



Idaho Crime Victim Service Provider Survey: Year Two

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The *Biennial Report on Victimization & Victim Services* is a series of papers on the state of victimization, response to victimization, impacts of crime on victims, and victim services in Idaho. The project is funded by the Idaho Council on Domestic Violence & Victim Assistance. For more information on the project, watch the introductory video at www.idvch.com or contact Dr. Lisa Growette Bostaph at lisabostaph@boisestate.edu.



Study Overview

The *Biennial Report on Victimization & Victim Services*, which is a series of reports produced by Boise State University researchers and funded by the Idaho Council on Domestic Violence and Victim Assistance (ICDVVA), provides information about crime victimization and victim services across the state of Idaho. The first phase of the project resulted in several reports which can be accessed here: <https://idvch.com/all-biannual-reports-direct-access/>. One of these reports describes the survey of crime victim service providers which was conducted in 2020 about agency needs characteristics from the prior year (King et al., 2020). The survey was administered again in 2021 to examine agency characteristics in 2020. The goal of this study, as per the contract, was to gather information about the services available to crime victims across the state, in addition to the needs of, and barriers faced, by service providers. Recommendations to improve service provision and accessibility were developed based on the survey data collected.

Apart from the focus on 2020, the second survey was the same as the original. It measured a variety of information such as the number and type of crime victims served, contact with underserved or vulnerable populations, breadth of services provided, services the agency wanted to offer but was unable to, any barriers the agencies faced in regard to service provision, and the administration of satisfaction surveys or other evaluation activities. Information about agency characteristics was also gathered including agency type, funding sources and limitations, membership, number of employees and volunteers, employee tenure and education, training requirements and needs, capacity-building efforts, greatest accomplishments, and agency location and service area.

Prior to beginning this study, approval was obtained from Boise State University's Institutional Review Board for the protection of human subjects in research. The survey was constructed in Qualtrics, an online survey platform, and all participants received an email invitation which provided an overview of the survey and the link to complete it. The first item on the survey included informed consent information describing that participation in the survey was voluntary and confidential. It was estimated that the survey would take approximately 15-20 minutes to complete.

As with the first survey administration, the list of potential survey respondents was comprised of recipients of Victims of Crime Act (VOCA) funding, which was obtained from the ICDVVA, member agencies of the Idaho Coalition Against Sexual and Domestic Violence (ICASDV), and victim witness programs. The lists from ICDVVA and ICASDV contained contact information; contact information for victim witness programs was obtained via internet searches. Updates were made from the first survey administration contact list such as changes in the appropriate contact person or email address. This resulted in a final list of 119 email addresses. In some cases, there was more than one email address for a given agency. This was done to ensure the invitation was received by the person best fit to complete the survey and recipients were asked that the survey be completed only once by each agency.

The first survey invitation was sent on 10/14/21 to 119 email addresses. A total of 13 were returned as undeliverable. The research team attempted to contact these agencies and was able to locate updated contact information for eight of them. Thus, initial survey invitations were received by 114 email addresses. A reminder was sent to these contacts on 11/11/21. This was intended to be the final reminder, but due to a somewhat low response rate (44 responses, 17 in progress, 31 complete/partially complete surveys for analysis), the survey administration period was extended into 2022. After efforts to further update contact information, a final reminder was sent on 2/1/22 to 118 email addresses. The survey received a total of 93 responses, 42 of which

were complete or partially complete enough for analysis. This resulted in an approximate 36% response rate, which is consistent with online surveys as well as the first survey administration.

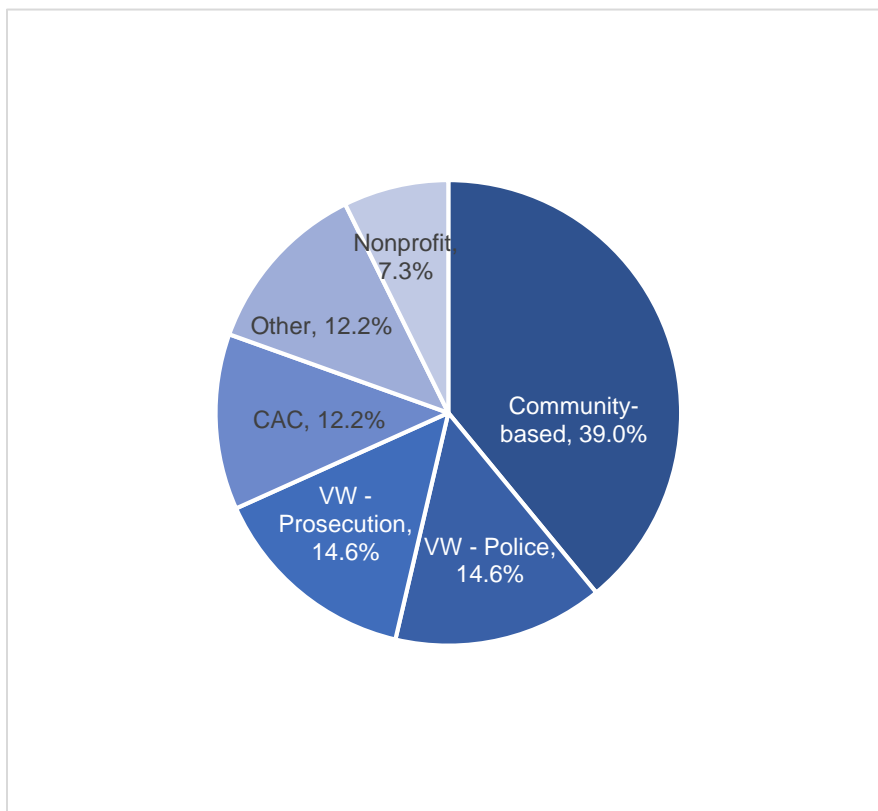
Results

This section focuses on describing agency characteristics, populations served, agency activities, needs, and barriers. The results are organized by topic and described below. The final sections include comparisons to the first survey administration, detailed recommendations based on the findings, and overall conclusions.

Agency Characteristics

Respondents were asked the type of agency for which they were completing the survey (see Figure 1). Almost 40% (n=16) identified as a community-based agency serving crime victims.

Figure 1
Agency Type

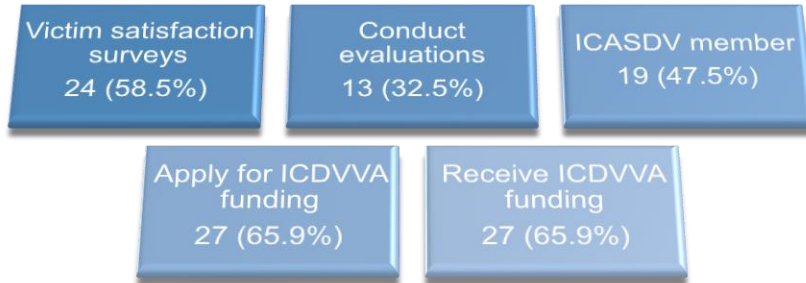


Two specifically described that their agency was a dual domestic violence and sexual assault service provider. Almost 30% of participants were victim witness coordinators, half with a policing agency (n=6) and half with a prosecutor's office (n=6). Just over 12% (n=5) reported working for a child advocacy center (CAC) and 7.3% (n=3) reported working for a nonprofit agency. The remaining responses described other types of agencies such as a CASA program, government victim services, and a residential treatment center. One participant did not answer this question.

In terms of agency tenure (not shown), 80.5% (n=33) indicated that their agency was established 10 or more years ago, 14.6% (n=6) selected 1-6 years, and two did not know.

Additional agency characteristics are displayed in Figure 2. While over half of the respondents reported that their agency administers victim satisfaction surveys, just under one-third indicated that other types of evaluations of their services or programs are conducted.

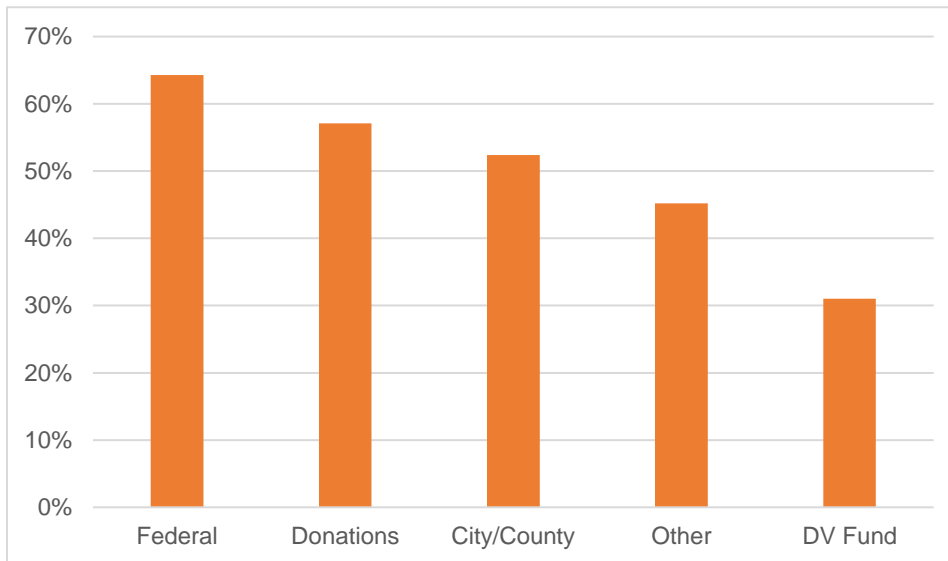
Figure 2
Membership, Evaluation, and ICDVVA Funding in 2020



Almost half of respondents reported that their agency is a member of the ICASDV. In regard to ICDVVA funding, almost 66% applied for and received funding. For those who did not apply for funding, two reported that they did not know about it and two more said they were unsure.

One said they “did not want to take funds from other local community organizations,” another said they did not know how they could utilize these funds, and one reported that they do not provide direct services. The remaining two responses referenced other sources of funding from grants or the county. An additional question was asked about sources of funding and the responses are displayed in Figure 3.

Figure 3
Funding Sources



The most common selection was federal funding including sources such as VOCA, Family Violence Prevention & Services (FVPSA), and Sexual Assault Services Program (SASP). This was followed by donations and city/county funding. Almost half of respondents

described other sources of funding such as foundations, the state, and grants. Just over 30% received funds from the Idaho State Domestic Violence Fund.

Table 1
Personnel Characteristics

Variable/Category	Frequency (%)	Average (Mean)	Range
Full-time employees in 2020		43.9	1-730
Part-time employees in 2020		4.19	0-40
Volunteers in 2020		30.06	0-202
Average time of employment			
Less than 1 year	2 (5.0)		
1-3 years	12 (30.0)		
4-9 years	17 (42.5)		
10 or more years	8 (20.0)		
Don't know	1 (2.5)		
Minimum education required			
High school diploma/GED	20 (50.0)		
Some college	6 (15.0)		
Bachelor's degree	8 (20.0)		
Master's degree	2 (5.0)		
Other	4 (10.0)		
Additional training required	34 (85.0)		

The survey asked about a variety of agency personnel characteristics (see Table 1). Full-time employees ranged from 1-730 with a mean¹ of 43.9 (median²=7.0), part-time employees ranged from 0-40 with a mean of 4.19 (median=1.5), and volunteers ranged from 0-202 with a mean

of 44.1 (median=6.0). The means were quite a bit higher than the median values due to a few very large agencies in the sample. In fact, about half reported fewer than eight full-time employees, 0-2 part-time employees, and 0-3 volunteers.

Most employees who provide direct services have been employed for less than 10 years (see Table 1). Half of the respondents indicated that a high school diploma/GED is required for direct service providers with one-quarter requiring a college degree. Those who selected 'other' described things such as years of experience and differences in education requirements based on position. The vast majority specified that additional training is required for those who directly serve victims. Training requirements typically include a certain number of hours (ranging from about 20-40 hours) on topics such as domestic violence, sexual assault, human trafficking, victim advocacy, trauma-informed practices, communication, and diversity. A few respondents also mentioned specific accreditation/certification requirements.

Participants were asked, via an open-ended question, whether their agency has additional training needs. The responses were organized by themes and are displayed in Figure 4. The most frequently indicated training needs related to serving victims of human trafficking, with most specifically mentioning sex trafficking. Issues surrounding substance abuse were commonly mentioned as well, particularly in regard to drugs teenagers are being introduced to, co-occurring issues (e.g., mental health), and the relationship between domestic violence and substance abuse. Training specifically for prosecutors and law enforcement was noted, in addition to trauma-informed practices; diversity, equity, and inclusion (DEI); and cultural awareness. In regard to

¹ The mean is the sum of all values in the distribution divided by the total number of values.

² The median reports the data point in the middle of the distribution. It is a useful contrast to the mean, especially when there are a few very large or very small values.

modality, some respondents indicated a desire for more in-person and local trainings. The remaining topics were listed by one respondent each: child abuse investigations, sexual assault forensic exams, general best practices, Eye Movement Desensitization and Reprocessing (EMDR), critical incident debriefings, serving secondary victims, teen dating violence (TDV), motivational interviewing, self-care, stalking, Coordinated Community Response (CCR), serving victims with mental health issues, and identifying concerning sexualized behavior. There were also several non-specific responses to the effect of: “ongoing training is always needed,” as well as some who stated that their agency provides opportunities for their staff to attend trainings. Some were not sure about what trainings were and were not available as reflected in this statement: “I would love to take any and all trainings offered, but I don’t know of any.”

Figure 4
Additional Training Needs

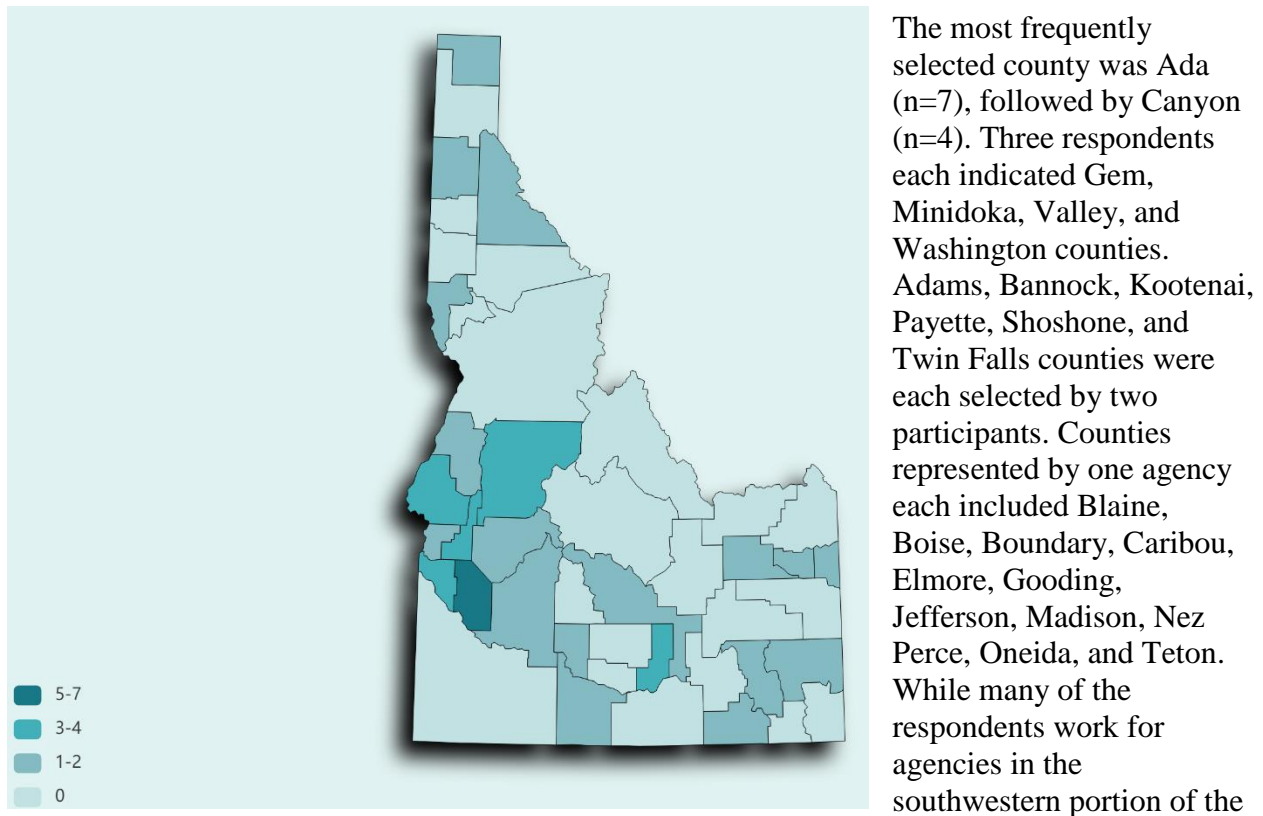


The survey requested information from respondents about efforts their agency has taken to build capacity, enhance employees’ leadership skills, improve day-to-day operations, and/or engage in succession planning. The most frequent responses (not shown) focused on a variety of training efforts including leadership skills and cross-training. For example, one participant stated: “Our employees receive regular training on topics meant to enhance leadership skills and improve day-to-day operations.” Strategic planning and a variety of evaluation activities including surveys and feedback sessions were also discussed (e.g., “Annual strategic planning and constant evaluation is valued as a program.”). Some spoke specifically about succession planning due to upcoming retirements. Efforts to enhance partnerships with local organizations and community outreach were common themes as well (e.g., “We have worked on building capacity by looking upon partner relationships where we can leverage each other’s resources to

better serve survivors.”). Other efforts mentioned by a handful of respondents included regular staff meetings, team building exercises, hiring, growing funding, self-care, board development, social justice, and prevention.

In order to determine victim service availability across the state, respondents were asked in which county their agency is located (see Figure 5). Most indicated one county while five listed two counties, one named five counties, and one indicated locations in six counties.

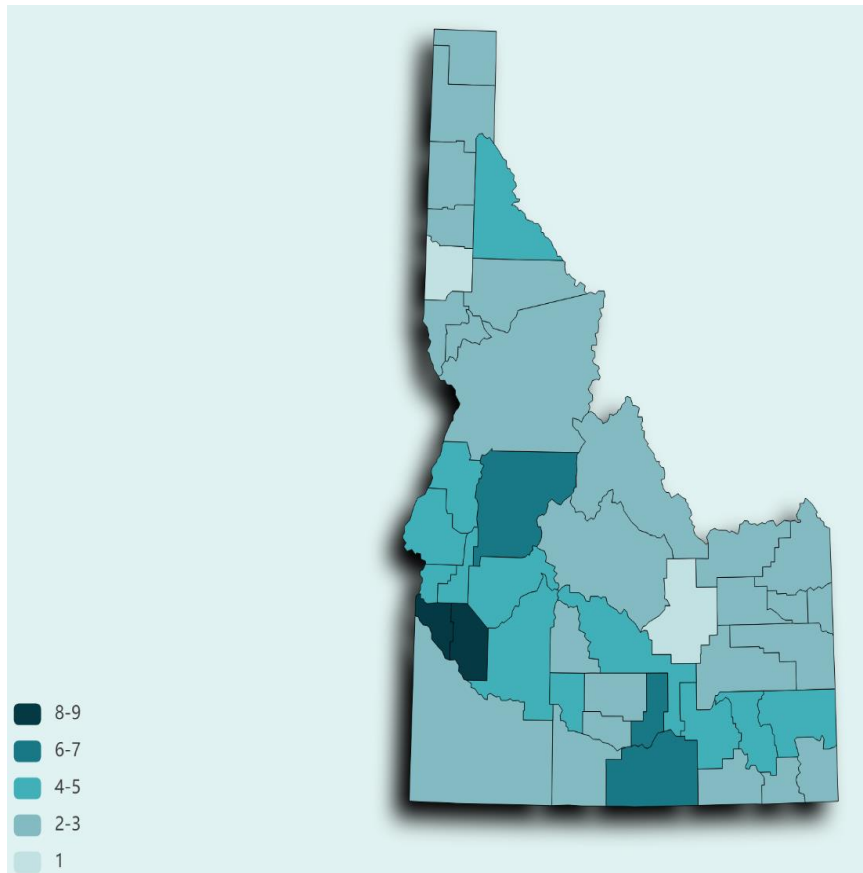
Figure 5
Agency Location(s)



state, agencies from across the state, including the northern panhandle and eastern counties, were represented in the sample. Based on the Economic Research Service’s (2013) designations of metro vs. non-metro counties, the sample was overrepresented by agency locations in non-metro counties (56.2%).

In addition to agency location, respondents were asked which counties their agency serves. All 44 counties were listed with an option for a statewide service area. The number of counties served ranged from 1-44 with a mean of 4.12 (median=2). The mean is somewhat inflated due to one respondent indicating their agency serves the entire state. Excluding the statewide agency, the number of counties served ranged from 1-10 with a mean of 3.03 (median=2) and approximately 65% of participants reported that their agency serves 1-3 counties. Almost 67% indicated that at least half of their agency’s service area is comprised of non-metro counties. Additionally, 11 agencies serve only non-metro counties and 12 exclusively serve metro counties.

Figure 6
Service Area(s)



Service coverage by county is displayed in Figure 6. The most frequently served counties included Ada (n=9), Canyon (n=8), Cassia (n=6), Minidoka (n=6), Valley (n=6), Boise (n=5), Gem (n=5), and Shoshone (n=5). Counties served by four agencies were Adams, Bannock, Blaine, Caribou, Elmore, Gooding, Payette, Power, and Washington. Three participants indicated serving Bear Lake, Bonner, Bonneville, Boundary, Camas, Clark, Custer, Franklin, Fremont, Idaho, Jefferson, Jerome, Kootenai, Lincoln, Madison, Oneida, Teton, and Twin Falls counties. Seven counties were served

by two agencies: Benewah, Bingham, Clearwater, Lemhi, Lewis, Nez Perce, and Owyhee. Last, Butte and Latah counties were served only by the one statewide agency represented in the survey. With darker colors in the map indicating more coverage, Figure 6 illustrates the greatest service availability in southern and western counties. While there are additional victim service providers across the state, they did not complete this survey.

Populations Served

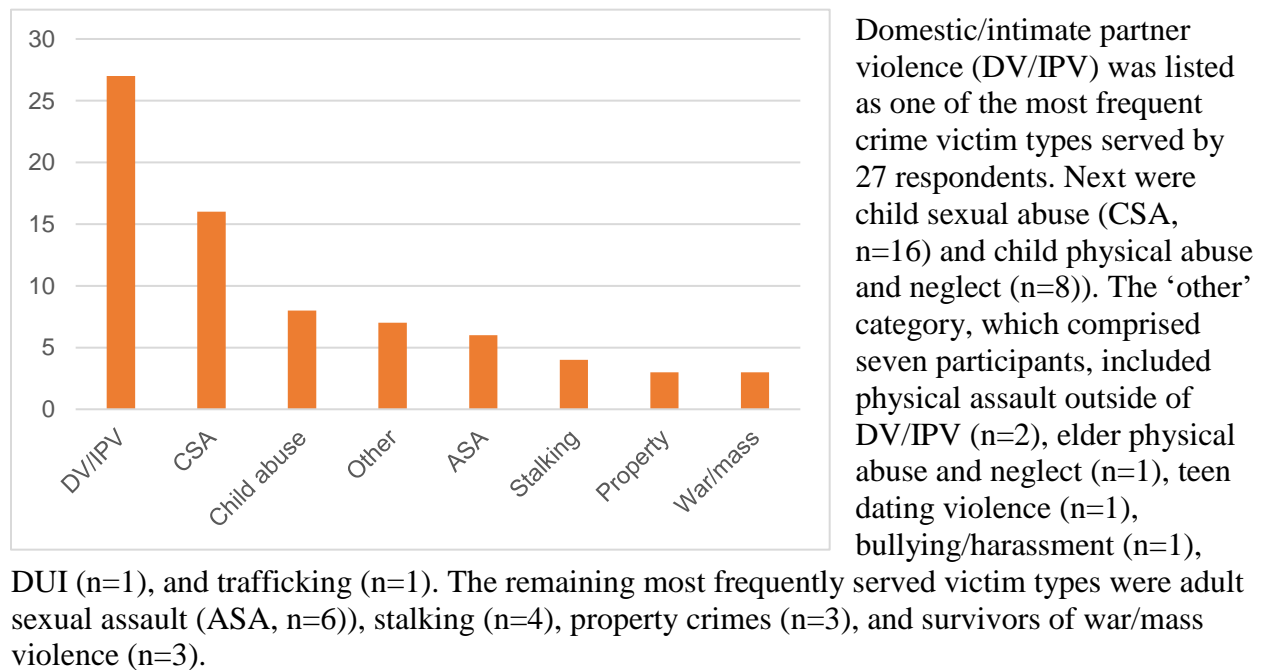
The survey asked respondents to indicate the population(s) their agency served in 2020. First, they were asked about specific crime types (see Table 2). The most commonly indicated crime was domestic/intimate partner violence (83.3%), followed closely by child sexual abuse (81.0%) and stalking/harassment (78.6%). Thirty-two agencies (76.2%) each served victims of child physical abuse/neglect and adult sexual assault. In total, these five crime types represent the victims served by over three-quarters of the participating agencies. Teen dating violence and adult physical assault (not related to domestic or intimate partner violence) were each selected by just over half (57%) and exactly half (50%) of respondents indicated that their agency served victims of elder physical abuse/neglect, as well as homicide survivors. The 'other' category (16.7%) included responses such as survivors of mass violence/terrorism, refugees and asylees of war, bullying, suicide, and custodial kidnapping.

Table 2
Types of Crime Victims Served in 2020³

Category	Frequency	Valid %
Domestic/Intimate partner violence	35	83.3
Child sexual abuse	34	81.0
Stalking/harassment	33	78.6
Child physical abuse/neglect	32	76.2
Adult sexual assault	32	76.2
Teen dating violence	24	57.1
Adult physical assault (not DV/IPV)	24	57.1
Elder physical abuse/neglect	21	50.0
Homicide survivors	21	50.0
Elder sexual abuse	16	38.1
DUI	15	35.7
Economic/property	13	31.0
Human/sex trafficking	7	16.7
Other	7	16.7

In addition to all types of crime victims served, participants were asked about which type(s) of crime victims their agency served most frequently in 2020 (see Figure 7).

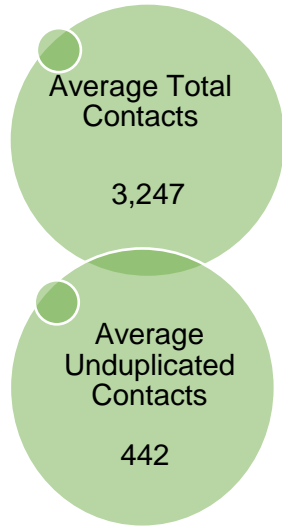
Figure 7
Most Frequently Served Crime Victims in 2020⁴



³ Percentages do not total 100 as respondents were able to select all that apply.

⁴ Total exceeds sample size as respondents were able to list more than one crime type.

Figure 8
Number of Victims Served in 2020



There was quite a bit of variation in the number of victims served in 2020 (see Figure 8). The total number of reported contacts in 2020, including initial contacts and follow-ups, ranged from 35 to just over 21,000 with a mean of 3,247 and a median of 1,900. In regard to unduplicated contacts (one-time contacts only), responses ranged from 12 to 1,575 with a mean of 442 and a median of 302. It is important to note that several respondents did not answer these questions (n=6) and a few indicated that this information was not available or not tracked by their agency (n=4).

Crime victims from underserved and vulnerable populations can present with unique service needs and are commonly encountered by agencies across the state (see Table 3).

Table 3
Underserved and Vulnerable Populations Served in 2020⁵

Category	Frequency	Valid Percent
Teens (13-17 years old)	38	90.5
Hispanic/Latinx	35	83.3
LGBTQ	35	83.3
Children (12 years or younger)	34	81.0
People with disabilities	34	81.0
People with mental health issues	30	71.4
Non-English speaking	29	69.0
Elderly (65 years or older)	29	69.0
College students	26	61.9
Native American	24	57.1
Other racial/ethnic minorities	21	50.0
Migrant workers	17	40.5
Refugees	16	38.1
Other	3	7.1

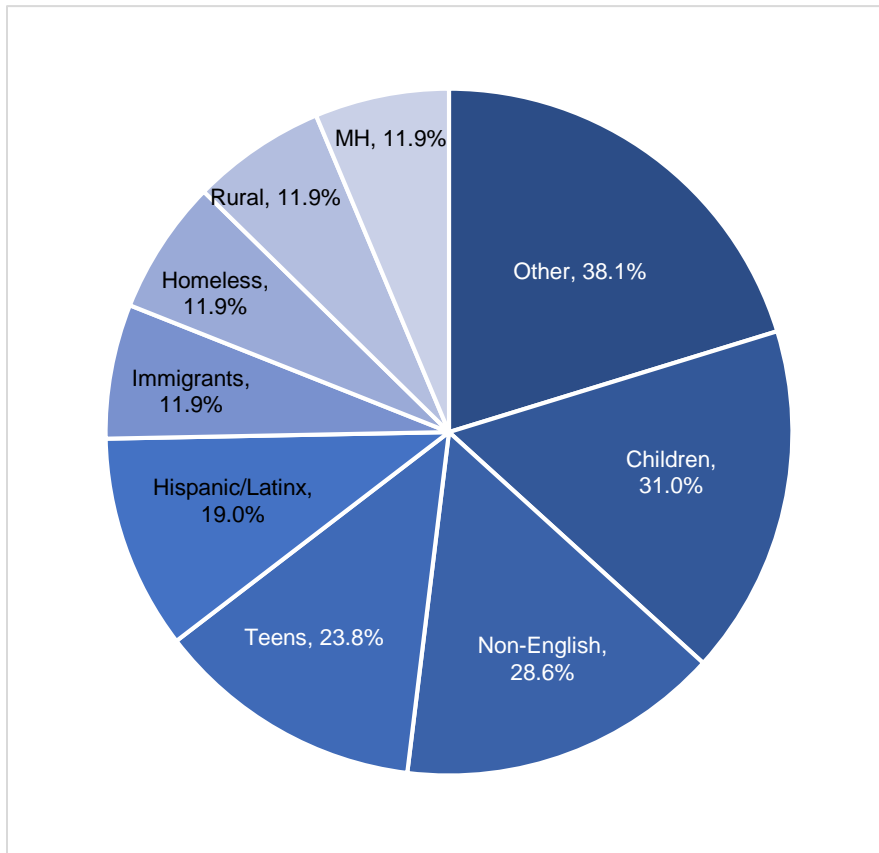
The number of these populations served ranged from 1-13 with a mean of 8.14 and a median of 9. In addition, almost 80% indicated serving six or more. Populations served by 81% or more of the agencies represented in this survey included teens (90.5%), Hispanic/Latinx (83.3%), LGBTQ (83.3%), children

(81.0%), and people with physical and developmental disabilities (81.0%). More than half of responding agencies provided services to people with mental/behavioral health issues (71.4%), non-English speaking individuals (69.0%), those who are elderly (69.0%), college students (61.9%), and persons who identify as Native American/Indigenous (57.1%). Half of respondents

⁵ Percentages do not total 100 as respondents were able to select all that apply.

serve other racial/ethnic minorities, 40.5% migrant workers, and 38.1% refugee communities. The few ‘other’ responses included survivors of human trafficking and homelessness, and one respondent noted that their agency serves many of these populations but does not track whether individuals are also crime victims.

Figure 9
Most Frequently Served Vulnerable and Underserved Populations in 2020⁶



Participants were asked to describe the underserved and vulnerable populations they served most frequently in 2020 (see Figure 9).

Approximately one-fifth to one-third of agencies listed children (n=13), non-English speaking (n=12), teens (n=10), and Hispanic/Latinx (n=8) as some of their most frequently served vulnerable populations. Five respondents each noted immigrants or undocumented individuals, homeless/housing insecure, residents of rural areas, and people with mental/behavioral health difficulties. The ‘other’

category included a variety of vulnerable populations mentioned by one to four respondents each: refugees (n=4), people living in poverty (n=2), racial/ethnic minorities (n=2), individuals with physical or developmental disabilities (n=2), elderly (n=1), the LGBTQ community (n=1), people who have been revictimized (n=1), college students (n=1), human trafficking survivors (n=1), and individuals who are food insecure (n=1).

In addition to populations most frequently served, the survey asked about some of the specific difficulties associated with serving them. Many of the comments related to serving individuals who do not speak English or are undocumented. For example, one participant noted [“inequitable access to community-based services, including access to Spanish-speaking counselors, Spanish-speaking support groups, court and legal interpreters, and barriers posed by immigration status.”](#) Another common theme was barriers related to the COVID-19 pandemic and how those often intersected with other barriers. For example, one participant stated: [“With schools being shut down and then reopening with remote learning, this hugely impacted families](#)

⁶ Percentages do not total 100 as respondents were able to select all that apply.

whose first language is Spanish,” and referring to elderly populations it was noted that, “Many services were moved to a virtual format, which brought more challenges for those who had difficulty with technology.” Other barriers included a lack of affordable housing and counseling availability (e.g., “There seems to be a long waitlist for children – adults too – to start obtaining mental health treatment.”), lack of services in rural areas, increased isolation, unemployment, lack of transportation, poverty, and homelessness. One participant also spoke specifically about community partners: “Related fields do not understand the importance of the work that we do, and that will come from better education and training all around.”

Service Provision and Other Agency Activities

Services provided by the agencies represented in the survey are displayed in Table 4. The total number of services ranged from 1-19 with a mean of 11.64 and a median of 13. Half of the agencies represented provided 12 or more services in 2020. Services provided by 71.4% or more of agencies included referral to other services including legal assistance, providing information about crime victims’ rights, accompaniment to court or other legal proceedings, assistance obtaining victim compensation, emergency services, crisis intervention, accompaniment to interviews with law enforcement, and assistance filing protection/restraining orders.

Table 4
Services Provided in 2020⁷

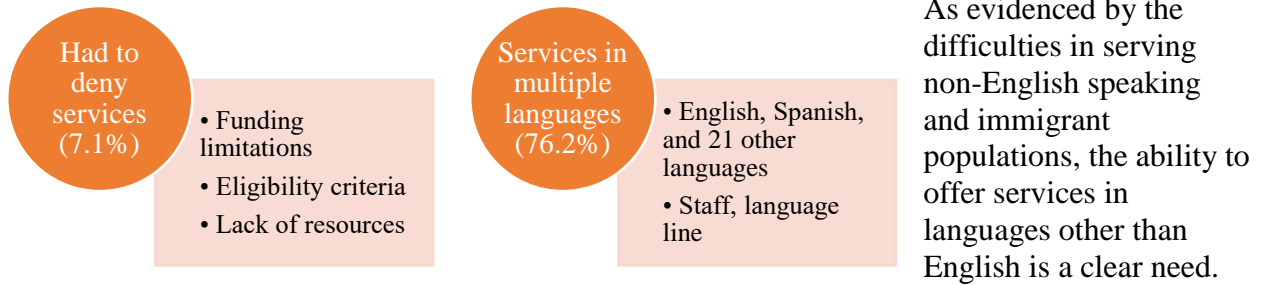
Category	Frequency	Valid %	
Referral to other services	35	83.3	Orientation to the criminal justice system, transportation, accompaniment to hospital or medical services, shelter or temporary housing, group counseling or programs, and individuals counseling were selected by 57.1-66.7%. Services provided by less than 50% of agencies were hotlines, childcare,
Information about crime victims’ rights	33	78.6	
Accompaniment to court or other legal	33	78.6	
Assistance obtaining victim compensation	32	76.2	
Emergency services (e.g., food, clothing)	31	73.8	
Crisis intervention	31	73.8	
Accompaniment to interviews with LE	30	71.4	
Assistance filing protection/restraining orders	30	71.4	
Orientation to the criminal justice system	28	66.7	
Transportation	26	61.9	
Accompaniment to hospital/medical services	25	59.5	
Shelter/temporary housing	25	59.5	
Group counseling/programs	24	57.1	
Individual counseling	24	57.1	
Hotlines	20	47.6	
Child care	18	42.9	
Assistance obtaining restitution	17	40.5	
Medical care/services	15	35.7	
Other	11	26.2	

assistance obtaining restitution, and medical care/services. Some of the ‘other’ services noted included advocacy, case management, and housing and employment assistance.

⁷ Percentages do not total 100 as respondents were able to select all that apply.

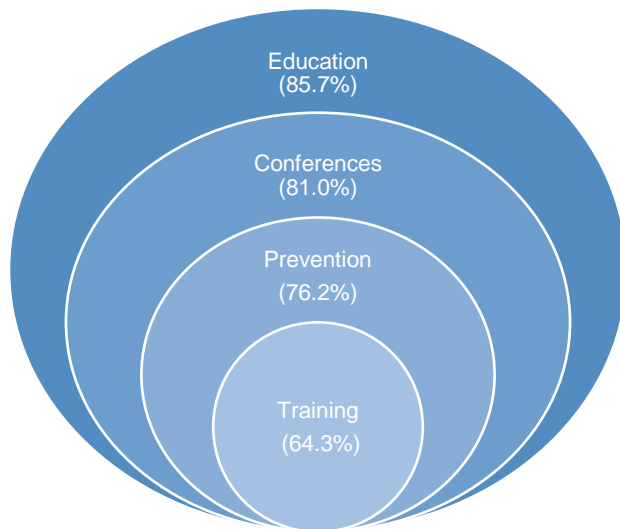
Due to funding limitations (e.g., crime or service not covered), lack of resources (e.g., housing), and program eligibility requirements (e.g., need for shelter not related to domestic violence), three (7.1%) respondents reported that their agency had to deny services to a victim last year and two more were not sure (4.8%) (see Figure 10). While having to deny services is unfortunate, the percentage of respondents who answered this affirmatively was quite low.

Figure 10
Denial of Services and Multilingual Services Offered



Just over three-quarters (n=32) of respondents indicated that their agency offered services in other languages (see Figure 10). Specific languages mentioned included American Sign Language, Amharic, Arabic, Bosnian, Burmese, Chinese, Dari, Farsi, French, Karen, Kinyarwanda, Kirundi, Manganese, Nepali, Portuguese, Rohingya, Romanian, Russian, Somali, Spanish, Swahili, and Vietnamese. Some respondents identified general regions (e.g., Middle Eastern and African languages). The most common methods of providing services in these languages included in-house staff (primarily for Spanish) and the Language Line.

Figure 11
Other Agency Activities in 2020⁸



Engagement in activities outside of service provision was common (see Figure 11). The most frequent activity was providing community education events or materials, followed by attending victimization-related conferences, engaging in community prevention efforts, and providing training for personnel outside of the agency. Two respondents indicated that their agency does not engage

in any of these activities and a few additional efforts listed included local and state policy/legislation advocacy and facilitating family visits.

⁸ Percentages do not total 100 as respondents were able to select all that apply.

The survey asked participants to describe their agency's greatest accomplishment(s) in 2020. Not surprisingly, out of the 31 responses to this question, 16 (51.6%) mentioned the COVID-19 pandemic directly or indirectly as illustrated by the following examples:

- “We made it through a pandemic without having to shut down!”
- “During the ongoing COVID-19 pandemic, our organization never ceased service delivery. While some services have been slightly altered for the safety of both staff and clients, all services have remained available for victims of crime.”
- “We are still here. We used the time to develop processes to support staff and to address secondary trauma.”
- “We were able to adapt our services to meet the evolving needs of crime victims in response to the challenges posed by COVID-19. As a result, we developed a transitional housing program and a remote crisis response that works well to meet the needs of our rural population.”

These quotes illustrate the dedication and resiliency of these agencies in the face of a global pandemic. In addition, solutions for reaching victims remotely during the pandemic may continue to be useful for rural and other isolated populations, resulting in the potential for improved connections with these communities. Housing was another common theme. Several respondents noted that they were able to provide shelter/transitional housing to those in need while others indicated that they succeeded in increasing their housing capacity. Other common themes included improvements in service provision (e.g., counseling, launch of hotline, improvement in protection order process), receipt of grants, collaboration with community partners, starting a Sexual Assault Response Team (SART), meeting their annual budget, and increased advertisement of services.

Needs and Barriers

An important goal of this survey was to determine the needs of agencies. As such, participants were asked if there were any services they would have liked to provide, but were unable to due to limited resources or other barriers. The number of needed services ranged from 0-8 (mean=1.67; median=.50) with 50% of participants reporting one or more needed services. Among these agencies (n=21), the number of needed services ranged from 1-8 with a mean of 3.3 and median of 3. The majority (66.7%) reported needing 1-3 services with the remaining 33.3% selecting 4-8 services.

Needed services across all respondents are displayed in Table 5. The most frequently selected was shelter/housing (21.4%), followed by child care (19.0%), individual counseling (16.7%), and group counseling/programs (14.3%). Emergency services and transportation were each chosen by 11.9%. Just under 10% reported needing accompaniment to court or other legal proceedings, assistance obtaining victim compensation, and referral to other services including legal assistance. Assistance filing protection/restraining orders and obtaining restitution were each selected by 7.1% of respondents and 4.8% indicated needing medical care/services.

Table 5
Needed Services but Unable to Provide in 2020⁹

Category	Frequency	Valid %	
Shelter/housing	9	21.4	The remaining services were each selected by one respondent: crisis intervention, accompaniment to interviews with law enforcement, accompaniment to hospital/medical services, hotlines, and orientation to the criminal justice system. The one ‘other’ response described that, while they were able to continue offering their services in 2020, the waitlists for services, such as
Child care	8	19.0	
Individual counseling	7	16.7	
Group counseling/programs	6	14.3	
Emergency services (e.g., food, clothing)	5	11.9	
Transportation	5	11.9	
Accompaniment to court or other legal	4	9.5	
Assistance obtaining victim compensation	4	9.5	
Referral to other services	4	9.5	
Assistance filing protection/restraining orders	3	7.1	
Assistance obtaining restitution	3	7.1	
Medical care/services	2	4.8	
Crisis intervention	1	2.4	
Accompaniment to interviews with LE	1	2.4	
Accompaniment to hospital/medical services	1	2.4	
Hotlines	1	2.4	
Orientation to the criminal justice system	1	2.4	
Other	1	2.4	
None of these	15	35.7	

shelter, were longer than usual due to staffing shortages and other pandemic-related issues. Fifteen respondents (35.7%) indicated that none of these service needs applied to their agency.

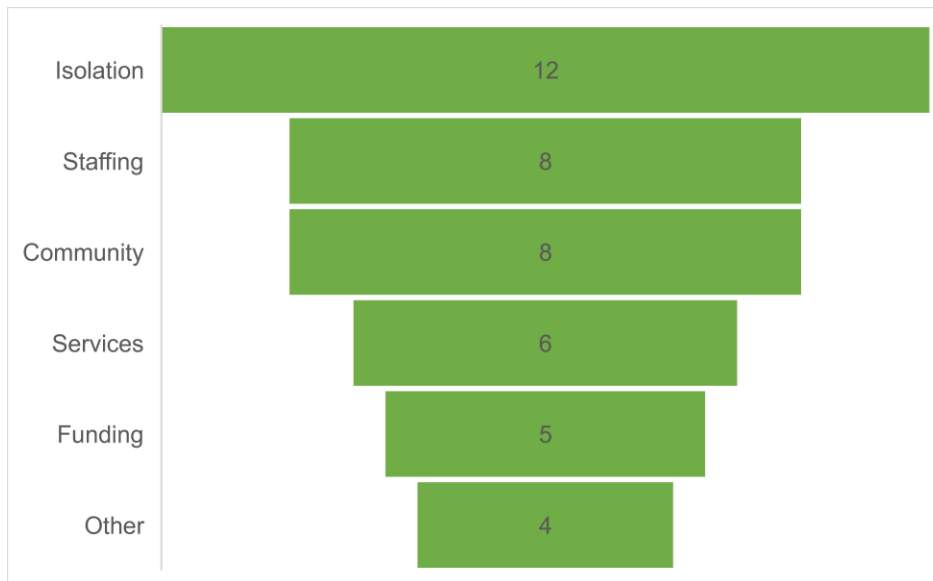
Table 6
Barriers in 2020⁹

Category	Frequency	Valid %	
Rurality/geographic isolation	18	42.9	The survey provided a list of barriers (see Table 6) and asked participants to select which were faced by their agency in 2020. The total number of barriers reported ranged from 0-7 with a mean of 2.62 (median=2.5). Among agencies
Restrictions on use of funding	15	35.7	
Lack or shortage of volunteers	12	28.6	
Employee/volunteer training needs	11	26.2	
Lack of community awareness of services	11	26.2	
Lack or shortage of employees	10	23.8	
Lack of referrals from other providers	10	23.8	
Non-English speaking victims	7	16.7	
Lack of referrals from law enforcement	6	14.3	
Victim legal/immigration status	5	11.9	
Other	3	7.1	
Lack of community support	2	4.8	
None of these	6	14.3	

⁹ Percentages do not total 100 as respondents were able to select all that apply.

that faced at least one barrier (76.2%), the number ranged from 1-7 with a mean of 3.44 (median=3.5). Approximately 38.1% of agencies faced three or more barriers. Rurality/geographic isolation was the most common barrier, selected by nearly half (42.9%) of respondents. This was followed by restrictions on use of funding (35.7%), lack or shortage of volunteers (28.6%), employee/volunteer training needs (26.2%), lack of community awareness of services (26.2%), lack or shortage of employees (23.8%), and lack of referrals from other service providers (23.8%). While the barriers pertaining to employee and volunteer needs are not uncommon, they are likely inflated due to the COVID-19 pandemic. Five to seven participants each selected non-English speaking victims (16.7%), lack of referral from law enforcement (14.3%), and victim legal/immigration status (11.9%). The ‘other’ category included a lack of potential partner agency collaboration, low number of refugee arrivals, and lack of public transportation. Two (4.8%) agencies experienced a lack of community support. Last, six respondents (14.3%) indicated that their agency did not experience any of these barriers in 2020.

Figure 12
Most Impactful Barriers in 2020¹⁰



Participants were asked to describe which barrier(s) impacted their agency most in 2020 (see Figure 12). The most frequently identified impactful barriers related to the theme of isolation (n=12), due to rurality/geography (n=5), lack of public transportation (n=3), COVID-19 (n=3), and the dynamics of

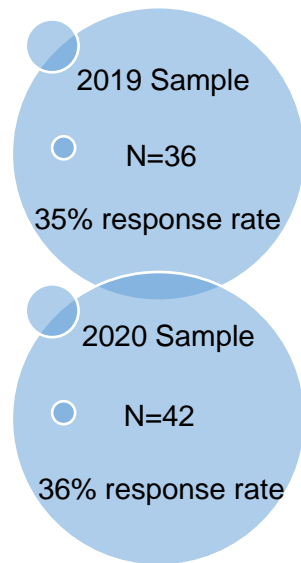
domestic violence (n=1). The next two themes were each mentioned eight times. The first involved staffing issues, including difficulty finding qualified staff (n=7) and resources for training staff (n=1). The second focused on relations in the community. More specifically, this theme included general referrals (n=3), community awareness of services (n=2), agency collaboration (n=2), and referrals specifically from law enforcement (n=1). Specific services, such as counseling availability, shelter/housing, and legal services were noted by six. Five respondents described funding restrictions as one of the most impactful barriers faced. For example, one participant stated: “We received funding to help victims pay for rent and utilities, but we could not pay mortgages or anything that was late. Often when victims need help financially, it is because they already have a late bill.” The final category included responses of language/immigration issues (n=2), poverty (n=1), and a low number of refugees (n=1).

¹⁰ Total exceeds sample size as respondents were able to list more than one barrier.

Survey Comparisons

As discussed above, a nearly identical version of this same survey was administered to victim service providers across the state in 2019 (see King et al., 2020). This allowed for important comparisons between the results of that initial survey (referred to as *2019 sample* hereafter) and the present survey (referred to as *2020 sample* hereafter). The primary difference between the two surveys was the year participants were asked to consider in their responses.

Figure 13
Methodological Differences



There were also some sample differences (see Figure 13). The 2019 sample was slightly smaller (N=36 complete/partially complete) than the 2020 sample (N=42 complete/partially complete) though the response rates were similar (35% vs. 36%) due to sampling frame variations. That is, the initial survey was sent to 103 email addresses compared to 118 for the second survey administration. The remainder of this section discusses important similarities and differences between the results of the two samples.

Agency Characteristics

The 2020 sample had a greater proportion of respondents representing community-based agencies than the 2019 sample (39.0% vs. 27.8%; see Table 7). While the administration of victim satisfaction surveys and other types of evaluations, funding sources, and application and receipt of ICDVVA funds were similar, the 2020 sample had a lower proportion of ICASDV membership than the 2019 sample (47.5% vs. 62.9%). In terms of staffing, the 2020 sample had a lower average number of employees and volunteers. Problems with attracting and retaining staff was a common theme in the 2020 sample, which will be discussed in more detail below. The average time of employment for staff providing direct victim services and requirements for additional training were similar, but the minimum education-level required for the 2020 sample was lower than the 2019 sample (46.9% requiring a bachelor's or master's degree in 2019 compared to 25.0% in 2020).

In regard to training needs, human trafficking was a theme in both samples though it was more prominent in 2020 (see Table 7). Other common training needs included trauma-informed practices, diversity/cultural awareness, and varied locations and modalities. A few of the topics discussed only by the 2020 sample included substance abuse, training specifically for criminal justice system personnel, EMDR, and secondary victimization. The responses for how their agency has built capacity were similar in that training was the most common action described, in

addition to collaboration, staff meetings, hiring, employee wellness, and fundraising. The 2020 sample included more direct discussion of strategic and succession planning.

Table 7
Agency Characteristics Comparisons

2019	2020
↑ ICASDV members	↑ Community-based agencies
↑ Minimum education	↓ Employees and volunteers
↓ Strategic planning	↑ Human trafficking training
↓ Location diversity	↑ Non-metro

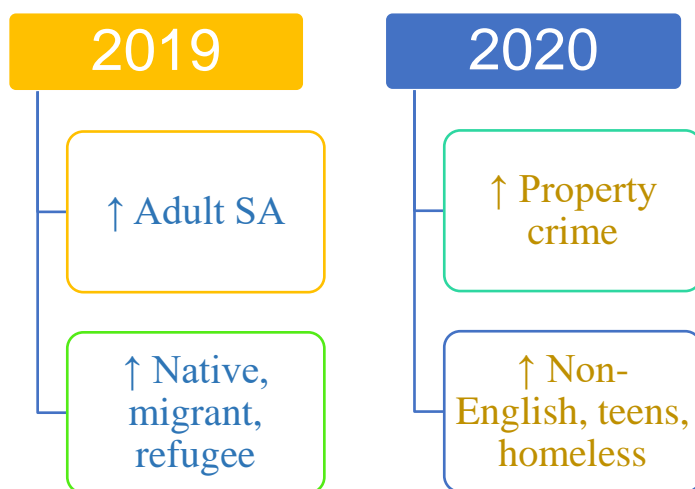
There were some important differences between the two samples in terms of agency location and service area (see Table 7). Whereas the 2019 sample reported agency

locations in a total of 12 counties located primarily in the south and northern panhandle portions of Idaho, the 2020 sample was more evenly distributed across the state with 23 counties represented. For both samples, the most frequent agency locations were in Ada and Canyon counties. Beyond that, there was quite a bit of variation with 19.4% of agencies in non-metro counties in the 2019 sample compared to 56.2% in 2020. The service area of 67% of the agencies in the 2020 sample included at least half non-metro counties compared to 51.5% in 2019. Overall, the 2020 sample was more diverse in terms of geographic location and service area.

Populations Served

For both samples, the most commonly served crime victims included domestic/intimate partner violence, all forms of child abuse, adult sexual assault, stalking/harassment, and teen dating violence. Domestic violence and child abuse were reported as the most frequently served by both samples. However, the 2019 sample had a greater proportion of respondents selecting adult sexual assault (31.3% vs. 14.3%) as one of the most frequently served populations whereas the 2020 sample had a greater proportion indicating property crime victims (7.1% vs. 2.6%) as one of the most frequently served (see Figure 14).

Figure 14
Populations Served Differences



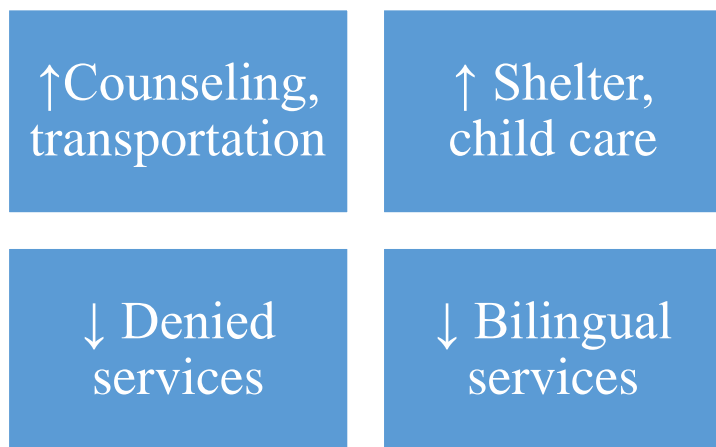
In terms of the number of victims served, the 2020 sample reported a lower average number of total (3247 vs. 4195) and unduplicated (442 vs. 834) contacts than the 2019 sample which was likely due, at least in part, to the pandemic. The same five vulnerable/underserved populations were the most frequently selected by both samples though not in the

same order: children, teens, Hispanic/Latinx, people with physical and developmental disabilities, and LGBTQ. Some notable differences between the two samples are that the percentages of agencies serving Native American, migrant, and refugee populations were lower in 2020 (see Figure 14), and the 2019 sample served a higher average number of vulnerable populations (10 vs. 8). When asked about which population(s) their agency served most frequently, the 2019 sample had a higher proportion indicating children, Hispanic/Latinx, immigrants/undocumented, and LGBTQ whereas the 2020 sample had a higher proportion reporting non-English speaking, teens, and homeless.

Service Provision and Other Agency Activities

The most commonly provided services for the two samples were the same though not in the same order: referral to other services, information about crime victims’ rights, accompaniment to legal proceedings, emergency services, assistance obtaining victim compensation, and crisis intervention. However, there were some notable differences with a higher proportion of the 2020 sample providing several greatly demanded services (see Figure 15): transportation (61.9% vs. 51.3%), shelter/temporary housing (59.5% vs. 43.6%), individual counseling (57.1% vs. 38.5%), and child care (42.9% vs. 35.9%).

Figure 15
Services in 2020 Compared to 2019



In addition, the 2020 sample had a much lower percentage of agencies indicating they had to deny services (7.1% vs. 22.2%) though the reasons for having to deny services were similar (e.g., funding limitations). The 2019 sample had a greater proportion of participants reporting that their agency provides services in multiple languages (92.0% vs. 76.2%). A large proportion of both samples engaged in activities, such as community education, attending conferences, and prevention, but the percentage of agencies providing training for

personnel outside their agency was higher for the 2019 sample, which could be partially due to the COVID-19 pandemic (71.8% vs. 64.3%).

Responses to the question about their agency’s greatest achievement were noticeably different between the two samples. Whereas the 2019 sample described things such as successful community engagement, service expansion, collaboration, and outreach, the focus of the 2020 sample was on the COVID-19 pandemic. Over half of responses referenced the pandemic in some way with some even highlighting that a positive outcome was the discovery that remote options may be useful for reaching rural and other isolated populations. However, there were some similarities between the two samples. The 2020 sample also mentioned improvements in service provision, collaboration, and advertisement of services.

Needs and Barriers

The 2020 sample had a higher need for services they wanted to offer but were unable to (mean of 3.3 needed services among those who needed at least one compared to 2.08 in 2019; see Table 8), though the types of services needed by both samples were similar: shelter/housing, individual counseling, child care, emergency services, and transportation. The samples were similar in regard to the number of barriers faced. The 2019 sample faced a mean of 2.64 barriers with 42% of respondents selecting three or more, while the 2020 sample reported a mean of 2.62 barriers with three or more indicated by 38% of participants. Some of the most prominent barriers for both samples were restrictions on how funding can be used and rurality/isolation with the former being more impactful for the 2019 sample and the latter for the 2020 sample.

Table 8
Needs and Barriers Comparisons

2019	2020	
2.08 needed services	3.30 needed services	However, an obvious difference between the two was employee and volunteer shortages
2.64 barriers	2.62 barriers	
42% three or more barriers	38% three or more barriers	
Funding restrictions and isolation	Funding restrictions and isolation	
Community awareness, non-English	Employee and volunteer shortage	

having a greater impact on the 2020 sample. Much of this was likely due to the widespread worker shortage resulting from the COVID-19 pandemic. Community awareness and non-English speaking victims were more prominent barriers for the 2019 sample.

In the 2019 sample, several statistically significant¹¹ relationships were identified. More specifically, experiencing three or more barriers was significantly more likely for community-based agencies, agencies located in non-metro areas, and agencies whose service area was comprised of 50% or more non-metro counties. While these differences were also present for the 2020 sample (see Table 9), none of them were statistically significant. Some of this could be due to the more diverse representation of agency location and service area among the 2020 sample. In addition, the COVID-19 pandemic likely impacted all victim service agencies regardless of type, location, or service area.

Table 10
Cross-Tabulation of Agency Type, Location, Service Area, and Barriers

	Reported 3+ Barriers	Statistic
Agency Type	62.5% of community-based agencies 44.0% of all other types of agencies	$\chi^2 = 1.336^{ns}$
Agency Location	62.5% of agencies in non-metro areas 55.0% of agencies in metro areas	$\chi^2 = 0.206^{ns}$
Service Area	58.3% of agencies whose service area is $\geq 50\%$ non-metro 50.0% of agencies whose service area is $< 50\%$ non-metro	$\chi^2 = 0.225^{ns}$

^{ns} = relationship is not statistically significant

¹¹ Statistically significant refers to a relationship or difference being unlikely due to chance alone.

Recommendations

The goal of this study was to gather information from crime victim service providers in Idaho in order to describe their needs, barriers, and characteristics, as well as offer recommendations for enhancing crime victim service provision across the state. The recommendations provided below are focused on the findings from the 2020 survey, but also take in to account the findings and recommendations resulting from the 2019 survey. These recommendations are based on the empirical data collected from the surveys. However, it is important to recognize the time lapse. That is, the survey asking about agency needs and barriers in 2019 was administered in early 2020 and the report was released later that year. The second survey, which examined needs and barriers in 2020, began data collection in late 2021 and continued through early 2022 with the final report being released in late 2022. As such, some of the efforts that have already been launched to address the recommendations are noted below. It is also important to note that while the two surveys specified which years participants were to consider in their responses (2019 or 2020), it is possible that participants had difficulty differentiating needs and barriers from each specific year. Instead, they may have responded in regard to needs their agency is currently facing or has historically faced.

COVID-19

The impact of the COVID-19 pandemic on victim service agencies in 2020 was an undeniable theme. The pandemic created a variety of obstacles related to service provision, outreach, and daily operations. At the same time, the isolation that accompanied the pandemic yielded some potentially creative solutions to serving hard to reach populations.

Recommendation #1: Continue to harness the influx of remote technologies as a result of the pandemic to serve and enhance outreach to rural and other isolated populations. Incentivize the use of innovative methods to reach these communities.

Recommendation #2: Regularly evaluate methods and processes for remote victim service provision in terms of service delivery efficacy and victim satisfaction. Share best practices with providers statewide.

Staffing

While staff and volunteer shortages were noted by the 2019 sample, as well as *Crime Victims in Idaho: An Assessment of Needs and Services* (Growette Bostaph et al., 2015), they were much more prominent among the 2020 sample. This is likely due, at least in part, to the widespread worker shortage resulting from the COVID-19 pandemic, but could also be indicative of other difficulties such as low wages and burnout. In addition, the percentage of agencies offering services in multiple languages decreased among the 2020 sample which points to the need for multilingual staff and volunteers.

Recommendation #3: Brainstorm and disseminate resources and methods to appropriately compensate, attract, and retain high quality victim service providers, particularly those who speak both English and Spanish.

Funding

Issues related to funding were a common theme in both samples. This barrier affected 35.9% of the 2019 sample and 35.7% of the 2020 sample. Funding sources limited to specific services or certain types of victims were frequently discussed (e.g., funding that can be used to pay current bills but not overdue bills).

Recommendation #4: Provide state-appropriated, flexible funding for crime victim service providers in Idaho to address eligibility restrictions commonly encountered with other funding sources and improve service provision.

Recommendation #5: Determine the range of funding restrictions encountered by victim service agencies and workshop ways to reduce these barriers.

Training

Training emerged as an important element of capacity building among both samples. Participants clearly prioritize training and are on the lookout for new topics and training opportunities to serve the populations they encounter. Several suggestions were provided in regard to the content and delivery methods of future training and many of these efforts are already underway (for further information about training and other efforts, refer to <https://icdv.idaho.gov/>). However, a number of survey respondents were unaware of available training opportunities so increased advertisement is recommended.

Recommendation #6: Continue to increase the availability of training on the following topics: serving survivors of human trafficking, trauma-informed practices, diversity and marginalized communities, and substance abuse. Due to several respondents' unawareness of training opportunities, ensure communication about these resources is widely disseminated (e.g., community-based agencies, victim witness).

Recommendation #7: Continued collaboration among the primary training providers in the state (e.g., ICDVVA, ICASDV, Idaho Victim Witness Association [IVWA]) is recommended in order to provide training in a variety of locations across the state, as well as varied modalities (e.g., in-person, synchronous remote, asynchronous online modules).

Recommendation #8: Continue to administer a short survey to victim service providers about their training needs to inform the content of future training opportunities.

Recommendation #9: Continue to share information with service providers about online training opportunities through organizations such as the Office for Victims of Crime, National Center for Victims of Crime, and the National Organization for Victim Assistance, ensuring these opportunities are reaching the variety of victim service providers across the state.

Evaluation

Evaluation is a crucial component of service provision. Victim service agencies should be encouraged and provided with resources to evaluate their operations and services to ensure they are providing the most needed, high quality services to victim of crime.

Recommendation #10: Incentivize victim service agencies to administer satisfaction surveys on an on-going basis.

Recommendation #11: Continue administration of a standardized survey similar to the online crime victim survey currently being administered as a part of the *Biennial Report*

on *Victimization & Victim Services* to enable comparisons among agencies and time periods. Assessment of victim satisfaction with in-person versus remote services is recommended.

Recommendation #12: Provide crime victim service agencies with information and resources to conduct evaluations through collaborations with local researchers.

Populations, Services, Needs, and Barriers

The results from both samples indicate that agencies are providing a wide array of services to survivors from a variety of crimes, as well as vulnerable/underserved populations. It is important to continue to serve these communities while also expanding outreach to groups that may be less likely to seek or be aware of available services. Addressing the needs of agencies and service provision barriers they face is also paramount.

Recommendation #13: Continue to target evidence-based, trauma-informed services to frequently served crime victims (e.g., domestic/intimate partner violence, child abuse, adult sexual assault, teen dating violence) and vulnerable/underserved populations (e.g., children, teens, Hispanic/Latinx, people with disabilities, LGBTQ) in Idaho.

Recommendation #14: Expand outreach and service provision to other crime victims (e.g., elder abuse, homicide survivors, non-intimate partner assault, economic or property crimes, DUI, human trafficking, hate crime) and vulnerable populations (e.g., migrant workers, refugees, undocumented immigrants, racial/ethnic minorities) who may have unique needs and concerns, or be less aware of services.

Recommendation #15: Continue outreach to rural communities and consider lessons learned as a result of the COVID-19 pandemic to mitigate the obstacles of geographic isolation, such as distance from service providers and lack of public transportation.

Recommendation #16: Investigate funding and/or agency collaboration opportunities to expand the availability of shelter/housing resources, child care, individual counseling, and transportation services.

Conclusion

The results of the *National Crime Victimization Survey* indicate that there were over 4.5 million violent crime and over 13 million property crime victimizations in the United States in 2020 (Bureau of Justice Statistics, 2021). While these figures represent a decrease from the previous year, crime victimization remains a significant issue across the country. In addition, many of these incidents go unreported as only 40.2% of violent and 33.0% of property victimizations were reported to police that same year. In Idaho, there were 4,484 violent and 36,165 property crimes known to police in 2020, which represents an increase in violent (4,154) and a decrease in property (36,722) from the previous year (Idaho Statistical Analysis Center, 2020; 2021). Recognizing the low reporting rate for crime across the country (as no such data exist for Idaho), these figures likely represent only a portion of the victimization that actually occurred.

The variety of crime victim service providers across the state offer a crucial resource for survivors of crime in helping them to recover from the trauma they experienced and access needed services and resources. The results of this survey, the initial survey (King et al., 2020), and the 2015 needs assessment (Growette Bostaph et al., 2015), illustrate the importance of these

agencies in responding to crime. However, they also highlight the needs and barriers they face in service provision. The recommendations provided in this report, which are based on the survey data collected directly from victim service providers, are meant to address some of these needs and barriers in an effort to ensure survivors of crime are receiving the timely, high quality services and support they need and the rights they are afforded under the Idaho Constitution.

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The Idaho Crime Victim Service Provider Survey Results, Vol. 1, Issue 2 of the *Biennial Report on Victimization & Victim Services in Idaho* was released in December of 2020 and reported on a survey of providers about issues they experienced in 2019, pre-pandemic. Many of the 2020 report recommendations were acted upon by the Idaho Council on Domestic Violence & Victim Assistance (ICDVVA) in 2021 and 2022.

The Idaho Crime Victim Service Provider Survey: Year Two, Vol. 2, Issue 1 of the *Biennial Report on Victimization & Victim Services in Idaho*, to be released in fall 2022, reports on a survey of providers about issues they experienced in 2020, which includes the pandemic. However, it is worth noting that respondents to the survey about 2020 were answering questions about a period before the initial survey reports were published, and therefore before any of the report recommendations were known or could be acted upon by ICDVVA or others.

The result of the survey timing is that many of the recommendations in the two reports are essentially the same, since there was not intervening action taken and time to assess the impact of those actions in the second survey and document them in the second report. In the future, it would be more beneficial to allow at least one year between reports, e.g., survey providers about 2022 conditions and then allow at least one year after the recommendations are released before surveying providers again and ask in the survey that they report on a time period after recommendations could have been acted upon. With such timing, it would be possible to evaluate which, if any, changes have been made and whether such changes impacted the needs and barriers of victim service providers, resulting in different recommendations in the follow up study than in the initial study.

The following is a brief summary of actions taken by ICDVVA in response to the recommendations in the December 2020 report, grouped by the categories/recommendations in that report:

Funding

ICDVVA researched available state funding for victim services in other states to explore various funding models in use elsewhere. ICDVVA initiated a collaboration with the Idaho State Police Planning, Grants, and Research staff to share information on eligible uses of the grant funds administered by each, and to communicate between agencies when either learns of an unmet funding need for an Idaho victim service provider, to see if there is a way to meet that need. Virtual regional roundtables in 2021 provided an opportunity for programs to identify any funding restrictions posing barriers to providing services. Enhanced outreach regarding funding opportunities was undertaken, including: creating ICDVVA social media accounts to share funding opportunities, sharing funding opportunities from ICDVVA and other funders in an ICDVVA monthly newsletter, advertising funding opportunities on the ICDVVA website, attending conferences and giving presentations to educate others about the funding ICDVVA administers and how to apply, and asking collaborating partners to share funding opportunities

with their stakeholders. ICDVVA also entered into a consulting agreement in 2021 with a tribal liaison to assist Idaho's tribes in applying for funding should they wish to do so.

Training

ICDVVA began to use the Resources, Training Opportunities section of the agency website as a central location to list training opportunities relevant to those in the field of victim services. Trainings from a wide variety of sources are listed, including the Office for Victims of Crime, National Center for Victims of Crime, and the National Organization for Victim Assistance, as well as the Idaho Coalition Against Sexual and Domestic Violence, the Idaho Victim Witness Association, and many others. ICDVVA also began highlighting some trainings in each of its monthly newsletters. The annual Safety & Resilience Conference put on by ICDVVA was virtual in 2021, and select talks were made available on an agency YouTube channel so that they remain an available resource to programs. ICDVVA surveyed funded programs about their training needs and provided training opportunities to address some of the requests, including a webinar on fundraising for programs. In 2022, ICDVVA partnered with the Idaho State Police to bring a half-day training on the Neurobiology of Trauma, provided by retired Nampa Police Detective Angela Weekes, to all public health regions of the state, to make training opportunities available with minimal travel; the training was free and open to funded programs, victim witness coordinators, law enforcement, prosecutors, medical providers, and the public. ICDVVA included training as a priority in its strategic plan and has been including the clearinghouse of available training opportunities available on the agency website in presentations to other agencies, stakeholders, and funded program boards around the state to increase awareness of this clearinghouse of information.

Evaluation

ICDVVA required funded programs in FY21 and FY22 to share with clients the online crime victim survey currently being administered as a part of the *Biennial Report on Victimization & Victim Services in Idaho*, to maximize the opportunity for victim input. Programs were asked to use just that one survey, vs. multiple/other surveys, as of July 1, 2021. ICDVVA made site visits to all funded programs in 2021 and ensured that they had victim survey cards in the languages requested and had them available to clients; this effort greatly increased the number of responses beyond those during the initial survey period. ICDVVA discussed the survey with funded programs in regional roundtables in 2021 and 2022, and designed a simple, ongoing victim satisfaction survey that all programs can administer so that there is current available statewide data, the programs do not have to design their own surveys, programs can access data about their services or region as needed, and there is an ongoing way to get victim input about services they needed but were not able to access (and why). Input from funded programs and other stakeholders was solicited in the initial design of the survey, which will go live October 1, 2022, when the Boise State survey ends. ICDVVA has offered tablets to all funded programs to make participation in the survey easy for clients and is providing programs with printed cards with a QR code to access the survey from any internet-connected device, as well as the ability to collect responses via hard copy. The survey is translated into Spanish and Arabic, and additional languages may be added if needs are identified. Use of the ICDVVA survey is a requirement of FY23 subawards, and the results will be discussed in regional roundtables in 2023.

Populations Served

Using one-time Covid-relating funding in late 2020 and beyond, ICDVVA was able to fund technology advancements for victim service programs throughout the state, including laptops, tablets, Zoom subscriptions, smartboards, camera/microphone equipment, and other items that facilitate remote service delivery. The use of telehealth and remote service delivery has made services more accessible in rural areas, and programs report they have continued remote services in a variety of ways after lockdowns and closures ended. In 2021, ICDVVA partnered with the Idaho Council for the Deaf & Hard of Hearing and the Idaho Council on Developmental Disabilities in regional roundtables throughout the state to discuss service needs for those underserved populations and available resources in each region. ICDVVA included professional development and educational opportunities for victim service providers to better serve underserved populations in its 2021 and 2022 Safety & Resilience Conferences to assist providers with better outreach and service delivery to vulnerable populations (e.g., English as a Second Language, LGBTQ, disabled, deaf and hard of hearing, Latinx, human trafficking victims, indigenous people, refugees, and male victims of intimate partner violence). A tribal liaison was retained through a consulting contract to assist Idaho's tribes with exploring and applying for funding streams available through ICDVVA. ICDVVA met with three of Idaho's five federally recognized tribes to ask their needs and offer training and other resources in response to requests.

Service Provision, Needs, and Barriers

Shelter/housing and individual counseling were cited as the most frequently indicated needs by victims. ICDVVA began collecting housing and counseling need and demand data from programs July 1, 2021. This data allows ICDVVA to have quarterly updates on housing and counseling waitlists, capacity, barriers in accessing these services, and more. ICDVVA was able to use one-time Covid-related funding beginning in late 2020 to fund more hotel/motel vouchers for victims of crime, rental assistance to keep victims in their homes, and rental assistance to help victims get into new housing, as well as technology to allow telehealth counseling services. In 2022, one-time funding also allowed programs to rent transitional housing facilities for victims in areas with little affordable housing. The ICDVVA victim survey, discussed above, along with the need and demand data from programs, will allow ICDVVA to better identify areas of need and work with programs to fill gaps as funding levels continue to decrease.