From the Perspective of Diverse Users: Evaluation Results of the City of Chicago Domestic Violence Help Line funded by the National Institute of Justice and conducted by the Mayor’s Office on Domestic Violence and the Center for Urban Research and Learning. 3/2006. The Full Technical Report is available at: www.cityofchicago.org/domesticviolence or www.luc.edu/curl

**Domestic Violence Service Provider Interviews**

**Key Findings**

**The Help Line works as an important tool in linking victims to resources**

- 92% found the Help Line useful or very useful

**High marks to the Help Line for accessibility and quality of information**

- The toll-free number is simple, easy to memorize, and available 24 hours
- Up-to-date information about a wide range of services
- It’s an efficient way for a victim to find a shelter
- VIRAS are “great staff” who are both “knowledgeable” and “sensitive”

**The majority find having one centralized number a key feature**

- 90% rated this feature useful or very useful
- Less than 10% rated it somewhat or not useful

“It is helpful to have one central number that is well publicized, that police can give out. But the interaction (with the VIRAs) has to be comforting and just as helpful, because sometimes it’s really difficult to make the phone call in the first place.” – A Provider Interviewee

**Service Providers Make Referrals to the Help Line**

- 82% reported making referrals to the Help Line, averaging 18 per month
- Most found making referrals very easy, average rating 1.23 (1=very easy)
- 83% who worked in the field prior to the Help Line reported that making referrals is easier now than before the Help Line existed

**Service Providers Receive Referrals from the Help Line**

- Providers reported that their agencies received anywhere from 0 to 300 referrals from the Help Line per month, averaging 20 referrals/month across all agencies
- Most reported that receiving referrals was not difficult. Average rating 1.61 (1= not difficult at all)

**The Help Line Assists Service Providers to Extend their Own Resources**

Over half of the providers use the Help Line for services beyond receiving and making referrals, such as:
- Getting updated and current general information about availability of other services
- Getting information on citywide shelter bed availability, and geographic locations of agencies
- Using the Help Line language line when there are no staff or volunteers available who can meet the language needs of a particular client

**Additional Suggestions about the Help Line**

- Maintain and expand advertising and outreach about the Help Line and domestic violence
- Ensure information about community provider agency services is current
- Continue updating shelter bed availability
- Develop alternative feedback loop for referral reports between community providers and Help Line

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**The Study**

In 2005, 74 staff from 55 Chicago area domestic violence service provider agencies participated in a telephone interview with a CURL researcher.

**Services provided by Interviewed Agencies**

- 75% walk-in counseling
- 77% crisis counseling
- 59% legal advocacy
- 20% legal services
- 24% shelter

**Staff Interviewed**

- 57% Program-staff (e.g. Case Worker, Counselor, Intake Coordinator);
- 31% Program Directors
- 7% Executive Directors
- 5% other administrative

All interviewed had first-hand knowledge of the Help Line.
Provider's examples of particular difficulties that victims in various circumstances face

**Victims who don’t speak English**
- Lack of translators in various systems that victims have to navigate
- Fear of and difficulty with immigration system

**Victims who have physical disabilities**
- Some agencies/shelters’ sites not accessible
- Difficult to flee from an unsafe situation

**Victims who have mental disabilities**
- Agencies may not have the training to provide the expertise needed to serve victims who also have mental health issues
- In particular, shelters may not be able to provide the “higher level of care” required to serve and support individuals with mental disabilities

**Victims who are LGBT**
- Lack of specific services: Victims not always feeling comfortable and safe or feeling isolated and “different”
- Discrimination: Some court personnel and providers in the DV community still hold negative attitudes towards LGBT clients

**Victims who are elderly**
- Limited financial or physical autonomy
- Isolation; referred to as “the hidden group”

**Victims who are under 18**
- The need for parental consent to receive services
- Youths’ denial that they are experiencing abuse

**Victims who have dependent children**
- Difficulty in finding placement for women with very young babies, large families and/or boys over 12
- Lack of childcare: Difficult for victims to follow-up with appointments, or to seek employment opportunities

**Victims who are ethnic/racial minorities**
- Victims feeling that they are not understood or accepted by staff or other victims
- Immigrant victims being unfamiliar with social systems and not knowing what resources are available

**Victims who are males**
- Lack of specific services
- Being taken seriously: Sometimes have to “jump through extra hoops” to prove they’re victims

**Victims who are substance-addicted**
- Disconnect between Substance Abuse and Domestic Violence Service Providers
- Abstinence based shelter system
- Limited treatment options

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