

# DATA REPORT: STATE OF DOMESTIC VIOLENCE IN ILLINOIS

June 2020



**The Network**  
ADVOCATING AGAINST  
DOMESTIC VIOLENCE

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# EXECUTIVE SUMMARY

## The Prevalence of Domestic Violence



There were 10,095 domestic violence related arrests made by the Chicago Police Department in 2019. [1]



There were 2,458 domestic violence related incidents documented by the Cook County Sheriff's Office in 2019. [2]



In 2019 39,500 Illinois survivors received various domestic violence related services. [3]



In 2019 there were 193,800 domestic violence related calls made to the Chicago Police Department and 24,400 calls made to the Illinois Domestic Violence Hotline. [4]

## Domestic Violence in Court



In 2019 51% of felony domestic battery charges were dismissed. [7]



In 2019 only 6% of defendants being tried for a domestic violence felony battery charge were found guilty, while 40% of defendants being tried for a domestic violence battery felony had their charges downgraded to a lesser felony offense. [7]



86% of women currently incarcerated have experienced sexual violence pre-incarceration, and 77% of women currently incarcerated have experienced intimate partner violence pre-incarceration. [8]

## Housing



In 2019, there were 14 days with no shelter beds available in Chicago and 19 days with only 1 bed available. [12]



Of those who visited service providers in 2019, 45% were seeking permanent housing, of which 67% did not receive housing. [13]

## The Lethality of Domestic Violence



In 2019 there were 38 domestic violence related shootings documented by the Chicago Police Department. [5]



In 2019 there were 28 domestic violence related homicides documented by the Chicago Police Department. [6]

## Who Experiences Domestic Violence



Although domestic violence is experienced by people of all socio-economic statuses, 40% of the clients served in Illinois can be classified as having a low-socioeconomic status. [9]



Although domestic violence is experienced by all gender identities, 94.9% of calls made to the Illinois Domestic Violence Hotline in 2019 were made by cis-gender women. [10]



Although domestic violence is experienced by all races and ethnicities, in 2019 the highest percentage of callers to the Illinois Domestic Violence Hotline identified as Black. [11]

## Survivors and Families Turned Away From Services



In 2019, 4,033 adults and 4,018 children were turned away from a domestic violence service provider [14].

## Recommendations



Policies and services need to address the systemic inequalities impacting survivors including race/ethnicity and socio-economic status.



Services for survivors must be improved including individualized service models, the implementation of harm reduction models such as firearm removal, and ensuring that survivors have a voice throughout court proceedings.



Service providers must receive continuous, and often increased, levels of funding and collaborative prevention efforts must be formed if we wish to see an end to domestic violence.

# INTRODUCTION

The Network: Advocating Against Domestic Violence (The Network) is a coalition of over 30 diverse organizations that provide domestic violence-related services in the Chicago metropolitan area. The Network is dedicated to improving the lives of those impacted by domestic violence through education, public policy and advocacy, and the connection of community members to direct service providers.

This report began as The Domestic Violence Outcome Measures Project (DVOM). This project was created to evaluate services provided to survivors and measure the outcomes of those who have received services. Working with our member agencies and Loyola University, the Network developed a survey given to survivors. The Network published a report of this survey in 2016. The Network has since revised the survey and continues to administer the survey to survivors. Member agency staff recruited participants and conducted the surveys after three months.

The DVOM paints only a limited picture of domestic violence in Illinois. This report seeks to expand on that picture. The report begins with an overview of trends in criminal justice data relating to the prevalence and severity of domestic violence. It is followed by an analysis of service provision to survivors, examining the characteristics of those requesting service and the state's ability to meet the need. This section highlights what services survivors are seeking the most. Next, the report provides a brief glimpse into public health data relating to domestic violence accompanied by a discussion of the importance of this data and how to better obtain it. The report then discusses areas for future research followed by our recommendations to better address domestic violence in the state of Illinois.

The Network will continue to develop and grow this report as an annual publication. We will continue to grow our data collection methods and expand on the information we provide in hopes of providing a comprehensive overview of the prevalence of domestic violence and experience for survivors in our state.

# METHODS

The data analyses conducted throughout the report draws on data collected from the Chicago Police Department, Cook County Sheriff's Office, Cook County State's Attorney's Office, Illinois State Domestic Violence Hotline, Infonet, Cook County Department of Health, the Domestic Violence Outcome Measures Report (DVOM), and secondhand data from relevant studies. Each source is cited throughout the report where appropriate and detailed notes regarding the collection processes are noted in the relevant sections. Below is a brief overview of the collection and analysis procedures.

**Data from state agencies:** Data was collected through online portals and Freedom of Information Act Requests depending on availability. Restrictions on collection occurred due to a short time frame for data collection and analysis in conjunction with limited data availability.

**Hotline Data:** The Network operates the Illinois Domestic Violence Hotline in partnership with the City of Chicago's Department of Family and Support Services and the State of Illinois. Network staff reviewed all relevant data for this report. The hotline data is collected by Victim Information Resource Advocates while on calls utilizing iCarol, a web-based hotline software. As the safety and security of survivors is the first priority on any call, many questions will go unanswered. Additionally, survivors are never required to answer demographic questions. These procedures limit the data available for analysis.

**Survey Data:** Survey data and survivor stories comes from the DVOM. 20 individuals completed surveys after receiving services from one of four domestic violence agencies. Due to the limited data provided, this information is used to supplement trends seen in other data. Some of these surveys were utilized for developing survivor stories that are integrated throughout this report.

**Additional Resources:** Data was also gathered from local and national reports to supplement the primary data.

Analysis of quantitative data included in this report was conducted by Network staff using Microsoft Excel and the statistical software, R. Visuals included throughout this report were developed by Network staff utilizing Power BI and by Loyola researchers. Many of the graphic displays of data begin at points higher than zero to allow the reader to more easily visualize trends in the data, but the reader should be aware that the trends may be more subtle than they visually appear.

# DEFINITIONS AND LANGUAGE

## **Defining Domestic Violence:**

Domestic Violence as defined by the Office on Violence Against Women includes: “felony or misdemeanor crimes of violence [or abuse] committed by a current or former spouse or intimate partner of the victim, by a person with whom the victim shares a child in common, by a person who is cohabitating with or has cohabitated with the victim as a spouse or intimate partner”. [15] This type of domestic violence is commonly referred to as intimate partner violence (IPV). The Illinois Domestic Violence Act (IDVA), however, uses a more expansive definition of domestic violence. The IDVA protects those who have experienced harm from a family or household member, including "spouses, former spouses, parents, children, stepchildren and other persons related by blood or by present or prior marriage, persons who share or formerly shared a common dwelling, persons who have or allegedly have a child in common, persons who share or allegedly share a blood relationship through a child, persons who have or have had a dating or engagement relationship, persons with disabilities and their personal assistants, and caregivers." [16]

Historically relationship violence was viewed as involving two people in a heterosexual marriage, where the person who harms was the husband and the person who was harmed was the wife. The element of cohabitation/marriage within this understanding of relationship violence led to the term “domestic violence”. As society’s understanding of relationship violence has expanded, the term “intimate partner violence” has been adapted to better describe the reality that violence can exist in all types of relationships and the roles of person who harms and person who is harmed are not gender-specific. [17] Since relationship violence is not solely between a male and a female partner with the male acting as the perpetrator of harm, this report will make every effort to use gender-neutral language to better encompass the realities of relationship violence. There still exists stigma against male or non-binary (individuals who do not conform to either male or female gender labels) survivors of relationship violence which can lead to under-reporting, a lack of appropriate resources, and harm occurring in silence.[18]

While The Network focuses on IPV, service providers, law enforcement, and court personnel in Illinois rely on the IDVA definition of domestic violence.

Therefore, data included in this report from these sources will also include incidents and survivors of non-IPV domestic violence.

### **Survivor vs Victim:**

When describing relationship violence, the words victim and survivor are often used interchangeably to describe the person who has experienced this violence. While ultimately it is up to the individual who has experienced harm to decide which word they prefer, the larger domestic violence community has moved towards the use of survivor over victim. This shift is largely due to the connotations of the two words. A victim is seen as a more passive word that describes “someone upon whom an act is committed...[and] has no real say in the matter”. Survivor is a more active word with a connotation of perseverance and ultimately triumph; “being a survivor means living through painful experiences and ultimately growing from them”. [19] For this reason, this report will largely use the term survivor.

### **Someone who Causes Harm:**

Often when working with relationship violence one can hear the words abuser and/or perpetrator being used to describe a person who has harmed someone they have a relationship with. Although this is common vernacular, it strays away from good use of what is called “People First Language”. People First Language puts a person before their actions, and allows their identity to exist as more than their actions. [20] By using the language “a person who harms” instead of “abuser” we give space for people who harm to transform their behaviors, make amends, and become people who do not harm. By calling someone an abuser, that label becomes their identity. It erases that person’s humanity, experience, trauma, and any previous victimization. As this is the case this report will use the phrase people who use harm rather than perpetrator or abuser.



# SURVIVOR STORY: STRUGGLING TO KEEP IT TOGETHER AND BE SAFE



Mary\*, is single mother and a survivor of domestic violence. She is currently receiving counseling services with an agency in the Metropolitan Chicagoland area, and has lost her housing 4 times in the past five years. Various reasons precipitated these losses, including job loss, loss of support from individuals, sale of the rental building she was living in, as well as safety issues including abuse.

Mary has had a tumultuous history of housing instability, and has reported living in many different kinds of housing situations over her lifetime. She was in foster care, has lived with at least 3 family members, doubled up with a friend, lived in a hotel, lived out of a car/van, and in an abandoned building as well as more stable rental housing facilities and a condo. She has not ever ever lived in subsidized or public housing.

Mary is currently renting an apartment and has resided at this location for at least one year. While she reports feeling safe in her apartment, she rates her neighborhood as extremely dangerous, in part because her ex-partner/abuser knows where she lives. In fact, when she initially came to the domestic violence agency for assistance, her car had been damaged—likely by her previous abuser—causing her financial hardship and leading her to feel unsafe. She is still looking for permanent, stable, and safe housing.

Mary and her children are currently living in economically fragile circumstances. In addition to her abuser's property damage and threatening behavior, she had lost her job and had broader financial issues. Her family needed food assistance, which they obtained with the help of the provider. Mary was referred for employment assistance, and despite having a high school diploma, remains unemployed. Additionally, she has unreliable childcare and currently requires assistance paying for this childcare.

While Mary indicated domestic violence counseling and case management support were helpful, she named the unmet need of assistance in navigating communication and custody issues with her ex-partner. Additionally, Mary would like her ex-partner to get counseling. Mary says, “I am working on myself to not be afraid and fight back the best way I can.”

\* This is a pseudonym and this narration and survivor quotes was taken from de-identified case level survey data.

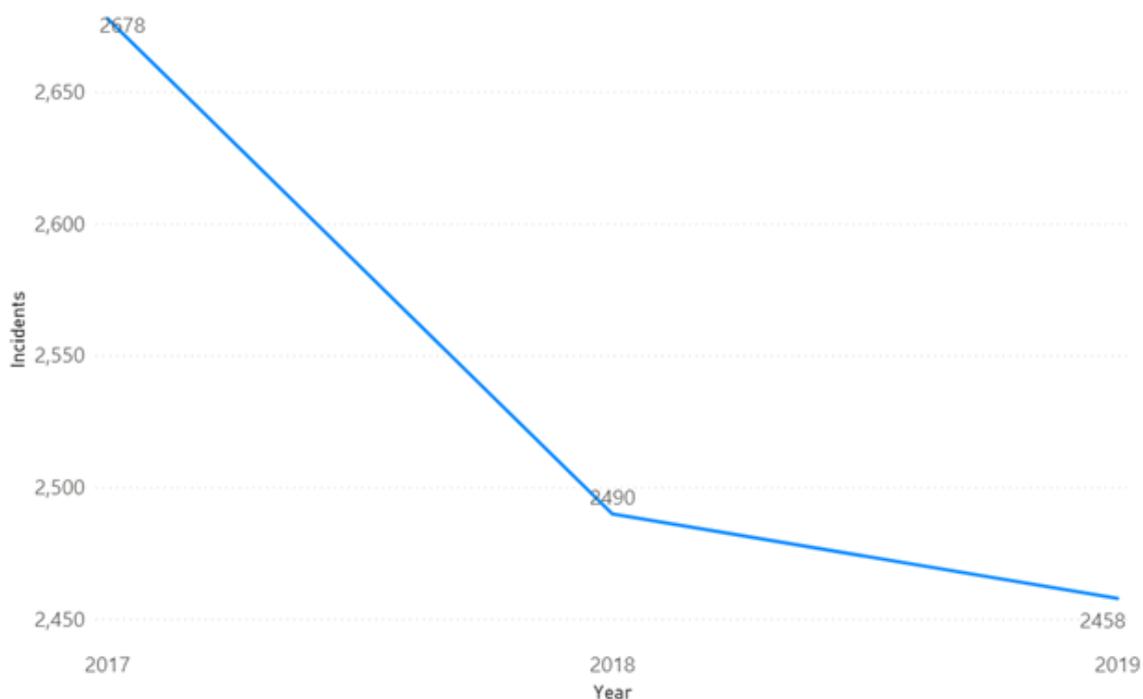
# CRIMINAL AND LEGAL SYSTEMS

## Prevalence of Domestic Violence

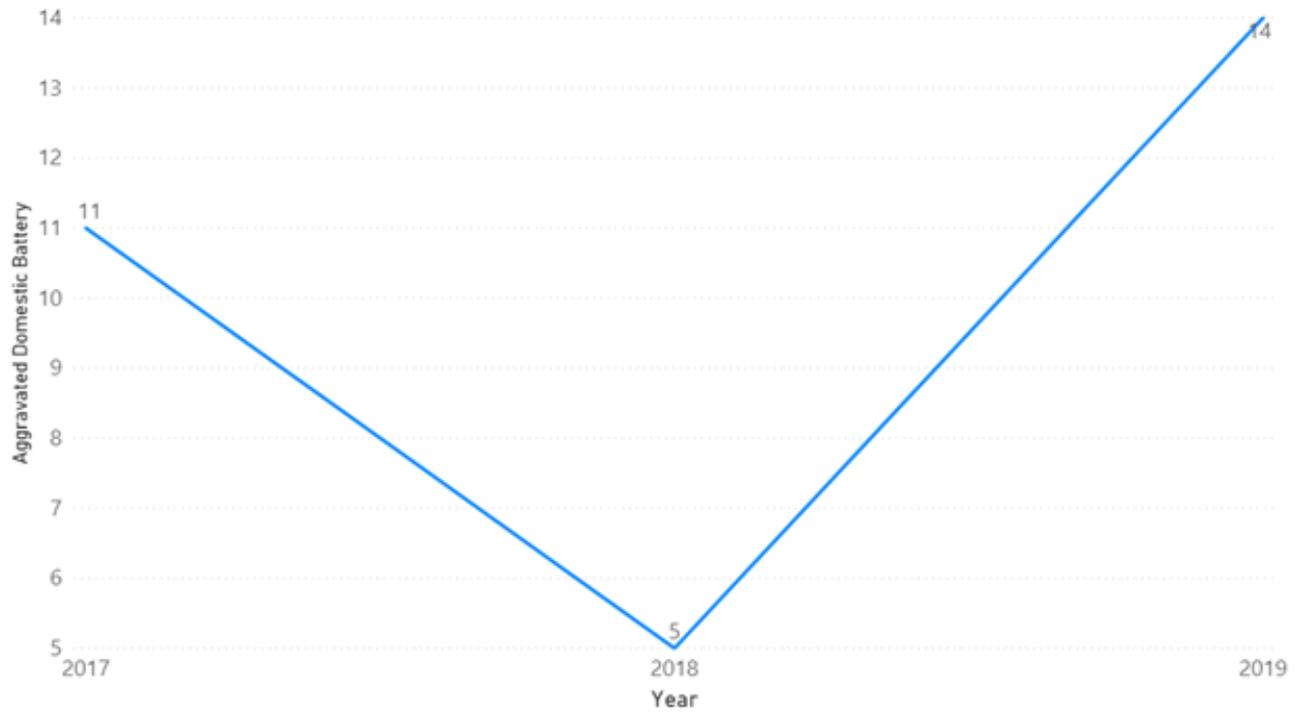
The prevalence of domestic violence is not easily measured, as we know many survivors will never report or seek out services. Ultimately any measures will likely underestimate the true reach of this issue. We include several measures of prevalence throughout the report, but the first relies on data from the Chicago Police Department (CPD) and the Cook County Sheriff's Office (CCSO). This data was collected through FOIA requests submitted to each agency. This data relies on officer determination of an incident as domestic violence. Previous studies have shown that this method is likely to exclude many domestic violence incidents [21]

The data, as displayed graphically on the following pages, show that in 2019 the CCSO reported 2,458 domestic violence incidents, 14 counts of aggravated domestic battery, 606 counts of domestic battery, and 6,291 orders of protection served [22]. CPD reported over 193,000 calls for domestic violence, resulting in over 10,000 arrests.

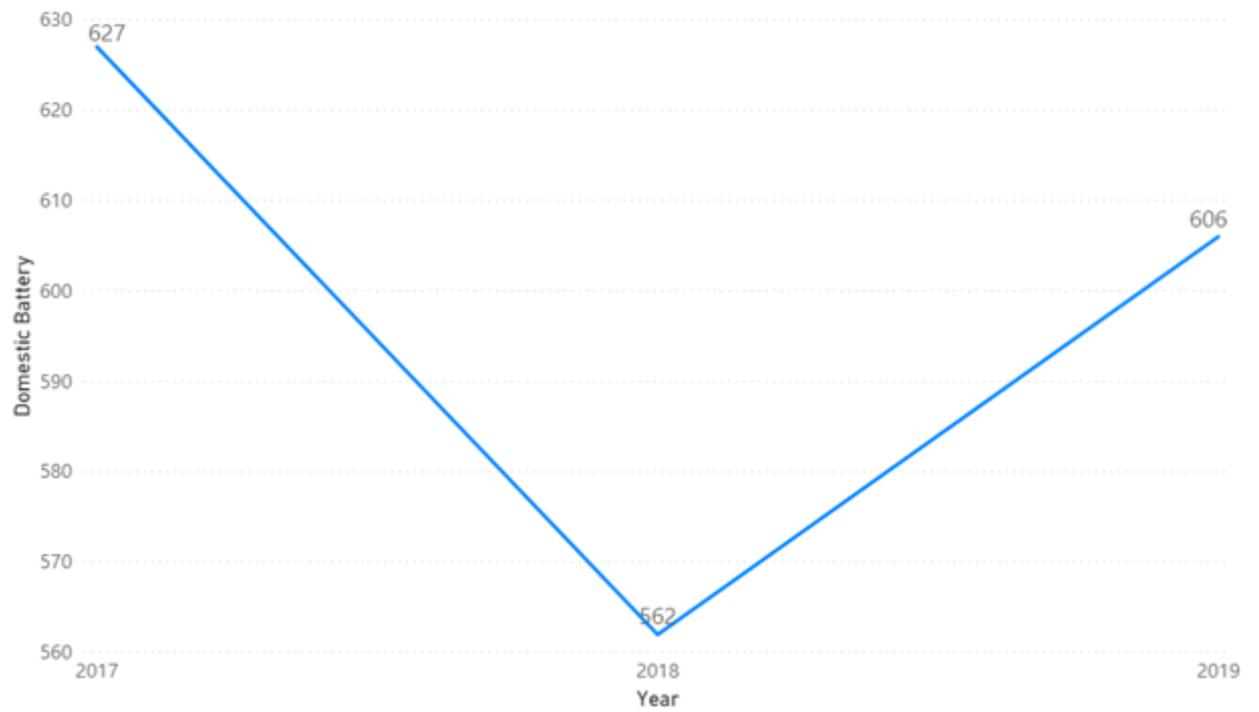
CCSO Domestic Violence Related Incidents by Year



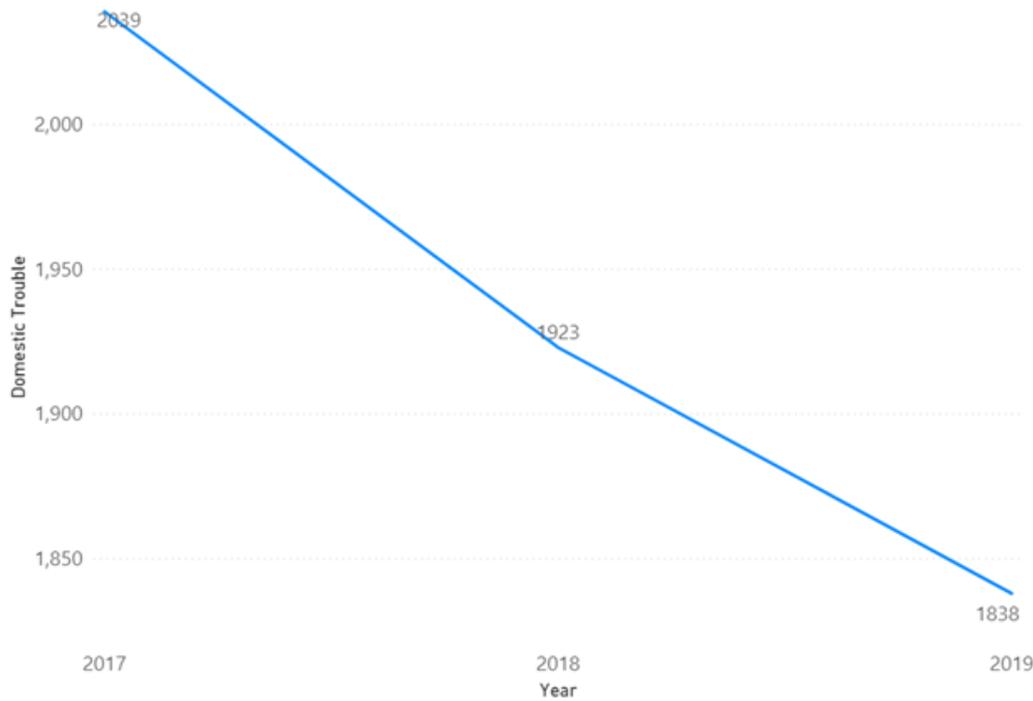
CCSO Aggravated Domestic Battery by Year



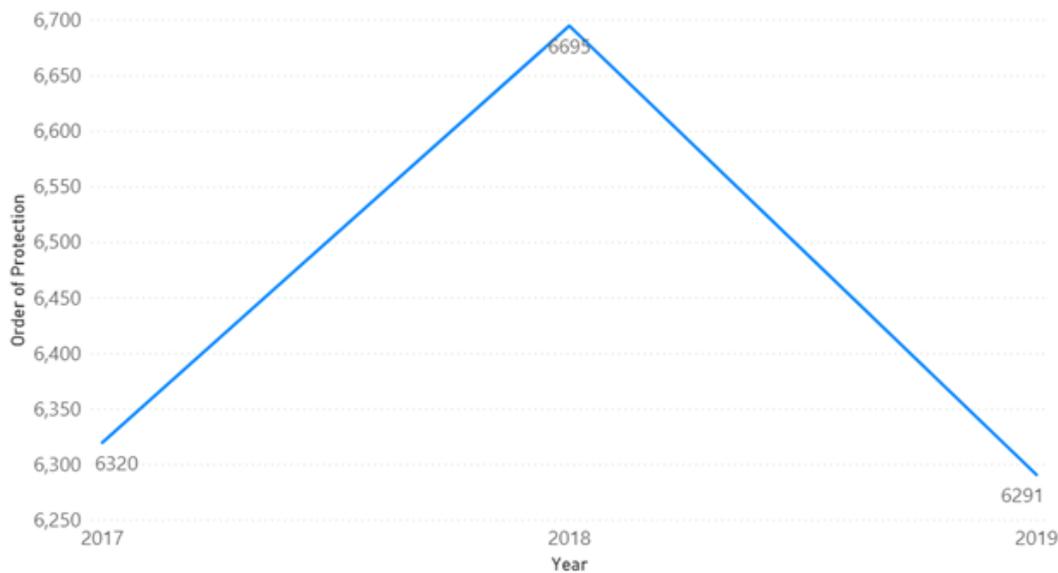
CCSO Domestic Battery by Year



CCSO Domestic Trouble by Year



CCSO Orders of Protection Served by Year

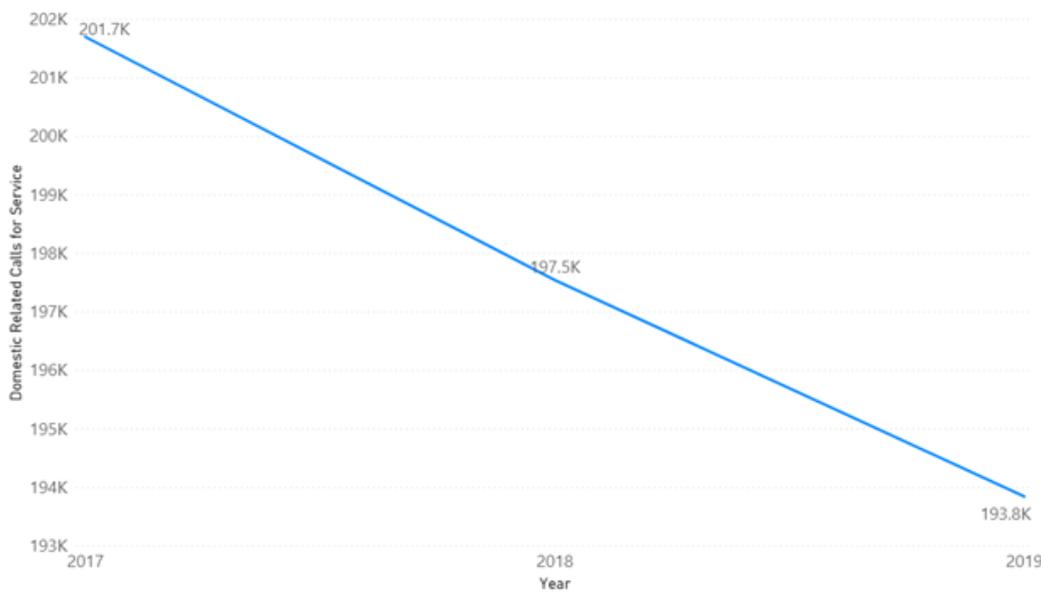


## Orders of Protection [23]:

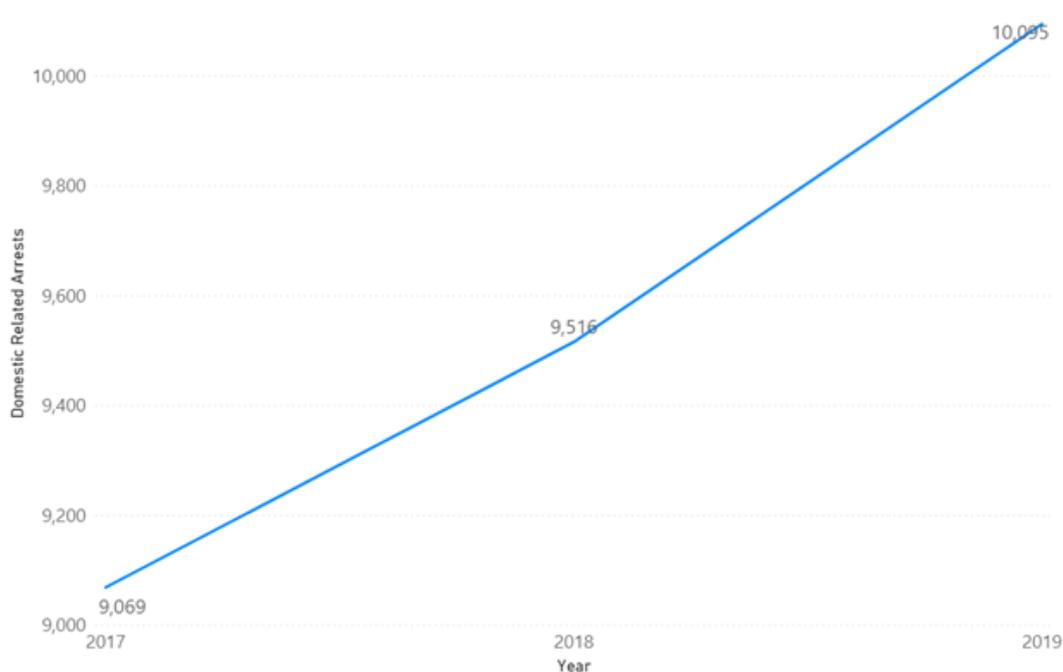
- An Order of Protection (OP) is a court paper that protects its holder from harm caused by anyone related to the holder by blood or marriage, anyone the holder is currently or previously romantically involved with, and anyone who the holder has had a child with.
- In order to get an OP, the petitioner must prove that they were harmed by family or household member.
- An OP can require a person who harms to stop harming a survivor, to stay away from a survivor, to cease contact with the survivor, to vacate or stay away from shared dwellings, attend counseling, and pay child support.
- In Illinois, a survivor can obtain an OP by having an attorney file for one in civil court, personally filing for one at the local circuit court's office, requesting one while filing for divorce, requesting one during a criminal trial, or contacting a local domestic violence agency through the Illinois Domestic Violence Hotline at (877) 863-6339

Since 2017, domestic violence CPD calls have slowly been decreasing. In 2019, there were nearly 8,000 fewer calls, a roughly 4 percent decrease. Comparatively, there has been a slight increase in arrests over recent years. From 2017 to 2019 the number of arrests for domestic violence related incidents increased by over 1,000, approximately 11 percent. [24] There are many factors that impact arrests. The panel to the right describes factors that impact domestic violence arrests nationally, but additional research is needed to determine how these factors influence arrests in Chicago.

CPD Domestic Violence Related Calls for Service by Year



CPD Domestic Violence Related Arrests by Year



### Factors that Impact Calls and Arrests [25]:

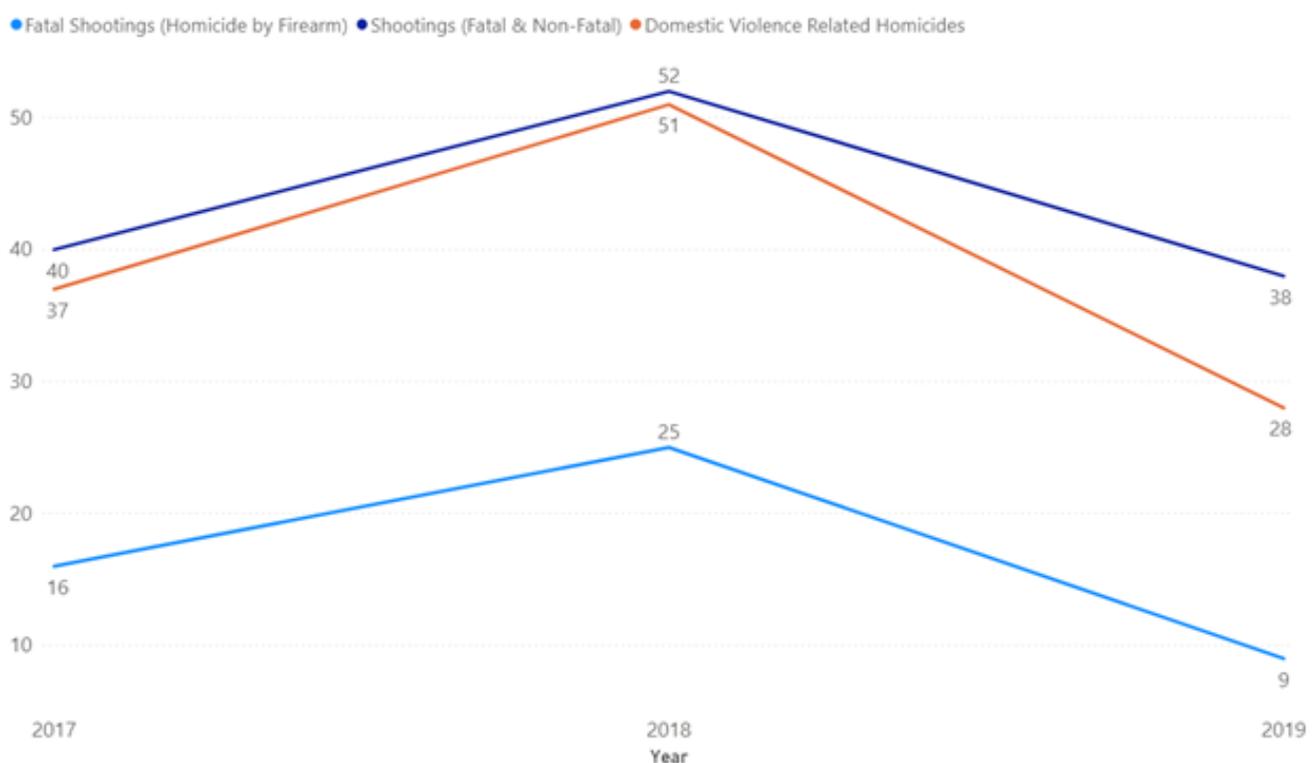
- Nationally, it has been shown that the race and age of a female caller negatively impacts both the police response time and the severity of their actions once on the scene of a domestic violence situation. Young women of color are less likely to be provided assistance quickly or at all, this is especially problematic as these groups are at the highest risk of experiencing harm.
- Police are less likely to arrest cisgender females who harm their cisgender male partners than vice versa.
- The most common reason for cisgender women to harm their cisgender partners is in self-defense, but these women are charged with felony assaults at a higher rate than their male counterparts.
- Police dispatchers are less likely to send officers to a scene if the dispatchers become aware that the caller is a person of color, according to national data.
- Dual arrests (both parties are arrested) are more likely to occur in LGBTQIA+ relationships than in heteronormative ones.

## Severity of Domestic Violence

The severity of domestic violence is not easily determined. There are many factors that must be considered. For our analysis, we focus on markers of lethality and level of injury as provided from CPD, but these are by no means the only measures. These markers are the number of shootings, the number of homicides, and the number of homicides including those not involving firearms. These three measures have stayed at similar levels over the past three years. This indicates that additional work must be done to address the frequent lethality of domestic violence. In 2019, there were 38 shootings, 28 homicides, and 9 homicides by firearm, as shown in the graph below. [26]. These data align with national statistics which shown that on average 3 women die each day due to domestic violence [27].

These data begin to highlight the intersection of gun violence and domestic violence. This intersection, however, goes well beyond what is demonstrated here. National data has shown that the risk of homicide for those experiencing domestic violence is 5 times higher when there is a gun in the home [28].

CPD Domestic Violence Shootings and Homicides by Year

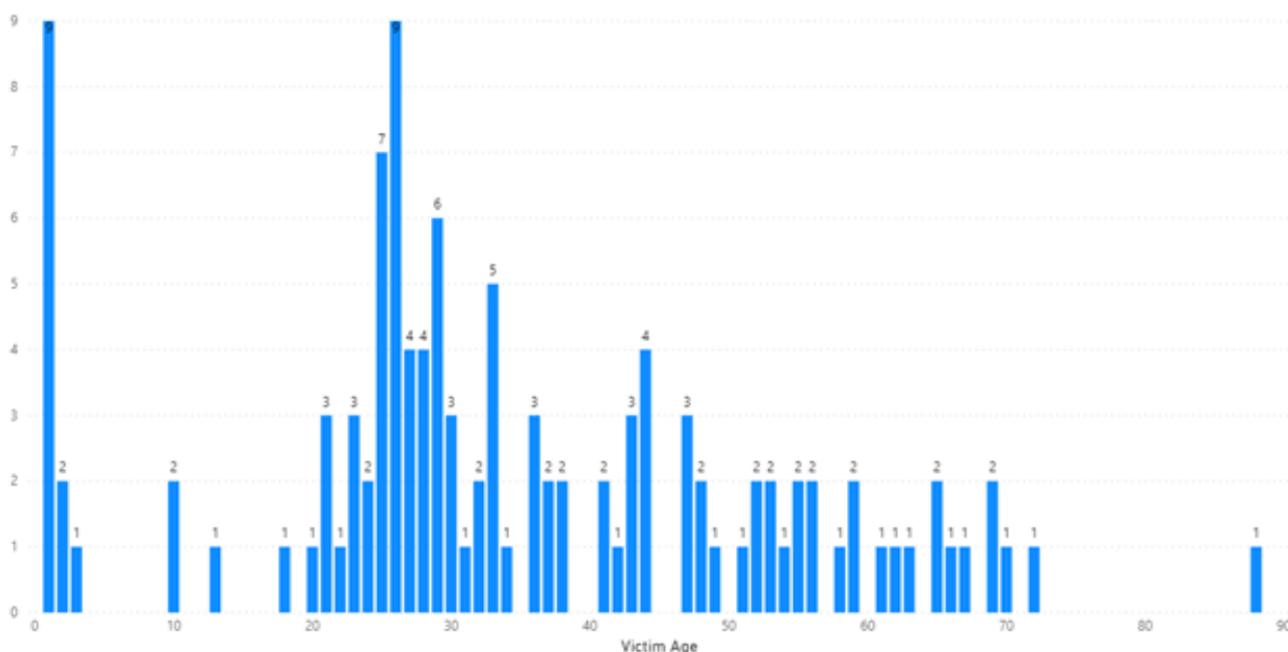


## Who Is Harmed

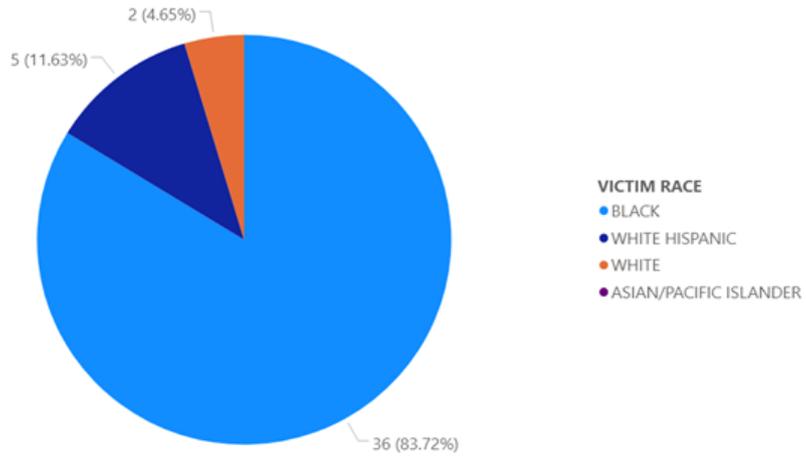
While domestic violence can impact anyone, it does not impact everyone equally. These differences are discussed in depth in the Service Provision section of this report. The following graphs demonstrate the increased likelihood of being a victim of a domestic violence related homicide or shooting based on age and race. Young people are at an increased risk, as are people of color, especially Black people.

These data reflect national data which show that Black women are more likely than their white counterparts to be victims of domestic violence. According to the Institute for Women's Policy Research, 40 percent of black women will experience domestic violence in their lifetimes, compared to 31.5 percent of white women. This difference persists when examining lethality, as black women are 2.5 times more likely to be killed by men than their white counterparts. 56 percent of these cases show that death is caused by a current or former intimate partner [29].

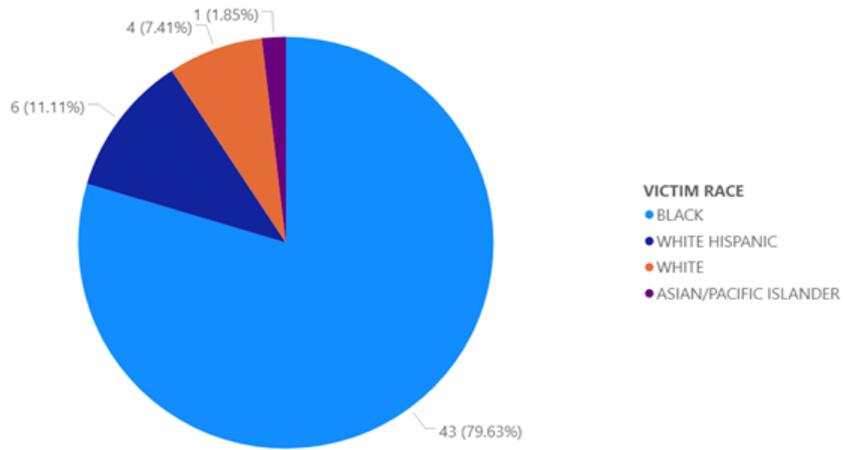
Domestic Violence Homicide Victim Age from CPD Data 2017-2019



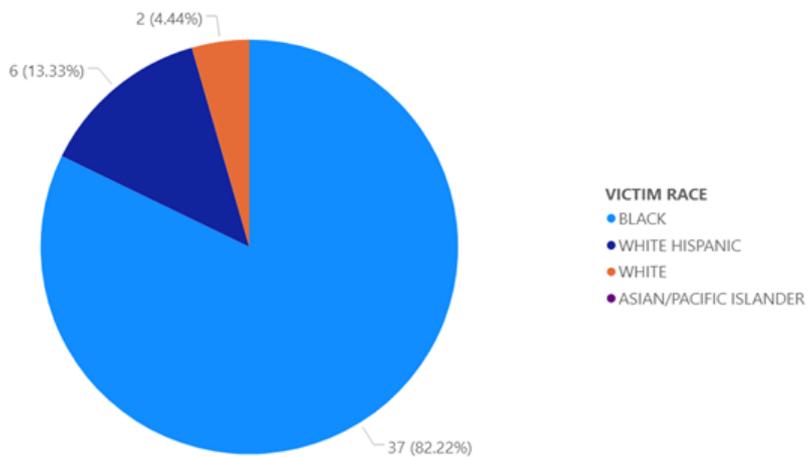
CPD 2017 Domestic Violence Shooting by Race



CPD 2018 Domestic Violence Shooting by Race



CPD 2019 Domestic Violence Shooting by Race





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# SURVIVOR STORY: MOVING TOWARDS HOPE THROUGH SERVICES

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Vanessa\* is a single mother and a survivor of domestic violence. She received services for housing, counseling, and financial issues from various agencies within the Metropolitan Chicago area. She experienced a loss of housing once within the past 5 years because of eviction due to concerns of domestic violence. Vanessa has experienced various transitional living situations in the past, due to concerns for her, and her children's safety. These situations have included emergency homeless shelters, subsidized housing, living with a friend, staying with a family member, a hotel/motel, and permanent supportive housing for the formerly homeless.

Recently Vanessa has found permanent housing with the Chicago Housing Authority (CHA). With this permanent housing, she is no longer living with someone who abuses her and reports feeling safe from violence for her and her children.

Vanessa reports she is doing well after receiving services from the domestic violence agencies. She feels very hopeful about her future and feels more confident about making decisions for herself overall. She has moved forward with her education/training plans, and has identified some ways to help her cope with the impact of domestic violence on her and her children, including receiving counseling services from a DV agency.

Vanessa claims that her current financial situation is adequate enough to support herself and her children. She has received emergency cash assistance from the domestic violence agency and receives an income of \$733 from social security. She also has access to food stamps and a SNAP card for herself and her family.

\* This is a pseudonym and this narration was constructed from de-identified case level survey data.

## Survivor Voices in Court

The Cook County State's Attorney's office (CCSAO) provides case-level felony data for cases processed by their office spanning approximately ten years [30]. The Network obtained initiation and disposition data through this data portal. Network staff, utilizing R software, isolated domestic battery charges. Comparing initiation and disposition data shows how these cases are processed and how many of these cases result in a domestic violence charge at disposition. The analysis does not include cases that were upgraded to a domestic violence charge from a non-domestic violence charge at initiation. The analysis includes data from 2011 through November 2019. December data was not available at the time of this analysis.

The following graphs show the results of this analysis. The first graph highlights the number of cases that are domestic battery charges in initiation are dropped. This number has been steadily rising, reaching a high in 2019 as over half of the felony charges were dropped. The second graph compares charges at disposition for cases that were charged as domestic battery upon initiation. While a larger portion have been found guilty of a charge related to domestic violence, this proportion has been steadily decreasing and more cases are being charged as non-domestic violence crimes. This trend is highlighted in the third graph which shows the ratio of domestic violence charged cases to non-domestic violence charged cases over time. As shown, the ratio of domestic violence charges has significantly decreased. This indicates that the likelihood of being found guilty of a domestic violence crime has decreased over time.

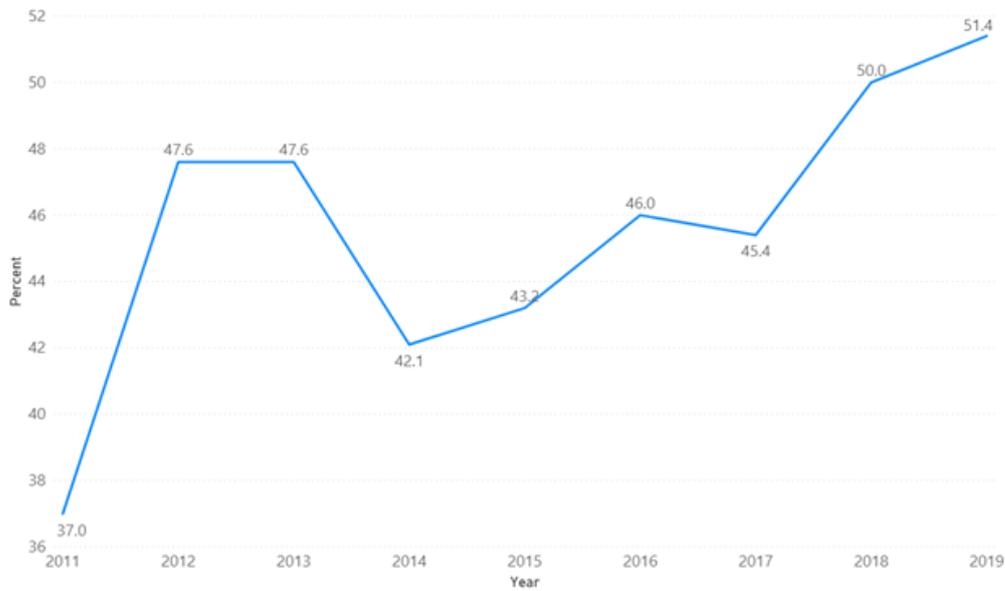
The distinction between domestic violence charges and non-domestic violence charges has large implications for survivors. A domestic violence charge comes with additional protections for survivors. It helps ensure access to services for survivors, it helps to remove weapons from the person who has caused harm and can lead to domestic violence specific remedies such as enrolling the person who caused harm in Partner Abuse Intervention Programs.

Many survivors might seek protections from the criminal justice system but also seek outcomes that are not highly punitive. To understand what is best for a survivor in a case, we must ensure that their voices are being heard in the process. These requirements are outlined in Marcy's Law. Knowing if survivors' voices are being heard requires additional data. The Network is working on developing data collection methods to hear from survivors regarding their involvement in court procedures.

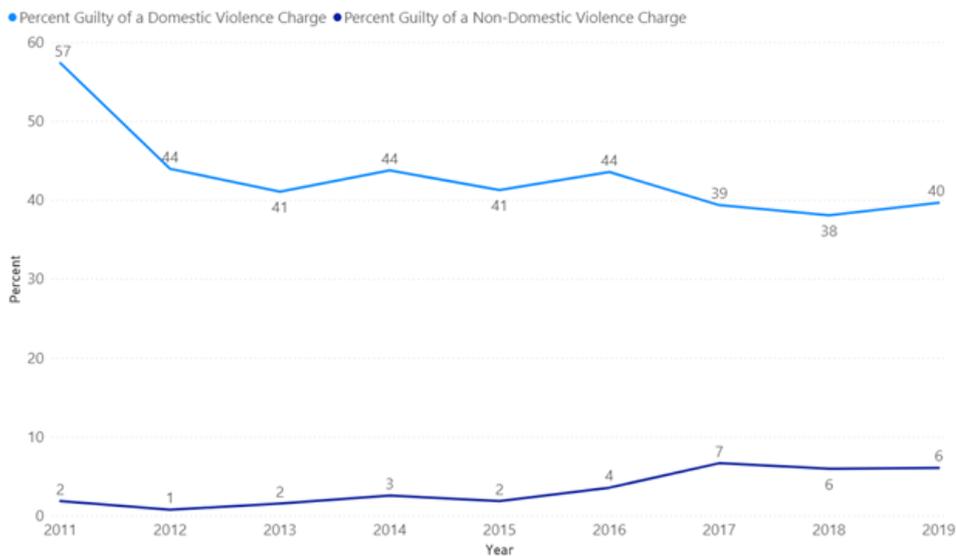
## Marsy's Law Crime Victims' Bill of Rights [31]:

- Guarantees a survivor's right to be free of harrassment, intimidation, and abuse throughout the criminal trial process
- Guarantees a survivor's right to receive notice and a hearing before any of their records, information, or communications are made available
- Guarantees a survivor's right to be heard at any post-arraignment court proceeding where the outcome might impact the survivor
- Guarantees a survivor's right to be notified of any new information related to the court case in a timely manner
- Guarantees that the safety of the survivor will be considered when determinnig bail, conditons of release after arrest, and conviction
- Guarantees that the person who is accused of harming cannot assert the rights of a person who was harmed

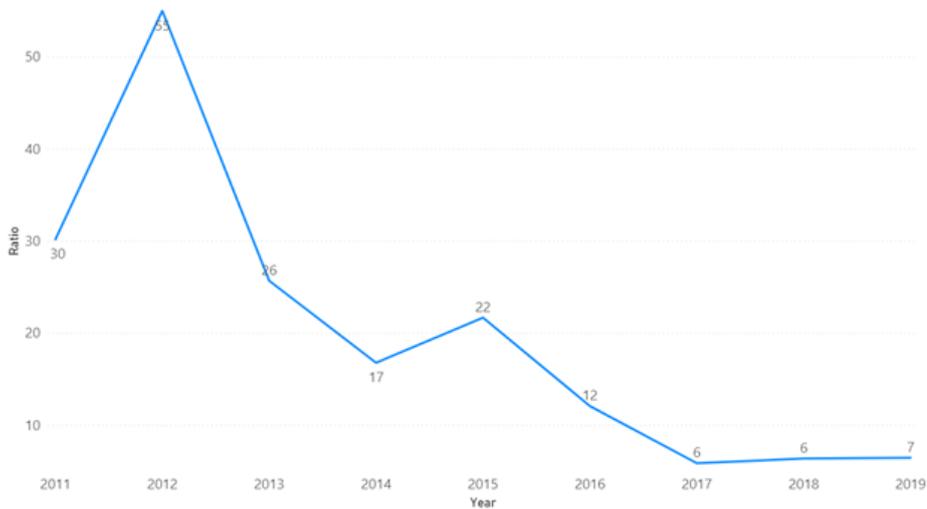
CCSAO Percent of Felony Domestic Battery Charges Dropped by Year



CCSAO Percent Guilty of a Domestic Violence Charge and Percent Guilty of a Non-Domestic Violence Charge by Year



CCSAO Ratio Charged with a Domestic Violence Related Charge to those Charged with a Non-Domestic Violence Related Charge by Year



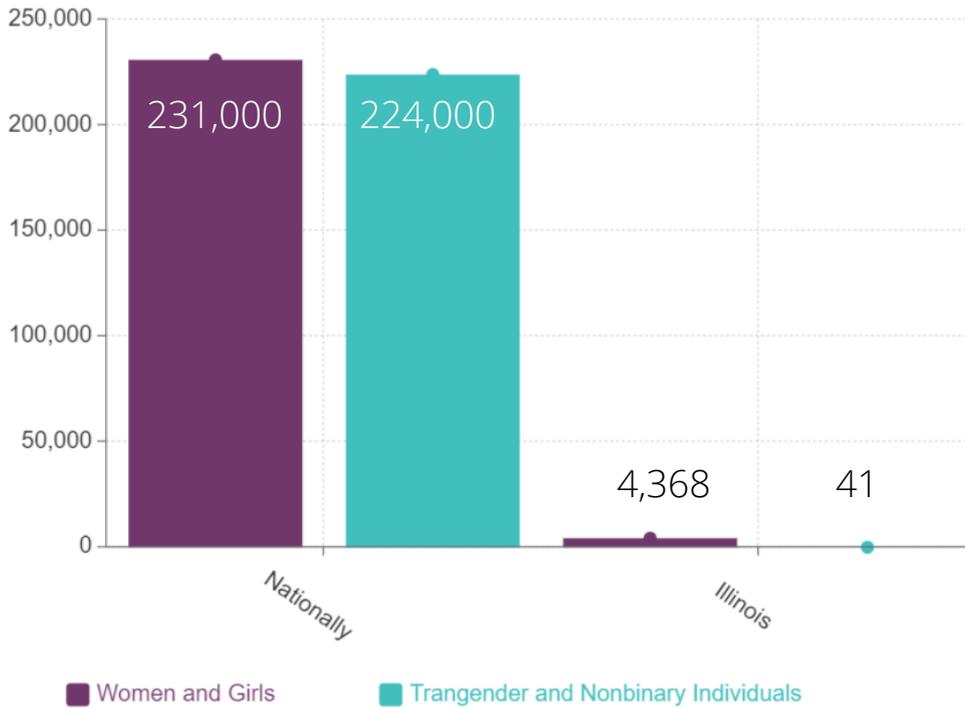
## Criminalization of Survivors

While the criminal legal system can often provide protection and assistance to survivors of domestic violence, this protection is not often extended to survivors forced to defend themselves from abuse. There are many instances of this system working against survivors resulting in their incarceration, often as a result of their response to the violence they have endured. In analyzing the ways in which this system is able to serve survivors, we must therefore also explore the ways in which it harms them.

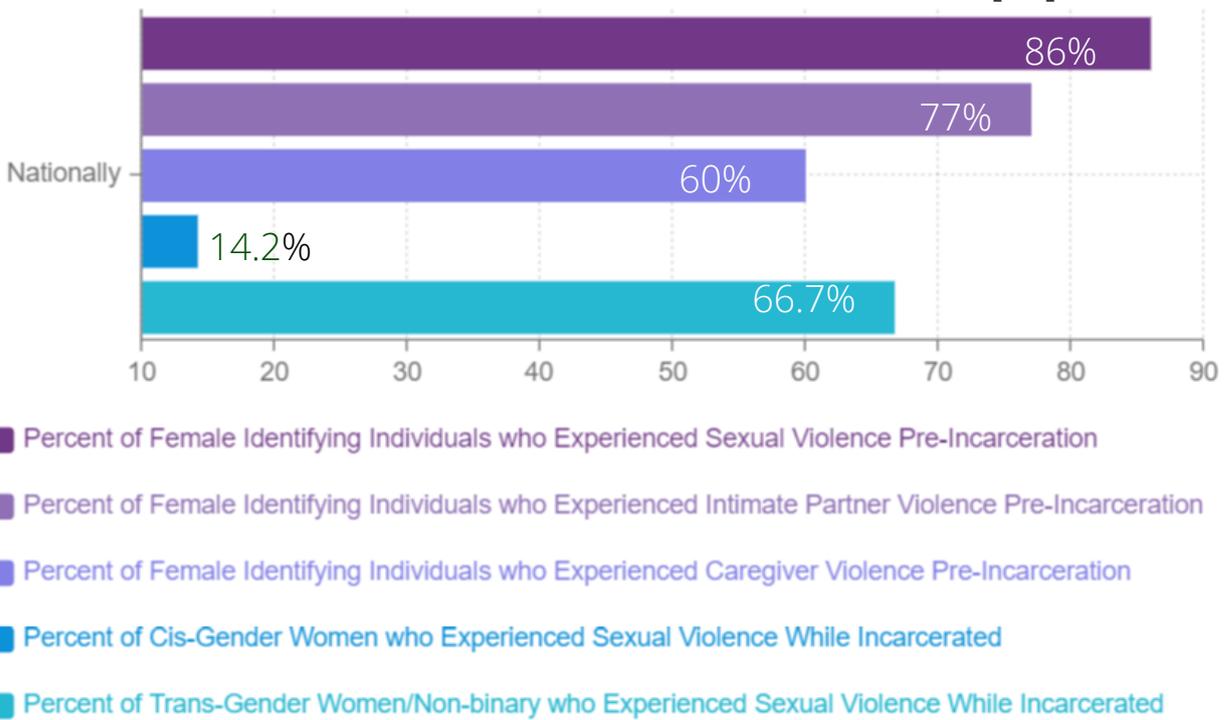
Nationally, the connection between survivorship and incarceration has been demonstrated in many studies. Incarceration rates among women and girls have steadily been increasing for many years. Compared to 1980, the number of incarcerated females is now nearly eight times higher [32]. Much of this growth stems from activities associated with trauma. The War on Drugs influenced the growing incarceration rates but impacted women more heavily. One reason for this is that women may use drugs in response to trauma. One study showed that 98 percent of women in jails had been exposed to trauma [33]. These measurements vary as they rely on various different reporting measures, but consistently show high rates of survivorship amongst incarcerated women. Additionally, policy changes and pushes for mandatory arrests have led to an increase in arrests of women utilizing self-defense in domestic violence situations [34].

Illinois has been shown to follow these national trends. In Illinois, women's incarcerated population growth has continually outpaced that of male's incarcerated population growth [35]. This is largely due to the same ties to survivorship seen at the national level. A study conducted by the Illinois Criminal Justice Information Authority found that in Illinois prisons 98 percent of women had experienced some form of physical abuse in their lifetimes [36]. There are approximately 2,600 women incarcerated in Illinois (population numbers from Logan, Decatur, and Fox Valley). Of these, 349 are convicted of murder, and 43 are doing life sentences, as of the writing of this report [37]. Many of these women were acting in self-defense of abuse. These values do not take into account transgender women who are placed in men's facilities, the number of women in federal facilities, or the number of young girls, also often survivors of violence, in juvenile facilities. While a great deal of additional research is needed, the data provided here serves as a starting point for the exploration of this important issue.

## People Experiencing Incarceration [38]

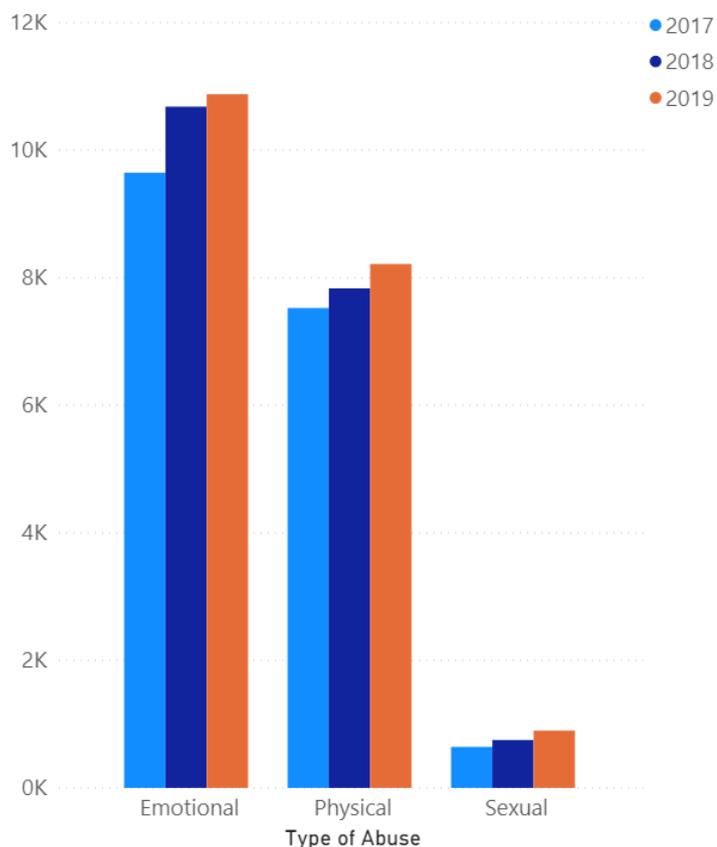


## Incarcerated Individuals' Experience of Violence [39]



# SERVICE PROVISION

Illinois Domestic Violence Hotline Type of Abuse Experienced by Survivors



While domestic violence spans across communities, the experience of survivors varies. Many survivors may choose not to interact with the criminal legal system or may face barriers to doing so. Instead of seeking legal action, they may seek out services or seek out services while simultaneously seeking legal action. To capture this population, this section of the report will highlight data from service providers, focusing on representing who experiences domestic violence and what that experience is like in Illinois. It contains data from the Illinois Domestic Violence hotline, Infonet, and the DVOM.

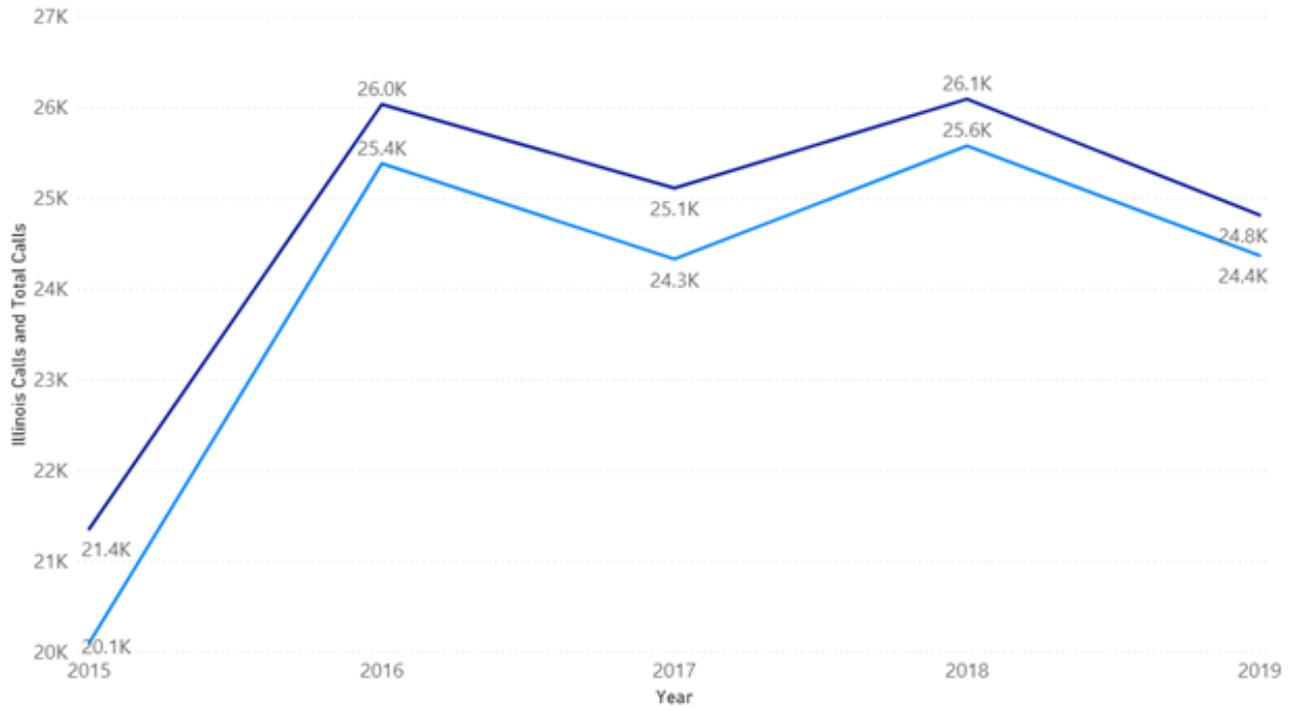
The Illinois Domestic Violence Hotline is a 24 hour, 7 days a week resource that connects survivors to domestic violence services in the state. As the graph above shows, the hotline takes calls related for all forms of abuse with the majority experiencing emotional or physical abuse. In 2019, 54.4 percent of the survivors based on hotline calls had experienced emotional abuse, 41.1 percent had experience physical abuse, and 4.5 percent had experienced sexual abuse [40].

In 2019, as shown in the top graph on the following page, there were 24.8 thousand calls to the hotline, of which 24.4 thousand came from Illinois. The bottom graph on the following page shows that in 2019 there were 37 unique text conversations with 27 from Illinois residents. The majority of calls and texts come from Cook County and more specifically Chicago. In 2019 of the 24,817 calls, 10,566 (43%) were from Chicago, 6,042 (24%) were from Cook County excluding Chicago, 7,743 (31%) were from other parts of Illinois, and the remaining 466 (2%) were from outside of Illinois. For this reason hotline data can be used to indicate general trends of domestic violence in Illinois but the data is not entirely representative of the state [41].

Illinois Calls, Total Calls

BY YEAR

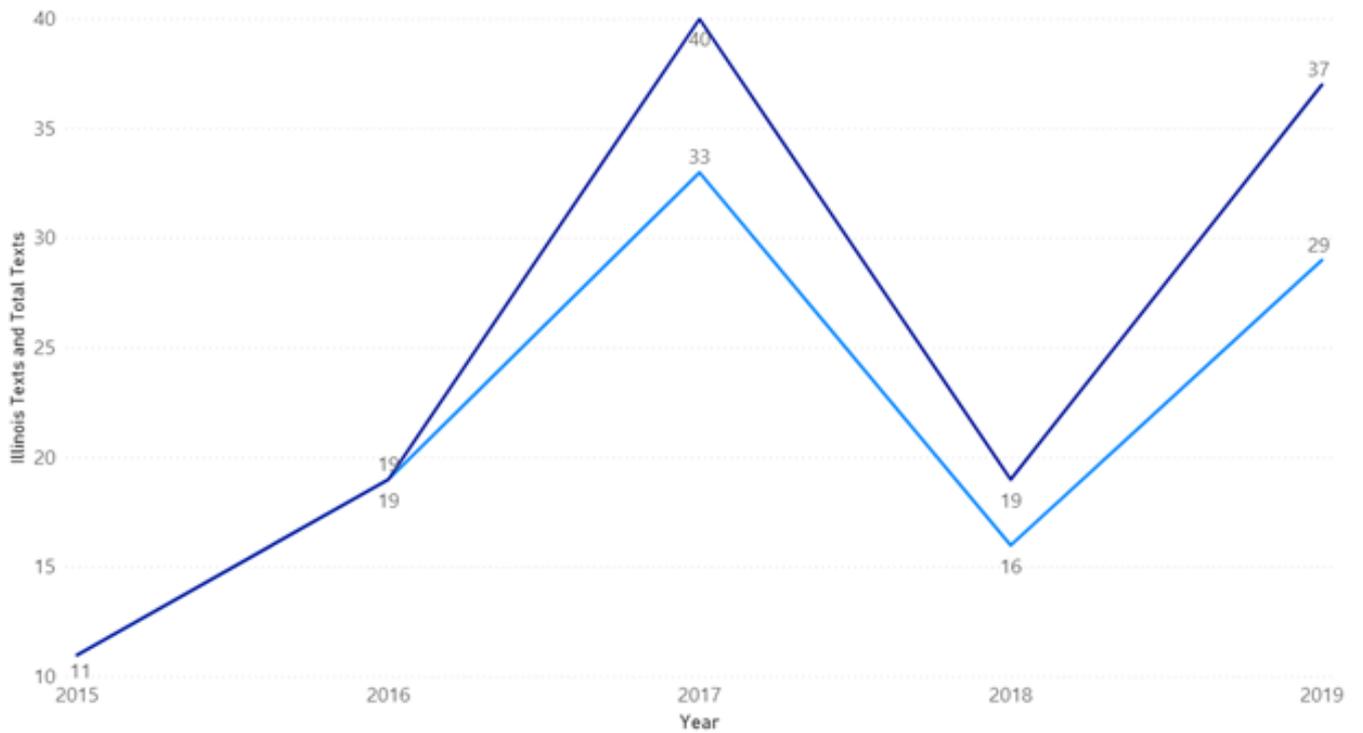
● Illinois Calls ● Total Calls



Illinois Texts, Total Texts

BY YEAR

● Illinois Texts ● Total Texts





# SURVIVOR STORY: BUILDING TRUST AND A FUTURE



Hannah\* is a single mother and a survivor of domestic violence. She has received counseling services for herself and her children from a domestic violence agency within the Metropolitan Chicagoland area. She also reported needing financial assistance, support in filing for divorce, and assistance obtaining permanent housing. Hannah has experienced loss of housing once in the past 5 years. She did not share where she has lived previously or the reasons for her loss of housing.

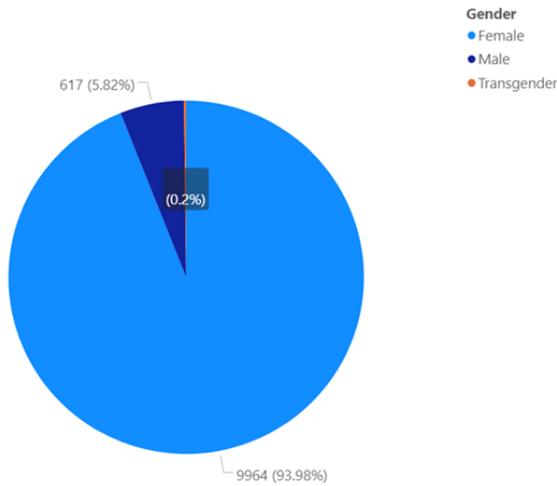
Hannah is no longer living with her abusive partner. Currently, she is unemployed, with no health insurance or financial resources. She has been living with a family member for at least two weeks, and she still needs support obtaining permanent housing. She stated that she came to the agency to receive support in locating employment and in applying for public benefits, such as TANF and food stamps. Currently, Hannah is receiving financial planning and literacy services through the domestic violence service provider.

Although Hannah is experiencing challenges, she expressed feeling more hopeful about her future and ability to support herself and her children. She's wants to continue in individual and family counseling. She noted that the domestic violence agency has given her the resources to understand the impact of her situation as well as providing ways to keep herself, and her children, safe. Hannah believes that the agency has taught her to trust more carefully. She stated, "I have changed by trusting somebody – I trusted him a lot and I will be very careful about trusting again. I was in a relationship with him for 8 years. I'm learning to trust again."

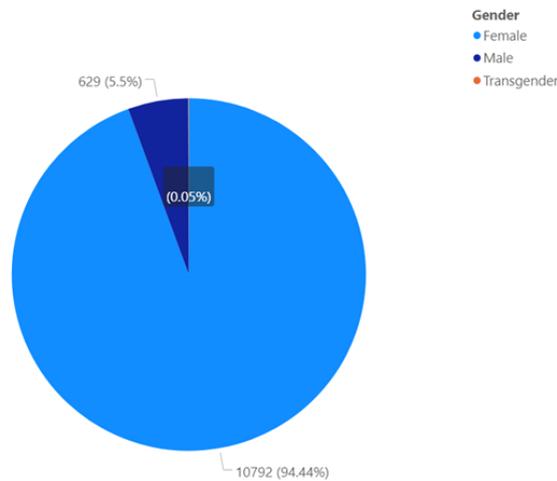
\* This is a pseudonym and this narration and survivor quotes were taken from de-identified case level survey data.

# Survivor Demographics

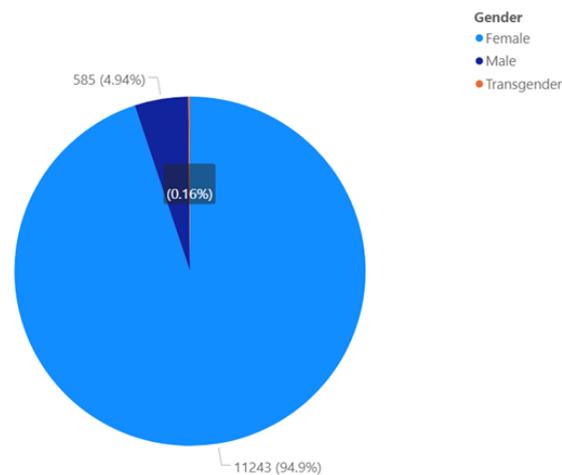
Illinois Domestic Violence Hotline Gender of Survivors 2017



Illinois Domestic Violence Hotline Gender of Survivors 2018



Illinois Domestic Violence Hotline Gender of Survivors 2019



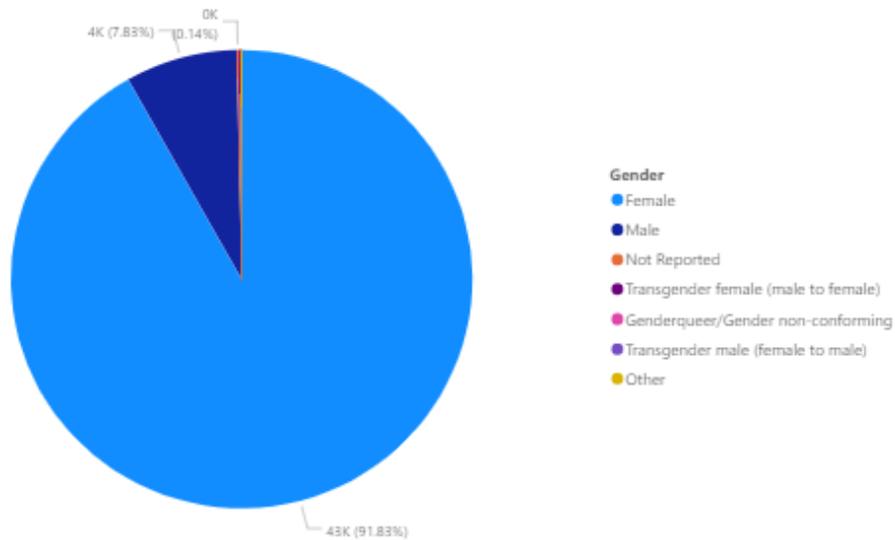
The graphs on the left show the gender breakdown of survivors from hotline calls. In 2019, 5 percent of survivors represented in hotline data were male, 95 percent were female, and less than one percent identified as transgender. In 2018 and 2017 these numbers were percent per year 6 percent, 94 percent, and less than one percent, respectively [42].

These data reveal that female identified people consistently are more represented in hotline calls as survivors. This is in line with what we see in national trends. According to the National Intimate Partner and Sexual Violence Survey, one in four women and one in ten men will be survivors of domestic violence in their lifetime [43]. This indicates that women are approximately 2.5 times more likely than men to experience domestic violence. This difference is expected due to the power and control aspect of domestic violence. Studies have shown that people who use harm will use macro level structures to maintain that power, such as societal sexism and gender norms [44]. This trend appears again in InfoNet data, shown on the next page.

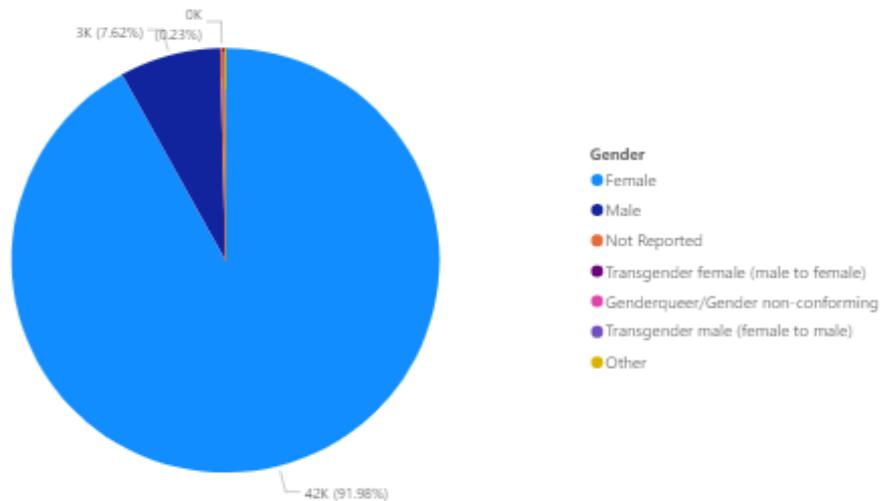
Gender identity of the survivor is a question that will not be asked on every call and survivors can choose not to provide the information if asked. In 2019, this data was only collected in 47 percent of the calls [45]. Transgender people in particular may feel unsafe identifying themselves and may therefore be under represented in this report. Under reporting of transgender survivors has been well documented in national literature.

In addition to hotline data, InfoNet data can be used to show who is a survivor of domestic violence. InfoNet is a web-based system run by the Illinois Criminal Justice Information Authority to collect and report data from domestic violence service providers in the state. The authors of this report received data from InfoNet for the years 2017, 2018, and 2019. For survivor safety, any value lower than ten is omitted from their reports [46]. For ease of analysis, where there was missing data for a year, the authors of the report excluded those values from any visual representation of the data. Below are graphs of the gender of survivors recorded in InfoNet.

InfoNet Gender of Survivors 2019



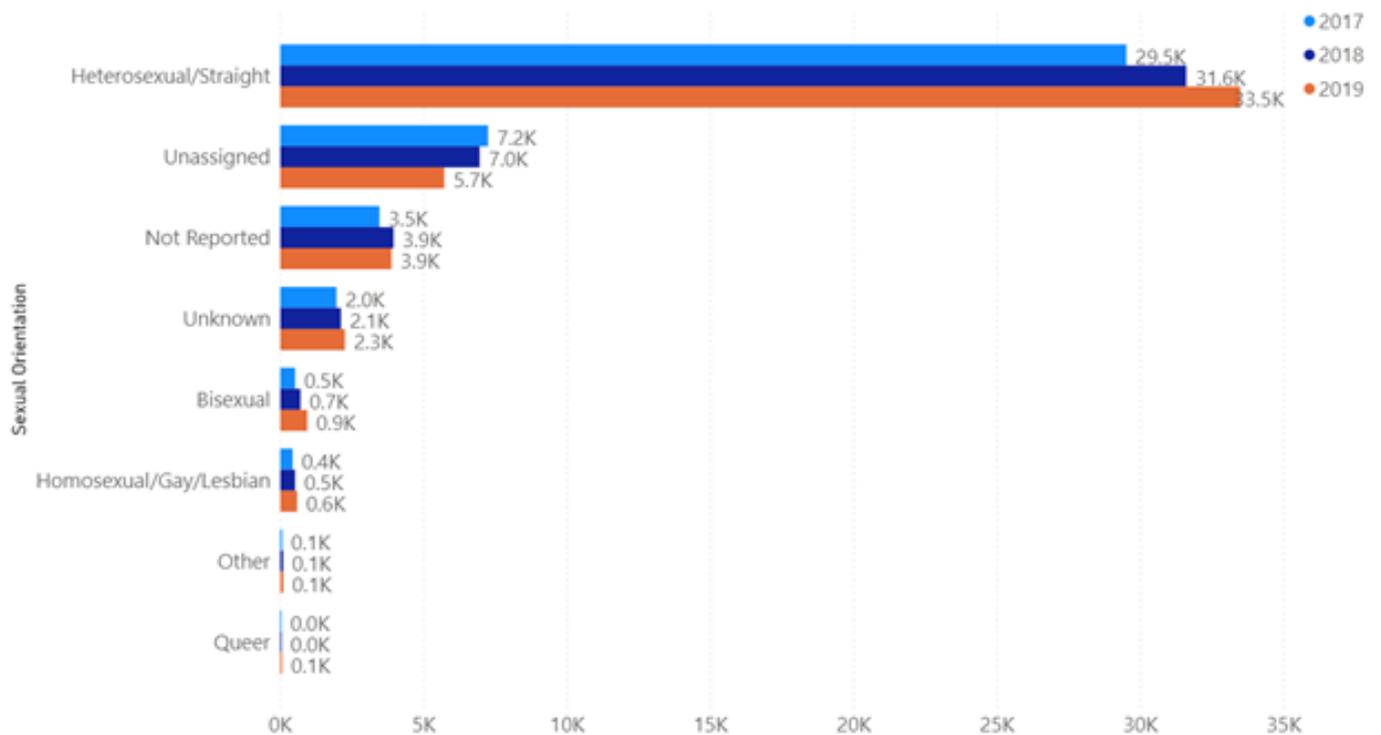
InfoNet Gender of Survivors 2018



These graphs show similar patterns to the hotline data, with the majority of survivors identifying as female. InfoNet records more comprehensive gender data, as shown through the additional categories. These categories make up only a fraction of the survivors. It is important to note that there still may be reporting omissions, similar to those described on the previous page, due to fear of identifying as transgender, nobinary, or queer.

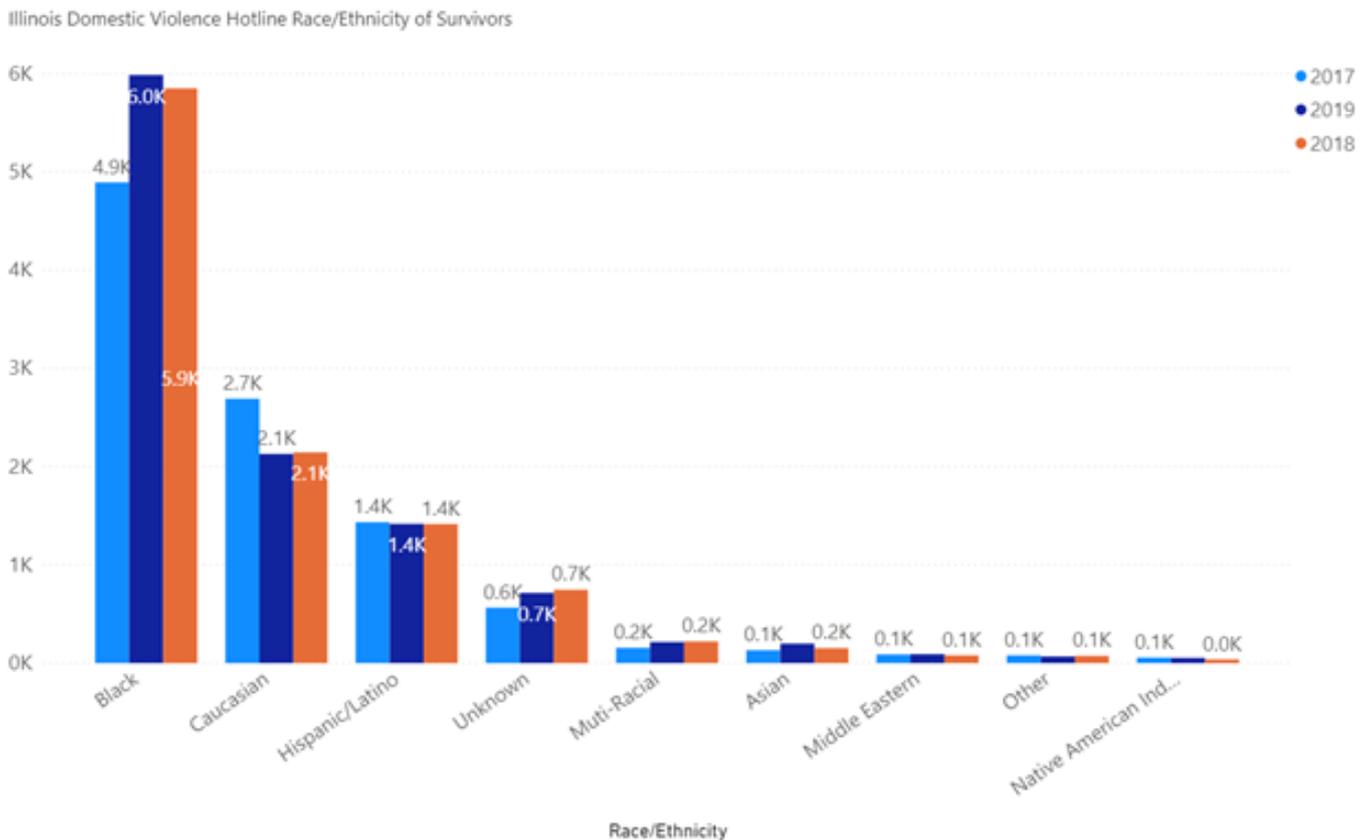
InfoNet also gathers comprehensive data on sexual orientation, shown below [47]. The Illinois Domestic Violence hotline also collect sexual orinetation data, but the recording of this data is minimal and therefore was excluded from this report. National data shows that bisexual women are 1.8 times more likely to report experiencing doemstic violence than their heterosexual counterparts. Lesbian women and bisexual men are also more likely than their counterparts, but not at statistically significant levels [48]. While the data below does not take into account the ratio of people with varying sexuality, it still likely shows underreporting of those who do not identify as heterosexual/straight.

InfoNet, Sexual Orientation of Survivors

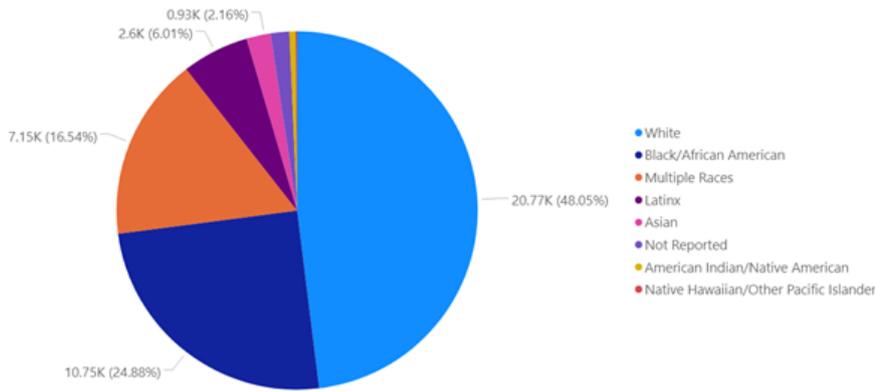


The graph below shows the racial and ethnic breakdown of survivors from hotline calls. In 2019, 55 percent of survivors were Black, 20 percent were White, 13 percent were Latinx, 7 percent were unknown, and less than 5 percent were either Asian, Middle-Eastern, Multi-Racial, an Indigenous/Native person, or other. Similar rates were seen in both 2017 and 2018 [49]. One possible theory behind the large percentages of calls from people of color is that the Illinois Domestic Violence Hotline is not associated with law enforcement, and people of color may feel more uncomfortable turning to the police for help than people who identify as white.

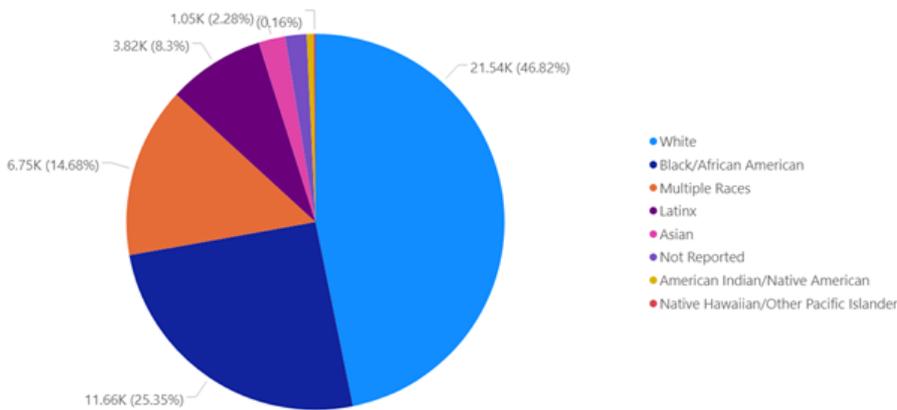
Compared to national data, there are some groups underrepresented. According to the National Intimate Partner and Sexual Violence Survey multiracial women and Indigenous/Native women are two of the most likely groups to experience domestic violence, with over half of multiracial women and nearly half of Indigenous/Native women experiencing domestic violence in their lifetime [50]. Outside of these groups, the hotline data follows similar trends to national data. Nationally, it is reported that 45 percent of Black women, 37 percent of White women, and 34 percent of Hispanic women experience domestic violence in their lifetimes [51]. The reason for the differences in the data is likely due to the data collection methods of the hotline, previously described, and also population differences between Illinois and the country. Much like gender and sexism, racism is a tool used by people who cause harm to maintain power over survivors. Additionally, race and ethnicity can provide barriers to seeking assistance and impact the experience of survivors.



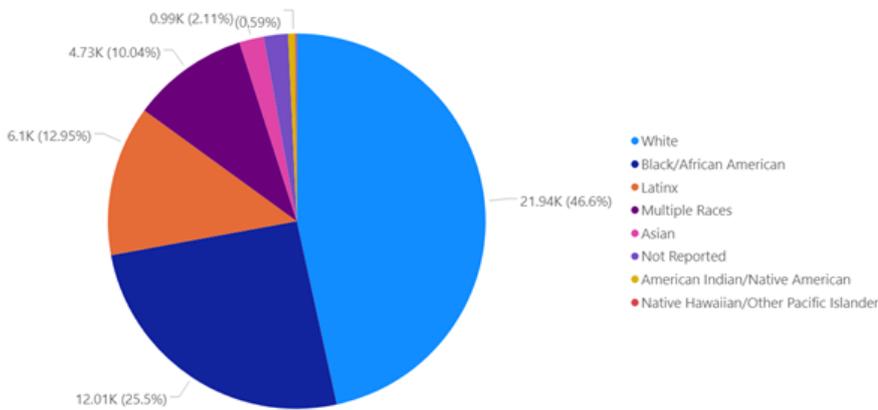
2017 Race/Ethnicity of Survivors in InfoNet



2018 Race/Ethnicity of Survivors in InfoNet



2019 Race/Ethnicity of Survivors in InfoNet

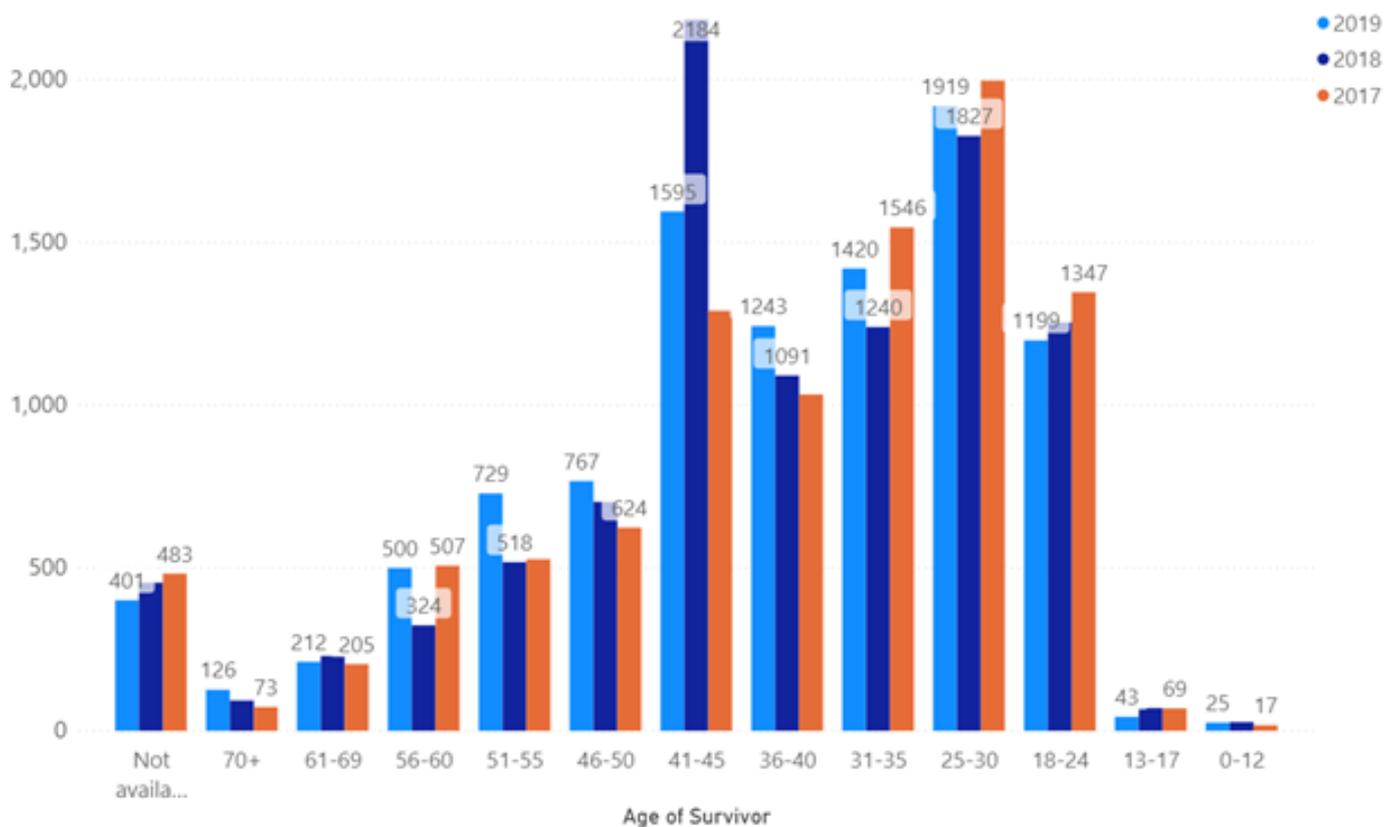


The graphs on this page demonstrate the racial and ethnic makeup of survivors in InfoNet [52]. This data has a larger proportion of Non Hispanic White survivors than the hotline data. This difference may be due to population served. Relative to the population of Illinois, Black and Latinx are over represented in those receiving services. As discussed previously, the hotline largely services Chicago, which has a larger proportion of Black and Latinx individuals. InfoNet data includes service providers throughout the state, including the less diverse suburbs. On the other hand, this difference may also speak to access to services throughout the state. Further research on those receiving services is needed to understand potential barriers for individuals in Illinois.

For both men and women, domestic violence often begins at a young age. Over 71 percent of female survivors nationally, experience domestic partner violence for the first time by the age of 25 and over 25 percent will have their first experience of domestic violence by the age of 18. For male survivors, these numbers are 55 and 14 percent, respectively [53]. Research has shown that experiencing domestic violence at a young age has lifelong impacts on a person. Over 50 percent of female survivors report post traumatic stress disorder, as do 17 percent of male survivors [54]. This data shows that it is important to reach young survivors.

The hotline data aligns with national trends. As shown below, the majority of survivors are under the age of 45 and 11 percent between the ages of 18 and 24 [55]. As the data does not tell us specifically when the survivor first experienced domestic violence, we can consider this to be in line with national data.

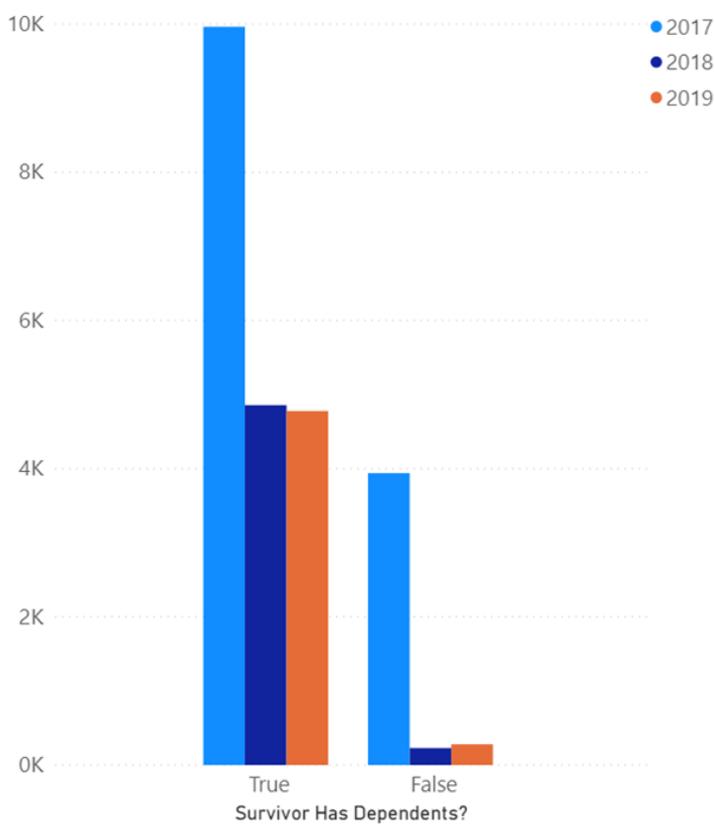
Illinois Domestic Violence Hotline Age of Survivors



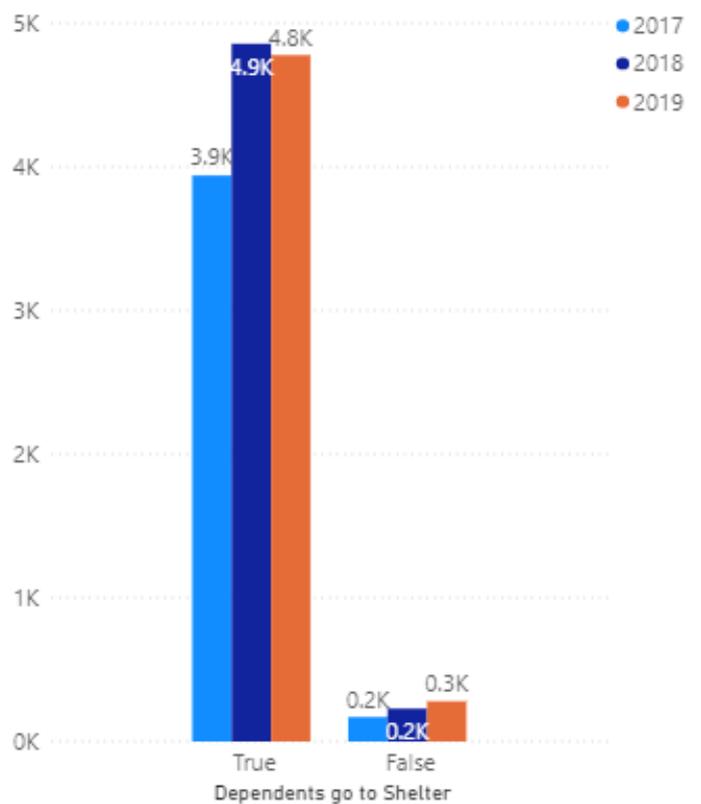
Another important aspect to consider is the experience of children who may witness domestic violence in their homes. Witnessing domestic violence can lead to chronic health conditions, risky health behaviors, and socio economic challenges [56]. Having adequate domestic violence services for both adults and children can help to prevent these impacts.

The graphs below show the number of survivors with dependents and the number of survivors who would bring dependents to shelter from hotline calls. In 2019, 94 percent of survivors had dependents and 94 percent would bring dependents to shelter with them. Of these survivors, many will have more than one dependent. In 2019, seven survivors had 8 dependents [57]. The graph on the following page shows the number of children survivors have as given by the InfoNet data. The vast majority of survivors have at least one child, with many having multiple [58]. This data illustrates the importance of shelters and other service providers having services for children. This report will explore the need for these services in greater detail within this section.

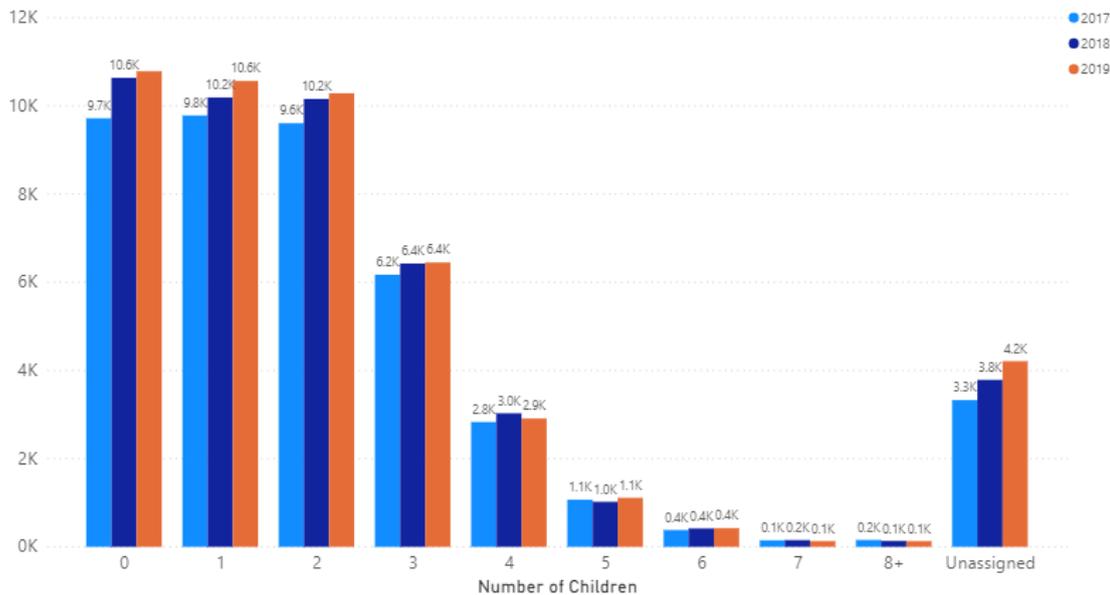
Illinois Domestic Violence Hotline, Survivor Dependents



Illinois Domestic Violence Hotline Dependents at Shelter with Survivors



Infonet, Number of Children a Survivor Has



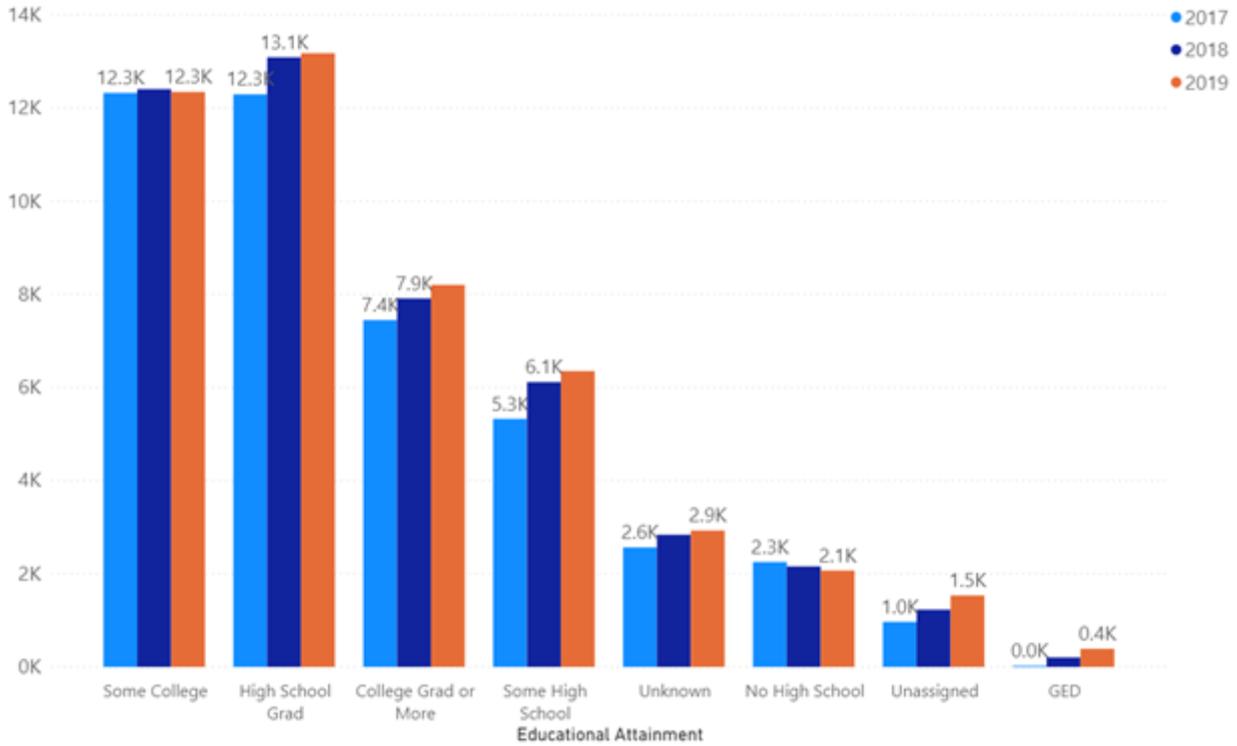
Another important factor in domestic violence services is the socio-economic status of a survivor. National research has shown that socioeconomic status is a risk factor for domestic violence, where people with low socio-economic status experience domestic violence at a higher rate than those with high socio-economic status [60]. People in domestic violence relationships may face disruptions to employment and education. The person who caused harm may also use financial abuse to limit the survivor’s access to money. Upon leaving a domestic violence relationship, survivors with less financial freedom may have a harder time accessing services due to the specific challenges that many low-income people face: lack of transportation, assets, higher education, and other necessities to aid in the recovery from domestic violence [61].

The graphs on the following page show two key measures of socio-economic status of survivors in InfoNet; educational attainment and employment status. While many survivors have completed some college and high school, more survivors in 2017, 2018, and 2019 included in the data did not complete high school than completed college. Additionally, in all three years the largest portion of survivors were not employed. In 2019, over 40 percent of survivors were unemployed and another sixteen percent were only employed part time [62].

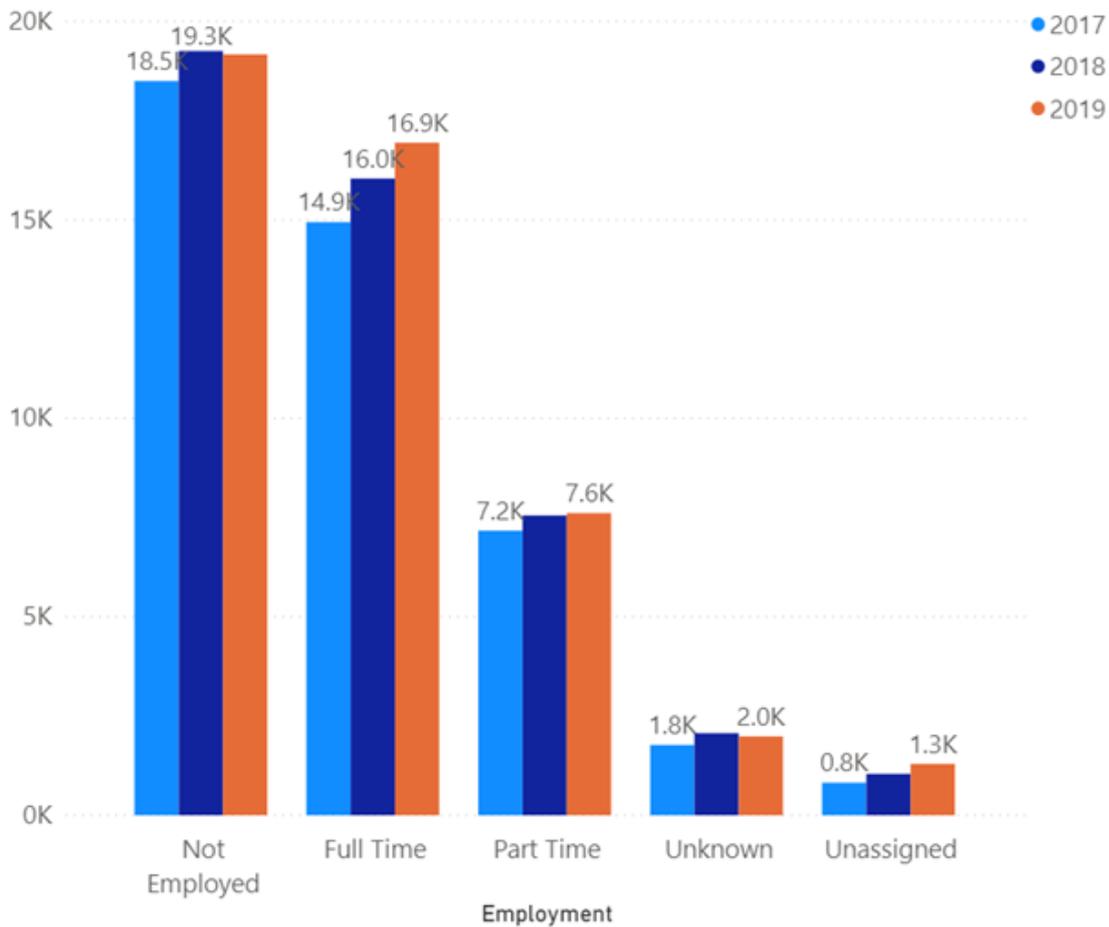
## Financial Abuse [59]:

Financial abuse is a form of abuse used by a person who does harm to reduce the survivor’s access to finances and assets. It is one method used to trap a survivor in the relationship. It is often cited by survivors as the main reason they stayed in a relationship. It occurs across all socio-economic groups.

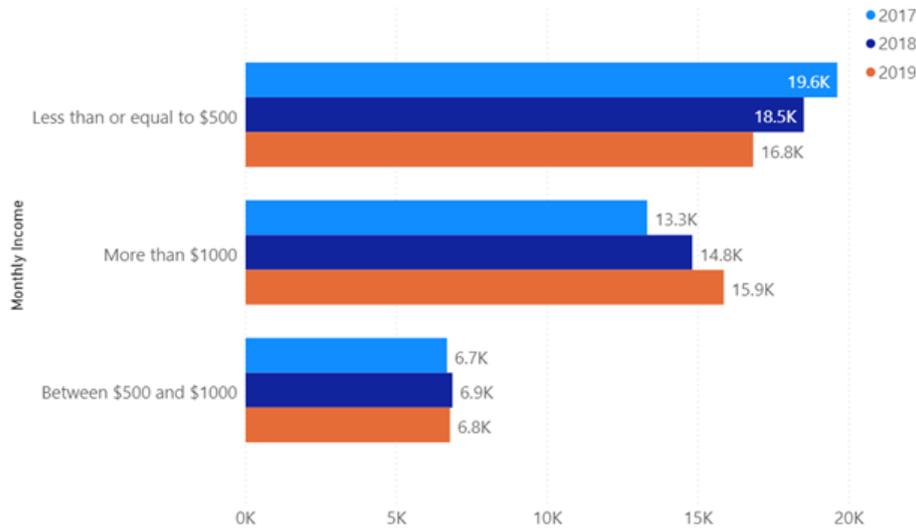
InfoNet Educational Attainment of Survivors



InfoNet Employment of Survivors



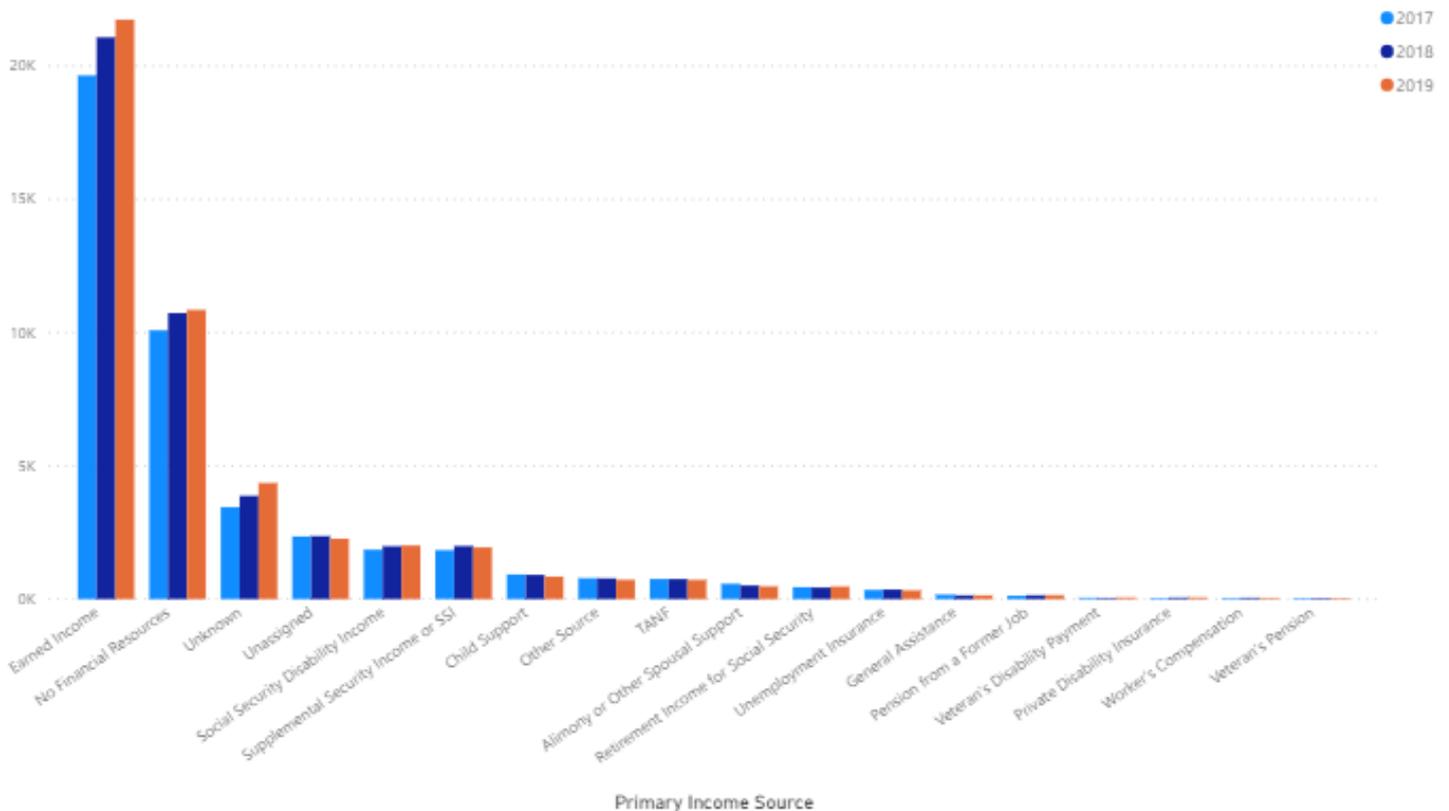
InfoNet, Monthly Income of Survivors



Income amount and source of income show many survivors who would likely be classified as falling under the category of low socio-economic status. In the past three years, over 40 percent of survivors represented in InfoNet data reported less than or equal to \$500 a month. In 2019, 43 percent of survivors fell into this category [63].

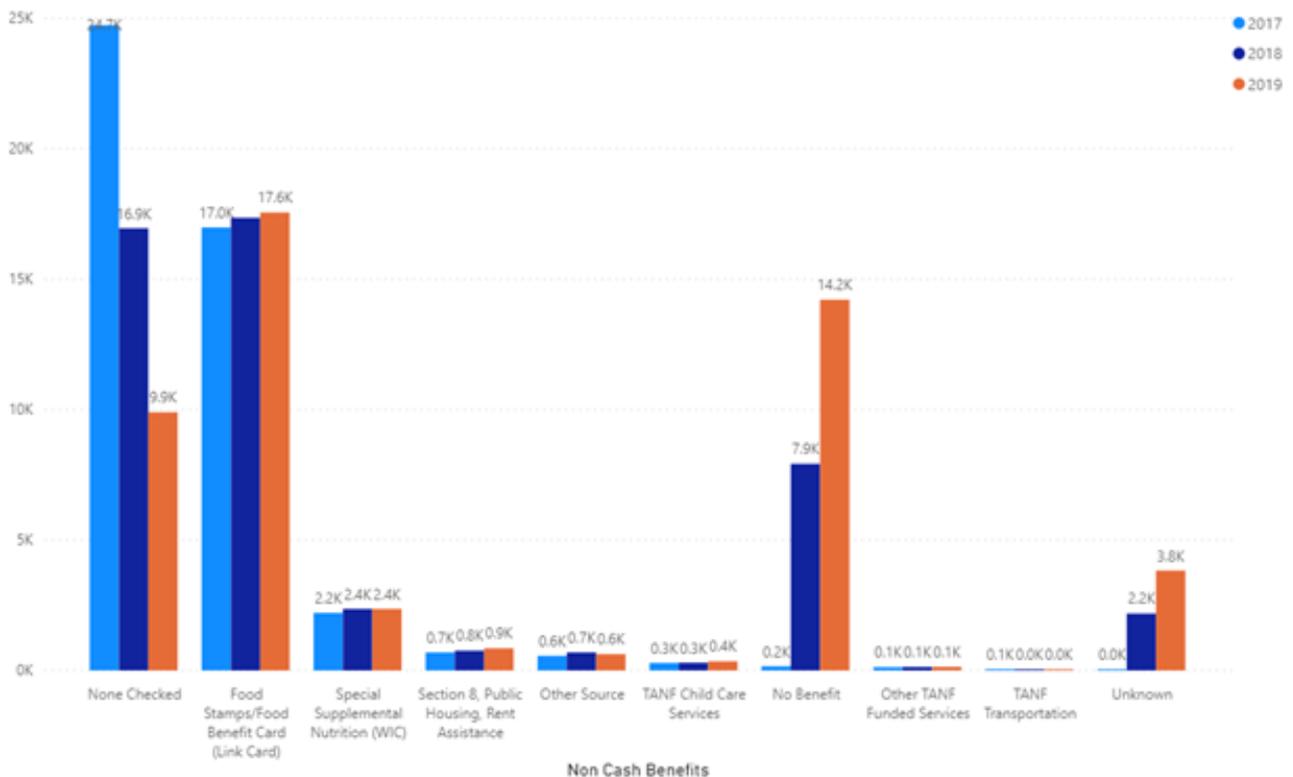
Additionally, many survivors were unable to report any financial resources. In 2019, one in five survivors reported no financial resources and just under a third of survivors relied on other assistance outside of earned income as their primary source [64].

InfoNet, Primary Income of Survivors



The graph below takes a deeper look at the non cash benefits utilized by survivors in InfoNet. This data shows an increasing reliance on non cash benefits over time. In 2017, 54 percent of survivors reported no benefits, in 2018, 35 percent of survivors reported this, and in 2019 only 20 percent reported no non cash benefits. The most commonly used benefit is food stamps, with approximately 35 percent of survivors reporting having used this benefit in 2019 [65].

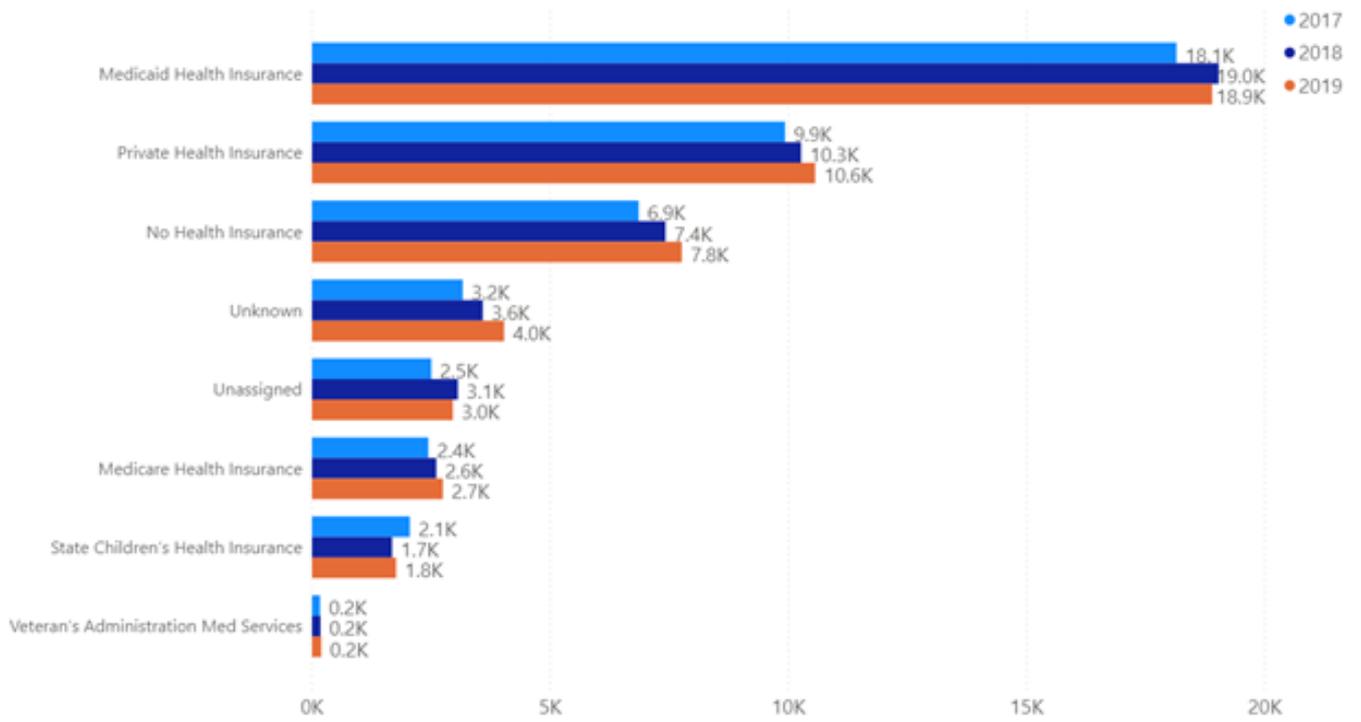
InfoNet, Non Cash Benefits Received by Survivors



This report's final measure of socio-economic status is insurance status, captured in the graph on the following page. The insurance status of survivors in InfoNet data follows the trends demonstrated throughout this section. In 2019, 38 percent of survivors relied on Medicaid and another 16 percent had no health insurance. Only 22 percent of survivors in 2019 reported having private health insurance [66].

These combined measurements for socio-economic status show that as the national data discussed earlier suggests, there is a high level of survivors that could be labeled as low socio-economic status. Understanding this is key in providing adequate services to survivors. It indicates a need for employment and education assistance for survivors.

InfoNet Insurance Status of Survivors





# SURVIVOR STORY: GETTING HELP AND HELPING OTHERS



Robin\* is a single mother recently separated as a result of domestic violence. She has been receiving services related to her domestic violence experience for the last 3 months. Due to this experience, she would like to begin therapy. In the past five years, Robin has lost her housing three times. A series of experiences led to the loss of housing including job loss, unbearable living conditions with her partner, and interpersonal conflict with her partner. After one of those losses she stayed in a domestic violence shelter.

More recently, Robin was able to obtain permanent housing through Section 8 Public Housing Assistance. Robin has reported having necessary skills and supports to keep her children safe and help them cope with the impact of the family's domestic violence experience. Despite this success, she reports a need for assistance with child custody arrangements with her ex-partner.

Robin is currently unemployed. She reported that she has attended, but not completed, high school. She is actively looking for employment and still plans to move forward with her education. Robin is motivated, but needs assistance with transportation to and from job opportunities. Currently she has no significant source of income and, her family is in a precarious economic situation. She and her children are able to utilize food stamps through a SNAP/LINK card for groceries and are insured through Medicaid. While suggesting that she can somewhat support herself with these benefits, she reports that she still needs help finding work, food, clothing, and healthcare.

Robin expressed being very grateful for the providers support in obtaining benefits and counseling. "Loving the agency and being in a better place," she said in the survey, "I'm more determined to help others." With that, she continues to be hopeful about her family's future.

\* This is a pseudonym and this narration and survivor quote was taken from de-identified case level survey data.

## Services Spotlight: Housing

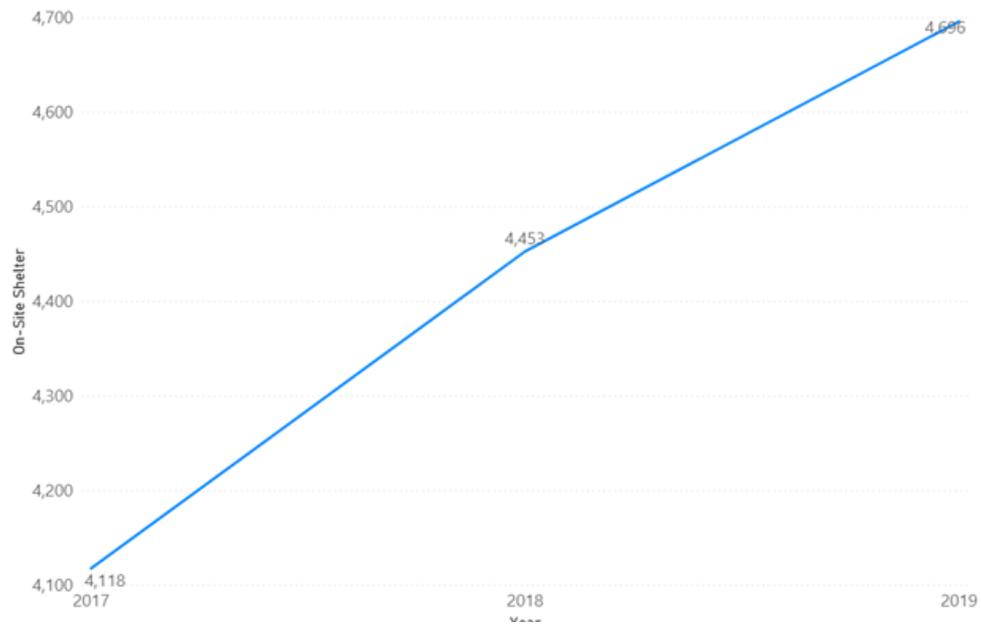
The authors of this paper have chosen to spotlight the issue of housing as there is a growing conversation centered on the need for permanent housing solutions for survivors. Research has long shown that there is a high correlation between domestic violence and homelessness. A study by the National Center for Homelessness and Health Care found that 57% of homeless women report domestic violence as the cause. Among homeless women with children, 80 percent reported experiencing domestic violence. The control dynamics in an abusive relationship can lead to poor credit history and inconsistent employment [67]. Survivors might face housing discrimination or lack of subsidized or affordable housing due to violations by their abuser. These challenges are often exacerbated for those with marginalized identities, including survivors of color, immigrants, survivors with disabilities, and those with low socioeconomic status. Institutional discrimination against these groups create barriers to housing [68].

To analyze this issue the authors have focused on InfoNet data for both short term housing solutions, such as shelter and long term housing, such as transitional housing services. Additionally, this section looks at other types of housing and the duration of stay for a survivor. Lastly, this section analyzes the expressed need for this resource from survivors.

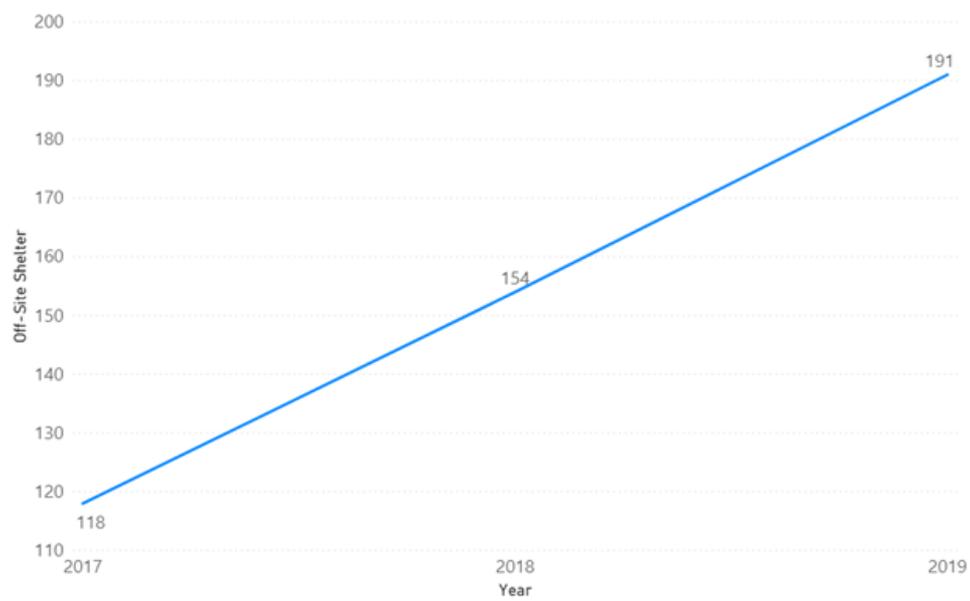
In addition to the data included in this section, additional housing questions were added to the DVOM survey administered in 2019. These results are summarized in the report from Loyola researchers included at the end of this report.

The graphs on the following page illustrate that across on-site shelter, off-site shelter, and transitional housing service providers have been continuing to increase capacity to address this need for survivors [69]. As will be demonstrated later in this section, however, there are still far too many survivors who must be turned away.

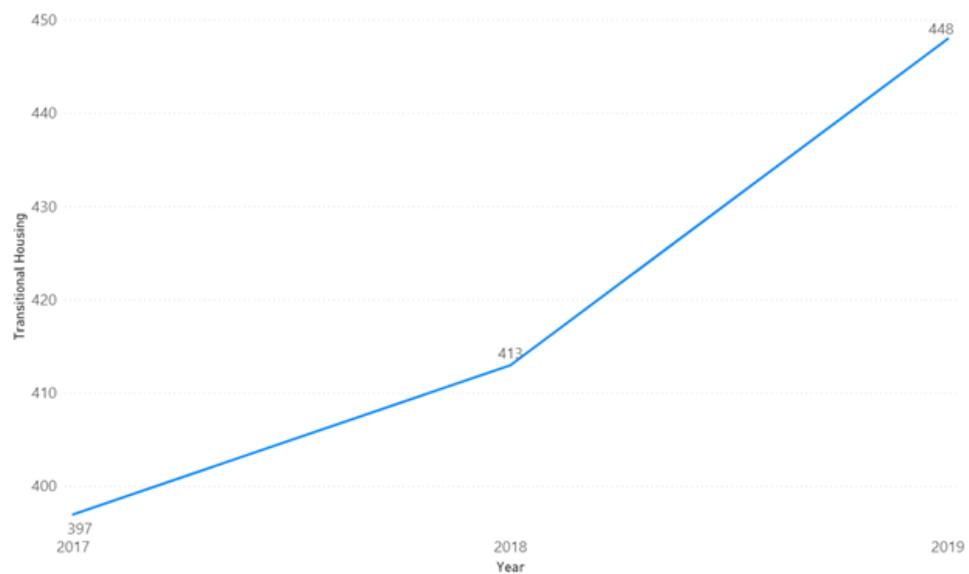
InfoNet On-Site Shelter by Year



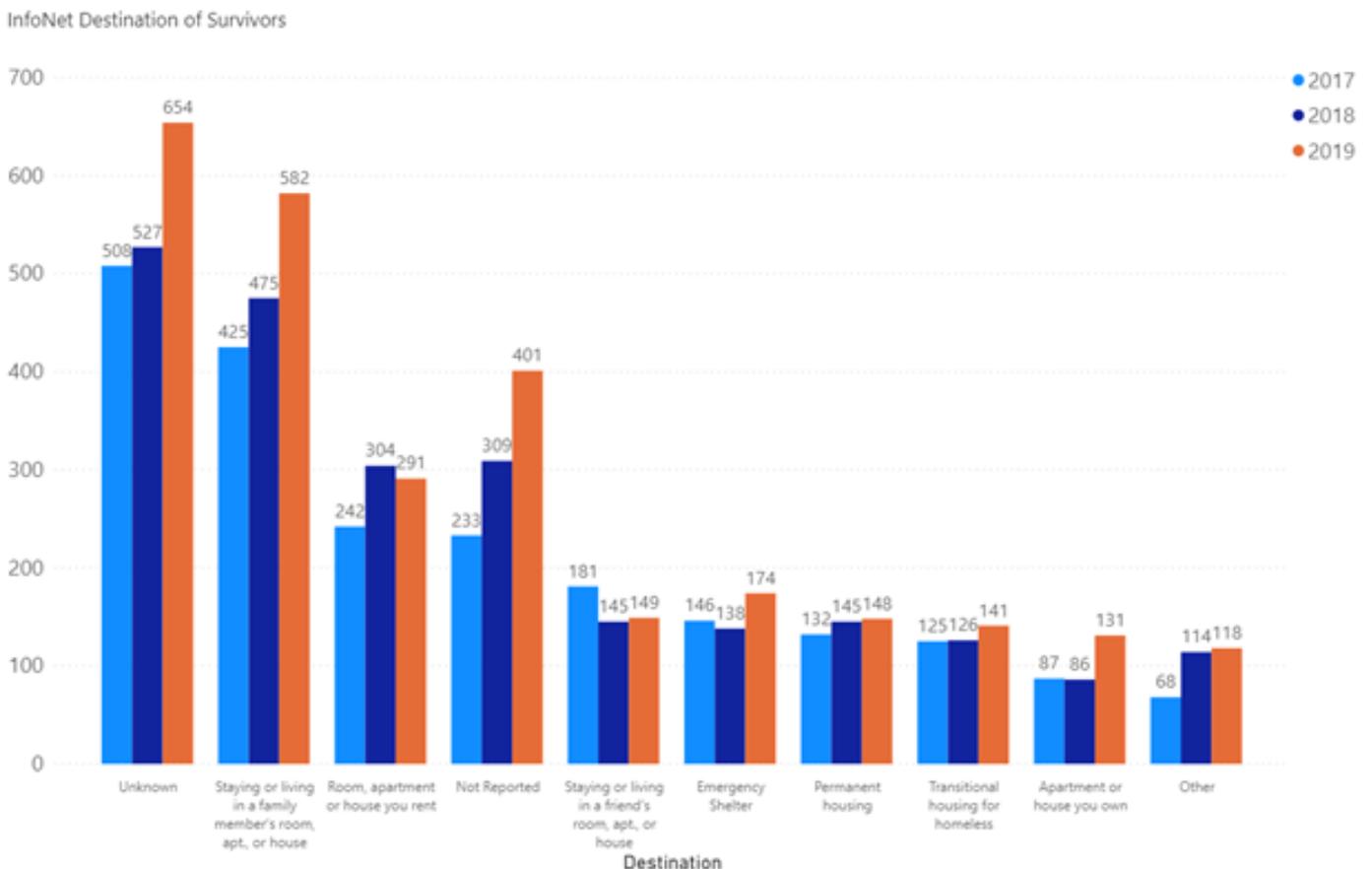
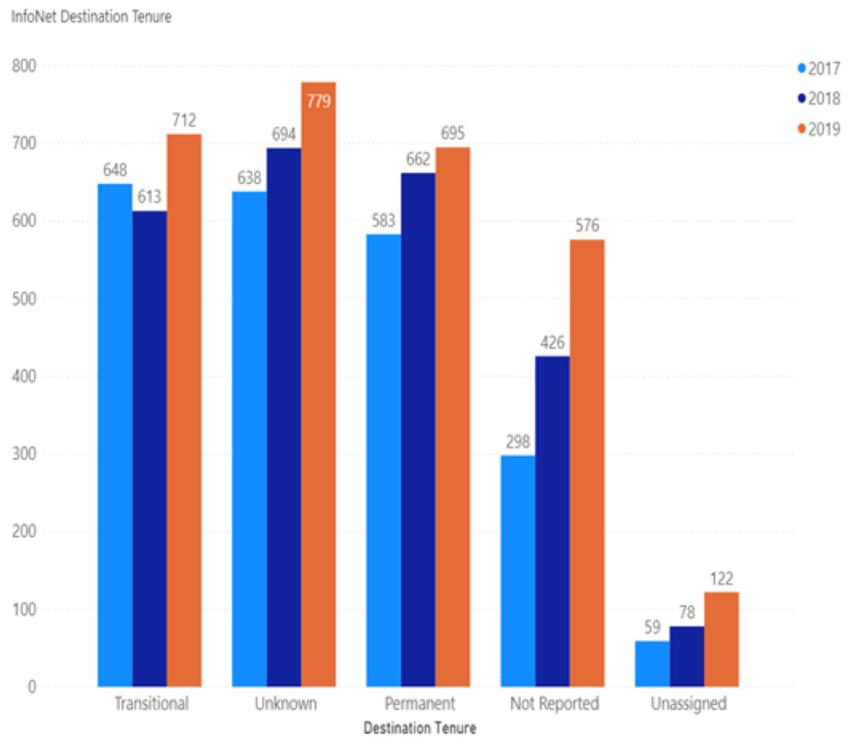
InfoNet Off-Site Shelter by Year



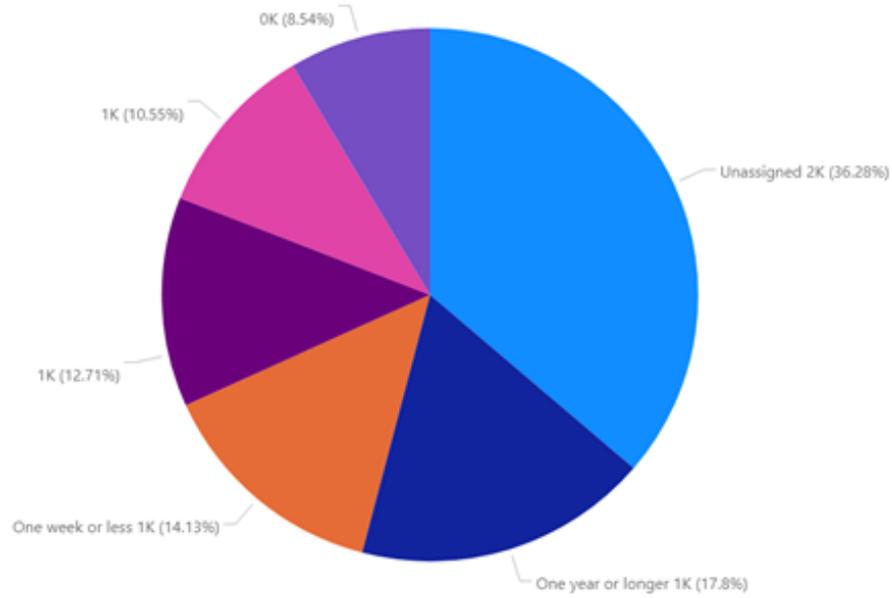
InfoNet Transitional Housing by Year



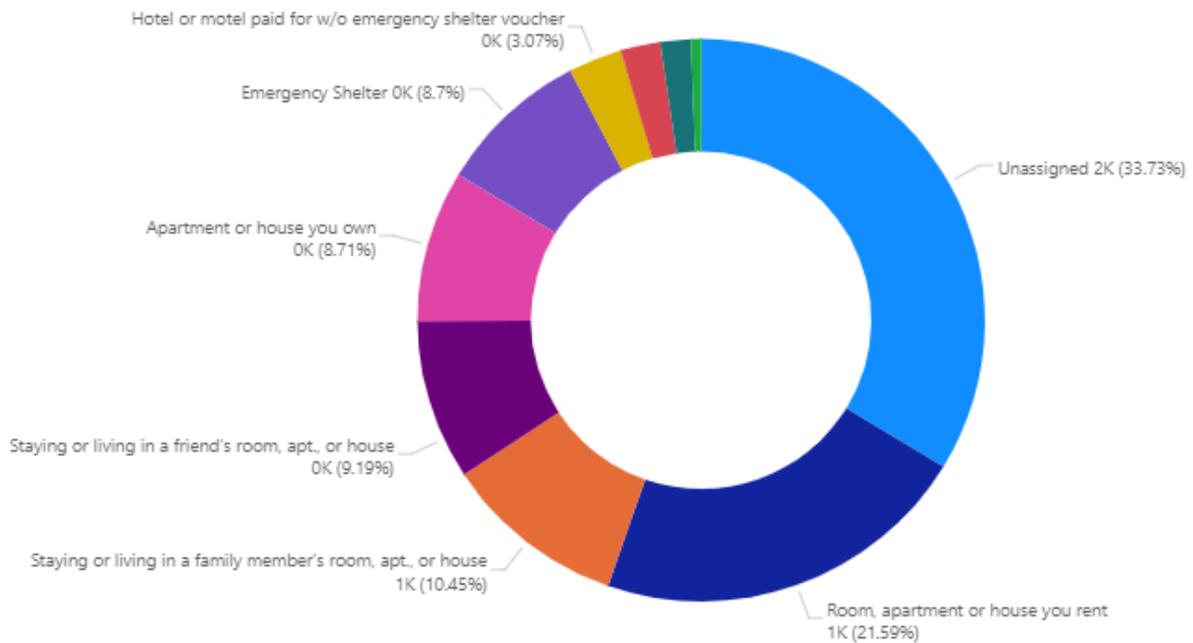
The housing data provided from InfoNet follows national trends on lack of stable housing for survivors. In 2019, less than 20 percent of survivors reported having a permanent housing solution (as defined as a home or apartment either rent or owned, or as permanent housing checked). Additionally, the data shows that in 2019 only 24 percent had housing tenure marked as permanent. This pattern also continues in the data shown on the next page showing the type of residence and length of stay at previous place [70]. This data is collected for those who receive housing services.



InfoNet 2019 Length Of Stay in Previous Place



InfoNet 2019 Residence Type





# SURVIVOR STORY: IMMIGRATION AND DOMESTIC VIOLENCE



Olivia\* is an immigrant, a student, and a survivor of domestic violence residing in the United States on a student visa. Within the last 5 years, she has lost her housing 3 times. Various reasons precipitated these losses including eviction, unbearable living conditions, interpersonal conflict, and the loss of a personal source of food, housing, and/or money. Olivia's housing history consists of renting 4 times, staying with a friend on 2 separate occasions, staying with a family member once, living in a motel/hotel room once, and stayed in a vehicle once. Currently Olivia has been living with a friend between 3 months to 1 year.

Olivia was originally seeking assistance from a domestic violence agency for counseling but, later required additional support after the person she relied on for housing and finances was unable/unwilling to help her anymore. This forced her to seek employment assistance, financial assistance for her health and student fees, and for stable housing.

While Olivia is under her student visa, she does not have a social security number. Her lack of a social security number prevents her from receiving transitional housing, TANF, food stamps, non-cash benefits, and other services which she repeatedly states that she needs. However, she has currently received \$500 through general assistance. Due to these circumstances, Olivia has stated that she does not feel hopeful about her future.

\* This is a pseudonym and this narration and survivor quote was taken from de-identified case level survey data.

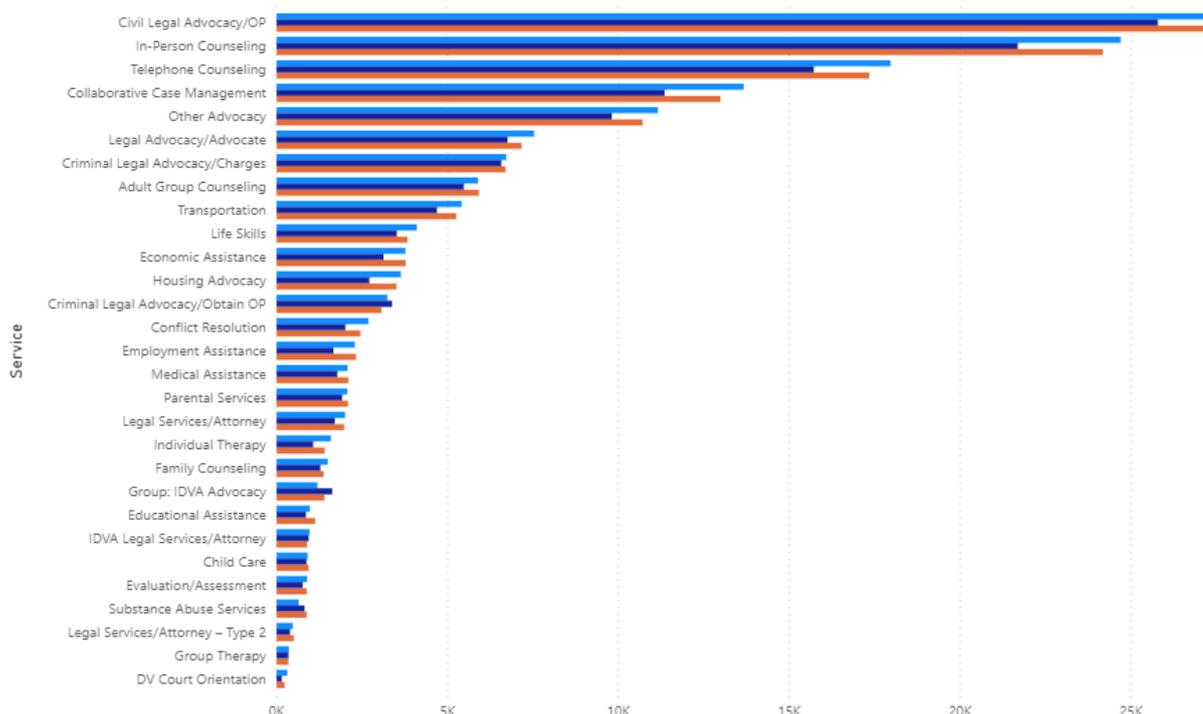
# Needs of Survivors

Throughout Illinois there are a multitude of services provided. The list to the right and the graph below show only a selection of the services offered in Illinois, excluding the least offered and utilized. The services provided to the most clients in 2019 were legal advocacy, counseling, and case management [71].

Service	2019	2017	2018
Civil Legal Advocacy/OP	27,367	25,780	27,351
In-Person Counseling	24,692	21,679	24,172
Telephone Counseling	17,961	15,715	17,339
Collaborative Case Management	13,666	11,350	12,986
Other Advocacy	11,155	9,803	10,708
Legal Advocacy/Advocate	7,536	6,756	7,165
Criminal Legal Advocacy/Charges	6,719	6,573	6,697
Adult Group Counseling	5,889	5,474	5,915
Transportation	5,416	4,690	5,254
Life Skills	4,100	3,515	3,828
Economic Assistance	3,768	3,128	3,775
Housing Advocacy	3,633	2,708	3,507
Criminal Legal Advocacy/Obtain OP	3,239	3,377	3,070
Conflict Resolution	2,689	2,012	2,451
Employment Assistance	2,286	1,661	2,322
Medical Assistance	2,076	1,773	2,097
Parental Services	2,066	1,917	2,087
Legal Services/Attorney	2,004	1,704	1,974
Individual Therapy	1,587	1,069	1,404
Family Counseling	1,496	1,279	1,375
Group: IDVA Advocacy	1,194	1,629	1,401
Educational Assistance	976	858	1,127
IDVA Legal Services/Attorney	966	936	891
Child Care	908	874	938
Evaluation/Assessment	888	764	880
Substance Abuse Services	647	817	877
Legal Services/Attorney – Type 2	472	388	506
Group Therapy	358	345	346
DV Court Orientation	309	147	232
Individual Children’s Counseling	232	171	167
Art Therapy	206	163	158

InfoNet Services Provided by Category

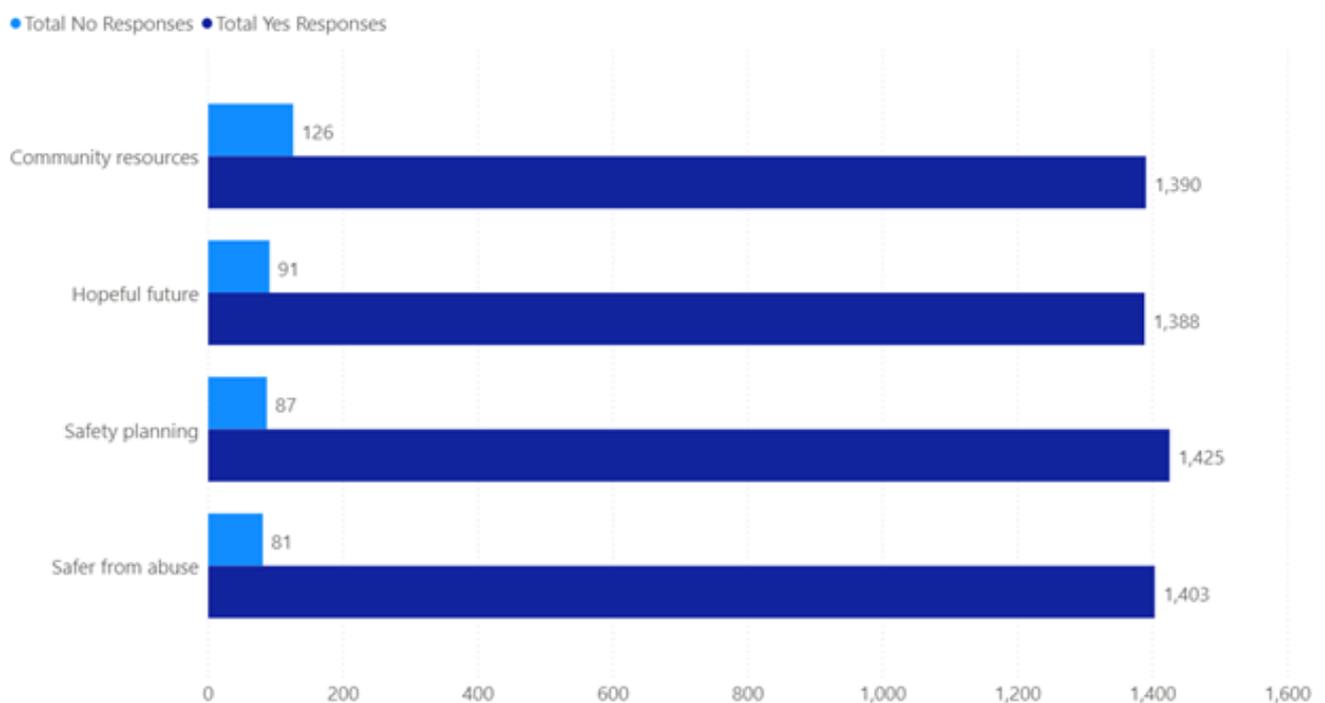
● 2019 ● 2017 ● 2018



When deciding what services to offer survivors it is important to note that the services that are currently provided have positive outcomes associated with them, noting the data limitations. In 2019 when asked if the services they were provided with, majority of survivors responded in the affirmative to questions regarding increased access to community resources, seeing their future as hopeful, safety planning, and feeling safer from the person who had caused them harm [72].

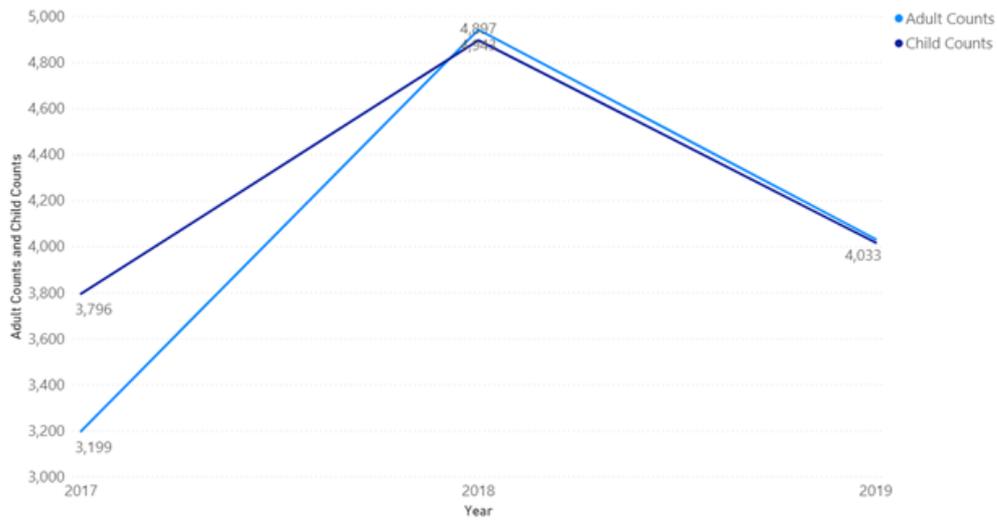
These services, however, still have limited capacity, and many survivors are turned away by service providers. In 2019, 4,033 adults and 4,018 children were turned away from a domestic violence service provider\*. On the following two pages these numbers are broken down across regions. The northern and southern regions have seen their turn away counts decreasing over recent years, but the suburbs have had a steady increase in the number turned away [73].

InfoNet 2019 Service Outcomes

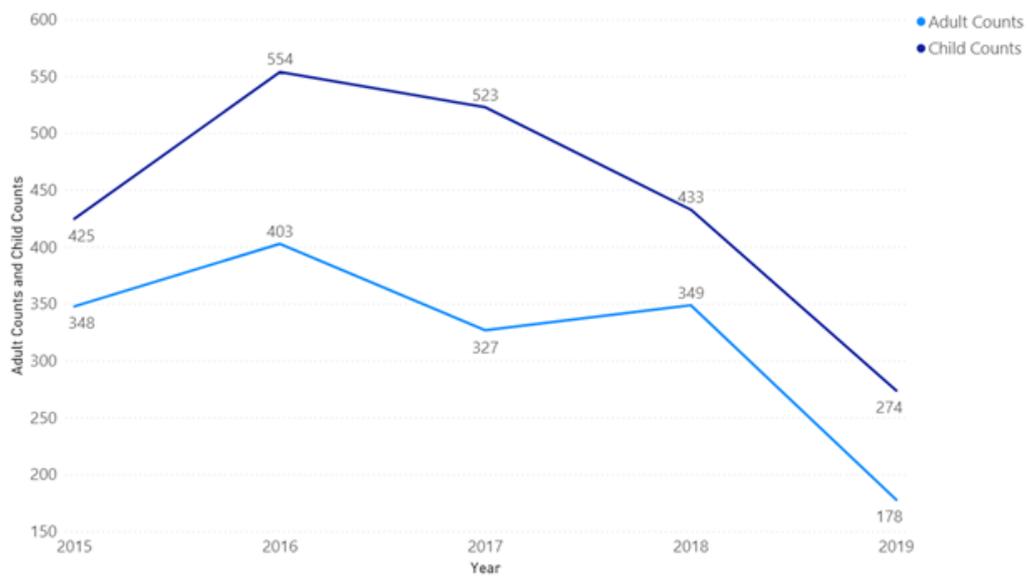


\*Turn-Away counts are duplicated when clients are turned away from multiple providers in their efforts to find shelter.

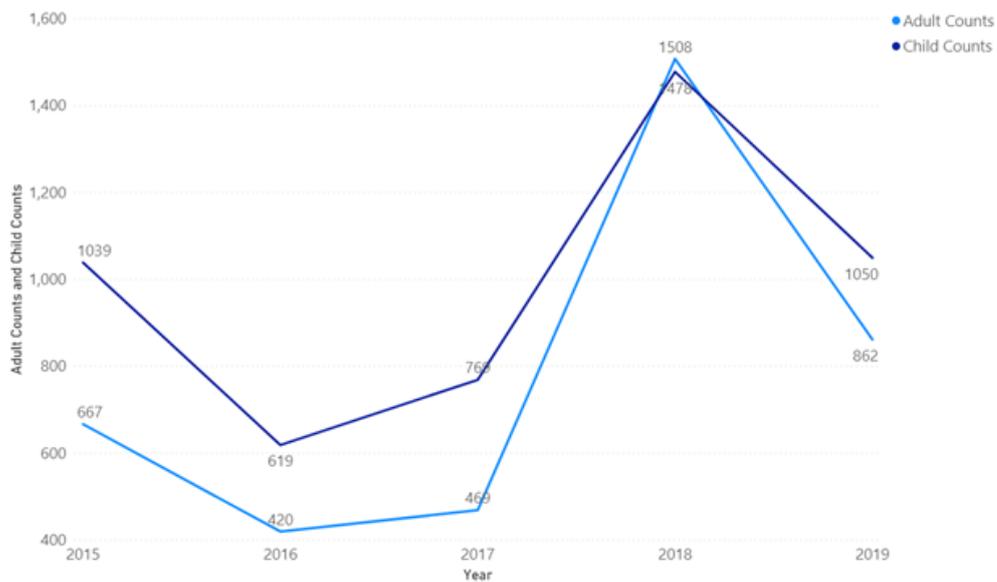
InfoNet Illinois Turn Away Counts



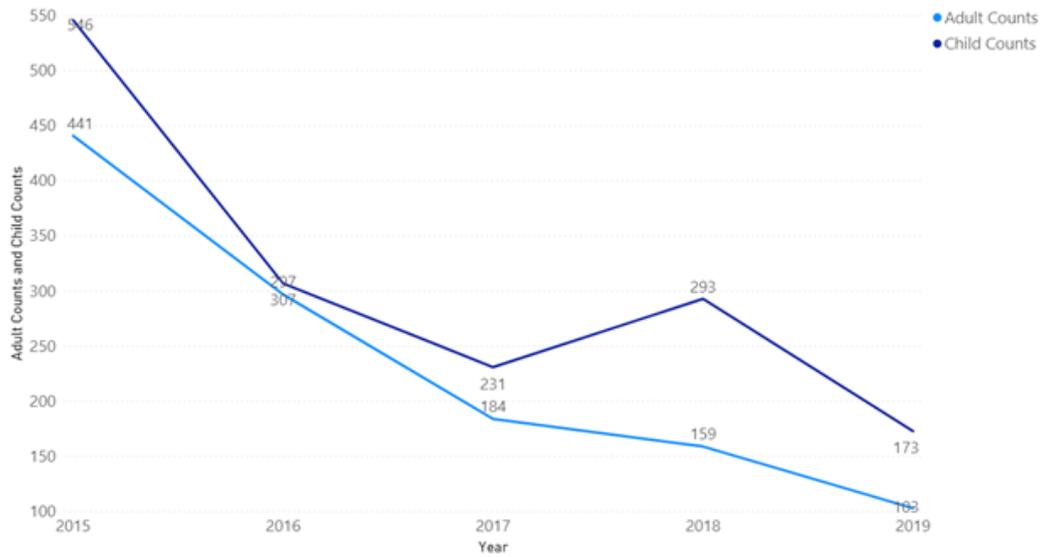
InfoNet Central Illinois Turn Away Counts



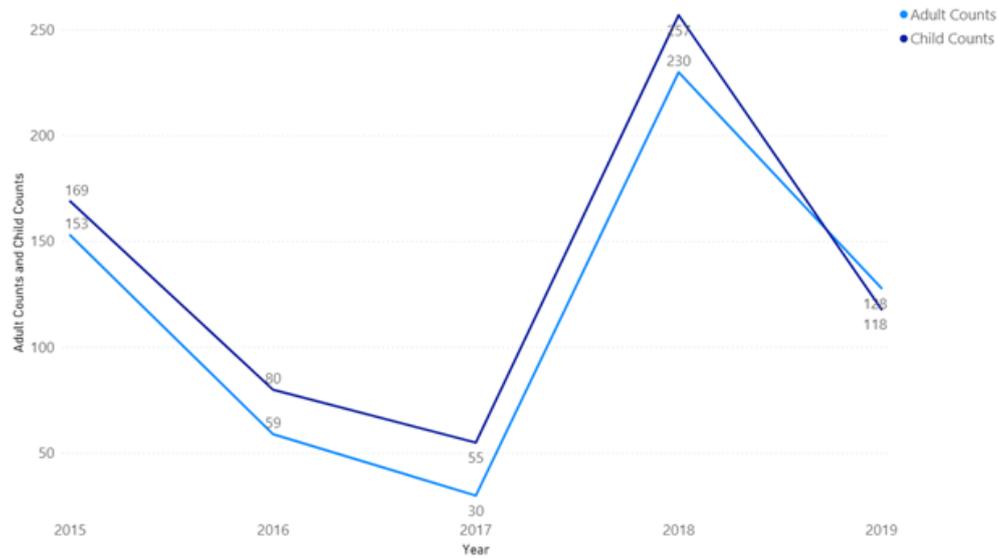
InfoNet Chicago Illinois Turn Away Counts



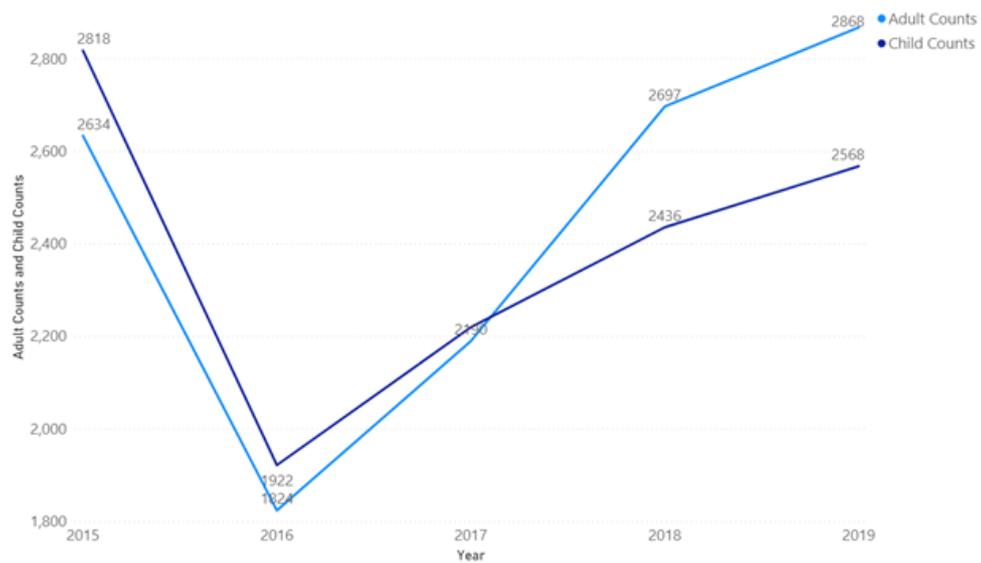
InfoNet Northern Illinois Turn Away Counts



InfoNet Southern Illinois Turn Away Counts



InfoNet Illinois Suburbs Turn Away Counts





# SURVIVOR STORY: RESILIENCE AND STRENGTH



Within the past five years Isabelle\* has experienced a loss of housing twice. The only explicitly specified contribution to her housing instability is abuse perpetrated by her husband. Isabelle did not disclose how long she has been married, but is still legally married although she has plans to change this status. Isabelle is the mother to one child, and appears to have full custody of this child.

While shelter and housing are Isabelle's primary needs, she has additional stated needs. Prior to receiving any services, she lists that she "might" need assistance with finances, mental health, parenting, personal safety, employment and marital status', and other legal services. Isabelle is a high school grad receiving \$800 per month in wages. As a mother, and a Chicago resident, this is not a livable wage to either attain or maintain independence from her previous situation. Additionally, Isabelle was able to supplement her wages with services that she is eligible for including TANF, Food Stamps (SNAP/LINK), Medicaid, and All Kids (state health insurance for her child).

Prior to receiving any assistance, Isabelle stated she needed both emergency shelter and permanent housing. Either during her first or second relocation, Isabelle was able to receive a safety transfer from the CHA, the Chicago Housing Authority. More recently Isabelle was able to find housing where she stayed for at least 1 year and was able to obtain emergency rental assistance for the initial deposit/first month's rent. While it is known that Isabelle moved twice in the past two years, this most recent living situation is the most detailed housing description she provided. She last received DV services 6 months ago and she is not currently receiving services relating to DV.

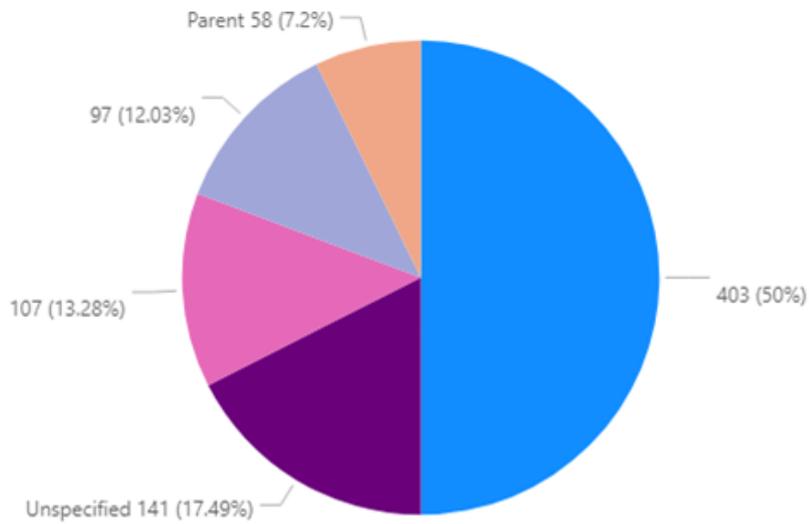
\* This is a pseudonym and this narration was constructed from de-identified case level survey data.

# HEALTH DATA

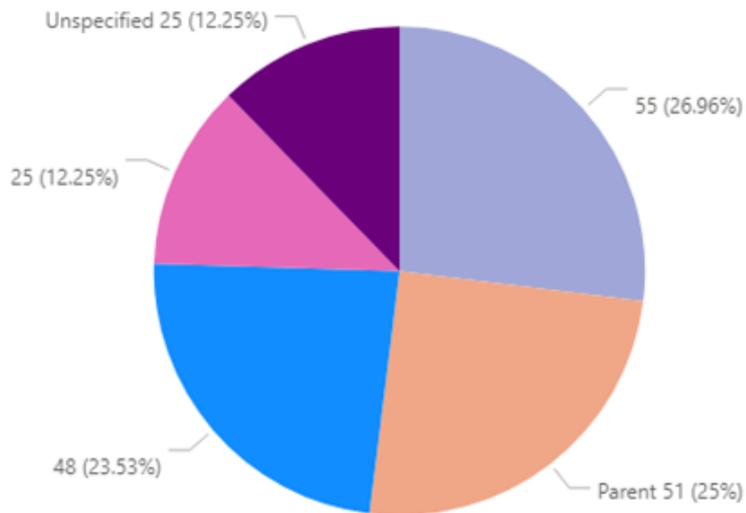
Another place domestic violence can be represented is within the medical system. To represent this, data was obtained from the Cook County Department of Public Health. The most recent data available was from 2016 and 2017. In 2016 there were a total of 1,829,196 visits to Cook County emergency rooms. Of these visits, 1,101,461 were female patients and 814,582 were male[74]. In 2017 there were a total of 1,816,501 visits to Cook County emergency rooms. Of these visits, 1,002,545 patients were female and 813,956 were male. Data is not available on transgender and gender nonbinary identifying patients. In 2016, 806 of the female patients visiting, 803 were being treated for a problem related to assault, maltreatment, or neglect. In 2017, 763 of the female patients were being treated for a related problem. In 2016, 204 male patients were being treated for problems related to assault, maltreatment or neglect. In 2017 this number was 161[75]. On average female patients were nearly 350 times more likely to be treated for an issue related to assault, maltreatment, and neglect[76].

The person who caused harm in each case is recorded as one of the following: spouse or partner, parent, other family member, non-family member, or unspecified. For female patients in 2016, the person who caused harm was their spouse or partner in 50 percent of the cases. In 2017, the person who caused harm to female patients was their spouse or partner in 61 percent of the cases. For male patients, this value was 24 percent in 2016 and 33 percent in 2017[78]. This data demonstrates the gender differences in domestic violence. The description of the person who caused harm for each patient is on the next page.

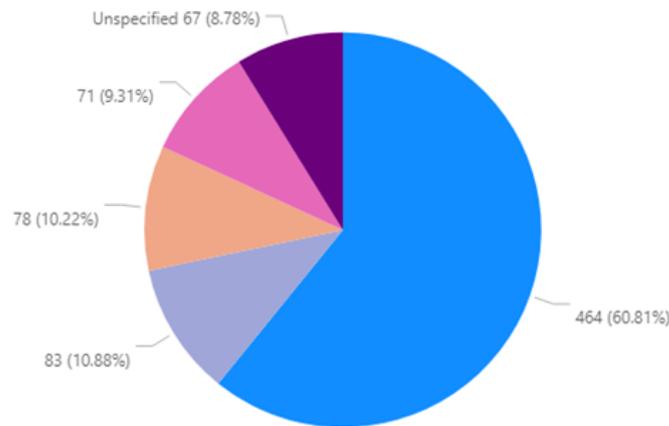
### 2016 Relationship of Person Who Caused Harm to Female Patients



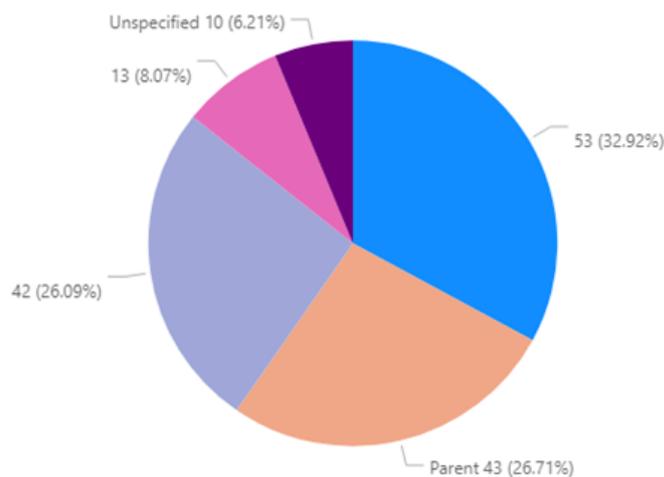
### 2016 Relationship of Person Who Caused Harm to Male Patients



2017 Relationship of Person Who Caused Harm to Female Patients



2017 Relationship of Person Who Caused Harm to Male Patients



The data provided by the Cook County Department of Public Health (CCDPH) described above paints only a limited picture of domestic violence represented in the medical world. This is due to the method of data collection used by CCDPH. CCDPH relies on billing codes to track data. There is no specific billing code for domestic violence and therefore there are likely many other survivors who seek medical attention for an injury related to domestic violence or who may report during a visit for an unrelated issue that are not represented in the data.

Despite the limitations of the data the authors have chosen to include the data provided as it likely represents a subsection of survivors who may not be represented elsewhere.



# SURVIVOR STORY: REBUILDING LIVES



Miranda\* found resources through a domestic violence advocacy and service agency located in the Chicago Metropolitan area. At the time of the survey, she was no longer receiving services, and had not been for approximately 5 months. She is a Latinx woman, and completed the survey in Spanish. She has at least one child and received TANF benefits.

In the past five years Miranda has had one episode of housing loss, but additionally reports that she lived in a variety of unstable housing circumstances in her life. Miranda attributes all of her housing instability to the person she was living with throughout her life. Miranda was able to divorce her partner and is no longer living with him. The specifics of her housing history are unclear from her survey, but she identified having lived in an apartment/room rental as well as homeless and emergency domestic violence shelters. Given her receipt of TANF for at least one child, it can be assumed that she has custody over her children. At some point she obtained an Order of Protection against her abuser, but unclear how connected this is to her housing.

Miranda is currently residing with a friend /coworker that she knows through work, and has been living with this person for at least 1 year. She works part time and does not have any high school experience. Miranda's wages amount to \$1000 per month. She is not currently receiving child support.

\* This is a pseudonym and this narration was constructed from de-identified case level survey data.

# AREAS FOR FUTURE RESEARCH

## **Expanding Healthcare Data:**

As mentioned in the last section of this report, there is a limited amount of data readily available to depict domestic violence through the health system. There is potential for additional additional research in this area as healthcare workers are mandatory reporters, creating a possible pathway for data collection. Illinois law (20 ILCS 2630/3.2) “requires any person conducting or operating a medical facility, or any physician or nurse, to report treatment of injuries to local law enforcement when it reasonably appears that the person requesting treatment has suffered from an injury caused by the discharge of a firearm or sustained in the commission of, or as the victim of, a criminal offense” [79].

In addition to mandated reporting, Illinois law states specific protocols that healthcare workers must follow when caring for patients who have experienced abuse. The first protocol (77 Ill. Adm. Code 250.1035) states that all licensed hospitals must have “policies regarding the identification of possible victims of abuse, [and those policies must] address patients’ special needs relative to the patient assessment process, including consent, evidence collection, notification and release of information to authorities, and referrals to community agencies” [80]. An additional protocol (750 ILCS 60/401) states that once abuse is suspected, healthcare professionals must immediately provide comprehensive information about available services [81].

In the 2005 reauthorization of The Violence Against Women Act (VAWA), forensic compliance provisions were put in place which mandates that all people who experience domestic violence or sexual assault are to be provided with a medical forensic exam free of charge regardless of their participation in the criminal justice process. State statutes cannot require the person who was harmed to personally talk with a law enforcement officer even when the state requires that healthcare providers act as mandatory reporters. In states, such as Illinois, where healthcare providers act as mandatory reporters, victims cannot decide whether this report will be made, but they can decide whether they want to provide any information in connection with the report or personally talk to law enforcement [82]. Exploring these laws and pathways may lead to additional data sources for future reporting.

## **COVID-19 and Domestic Violence:**

Another area of future research are the long-term impacts of COVID-19 on domestic violence in Illinois. Throughout the data collection for this report, Network staff found state agencies and service providers under too much additional stress to provide detailed information. The Network is hopeful that in future years they will be able to have more collaboration and include more data. In addition to limiting data availability, COVID-19 is also directly impacting survivors.

In response to the worldwide spread of the COVID-19 pandemic, governments around the world have issued mandatory lockdowns. While this may be effective in fighting the pandemic, these lockdowns have caused cases of domestic violence to skyrocket around the world and have impacted survivors across all systems. According to a Bristol University sociologist, Marianne Hester, incidences of domestic violence rise when families spend more time together, and putting families in lockdown can be explosive [83]. The rise in violence has put additional strains on resources, many of which have been severely impacted by the pandemic. For example, shelter options may be limited due to increased fears of disease spreading amongst people living in close quarters. Additionally counseling centers and courthouses have attempted to move their services online which can be inaccessible to individuals without the technology necessary to access these services. The pandemic also impacts travel, which can greatly impact a person's escape or safety plans [84].

Illinois has attempted to address the increase in violence by expanding the state's services. This plan streamlines the Illinois Domestic Violence Helpline by using the helpline to connect people experiencing violence to shelter services or emergency shelter through hotels, motels [85], and in Chicago some AirBnBs [86]. Other Chicago specific services include donations by Uber and Lyft to provide free ride services to people trying to go into shelter during the pandemic [87]. A full understanding of how COVID-19 will impact survivors and service providers in Illinois is not yet possible.

### **Additional Court Information:**

While obtaining data from the court system is crucial to understanding how the criminal justice system is navigating charges of domestic violence in Chicago, obtaining court data is easier said than done. The Network has continued to face barriers to obtaining misdemeanor data for Cook County. The State's Attorney's office only has handcount data which they are unwilling to share. They have had continuing conversations with the Court Clerk's office to develop a method of providing official records. The Network is hopeful that they will be able to obtain and utilize this data for future reports. Most domestic violence offenses are charged as misdemeanors, and this information would provide the most insight to the state of domestic violence in the county.

### **Geographic Data:**

Another area of future research is the analysis of the locations where violence occurs. This information could be used to better understand if local service providers are meeting the needs of survivors in specific geographic areas. This analysis could tell the domestic violence community if there are any geographic mismatches or service disparities related to race and/or socioeconomic status. Theoretically the locations of incidents of violence could be gathered from CPD stats, such as where domestic fatalities occur, the locations of different service providers, and geographic locations of survivors. Unfortunately, gathering this information is rather difficult because disclosing survivors' geographic locations is a breach in confidentiality. Additionally there is not a cohesive database of clients that different service providers have served, and The Network did not have the time or resources to track down individual service providers for this report.

### **Criminalization of Survivors:**

The criminalization of survivors refers to people “thrust into the criminal justice system because they retaliated against abusive partners or committed crimes as a result of abuse; [often] they face arrest, prosecution and punishment” [88]. In fact the vast majority of female-identifying people experiencing incarceration have experienced sexual violence (86%) or intimate partner violence (77%) [89]. Although The Network is aware that the criminalization of survivors is happening in Cook County, the rate at which this is happening was hard to find. The Network reached out to several organizations that work with people experiencing incarceration, but no organization tracked the criminalization of survivors on a larger scale. The Network also had a difficult time obtaining data on how bond funds are collected. The Network is hopeful that it will be able to provide a more specialized report on the criminalization of survivors in the future.

# CONCLUSION AND RECOMMENDATIONS

## **Addressing Systemic Inequality**

Race and ethnicity can play large roles in both the chances of a person experiencing domestic violence and the care that the survivor will receive. In 2019 alone, 8,000 of the 10,800 calls to the Illinois Domestic Violence Hotline were made by people of color [90], and over half of multiracial women and nearly half of Indigenous/Native women will experience domestic violence in their lifetime [91]. Racism is not only a tool that can be used to cause harm, but can provide service barriers to victims of color. It is imperative that policies seeking to address systemic inequalities relating to race and ethnicity be supported in order to decrease violence and better serve communities of color.

In addition to race and ethnicity, lower socio-economic status can put a person at an increased risk for experiencing domestic violence. People experiencing domestic violence may have disruptions to their work schedule that low-wage jobs are less willing to forgive than higher-wage jobs. Survivors with low socio-economic statuses also face unique barriers when trying to access services [92]. Due to the large number of survivors who can be identified as having a low socio-economic status, policies and services need to better address this reality and address the needs associated with this status.

## **The Improvement of Survivor Services**

Along with addressing larger societal issues, it is equally as important to meet the individualized needs of survivors. No two survivors' experiences are exactly the same, therefore service models must be individualized to meet the unique needs of different survivors. Housing is a good example of this. The traditional, oftentimes blanket, model of placing survivors and dependents in short-term shelters or transitional housing has shown to be ineffective in preventing survivors from experiencing homelessness [93]. Service providers must create more individual case plans for survivors and their families instead of assuming a "one-size fits all" approach.

## **Evaluating Court Services**

When a person who harms becomes involved in the court system, it is crucial that the survivor's voice is heard. Marsy's law gives survivors the right to be heard at any post-arraignment court proceeding where the outcome might impact the survivor or their safety [94]. The Network is currently developing data to better understand the extent to which survivors' needs and wishes are being heard and honored during court procedures. This data will allow The Network to make specific recommendations regarding this important issue.

## **Prevention and Provider Support**

Lastly, The Network supports the continuation of funding for service providers and supports policies that move communities towards the prevention of domestic violence. The prevalence of domestic violence across communities is persistent and overwhelming. Fortunately, organizations are continually working to provide services to survivors of harm, people who harm, and to prevent future harm. These providers must receive continuous, and often increased, levels of funding in order to perform these essential tasks.

The Network would like to end this report with an emphasis on the importance of prevention work. This report has highlighted the overwhelming prevalence of domestic violence throughout the state. Organizations, advocates, and allies must work together in order to create policies and programs that stop violence before it starts. Prevention is the only way to see an end to domestic violence.

## DOMESTIC VIOLENCE & HOUSING

# DOMESTIC VIOLENCE OUTCOME MEASURES PROJECT

## 2019 SURVEY DATA RESULTS

Results from the Domestic Violence Outcome Measures Project Survey, an ongoing project that was first implemented in 2014, were compiled to examine housing concerns among survivors of domestic violence. The DVOM survey assesses outcomes of services three or more months after clients first seek help at agencies that provide services to those that have experienced domestic violence (DV). In total the DVOM survey has collected 842 responses since 2014, when the DVOM project was first implemented at 15 different DV agencies. For a 2019 report on the state of DV, the DVOM survey was modified to better measure housing needs and the impact of domestic violence on housing instability.

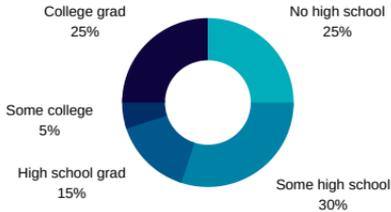
**CENTER FOR URBAN  
RESEARCH AND  
LEARNING**

Loyola University Chicago

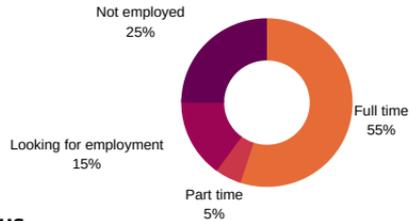
# DEMOGRAPHICS

In 2019, the DVOM survey collected results from 20 respondents from four different domestic violence agencies in Chicago. Some demographic data such as marital status, education level, and employment at the time of the survey was gathered. Information regarding income, non-cash benefits, and healthy insurance are also collected.

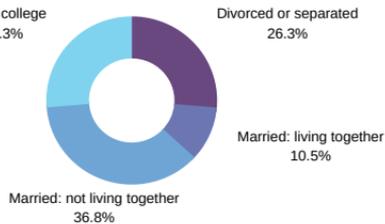
## Education Level



## Employment Status



## Marital Status



## Income

Respondents reported various sources of income including wages worked, wages from another household member's work, TANF (Temporary Assistance for Needy Families) benefits, SSI, and benefits from General Assistance. The average income from wages among the 20 respondents was \$10,864 per year and ranging from \$0 - \$2800 per month. Almost all respondents reported multiple sources of income. One respondent reported no financial resources whatsoever.

## Non-cash Benefits

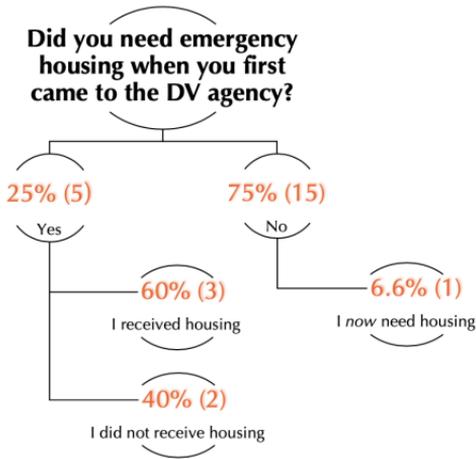
Respondents also received some assistance from non-cash benefits. 55% (11) respondents received SNAP food benefits and one respondent received Section 8 Housing. Of the 20 respondents, no one received WIC or TANF non-cash benefits such as child care services, transportation, or funded services.

## Health Insurance

50% (10) respondents indicated that they received Medicaid health coverage along with State Children's Health insurance (15%). One participant had Medicare and one participate had private health insurance. However, 35% (7) respondents also indicated having no medical coverage at all.

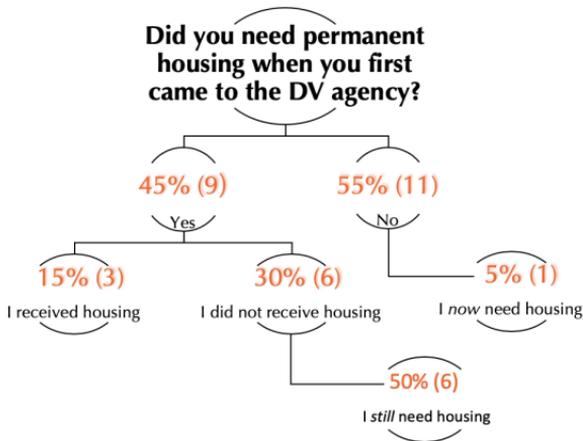
# Emergency Housing

In 2019, 25% of the respondents reported the need for emergency shelter when they first sought services at a DV agency. In comparison, survey responses collected from previous years indicate similar needs for emergency housing. Previously, 22.7% of respondents reported the need for emergency shelter. Of those who needed shelter, 60% received shelter from the DV agency.



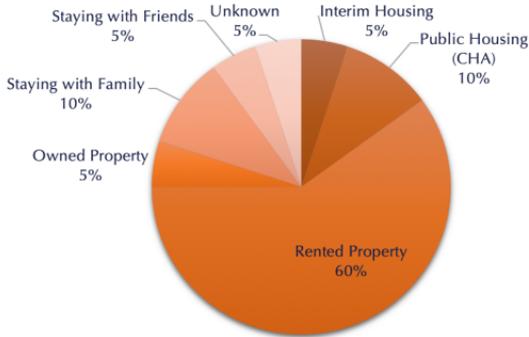
# Permanent Housing

45.6% of the respondents reported the need for permanent housing when they first arrived at the DV agency. Of these 15% received permanent housing, and of those that did not receive it, 50% were still in need of permanent housing. In comparison to previous years, 30% of respondents needed permanent housing and 11% had received permanent housing.



# CURRENT RESIDENCE

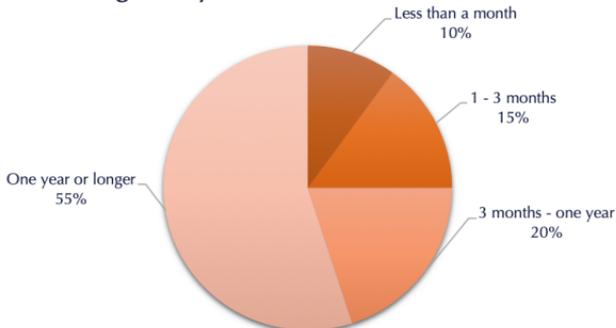
## What type of residence are you currently living in?



Of the 20 respondents that took this survey in 2019, 60% lived in a rented property at the time they took the survey and only 5% lived in a property they owned. Approximately 10% of the respondents were living in public housing (Chicago Housing Authority or CHA). About 5% of the respondent were in interim housing and the remaining were living with family or friends.

Moreover, about half (55%) of survey respondents had lived at their current residence for one year or longer. However, 25% of respondents had lived in their residence for less than 3 months. These results from 2019 were similar to those found from previous years.

## How long have you lived in the current residence?



# Housing Instability

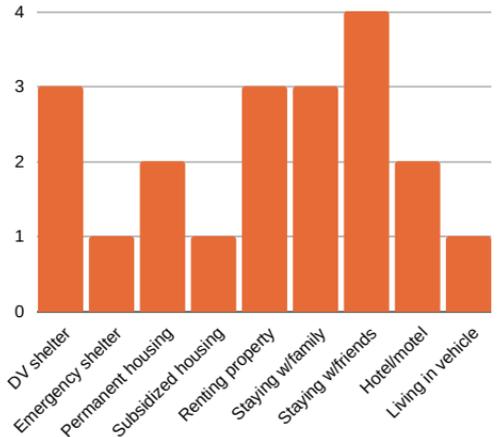
# 7

## out of 20

(35%) of respondents in the 2019 study reported that they had experienced housing instability at least once in the past five years. On average, survey respondents experienced housing instability 2.3 times during this time.

### THE TYPE OF HOUSING RECEIVED

Respondents that reported having lost their home were also asked if they were able to secure new housing or shelter and the type of housing they received. Staying with friends or family, renting an apartment or home, and domestic violence shelters were the more common responses to this question. None of the seven respondents that lost housing indicated that they ever received housing through CHA or transitional housing.



### REPORTED REASONS FOR LOOSING HOUSING

- Lost job or income
- Increased expenses
- Building was sold
- Eviction: concerns related to domestic violence
- Eviction: other concerns
- Unbearable living conditions
- Interpersonal conflict (separation, divorce, argument)
- Abuse: by someone they were living with
- Abuse: by someone they were not living with
- Lost support from someone they were dependent on
- Needed a safe place to go

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- [73] Author analysis of InfoNet Data provided by ICJIA, March, 2020. - Regional data is not automatically tracked in InfoNet and this was approximated using the location of the service agency. Additionally, turn away counts are an optional question and have some potential for duplication.

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- [89] Ibid.
- [90] Author analysis of Illinois Domestic Violence Hotline Data obtained through the internal database, iCarol, January, 2020.
- [91] Ibid.
- [92] Ibid.
- [93] Ibid.
- [94] Ibid.



**The Network**

**ADVOCATING AGAINST  
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