

# Meeting Survivors' Needs through Non-Residential Domestic Violence Services & Supports: Results of a Multi-State Study

## Key Findings and Frequently Asked Questions

February 2012

### Background

The National Resource Center on Domestic Violence (NRCDV) and the University of Connecticut School of Social Work collected new data in 2010 that documents how local domestic violence programs are meeting survivors' needs. *Meeting Survivors' Needs through Non-Residential Domestic Violence Services & Supports: Results of a Multi-State Study* was conducted by Dr. Eleanor Lyon and Dr. Jill Bradshaw of the University of Connecticut School of Social Work and Anne Menard of NRCDV, with joint support from the U.S. Department of Justice and the U.S. Department of Health and Human Services.

The researchers collaborated with programs across four states—Alabama, Illinois, Massachusetts, and Washington—and with four culturally-specific national organizations and their associated programs across the nation. These included the Asian & Pacific Islander Institute on Domestic Violence, Casa de Esperanza, the Institute on Domestic Violence in the African American Community, and the Women of Color Network. Data collection involved 90 urban, rural and suburban community-based domestic violence programs and nearly 1,500 domestic violence survivors who completed surveys in 2010 about their experiences seeking and receiving non-residential domestic violence services and supports.

**The Study Executive Summary, Full Report, Fact Sheet and other materials can be found on VAWnet.org, the NRCDV's online resource center, at [www.vawnet.org/research/MeetingSurvivorsNeeds](http://www.vawnet.org/research/MeetingSurvivorsNeeds).**

### Key Study Findings

- **Survivors found services and supports helpful.** More than three out of four of the nearly 1,500 domestic violence survivors who used support groups, counseling, supportive services and legal advocacy found these services to be “very helpful.” The vast majority of other survivors using these services found them to be “helpful.”
- **The state of the economy continues to have a negative effect on survivors.** About 45% of the survivors reported experiencing financial difficulties, including many not being able to pay their bills.

### Survivor Outcomes

- **DV programs facilitated positive outcomes for survivors.** After seeking and receiving help, 95% of survivors were more knowledgeable about planning for their safety and more hopeful about the future.

## Ranking of Survivor Outcomes

Because of the various help I have received <b>from this program</b> so far, I feel...	N	% "Yes"
...more hopeful about the future.	1384	95.4%
...I know more ways to plan for my safety.	1400	95.0%
...that I will achieve the goals I set for myself.	1365	94.7%
...I know more about my rights and options.	1387	93.4%
...more comfortable asking for help.	1369	93.3%
...like I can do more things I want to do.	1371	91.3%
...more confident in making decisions.	1378	92.7%
...I know more about community resources.	1370	88.5%
...I get more support from family & friends.	1343	78.4%

- **The outcomes reported in this study are related to measures of well-being that are increasingly being used in studies to investigate evidence-based or evidence-informed practice, and cover improved efficacy, knowledge, confidence and hope, as well as safety.**

  - Two are the same outcomes as those reported to the Family Violence Prevention and Services Program at the U.S. Department of Health and Human Services (the major source of federal funding for many DV programs) by grantees across the country. These are “I know more ways to plan for my safety” and “I know more about community resources.” These outcomes are related to measures of change associated with longer-term safety and well-being in more controlled, experimental studies.
  - The Substance Abuse and Mental Health Services Administration/HHS (SAMHSA) has identified feeling more hopeful about the future as the foundation of recovery from traumatic experiences.
  
- **In general, the more contacts survivors had with a program, the more likely they are to report they had received all of the different kinds of help they wanted.**
  
- **Even programs with limited resources achieved significant outcomes.** These extensive services, and high rates of satisfaction and positive outcomes, were achieved with the help of DV program staff working with starting salaries averaging less than \$29,000 per year and in programs where more than half had operating budgets of less than \$500,000.

## Needs of Survivors

- **Survivors have a complex and interrelated range of needs.** Survivors were asked about 54 different specific services and supports they might need. These were combined statistically into the following 11 areas of need, (with percentages representing those survivors who indicated needing this type of service or support):
  1. Information/support needs – 93%
  2. Safety needs – 88%
  3. Legal advocacy needs – 76%
  4. Child-related needs – 65%
  5. Economic needs – 59%
  6. Victimization-related needs – 57%
  7. Family-related needs – 57%
  8. Physical/mental health needs – 51%
  9. Criminal legal needs – 32%
  10. Immigration-related needs – 30%
  11. Vulnerability-related needs – 24%
  
- **Survivors who are mothers identified a number of child-related needs.** Help with counseling for their children was the number-one child-related need for mothers.
  
- **Survivors received a variety of types of services.** Most survivors (78%) were receiving more than one of four types of service (support services, support group, counseling or legal advocacy); 37% were receiving 3 or 4.
  
- **Culturally appropriate and competent services are vital.** Of survivors recruited to participate by both mainstream domestic violence programs and culturally-specific programs, nearly half (46.4 %) of the survivors came to the U.S. from another country. These survivors and U.S born survivors from diverse racial and ethnic backgrounds underscore the need for accessible and culturally responsive services and supports.

## Study Implications

- **The study findings have important implications for domestic violence programs.**
  - Survivors report high levels of satisfaction with the services and supports they receive, and with program staff, suggesting that DV programs should continue to offer a broad array of services and continue with staff training efforts.
  - High correlation between services and supports “wanted” and those “received” suggests that programs are meeting the needs of survivors in many areas; but there is room for improvement in meeting economic needs, legal advocacy needs, and supports for children.
  - Outcomes suggest that DV programs are creating positive change in the lives of survivors.

- **The study findings also have implications for training and practice.**
  - Domestic violence survivors have multiple and complex needs and need comprehensive and collaborative approaches from the programs they reach out to for assistance and support.
  - Many survivors want/need to remain in a relationship with the person who has abused them, which reinforces the importance of safety planning that takes this reality into account, and of services for people who are abusing their partners.
  - Needs related to children are primary among mothers.
  - Culturally appropriate/competent services are vital.

## Frequently Asked Questions

**Can we say that these findings are representative of all survivors in all DV programs across the country?**

- **No, that would be incorrect, because this study is based on a sample in 4 states and has other limitations.** All research studies have limitations, and the most important limitations for this one are provided below.
  - **The study is based on just four states.** But the states are from the 4 major regions: north central, south, east and west, and have a range of areas and economies (rural, urban, suburban; major industrial and information technology, plus agricultural).
  - **Just 31% of the programs in the 4 states took part in the study.** The programs that declined to participate included primarily those with the most and least capacity and those that were taking part in other studies or had suffered from budget or staffing cuts or turnover. There is no discernable bias in the programs sampled. The services they provide are essentially the same, and at about the same rates, as those reported in the 2010 NNEDV national Program Census.
  - **The results are biased because survivors with only one contact were excluded and we don't know the impact of that exclusion. Survivors who had their needs met in one contact are left out, as are those who did not return for other reasons.** However, services for DV survivors are limited in most communities, so even if a person was dissatisfied s/he is likely to try again at least once. The research team felt it was important for study participants to have had a minimum of 2 contacts with the participating programs because they wanted to ask about outcomes (and asking about change after a single contact is not a fair measure), and wanted to obtain a comprehensive picture of desired services. We learned from the Shelter Study, released in 2008, that survivors don't always know what might be helpful (or available) to them at their first visit.

- **However, it would be correct to say that this is a large sample of survivors from a wide range of DV programs that are very similar to others across the country.** While the study included extra “culturally-specific” programs to increase understanding of their survivors’ needs and services better, these programs were similar to the others in many ways, and many of the needs identified were similar as well.

### **Are local programs providing services to men as well as women?**

- Yes. The local programs participating in the study are providing services to women and men.
- Limited information on male survivors makes comparisons with female survivors statistically inappropriate.
- While only 4% of the survivors participating were male, they identified similar needs and short-term outcomes as females.

### **Quantitative findings were enriched by open-ended responses and results of 10 focus groups conducted with 73 survivors. What do these focus groups add to the study?**

- The focus groups reinforced the complexity of needs and the importance of services sensitive to and responsive to needs of particular groups, whether defined by gender, culture, sexual orientation, location or age (i.e., men, differences across race/ethnicity and country of origin, rural/urban/suburban, LGBTQ older individuals/teens).
- They reinforced the importance of listening carefully to survivors, without judgment or assumptions about their experiences.
- Combined with the open-ended responses to the surveys, the focus groups make it clear that these non-residential services are life-saving for some survivors, just as are shelter services.

### **What were the significant similarities and differences between survivors of different races/ethnicities and seeking services from rural, urban and suburban?**

- **The following similarities are illustrative, with more detail provided in the full Study Report:**
  - High rates of satisfaction with services across groups.
  - Services for children are important for mothers across groups.
  - High rates of satisfaction with program staff: across groups 80% or more strongly agreed to statements about staff respect and support in a variety of areas.
  - Similar outcomes—increased knowledge and hope are highest across most groups, with increased confidence and comfort asking for help when needed close behind. These are above 90% across groups.
  - Similar needs—the top 10 needs are virtually the same across groups: safety, support, information, and access to needed services.

- **The following differences are illustrative, with more detail provided in the full Study Report:**
  - Survivors born outside the U.S. were less likely than the U.S. born to want help with previous forms of abuse, help with substance abuse services, and help with grief related to family losses.
  - Survivors born outside the U.S. were more likely than the U.S. born to want help with someone to go with them to get help, help staying in their relationship safely, help with issues related to unwanted sex, counseling for their children, help with other benefits for their children, help related to custody of their children, help with transportation, help with reproductive/ women's health issues, help with child support, help with child care, help with health care for their children, help with immigration-related issues, and help with translation and learning English.
  - Hispanic/Latino-a survivors were more likely than others to identify child-related needs.
  - Survivors from rural areas were more likely than others to be involved in support groups.
  - Asian/Asian American and Hispanic/Latino-a survivors were more likely than others to have heard about the DV program from family or friends (as opposed to a DV advocate, someone from court, or people from other institutions).
  - These data demonstrate the diversity and range of services that survivors, both born in the U.S. and outside of the U.S., need to achieve safety for themselves and their families.

#### **How does this study of non-residential domestic violence services relate to the NRC DV's 2008 study of shelter experience?**

- This study complements the earlier study, since it asks about the remaining types of services and supports provided by most domestic violence programs. Two of the states that participated in this study also took part in the Shelter Study. However only four states took part in this study, instead of the 8 that participated in the Shelter Study. Drawing on experience in the Shelter Study, researchers engaged in outreach to culturally-specific programs and programs that were not members of the states' DV coalitions. It added questions in several areas:
  - Other places the survivor had sought help;
  - The survivor's relationship to the person who abused them;
  - When the survivor or survivor's family came to the U.S.;
  - The survivor's economic circumstances; and
  - More detailed information about needs and current services.