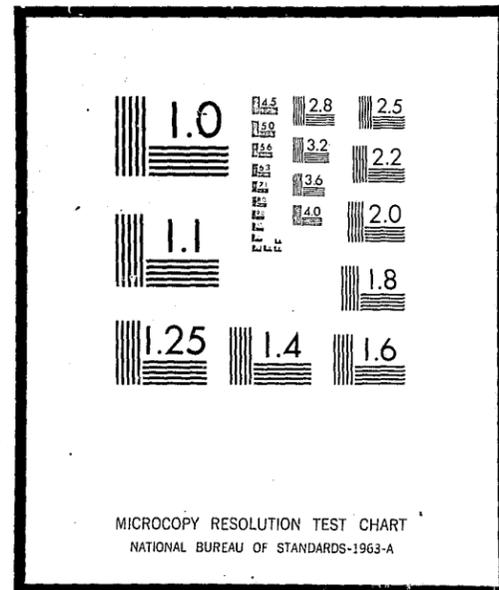


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INTEGRATED SERVICES FOR VICTIMS OF CRIME! —
A COUNTY-BASED APPROACH

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INTRODUCTION

The victim is the forgotten man in the criminal-justice system. The system focuses first on the crime itself, and thereafter on the offender. Who is he? Was he arrested? Are the police doing their job? Were the offender's rights protected? Does he have a lawyer? What is happening in the courts?

The criminal-justice system is under more public scrutiny than ever before. How can we speed up trials, improve sentencing, incarceration, prisons, probation, parole training, rehabilitation? But this increasing attention and reform still ignores the victim.

The victim stands alone. His or her needs are not the single concern of any agency in the criminal-justice system. When attention is directed to victims, it is offender- and offense-oriented. The police come and go with as many answers as a victim can provide, and the evidence. The victim's possessions may be taken for evidence and returned months, or even years later.

The police and prosecutor may ask the victim to make statements, look over mugshots, or attend a line-up. The victim may have to repeat his story, confront his attacker, re-live the crime, spend days in court, or simply wonder what happened if the case never comes to trial.

All of this asks a great deal of the victim, and offers very little. A minor example, but one especially frustrating to many victims, is that most jurisdictions forbid police to transport victims. The offender, if apprehended, is whisked away in a squad car. The victim, who may just have been robbed of every penny, must get home on his own. Most jurisdictions bill victims for ambulance services if they are injured. Many hospitals and private doctors turn away rape victims. Witness fees are usually inadequate recompense. Where financial compensation is available under state law to victims of crime, the process is slow, coverage thin, and victims poorly informed about the program.

This brief overview touches only a few problems affecting the victims of crime. Police, prosecutor, and courts proceed in all good faith to do their job relative to society's interest in the offense and offender, often revictimizing the victim in the process. More attention to victims would help, not hinder, the criminal-justice process. It might pay off in more reported crimes, and more willing witnesses. The initial steps involve coordination between social-service and criminal-justice agencies. Some areas of concern require long-range study and a gradual approach to reconcile real conflicts between the needs of the victim, the offender, and the criminal-justice system.

The county stands in an almost uniquely advantageous position to sponsor these improvements. County governments operate the hospitals, mental health programs and public assistance which can become the main sources of integrated victim services. They are conduits for state unemployment, vocational rehabilitation and emergency assistance programs. They have active links with federal programs supporting the elderly and the indigent. In most states, county governments are also the primary focus for both criminal court activities and the prosecution process, both of which have tremendous impact on victims. Most counties both maintain their own law enforcement agencies and operate in close coordination with city and state police officers and are able to reorient their initial response to a victim's needs.

Elected county officials are in a strong position to yoke all these services and activities together on behalf of the victim. They can harness both the public and the inter-agency, intergovernmental support necessary.

The pattern, in fact, has already been set by model county projects coordinating offender services and integrating the activities of health-care agencies.

The pages that follow discuss who victims are, what their needs might be, and how some communities -- through city, county, and private initiative -- have responded. The final chapter describes models and alternatives for integrated victim services. The focus throughout is on services to victims, rather than financial compensation programs which have been fully discussed elsewhere. (Please consult references listed on p. 22.)

Services help the victim deal with the consequences of crime -- they help him bridge the gap between what he was before the crime and his future. It is a specialized form of compensation which includes, in many cases, simple support and assurance, and in others, elaborate effort.

I. VICTIMS AND COUNTY RESOURCES - GETTING TOGETHER

Victims

Very little data are currently available on victims' needs or their response to services. Recent research has attempted to determine, for the first time, how much victimization there actually is, and who the victims and offenders are. These surveys show that far more crimes occur than we knew -- or were willing to admit. For each unreported crime, there is a silent victim.

When individuals do report crimes, victim service agencies must make a basic decision: who will they regard as a "first priority victim?" Financial restraints will make the answer almost inevitably "victims of violent crimes." But property crimes can also create serious personal emergencies. Very few inner-city residents, for example, have checking accounts; many elderly citizens are unwilling to use banks. For these citizens, an apartment robbery can mean the loss of rent or food money. Food-stamp thefts create real problems for those who have absolutely nothing to spare. Defining the victims will require some very basic line-drawing. This decision will be one of the fundamentals in structuring the program. The problems that result from some types of victimization are more obvious than others. For example:

Homicide leaves the victim's family in disarray. If the victim provided family support, there is sudden financial hardship as well as the shock of loss. Family members are often unaware of available assistance for funeral expenses. Insurance, job-related benefits and Social Security may be a complete mystery for the relatives of an intermittently employed victim.

If a homicide is the outcome of a family quarrel -- and this is often the case -- there may be serious, continuing family problems as well as immediate legal ones. If the perpetrator is at large, fear becomes another immediate problem for the family.

Rape presents particular problems for the victim -- so much so that rape is disproportionately under-reported. Besides the immediate shock of assault, which itself requires sensitive professional handling, there is the ordeal of giving testimony and dealing with family and public reaction. Despite efforts to improve the attitudes of law enforcement and medical personnel, as well as the public, the rape victim is almost inevitably revictimized by the treatment she receives. Unless the victim is a child, or elderly, she, herself, is put on trial.*

*Only a few states, following California's example, have revised their statutes and court rules to prevent a rape prosecution from turning on the victim's personal history rather than on the assault at issue.

Studies of rape victims show a tendency to deferred reaction and long-term emotional problems. Victim services can both reduce these and help the victim deal with them. For many women, the circumstances of rape mean they must find new, safer housing, change employment, or completely alter their lifestyles, and these changes may be difficult to arrange. If a victim does want to prosecute, she may need support during the legal process. Victim services must help provide a new security without further setting the victim apart.

There is a strong movement toward creating specialized Rape Crisis Centers. A few hospitals have established highly professional and responsible medical and counseling services. Such centers have tested victim service approaches. Whether these Centers should be absorbed into general victim services is a subject for debate.

Assault, like rape, leaves a victim with serious ongoing problems. Rape victims may be lucky enough to find themselves in a supportive environment, but assault victims are rarely helped to deal with the fear and hostility reactions that accompany their physical injuries. Little data are kept on the compound costs of assault, but they can be overwhelming, even for injuries that are not permanently disabling. Ambulance service, emergency room treatment, follow-up medical care, job time -- sacrificed both at the time of injury and during the prosecution process -- all mount up to make even a relatively minor injury a serious financial blow, especially to a low-income victim. Victim services could provide access to emergency assistance, Medicaid or Medicare, and arrange for vocational rehabilitation if an injury dictates a job change. Victim programs could deal with the problems of housing security and offer counseling to reduce the chances of repeat victimization.

Recidivism is, in fact, a particular problem in assault situations. A survey of victims by the National Crime Panel shows that of those who have been robbed or assaulted once, 15 percent had been victimized a second time, and fully a third of those twice-victimized were subjected to one or more incidents subsequently.^{1/} Assault victims are frequently elderly, an easy target for stronger, younger attackers, particularly when low incomes and insufficient local housing make it impossible to move out of high-risk areas. Victim counseling in apartment security, relocation, or escort services would help.

Family assaults are also frequently repeated. Active family crisis intervention, counseling, and support are rarely available. Child abuse is a particularly handicapping and poignant aspect of intrafamily assault. In many jurisdictions, a child victim is taken from his parents. But more is needed here -- professional help for the child victim and his family.

The third group of repeater victims will be even harder for supportive services to reach. These are the young victims of street and bar encounters who end up in late-night emergency wards with gun and knife wounds. Who is charged with the crime and who is regarded as a victim is often a toss-up. These victims often refuse services and are much more likely to identify with their attackers than with a victim-service program. Certainly they are a far less sympathetic target. Nevertheless, services provided in this context could reduce the chance that the next opportunity for services will be in a pretrial or probation context -- or that the next encounter will be fatal.

Additional offenses may seem unimportant by comparison. But even minor property crimes can make drastic inroads on the means and security of those who are only marginally able to support themselves.

"Victimless crimes," in all their variety, create victims out of the offenders themselves. Alcoholics and drug users should be mentioned as a

particular category of repeater victim or offender. The designation depends on the laws and attitudes of local jurisdictions. In some areas, special programs are offered to this client population. At the same time, these individuals need services which a victim-service unit will become skilled at locating -- medical care, financial service, emergency housing, counseling and general support. It may not be necessary to keep them in isolation. Each community must decide whether to offer services to these groups. The pressure of the caseload in other victim categories may well be the determining factor. It is important for any victim-service program to begin on a manageable scale and develop credibility through the services they offer to the initial target population.

In each offense category and with every victim, the impact of the crime will vary. Some victims are, of course, cushioned by highly supportive family situations, insurance, and the ability to purchase private medical care and counseling. But those most often and most easily victimized are rarely so lucky. Victims are predominantly residents of the inner-city. They are predominantly the young and old. They are likely to be poor, and under-educated. The victim of crime is the very person least able to cope with the problems of crime, or to utilize existing services.

County Resources

In many cases, counties already hold the key to victim assistance. Existing county resources can be enlisted in the service of victims. For example:

Medical care, when required, is a first priority for victims. County and other public hospitals are now responding to victim problems in a specialized way, and there are many examples of what hospitals can do. Jackson Memorial Hospital, the county hospital of Dade County, Florida, operates one of the country's first completely professional Rape Crisis Centers as an integral part of its services. The hospital provides medical care, preventive treatment, medical and psychiatric follow-up as well as victim and family counseling. Jackson Memorial also trains both medical and law enforcement personnel.

In another area, The Boston Childrens' Hospital has established a special center for victims of child abuse. The Center provides medical care, social-work evaluation of the family, family counseling and coordination with criminal-justice agencies. The Center aims at prevention both of further abuse -- the child's immediate safety -- and prevention of long-term trauma for the child.

Neither of these hospitals is, obviously, a wealthy private institution. They are both busy, overworked, open to the poor. Both programs, Jackson Memorial's in particular, benefit from the strong support and leadership of local elected officials.

Mental health facilities are provided by most counties. However, with the exception of concern with the long-term problems of rape, county mental health services are not victim-oriented. They are, however, familiar with the elements of trauma. Fear, confusion, hostility, and a sense of guilt or personal responsibility for the incident are common among victims, but arise as commonly among other patients. Mental health programs have extended their services to drug users, runaway youths, and potential suicides by establishing special centers, counselors, hot lines and community ties. These services could easily be extended to victims.

Employment and Public Assistance Programs are also administered by counties in most areas. But victims of crime are only one small part of the total client population of these agencies, and all are in need. Public

assistance agencies have been slow to respond to victims as a special group.* Agency investigation and processing is simply too slow. Where emergency procedures exist, they are not known to victims -- and the agencies do very little to encourage applying.

Information is the key to many of the services victims need. Availability of assistance is one example, but there are many more. Even in states where funded Victim Compensation Boards exist, few apply. A recent study of the New York program conducted by the Alliance for Safer Cities suggests the reason is failure to reach out to victims entitled to compensation. Those who most need restitution do not read news reports about the program. Even if they have a little information, they are easily confused or deterred by paper work and Board appearances.

Beyond information about available services, victims need, and do not get, information from the criminal justice system itself. Preliminary research by the Center on Administration of Criminal Justice and the Sacramento Police Department indicates that one of the major negative factors affecting burglary victims' attitudes toward police is a lack of concrete information on case progress. Police, certainly, have too much detail work to do now, but information could be relayed by others. This would relieve a great deal of fear and frustration. Victims want to know whether an assailant has been caught. If they fear a repeat attack or reprisal for prosecuting, they want to know if he is out on bond. They want to know why their possessions are being held as evidence and when they will be returned. They want follow-up information -- for example, police often pick up a suspect linked to several incidents who is later prosecuted for the cases with the strongest evidence. A victim may never hear that "his case" is considered closed. Or a victim may be called to identify a suspect and never be called to court if plea bargaining or some other procedure changes the nature of the prosecution. The victim's response is to lose whatever confidence he might have had in police, prosecutor, and courts.

Courts, prosecutors, and defending attorneys are, of necessity, offender-oriented. The victim is only one of many possible trial witnesses. Courts could, however, inform victim-witnesses what to expect. Coordination could be improved so a victim need not tell his story repeatedly -- to police, to several prosecutors, then to the court. Victims should also be better informed of court scheduling. In most courts, all witnesses in any case expected to be heard on a given day are subpoenaed to appear at the same early hour in the morning. Yet, the case might not be heard that day at all, due to over-scheduling or continuances (postponements). Efficient use of court resources requires victim-witnesses to be available when a case is actually called -- but victims could be alerted by telephone. Considering the victim from the start would ensure his cooperation if legitimate delays in prosecution and trial arose.

*In most urban areas -- and in the depressed rural counties -- pushing one victim to the front of the public assistance line only means that someone else has to step back. Given the initial conditions of too many people and too little money, welfare agencies present the most serious problem that administrators considering victim services will have to face. Line-drawing is not going to be easy.

II. VICTIM SERVICE PROGRAMS IN ACTION

Increasingly, agencies are responding to victim problems within their sphere of responsibility. With some genuine leadership, support, and a strong sense of community concern for the problems of victims, more would follow. Since social service agencies are already overburdened, this initiative will very likely have to come from an outside source willing to play an advocacy role for victims.

In a few jurisdictions, a new criminal-justice agency has appeared -- the Victim Service Center. The centers are so new that each so far has developed almost without awareness of the others. None has yet been subjected to comprehensive evaluation. Their approaches vary markedly, suggesting an array of models for new Victim Service Centers. This variety also suggests that there is no single approach to victim services organization.

This section describes several integrated service programs. The following section on service models and alternatives (III) draws on the experience of these existing programs. Some programs are not yet fully operative -- the summaries include planned as well as operating programs. And, it must be emphasized, the list is not complete.

Bronx, New York: The Crime Victims Service Center

This center, funded by LEAA through the Mayor's Criminal Justice Coordinating Council of New York City, and the Center for the Study of Social Intervention of the Albert Einstein College of Medicine, is in its first year of operation as a pilot program and model for a city-wide service system for crime victims. Its clientele includes all adult victims of violent crime in the South Bronx. Most of the area is almost stereotypically "inner-city." The median income in one police precinct is \$5,400, in another, \$4,900. Thirty percent of the people are on welfare. Abandoned houses, trash-ridden streets, critically overcrowded housing, and high crime rates encourage feelings of skepticism and almost universal hostility toward all institutions. The unreported crime rate, though obviously difficult to detail with certainty, is at least twice as high as the reported rate for crimes against persons.

Since it is a pilot program, the Center is not large, operating with a small administrative staff. Five victim counselors do the day-to-day work of contacting victims and providing referral services. These victim counselors are paraprofessionals from the community. All are experienced in community service and street-oriented programs.

Contact with victims is achieved in various ways as the Center continues to search for those that are most effective. Victim counselors check police records for violent crime reports and contact the victims by telephone or by a series of letters. If the victim responds, an interview is scheduled and necessary referral, counseling and follow-up initiated.

Police reports have not proved effective sources of contact, given the amount of time counselors must spend calling names of victims from police reports. Police records were found to be in error in 20 percent of the cases -- either because victims deliberately chose to cut themselves off from further police contact, or through simple confusion and pressure on police to collect an initial report as rapidly as possible. When located, victims are suspicious, unwilling to believe that much will come out of another set of promises.

Hospital trauma wards are a second major source of victim contact. Counselors regularly visit the hospitals -- particularly as the weekend draws to a close -- to talk with the injured. Hospital personnel make direct referrals. Social-service agencies also provide victim referral, particularly

when the agency can relieve only a part of a victim's immediate needs. These referrals are the product both of formal meetings and Center efforts to have a "victim contact" in each agency.

A last (but increasingly important) source of referral is the Center's use of the media -- public service advertising, bus posters, and pamphlets. Center staff appear on radio and television interview shows and speak to community groups. Police are supplied with bilingual cards to give to victims describing the Center and how to contact it.

Direct services to victims take the forms of evaluation, referral and counseling. The counselor assesses the victim's immediate problems and attempts to match them with available public and private services. If referral makes sense, counselors accompany victims to the service source -- welfare offices, vocational rehabilitation, housing -- the whole gamut of assistance. Experience, and an increasingly institutionalized victim-contact network within the agencies, allows the victim counselor to cut red tape, reduce repetitive paper work (or assist the victim through that inevitable bureaucratic maze) and get some affirmative assistance.

The Center is not part of the city or county structure, and has taken more of an adversary/advocate role than other victim service centers. For example, one housing area has been repeatedly victimized, and the Center has been urging the city housing authority to force building owners to provide better building security. But as a new program relying on the good will and unofficial cooperation of formal institutions, the Center has tended to mute these activities more than it would prefer. The advocate-team player line is one that every victim service center will eventually have to draw.

When a victim is referred to an outside agency, Center counselors do follow-up interviews to make sure that the victim is getting the help he needs. If victims do not need services as a result of victimization, or do not meet eligibility requirements, then they are helped with planning their lives to prevent repeat incidents.

In any central city, such planning is particularly frustrating. Victim counselors help old people in broken-down buildings improve the security of their own apartments, knowing that the victim may become a prisoner, hiding in that comparatively safe area. An assaulted woman is told not to walk dark streets when all the streets in her area are dark, public transportation is erratic, and the only available job keeps her out after sundown. Major change is increasingly seen as the only meaningful alternative to band-aid advice. Consequently, the Center is becoming interested in preventive programs such as transportation, protective and escort services. Center experience, though brief, has shown that in low-service, high-crime areas, prevention may well be the best use of extra resources. Court processes, legal services for victims, and victims' rights in the criminal-justice system are also part of their long-term plans.

Ft. Lauderdale, Florida: Victim Assistance Project

In Ft. Lauderdale, two professional victim advocates operate a broad-based referral service for victims of property as well as violent crimes. Victim Advocates are available 24 hours a day, and their clearly marked vans have aroused both interest and a rare positive response to law enforcement personnel in the high-crime, low-income areas of the city.

Like other victim service centers, it is new -- in operation since April, 1974. The primary distinction between this program and the Bronx Center is that the Ft. Lauderdale program is sponsored by the city police department. Victim advocates are police department employees. The project itself has funding from the Law Enforcement Assistance Administration.

Service needs of victims do not vary markedly, and the referral

services themselves are much the same. One of the major initial efforts has been to institutionalize awareness of victims and the availability of emergency service. Overloaded social-service agencies have responded positively. Victim advocates use special training to manage emergency cases which were formerly dumped into agency in-boxes. The victim advocate also provides interagency liaison, transportation and referral to responsible agencies. The victim gets sure direction, rather than a bureaucratic run-around, from a service source that is available on more than a 9-5 basis.

Police-department sponsorship helps the advocate make contact with victims. In emergency situations, victim advocates are called to the scene of the crime to calm victims and to provide immediate emotional support. This is most common in rape cases, in assaults involving the elderly, and when thefts leave victims without enough money to get through the night, find a place to stay, or buy food.

If it is apparent that an injured victim does not need immediate medical assistance, or that a victim can manage for a short time, the investigating officers inform victim advocates of the case on the following day. Victim advocates may identify the victim themselves from a daily scanning of police operations reports. The victim is then contacted directly by the advocate. (Tracking victims down is one of the time-consuming aspects of every program.) Many victims simply come into the Victim Advocate office, which is immediately adjacent to the Detective Bureau and convenient for victims coming in to make statements or identifications.

As police employees, and because of the police-oriented intake process, victim advocates have not worked with victims of unreported crimes. They maintain, however, that they do not pressure victims to prosecute. The advocates feel that the program itself, linking services to police intake, actually encourages victims to report crimes.

A major effort of the program's early stage is development of a community resource bank from which victim services can be drawn. Integrating services is a major problem in Ft. Lauderdale as in every urban area. The effort has located many available services which simply were not well publicized earlier. Other service sources have actually been developed through aggressive outreach -- talks to community groups and local foundations urging victim-service involvement and extension of existing projects to victims. Achievements in this direction are impressive: off-duty nurses have agreed to donate time to victims needing home care, businessmen and several private service clubs agreed to supply emergency food and clothes, a private foundation is allocating part of its resources for the major financial trauma of sudden disability due to victimization -- granting emergency rent, mortgage payments, utility payments and other basic obligations the victim may not be able to meet immediately.

This response highlights an important aspect of victim services. The community, when stirred out of its apathy, tends to regard victims as the "deserving poor." Giving to victims is somehow not regarded as charity, even by those who are outraged by rising welfare rolls. A victim could be any of us, they reason, and every individual's fear of crime, indignation and real sympathy is translated into a willingness to help victims.

There is an ironic outcome of this service development, a serious point for victim service programs to consider: as services go beyond immediate, crime-oriented help to provide access to public assistance payments job training, or the funding of a safer residence, a victim becomes better off than he was before the crime.

The Victim Advocate Program grant requires a 600-case service load the first year. There were 11,238 serious offenses in Ft. Lauderdale in 1973 involving personal injury or loss of property. Program personnel

estimate that of those, 2,500 victims are actively in need of services as a result of the crime itself. Defining priorities and realistically limiting expectations has been emphasized the first year. In this, their experience has differed markedly from that of the Bronx program. The Ft. Lauderdale program has overcome much of the initial police department suspicion and reluctance. Community response has been positive. Though there are occasional slammed doors at the sight of a van marked "Ft. Lauderdale Police Department," as well as "Victim Advocate," the Florida community simply does not face the level of hostility, suspicion, and apathy that confronts the Bronx. In the Bronx, police department affiliation would be counter-productive; in Ft. Lauderdale, police department sponsorship is regarded as beneficial both to the program and to the department.

Fresno County, California: Office of Victim Advocacy

Planning for a victim advocacy program in Fresno County began early in 1973 under the sponsorship of a committee representing all criminal justice agencies in the county -- courts, police, probation, district attorney's office, public defender, and citizens. As the plan developed, county supervisors became actively interested, supporting its location in the County Probation Department and providing county matching funds. Community groups furnished both active support and funds for the program.

The committee surveyed victims, studied victimization and engaged in general planning. The committee felt that moving too fast could result both in false expectations and in providing the wrong services in the wrong way. By September, 1974, five staff counselors, some of whom are ACTION volunteers supplied through a federal grant, were on board. Counselors are thoroughly trained in the operations of the criminal-justice system, particularly the function of the district attorney and the police as they interact with victims. The responsibilities of various community service agencies, crisis intervention, and interviewing techniques are also emphasized.

The program priority is violent crime victims, as in the Bronx program. The caseload is now quite low, reflecting a decision to defer publicity and intake efforts until a full staff is hired. At that point, victims will be reached through the county jail booking list and from the daily logs of city and county law enforcement agencies. Police officers will also directly inform victims of the program.

Perhaps because it is located in the probation department, the Fresno program is much more court-oriented than other victim-service agencies. Victims are regularly accompanied to court if they wish such help; counselors answer the "why" -- where one exists -- of police, prosecution and court procedures. The counselors are responsive to a victim's curiosity about the progress of "his" case and the elements involved in sentencing. If a victim evinces any fear for his own safety, the counselor will keep close track of the offender's progress through the system and notify the victim of an imminent release from custody.

The Fresno County Probation Department has used volunteer probation officers for some time. This experience will be translated into recruitment and training of volunteer victim counselors who will have an active, direct service role. For example, volunteers will visit or call the elderly who are afraid of being alone after a burglary or assault. The Fresno planners dispute the fears of some professional victim workers that community volunteers are apt to become so emotionally involved with victims that their heavy sympathy becomes fear - reinforcing rather than truly supportive. At least one program (in St. Louis, discussed below) runs entirely with volunteer counselors. The experience of Rape Crisis Centers around the country with carefully chosen volunteer counselors has been positive. Volunteers must

be adequately screened, trained and supervised. (Victim service programs that use volunteers are listed on p. 20.)

The early Fresno planning was done by a broadly structured committee, and the project director believes this helped overcome territorial suspicions of other agencies. Even so, agencies have been found to be more responsive when a victim counselor accompanies the victim through the initial eligibility interviews. Victim Advocates also help victims process state victim-indemnification claims. They have also helped by explaining to creditors, including the county hospital, that the claim process takes time.

The Fresno program expects in the future to involve victim advocates in sentencing, probation and parole decisions. The Probation Department prepares pre-sentence reports for all offenders. A victim's needs might weigh the balance toward restitution without incarceration; a victim's fears might also influence the report. The Probation Department recognizes the difficulties inherent in this particular aspect of its assignment. It may, for example, violate the due-process rights of offenders. The Department has set no guidelines for pre-sentence reporting by the victims program. Another element of the initial plan designates accused people awaiting trial as "victims" for the purpose of assistance. This, too, is a long way from implementation.

St. Louis, Missouri: Aid to Victims of Crime

The Aid to Victims of Crime Project is unique among on-going service centers in that it is independent of any government support. An outgrowth of citizen indignation, it operates through two paid staff members and one assistant whose salary is paid by a local trust. Victim counseling is conducted by 50 trained and predominantly community-resident volunteers. The target area is the cluster of three police districts where a majority of victims of violent crime live. About 45 percent of the city's violent crime is committed in these districts, which also feature the city's highest unemployment, lowest income rates and its most congested housing.

Victim suspicion and hostility are a major factor in initial contacts. Project personnel feel that separation from police departments and city agencies is necessary. "We're not from the city," is good starting point for the volunteers. Contact with about 16 percent of the victims is made through city hospitals which provide access to victims and make referrals if no volunteers are in the hospital when the victim is admitted. Some referrals also come from the Police Department, with which the project has good working relationships, but the counselors do not monitor police records as a way of identifying victims. The project maintains a 24-hour-a-day answering service. Any victim can call for assistance.

The services provided include referral to city and county agencies. Relationships with these groups have developed very well. The project, for example, has succeeded in cutting food stamp replacement-time from three weeks to three days on the supporting recommendation of a volunteer counselor.

Volunteers are able to provide services that county or city agencies are either not free to provide or lack the staff and funds to undertake. Volunteers arrange legal services for victims and negotiate with the landlord and creditors of injured or out-of-work victims to keep financial pressures down during recovery and readjustment. Employers are reached and urged to carry an injured victim on the payroll and to allow time off for court appearances. They provide transportation and babysitting, fill emergency grocery orders, and relocate families. Volunteers are also active in locating a victim's family, helping with insurance and other paper work, arranging funerals or home nursing, and replacing necessary objects such as tools or walking canes. Counseling and outreach projects are working with

residents, particularly the elderly, to help reduce the likelihood of victimization.

Sacramento, California

The Sacramento Police Department and the Center for the Administration of Criminal Justice, assisted by a Police Foundation grant, are setting up a program to improve police treatment and services for victims. Initially, the project will focus on residential burglaries, later it will broaden into other crimes. Since much less attention is generally given to property-crime victims, the research component of this program will be particularly useful. It should make clear the extent to which property crimes match the hardships of violent crimes -- loss and fear -- despite the fact that the victim has not, usually, seen the offender or been threatened by him. Beyond improving police services, the program will be involved in referral, insurance and compensation assistance. The program plans to develop a strong information component to let victims know what is happening in the prosecution process and where property taken for evidence purposes can be recovered.

III. INTEGRATED SERVICES FOR VICTIMS OF CRIME -- SERVICE MODELS AND SERVICE ALTERNATIVES

Services for victims of crime exist in every county -- unknown to most victims and service workers. A provider of one form of assistance, at an out-patient clinic, for example, may not make the necessary connection between inability to pay for health care and inability to pay the rent. If he should, few counties have services so thoroughly integrated that the observant worker in one area knows what others can provide. On-going Victim Service Centers have rallied broad community support and willingness to become involved with victims. Integrated services must include these resources as well.

Benefits

Victim service is not simply another new claim on scarce county time and resources, but a better organization of existing resources. Counties already have the responsibility -- integrated services for victims is a tool to carry it out effectively.

Other advantages of integrated services can accrue to counties. Victim Advocates, for example, relieve what is now a serious strain on police officers' time. Even with the best possible will, a police officer at the scene of a crime is primarily interested in crime-related details necessary to investigation. Yet, in call after call, officers remain to help contact relatives, find the victim a way home, or simply to calm and comfort. Or officers simply call an ambulance and leave hospital personnel to deal with all those immediate problems, even if injuries are slight. All of this, and more, can be done effectively by the Victim Advocate on call. Police officers need only respond to one decision: "Is the Victim Advocate needed now or can this victim make it on his own for a bit?" If immediate non-medical help or a supporting presence during the medical process is necessary, he can call the Victim Counselor. If not, later follow-up will bring the counselor to the victim. Either way, the police officer is freed to do his primary job. Some police department managers express the tentative opinion that the cost savings to police departments will be appreciable.

Second, a victim-service program can provide positive assistance to victims caught up in the prosecution process. Though services should not be tied to a victim's willingness to cooperate with prosecution, the positive

link and the continuing contact may well result in fewer missing witnesses when the trial begins.

Victim advocacy can also provide information useful for crime prevention. There is neither time nor reason for police officers to collect detailed background information about the victim. But a careful, privacy-conscious amassing of details can provide law enforcement with extremely useful data. It can also focus crime prevention counseling and messages to the public.

Finally, service integration means better service. Specialists in victim problems provide liaison between the victim and the agencies. Rather than an informal, hit-or-miss referral from agency-to-agency, the "not us but try Family Services" approach, the victim will be referred to an agency that can help.

Basic Decisions

Victim services is a new idea, and all the existing programs are recent. Most projects have not been fully evaluated. Nevertheless, some facts are apparent from their experiences. First, and most important, is that there is no set model for a victim service center. Second, though operations be adjusted according to experience, every victim service center must build on a strong foundation of political support.

Support

Without the full support of the county administrator and the director of the sponsoring agency, chances of success are limited. Victim advocacy is a popular idea, but implementation through the daily presence of victim counselors can be a real threat to existing agencies. For example, even victim advocates working directly out of police departments report hostility and skepticism in the early stages.

The law enforcement community often worries that if services are provided, victims will lose interest in prosecution, that judges who hear that a victim has been helped will impose lighter sentences and that the victim advocates lead "outsiders" in criticism of police and court procedures. These fears have proved to be unfounded, but initial resistance can be a real problem.

Social service agencies have reacted similarly to the idea of a new group pushing "special clients" to the front of their lines. Victim advocates are trying to speed up the process and reduce red tape. Agencies, obviously, feel they're doing the best they can in difficult circumstances. Strong support from elected county officials, county administrative leadership and early consultation with the agencies can speed up the adjustment process.

Goal Definition

Service, of course, is the goal, but a good program can do more. Goal definition is essential to prevent the Center from trying to be all things to all community interests. Some of the goal conflicts will turn out to exist primarily on paper, but a clear idea from the start will ease relationships. Goals will also have an effect on structure and procedure. For example, if a secondary goal is to increase the rate of reported crimes and improve police-community relationships, the victim advocate will be well housed in the police department. If a goal is to reach all victims without forcing criminal-justice involvement, the unit would be better situated elsewhere.

Wherever located, any victim service center can concentrate on basic objectives -- service referral, service development, crisis intervention and counseling, community consciousness-raising about the needs of victims,

community education in law-enforcement procedures and prevention techniques, community involvement in victim services, and protection of the victim from media exploitation. It should formalize the linkage between law enforcement and social services.

Precise goals, like so many other decisions, must be tailored to the individual community. Accordingly, it is important to know where these things stand -- victim services need a solid continuing research component. At the outset, it is important to know what victims perceive their needs to be. Who are they? What are the major blocks to community response? Where do victims turn now for support? What model of victim services would be most trusted by the community?

Defining the Victim, Measuring the Service

Victim definition is not as obvious as it sounds. The criminal-justice system has set the inner boundaries by defining crimes. Many, many of those who will appear at victim service centers as legitimate victims of crime are also long-term victims of all the social problems that put one in the path of a criminal act. A victim service center must be able to narrow its scope.

A commonly used term is "bona fide victim." For victim centers with a strong police or court tie, that term includes only victims who report the crime to the police and cooperate in prosecution of the offender. In rape cases, it means that the police believe the victim's story. In assault situations, if the victim and offender were fighting or the victim provoked the attack, either party may be the victim. Programs will have to come to grips with definitions.

Practical pressures have forced each on-going victim center to contract for services. Social service resources are so limited, only the truly needy victims get services; the rest are compensated only by whatever state financial restitution program exists. The same pressures eliminate most property-crime victims from the Centers' emphasis (excluding Sacramento) unless the crime itself has left the victim immediately destitute. Centers for victims serve, by and large, only the poorest, the oldest, or the most dislocated victims. The Ft. Lauderdale Program defines a bona fide victim as "one who has suffered an emotional, physical or property loss as a result of a crime and, (1) has no means of self-help through personal assets, insurance, relatives, employer, friends or other reliable sources, (2) has means of self-help but no immediate access to them due to incapacitation or lack of awareness of available services and (3) is not already receiving sufficient sustaining assistance as a result of an earlier crime."

Service Delivery Alternatives

Existing victim service centers provide almost a laboratory test of service-delivery alternatives. Others are available. The choice depends on the program's secondary goals, community attitudes, and, again most importantly, support. Unless the program has aggressive backing by the head of the agency in which it is to be located, it should be moved. Where a service center is located is probably the fundamental factor in many of its subsequent decisions.

The County Administrator's Office may be an ideal location if most major services are supplied by the county. Though none of the on-going programs is located there, the direct support of county supervisors would provide the victim service program with political backing it often needs to deal with initially reluctant line agencies. It is also a neutral location if social service and law enforcement agencies dispute who should

do what. On the other hand, it may be more difficult to win line agencies over from this position of "favored newcomer." Another possible drawback is that the victim service program might become too politically oriented in this location.

Police Sponsorship is the model in Ft. Lauderdale, Jacksonville,* and Sacramento. Secondary goals are improving police-community relations, and police image. Sacramento has strong police-procedures reform in its planning, but in the other two centers, location in the police department is not regarded as an invitation to second-guess police handling of victims. Fear of this, in fact, was quoted as one of the reasons for initial suspicion of victim advocates by police personnel.

Advocates of police department sponsorship point to the value of police referrals, particularly the immediate contact between victim and victim counselor when necessary. Victim advocates report that while their police identification causes hostility in a few cases, the value of police support in others outweighs them. The departments themselves feel that the victim advocates speak well for the police and are enjoying favorable community response.

Court sponsorship through the county probation department, on the Fresno model, also has some distinct advantages. Courts, particularly the juvenile branches, and both adult and juvenile probation departments, have been increasingly involved in social services. Where a court-sponsored offender service or pre-trial diversion program is in operation, both court and social agency personnel are probably working together. Police may relate more readily to a court program than to one located in a social-welfare agency. Courts have also had long experience with making good use of community volunteers. The court system frustrates and confuses many victims: an internal victim advocate might be able to confront these problems constructively.

County hospitals are already victim service centers. But like the police, hospital personnel are busy, untrained in victim counseling, and unaware of alternatives for the unhospitalized or recovering victim. Any victim service center should establish either an out-post or a regular contact with the hospital emergency ward. Attaching the entire Center could work out well, particularly if planners feel no compulsion to focus on reported crime victims only. Hospitals have on-going medical follow-up and ties with the mental health community which could be strengthened. They share with law enforcement agencies a need to develop ties to social-services agencies. Outreach, too, would be a wholly new aspect of any hospital-connected program. The danger that the uninjured victim might never get proper attention would have to be carefully planned for and the program well-publicized.

Social-Service Agencies are potential locations for victim services. They are the end point of most Center referrals. Community relations are apt to be reasonably strong and community resources may already be identified. As institutions, they tend to be ponderously slow -- but so do the courts. They have the advantage of a service orientation without the difficulties of police or court alliance. In communities where identification with law enforcement would be a problem, the victim services group could be located in or allied with the main county welfare-employment-family services complex.

*Jacksonville description not included in this draft. It is modeled on the Ft. Lauderdale program, and located in the Sheriff's Department.

A possible drawback is that advocates may not gain enough force in large, established organizations to be effective from an inside location.

Independent Victim Services with a store-front air is the Bronx, St. Louis pattern. These groups deal with all institutions as outsiders, but have had no major problems in establishing working relations with both law-enforcement and social-welfare agencies. The decision weighs delicately -- what an independent center gains in inner-city trust, it may lose in victim contacts and referrals.

County funding of an independent center would be a desirable alternative to housing in an existing agency. The group would be free to work out its relationship from the ground up. It would almost certainly be more free to take a gadfly approach to other agencies. It would have the strongest access to unreported crimes. How these factors are valued depends on the jurisdictions and on the Victim Center's goals.

Intake and Outreach Boundaries

Crime victims are unaware of available services. Even money compensation claims are not filed simply because these large state-wide programs are not well known. Outreach is therefore the most important early activity of a victim service center.

1. Contact with institutions: Wherever a Victim Center is housed, early planning stages should involve every element on which it will depend. Input should go beyond city and county agencies to community service groups, existing crisis centers, and even the business community.

2. Contact with victims involves outreach, unless the program is consciously limited to those who report crimes and are referred through the reporting process to the Victim Center. Even then, locating a victim who is no longer at police headquarters can be a hard afternoon's work. On-going centers make contact in many ways -- through hospital records, police reports, social-service agency referral, victim compensation boards, neighbors and ex-victims. Publicity is necessary -- but posters and ads over inner-city oriented radio stations have been tried as well as television shows and straight news coverage. Police can distribute the Center's telephone number and address. Community volunteers and word-of-mouth may be the most effective as programs develop. Where appropriate, publicity should be produced in languages other than English. Exactly what works best has yet to be established, but victims must be made aware that the service exists.

3. Contact with the media is a two-edged sword: Victim Service Centers need publicity. Victims need privacy. An important function of the Victim Center may be to provide the media with basic information about crime and its impact on individuals in such a way that no personal details are revealed. Courts are increasingly upholding a victim's right to privacy -- the right, for example, not to have one's address and name printed as a rape victim or as a hospitalized assault victim whose apartment is empty and vulnerable. Victim advocates should further this concern for privacy and safety.

Research and Follow-up: The Privacy Issue

The importance of both research and follow-up has already been discussed. What must be emphasized every step of the way, however, is the victim's right to privacy. Records identifying the victim by name and address, describing circumstances of the crime and services needed should be taken only in such detail as is absolutely necessary. If the files are to be kept, they should be translated into anonymous data. In-depth details which are extremely useful for victim research -- such as victim-offender relationship, prior victimization, victim attitudes,

personal problems pre-dating the crime and general personal history -- should be separately collected and filed. There is no need for this data to follow the victim from agency to agency.

The Victim Advocate-victim relationship is not legally a confidential one, but advocates may well hear details that are prejudicial to victims. The advocate's responsibility in such situations is not clear, but it must be primarily to the victim. If victim statements or records are passed on to the police, confidence will evaporate. The Bronx program has, for example, been advised by the District Attorney that its records can be subpoenaed for purposes of impeaching a recalcitrant witness. Although no subpoena has ever been issued, the privacy issue is recognized as a real problem.

A FINAL ISSUE: HOW MUCH ADVOCACY?

If the service-delivery system were fully doing its job, the need for victim advocates would probably disappear. Much of the Victim Center's work will be sensitizing agencies and communities to victim problems. Inevitably, however, sensitivity will not suffice. Agencies have limited budgets; police and courts have procedural roots going back hundreds of years. Court rules, evidentiary demands and witness treatment are not going to change rapidly. Frustrated by the roadblocks of one-by-one advocacy, Victim Centers are going to be drawn into lobbying for institutional change and the institutions are not always going to welcome such pressures. Use of volunteers in victim services will have a similar impact: volunteers in courts and corrections have become a real pressure group for reform. These tensions should be anticipated and channelled, and this is another important role of county leadership. Rather than pulling the service community apart, victim advocacy can be an enormously constructive force for broader services and more effective delivery.

SUMMARY

Integrated services to victims of crime can be a working reality. In communities where service centers exist, they enjoy universal support. But each has had to overcome inertia, role confusion, community wariness and agency defensiveness. Careful preparation and planning can reduce much of the adjustment tension.

Once begun, the Centers can give crime victims a share of the services that have already been offered to offenders. A victim need only contact one office to get professional and volunteer assistance. He need not go from agency to agency in confusion, and the agencies are better prepared to meet his needs. Counties can take the initiative to integrate services they already provide, and extend them to victims of crime.

Appendix B (cont'd):

Parental Stress Service
Ms. Carol Johnston
P.O. Box 9266
Berkeley, California 94709

County of San Diego Probation
Department
Bev DiGregorio, Coordinator of
Volunteer Services
P.O. Box 23096
San Diego, California 92123

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