

An Evaluation of Victim Advocacy Within a Team Approach

By Arlene N. Weisz, David Canales-Portalatin, and Neva Nahan

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Arlene N. Weisz, Ph.D., is with the School of Social Work at Wayne State University. David Canales-Portalatin, Ph.D., MSW, is with the Latino Family Services, Detroit, Michigan. Neva Nahan, M.S., is with the School of Social Work at Wayne State University.

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In response to the scarcity of published research about advocacy services for battered women (Edleson 1993; Weisz, Tolman, and Bennett 1998) and about services for African-American battered women (Buzawa and Buzawa 1990; Coley and Beckett 1988; Pinn and Chunko 1997; Sullivan and Rumpitz 1994), this study evaluated advocacy services for battered women in Detroit. Although the study focused primarily on advocacy services provided by the police department and the prosecutor's office, other aspects of coordinated community responses to domestic violence were also investigated. Advocacy was defined as services provided to support victims during the legal process or to enhance their safety. The researchers chose to focus on advocacy partly in response to a police department supervisor's question, "How do we know that the advocates are doing any good?"

Description of the Collaboration

Because the lieutenant in charge of Detroit's Domestic Violence Unit initiated the evaluation, the stage was set for collaboration between researchers and practitioners. In addition, the researchers had previous relationships with several of the collaborating organizations. To accommodate advocates' schedules, the researchers also held several meetings in advocates' offices.

Six meetings were held with the researchers and representatives of the Detroit Police Department, the Rape Counseling Center, the Wayne County Prosecutor's Office, and the domestic violence programs that employed the legal advocates. The average attendance was 12 people. These meetings enabled researchers to monitor and improve their collaboration and data gathering process and to clarify the complex procedures for handling domestic violence cases in Detroit. The meetings also enabled researchers to monitor the usefulness of their data for practitioners.

Researchers included the telephone interviewers in one meeting to help advocates feel more comfortable with how the surveys might affect their clients. Practitioners helped researchers to ensure the welfare of the women studied by developing a way for phone interviewers to contact victims safely without revealing the purpose of the call to anyone else. A newsletter was also developed and sent to collaborators before each subsequent meeting.

Research Questions

The evaluation used official records to address questions that were important to criminal justice personnel. It investigated whether advocacy at the precinct and/or prosecutor's level was associated with a higher rate of completed prosecution of batterers, a higher rate of guilty findings against batterers (or guilty pleas), or decreased rates of subsequent violence. The evaluation also addressed victims' assessment of safety, their views of how the criminal justice process met their needs, and help-seeking patterns.

Methods

The project was a quasi-experimental comparison of cases originating in precincts with and without special police domestic violence teams that include advocates. Researchers gathered a

random sample of police incident reports (PCRs) from three precincts with domestic violence teams. They selected two comparison precincts that were not served by domestic violence teams but closely resembled the precincts with teams. They gathered 563 PCRs from precincts with onsite advocates and 494 from precincts without onsite advocates, for a total of 1,057.

The sample differed from many studies of women in shelters or of partners of men charged with domestic violence in that researchers focused on women named as victims in police reports, the vast majority of whom were African-American. Most of the couples had never been married.

Researchers also examined the effectiveness of advocacy associated with the prosecutor's office. Telephone interviews with victims provided data about victims' perceptions of services and their help-seeking patterns. Researchers also conducted process evaluations, which documented who was involved, what processes were established to deliver the intervention, what problems or issues arose during implementation, how problems were resolved or interventions were adjusted, and how implementers assessed the process.

The domestic violence teams participating in the study included specially trained police officers, police department advocates, legal advocates and, in one precinct, an onsite prosecutor. Three types of advocates assisted victims by offering information about the legal system, referrals, and safety planning. Police precinct advocates, employed by the Detroit Police Department, worked with victims who walked into the precincts and contacted by telephone victims named on police reports. The precinct legal advocates, employed by local domestic violence programs, worked in two precincts and focused primarily on helping women obtain protective orders. The advocates did not do telephone outreach. The county prosecutor's office employed advocates to work with victims coming in for warrant interviews with prosecutors and provided support to victims in court during prosecution.

A team of trained, experienced, female African-American interviewers administered three questionnaires developed by the researchers. The team completed 242 initial interviews from the PCR sample, for a response rate of 22.8 percent. Six months later, they completed 63 followup interviews of women who were interviewed initially and 23 interviews of women not reached initially. The survey instruments inquired in detail about the police, advocates, and prosecution services that victims received related to the focal incident; previous incidents of violence between the respondent and the man who abused her during the focal incident; and why victims felt services were or were not helpful.

As a measure of recidivism, researchers continued to collect police incident reports from the five precincts for 6 months after the intake of their last focal PCR. Researchers were unable to gain access to advocates' records about contacts they had with victims, so advocates were given a "contact form" to fill out after contact with a victim. However, the advocates did not consistently fill out these forms. Researchers conducted a computer search about the outcomes of the cases stemming from the focal police incident reports.

Findings

African-American women were by far the largest group of victims (96 percent) named on the 1,057 focal incident police reports. Although 81.2 percent of Detroit's population is African-American (Hill 2001), a disproportionate number of African-American women appeared as victims in these police reports. Only a small proportion of the sample were currently or formerly married (24.8 percent). Researchers coded the majority of initial and subsequent police reports as severe physical or sexual violence (81.6 percent). One hundred and twenty women (11.3 percent of the sample) were involved as victims on one or more subsequent PCRs.

Twenty-three percent of the victims identified in the police report sample (242 women) were interviewed initially. Ninety-seven percent of the respondents were African-American. Fifty-four percent of respondents were employed, but their annual household income was low, with only 14.1 percent having an income of more than \$30,000 per year. Only 24 percent of the respondents were married.

Women who were interviewed were significantly less likely than noninterviewed women to report that they experienced severe physical violence during the focal incident ($\chi^2 = 17.32$ [3, $n = 963$] $p = .001$) or to be living with partners ($\chi^2 = 17.56$ [3, $n = 982$] $p = .001$). Interviewees were significantly more likely to be African-American ($\chi^2 = 4.39$ [1, $n = 1026$] $p = .036$) and to have a child with the perpetrator than noninterviewees were ($\chi^2 = 8.63$ [2, $n = 983$] $p = .013$).

Because advocates substantially underreported their services on the contact sheets, interviewees' and advocates' reports of advocacy services were combined to develop the best proximal count. Twenty-four percent of the 1,057 women received some type of advocacy, and 4 percent had contact with at least two types of advocates. Women who received any advocacy were more likely to have focal police reports that reported severe physical abuse ($\chi^2 = 8.87$ [3, $n = 963$] $p = .031$), and African-American women were more likely to receive advocacy than European-American women were ($\chi^2 = 6.84$ [1, $n = 1026$] $p = .009$). Women who were currently married were significantly less likely to see an advocate ($\chi^2 = 6.88$ [2, $n = 976$] $p = .032$).

All three types of advocates gave women information about protective orders, but followup rates were low. The initial interviews suggest that precinct and prosecutor's advocates did not help all women plan for their safety, even when those women experienced severe physical violence during the focal incident. Advocates made referrals for other services to 29 women, and 8 women (27.5 percent) followed up on those referrals.

According to the police reports, arrests occurred in 313 cases (30 percent of the 1,057 police incident reports), and a warrant was issued in 148 cases (14 percent). The rate of issuance of warrants and the proportion of arrests resulting in warrants did not differ significantly between precincts with and without domestic violence teams. Receiving advocacy services, especially from the prosecutor's office, was associated with issuing a warrant ($\chi^2 = 79.53$ [1, $n = 1056$] $p = .000$).

One hundred and thirty-five of the initial interviewees (64.9 percent) said they thought it was a good idea for the prosecutor to press charges against their partners. The most common reasons

for favoring prosecution were that the partner's behavior was illegal and not acceptable and that abusers should not violate or touch women. The most common reasons for opposing prosecution were that the woman believed the incident was not serious or that this was the first time her partner was violent.

There were 102 perpetrators charged with misdemeanors (9.6 percent of total PCR sample) and 46 charged with felonies (4.4 percent). Forty-six percent of all resolved prosecutions resulted in a guilty plea or a verdict of guilty after a trial. Cases from precincts with domestic violence teams or in which victims received advocacy services were no more likely to result in a guilty verdict or plea than others.

Forty-nine cases (41 percent of the total completed cases) were dismissed. Thirty-five of the dismissed cases (29 percent of the resolved cases) were noted as "witness failed to appear." There was no association between receiving advocacy and the reasons why cases were dismissed. There were no significant associations between guilty pleas or verdicts, reasons for dismissal, and a woman's positive response toward prosecution in the first interview.

Because almost all subsequent incidents involved severe physical violence or sexual assault, researchers used the presence or absence of any subsequent police reports as the outcome variable in analyses of recidivism. There was no relationship between whether victims came from precincts with or without domestic violence teams or received advocacy and whether there was a subsequent police report.

Overall, between 60 and 100 percent of interviewees rated all three types of advocates as very helpful or somewhat helpful. The most common reasons women rated advocates as helpful were that they received information, were emotionally supported, and believed advocates actively did something to help. Women who gave advocates low helpfulness ratings (between 20 and 40 percent) described them as not doing enough, unavailable, unsympathetic, or not giving enough information.

According to the interviewees, police officers from domestic violence team precincts and comparison precincts did not differ significantly in their responses to the focal incidents, and interviewees reported high levels of satisfaction with police from all precincts. The most common reasons for satisfaction were that the police "did their job," stopped the violence, or removed the abuser. Women who were not very satisfied with the police most commonly believed that the officers did not do enough to help them or did not come fast enough.

Interviewees were asked separate questions about whether they received each of several potential forms of help from their contact with the criminal justice system. Using only the first interview because it had the most respondents, 41.7 percent of the 242 interviewees reported that the criminal justice system did not do any of the following: decrease abuse, help them leave their partners, keep the abuser away from them, or give them information or referrals. The most common ways the criminal justice system did help were to decrease abuse (32.6 percent) and help the respondent leave her partner (27.7 percent). Satisfaction with the criminal justice system at the second interview was not associated with whether the victim received advocacy, but it was associated with issuance of a warrant for the focal incident ($\chi^2 = 8.67 [2, n = 60] p = .013$).

Implications for Researchers

This study's somewhat low interview response rate may have been because many women in Detroit do not have telephones, many move often, and some give police false telephone numbers. Researchers could not pay victims for interviews because the prosecutor was concerned that abusers' attorneys might use those payments to undermine prosecution. However, the sample's demographics suggest that telephone interviews, if carefully and sensitively done, represent a promising method of obtaining the views of battered women who are underrepresented in research.

Because they were based partly on advocates' underreporting, the findings that advocacy did not affect victims' safety or participation in prosecution may be erroneous. Researchers were only able to interview women who could be reached by telephone. Although many interviewees viewed the interview as rewarding in itself, financial incentives are probably necessary to encourage interviewees to keep researchers informed about correct contact information. Researchers were not able to investigate whether advocacy provided by domestic violence programs is more victim centered and effective than advocacy sponsored by police or prosecutors. Another weakness was the lack of knowledge of the prior criminal histories of the offenders, because the criminal justice system, victims, and abusers all respond differently when there is a prior criminal history. Interviewees were not asked directly about the role of culture or about their concerns for their children in their assessment of their situations and of advocacy. Women also were not asked why they did or did not follow up on advocates' referrals.

Implications for Practitioners

A number of women had contact with more than one type of advocate, which might be viewed as an overlap and lack of coordination of services. Alternatively, it may be advantageous for victims to have access to more than one kind of advocate, because some advocates have specialized knowledge, and a woman in crisis might not absorb information the first time she hears it.

Because women who received advocacy services were more likely to experience severe violence during the focal incident than women who did not, advocates might have been effective in their outreach to women who needed their services the most. It also might mean that women who experienced the most severe violence were more eager for help. Advocates suggested that a possible reason African-American women were more likely to receive advocacy services than European-American women is that European-American battered women in Detroit may have more resources and do not have to rely on advocacy for help. However, no data support this explanation. Women who were married were less likely to receive advocacy services than unmarried women, possibly because they were afraid to talk to advocates or had a stronger investment in maintaining the marriage without seeking help.

Safety planning is intended as a large portion of advocates' jobs, but many interviewees who said they needed help with safety planning did not remember that advocates helped them with it. This is a serious gap in services because advocates might have effective safety planning ideas that are new to victims. Interviewees also reported low rates of followup on advocates' referrals. They

might not have believed the referrals would meet their needs, or they might have been afraid to contact the resources provided. Practical burdens, like childcare and financial difficulties, might also lead to a lack of followup on referrals.

The research suggests that further training of officers or increased advocacy for victims is needed if domestic violence units want to increase the number of prosecutions. Officers might be trained to increase their rapport with victims or to discuss more thoroughly the importance of appearing for a warrant interview. If advocates are able to engage victims successfully soon after the incident and provide meaningful safety options, they might encourage victims to appear for warrant interviews.

Interpreting the lack of association between advocacy and recidivism is a complex task. Women who receive advocacy services may call the police more often, because advocacy increases their trust in the legal system. Because there were no associations between arrests, warrants, or protection orders and rates of subsequent PCRs, the social class and usually unmarried status of the abusers might have contributed to a sense that they had little to lose if the legal system intervened.

Victims' high level of satisfaction with advocacy suggests that victims may interpret the provision of advocacy as a sign that the legal system is concerned about them. After a history of being overlooked or mistreated by the criminal justice system, African-American women may be grateful for any legal advocacy that is both accessible and culturally sensitive.

The process evaluation yielded a recommendation to establish a common information system to share records about victims among advocates. Program administrators articulated the need to expand police advocacy services to cover the entire city so that all victims can have access to advocacy at the point of entry into the system. Another approach would be to increase funding to domestic violence programs so that they could hire advocates who would do outreach to victims. Advocates pointed out that their services would benefit from having private counseling space, childcare, and child supplies (e.g., diapers), as well as clerical support.

The research suggests that special domestic violence teams and advocacy as they exist in Detroit are not sufficient to overcome the multiple vulnerabilities of battered women when they lack economic resources and may have had a history of painful interactions with the police and social service agencies. Instituting new programs is not a panacea if the programs do not have the resources to make a difference. First, researchers and practitioners must learn from battered women what would make a difference. Then realistic program planning and coordination must take place. For women with multiple needs, like many women in Detroit, services clearly must be intensive and sensitive to cultural and economic issues. Training should focus on increasing the service providers' awareness of these multiple needs.

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