# Understanding the Impact of COVID-19 on Victim Services

**May 20, 2024 | 1:30 PM ET**
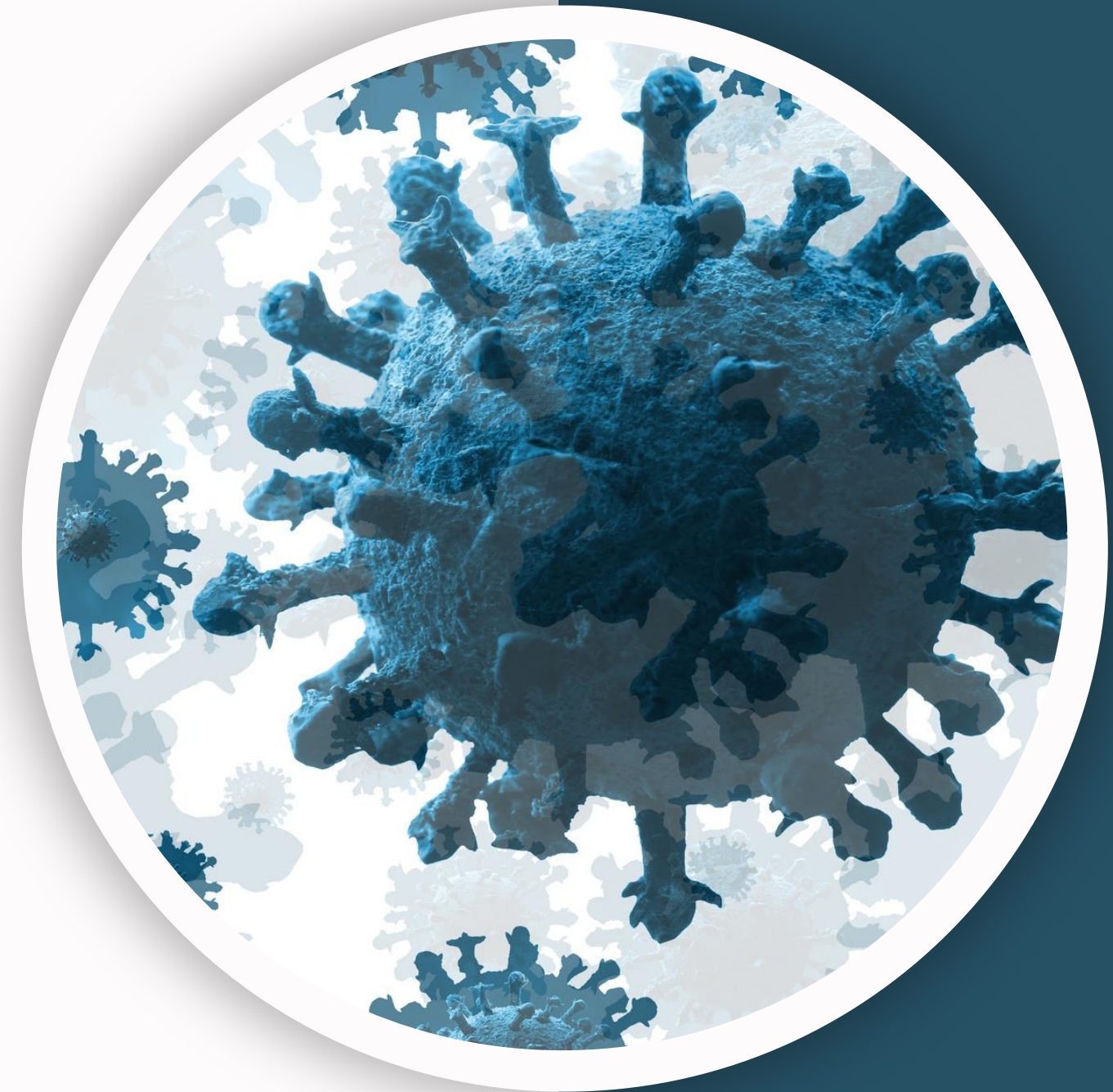
**The webinar will begin shortly.**

NIJ

# Understanding the Impact of COVID-19 on Victim Service Provision
## *Challenges, Innovations, and Lessons Learned*
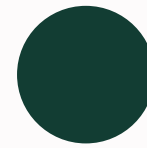
Rebecca Pfeffer, PhD
Hannah Feeney, PhD

**RTI** INTERNATIONAL

# Funding Disclaimer

# Overview

- Background

- Methods

- Select Findings

- Recommendations

# Background

# Background: COVID-19 and GBV
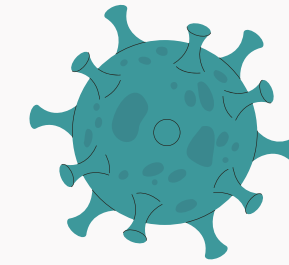
- The impacts of COVID-19 have been associated with an increased rate of gender-based violence (GBV), including sexual assault/abuse, intimate partner violence, and sex trafficking.[1-4]

- The nature of violence experienced during the pandemic was more severe.[5]

- Many of the factors that place individuals at risk for or exacerbate the impacts of GBV are also documented impacts of the pandemic.

# Background: COVID-19 and VSPs
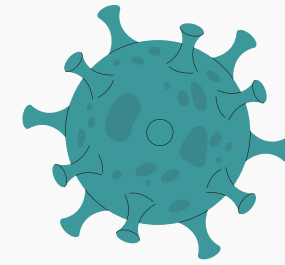
- Throughout the pandemic, VSPs faced competing needs.

Higher demand for services among clients

Heightened call to follow public health guidelines to reduce COVID-19 exposure

# Background: COVID-19 and VSPs
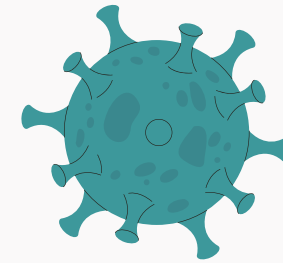
- While public health guidance may be effective in preventing COVID-19, it can also create unique challenges for those supporting individuals experiencing or recovering from victimization.

- Through a small-scale North Carolina-based evaluation completed in the summer of 2020, we learned that VSPs made adaptations that were immediate and necessary.[6]
  - While some of these adaptions were not successful, others inspired innovation and modernization in service delivery. Some proved long-lasting and even overdue.
  - This offered a critical opportunity to understand the impacts of such modernization of services and to better understand the value of established practice models.

# Goals and Objectives
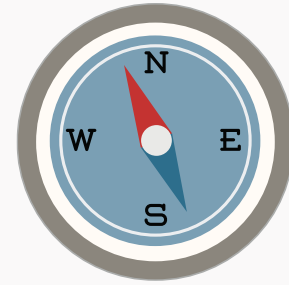
- To understand the impact of COVID-19 on service provision for victims of GBV in eight U.S. counties that vary in geography, urbanicity, and sociopolitical settings.

- To document and understand:
  - The challenges posed by the pandemic – including related societal changes, such as social distancing, court closures, and legislative mandates,
  - How agencies pivoted to address these challenges, and
  - Which innovations were successful in ways that warranted lasting changes in practice.

# Research Questions

**1** How did local legal, policy, and cultural frameworks impact victim service provision during the COVID-19 pandemic, and how can policymakers better support VSPs in future crises?

**2** How did the COVID-19 pandemic change VSP service delivery models and practices, and to what extent have those changes been successful and/or sustained in the long term?

**3** Were there patterns in the ways that victim services were impacted by COVID-19 based on victim or service provider characteristics, such as type of victims served, region, or number of staff?

# Research Questions

**1** How did local legal, policy, and cultural frameworks impact victim service provision during the COVID-19 pandemic, and how can policymakers better support VSPs in future crises?

**2** How did the COVID-19 pandemic change VSP service delivery models and practices, and to what extent have those changes been successful and/or sustained in the long term?

**3** Were there patterns in the ways that victim services were impacted by COVID-19 based on victim or service provider characteristics, such as type of victims served, region, or number of staff?

Methods

# Methods

- This study used a purposive stratified sampling approach that included eight county-level project sites that vary in geography, urbanicity, and the presence of VSPs serving victims of sexual assault, intimate partner violence, human trafficking, and/or stalking.

- Through this project, we conducted:
  - State and local policy assessments (n=8)
  - A web-based survey of VSPs in each project county (n=73)
  - Agency case studies (n=8) including in-depth interviews with VSP staff (n=71)
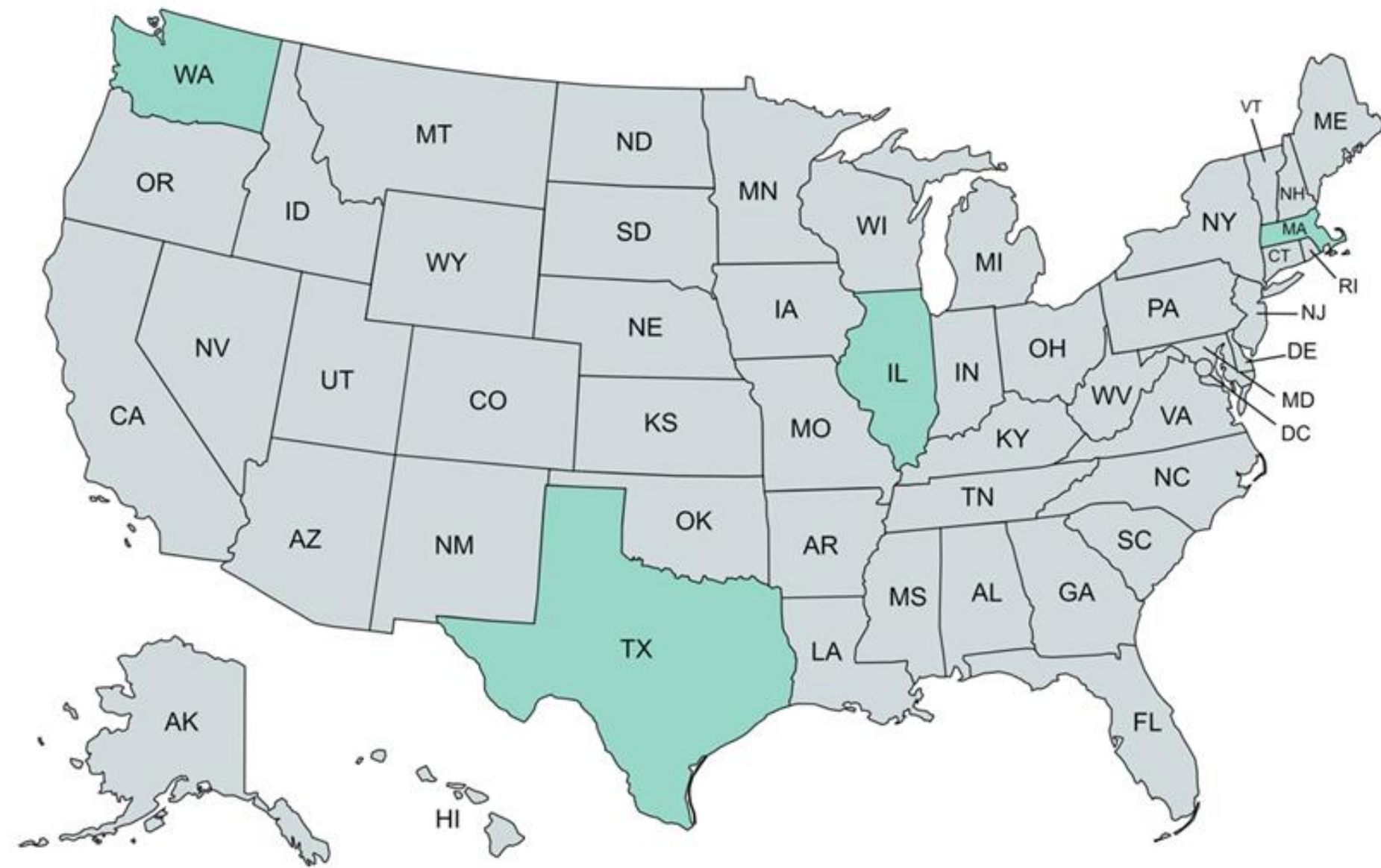
# Web-Based Survey: *Respondent Characteristics*

## Completed Surveys by County

| County | N | Response Rate |
|---|---|---|
| Urban IL | 16 | 57.1% |
| Rural IL | 2 | 66.6% |
| Urban MA | 9 | 45.0% |
| Rural MA | 3 | 42.8% |
| Urban TX | 18 | 45.0% |
| Rural TX | 12 | 85.7% |
| Urban WA | 11 | 78.5% |
| Rural WA | 2 | 66.6% |
| *Total* | 73 | 56.6% |

# Web-Based Survey: *Respondent Characteristics*

## Agency Staff Volume

|  | n | % |
|---|---|---|
| 1-10 | 11 | 15.07% |
| 11-50 | 43 | 58.90% |
| 51-100 | 10 | 13.70% |
| 100+ | 8 | 10.96% |
| Missing | 1 | 1.37% |

# Web-Based Survey: *Respondent Characteristics*

## Types of Victims Served

| | n | % |
|---|---|---|
| Sexual assault | 19 | 30.16% |
| Domestic violence | 37 | 58.73% |
| Stalking | 12 | 10.05% |
| Human trafficking | 20 | 31.75% |
| Variety | 4 | 6.35% |
| Other | 4 | 6.35% |
| Missing | 9 | 14.29% |

Categories are not mutually exclusive

# Case Study Interviews: *Respondent Characteristics*

## Completed Interviews by County

| County | N |
|---|---|
| Urban IL | 8 |
| Rural IL | 6 |
| Urban MA | 7 |
| Rural MA | 10 |
| Urban TX | 14 |
| Rural TX | 8 |
| Urban WA | 10 |
| Rural WA | 8 |
| *Total* | 71 |

# Select Findings

# Research Question 1

How did local legal, policy, and cultural frameworks impact victim service provision during the COVID-19 pandemic, and how can policymakers better support VSPs in future crises?

# Some mandates impacted services, while others didn't.

- Some agencies reported that public health mandates (masks, social distancing, vaccines) never impacted service delivery.

# Some mandates impacted services, while others didn't.

- Some agencies reported that public health mandates (masks, social distancing, vaccines) never impacted service delivery.

"

*And I think that was a significant challenge for us, right, is that that push..we have to be really trauma informed and, and be very survivor focused and survivor led while being in the middle of a pandemic where people were getting really sick - and so you have this pull of like, what, really to keep everyone safe, like, I have to tell you to wear a mask. I have to tell you to stay in your room if you're sick. I have to move you to a different place, right. Because you're trying to, you have 58 people you're trying to protect as opposed to one. (MA, rural, 4)*

# Some mandates impacted services, while others didn't.

- The majority of agencies reported that closures to schools, courts, and public transportation presented challenges when they were in place.

- Mandate and protocols resulting in closures or a move to fully remote services were hugely impactful on service provision.

- Business closures sometimes meant fewer locations to refer victims, which meant that agencies had to fill gaps in services.

# Some mandates impacted services, while others didn't.

- The majority of agencies reported that closures to schools, courts, and public transportation presented challenges when they were in place.

- Mandate and protocols resulting in closures or a move to fully remote services were hugely impactful on service provision.

- Business closures sometimes meant fewer locations to refer victims, which meant that agencies had to fill gaps in services.

"

*But we did, I think, have to take more of the burden to give direct services to our clients whereas maybe we would refer them out previously..we didn't ever stop in-person services, but a lot of other agencies around us did. (TX, rural, 3)*

# Official crime patterns were not reflected in the demand for GBV services.

- GBV is often under-reported in official crime statistics.

- Although some participating agencies reported very short-lived drops in demand for services , agencies overwhelmingly reported an increase that persisted for years after the onset of the pandemic.

- VSPs reported seeing drastic increases in needs of victims of IPV due to isolation from both stay-at-home policies but also loss of work—for both victims and perpetrators.

# Official crime patterns were not reflected in the demand for GBV services.

- VSPs saw an increase in the level of violence in the home, making it completely unsafe for the person to stay and attempt to safety plan for remaining in the home.

# Official crime patterns were not reflected in the demand for GBV services.

- VSPs saw an increase in the level of violence in the home, making it completely unsafe for the person to stay and attempt to safety plan for remaining in the home.

"

*The physical violence aspect, what we're seeing women come in with, is so brutal that there are clients that are coming in that have to have hospital stays before they're even able to be discharged to come to us. So we're seeing a different level of brutality. The same thing around sexual assault. It's just the brutality that, that people are enacting on each other is different than what we were seeing pre-COVID. (MA, rural, 4)*

# Research Question 2

How did the COVID-19 pandemic change VSP service delivery models and practices, and to what extent have those changes been successful and/or sustained in the long term?

# Of services offered, which were suspended, adapted, or continued as usual during the pandemic?

| Impact | Services |
|---|---|
| Service **suspended** permanently | Mental health services (4.3%)<br>Legal assistance (4.3%)<br>Legal advocacy/accompaniment (2.4%) |
| Service **suspended** temporarily | Supervised child visitation (33.3%)<br>Community member training (25.0%)<br>Medical advocacy (25.0%) |
| Service **adapted** permanently | Mental health services (26.1%)<br>Interpretation and Sign Language services (21.4%)<br>Community member training (20.0%) |
| Service **adapted** temporarily | Emergency medical care (66.7%)<br>Legal assistance (65.2%)<br>Legal advocacy/accompaniment (63.4%) |
| Service **continued as normal** | Hotlines (72.4%)<br>Transitional housing (71.4%)<br>Information and referrals (55.8%) |

# Other reported changes to service delivery:

- Nearly one third (31.5%) of the survey sample reported that they needed to add services since the onset of COVID-19, including:
  - More intensive case management services
  - Housing support services
  - Cash assistance
  - Food distribution

- Although agencies typically provide support for specific forms of victimization, during the pandemic they often expanded to meet clients other, more pressing needs (e.g. housing, food).

# Other reported changes to service delivery:

- Nearly one third (31.5%) of the survey sample reported that they needed to add services since the onset of COVID-19, including:
    - More intensive case management services
    - Housing support services
    - Cash assistance
    - Food distribution

- Although agencies typically provide support for specific forms of victimization, during the pandemic they often expanded to meet clients other, more pressing needs (e.g. housing, food).
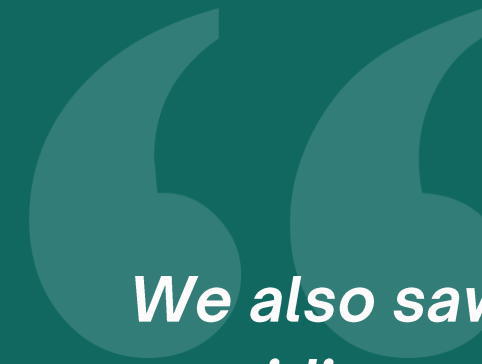
*We also saw a decrease in other agencies providing care, which meant our crisis line was busier with both survivors and folks outside our scope of services calling. (WA, urban, survey 61)*

# Other reported changes to service delivery: *Embracing virtual modalities*

- Most VSPs participating in this project did not have an option for virtual client engagement prior to the pandemic.

- However, almost all participating agencies were forced to modernize their technology, adopting virtual client engagement platforms and processes.

- Even when public health restrictions were lifted, most agencies opted to keep virtual service delivery an option for at least some client services.

# Other reported changes to service delivery: *Embracing virtual modalities*

- Virtual adaptations allowed agencies to serve different clientele and the same clientele in different ways.

- Interview respondents frequently described specific client populations that **benefited** from virtual service availability, including:

  - Victims of IPV and human trafficking still living with their abusers
  - People with disabilities or mobility issues
  - People who are immunocompromised
  - Clients with children who do not have reliable access to childcare
  - Clients without access to transportation
  - Clients with inflexible work schedules
  - Clients outside of an organization's immediate area

# Other reported changes to service delivery: *Embracing virtual modalities*

" *I've noticed that implementing virtual therapeutic sessions for families have worked, very much so. We found out that sometimes a survivor is still living with their perpetrator, that's the best way for them to be able to actually do a virtual therapeutic session, because they're still at home. And if the person is not there, they're able to do it and feel somewhat safe at that moment...a lot of survivors, if they're still living at home with the perpetrator, they're not able to leave, and the access to transportation is very limited. So we definitely still to this day incorporate a hybrid model because we still want survivors to feel that we're providing an option. (MA, rural, 5)*

# Other reported changes to service delivery: *Challenges to virtual modalities*

- Interview respondents also described **barriers** to virtual service provision, including:
  - Clients' lack of reliable access to technology (including cell phones or reliable internet service)
  - Clients' lack of access to a private or safe space to receive services
  - Specific client populations, including young children and older clients less familiar with technology

- These findings highlight how survivors experience victimization in diverse ways and there is no one-size-fits-all model of service provision that works best.

# Optimal Service Delivery Modalities
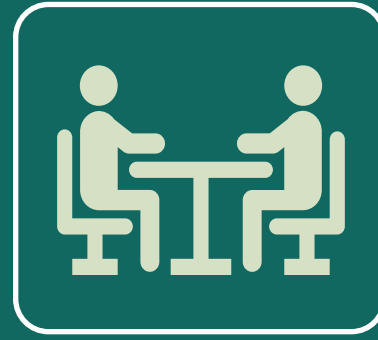
## Services best suited for IN-PERSON modalities

- Shelter
- Accompaniment (legal, medical)
- Resource provision (foods, gift cards, hygiene)
- Trainings with youth (in schools or detention settings)
- Support services or group counseling

## Services best suited for REMOTE modalities

- Hotlines
- Information and referrals in crisis scenarios
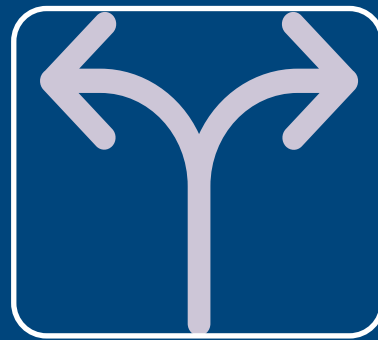
## Services best suited for HYBRID modalities

- Intake
- Counseling
- Case management
- Trainings with adults
- Community engagement

# Impacts on Staff

- Generally, VSPs were not recognized as essential personnel during the onset of the pandemic, yet their work remained essential.

- Agencies experienced:
  - A need for more staff
  - Challenges with staff retention
  - Challenges navigating client relationships and autonomy in light of public health mandates (e.g., asking clients to wear masks)
  - Increased attention to staff morale

# Impacts on Staff

- Generally, VSPs were not recognized as essential personnel during the onset of the pandemic, yet their work remained essential.

- Agencies experienced:
  - A need for more staff
  - Challenges with staff retention
  - Challenges navigating client relationships and autonomy in light of public health mandates (e.g., asking clients to wear masks)
  - Increased attention to staff morale

> *My staff was scared. You know? You could tell staff was scared...I had a mom that was really sick at the time, and I didn't get to see her because of my job, you know? And so it made it really difficult (IL, urban, 10).*

# Impacts on Staff

- Agency staff experienced:
  - Unexpected changes to their roles and responsibilities
  - Increased mental health challenges and burnout
  - Tension between the critical nature of the work and fears for personal safety

# Impacts on Staff

- Agency staff experienced:
  - Unexpected changes to their roles and responsibilities
  - Increased mental health challenges and burnout
  - Tension between the critical nature of the work and fears for personal safety

"

*We continue to have high levels of turnover, burnout, and transition during and since the pandemic. Even with increased pay and benefits, it is overwhelming (WA, urban, S71)*

# Impacts on Staff: *Agency Strategies to Support and Retain Staff*

- In addition to adapting services for clients, many agencies adapted their accommodations for staff, including strategies such as:

  - Increased salary rates
  - Hazard pay or stipends
  - Permanent hybrid work options
  - Adoption of a four-day work week
  - Adapted or extended benefit options
    - Mental health resources
    - Gym memberships
    - Wellness and mindfulness apps
    - Mental health focused paid time off or flex hours
  - Optional opportunities for debriefing challenges
  - Social events for staff

" I am most proud of the resiliency of our advocates and clients during a difficult season. We had a mutual understanding for one another that we were trying to make things work and had to think outside of the box to make things happen... I am proud of the innovative ways we tried to meet our clients' needs.
(TX, urban, S47)

# Recommendations

# Recommendations for *Agency Leadership*

### Flexible Options for Staff

Make changes to agency processes and services that are flexible and can be maintained in the long term. Ensure staff are well supported through changes by offering hazard pay, self-care time, etc.

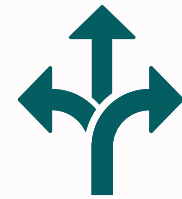# Recommendations for *Agency Leadership*

## Flexible Options for Staff

Make changes to agency processes and services that are flexible and can be maintained in the long term. Ensure staff are well supported through changes by offering hazard pay, self-care time, etc.
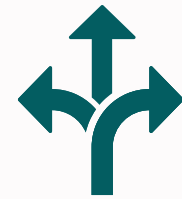
## Flexible Options for Clients

Increase options for autonomy whenever possible. For example, autonomy to choose between in-person or remote services may be especially important.

# Recommendations for *Agency Leadership*

## Flexible Options for Staff

Make changes to agency processes and services that are flexible and can be maintained in the long term. Ensure staff are well supported through changes by offering hazard pay, self-care time, etc.

## Flexible Options for Clients

Increase options for autonomy whenever possible. For example, autonomy to choose between in-person or remote services may be especially important.

## Incorporate Tech Expertise

Integrate an expert on relevant technologies into agency staff or advisory boards. Stay updated on tech options for services.

# Recommendations for *Agency Leadership*

**Hybrid Options for Staff**

Consider the benefits of hybrid services to agency staff as well as clients.

# Recommendations for *Agency Leadership*

## Hybrid Options for Staff
Consider the benefits of hybrid services to agency staff as well as clients.
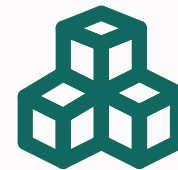
## Consider New Data Metrics
Embrace new or adaptive data metrics that capture client experiences with services (e.g., maintained engagement), especially for efforts that are different from typical service provision.

# Recommendations for *Agency Leadership*

## Hybrid Options for Staff
Consider the benefits of hybrid services to agency staff as well as clients.

## Consider New Data Metrics
Embrace new or adaptive data metrics that capture client experiences with services (e.g., maintained engagement), especially for efforts that are different from typical service provision.

## Leverage Existing Networks
Relationships are especially important during times of turmoil. Keeping in touch with other agencies (e.g., shelters, food pantries, or law enforcement), can lessen the burden of services on your agency.

# Recommendations
## for *Policymakers*

### Establish Essential Worker Status

Establish VSP staff who respond to GBV as essential workers and provide them with the same protections and benefits as other essential worker.

# Recommendations
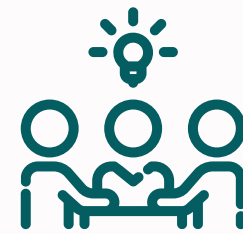for *Policymakers*

## Establish Essential Worker Status
Establish VSP staff who respond to GBV as essential workers and provide them with the same protections and benefits as other essential worker.
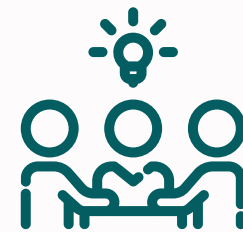
## Create Spaces at the Table for VSPs
Agencies that provide services to survivors of GBV should be considered and included in municipal crisis planning. Consider how to remove red tape to allow providers to serve their communities.

# Recommendations for *Policymakers*

## Establish Essential Worker Status
Establish VSP staff who respond to GBV as essential workers and provide them with the same protections and benefits as other essential worker.

## Create Spaces at the Table for VSPs
Agencies that provide services to survivors of GBV should be considered and included in municipal crisis planning. Consider how to remove red tape to allow providers to serve their communities.

## Anticipate Underreporting
Anticipate that reported crime rates during crisis will not reflect the actual experiences of GBV agencies. Establish plans to solicit information from VSPs about observed changes in need.

# Recommendations
## for *Funders*

**Consider Flexible Funding Approaches**

Develop simple, flexible systems for funded programs to fulfill reporting requirements during service disruptions.

# Recommendations for *Funders*

## Consider Flexible Funding Approaches

Develop simple, flexible systems for funded programs to fulfill reporting requirements during service disruptions.

## Consider Flexible Client Eligibility

Consider providing some flexibility in the defining service eligibility for clients during crisis scenarios, particularly related to geographic eligibility or types of services that may be provided (e.g., rent assistance).

# Recommendations for *Funders*

### Consider Flexible Funding Approaches
Develop simple, flexible systems for funded programs to fulfill reporting requirements during service disruptions.

### Consider Flexible Client Eligibility
Consider providing some flexibility in the defining service eligibility for clients during crisis scenarios, particularly related to geographic eligibility or types of services that may be provided (e.g., rent assistance).
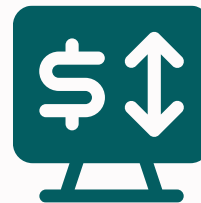
### Scaling Down Post-Crisis
When providing funding for crises, be prepared to scale down. Agencies often increase staff and resources when taking on new funding. They may need support preparing for when this funding disappears.

# References

1. Nix, J. & Richards, T.N. (2021). The immediate and long-term effects of COVID-19 stay-at-home orders on domestic violence calls for service across six U.S. jurisdictions. *Police Practice and Research 22* (4), 14430–1451.

2. Piquero, A.R. et al. (2021) Domestic violence during the COVID-19 pandemic: Evidence from a systematic review and meta-analysis. *Journal of Criminal Justice 74*, 101806.

3. UNODC. (2020). *Global report on trafficking in persons 2020*. United Nations Office on Drugs and Crime.

4. Wood, L. et al. (2022). Don't know where to go for help: Safety and economic needs among violence survivors during the COVID-19 Pandemic. *Journal of Family Violence, 37*, 959-967.

5. Jetelina, K.K. et al. (2021). Changes in intimate partner violence during the early stages of the COVID-19 pandemic in the USA. *Injury Prevention, 27* (1), 93-97.

6. Houston-Kolnik, J. et al. (2020). *Impact of COVID-19 on North Carolina's Victim Service Providers.* RTI International.

# Questions?

Please enter your questions into the **Q&A box**

Send to **All Panelists**

NIJ