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Executive Summary

EVALUATING THE EFFECTIVENESS OF DOMESTIC VIOLENCE SERVICES

in Memphis and Shelby County

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INTRODUCTION

Domestic violence (DV) is one of the most serious crime problems facing Memphis and Shelby County, Tennessee. High numbers of victims and increasing violence require a coordinated, community-wide effort to provide services for survivors. While community need is clear, the ability of the community to respond effectively is less clear. In 2018, the State of Tennessee Office of Criminal Justice Programs (OCJP) funded the University of Memphis' Public Safety Institute and Department of Criminology and Criminal Justice to accomplish the following: 1) assess community need for services; 2) assess awareness of and perceptions of services; 3) develop a better understanding of how victims are connected to services; and 4) assess the effectiveness of the Family Safety Center (FSC).

NEED FOR SERVICES

Need for services was assessed in two ways: 1) an 8-question postcard survey mailed to 28,520 addresses in randomly selected high-risk zip codes (with 420 returned); and 2) a random sampleof 400 Lethality Screen Scoring (LSS) forms resulting from police interactions with certain DV victims between June 2018 and May 2019. The LSS form measures victim risk of death from DV and is a local adaptation of the Lethality Assessment Protocol (LAP) consisting of 11 questions, including 2 sets of trigger questions that should result in referral protocols. Victims also can screen in as high risk via "officer belief."

Postcard responses rated DV a serious problem in Shelby County, with 43% rating DV a serious problem in their neighborhood. While some knew victims who had received help, more reported knowing victims who did not get help. Finally, while nearly 37% of respondents knew places to seek help, fewer reported knowing the location of the FSC or the Shelby County CrimeVictims and Rape Crisis Center (CVRCC) or knew how those agencies could help.

Of the 400 LSS forms analyzed, 79% of victims were classified as "high risk" for lethality, and nearly 62% of those spoke with a hotline counselor. Whether victims spoke with a counselor depended on how they screened in as high-risk; victims who screened in by answering "yes" toany of the first three questions were more likely than others to follow-through with a hotline counselor. Very few victims (n = 13) were screened in based on officer belief.

AWARENESS OF AND PERCEPTIONS OF SERVICE

A "DV Services" survey measured awareness of and perception of DV services among law enforcement officers (n = 521) and prosecutors (n = 40). Prosecutors reported monthly average interactions with DV survivors ranging from 0 to greater than 50, while law enforcement respondents' interactions ranged from 0 to more than 500. These interactions most often resulted in referrals to primary local service providers; prosecutors referred about 30 survivors and law enforcement respondents referred about 100 survivors each month. Along with primary local service providers, other providers mentioned to which practitioners referred survivors included Memphis Area Legal Services, Hope Works, Casa Luz, Agape, ministers, and psychologists.

In addition to those criminal justice practitioners, 99 DV service providers were surveyed with 12 agencies responding.[1] This survey measured services for DV survivors, the extents to which each agency referred to other agencies and received referrals from other agencies, the perceived quality of services, and respondent wishes for improvements to the agency or services. Primary reported referral *sources* were the FSC, CVRCC, YWCA, Kindred Place, MemphisPolice Department (MPD), Shelby County Sheriff's Office (SCSO), and the office of Shelby County District Attorney General (SCDAG). Additional referral sources were reported, including existing/former clients and word of mouth. Respondents also estimated they *referred to* service providers an average of about 24 clients each month. Referrals made for services included legal aid, safety planning, and employment assistance.

[1] The FSC did not respond to the survey, despite multiple attempts to elicit a response..

Write-in responses revealed three trends:

1) a lack of resources available for both pursuing DV cases in the criminal justice system and lack of resources available for DV survivors;

2) a need for victims' education and resources to remove themselves from the cycle of violence; and

3) a perceived breakdown between different agencies beyond lack of communication.

Shelter and housing were explicitly stated as major issues, specifically a need for transitional housing, better housing options, and options for women with children. Better security for shelters was emphasized, and respondents felt that shelters should not put time constraints on shelter stays. Other comments called for 24/7 DV service availability, a list of service providers,[2] counseling services, more education, and more resources, in general.Service providers specifically wished for resources to support staff self-care.

Criminal justice practitioners expressed displeasure about each other; law enforcement complained about prosecutors' unwillingness to prosecute cases, even with what they perceived as good evidence, and prosecutors accused law enforcement of negligence and providing bad evidence for DV cases. Despite this apparent conflict, all respondents felt the pressure of not having enough resources to properly serve, investigate, and adjudicate DV cases.

To supplement surveys, focus group interviews were conducted with survivors, service providers, and practitioners. Focus group interviews are interviews with small groups of people (6-8) who share a common interest, perspective, role, or problem to better understand their perceptions about a specific issue. Interviews are analyzed to identify common themes.

[2] Several law enforcement employees expressed dissatisfaction with the services that FSC provides to victims/survivors, with one going as far to say that it"seems they really don't care." Additional criticisms included that a lack of after-hour services from the FSC halts and complicates the process of getting DV victims into shelters. This was a commonly cited wish, not just specifically regarding the services from FSC.

In this project, survivors referred by the FSC, CVRCC, Agape, Casa Luz, and the YWCA were interviewed. Core issues facing DV survivors going through the criminal justice system were identified, including: 1) contact with the criminal justice system; 2)interactions with social service agencies; and 3) expectations for outcomes. Interviewed service providers identified several key issues related to working with DV victims: 1) challenges in partnerships; 2)challenges in referral processes; 3) lack of funding/services; 4) challenges related to the victims' own situations; and 5) COVID-19. The core issues identified by interviewed criminal justice practitioners included: 1) unmet victim needs; 2) lack of funding; and 3) COVID-19.

Across interviewed groups, lack of funding, relocation services, and housing were reiterated as central challenges in enhancing victim safety and providing quality services to victims, including criminal justice system resolution of cases. Concerns relating to the impact of COVID- 19 were common across the interviews held in 2020. Pandemic conditions resulted in cases being pushed back, victims no longer wanting to prosecute after waiting an extended period, and the inability to do face-to-face service provision, which reduced the ability of criminal justice personnel to establish rapport with victims and increase cooperation.

CONNECTIONS OF VICTIMS TO SERVICES

The ways victims were connected to services were assessed in terms of the availability and volume of service providers, the processes by which victims connect to agencies, and the collaboration between agencies in terms of their interactions with respect to victims, as well as how data are shared for continuum of services. Social network analysis (SNA) used responses from the 12 surveyed provider agencies to obtain a better understanding and graphic depiction of the extent to which agencies refer to and receive referral from other agencies. Although 99 unique service providers were initially identified in 2019, this list is likely not exhaustive but may also include agencies that no longer exist.

The SNA process identified Agape and Casa Luz as the two providers receiving the most referrals on average per month. Agape receives referrals primarily from non-profit sources, while Casa Luz serves Hispanic and Latinx survivors through referrals from Shelby County government entities. The Memphis Area Women's Council (MAWC) refers the most clients to other agencies, approximately 100 on average each month. However, the CVRCC is the most *central* agency to the provider network, acting as both a source of referrals to non-profit organizations and as a recipient of referrals from the FSC, the YWCA, and other agencies.

Lack of participation by the FSC limits these analyses. While the 12 respondents estimated how many referrals they received from FSC and how many clients they referred to FSC,the FSC did not respond or participate in the survey. As a result, there are no estimates regarding the FSC's position within this social network. The FSC is supposed to be the county's primary source of service referrals for survivors, but there is no way to estimate the extent to which that is happening with the current analyses.

EFFECTIVENESS OF THE FSC

Secondary client-level data collected and maintained by the FSC were used to determine FSC effectiveness: 1) the Conflict Tactics Scale (CTS-2), which gauges victim safety and conflict resolution skills at intake("pre") and at a follow-up 30-90 days later ("post"); 2) the Herth Hope Index (HHI), which measures overall client hopefulness in terms of future orientation, positivity, and interconnectedness at intake immediately before and immediately after meeting with an FSC Navigator; and 3) a 17-item exit survey, which measures client satisfaction with and

understanding of services. Exit survey data were also assessed for patterns by zip codes, to explore the relationship between location and access to services. During the evaluation period, over 3,000 clients visited the FSC seeking assistance after experiencing a DV victimization, but only 280 had complete sets of CTS-2 scores. Among these 280, however, follow-up scores indicated clients were likely leaving violent relationships and were at reduced risk of further harm. Similarly, hopefulness, future orientation, positivity, and interconnectedness significantly increased after visiting the FSC.

Clients also reported being very satisfied with their experiences with the staff and services at the FSC. Nearly all clients (98.4%) somewhat or strongly agreed with the statement, "The FSC helped me learn how to access services and community resources." Of more than 1,000 clients who reported in the exit survey that they received an external referral to services, most received one or two referrals, generally for children's counseling and victim advocacy. Kindred Place and Memphis Area Legal Services were the most referred service providers. When asked to name services they would like to have, clients mentioned things such as self- defense classes, job placement assistance, and programs on healthy relationships, among others.

Zip code analysis of FSC client exit surveys was conducted to determine whether domestic violence repeat victimization, and therefore possibly repeat offending, is more prevalent in some zip codes than in others. FSC clients resided in 36 zip codes in Shelby County, with the top five zip codes being 38127, 38109, 38128, 38118, and 38116. Repeat clients were most likely to come from zip codes 38127 (Frayser in the Austin Peay MPD precinct) and 38118 (Hickory Hill in the Mt. Moriah/Ridgeway MPD precincts). Maps of DV incidents from MPD largely followed the FSC client zip code patterns, although the 38114 zip code

(Orange Mound) had a high concentration of DV incidents but not FSC clients.

CONCLUSIONS AND RECOMMENDATIONS

The full report is available at https://www.memphis.edu/psi/research/ and contains an exhaustive list of conclusions and recommendations. Highlights, however, include widespread frustration among DV victims, criminal justice personnel, and service providers related to the inability or unwillingness of agencies to cooperate in providing a continuum of services to victims and survivors, challenges related to agency collaboration and communication, and lack of funding and services available for the body of victims and survivors pursuing social services. Programs need more staff and funding to increase capacity and provide more comprehensive assistance, rather than cutting corners to serve more clients. DV services should be available 24 hours a day, 365 days a year. Housing services desperately need to be bolstered for domestic violence victims and their families. The housing challenge may need to be addressed before other services can be possible or effective. The lack of 24/7 assistance by the FSC makes it difficult to proceed with a "housing first" mentality and hampers the ability of law enforcement and practitioners to provide immediate assistance.

Absent commitments to action, including resources and collaboration, the problems identified in assisting victims of domestic violence in their participation in criminal justice processes will likely continue. Funding deficits, overworked and understaffed service providers and criminal justice practitioners, and an inability to provide the services most victims need, particularly housing, highlight the challenges the community faces in

reducing domestic violence.

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