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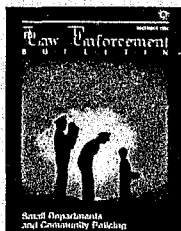
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On the Cover: Small police departments can successfully implement the community policing philosophy. See article p. 1. Cover photo by Orlando Mendez, courtesy of the Metro-Dade, Florida, Police Department.

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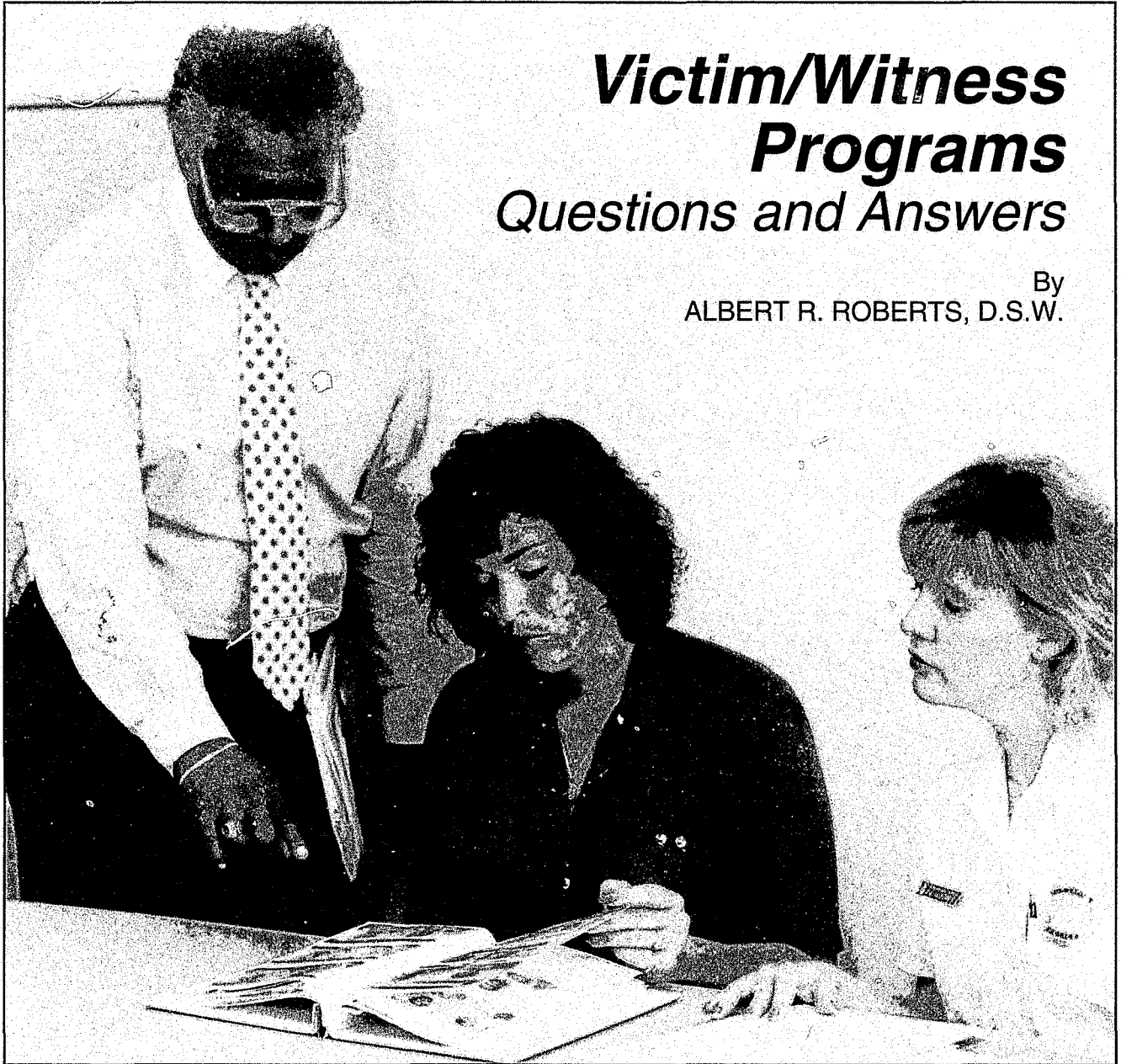
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Victim/Witness Programs

Questions and Answers

By
ALBERT R. ROBERTS, D.S.W.



During the past several decades, there has been a growing awareness among police administrators and prosecutors alike of the alarming prevalence of violent crimes and the rights of crime victims—and for good reason. Each year, criminals kill more than 21,000 victims and seriously injure more than 800,000 others. In addition, the National Crime Survey (NCS) reported that in 1989, a total of 135,410 attempted or actual rapes

occurred.¹ In that same year, the NCS estimated that over 4.6 million assaults occurred, costing victims approximately \$1.5 billion. This includes losses from medical expenses, lost wages, cash losses, and property theft and damage.² This figure, however, does not take into consideration the costs incurred by the criminal justice system.

In the aftermath of violent crime, victims must often cope with physical pain, psychological

trauma, financial loss, and court proceedings that all too frequently seem impersonal and confusing. Indeed, many victims and witnesses have their first contact with the criminal justice system as a result of being victimized or witnessing crimes.

However, during the past 2 decades, a growing number of counties and cities developed victim/witness assistance programs, rape crisis centers, and specialized do-

mestic violence programs to reduce the impact that crime has upon the lives of victims and witnesses. This article briefly traces the evolution of these services and answers some fundamental questions about victim/witness programs.

Background

In the past 20 years, there has been a fundamental shift in the programs offered by the criminal justice system. During the 1950s and 1960s, the system clearly emphasized offender rehabilitation, giving little attention to the suffering of crime victims. However, by the mid-1970s, when jurisdictions initiated the first victim/witness assistance projects, the pendulum shifted gradually toward providing fewer rehabilitation services to convicted felons and more services to innocent crime victims and witnesses.

This shift in focus changed how the criminal justice system treated crime victims, from their initial contact with law enforcement officers to testifying in court. Historically, many crime victims were victimized twice: First, during the actual crime, and then, again, when insensitive police and court personnel ignored their calls for help or subjected them to harsh and repeated questioning.

However, the victims' movement did much to change this situation. In 1974, criminal justice professionals began to recognize that insensitive, curt, and apathetic treatment of victims and witnesses caused criminal prosecutions to fail because of "witness noncooperation." This eventually led to Federal funding, through the Law Enforcement Assistance Administration (LEAA), of 10 prosecutor-based

“...victim/witness assistance programs encourage witness cooperation in the filing of criminal charges, as well as in testifying in court.”

Dr. Roberts is a professor and the director of the Administration of Justice Program at Rutgers University, New Brunswick, New Jersey.



witness assistance programs. By 1975, administrators across the country developed four other types of victim assistance programs: A nonprofit victim service agency in New York City; a county office-based victim/witness program in Palm Beach County, Florida; a victim assistance program sponsored and staffed by the Fresno County, California, Probation Department; and a police-based crisis intervention program at both the Indianapolis, Indiana, and the Rochester, New York, Police Departments.

With the demise of LEAA in the early 1980s, Federal grants to victim/witness assistance programs declined. Existing programs tried to recover from the loss of LEAA funding by requesting county or city revenue funding. At first, some local government sources were reluctant to allocate sufficient funds. However, between 1981 and 1985, because of persistent and successful lobbying by victim/witness groups, 28 States enacted legislation to fund both established and new programs.

Often, State legislatures raise the funds for these programs and services by earmarking a percentage

of penalty assessments and/or fines levied on criminal offenders. Nineteen States fund victim services through penalty assessments and fines, while the remaining nine fund victim services through general State revenues.

Even with the increased attention given to victim/witness concerns, many criminal justice professionals still do not fully appreciate the wide range of issues involved. The following answers to some common questions concerning assistance programs should help to foster a better understanding.

What is a victim/witness assistance program?

Usually housed in a local county prosecutor's office, victim/witness assistance programs encourage witness cooperation in the filing of criminal charges, as well as in testifying in court. In general, these programs include a witness notification and case monitoring system in which staff members keep witnesses advised of indictments, continuances, postponements, specific trial and hearing dates, negotiated pleas, and trial outcomes.

Many of these programs provide secure and comfortable reception areas for witnesses waiting to testify in court, transportation services, and a court escort who accompanies witnesses to court and remains with them to explain and interpret the court proceedings. Typically, these programs also prepare and distribute court orientation pamphlets about the adjudication process.

What are the primary objectives of victim/witness assistance programs?

These programs help victims to overcome the emotional anxiety and trauma associated with testifying in court, while encouraging witness cooperation in the prosecution of criminal cases. Staff members in these programs:

- Explain to victims and witnesses that their cooperation is essential to crime control efforts and successful criminal prosecution
- Inform victims and witnesses of their rights to receive dignified and compassionate treatment from criminal justice professionals
- Furnish information to witnesses on the court process, the scheduling of the case, the trial, and the final disposition
- Provide orientation to court proceedings and tips on how best to accurately recall the crime scene and testify.



How are victim/witness assistance programs funded?

Beginning in the mid-1970s, the first victim/witness assistance programs in large metropolitan areas received 90 percent of their funds from the LEAA and the remaining 10 percent of their funds from county prosecutors' budgets. With the passage of the Victims of Crime Act of 1984 (VOCA), the three major sources of funding for the period 1985-1990 became Federal grants, State criminal penalty assessments/fines, and county general revenue grants.

Today, many programs have more than one source of funding. The most significant funding for victim assistance and victim compensation has been awarded to the States through the U.S. Department of Justice's Office for Victims of Crime. Since 1984, over \$620 million has been allocated from various sources to aid crime victims. During fiscal year 1985, these sources allocated \$68.3 million to aid victims of State and Federal offenses. The annual amount increased to \$93 million in 1988, \$144 million in 1990, and \$150 million in 1991. These Federal funds came from fines and offender penalty assessments on convicted Federal criminals.

What is a victim service or crisis intervention program?

Victim service and crisis intervention programs are not as common as witness assistance programs. Often housed in a police department, sheriff's office, hospital, or nonprofit social service agency, these programs generally attempt to intervene immediately after victimization. They provide a comprehensive range of services for crime victims, including responding to the crime scene; crisis counseling; emergency money; transportation to court, the local battered women's shelter, the hospital, or the victim assistance program office; assistance in replacing lost documents or in completing victim compensation applications; and referrals to community mental health centers and social service agencies for extended counseling.

What types of individuals are served by victim service and crisis intervention programs?

Typically, these programs provide services to all victims of violent and property-related crimes. Certain types of victims have special needs, and as a result, many of these victim-oriented programs have also begun to provide outreach services to particularly vulnerable crime victims, such as the elderly, minorities, battered women, and sexually assaulted children.

For example, elderly crime victims often have no bank accounts (or limited savings) from which they can withdraw funds in an emer-

gency. Unless they receive emergency funds or food vouchers from a local victim assistance program, they often have to wait for their next social security or pension checks. In addition, physical conditions associated with aging, such as osteoporosis, can mean that elderly victims who receive even slight injuries more likely will require hospital care.³

Cultural mores make Hispanic and Asian women especially reluctant to report domestic violence and sexual assault offenses or to ask for victim assistance, because reporting male offenders breaches long-held cultural standards.⁴ These female victims also seem to have a more intense fear of retaliation than other victims. A study of 102 battered women in New Jersey, for example, found that the overwhelming majority of Hispanic batterers used knives on their victims. Many of these men slashed their victims' face and threatened to kill them if they were not totally obedient.⁵

Battered women who do file charges against their abusers frequently require crisis intervention and emergency shelter. These crime victims often turn to local city or county law enforcement agencies when confronted with the life-threatening danger posed by domestic violence. In fact, police-based crisis intervention units report that battered women make up a large number of their crisis callers.

Generally, a crisis team (ideally working in pairs) responds to the crime scene and provides crisis counseling, transportation to and from medical centers and shelters, and referrals to mental health and

social service agencies. The increasing plight of battered women in American society is evidenced by the dramatic growth in these emergency shelters—from 7 in 1974 to over 1,200 by 1990.⁶

How are victim service and crisis intervention programs funded?

In contrast to the prosecutor-based witness assistance programs, victim-oriented programs receive almost all of their funding from State and county general revenue grants. Only a small number of these programs receive Federal funding, and these programs usually focus on providing rape crisis services and domestic violence intervention. The bulk of funding for victim service programs comes from local mayors' offices, city councils, police departments, county sheriffs' offices, or the board of trustees of area medical centers.

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The victims' movement has grown remarkably during the past 20 years.
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What types of staff are employed by victim/witness assistance units?

Prosecutor-based programs employ victim/witness assistance specialists. These individuals usually possess a degree in criminal justice, criminology, sociology, counseling, or jurisprudence. In general, these programs or units operate with a relatively small staff of four to five

individuals. A typical staff includes a deputy prosecutor or chief victim/witness assistance specialist, a secretary, a data entry clerk or receptionist, and two victim/witness assistance specialists or advocates.

What types of staff are employed by victim service programs?

The staff of victim service programs view themselves as victim advocates who work to alleviate the stress and trauma related to victimization. Staff members are often professional social workers or counselors with degrees in social work, counseling, psychology, or guidance and counseling. Though civilians, they generally work closely with police officers and deputy sheriffs.

These victim advocates/crisis intervenors also conduct training sessions at county police academies on victims' rights, as well as roll call briefings related to victim assistance and domestic violence intervention. Often, they receive notification of a traumatized victim via the police radio.

Victim service workers usually provide direct services to victims, such as crisis intervention at the crime scene, making home and hospital visits, and placing outreach calls on criminal case status. They also compile information on filing victim compensation applications, assist victims with property release, provide community education, and serve as a liaison between the victim and social service agencies.

Conclusion

The victims' movement has grown remarkably during the past

Case Study

20 years. In fact, the evolution of victim/witness assistance programs in communities across the country is gradually becoming institutionalized into a network of established city and county human service agencies.

The programs discussed in this article document the concern and commitment of the many leaders who have developed these programs for crime victims and witnesses during the past 2 decades. Despite negative publicity in the news media about the apathy existing in many bureaucracies, concerned prosecutors, police administrators, advocacy coalitions, and crisis intervention specialists demonstrate a dedication to addressing the special needs of crime victims and witnesses. ♦

Endnotes

¹ Caroline Wolf Harlow, *Female Victims of Violent Crime*, Bureau of Justice Statistics, U.S. Department of Justice, Washington, DC, 1991.

² Bureau of Justice Statistics, *Violent Crime in the United States*, U.S. Department of Justice, Washington, D.C., 1991; *Criminal Victimization in the United States, 1989: A National Crime Survey Report*, U.S. Department of Justice, Washington, DC, June 1991.

³ Albert R. Roberts (ed.), *Helping Crime Victims: Research, Policy and Practice* (Newbury Park, California: Sage Publications, 1990.)

⁴ Elaine P. Congress, "Crisis Intervention with Hispanic Clients in an Urban Mental Health Clinic," in *Crisis Intervention Handbook*, A.R. Roberts (ed.) (Belmont, California: Wadsworth Publishing), 1990.

⁵ Albert R. Roberts and Gloria Bonilla-Santiago, *Exploratory Study of 102 Incarcerated Battered Women in New Jersey*, Rutgers University School of Social Work, 1992.

⁶ Supra note 3.

Conviction Through Enhanced Fingerprint Identification

In March 1990, an unknown assailant sexually molested and fatally stabbed a young woman. At the crime scene, an investigator discovered few leads. The only evidence was a pillowcase, found adjacent to the victim's body, that exhibited several bloodstains. One stain showed some faint fingerprint ridge detail, barely visible even to the trained eye.

Preliminary Investigation

An investigator took the pillowcase to the department's forensic unit for bloodstain pattern analysis. Technicians photographed and studied the stains, slowly extracting information. They discovered two things. First, they confirmed that several stains were consistent with blood transfer from a knife blade, although no knife was found at the crime scene. Second, and more importantly, analysts determined that the fingerprint presented enough ridge detail to conduct a more extensive investigation.

Analysts then sent the evidence to another forensic study center where scientists treated the fingerprint with DFO, a relatively new chemical (similar to Ninhydrin) that becomes fluorescent when exposed to a light source. Once processed, the DFO provided an improved ridge detail photo. However, the ridge detail still remained blurred, displaying poor general continuity and visible

fabric weave in the background. All traditional photographic techniques failed to erase the distortion. Analysts subsequently concluded that the latent was unidentifiable.

Image Enhancement

A short time later, investigators assigned to the case witnessed a demonstration of fingerprint image enhancement at a forensic conference. Faced with a dead-end murder investigation, they decided to try the technique on the unidentifiable pillowcase fingerprint from the crime scene.

Investigators took the best DFO photograph and shipped it to a facility with the capability to perform image enhancement. Throughout the enhancement process, the accuracy of the print was documented through photographic records of each stage. Within 4 hours, the enhancement yielded an identifiable print.

Supporting Evidence

In the interim, the lead case investigator developed several likely suspects. The primary suspect (the victim's next door neighbor) surfaced early in the investigation. However, the prints on record from a previous arrest did not contain sufficient ridge detail for comparison.

The investigator then concentrated on the serology report, which noted that examin-