore, within data that count individuals who experience domestic violence, it should be assumed that at least that many individuals are experiencing domestic violence in Chicago, and of datasets that count incidents it should be understood that there may be multiple incidents that involve the same victim or abuser and also recorded incidents that are not categorized as domestic violence.

In addition to limitations related to scope, demographic data is only collected for individuals that access services. There is opportunity for bias and over- or under-representation of certain populations throughout these data. Research assessing racial differences in help-seeking behaviors of domestic violence survivors suggests that white women are more likely to seek formal health and mental health services than women of color. Demographic data collected through service utilization should not be interpreted to mean that certain communities experience higher or lower rates of domestic violence; rather, these are the communities accessing services for domestic violence. Similarly, men and same-sex couples are notably missing from these data and analysis. While national prevalence data does suggest that both straight men and individuals in same-sex relationships experience domestic violence, there is limited data on these populations and a lack of available local data to assess how these individuals experience domestic violence. Additional research and data is needed to better understand the service utilization and gap in service provision for these communities. Specific limitations and special considerations for data included in this report can be found within the accompanying data note.

There is also the overarching challenge of unavailable or limited data. At times data are collected but not shared publicly, e.g. 911 emergency call data. Other data are simply not collected. Generally speaking, both more and better data are needed on a local level in order to understand the full scope of domestic violence and the complex needs of individuals experiencing domestic violence.
PREVALENCE OF DOMESTIC VIOLENCE

Nationally, 36% of women and 29% of men have experienced intimate partner violence, including rape, physical violence, and/or stalking, at some point in their lifetime. One in three women has experienced physical violence by an intimate partner, and approximately 24% of women in the United States have experienced severe physical violence by an intimate partner in her lifetime. National data suggest that domestic violence is experienced by millions of Americans every year. A point in time survey found that on one day in 2016, 2,361 survivors were served by Illinois domestic violence programs; 1,166 survivors received emergency shelter or transitional housing services, and 1,195 survivors received other assistance and services. It is challenging to capture the full scope of domestic violence, and there is no single dataset that comprehensively collects these data. However, there are several datasets that can point to the prevalence and scope of domestic violence in Chicago, including police incident data, domestic violence homicides, orders of protection, and requests for services and assistance.

Police Crime Data
For many cases of domestic violence, police are the first responders. According to the Chicago Police Department, there were 46,301 domestic incidents in 2016; a rate of 1,704 domestic incidents per 100,000 Chicagoans. On average, the police responded to 127 incidents and made 23 arrests in response to a domestic incident per day in 2016. In total, Chicago Police made 8,313 domestic crime arrests in 2016.

Population varies across the city of Chicago; more than absolute count, rates of domestic violence can be meaningful in understanding how different communities experience this issue. Reported domestic crime rates in Chicago community areas ranged from 0.2% to 6.0%. In 2016, the five community areas with the highest rate of domestic violence incidents were: Fuller Park (6.0%), North Lawndale (5.6%), West Garfield Park (5.6%), Englewood (5.5%), and East Garfield Park (5.3%). The five community areas with the lowest rate of domestic violence incidents were: Lincoln Park (0.2%), Lakeview (0.3%), North Center (0.3%), Forest Glen (0.3%), Norwood Park (0.4%), and Edison Park (0.4%). Reported crime data represent the number of incidents police responded to and reported as domestic. This does not reflect calls to police or cases where police determined that there was no crime.

There are many factors that may contribute to a higher or lower concentration of recorded incidents of domestic violence, including, but not limited to interpersonal relationship dynamics or community-police relations. From these police data, we can see higher concentrations of domestic incidents in communities on the south and west side of Chicago. It is important to note that many of these same communities saw a significant increase in community violence in 2016, are racially segregated, and also have some of the highest rates of poverty in the city. For an in-depth discussion of violence, poverty, race, and the role of our justice system, please see the 2017 report, Cycle of Risk: The Intersection of Poverty, Violence, and Trauma.
DOMESTIC CRIMES IN CHICAGO

There were 46,301 domestic crime incidents reported in 2016. On average, there were 127 incidents per day.

- 2016 Domestic Violence Crimes
DOMESTIC CRIME RATES IN CHICAGO
Reported domestic crime rates in Chicago community areas ranged from 0.2% to 6.0%.
DOMESTIC CRIME INCIDENTS AND ARRESTS

There were 8,313 domestic crime arrests in 2016.
On average, there were 23 arrests per day.
At times, incidents of domestic violence become fatal. The Illinois Coalition Against Domestic Violence collects and publishes data on the number of domestic violence homicides each year in Illinois. In 2016, 36 incidents of domestic violence were fatal, resulting in 49 homicides in Illinois. As seen in these data, more than one individual can be killed in one incident of domestic violence. On average, there have been 66 domestic violence homicides each year in Illinois since 2010.

**PREVALENCE AND TYPES OF DOMESTIC CRIMES IN CHICAGO**

<table>
<thead>
<tr>
<th>Domestic Crimes</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Battery</td>
<td>27,165</td>
<td>27,569</td>
</tr>
<tr>
<td>Other Offense</td>
<td>5,478</td>
<td>5,728</td>
</tr>
<tr>
<td>Assault</td>
<td>4,433</td>
<td>4,700</td>
</tr>
<tr>
<td>Criminal Damage</td>
<td>3,035</td>
<td>3,345</td>
</tr>
<tr>
<td>Theft</td>
<td>2,062</td>
<td>2,245</td>
</tr>
<tr>
<td>Offense Involving Children</td>
<td>1,173</td>
<td>1,119</td>
</tr>
<tr>
<td>Criminal Trespass</td>
<td>289</td>
<td>324</td>
</tr>
<tr>
<td>Crim Sexual Assault</td>
<td>228</td>
<td>219</td>
</tr>
<tr>
<td>Robbery</td>
<td>172</td>
<td>178</td>
</tr>
<tr>
<td>Burglary</td>
<td>106</td>
<td>166</td>
</tr>
<tr>
<td>Deceptive Practice</td>
<td>157</td>
<td>155</td>
</tr>
<tr>
<td>Motor Vehicle Theft</td>
<td>96</td>
<td>130</td>
</tr>
<tr>
<td>Sex Offense</td>
<td>107</td>
<td>98</td>
</tr>
<tr>
<td>Stalking</td>
<td>72</td>
<td>83</td>
</tr>
<tr>
<td>Kidnapping</td>
<td>61</td>
<td>67</td>
</tr>
<tr>
<td>Public Peace Violation</td>
<td>63</td>
<td>55</td>
</tr>
<tr>
<td>Homicide</td>
<td>37</td>
<td>39</td>
</tr>
<tr>
<td>Intimidation</td>
<td>13</td>
<td>26</td>
</tr>
</tbody>
</table>

*Crimes with fewer than 20 incidents were not included in this table.*
### PREVALENCE OF DOMESTIC VIOLENCE CRIMES IN CHICAGO: DETAIL

<table>
<thead>
<tr>
<th>Domestic Violence Crimes</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Missing tag</td>
<td>Tagged</td>
</tr>
<tr>
<td>Domestic Battery Simple</td>
<td>2,605</td>
<td>22,005</td>
</tr>
<tr>
<td>Violate Order of Protection</td>
<td>229</td>
<td>1,320</td>
</tr>
<tr>
<td>Aggravated Domestic Battery: Other Dang Weapon</td>
<td>125</td>
<td>893</td>
</tr>
<tr>
<td>Aggravated Domestic Battery: Knife/Cutting Inst</td>
<td>117</td>
<td>574</td>
</tr>
<tr>
<td>Aggravated Domestic Battery: Hand/Fist/Feet Serious Injury</td>
<td>34</td>
<td>118</td>
</tr>
<tr>
<td>Vio Bail Bond: Dom Violence</td>
<td>8</td>
<td>17</td>
</tr>
<tr>
<td>Aggravated Domestic Battery: Handgun</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Aggravated Domestic Battery: Other Firearm</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>TOTAL</td>
<td>3,122</td>
<td>24,937</td>
</tr>
</tbody>
</table>

*Specific domestic violence crime descriptions include crimes with the secondary description listed as one of the crimes included in the table to the left.

### DOMESTIC CRIMES IN CHICAGO: 2001 - 2016

*These data represent the number of incidents the Chicago Police Department responded to and reported as domestic. This does not reflect calls to police or cases where police determined that there was no crime. While these data suggest that domestic crimes have decreased since 2001, additional research that includes assessment of incidents not recorded as domestic and 911 calls is needed to determine if these data represent a decline in prevalence.*

During the course of this study, the research team discovered a significant number of individual domestic incidents each year—3,420 in 2016 alone—that are missing the “domestic” tag in Chicago Police Department crime data. This finding suggests that it is likely that domestic violence incidents are underrepresented in the dataset. After consulting with other researchers and stakeholders we have included all domestic violence crimes, whether or not it is coded as domestic, in our analysis.

1 Specific domestic violence crime descriptions include crimes with the secondary description listed as one of the crimes included in the table to the left.
Orders of Protection
An order of protection is a legal remedy available to survivors of domestic violence in Illinois; survivors can access emergency, interim and/or plenary orders.\textsuperscript{48} An order of protection is a court order that requires abuse to stop and, depending on the type of order issued, can include a number of other remedies for survivors.\textsuperscript{49}

Data on orders of protection is available at the county level, therefore, included data reports on issuance in Cook County, where Chicago is located. In 2015, the most recent year of available data, there were 25,610 orders of protection issued in Cook County, a rate of 489 orders per 100,000 people.\textsuperscript{50} On average, 24,100 orders of protection were issued each year in Cook County from 2001-2015.\textsuperscript{51} There was a sharp increase in the number of orders of protection issued in 2015; 2015 had the greatest number of orders since 2004.\textsuperscript{52} An increase or decrease in the number of orders of protection does not necessarily indicate an increase or decrease in prevalence of violence; rather, an increase in orders may indicate simply that more individuals are accessing this form of assistance.

ORDERS OF PROTECTION ISSUED IN COOK COUNTY: 2001-2015
Requests for Service and Assistance
In addition to law enforcement and court data, requests for service and assistance can help point to the overall prevalence and scope of domestic violence. The State of Illinois Domestic Violence Hotline (Hotline), a collaborative program between the City’s Division on Domestic Violence and the Chicago Metropolitan Battered Women’s Network, provides 24/7 confidential assistance for domestic violence.\(^5^3\)

In 2016, the Hotline answered 26,389 calls from Chicago, an increase from 21,605 calls in 2015. The majority of calls (55\%) were from survivors in 2016.\(^5^4\) Other calls were most commonly administrative (13\%), not related to domestic violence (10\%), general domestic violence/non-victim related (9\%), or a third-party calling on behalf of a survivor (7\%).\(^5^5\)

Of the 14,412 survivors in Chicago that experienced abuse and called the Hotline in 2016, 79\% reported experiencing emotional abuse, 61\% reported physical abuse, and 4\% reported sexual abuse.\(^5^6\) In 2016, 10,194 individuals received services from domestic violence service organizations in Chicago.\(^5^7\) Approximately 10\% of those receiving services in 2016 were children.

While it is challenging to pinpoint the exact number of Chicagoans that experience domestic violence, it is evident that domestic violence impacts a significant number of individuals and families in every community of Chicago. Data suggest that not all survivors receive services or other remedies available through the domestic violence response system, however, current domestic violence supports are provided to a substantial number of Chicagoans experiencing domestic violence.
As illustrated in the crime data and maps, domestic violence is experienced in every community in Chicago, regardless of socioeconomic status, race, or geographic location. While domestic violence is experienced across all communities, not all survivors access services, or, for some other reason, are missing from these data. Therefore, demographic data provide insight on the population that is receiving services from domestic violence service providers but is not representative of all survivors in the city of Chicago.

In 2015, Chicago-based service providers served 9,788 adults and 1,032 children, for a total of 10,820 individuals. In 2016, 10,194 individuals—9,143 adults and 1,051 children—received domestic violence services in Chicago.

Of all survivors receiving services, 91.8% were female and 8.2% were male in 2016; 96.4% of adult survivors were female. Among children receiving services in 2016, 51.7% were female and 48.3% were male.

Survivors of domestic violence are diverse; in 2016, 43.9% were Latino and 42.0% were black. While the majority of survivors (59%) were between the ages of 30 and 64, more than a quarter (28.4%) of survivors in 2016 were 18-29 years old. In 2016, survivors were most likely to be single (47.0%) or married (42.4%). In 2016, 93.1% of Hotline callers had dependents compared to 94.6% with dependents in 2015.
Adverse Childhood Experiences (ACEs), including witnessing domestic violence, have been associated with risky health behaviors, chronic health conditions, low life potential, and early death in adults. A significant number of children witness domestic violence in Chicago each year, possibly contributing to long-term impact on their health and well-being. In 2016, 51% of individuals accessing emergency shelter, and 10% of all domestic violence service recipients were children.66

The Center for Disease Control and Prevention provides additional information and resources on ACEs at www.cdc.gov/violenceprevention/
Data suggest the significant economic need of survivors, illuminating barriers that survivors may face in reaching safety and stability. In 2015, 49.1% of survivors were not employed, 19.2% were employed part-time, and 31.7% were employed full-time. In 2016, there was a sharp increase in part-time employment status for survivors; survivors were most commonly employed part-time (47.0%), 32.3% were employed full-time, and 20.7% were not employed in 2016. Additional research is needed to understand what accounts for this change in part-time employment status. Despite a significant increase in part-time employment status, reported income remained steady.

In 2016, survivors were most likely to report monthly income of $500 or less (43.8%); 37.0% of survivors have a monthly income of more than $1,000, and 19.1% of survivors reported income of between $500 and $1,000.

Despite high economic needs, most survivors (53.3%) report that they did not receive any public benefits in 2016; 41.9% received food stamps or other food benefits.

Thirty-one percent of survivors had no health insurance in 2016; 41.3% received Medicaid and 20.0% had private health insurance.

Educational experience varies for survivors; in 2016, 23.4% had some high school experience, 26.8% were high school graduates, 23.4% had some college experience, and 16.1% had college degrees or more.
HEALTH INSURANCE COVERAGE

- Medicaid Health Insurance: 42.0% (2015), 41.3% (2016)
- Medicare Health Insurance: 18.3% (2015), 20.0% (2016)
- Private Health Insurance: 3.2% (2015), 3.0% (2016)
- State Children’s Health Insurance: 4.9% (2015), 4.4% (2016)
- No Health Insurance: 31.5% (2015), 31.0% (2016)

BENEFIT RECEIPT

2015 (n=9,814)
- Food Stamps/Food Benefit Card: 44.7%
- Other Supports: 11.3%
- Not Receiving Public Benefits: 50.8%

2016 (n=9,815)
- Food Stamps/Food Benefit Card: 41.9%
- Other Supports: 10.8%
- Not Receiving Public Benefits: 53.3%

EDUCATIONAL ATTAINMENT

2015 (n=9,491)
- No High School: 11.0%
- Some High School: 16.8%
- High School Grad: 29.1%
- Some College: 26.4%
- College Grad or More: 16.6%

2016 (n=9,763)
- No High School: 10.4%
- Some High School: 23.4%
- High School Grad: 26.8%
- Some College: 23.4%
- College Grad or More: 16.1%
ABUSER DEMOGRAPHICS AND CHARACTERISTICS

Although it is not the primary focus of this needs assessment, there are services available for individuals who commit violence in intimate partner relationships. Additional research and data is needed to know more about the supply and utilization of resources for individuals who use violence within an intimate partner relationship, as well as broader research on program efficacy. One stakeholder reported that Partner Abuse Intervention Programs can offer a solution for change, accountability, and support outside of the justice system. Funding and support of these services can, at times, be viewed in competition with services for survivors. However, quality interventions for individuals who use violence not only aids individuals in future relationships, but can also support survivors who choose to stay in the relationship.

Illinois Administrative Rule 89, Section 501 (Illinois Protocol) specifies standards for partner abuse intervention programs in Illinois. As of July 2014, the most recent data available, there were 20 program locations in Chicago offering partner abuse intervention programs that comply with the Illinois Protocol. Generally, programs provide assessment, individual or group education, case management, and other services aimed at eradicating the use of violence by intimate partners. Programs are fee-for-service, and some receive funding from the Illinois Department of Human Services. Participants are often mandated to complete a program as a condition of their sentence. All programs are monitored by the Illinois Department of Human Services. Illinois Department of Human Services does collect program data from programs, including service provision and demographic data on participants. The most recent published data is from 2011. In FY11, the Illinois Department of Human Services funded 26 programs that served 6,697 individuals.

<table>
<thead>
<tr>
<th>RELATIONSHIP TO SURVIVOR</th>
<th>2015 (n=8,501)</th>
<th>2016 (n=9,348)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child in common</td>
<td>6.9%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Dating (not living together)</td>
<td>2.4%</td>
<td>2.4%</td>
</tr>
<tr>
<td>Ex-spouse/ex partner</td>
<td>25.0%</td>
<td>25.9%</td>
</tr>
<tr>
<td>Family/blood relative</td>
<td>7.8%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Living together (not married)</td>
<td>27.7%</td>
<td>26.3%</td>
</tr>
<tr>
<td>Not an IDVA relationship</td>
<td>1.4%</td>
<td>1.7%</td>
</tr>
<tr>
<td>Personal care attendant</td>
<td>0.0%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Roommate</td>
<td>1.3%</td>
<td>1.4%</td>
</tr>
<tr>
<td>Spouse</td>
<td>27.3%</td>
<td>27.1%</td>
</tr>
</tbody>
</table>
The Hotline also collects demographic data on the abuser. Demographic data provide insight on individuals receiving services for domestic violence, but is not representative of all individuals experiencing domestic violence in the city of Chicago.

Hotline data show that approximately 92% of abusers were male in both 2015 and 2016. The most common ages reported for abusers in 2016 were 51-60 (17.9%), 25-30 (17.5%), 31-35 (15.3%), and 36-40 (15.0%). In 2016, abusers were most likely to be black (58.1%); 21.3% were white and 16.5% were Latino. These data also demonstrate that domestic violence happens in all types of intimate partner relationships. Most often, abusers were either married to, formerly married to, or living with their victim.
Services, such as counseling, case management, and legal advocacy, are available to individuals experiencing domestic violence in Chicago. InfoNet, managed by the Illinois Criminal Justice Information Authority, is a standardized database used by state-funded victim service providers in Illinois. Sixty-seven domestic violence centers in Illinois use InfoNet, 18 of which were located in Chicago in 2016. These 18 agencies comprise the majority of the domestic violence services offered in Chicago.

Individuals experiencing domestic violence have a wide range of needs and, therefore, receive services from diverse organizations across the city. To this end, the research team conducted a provider scan to identify agencies that provide services to individuals experiencing domestic violence that may not be captured within existing data. The provider scan identified 107 organizations that either directly provide services to individuals experiencing domestic violence or are part of the referral network for individuals experiencing domestic violence.

Specific inclusion criteria for the provider scan include:

1. Recipients of city grants for domestic violence services;
2. Recipients of foundation grants for domestic violence;
3. Organizations that have signed on to anti-domestic violence initiatives;
4. Organizations that use InfoNet; or
5. Organizations that were identified as a referral source in InfoNet.

Organizations identified in the provider scan range from city agencies to economic support services to youth programs. In order to better understand these services and the ways they support survivors of domestic violence, all agencies identified in the scan were invited to participate in a survey. In total, 44 agencies participated in the survey, a 41% response rate. Forty-eight percent of survey respondents identified that they primarily serve survivors of domestic violence. Other respondents most commonly served perpetrators of domestic violence, all survivors of violence, low-income individuals and families, women and girls, or offered culturally specific services. These data complement existing data on services use and needs of survivors.
Domestic violence needs assessment survey respondents (service providers) offer a variety of services to people experiencing domestic violence. The most common services offered by service providers include: counseling (64%), general advocacy/case management (57%), and legal advocacy/accompaniment (50%). Forty-one percent of service providers offer “other” services, including education; life skills, such as financial literacy, organization, or health and wellness; interpretation; crisis hotlines; and other supports for children.87

<table>
<thead>
<tr>
<th>Services Offered by Survey Respondents</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Counseling</td>
<td>64%</td>
</tr>
<tr>
<td>General Advocacy/Case Management</td>
<td>57%</td>
</tr>
<tr>
<td>Legal Advocacy/Accompaniment</td>
<td>50%</td>
</tr>
<tr>
<td>Child Exposure to Domestic Violence Services</td>
<td>48%</td>
</tr>
<tr>
<td>Other</td>
<td>41%</td>
</tr>
<tr>
<td>Economic Resiliency/Economic Assistance</td>
<td>30%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>25%</td>
</tr>
<tr>
<td>Education Resources</td>
<td>20%</td>
</tr>
<tr>
<td>Emergency Housing</td>
<td>16%</td>
</tr>
<tr>
<td>Legal Services/Legal Representation</td>
<td>16%</td>
</tr>
<tr>
<td>Abuser Intervention/Batterer Intervention Program</td>
<td>14%</td>
</tr>
<tr>
<td>Transitional/Temporary Housing</td>
<td>11%</td>
</tr>
<tr>
<td>Transportation/Gas</td>
<td>11%</td>
</tr>
<tr>
<td>Supervised Child Visitation and/or Safe Exchange</td>
<td>11%</td>
</tr>
<tr>
<td>Emergency Housing</td>
<td>9%</td>
</tr>
<tr>
<td>Substance Use</td>
<td>9%</td>
</tr>
<tr>
<td>Permanent Housing</td>
<td>5%</td>
</tr>
</tbody>
</table>
Access to Services

In order to better assess the supply of services, IMPACT conducted geospatial analysis and mapping of the supply of domestic violence services in Chicago. All survey participants were asked for consent and location to be mapped. Providers who did not explicitly provide consent to be mapped are not included in this analysis to protect confidentiality. In total, twenty-eight service providers consented to be mapped for this study.

While there are many providers offering services to survivors in Chicago, there is disparate access to services. Very few service providers restrict their services to specific areas or locations of the city, however, the physical location of a service impacts the use and accessibility of services in Chicago. At times it may be necessary for a survivor to travel outside of their home community for safety reasons; however, many survivors do not want to leave their homes or community after experiencing domestic violence.88 Survivors may also decide that they want to remain in a relationship with their abuser or will, in some way, need to manage a relationship with their abuser.89 Furthermore, there are limited options for survivors living in poverty; needs related to safety often go beyond physical safety to include basic financial resources required to achieve safety and ultimate stability, for example the cost and time to travel to a job or childcare.90

There is limited access to domestic violence services for people living on the south or west side of Chicago. In fact, Chicago communities that have some of the highest rates of police response to domestic violence seem to have the least physical access to domestic violence services. In addition to physical location in the city, further analysis reveals that domestic violence services are predominantly located in majority white communities and/or higher-income communities. This intersection of race, socioeconomic status, and experiences of violence and trauma impact a survivor’s ultimate safety and stability. Furthermore, national data suggest that women of color experience domestic violence at a higher rate than their white counterparts; nationally, 44% of black women, 37% of Latina women, and 54% of multiracial non-Hispanic women have experienced intimate partner violence in their lifetime, as compared to 35% of white non-Hispanic women.91

Additional research is needed to better understand how distance to services impacts survivor safety and ultimate stability. Much of the existing research on the impact of distance on service utilization has focused on urban vs. rural survivors. While these studies have found that distance, travel times, and accessibility of transportation can prevent rural survivors from accessing human services, additional research addressing these barriers is needed in urban areas.92
*All survey participants were asked for consent to be mapped for this study. In total, twenty-eight service providers consented to be mapped for this study.
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Service providers work closely with partner organizations to meet the diverse needs of clients. These networks allow service providers to refer clients to vital services when their own services are full or at capacity, and also work to connect survivors to specific service needs. Service providers identified 95 unique organizations that they have strong or established partnerships with in Chicago.  

Several interviewed stakeholders reported that coordination and established networks have grown and evolved over time. However, many stakeholders suggested that there is still room for improvement and better coordination among domestic violence stakeholders. Nearly all stakeholders identified strong interpersonal relationships between their staff and other individuals within the domestic violence response system. However, many stakeholders identified institutional and/or structured partnerships that needed improvement or further development. Specifically, stakeholders identified the need for improved collaboration across systems and service categories, including the child welfare system, police department, the State’s Attorney, mental health providers, and Head Start programs, among others. New and ongoing collaborative initiatives were mentioned by several stakeholders interviewed for this study. Stakeholders described the Child Welfare Resource Collaborative and the Family Court Enhancement Project as initiatives that have improved experiences for survivors with children and relationships between the domestic violence response system and child welfare. Engagement and establishment of supervised visitation centers was another important development identified by stakeholders.

“We have to talk about the fact that you have to fund DV, but you also have to fund substance abuse, and mental health and child care and job training. These are all critical needs of the families that we serve—so we cannot stand by ourselves. We can’t do that, it just doesn’t work for the people we serve.”
Several stakeholders spoke of collaboration between the domestic violence service providers and the justice system—both of challenges and promising new collaborative efforts. Challenges were identified between service providers and the justice system, as well as among justice system actors, for example between police and the State’s Attorney.

**Police**
Stakeholders sense that there are fewer dedicated police for domestic violence in Chicago. However, there is a pilot project underway focused on police response to domestic violence calls in specific districts in the city. While some stakeholders reported strong interpersonal relationships with specific police officers, several stakeholders identified mistrust or strained relationships between police and communities in Chicago. Multidisciplinary training and continued investment in formal collaborations were identified as possible strategies to improve police coordination with service providers and communities.

**Prosecutors and Judges**
Stakeholders reported that the creation of the Domestic Violence Courthouse marked a significant change in the justice system response to domestic violence. The Domestic Violence Courthouse opened in 2005, and offers civil and criminal courts co-located in the same building, as well as victim services and childcare on-site. Despite this marked improvement, stakeholders reported that coordination with other courts and systems is still challenging for survivors. Specifically, stakeholders reported that addressing domestic violence within a divorce can be challenging because divorce judges may be especially sensitive to a child witnessing the arrest of a parent or the perception of parents misusing the courts. Stakeholders also reported a sense of bias among divorce judges who may not have particular understating of the dynamics of domestic violence.

Several stakeholders mentioned the important role that the State’s Attorney has in building relationships between service providers, police, and the justice system. With continual change in leadership, stakeholders recommended that education and engagement of different justice system actors is ongoing. Stakeholders repeatedly identified the need for ongoing education for justice system actors, including judges and prosecutors. However, beyond education, some stakeholders also identified an underlying misunderstanding of the dynamics of domestic violence among some justice system actors.

Several stakeholders identified additional concerns for undocumented clients reporting domestic violence to the justice system and the possibility that survivors may not seek assistance due to fear of deportation. Stakeholders also reported concerns with the training for interpreters working in the domestic violence system. Continued coordination, collaboration, and education were recommended across the justice system.
Networks and referrals can be observed in available data on survivors. The city of Chicago’s Domestic Violence Hotline serves as a resource for individuals experiencing domestic violence and the general public seeking information or services related to domestic violence. Callers reported that friends or family members, domestic violence service providers, or the police were most likely to connect them to the Hotline in both 2015 and 2016, demonstrating important referral networks for survivors seeking information and resources. When a call was from a 3rd party caller, i.e. not the survivor or abuser, it was most likely to be from a friend or family member.

Hotline callers also reported a number of special needs or requests that typically fall outside of the services offered by domestic violence organizations. While a small minority of overall calls, the most common need reported to the Hotline was mental illness. In 2016, 2% of all calls (574 callers) reported a need related to a mental illness. Other requests include specific services for people who are living with developmental disabilities, physical illness, are deaf/hard of hearing, have visual impairments, or needs related to substance use. A small number of calls also requested domestic violence services for individuals who identify as LGBTQ.

However, not all survivors call the Hotline prior to receiving services. In 2016, the top five referral sources identified by survivors receiving services at domestic violence organizations included: 1. social services programs; 2. the legal system; 3. self; 4. State’s Attorney; and 5. other. Documenting referral sources provides an important look into the networks, experiences, and needs of survivors. People experiencing domestic violence use a number of support services to reach domestic violence specific services, and ultimately, safety and stability in Chicago.
While the individual needs may vary, there are trends in service requests and use for survivors of domestic violence.

**Hotline callers request a wide range of services.** Top needs requested in 2016 include information, domestic violence shelter, administrative calls, requests to be linked to services, and a crisis call handled by a Victim Information and Referral Advocate. In 2016, 28.1% of domestic violence Hotline calls in Chicago requested information and 25.2% requested domestic violence shelter. Callers also commonly requested legal advocacy for an order of protection in 2015 and 2016 (7.6% and 6.0% respectively).

The Hotline overwhelmingly connects callers to services and information. Survivors, advocates, and community members are able to connect to a number of services through the Hotline. Importantly, these data can also show where there are discrepancies in requests for services and actual service receipt. Hotline data determines that 91.1% of callers in 2016 and 89.7% of callers in 2015 had their needs met by the Hotline. Of these, 28.1% of callers received information and 39.2% were linked to services or given a phone number (21.2% and 18.0%, respectively) for needed services in 2016. In 2016, 4.3% of callers received crisis intervention from Hotline staff. Only 0.4% of Hotline callers declined the referral provided by staff in 2016.
In total, survivors received **149,864 hours** of direct services in **162,022 unique service contacts in 2016**. In 2016, 10,194 individuals (adults and children) received services from 18 domestic violence organizations in the city of Chicago. On an average day in 2016, 411 hours of direct services were provided by the 18 domestic violence service providers in Chicago. The five most utilized services were: 1. in-person counseling; 2. civil legal advocacy/order of protection; 3. other advocacy; 4. collaborative case management; and 5. telephone counseling.

A point-in-time survey found that, on one day in 2016, 2,361 survivors received domestic violence services in Illinois; 1,166 survivors received housing services, and 1,195 received non-residential services and assistance.

**Domestic violence agencies provide advocacy, education and training to a variety of community and institutional actors.** In 2016, a total of 66,898 individuals received 5,143 hours of training and/or education.

**Domestic violence services are offered in multiple languages.** Domestic violence services are provided to survivors with varying language needs. In 2016, Hotline calls were provided in 32 different languages. In 2016, the top three languages used were English, Spanish, and Arabic. Eighty-two percent of Service providers surveyed offer services in multiple languages.
Service providers in Chicago offer services and education for youth on healthy relationships and teen dating violence. Many teen dating violence interventions focus on high school aged youth. However, there may be opportunity to expand outreach and education to a younger cohort.

A recent study, which included a sample of middle-school aged youth from Chicago, found high rates of teen dating violence. Specifically, of youth that reported dating, 77% had perpetrated verbal/emotional abuse, 33% physical abuse, 20% threatening behaviors, 15% sexual violence, 13% relational aggression, and 6% reported stalking. These findings confirm that youth are experiencing teen dating violence, and there may be an opportunity to expand programming to work with even younger cohorts. Continued research and evaluation of programming for outreach and prevention education for youth is needed.
Counseling is a highly used service by survivors. In-person counseling was the most common direct service provided to survivors of domestic violence in both 2015 and 2016 in Chicago.\textsuperscript{121} Forty-five percent of survivors received in-person counseling in 2016, and 25% received telephone counseling.\textsuperscript{122} Importantly, research suggests that counseling services are used by survivors even after they have reached immediate safety. The Domestic Violence Outcomes Measure Project, a local research study, found that counseling/therapy was the primary need for 46% of survivors 6 months after initial service contact.\textsuperscript{123}

There is an outstanding need for counseling services in Chicago. Sixty-four percent of all service providers surveyed offer counseling services, and 80% of the service providers that primarily serve survivors of domestic violence offer counseling services.\textsuperscript{124} However, 27% of service providers surveyed reported that, of the service requests that they could not meet, counseling was in high demand.\textsuperscript{125}

Survivors commonly access legal services. Domestic violence service providers are co-located in the domestic violence courthouse in Chicago to provide legal representation and assistance, accompaniment, referrals and information, and other needed civil and criminal legal advocacy.\textsuperscript{126} Forty-one percent of clients received direct services related to civil legal advocacy for an order of protection, and 31% received direct services related to criminal legal advocacy for an order of protection or charges in 2016.\textsuperscript{127} One stakeholder identified a court project focused on enhancing the use of child related remedies in orders of protection as an important advancement in the field. Additional data is needed to better understand the most commonly used remedies included in orders of protection or other trends in other service use within the civil and criminal legal system.

Of Hotline callers seeking services, only 2.3% reported having an order of protection, and an additional 0.3%, or 38 individuals, previously had an order of protection in 2016.\textsuperscript{128} These numbers were consistent in 2015, with 2.3% of victim caller reporting having an order of protection and 0.3% previously having an order of protection.\textsuperscript{129}
Collaborative case management supports survivors with diverse needs. Twenty-nine percent of survivors received collaborative case management services, or the comprehensive coordination of services, in 2016. Among Service providers surveyed, 57% provide case management to individuals and/or families experiencing domestic violence. Survivors have significant economic needs that may require additional services to reach safety and stability. Furthermore, the long-term needs of survivors may require additional case management and coordination of services, e.g. custody related need or supervised visitation.

Survivors use the domestic violence housing and shelter available. While not among the top services provided, shelter and housing are consistently identified as a critical need for survivors of domestic violence. In 2016, 25% of all Hotline calls—or 6,647 calls—were requesting domestic violence shelter. In total, 1,001 clients spent a total of 36,067 days in Chicago-based domestic violence shelters in 2016. Clients that used shelter services spent, on average, 36 days in shelter in 2016. These data demonstrate that the demand for safe housing outweighs the current supply in Chicago. An additional 113 clients, 39 adults and 74 children, received transitional housing services in 2016. Survivors and their children spent, on average, 243 days in transitional housing. The Hotline recorded that 93.2% of dependents went to domestic violence shelter with survivors in 2016; 53% of dependents were identified as female and 47% were identified as male.

Survivors also have long-term housing needs. In one study, fewer than 5% of survivors reported a need for shelter services six months after initial service receipt. However, help finding permanent housing was identified as a need by 31% of survivors six months after initial service receipt. Stakeholders consistently identified safe and affordable housing as a need for survivors. Among service providers surveyed, only 9% reported providing emergency housing, and 11% of respondents provide transitional or temporary housing. Of those that primarily serve survivors of domestic violence, 20% provide emergency housing and 20% provide temporary or transitional housing. A comprehensive discussion of outstanding needs is included in the following section of this report.
Service providers offer a wide-range of services that meet the needs of survivors. However, there is a demonstrated unmet need. Importantly, a survivor’s needs may change as they transition from safety to stability. While much of the existing available data focuses on short-term safety needs, it is critical that the domestic violence response community continue to further uncover long-term solutions that will ultimately lead a survivor to stability. A survivor may have different short- and long-term safety needs based on whether they decide to stay, leave, or return to a relationship with their abuser; domestic violence support services can offer strategies and supports aimed at safety and stability for all survivors. Furthermore, experiences of poverty may limit options available to survivors in both short- and long-term safety planning. Local efforts have begun to document the long-term needs of survivors. One study found that survivors’ primary needs 6 months after initial service receipt were counseling/therapy and financial or other material needs, including employment, permanent housing, financial planning, and assistance with credit, food, and clothing. Continued research is needed in order to ensure appropriate support of the services that will ultimately contribute to long-term safety and stability for survivors.

Even at the initial service contact, survivors are not always linked to needed services. In 2016, 14,412 survivors called the Hotline in Chicago and only 9,143 adults received any type of service from a domestic violence service provider. Additional data and research is needed to better understand why some survivors are not receiving services from domestic violence organizations after reaching out. Furthermore, 3.2% of all calls in 2016 resulted in a survivor being put on a wait list or informed that a program was full. In 2015, 4.8% of all calls had an outcome of full or wait list. Just over 1% of calls in 2016 and 1.5% of calls in 2015 resulted in no answer, no program staff available to take the call, the caller being ineligible for services, or the service requested not existing.
InfoNet does not track the number of clients who requested services and did not receive them—except for emergency shelter.¹⁵³

Among service providers surveyed, the top five requests for services that could not be met were: 1. counseling (27%); 2. emergency housing (27%); 3. legal services and/or legal representation; (25%); 4. economic resiliency (23%); and 5. permanent housing (20%).¹⁵⁴

### REQUESTS FOR SERVICES THAT COULD NOT BE MET

<table>
<thead>
<tr>
<th>Service</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abuser Intervention/Batterer Intervention Programs</td>
<td>9%</td>
</tr>
<tr>
<td>Child Exposure to Domestic Violence Services</td>
<td>14%</td>
</tr>
<tr>
<td>Counseling</td>
<td>27%</td>
</tr>
<tr>
<td>General Advocacy/Case Management</td>
<td>7%</td>
</tr>
<tr>
<td>Economic Resiliency/Economic Assistance</td>
<td>23%</td>
</tr>
<tr>
<td>Education Resources</td>
<td>2%</td>
</tr>
<tr>
<td>Emergency Housing</td>
<td>27%</td>
</tr>
<tr>
<td>Employment Services</td>
<td>9%</td>
</tr>
<tr>
<td>Legal Advocacy/Accompaniment</td>
<td>11%</td>
</tr>
<tr>
<td>Legal Services/Legal Representation</td>
<td>25%</td>
</tr>
<tr>
<td>Mental Health</td>
<td>16%</td>
</tr>
<tr>
<td>Permanent Housing</td>
<td>20%</td>
</tr>
<tr>
<td>Substance Use</td>
<td>7%</td>
</tr>
<tr>
<td>Supervised Visitation and/or Safe Exchange</td>
<td>7%</td>
</tr>
<tr>
<td>Transitional/Temporary housing</td>
<td>14%</td>
</tr>
<tr>
<td>Transportation/Gas</td>
<td>2%</td>
</tr>
<tr>
<td>Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

*Survey respondents were able to check all that apply, so percents may not add up to 100%.*
While there are a number of requests that individual service providers cannot meet, 48% of service providers surveyed report that they have to turn survivors away or put them on a waitlist less than 10% of the time.\textsuperscript{156} This suggests that service providers are most often able to refer clients to needed services through their network and referral system—perhaps to agencies that do not primarily address domestic violence. Additional research is needed to understand if and how survivors’ needs are being met at other agencies.

One of the most consistent unmet needs identified by stakeholders was safe and affordable housing and shelter.\textsuperscript{156} Housing needs range from emergency housing to affordable permanent housing for survivors. In total, there are 170 emergency shelter beds dedicated to domestic violence survivors in the city of Chicago.\textsuperscript{157} In total, 494 adults and 507 children (1,001 individuals) received domestic violence shelter in 2016.\textsuperscript{158}

However, a significant number of individuals are turned away from emergency shelter in Chicago each year. In fact, for every one person sheltered, approximately 5 are turned away.\textsuperscript{159} In 2016, 4,848 individuals—2,292 adults and 2,556 children—were turned away from domestic violence shelter in Chicago.\textsuperscript{160} Shelter turn away, the count of individuals who could not be sheltered, is collected at the individual provider level, and there is likely some duplication in the aggregate. However, key stakeholders familiar with shelter services and these data suggest that duplication is likely minimal.

Stakeholders reported that, in addition to domestic violence shelters consistently operating at capacity, there are few options for a survivor who does not want to go to shelter. Nationally, there has been a shift to apply a Housing First approach to the domestic violence field, or the promotion of permanent housing as quickly as possible.\textsuperscript{161} Washington State has seen success with the model, reporting that survivors have improved safety and stability using the Housing First approach.\textsuperscript{162}
There is a persistent need for counseling services. Forty-five percent of survivors received in-person counseling in 2016, and 25% received telephone counseling. However, 27% of service providers reported that counseling was a top need they could not meet, due either to capacity or service offering. Importantly, counseling needs are ongoing for survivors—46% of survivors surveyed 6 months after initial services receipt indicated that they had a current or ongoing need for counseling services.

In addition to the immediate civil and criminal legal needs of survivors, there may be longer-term legal needs for people experiencing domestic violence. In 2016, 41% of clients received direct services related to civil legal advocacy/order of protection, and 18% received direct services related to criminal legal advocacy/charges. While the legal system may not be the right path for all survivors, there may be the need for additional outreach or education related to legal services and available remedies. Six months after service receipt, one study found that 16% of survivors needed help with immigration and 23% needed help with divorce. In addition to the legal needs of survivors, stakeholders report that abusers have pressing legal needs that must also be addressed.

Survivors of domestic violence have significant financial barriers to reaching safety and stability. Research suggests that abusers often use tactics of economic abuse, and financial needs related to repairing credit, building assets, or other financial needs are common for survivors. As seen in demographic data, survivors of domestic violence in Chicago have significant economic needs. In 2016, the majority of survivors receiving services from domestic violence agencies reported a monthly income of $1,000 or less; 43.8% of survivors reported a monthly income of $500 or less in 2016. Top needs identified 6 months after initial service receipt include several related to financial or material need, including credit history (29%), financial planning and/or financial literacy (28%), help with food (29%), clothing (30%), and getting work (25%).

There is disparate access to domestic violence services in Chicago. Domestic violence occurs throughout the city of Chicago, but there is disparate access to services for survivors. In fact, communities that have some of the highest rates of domestic violence crimes have the least physical access to domestic violence services. In addition to physical location in the city, further analysis reveals that currently available domestic violence services are predominantly located in majority white communities and/or higher-income communities. The inequities in access to domestic violence services and ultimate solutions must be situated within the context and history of racism, segregation, and poverty in Chicago.

“...[abusers] face many barriers due to their legal issues, especially the impact on their ability to find employment but they also face much difficulty finding adequate housing, low-cost and competent legal services, mental health and counseling services, and adequate childcare.”

“...one of the biggest barriers facing our clients is financial dependence on their abuser...”
Background and Methodology

In order to assess how communities experience and respond to domestic violence, the research team designed a case study. North Lawndale, a community on the west side of Chicago, was selected to be the focus of the case study by the funders of this study. The design of the case study is not intended to be exhaustive, but rather offers a perspective of domestic violence at the community level. Key stakeholders in North Lawndale were identified for qualitative data collection through interviews and focus groups. The research team carried out a provider scan and attended a community stakeholder meeting comprised of service providers from North Lawndale to recruit participants for qualitative data collection. The network of service providers and collaboration among providers in North Lawndale was evident at the community stakeholder meeting observed, and ultimately, more people committed to the focus groups than were able to attend. Thus, one focus group and one modified group interview were conducted for this case study.

Prevalence

In a recent study, 54% of females and 66% of males in North Lawndale reported ever witnessing domestic violence, and 32% of females and 15% of males in North Lawndale reported ever experiencing intimate partner violence. All North Lawndale stakeholders reported that they had either witnessed or personally knew someone who had experienced domestic violence.

In 2016, the Chicago Police Department responded to 1,976 incidents of domestic violence in North Lawndale. North Lawndale had a domestic violence crime incident rate of 5.6%; the incident rate in north Lawndale was the second highest in the city and more than three times the rate for Chicago in 2016. Only four community areas, including North Lawndale, had more than 1,900 incidents of domestic violence in 2016.

Stakeholders from North Lawndale identified the challenging relationship and reliance on police and the justice system in incidents of domestic violence as possibly threatening for residents of North Lawndale. Stakeholders reported concerns contacting police or engaging the justice system because of how police interact with their community on other criminal matters. This could mean that there are even more incidents of domestic violence than reported.

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1 These data come from Sinai Urban Health Institute (2017). Sinai Community Health Survey 2.0: Community Health Counts; available here.
Service Response and Outstanding Need

Despite this demonstrated need for services and high incident rate, there are limited domestic violence-specific resources available in the community. There is one agency with a state-funded domestic violence program that provides services to survivors with disabilities in North Lawndale. There are no city-funded domestic violence agencies in North Lawndale, and there are no domestic violence shelter beds available in North Lawndale.\textsuperscript{176} To reach dedicated domestic violence services, a survivor from the center North Lawndale has to travel, on average, 3.8 miles. To reach dedicated domestic violence services, a survivor would need to travel 2.9 miles to counseling and case management, 2.2 miles from supervised visitation and safe exchange, 3.4 miles to shelter, 4.2 miles to legal services, and 5 miles to legal advocacy from the center of North Lawndale.

While there are few dedicated domestic violence services in North Lawndale, the research team discovered nearly 60 service providers that offer supports in North Lawndale in a systematic provider scan carried out for this case study. The provider scan revealed 13 youth service agencies; 10 family agencies, including early childhood supports; 8 agencies that provide health services, including mental health counseling; 7 agencies that support basic needs; 4 multi-service agencies; 3 employment assistance agencies; and 2 domestic violence agencies, including a program for individuals that have used violence in a relationship and one program for survivors with disabilities. There were 11 agencies that provided other support services, including arts, adult education, funding, housing assistance and shelter, legal services, or other community-based supports.

Access to Services

Key stakeholders identified a need for services for the residents of North Lawndale, including, but not limited to, domestic violence services.\textsuperscript{178} Stakeholders in North Lawndale suggested that the limited availability of services located in North Lawndale may discourage individuals from seeking services.\textsuperscript{179} To this end, building partnerships or establishing domestic violence services within the North Lawndale community may help address this concern and build access to services for survivors.

\begin{tabular}{|c|c|}
\hline
Service Type & Distance to Center North Lawndale \\
\hline
Legal Services & 4.2 miles \\
Shelter & 3.4 miles \\
Legal Advocacy & Case management & 5.0 miles \\
Counseling & Case Management & 2.9 miles \\
Supervised Visitation & Safe Exchange & 2.2 miles \\
\hline
\end{tabular}
Outstanding Needs

Similar to the unmet needs identified throughout Chicago, North Lawndale stakeholders reported a need for affordable housing, emergency shelter, early intervention with youth, and financial assistance and support to leave an abuser. Economic instability was identified as a primary need and initiatives aimed at addressing economic instability can contribute to addressing domestic violence.\textsuperscript{180} Stakeholders identified a demand for general trauma services. North Lawndale stakeholders also identified the role of early intervention and education related to domestic violence and healthy relationships as a way to further address domestic violence. Several stakeholders spoke to the need to improve interactions between systems and people experiencing domestic violence, including relationships with police, courts, the Department of Children and Family Services, and schools. In addition to education for the community and systems actors, stakeholders also spoke of limited trust in orders of protection or community members being fearful to call police.

Community-wide Needs

Stakeholders in North Lawndale also spoke to the greater community-wide need for affordable housing, employment and resources for residents, suggesting that these limited resources are persistent needs for the community and, ultimately, can contribute to domestic violence.\textsuperscript{181} Economic and housing needs were identified as overarching needs for the community. Stakeholders also reported a need to address community violence in North Lawndale. Residents of North Lawndale are experiencing some of the highest rates of violence—both community and interpersonal—in Chicago. Several stakeholders reported that the most overarching need was basic safety. North Lawndale had a homicide rate of 92.6 per 100,000 population, an increase of 28.1 from 2015 to 2016.\textsuperscript{182} Finally, stakeholders also discussed the barriers that young men face when returning to the community after being incarcerated, specifically the employment and housing barriers this population faces and the ways it may contribute to domestic violence.

While not exhaustive, the North Lawndale Case Study provides a community look at domestic violence, highlighting the needs of communities that have limited physical access and exposure to domestic violence services. Despite high rates of domestic violence, there are limited domestic violence resources available in North Lawndale. There is a strong network of providers active in North Lawndale and additional research is needed to better understand how partnership or the development of domestic violence services could be integrated into the existing infrastructure of support services available in this community. In addition to domestic violence services that could be developed in partnership with existing service providers in the community, there is a clear need for additional support for comprehensive services aimed at addressing poverty, violence, and trauma on the community level.

“We need to more fully discuss the relationship of domestic violence to community violence - we need to to better integrate domestic violence services in all area social service network - more education and increased referral to victim and partner abuse services.”
Organizations providing services to individuals experiencing domestic violence receive funding and support from a variety of sources. The largest funder of domestic violence-specific support agencies in Illinois is the federal government. In FY15, federal funding to domestic violence services in Illinois and Chicago totaled $36,804,283, State Funding to domestic violence services in Illinois was $19,982,200, and foundation funding to domestic violence services in Chicago was $8,774,212.¹

1. This includes VOCA, VAWA, FVPSA, Title XX funds in direct grants and pass through dollars to Illinois for domestic violence services, State funding for domestic violence services in Illinois, HUD funding for domestic violence services in Chicago, and foundation funding to domestic violence services in Chicago.
Federal Funding for Domestic Violence Services

The primary vehicles for federal funding are the Victims of Crime Act (VOCA), the Violence Against Women Act (VAWA), Title XX, Family Violence Prevention and Services Act (FVPSA), and the U.S. Department of Housing and Urban Development Community Development Block Grants (CDBG) to Chicago, of which a portion is allocated to domestic violence services. Many of these dollars flow through the state coffers, and must be appropriated by the General Assembly in order to be released to providers. The accompanying flow chart illustrates how each funding source is allocated within Illinois.

The Victims of Crime Act, the Violence Against Women Act, the Family Violence Prevention and Service Act and Title XX funded domestic violence services in Illinois at $43,293,129 in FY16. The U.S. Department of Housing and Urban Development Community Development Block Grant allocated an additional $2,845,897 to the City of Chicago for domestic violence services in FY16. In FY15, domestic violence services in Illinois were funded at $34,002,335 from VOCA, VAWA, FVPSA, and Title XX and CDBG allocated $2,801,948 to domestic violence services in Chicago. Federal funding can be dispersed to domestic violence services in direct grants or as pass through via a local government or non-profit agency. Specific requirements for services, including matching requirements are included in the following sections. Among service providers surveyed in Chicago, federal pass-through dollars comprised 20% of total operating budgets and federal direct grants comprised 26% of total operating budgets on average.

3. See specific funding sources for data notes related to included services within each funding source.
4. Budget documents do not provide enough detail to distinguish between domestic violence and sexual assault funding for a portion of the funds. Specifically, $1,346,913 of this funding that was provided in 2015 to The Wraparound Victim Legal Assistance Network Demonstration Project and the Victim Assistance Discretionary Grant Training Program for VOCA Victim Assistance Grantees.
Illinois Department of Human Services

- Federal Funding Streams
- State Non-profit
- Federal

DOMESTIC VIOLENCE SERVICE PROVIDERS

- Foundations
- Illinois Coalition Against Domestic Violence

CITY

- Cook County
- State's Attorney
- Circuit Court
- Chicago Police Department
- Juvenile Justice

COUNTY

- Department of Family and Support Services

STATE

- Illinois Attorney General

FEDERAL

- Illinois Special State Funds - Domestic Violence Fund
- US Department of Housing and Urban Development
- Social Security Block Grants
- Title XX of the Social Security Act
- Local Initiative Fund
- Donated Funds Initiative
- Family Violence Prevention and Services Act
- Office for Victims of Crime
- Victims of Crime Act (VOCA)
- Adult Project, Child Project and Child Therapy Reimbursement Grants
- Office on Violence Against Women Violence Against Women Act (VAWA)
- STOP, Arrest, and Sexual Assault Grants
- Community Development Block Grant
- Continuums of Care (COCs)

NON-PROFIT

- Illinois Department of Human Services
- Illinois General Revenue Fund
- Illinois Special State Funds - Domestic Violence Abuser Services Fund
- Illinois Special State Funds - Commitment to Human Services Fund
- Illinois Special State Funds - Domestic Violence Shelter and Service Fund
- Illinois Criminal Justice Information Authority
- Illinois Department of Juvenile Justice

FOUNDATIONS
Victims of Crime Act

Each year, the Victims of Crime Act (VOCA) provides a sizable portion of funding to domestic violence services in Illinois. In FY15, $14,195,342 were awarded to domestic violence services in Illinois. VOCA support of domestic violence services primarily supports legal advocacy, however some funding is also allocated for medical advocacy, counseling and therapy, services for Latina survivors, services for rural communities, and services for survivors with substance use issues. VOCA funds require a matching contribution of 20% from non-federal sources and match funds have the same restrictions as VOCA funds.

In Illinois, VOCA funds are distributed by the Illinois Criminal Justice Information Authority (ICJIA). ICJIA also contracts with the Illinois Coalition Against Domestic Violence to administer a portion of these funds. As of publication, ICJIA has not yet released FY16 budget detail for VOCA funds to distinguish grants that were awarded specifically to domestic violence services, as compared to service for other victims of crime, e.g. sexual assault or child abuse. Assuming a similar portion of total VOCA funds were awarded to domestic violence services (16.56%), we can estimate approximately $14.4 million of VOCA funding having been awarded to domestic violence services in Illinois in FY16. VOCA funds are primarily used for direct advocacy services.

Violence Against Women Act

In Illinois, VAWA funds are distributed by the Illinois Criminal Justice Information Authority (ICJIA). ICJIA also contracts with the Illinois Coalition Against Domestic Violence to administer a portion of these funds. VAWA specifies that funds are allocated in the following ways: 25% provided to law enforcement, 30% to service providers, 5% to courts, and 15% is at the discretion of the state.

Domestic violence services in Illinois also receive a significant amount of funding from the Violence Against Women Act (VAWA). In FY15, up to $8,242,094 were awarded to domestic violence services in Illinois and up to $9,952,308 were awarded in 2016. At least $2,255,257 in FY15 and $2,712,839 in 2016 of VAWA funds were awarded to domestic violence services specifically. Most likely, a portion of the remaining funds also went to domestic violence services; however, we cannot determine the exact amount.

5. Budget documents do not provide enough detail to distinguish between domestic violence and other violence against women initiatives for a portion of these funds. Specifically, $5,986,837 of these funds in 2015 and $7,329,469 of funding in 2016 were given to organizations that may serve survivors of domestic violence or another address another form of violence against women.
**Title XX**

Title XX of the Social Security Act provides funding via the Social Services Block Grant (SSBG). SSBG funds are distributed through three funding accounts, the Local Initiative Fund, General Revenue Funds, and Special Purpose Trust Fund. Illinois Department of Human Services uses the Local Initiative Fund to pay for social services provided for under the Donated Funds Initiative. In FY16, domestic violence services received $13,940,623 total in funding from the Donated Funds Initiative and General Revenue Funds. Importantly, the funds allocated to the General Revenue Funds serves as reimbursement for a portion of the General Revenue Funds allocated to domestic violence services discussed in the state funding section. The Illinois Department of Human Services, Family and Community Services division oversees the DFI funding for family support services, including domestic violence services. There was a significant increase in Title XX funding for domestic violence services from FY15 to FY16; in FY15, $6,287,770 were awarded to domestic violence services in Illinois. Title XX funds require a 25% match from the agency, comprised of no less than 10% in cash and 15% of in-kind.

**Family Violence Prevention and Services Act**

Family Violence Prevention and Services Act (FVPSA) funds are distributed by the Illinois Department of Human Services. FVPSA funds are for shelter, safety planning, crisis counseling, information and referrals, legal advocacy, and other support services for survivors and their children. In FY16, FVPSA provided $5,018,200 in funding to domestic violence services in Illinois. States may use up to 5% for state administrative costs and the remaining funds are provided to sub-grantees. Notably, at least 70% of awarded funds must go towards shelter, shelter expenses, and programming for survivors and their children, and the remaining 25% can be used for a number of other specified services for individuals experiencing domestic violence. FVPSA sub-grantees must provide a non-federal match of at least $1 for every $5 of federal funding received.

**U.S. Department of Housing and Urban Development**

The City of Chicago receives a Community Development Block Grant from the U.S. Department of Housing and Urban Development to support human services, such as housing, seniors, and workforce training. In Chicago, a portion of these funds is allocated to domestic violence services and administered by the City of Chicago Department of Family and Support Services. In FY16, $2,845,897 were provided to domestic violence services; $2,474,897 for domestic violence services via the Department of Family & Support Services and $371,000 for school based programs for youth and parenting education for adults to prevent family violence through restorative practices. In FY15, the Department of Family & Support Services received $2,430,948 for domestic violence services in Chicago and school-based programs received $371,000. The Department of Housing and Urban Development also operates the Continuum of Care Program aimed at ending homelessness. These funds are available to programs that provide housing services to people experiencing domestic violence.
State Funding

In total, the State of Illinois provided $19,982,200 to domestic violence services in Illinois in FY15.\textsuperscript{206} State funding comprises a sizable minority of funding for service providers; on average, state funding comprises 39\% of operating budgets for the organizations that receive it.\textsuperscript{207} For 43\% of the agencies that receive this funding, however, state funding accounts for the majority of their operating budgets.\textsuperscript{208}

The largest amount of state funding for domestic violence services has historically been appropriated out of Illinois’s General Revenue Fund (GRF). In FY15, the GRF provided $18,635,000 for domestic violence services in Illinois.\textsuperscript{209} Traditionally, General Revenue Funds cover comprehensive domestic violence services, including shelter, crisis hotline services, counseling, advocacy, transportation, information and referrals, and outreach and prevention services.\textsuperscript{210} The state requires these granted recipients to have matching funds that will not exceed 25\% of the grant.\textsuperscript{211}

In FY16, the General Assembly appropriated $18,215,700 of the General Revenue Funds for domestic violence services in Illinois.\textsuperscript{212}

Historically, state funding for domestic violence services also comes from the following Special State Funds:

- Domestic Violence Fund distributed by the Office of the Illinois Attorney General,
- Domestic Violence Abuser Services Fund distributed by IDHS;
- The Commitment to Human Services Fund distributed by IDHS;
- Domestic Violence Shelter and Service Fund distributed by IDHS; and
- Illinois Violence Prevention Authority distributed by ICJIA.

The General Assembly appropriated $500,000 for legal advocacy and assistance to services and victims in FY15 and FY16 from the Domestic Violence Fund.\textsuperscript{213} The General Assembly appropriated $100,000 of the Domestic Violence Abuser Services Fund, and $925,200 of the Domestic Violence Shelter and Service Fund was appropriated by the General Assembly in FY15 and FY16.\textsuperscript{214} In FY15, the General Assembly also appropriated $15,000 for family shelter and $280,000 for infrastructure development for a Chicago-based organization from the Build Illinois Bond Fund.\textsuperscript{215} In total, the General Assembly appropriated $19,767,900 to domestic violence services in FY16 and $19,982,000 in FY15.\textsuperscript{216}
Illinois State Budget Crisis
For years, Illinois has faced budget challenges, including ever-expanding pension obligations and limited revenue. In January 2015, Illinois’s temporary income tax rate expired, resulting in the significant losses of revenue to a system that has already been struggling to meet its priorities. In the wake of this dramatic loss of revenue, the General Assembly and the Governor have failed to pass a budget, with funding to back it up. FY18 would have marked a third year without a budget. The General Assembly and the Governor have relied on partial or stop-gap appropriations and court orders to keep the state functioning at only the most basic level. Domestic violence services, like most state-funded services, have been struggling to keep their doors open while they weather the crisis. In December 2015, the General Assembly passed, and the Governor subsequently signed, SB2039 which provided funding for local governments, emergency systems, lottery payments, and domestic violence services. Several months later, in June 2016, the General Assembly also passed a “stop gap” budget that appropriated some funds for human services for FY16 and the first half of FY17. The result was that many human service providers were made close to whole for FY16, but there were few dollars left for FY17 services. Domestic violence did not receive any appropriations in the “stop gap” bill.

The state budget impasse came to an end on July 6, 2017 when the General Assembly voted to override Governor Rauner’s veto and pass a revenue, spending, and implementation plan for the first time since 2015. Despite the fact that this bill should help stabilize Illinois and ameliorate some of the drastic long-term consequences of operating without a budget for years, the revenue generated is simply not enough to support services to meet the needs of people in Illinois. Furthermore, the infrastructure of services has weakened over the years without a state budget and there is lasting damage and uncertainty for service providers in Illinois.

The impact of the budget impasse on service providers was devastating. As outlined in the Networks and Referrals section of this report, domestic violence service providers work closely with a variety of service providers to meet the need of survivors and their children. In addition to the direct impact to domestic violence service providers, important referral partners have been impacted by the state budget impasse, including homeless service providers, mental health services, employment and training programs, and community violence prevention programs.

“It has drained morale of the staff and impacted the quality of services they are delivering. It is stressful to wonder if your services and livelihood is considered ‘non-essential’ or not.”
Service providers surveyed for this study have been impacted by the state budget impasse in a number of ways. Among service providers that reported having to reduce or eliminate programming in the past year, 67% identified that this was due to state funding cuts or the state budget crisis.\textsuperscript{219}

The state budget impasse has impacted service providers that offer services to survivors of domestic violence. Of survey respondents that indicate that they primarily serve survivors of domestic violence, 65% reported that they have limited referral partners as a result of the state budget impasse; 47% of service providers that primarily serve survivors of domestic violence have tapped into cash reserves, 41% have had to reduce staff, and 35% have tapped into lines of credit.\textsuperscript{220} In addition to the specific budgetary impact the state budget impasse had on service providers, stakeholders also reported that the crisis reduced staff morale. The State of Illinois must work to consistently and adequately fund social services and rebuild the infrastructure that was damaged during the budget impasse.

**Philanthropy**

Service providers surveyed reported that they already receive a significant portion of their funding from foundations and individual donors. On average, foundation support comprised 30% of Service providers’ operating budgets.\textsuperscript{221} Individual donor funding comprised, on average, 26% of operating budgets.\textsuperscript{224}

Foundation Center Data indicates that $8,774,212 in foundation support was provided to Chicago-based domestic violence service organizations in 2015, the most recent year available.\textsuperscript{225} There is no comprehensive data set to track individual giving to domestic violence centers in Illinois.

<table>
<thead>
<tr>
<th>Top Four Impacts of State Budget Impasse on DV Service Providers</th>
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<tbody>
<tr>
<td><strong>Reduced numbers of referral partners</strong></td>
</tr>
<tr>
<td><strong>Tapped into cash reserves</strong></td>
</tr>
<tr>
<td><strong>Reduced staff</strong></td>
</tr>
<tr>
<td><strong>Tapped into lines of credit</strong></td>
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CONCLUSION AND RECOMMENDATIONS

Domestic violence is pervasive and occurs in every community throughout Chicago. There is an active network of strong providers offering services to survivors of domestic violence in Chicago, and providers work together to meet the needs of survivors. However, there remain significant gaps in services for survivors, and funding for these critical services is at risk. Different players within the response system should use the included findings and recommendations to guide relevant strategy and intervention and to promote a cohesive approach to advancing the domestic violence response system in Chicago.

In order to better meet survivors’ needs and continue to strengthen the domestic violence response system, IMPACT recommends the following changes to funding, policy, and practice to bolster the domestic violence response in Chicago:

**Continue to fund services aimed at meeting the immediate needs of survivors, and invest in long-term solutions that address barriers to safety and stability.** Current services are heavily used by survivors of domestic violence. These service types overwhelmingly match those requested by survivors, and appear to consistently operate at or over capacity. When an individual organization cannot meet a survivor’s needs, either due to capacity or service offering, service providers rely on networks and referrals to meet the needs of survivors. The demand for existing emergency services is unrelenting. In addition to continued support of these vital services, additional support strategies should be developed in order to understand and meet the longer-term needs of survivors, e.g. support of both emergency shelter and permanent housing solutions.

**Support and encourage flexibility in response and service provision to allow for individualization of response to meet the wide range of supports needed to reach safety and stability.** Funding for domestic violence services is provided by a complex web of federal, state, and foundation dollars. These funds are often restricted to specific service categories or forms of delivery. While this strategy ensures funding for important services and model fidelity, it does not allow for innovation or flexibility to meet the unique needs of survivors. Service providers reported that, at times, they have limited ability to respond to the individual needs in a way that could promote safety and stability. Funders should consider supporting diverse services, flexible funds, and continued research and data collection that can help document and assess persistent needs of survivors.
Support policies and programs that will contribute to long-term safety and stability of survivors, including policies to address poverty and the economic needs of survivors. There are demonstrated persistent economic needs among survivors seeking services in Chicago. In 2016, 43.8% of survivors had a monthly income of $500 or less.\textsuperscript{228} The median gross rent in Chicago is $985.\textsuperscript{227} In addition to this demonstrated economic need among service recipients, economic abuse is commonly used in domestic violence, contributing to the financial needs of survivors.\textsuperscript{228} The economic barriers for survivors must be addressed in order to support long-term safety and stability of survivors and their children.

Address the systemic inequities that exist in the availability and access to domestic violence services and support. All communities in Chicago experience domestic violence. However, not all communities are resourced in the same way to respond to this pervasive issue. In fact, some of the communities with the highest rates of domestic violence have some of the least physical access to services. Furthermore, communities with the least access are, overwhelmingly, communities of color and/or communities experiencing high rates of poverty. The inequities in access to domestic violence services must be situated within the context and history of racism, segregation, and poverty in Chicago.

Continually assess and improve coordinating efforts among relevant stakeholders in order to ensure a cohesive response to domestic violence. Networks of providers and systems are critically important to the domestic violence response, and these networks have continually evolved in Chicago to meet the needs of survivors. However, continual commitment and support of these networks is necessary to ensure a healthy and comprehensive response system. Renewed effort and support of ongoing assessment and education of these networks is needed. These efforts should include systems and the diverse set of service providers that ultimately meet the needs of survivors.
The State of Illinois must adequately and consistently fund human services. Illinois just recently passed a budget for the first time in more than two years. Despite the fact that this bill should help stabilize Illinois and ameliorate some of the most drastic consequences of operating without a budget for years, the revenue generated by this bill is simply not enough. Ongoing work is needed to rebuild the damaged infrastructure of human services in Illinois, and the state must ensure adequate revenue to pay bills in a timely manner. During the protracted budget crisis in Illinois, service providers had to tap into lines of credit, reduce services, or even close. Coupled with the state budget, the new federal administration has threatened significant cuts to domestic violence related funding. Taken together, leaders at all levels of government must raise and allocate the funds necessary to support this system.

Support research aimed at uncovering the needs and experiences of domestic violence survivors who do not engage with traditional response systems. Many survivors of domestic violence do not access services or are not represented in available domestic violence data for a myriad of reasons. Additional research is needed to better understand why some survivors do not engage with the formal domestic violence response system, and determine if existing services can and should adapt to meet the needs of these survivors. Research explicitly targeting survivors that are absent from these data will allow for an expanded assessment of service needs and barriers for survivors that do not engage with the traditional domestic violence response system, and contribute to general knowledge of domestic violence.
ENDNOTES


4 These data only represent incidents that police responded to and categorized as domestic violence. This does not represent police calls. Author’s analysis of Police Crime Data Portal, 2016.

5 Ibid.


8 Author’s analysis of InfoNet Data provided by ICJIA, 2016.

9 Ibid.

10 Race and ethnicity are collected separately in these data. Author’s analysis of InfoNet data provided by ICJIA, 2016.

11 Author’s analysis of InfoNet Data provided by ICJIA, 2016.

12 Ibid.

13 Ibid.

14 Ibid.

15 Ibid.

16 Ibid.

17 Ibid.

18 Ibid.

19 Ibid.

20 Author’s analysis of Survey of Service Providers, Survey Administered February- March, 2017.

21 Author’s analysis of InfoNet Data provided by ICJIA, 2015 and 2016.

22 Author’s analysis of Survey of Service Providers, Survey Administered February- March, 2017.

23 Author’s analysis of InfoNet Data provided by ICJIA, 2016.

24 Ibid.


26 Author’s analysis of State of Illinois Hotline Data, 2016.


28 Ibid.


30 Ibid.


37 Nationally, police responded to 64% of reported domestic violence incidents in 10 minutes or less from 2006-2015. *U.S. Department of Justice, Bureau of Justice Statistics (2017, May)*. Available here.


40 Police data includes the geographic coordinates for each incident of domestic violence. These geographic coordinates were used to map incidents of domestic violence and to determine rates of domestic violence within community areas. *Police Crime Data Portal*, 2016; Author’s analysis of 2011-2015 American Community Survey 5-year estimates, *U.S. Census Fact Finder*; available here.


43 Some of the specific incidents of domestic violence were missing specific geographic coordinates and were unable to be mapped. Therefore, the total number of crimes mapped in this way, and the corresponding rates associated with community area are based on the number of incidents that have associated geographic coordinates. There were 44,245 incidents with corresponding coordinates in 2016. *Police Crime Data Portal*, 2016; Author’s analysis of 2011-2015 American Community Survey 5-year estimates, *U.S. Census Fact Finder*; available here.


45 Author’s analysis of the Illinois Coalition Against Domestic Violence Homicide reports 2010-2016. available here.


47 Author’s analysis of Illinois Coalition Against Domestic Violence Homicide Reports, FY10-FY16; available here.

48 Women’s Law, Illinois: Orders of Protection; available here.

49 Clerk of the Circuit Court of Cook County, Order of Protection; available here., and Women’s Law, Orders of Protection, Illinois; available here.


51 Author’s analysis of Illinois Criminal Justice Information Authority, Research and Analysis: Downloadable Datasets, Orders of Protection; available here.

52 Author’s analysis of Illinois Criminal Justice Information Authority, Research and Analysis: Downloadable Datasets, Orders of Protection; available here.


54 Author’s analysis of *State of Illinois Domestic Violence Hotline*, 2016.


56 Callers were able to select all types of abuse experienced. Author analysis of *State of Illinois Domestic Violence Hotline Data*, 2016.

57 Author’s analysis of *InfoNet Data*, 2016.


59 Author’s analysis of *InfoNet Data provided by ICJIA*, 2016.

60 Author’s analysis of *InfoNet Data provided by ICJIA*, 2016.


64 *Ibid.*

65 Author’s analysis of *State of Illinois Hotline Data*, 2015 and 2016.

66 Author’s analysis of *InfoNet Data provided by ICJIA*, 2016.


68 Author’s analysis of *InfoNet Data provided by ICJIA*, 2015 and 2016.


70 Author’s analysis of *InfoNet Data provided by ICJIA*, 2016.


73 Key informant interview with stakeholder, carried out June 14, 2017.
75 Illinois Administrative Code, Title 89, Chapter IV, subchapter a, part 501: Partner Abuse Intervention; available here.
76 Illinois Department of Human Services, Illinois PAIP Protocol Programs, last updated July 2014; available here.
77 Illinois Department of Human Services, 2010 Partner Abuse Intervention Programs Fact Sheet; available here.
79 Illinois Department of Human Services, 2011 Partner Abuse Intervention Programs Fact Sheet; available here.
80 Author’s analysis of State of Illinois Hotline Data, 2015 and 2016.
81 Author’s analysis of State of Illinois Hotline Data, 2016.
82 Ibid.
83 Ibid.
84 Illinois Criminal Justice Information Authority, InfoNet Overview, available here.
85 Illinois Criminal Justice Information Authority, InfoNet Overview; available here.; and Author’s analysis of InfoNet Data, 2016.
86 Author’s analysis of Survey of Service Providers, Survey Administered February-March, 2017.
87 Ibid.
93 Author’s analysis of Survey of Service Providers, Survey Administered February-March, 2017.
94 Author’s analysis of Key Informant Interviews carried out from March – June, 2017.
95 Ibid.
96 Ibid.
97 Ibid.
98 Author’s analysis of Key Informant Interview conducted on March 29, 2017.
99 Author’s analysis of Key Informant Interview conducted on March 30, 2017.
100 Author’s analysis of Key Informant Interview conducted on March 29, 2017.
101 State of Illinois, Circuit Court of Cook County, Domestic Violence Courthouse. Available here.
102 Author’s analysis of Key Informant Interviews carried out from March – June, 2017.
103 Author’s analysis of State of Illinois Hotline Data, 2015 and 2016.
104 Ibid.
105 Ibid.
106 Author’s analysis of Hotline data, 2016.
108 Ibid.
109 The total number of referrals may be greater than the number of adult clients because some clients may have multiple referral sources. Author’s analysis of InfoNet Data, 2016.
110 Author’s analysis of State of Illinois Hotline Data, 2016.
111 Ibid.
112 Author’s analysis of State of Illinois Hotline Data, 2015 and 2016.
113 Author’s analysis of State of Illinois Hotline Data, 2016.
114 Ibid.
115 Ibid.
116 Ibid.
117 Ibid.
118 Ibid.
Author’s analysis of InfoNet Data, 2016.

Author’s analysis of InfoNet Data provided by ICJIA, 2015 and 2016.

Author’s analysis of InfoNet Data provided by ICJIA, 2015 and 2016.

Author’s analysis of InfoNet Data provided by ICJIA, 2016.


Author’s analysis of Survey of Service Providers, Survey Administered February- March, 2017.

Ibid.

Author’s analysis of Key Informant Interview conducted March 29, 2017 and author’s analysis of key informant interview conducted May 31, 2017.

Author’s analysis of InfoNet data provided by ICJIA, 2016.

Author’s analysis of State of Illinois Hotline Data, 2016.

Author’s analysis of State of Illinois Hotline Data, 2015.

Author’s analysis of InfoNet Data provided by ICJIA, 2016.

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Ibid.

Ibid.

Ibid.

Ibid.

Ibid.

Ibid.

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Ibid.


Ibid.

Ibid.

Ibid.

Ibid.

Ibid.

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Author’s analysis of State of Illinois Hotline Data, 2016.

Personal communication between report author and InfoNet manager, December 14, 2016.

Author’s analysis of InfoNet Data, 2016.

Ibid.

Ibid.

Ibid.

Author’s analysis of InfoNet Data provided by ICJIA, 2016.

Author’s analysis of InfoNet data provided by ICJIA, 2016.

Author’s analysis of State of Illinois Hotline Data, 2016.

Author’s analysis of State of Illinois Hotline Data, 2015.

Author’s analysis of State of Illinois Hotline Data, 2016.


Ibid.

Ibid.

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