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For their safety, they remain anonymous.
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Executive Summary
**Executive Summary**

Annually, The Network: Advocating Against Domestic Violence (The Network) publishes this report to assess the documented instances of gender-based violence and responding service providers in Illinois. The Network gathers experiences from survivors and gender-based violence service providers to depict both a quantitative and qualitative analysis of the types of challenges and safety nets survivors encounter through their experiences.

The goal of each annual report is to learn from survivors and providers about the nature of violence, the gaps in services and systems, and the steps needed to repair harm as well as prevent further violence.

This report analyzes survivors’ interactions with key systems across the state, highlighting areas where they need improvement to effectively support survivors. However, the primary focus of the Measuring Safety 2022 data report is to provide a blueprint for public and private stakeholders to invest in services, programs, policies, and systems change that increase safety for survivors.

**KEY TAKEAWAYS**

**Increasing Lethal Violence Demands Non-Police Alternatives**
A snapshot of Chicago Police Department data shows domestic violence related homicides and homicides involving firearms have increased in the last three years. This increase in lethality disproportionately affects communities of color. Contacts to Chicago Police Department related to domestic violence continue on a downward trend, reflecting an 12% decrease in 2022 compared to 2020, even as contacts and referrals to the Illinois Domestic Violence Hotline increase. Together, this suggests that non-police response systems are needed to intervene for survivors who do not feel police are the right tool to meet their needs.

**Growing Contacts to the Illinois Domestic Violence Hotline Outside of Chicago**
Calls to the Illinois Domestic Violence Hotline continue to increase. In 2022, there was a 15% increase in contact from 2021 and a 50% increase in contact compared to 2019. Contacts continue to grow from outside of Chicago and Cook county demonstrating an increasing awareness of the Hotline across the state.
Housing and Financial Independence are Top Survivor Needs
Survivor needs continue to be centered around housing and financial independence. Shelter requests composed 34% of all calls to the Illinois Domestic Violence Hotline, continuing to be the highest need for three years in a row. Contacts requesting financial assistance increased by 475% in 2022 compared to 2021 totals, likely due to several factors, including the reduction of COVID-19 related financial support systems like extended unemployment benefits.

Legal Advocacy and Counseling Services Widely Provided
Legal advocacy and counseling client cases outpace all other client services in 2022. The constant need for mental health support and services is also reflected in the 74% increase in calls to the Hotline requesting group counseling services, underscoring both the limited capacity of individual counseling but also the desire for mental health services.

Housing Accessibility for Survivors
Federal and local regulations related to housing, including Crime Free Ordinances, continue to layer the challenges survivors experience and the systems which they are required to navigate when depending on publicly funded housing options.

Improving Data Collection and Accessibility Practices
Data can make barriers to survivor safety visible or invisible. Public entities like the Administrative Office of the Illinois Courts can support systemic improvements by making order of protection filing data publicly available. Gender-based violence service providers would benefit from expanding data collection on growing issues like the presence of firearms in client cases.
Introduction
Who We Are

The Network: Advocating Against Domestic Violence (The Network) is a diverse, collaborative, membership-driven organization composed of over 40 organizations that provide gender-based violence services in the Chicago Metropolitan Area.

The Network is dedicated to improving the lives of those impacted by gender-based violence through education, public policy, and advocacy, and connecting community members to direct service providers.

Each year, The Network releases a comprehensive overview of the statewide response to gender-based violence, with a particular focus on domestic violence and sexual violence. In this edition, the report examines survivors’ relationships with law enforcement, the criminal and legal systems, and housing programs while centering survivor stories and profiling programs that provide a comprehensive approach to addressing gender-based violence throughout Illinois.

The services identified in this report are critical to survivor wellbeing and address the survivor as a whole person—one who is growing up surrounded by violence, is parenting or in need of economic assistance, or may require mental or physical health care. Our report also examines the critical preventative and healing nature of programs supporting children experiencing violence. The holistic nature of these services represents key strategies in shifting towards a more community-based response to gender-based violence.
Methods & Terminology
Methods

The data analyses conducted throughout the report draw on data collected from the following resources: survivor and staff interviews, service provider surveys and focus groups, Illinois Domestic Violence Hotline (IL DV Hotline), InfoNet, reviews of existing academic literature, and Freedom of Information Act (FOIA) requests to public entities like the Chicago Police Department (CPD), Illinois State Police (ISP), Department of Children and Family Services (DCFS), Chicago Housing Authority (CHA), Cook County Department of Public Health (CCDPH), and Illinois Department of Human Services (IDHS). Each source is cited throughout the report where appropriate and detailed notes regarding the collection processes are noted as relevant. The following pages outline a brief overview of the collection and analysis procedures.

Survivor Interviews

The Network worked with its membership of service providers and social media network to connect with survivors for hour long interviews about their experiences. Twenty-one interviews were conducted, 18 via Zoom and 3 were conducted via survey for currently incarcerated survivors. One of these interviews was conducted in Spanish by Network staff. All survivors were compensated for their time. While the survivors who were interviewed are not fully representative of all survivors throughout Illinois, they still provide vital insight into the experiences that many survivors face.

Illinois Domestic Violence Hotline

The Network operates the Illinois Domestic Violence Hotline (IL DV Hotline or The Hotline) in partnership with the City of Chicago’s Department of Family and Support Services. The Hotline is a 24-hour, 7 days-a-week resource for survivors throughout the state. The Hotline data is collected by Victim Information and Resource Advocates (VIRAs) while on calls utilizing iCarol, a web-based Hotline software tool. As the safety and security of survivors are the first priority on any call, many questions go unanswered in order to maintain a trauma-informed and survivor-centered call response. Additionally, survivors are never required to answer questions they are not fully prepared and willing to share. These procedures limit the data available for analysis.
InfoNet

InfoNet is a web-based system run by the Illinois Criminal Justice Information Authority (ICJIA). Domestic and sexual violence service providers throughout the state enter data into the database regarding their service activities. Some of the categories collected are required by funders and the Illinois Department of Human Services while others are not required. These optional sections are usually not fully completed by providers and their clients which limits the data available on some topics. The Network staff submitted a request for InfoNet data for 2022 to capture information pertaining to domestic violence and sexual violence service providers. This report is the first to include sexual violence service provider data and therefore does not have data from previous years as a point of comparison and trend analysis. Some data are divided by region. The region refers to the center’s location rather than the location origin of the individual receiving services. Some providers have multiple locations but enter data into the same account. For these 3 providers, the region was estimated based on the portion of clients that lived in each region (Chicago or suburbs). These regions are derived from the labels used by the Illinois Department of Human Services with Chicago including the city, the Suburbs including suburban and collar counties, the North including the Northern and Northwest Regions, Central including the West Central, North Central, Central, Northeast Central, Southeast Central, and Southwest Central regions, and the South encompassing the Southern region. While InfoNet collects data throughout the state, there may be providers in counties or jurisdictions that do not utilize InfoNet for data tracking of their programs.

Service Provider Surveys & Focus Groups

The Network staff developed surveys that were distributed to member organizations focused on specific program areas. The Network received 8 completed responses. These responses informed program profiles and details on provider programs provided throughout the report. The Network staff also hosted two provider focus groups to discuss provider and survivor needs.

VIRA Interviews

Network Victim Information and Resource Advocates (VIRAs) with expertise managing Illinois Domestic Violence Hotline calls and crisis response were interviewed to provide insight on calls to the Hotline and survivor needs.

Other Data

All other data was collected through Freedom of Information Act Requests submitted to public entities including all housing authorities, law enforcement, and city and state agencies according to availability.

Additional research was gathered to supplement the above data as needed. It is cited throughout the report.
Definitions & Language

Gender-Based Violence
Gender-based violence (GBV) refers to any type of violence entrenched in power and control inequities within relationships between genders. It stems from harmful gender norms and expectations. Gender-based violence includes domestic/intimate partner violence, sexual violence, stalking, and human sex trafficking. Any individual across the gender spectrum can experience gender-based violence. The term is used throughout the report to encapsulate all survivors and discuss general common trends seen amongst survivors.

Domestic Violence
Domestic violence or intimate partner violence (IPV) describes a pattern of harmful behaviors used by one partner to maintain power and control over another within intimate partnerships. The types of harm that occur in relationships are not always physical; they can also be emotional, psychological, verbal, financial, economic, social, reproductive, institutional, and health-based.

The Illinois Domestic Violence Act (IDVA) uses a more expansive definition of domestic violence. The IDVA provides remedies for those who have experienced harm from a family or household member. Relationships eligible for these protections include: “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.” Law enforcement, court personnel, and service providers rely on the IDVA definition of domestic violence. Therefore, data cited in this report from these sources reflect this latter definition.
Sexual Violence

Sexual violence is a non-legal term that describes a range of non-consensual sexual acts. Sexual violence encompasses—but is not limited to—rape, sexual assault, child sexual abuse, incest, unwanted sexual contact/touching, sexual harassment, sexual exploitation, watching or recording a private act without consent, and non-consensual sharing of explicit images. This violence can occur within dating/intimate partner relationships and among acquaintances, family, and strangers. Sexual violence can be part of a larger pattern of harmful behavior within a domestic violence context or can be a singular occurrence. Legal definitions of sexual violence and consent vary by state.

Illinois law criminalizes certain types of sexual violence, including sexual assault and sexual abuse. Criminal sexual assault refers to acts of sexual penetration and criminal sexual abuse includes acts of sexual nature, such as touching or fondling. Both require these acts to occur through use of force, threat of force, or knowledge that the victim cannot provide knowing consent. Other provisions exist for acts against minors. Illinois also criminalizes other forms of sexual violence such as revenge porn, incest, grooming, sexual exploitation, obscenity, and sexual harassment in the workplace.

Consent in Illinois is defined as a “freely given agreement to the act of sexual penetration or sexual conduct in question.” Lack of verbal or physical resistance or submission by the victim resulting from the use of force or threat of force does not constitute consent. Illinois law also specifies that what the victim wore at the time of the violence cannot serve as consent. Consent can be withdrawn at any time and initial consent does not apply once it is withdrawn.

This report will utilize “sexual violence” to encompass the various forms of sexual-related violence survivors may experience. Sexual violence survivors may have experienced one or more of the listed acts in addition to acts not listed.
**Survivor/Victim**

The terms “victim” and “survivor” are both used to describe a person who has been harmed. Increasingly, “survivor” is the preferred term within the domestic violence community, as it moves away from the passive connotation of “victim” to better reflect the perseverance and resilience of those who have been impacted by violence. Ultimately, however, the preferred term should be determined by the individual who experienced harm.

**Person Causing Harm**

The terms “abuser” and “perpetrator” are often used to describe a person who has harmed someone else. However, defining an individual solely in terms of their actions erases their humanity and subjectivity, as well as their own previous experiences of trauma or victimization. Such terms imply permanency and pathology to an individual’s identity, with no space for restoration. In contrast, a “person first” approach positions the person before their actions, allowing individuals to be perceived as more than their actions. “A person who harms” suggests the individual can transform their behavior and make amends.

**Demographic Identity Categories**

The lack of appropriate language in research often fails to encompass the lived experiences of those who are affected by relationship violence. In addition to silencing or further marginalizing individuals, these failures can have significant implications for advocacy efforts around funding, resource allocation, and service provision. To better articulate the varying identities of those affected by IPV, this report will use the preferred terms of the individuals being referenced. A few data points have also been edited to reflect this preferred language. Collected data may define racial and ethnic groups in different ways. Details on these procedures can be obtained from the original data sources. Some reported data employ a limited number of categories and may not, therefore, reflect the varied experiences of those impacted.
01

Reports of Violence to Law Enforcement
Documenting the prevalence of gender-based violence (GBV) in Illinois is a challenge, as there are many studies that have found that GBV is an underreported phenomenon. Underreporting has been linked with feelings of shame, self-blame, and a lack of cultural understanding of how GBV operates in survivors’ lives. Given this limitation, The Network has turned to multiple resources that survivors commonly lean on to assess reports of violence, including contact to law enforcement agencies, emergency medical services, and GBV service providers. This section will include details on the frequency and nature of reported gender-based violence, as well as demographic information about the survivors reporting it.

*Content Warning: This section does contain discussion of homicide and gun violence data.*
This section reviews data on violent experiences reported to law enforcement and includes information on homicides, gun violence, and calls for service related to domestic and sexual violence in several communities across Illinois.

Many survivors choose to contact law enforcement due to immediate fear for their safety or the safety of the person causing harm, and others do so in hopes of seeking long-term accountability through the criminal legal system. Other survivors may become involved with law enforcement involuntarily when bystanders, neighbors, or friends and family contact law enforcement on their behalf.

Some survivors may choose not to engage with law enforcement due to any number of reasons, including negative perceptions of or experiences with the police force, a desire to avoid the arrest of the person causing them harm due to emotional, financial, or logistical reasons, or because the person causing harm is a member of law enforcement. Survivors who do not engage with law enforcement are not represented in the call data reported in the following section but may be represented among the victims of fatal or near fatal violence. In other words, some victims of domestic violence homicide may have never contacted the police ahead of the incident of fatal violence.
Homicides & Gun Violence

Many factors increase a survivor’s risk of homicide, including violence during pregnancy, attempts to leave the relationship, and the presence of a firearm. The following section explores data regarding survivors who were killed in an act of gender-based violence in Illinois and those who faced gun violence, which is known to substantially increase the risk of experiencing post-traumatic stress disorder and often results in debilitating injury. As data for this section largely comes from law enforcement sources directly, survivors will be referred to as “victims” and people causing harm will be “suspects” or “perpetrators.”

DOMESTIC VIOLENCE HOMICIDE AND GUN VIOLENCE IN CHICAGO

According to data from the Chicago Police Department (CPD), while incidents of non-fatal domestic violence shootings have decreased from their peak in 2021, domestic violence related homicide and, specifically, homicides committed with firearms in Chicago increased in 2022. This rise in fatal gender-based violence continues to be an area of deep concern for advocates and direct service providers.

CPD Total Domestic Violence Homicides, Firearm Homicides & Non-Fatal Shooting Data Over Time

Source: CPD
There were 62 domestic violence related homicides in the city, a 38% increase from last year.¹¹

These totals include all homicides where a domestic relationship existed between the victim and the perpetrator, including not only intimate partners, but also family members and people living in the same home who are otherwise unrelated. More than half of these incidents (36 incidents, 58%) involved firearms. The proportion of homicides that use firearms in Chicago has persistently hovered around half in the last three years, with 60% of 2021 homicides and 45% of 2020 homicides involving guns. Others were perpetrated by stabbing (24%), the use of blunt force injury (10%), assault (6.5%), or other means (less than 2%). The finding that the majority of homicides involved firearms in Chicago aligns with existing research on the unique lethality of guns in domestic violence contexts.

If you or someone you know is facing gun violence in a domestic violence context, consider reviewing The Network’s Firearm Safety Planning Toolkit for resources and insight on reducing risk and harm of gun violence.
There were 79 non-fatal domestic violence related shootings in 2022, a 13% decrease from last year but a 64% increase compared to 2020. Though Chicago’s population is only composed of 29% of people who identify as Black, 75% of all non-fatal domestic violence related shootings and 66% of domestic violence related homicides in 2022 impacted Black victims.
Another group of victims overrepresented in the domestic violence shooting data are American Indian and Alaska Native identified people, who make up only .5% of the Chicago population but account for 2% of shooting victims.

**Together, this data not only demonstrates that fatal gender-based violence is on the rise in Chicago, but also that it has a radically disproportionate effect on victims of color.**

This is reflective of national statistics as well, which illustrate that GBV is more prevalent in communities of color.14 There are several reasons this may be the case. One reason is that communities of color experience mass incarceration at disproportionate levels compared to their White counterparts. Mass incarceration has devastating effects on communities such as separating families, an enormous financial burden on groups of people that are already paid less and often have less access to resources, and increasing surveillance. In addition to the racist and classist biases that often come with policing, mass incarceration harms and criminalizes survivors as well as the individuals causing harm.15 This systemic community impact can create cycles of violence that can be increasingly difficult to break and escape.
Community Violence Partnership with the Institute for Nonviolence Chicago (INVC)

SARAH’S INN

Population Served:
Referrals predominantly come from the Austin and West Garfield Park neighborhoods of Chicago.

Program Description
Through their work in community violence prevention, the Institute for Nonviolence Chicago (INVC) identified many cases that were domestic violence/intimate partner related and realized they needed to have a connection with a domestic violence agency to ensure survivors and their families were receiving appropriate, safe, and confidential assistance in accordance with the Illinois Domestic Violence Act. The Illinois Criminal Justice Information Authority (ICJIA) offered a grant opportunity that supported additional staff at Sarah’s Inn and INVC who focused on these issues and cross-trained current staff to screen for and assist families with both concerns - community and domestic violence. Families are generally connected when INVC encounters a family impacted by both community and domestic violence and they contact Sarah’s Inn who provides domestic violence advocacy, safety planning, and stabilization services. If needed, Sarah’s Inn also provides longer term counseling services to address trauma experienced by the family for both domestic and community violence.

Since the launch in 2021
23 participants have been referred
Stephanie* was connected with the Institute for Non-Violence Chicago (INVC) after a shooting took place in her community. INVC then referred her to Sarah’s Inn for domestic violence services. Prior to reaching out, Stephanie suffered many years of physical and verbal abuse before deciding to flee from her abuser. Stephanie and her two children fled the abuse and moved into a safe haven with a trusted family member.

Once there, Stephanie discussed safety planning, explored her rights around the order of protection that she already had put in place, and progressed toward her goals (working, saving, etc.). Stephanie was informed about ongoing community resources, open housing waitlists, financial support, and coordinated entry support. She completed a coordinated entry application to receive support in obtaining housing for herself and her children and has recently been matched with a housing agency. Stephanie is progressing toward finding her own unit and is expected to move into a unit sometime within the month. Sarah’s Inn is providing ongoing emotional support, continually checking in on the current needs of her and the children, and ensuring she is getting the best support from the housing agency through weekly case consultations with the agency. They also conduct weekly check-ins with Stephanie, to ensure programs and staff are accessible should she be in need.

*All names changed for anonymity*
STATEWIDE SNAPSHOT OF FIREARM INVOLVED INCIDENTS OF DOMESTIC VIOLENCE

Incidents of domestic violence related gun violence across the state mirror patterns seen in Chicago-specific data. According to data collected by the Gun Violence Archive, a not-for-profit independent research organization, there were:

106 DOMESTIC VIOLENCE SHOOTING INCIDENTS in Illinois in 2022

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<td></td>
<td>52</td>
<td>67</td>
<td>19</td>
<td>10</td>
</tr>
<tr>
<td>victim deaths</td>
<td>victim injuries</td>
<td>suspect deaths</td>
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| 54% suspects in these cases were arrested following the incident

Source: Gun Violence Archive
These incidents use the same definition for “domestic violence” as Chicago Police Department and therefore include shootings that involve intimate partners, family members, and people who share homes.

While total incidents are on a slight downward trend over the last three years, with 2022 seeing a 10% decrease from 2021, total injuries and deaths from domestic violence shootings in Illinois are on the rise.

Fatalities have grown faster than non-fatal injuries, with victim deaths increasing by 30% this year and suspect deaths increasing by an alarming 90%.

As suspect lethality increased, suspect arrests have decreased by 37%.

Over the last 20 years in the United States, the proportion of all murder-suicide cases related to intimate partner violence (IPV) fluctuated from 65% and 74%. Of those, 92% of cases involved a firearm. Given the prevalence of murder-suicides related to IPV, it is possible that some of the increase in suspect lethality is suicides. Other interventions, like police use of force, may also influence this increase.

Case studies of each individual incident would be needed to fully understand this change, which is outside the scope of this report; however, understanding the increase in suspect lethality would be a valuable subject for future research.
The source of the increase in victim injury and death cannot be pinpointed without additional research, but this data generally aligns with existing knowledge that IPV homicide events are more likely to result in multiple victims, including the victim’s family members and people who try to intervene, than non-IPV related homicides, and that three quarters of all IPV homicide cases with multiple victims in one study were perpetrated with firearms.\textsuperscript{18} Additionally, research on IPV murder-suicides in the US in 2020 has also established that 60\% of perpetrators were considered “family annihilators,” murderers who kill their intimate partners and children, as well as other family members, before killing themselves.\textsuperscript{19} Here again, further research on the increased lethality of domestic violence shootings for victims is needed.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{dvshootings.png}
\caption{DV Shootings Compared to Injury and Death Totals in IL Over Time}
\end{figure}

Source: Gun Violence Archive

Reports of Violence to Law Enforcement
Data regarding sexual violence crime related shootings is also collected and evaluated by the Gun Violence Archive. In 2022, there was one documented incident of a sex crime shooting and these shootings have been decreasing over the last three years.\textsuperscript{20}

The increase in fatal domestic violence gun violence is likely the result of many factors. One to consider is that in 2020, FOID applications to the Illinois State Police (ISP) peaked, and while they have decreased over the following two years, they have remained substantially higher than they were pre-COVID.\textsuperscript{21} This likely reflects increased gun ownership in Illinois, which in turn is associated with higher risk of domestic violence homicide.\textsuperscript{22}

### Annual FOID Applications to ISP Over Time

![Graph showing Annual FOID Applications to ISP Over Time](image)

Source: ISP
The map on the following page documents where in Illinois these incidents took place in 2022, along with injury and fatality totals.

Notably, shootings appear to be most common among densely populated centers like Chicago, mid-size cities such as Rockford and Joliet, and southern suburban municipalities like East St. Louis. Cook County has the highest frequency of domestic violence shootings, with Northern and Central Illinois counties making up the bulk of other incidents.
In 2022, there were domestic violence shootings in 22 counties in Illinois resulting in 52 Victim Deaths & 67 Victim Injuries.

Source: Freedom of Information Act requests to each local law enforcement agency.
GENDER-BASED VIOLENCE RELATED INCIDENTS REPORTED TO POLICE & SHERIFF’S DEPARTMENTS

A victim of gender-based violence can connect with law enforcement to file a report on an emergency basis by calling 911 or, after an incident, can make a report at their local law enforcement station. Some communities in Illinois are under the jurisdiction of the county sheriff’s department who respond to calls regarding domestic or sexual violence and others respond with their local police department. Therefore, The Network collected and reviewed data on reports of gender-based violence from six municipality police departments, including Chicago, and five county sheriff’s departments across the state.

Chicago Gender-Based Violence Calls for Service

191,701 CALLS FOR SERVICE for gender-based violence incidents in Chicago in 2022 according to CPD

These include incidents related to domestic violence, sexual violence, and stalking. This is an 8% decrease from 2021, as part of a two-year downward trend beginning in 2020.23

Trend in Gender Based Violence Calls for Service to CPD Over Time

Source: CPD
Given that calls to the Illinois Domestic Violence Hotline and intakes with GBV service providers have increased since 2020, it is unlikely that the decrease in calls exclusively reflects a decrease in violence. Instead, it is likely that victims of GBV are reporting to CPD less often, which could be for a myriad of reasons. First, calls to CPD regarding GBV peaked in 2020 during the COVID-19 pandemic, and as such, it is expected that total calls would fall to a pre-pandemic range over time. Second, as seen in the chart below, community trust in police has decreased since the summer of 2020, closely aligning the protest movement that arose after the killing of George Floyd, which may influence whether or not a victim trusts CPD to respond. Finally, in Illinois in 2022, over half of Hotline contacts reported experiencing emotional violence, and just under half of all domestic violence services clients reported emotional violence as their primary reason for seeking services which reflects that many survivors may not think that the police are the right resource to access safety.

**Chicago Citizen Trust Scores for CPD Over Time**

![Graph showing Chicago Citizen Trust Scores for CPD over time]

*Source: CPD*
REFERRALS MADE TO IL DV HOTLINE BY 311

311 is Chicago’s non-emergency services line that responds to community member needs, often seen as an alternative to 911 for less time sensitive responses. While 311 City Services reports that it does not track, possess nor maintain any records of calls that pertain to gender-based violence, they do track the number of referrals made to the Illinois Domestic Violence Hotline each year.

466 PEOPLE REFERRED to the Illinois Domestic Violence Hotline by 311 in 2022

79% INCREASE from 2021’s referral totals

Notably, as calls to law enforcement have decreased for gender-based violence, referrals to the Hotline from 311 have increased. There have been no trainings conducted in 2022 with 311 by the Hotline to identify and encourage more referrals, which suggests that this increase likely reflects more gender-based violence calls and not improved referral practices. If this is the case, this trend reflects what providers have reported anecdotally, some GBV victims are seeking a non-police alternative to meet their needs using methods like contacting 311 instead of 911.

311 Referrals to IL DV Hotline Over Time

Source: 311
STATEWIDE SNAPSHOT OF DOMESTIC & SEXUAL VIOLENCE CALLS FOR SERVICE TO LAW ENFORCEMENT

Collecting data on calls for service to law enforcement across Illinois is difficult because data is not uniformly collected, organized, and published by every locality’s department. The Network chose to report data from five municipality police departments outside of Chicago and five county sheriff departments to reflect the diverse communities across the state, including rural, suburban, and urban areas. Each department received the same Freedom of Information Act request and responded with the data they had available. Responses received from each department differ in how they categorize calls and what information is readily available. Generally speaking, the number of calls is proportionate to the size of the community and police departments have a larger proportion of calls by community size than sheriff’s departments.
On the following page is a map highlighting each community, along with the number of domestic violence and sexual violence calls for service received by the law enforcement agency.

Trends over the last three years vary in most communities, but a few have more concrete patterns. In Cook and Champaign Counties, calls for domestic violence are decreasing and calls for sexual violence are increasing. In Downers Grove, calls about sexual violence are increasing, but there is no clear domestic violence trend. In Bloomington, calls for domestic violence are increasing, but there is no clear sexual violence trend.
Statewide Snapshot of Domestic and Sexual Violence Calls for Service to Law Enforcement in 2022

**Calls to law enforcement regarding domestic and sexual violence vary by year and community.**

**Source:** Freedom of Information Act responses from each municipality and county law enforcement agency
02

Reports of Violence to Healthcare Providers
Another resource that survivors turn to after an incident of violence is the healthcare system, where they can seek treatment for injuries, mental health challenges, and get connected to other supportive services.

The following section of the report reflects on data provided by the Cook County Department of Public Health (CCDPH) recorded by Emergency Medical Services (EMS) professionals.

Like with law enforcement, it is important to note that not all survivors choose to engage with the healthcare system. There are several reasons that survivors may decide not to seek medical services or be hesitant to do so. One of the most common reasons is that many survivors do not understand whether healthcare workers are required to report suspected instances of DV or IPV. This is additionally risky for survivors who are undocumented or have other immigration status concerns. There are also significant financial barriers that can come with seeking medical services. Survivors who are low-income or uninsured may feel that the cost is not worth seeking treatment. An added layer of complexity also exists for survivors of color or those who identify as LGBTQ+, because the healthcare system in the United States has not always had their best interest or well-being in mind when treating them as patients. This history has created mistrust of the medical system for some. The COVID-19 pandemic has only exacerbated these concerns and has created yet another reason for survivors to be less proactive about seeking medical care. Survivors who chose not to seek emergency medical assistance, and those who live in Chicago, are not reflected in the following section.
Emergency Medical Service Requests – Cook County

The Illinois Department of Public Health (IDPH) Division of Emergency Medical Services (EMS) and Highway Safety is responsible for gathering and monitoring pre-hospital patient care data, reported by licensed EMS providers. A wide range of information is collected by EMS professionals and coded by an algorithm for each case, including “syndromes” which capture when incidents involve child abuse, intimate partner violence, and sexual violence. As with all algorithmic data collection, these totals are imperfect. For calls where EMS did not see a patient, including dispatches that were canceled by the caller or by staff at the scene who cannot find anyone, no information is captured. To review detailed definitions of each code, please see Appendix C. Due to technical challenges that were unresolved at the time of publication, data for the entire state of Illinois is not available; however, records from suburban Cook County are available from 2021 and 2022.

5,569 CALLS RELATED TO GENDER-BASED VIOLENCE were responded to by EMS in 2022

This included 4,177 regarding intimate partner violence (75%), 1,071 sexual violence (19%), and 321 child abuse and neglect (6%). The number of calls in 2022 was relatively comparable to 2021, with only a 2% decrease. Monthly call totals for each kind of violence were very similar between 2021 and 2022, making seasonal trends very visible for analysis. It is also important to note that these totals exclude Chicago and just represent suburban Cook County.

Cook County EMS Calls for Gender-Based Violence in 2022

- **Intimate Partner Violence**: 4,177 (75%)
- **Sexual Violence**: 1,071 (19%)
- **Child Abuse & Neglect**: 321 (6%)

Source: CCPHD
Emergency Medical Child Abuse and Neglect Calls
IPV has been correlated to an increased risk of child maltreatment. It is estimated that roughly 30–60% of children living in homes where intimate partner violence is occurring also experience child abuse or neglect. Incidents of child abuse and neglect that prompted calls to suburban Cook County EMS followed a clear seasonal trend across 2021 and 2022. Calls were lowest in the winter and peaked in the summer months. This may be related to the school calendar, as children typically spend more time at home in the summer months, which could create more opportunities for abuse to escalate to injury, increase the frequency of abuse, and or reduce contact with other safe adults who might intervene on the child’s behalf.

Emergency Medical Intimate Partner Violence Calls
EMS calls related to intimate partner violence (IPV) follow a similar trend to child abuse and neglect calls, rising in the summer months. This aligns with increased reports to law enforcement and calls to the Illinois Domestic Violence Hotline in the summer, suggesting that incidents of physical gender-based violence, not just reports of violence, may increase in the summer. The rise in reported violence in the summer may also be the result of violence happening in more public, outdoor spaces prompting other members of the community, and not survivors themselves, to call for medical assistance.

Emergency Sexual Violence Calls
The period of highest calls related to sexual violence shifts later into the year, peaking in late summer and early fall. Again, this may be associated with the school calendar, given that high school and college students converge on campuses at this time of year. InfoNet data from sexual violence service providers, detailed later in this report, reflects that the largest plurality of sexual violence clients is young people between the ages of 10–19 years old.
Cook County EMS Counts by Month in 2021 & 2022 for...

**Child Abuse**

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**Intimate Partner Violence**

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**Sexual Violence**

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*All Graph Sources: CCPHD*
03
Reports of Violence to the Illinois Domestic Violence Hotline
If a survivor is seeking information about their options, safety planning or emotional support, or needs immediate access to shelter, transportation, or provider referrals, they can contact the Illinois Domestic Violence Hotline for a trauma-informed response 24 hours a day, 7 days a week at 877-863-6338. Data in this section of the report comes from the Hotline and reflects the frequency and location of calls as well as the types of violence reported.

In order to prioritize a trauma-informed approach to Hotline callers, Victim Information Resource Advocates (VIRAs) may not be able to collect all caller information equally. Some callers may be reaching out in a moment of distress or may have limited time before the person causing harm returns. This impacts the responses available to analyze, as not all intake questions have 100% response rates. All intake questions are only completed when the caller is willing and able to provide answers.

Reports to the Illinois Domestic Violence Hotline

In 2022, there were a total of 37,236 contacts to the IL DV Hotline, a 15% increase from 2021 and 50% increase from 2019. This is likely the result of several factors, including increased awareness of the Hotline services, an increase in the need for services through contacting the Hotline, or other reasons. Contacts to the Hotline increase steadily in the summer months and tend to start declining again in the fall and winter months, similar to the law enforcement and emergency medical services (EMS) calls. Many victims, especially those that are pregnant or have children, find it very difficult to leave their abuser due to cold weather which negatively impacts travel conditions and housing options.
Method of Contact as Percent of Total Contacts to IL DV Hotline in 2022

- 95% Calls: 35,310
- 4% Texts: 1541
- 1% Chats: 385

Source: IL DV Hotline

Total Contacts to IL DV Hotline by Month in 2022

- January: 2672
- February: 2613
- March: 2703
- April: 2766
- May: 3089
- June: 3222
- July: 3414
- August: 3759
- September: 3523
- October: 3284
- November: 3193
- December: 2998

Source: IL DV Hotline
While these contacts come from counties across the state, contacts from Chicago make up 34% of the total Hotline contacts, and contacts from Cook County, including Chicago, make up 53% of total contacts. Contacts have historically come predominantly from Chicago and Cook County, given the Hotline’s origins as a City of Chicago helpline; however, more recently, Hotline contacts are increasingly coming in from callers outside of Cook County and Chicago.

Victim Information and Resource Advocates (VIRAs) are 40-hour trained domestic violence call operators charged with responding to callers in a trauma-informed manner and connecting them to resources and referrals where possible.

VIRA’s spent a total of 238,150 MINUTES ON CALLS equivalent to 165.4 full days in 2022

Yearly Average Call Length in Minutes to IL DV Hotline Over Time

Source: IL DV Hotline
In 2022, the average length of each call to the Hotline was 6.7 minutes. This was the same as that of the 2021 average, and a slight increase from the 2020 average of 6.5 minutes, reflecting that average call time has remained relatively consistent over the past three years, even as call volume has grown substantially. This demonstrates that the quality of care each caller receives has remained consistent, even as more calls come in, and may also indicate that survivors are able to access the information or referrals they need in a relatively short amount of time. Additionally, survivors may have limited time to safely access and contact the Hotline without the person causing harm knowing.

55% of the total contacts from Illinois knew their referral source to the Hotline. Of those, 29% of referrals were from DV service providers, 16% were family or friends, 15% were from Chicago’s Police Department, and 13% were through the Internet. To ensure accessibility to all callers, the Illinois Domestic Violence Hotline offers over 240+ languages through a live interpretation line. VIRAs connect the caller to the Language Line in order to access live interpretation services. In many cases, providers also use the Language Line by calling the Illinois Domestic Violence Hotline in instances where they may not have the resources to meet their non-English-speaking clients’ needs.

For callers who needed interpretation, most used the Language Line. In 2022, the Language Line was used for 872 contacts, or 52% of all interpreted contacts.

Thanks to a large proportion of Hotline staff being bilingual, VIRAs were also able to interpret 790 calls, or 47% of all contacts last year.

The remaining contacts that used interpretation received assistance from a friend or third party, which was the case in 7 contacts or 0.4% of all interpreted contacts, or some other agency, which was the case in 14 contacts or 0.8% of all interpreted contacts. This data indicates the importance of language access for callers and providers and underscores the importance of having VIRAs that are bilingual.
CONTACTS BY LOCATION

The IL DV Hotline received contacts from 94 of 102 COUNTIES ACROSS THE STATE in 2022.

This includes 4 more counties than those that made contact in 2021. Not all callers disclose location information with granular details like county, city, or zip code during their contact with the Hotline, so contact data by location is imperfect.

In about three-quarters of all Illinois contacts, or 73%, the county of residence of the caller is known. While the remaining 27% were not identifiable counties, the VIRA was able to establish that the caller was located in Illinois. In 2022, of the counties representing contacts with the Hotline, 75 of them had between 1-50 total contacts with the Hotline, 10 counties had between 51 and 100 contacts with the Hotline, and the remaining 9 counties had over 100 contacts with the Hotline. This indicates contacts to the Hotline are predominantly coming from 9 counties across the state.

Comparison of Total IL Contacts to Contacts from Cook & Chicago Over Time

Note: 1,086 contacts in 2022 were out of state or unknown
Source: IL DV Hotline
While total Hotline contacts have steadily increased over the last three years, contacts being reported from Cook County and Chicago have started to stagnate. In 2022, there was roughly a 15% increase in contacts across the state but only a .05% increase in contacts from Cook County and even a slight decrease of -.4% of calls reported coming from Chicago compared to 2021.\textsuperscript{45} As more individuals share the Illinois Domestic Violence Hotline as a resource, referrals and contacts in areas outside of Cook County and Chicago continue to rise.

The 9 counties with over 100 contacts in Illinois comprise 69% of all contacts to the Hotline. This indicates that, while the Hotline has a nearly statewide reach, the majority of calls are from a select few counties. The top 5 counties that contacted the Hotline the most were Cook, accounting for 55% of all contacts, followed by DuPage (4%), Lake (4%), Will (2%), and Kane (2%). If Cook were excluded, Winnebago would make the top five county list at 1.1%. Additionally, excluding Cook, each of these counties has shown a steady increase in contact to the Hotline since 2020, all of which are suburban northern Illinois counties.\textsuperscript{46}

<table>
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<tr>
<td>Will</td>
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</tr>
<tr>
<td>Kane</td>
<td>419</td>
<td>407</td>
<td>503</td>
</tr>
<tr>
<td>Winnebago</td>
<td>219</td>
<td>262</td>
<td>407</td>
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This suggests there may be an increase in need for services in these areas, but also indicates an increase in Hotline visibility as a resource outside of Chicago and Cook County. It is also important to note densely populated areas will continue to over represent calls to the Hotline as requests for domestic violence services and referrals may be a reflection of population size.
2022 Illinois Domestic Violence Hotline Contacts* by County

- **COUNTIES IN ILLINOIS**

- **WINNEBAGO COUNTY**
  - 2022 Contacts: 407
  - Calls: 397
  - Chats: 5
  - Texts: 5
  - 2021 Difference: 145
  - Change: +55%

- **KANE COUNTY**
  - 2022 Contacts: 656
  - Calls: 605
  - Chats: 50
  - Texts: 1
  - 2021 Difference: 153
  - Change: +30%

- **BUREAU COUNTY**
  - 2022 Contacts: 7
  - Calls: 7
  - Chats: 0
  - Texts: 0
  - 2021 Difference: -12
  - Change: -63%

- **LASALLE COUNTY**
  - 2022 Contacts: 65
  - Calls: 65
  - Chats: 0
  - Texts: 0
  - 2021 Difference: -4
  - Change: -27%

- **MORGAN COUNTY**
  - 2022 Contacts: 11
  - Calls: 8
  - Chats: 2
  - Texts: 1
  - 2021 Difference: -4
  - Change: -6%

- **LAKE COUNTY**
  - 2022 Contacts: 1309
  - Calls: 1295
  - Chats: 9
  - Texts: 5
  - 2021 Difference: 242
  - Change: +23%

- **DUPAGE COUNTY**
  - 2022 Contacts: 1587
  - Calls: 1567
  - Chats: 11
  - Texts: 9
  - 2021 Difference: 78
  - Change: +5%

- **COOK COUNTY**
  - 2022 Contacts: 19,834
  - Calls: 18,626
  - Chats: 999
  - Texts: 209
  - 2021 Difference: 9
  - Change: +0.05%

- **WILL COUNTY**
  - 2022 Contacts: 802
  - Calls: 739
  - Chats: 4
  - Texts: 4
  - 2021 Difference: 94
  - Change: +13%

- **MONTGOMERY COUNTY**
  - 2022 Contacts: 5
  - Calls: 9
  - Chats: 0
  - Texts: 0
  - 2021 Difference: 5
  - Change: -82%

- **KANE COUNTY**
  - 2022 Contacts: 656
  - Calls: 605
  - Chats: 50
  - Texts: 1
  - 2021 Difference: 153
  - Change: +30%

- **COOK COUNTY**
  - 2022 Contacts: 19,834
  - Calls: 18,626
  - Chats: 999
  - Texts: 209
  - 2021 Difference: 9
  - Change: +0.05%

- **LASALLE COUNTY**
  - 2022 Contacts: 65
  - Calls: 65
  - Chats: 0
  - Texts: 0
  - 2021 Difference: -4
  - Change: -27%

- **SAINT CLAIR COUNTY**
  - 2022 Contacts: 54
  - Calls: 53
  - Chats: 0
  - Texts: 1
  - 2021 Difference: -11
  - Change: -17%

*Contacts: Calls, texts, chats

**IL DV Hotline received**

- **36,150 CONTACTS**
- **94 out of 102 COUNTIES IN ILLINOIS**

Source: IL DV Hotline
TYPES OF ABUSE REPORTED TO HOTLINE

There are several forms of abuse that survivors may report experiencing during a call with the Hotline ranging from physical and emotional abuse to stalking and threats to coercion involving children and pets.47 All forms of abuse present unique challenges and must receive attention and consideration from Hotline staff to ensure that the survivor can access the resources they need for safety. Additionally, it is not uncommon for different types of abuse to overlap in the same relationship. For example, physical abuse often being coupled with some form of psychological abuse.48

In 2022, 55% of Illinois contacts identified the type of abuse they were experiencing, and some callers reported multiple forms of abuse occurring simultaneously. Emotional abuse was the most reported followed by physical, sexual, and financial abuse.

In Chicago, 63% of contacts reported the form of abuse they were experiencing. The prevalence of each type of abuse was in the same frequency as the statewide numbers. Emotional abuse, being the most reported type of abuse experienced by Chicago victims, is consistent with service providers reporting counseling service being the highest reported service in 2022.49

Known Types of Abuse Experienced by IL Victims Reported to IL DV Hotline in 2022

![Graph showing types of abuse reported to IL DV Hotline in 2022]

Source: IL DV Hotline
Mental Health Impact of Domestic Abuse

Naomi* is a Central Asian immigrant to the United States and survivor of domestic violence. After an overwhelmingly persistent dating relationship in school turned into marriage, Naomi began experiencing verbal, emotional, financial, sexual, and physical abuse at the hands of her husband in addition to being subjected to coercively controlling behaviors.

Her husband began monitoring her location using an app and refused to file for her green card when her school visa expired. Unable to work and under surveillance, Naomi became isolated from her friends and her family overseas, while he grew increasingly cruel, mocking her English, refusing her cooking, and going into a rage if she didn’t answer her phone. Later, he escalated to physical violence and showed complete disregard for her consent when he wanted to have sex. This treatment went on for years and Naomi developed depression and anxiety.

Her husband began disappearing for weeks at a time. One day packed up his things and moved out of their apartment. This sent Naomi into intense feelings of suicidal ideation which stretched for days. With the help of her landlord, Naomi was taken to see a doctor, who sent her to an in-patient treatment program. Her therapists were the first to help her identify that what she had lived through was abuse and not her fault. “I am grateful to my psychiatrist, psychotherapy, consultations, and all people who are continuing to help me be mentally healthy and stronger while I get back on my feet again,” she told The Network, “I think if it weren’t for these people and organizations that helped me, I would be dead by now.” After discharge, Naomi was connected with domestic violence service providers who provided her with shelter, access to legal aid attorneys to assist with her divorce and immigration cases, and ongoing counseling support. “I have found myself again and become stronger and more confident [each day].”

*All names changed for anonymity
RELATIONSHIP TO PERSON CAUSING HARM

Of those who contacted the Illinois Domestic Violence Hotline last year, 31% reported the relationship the survivor had to the person causing harm. The largest relationship type represented among these contacts is ex-spouses or partners, which illustrates the complexity of leaving abusive relationships for survivors.

According to a recent study, up to 90% of victims report some form of post-separation abuse which can last as long as years or even decades.

This is also reflected in survivor accounts of abuse shared during interviews with Network staff.
Post-Separation Abuse

Jennifer* is a White woman who experienced emotional, verbal, and financial abuse at the hands of her coercively controlling ex-husband who owned firearms and heavily drank. She spent years coping with the abuse by projecting the perfect family image and staying as busy as her schedule could allow. When the COVID-19 pandemic hit, lockdown brought her face to face with how bad things had gotten.

She started seeing a therapist, and through this process, realized she had been experiencing abuse. “There aren’t scars on my body,” she told The Network, “but there are scars on my psyche.” When she filed for divorce, things with her husband began to escalate and she now fears his abusive tactics will not subside for years.

One strategy her ex-husband uses to cause harm since the divorce is withholding his court-ordered breathalyzer tests when he has custody of the children, or breathalyzing positive, which has prompted her to pick up the children from his home while he is volatile, angry, and intoxicated, or potentially intoxicated. When reflecting on navigating shared custody of their children with this ongoing abuse, she expressed that the end felt nowhere in sight. “I used to live my life to protect them [my kids] from him every day, and now, I have to release them to him unsupervised. I don’t expect his vitriolic behavior to fade for as long as my children are minors.”

Jennifer described a range of other post-separation abuse, which has involved excessive litigation of the divorce and child custody arrangement, stalking, and harassment behaviors. She has found herself financially drained and, absolutely exhausted, on top of feeling frightened for herself and her children. “The abuse didn’t end there [at the divorce] – now what we experience is more terrifying to me. He is so angry and has such a revenge fantasy, post-separation abuse is my whole life right now.”

*All names changed for anonymity
04 Reports of Violence to Domestic Violence and Sexual Violence Service Providers
Survivors of gender-based violence come from all walks of life. Some survivors have robust personal resources and social networks that support them through their experiences of violence, separation, and healing. However, for tens of thousands of survivors in Illinois, service providers are essential to accessing the support they need and, in many cases, are the only support system they may have when leaving an abusive relationship.

The following section of the report documents what is known about the survivors who accessed supportive domestic and sexual violence services in 2022.

Details on the services received can be found in the “Human Services Provider Responses” section of this report.

Total Clients Receiving Services

In 2022, domestic violence service programs provided more than half a million hours of service to 48,491 survivors. 85% of clients were adults, and the remaining 15% were children. Sexual violence service programs provided almost 110,000 hours of service to 11,105 survivors. 91% of clients were survivors and 9% were significant others, who are defined as any loved one, family, friend, or romantic partner, who is supporting a survivor.

½ million HOURS OF SERVICE by Domestic Violence Programs to 48,491 survivors

110,000 HOURS OF SERVICE by Sexual Violence Programs to 11,105 survivors
**IL Domestic Violence Provider Clients in IL in 2022**

- **Adult**: 41,062 (85%)
- **Child**: 7,429 (15%)

Source: InfoNet

**IL Sexual Violence Provider Services Clients in IL in 2022**

- **Survivor**: 10,076 (91%)
- **Significant Other**: 1,029 (9%)

Source: InfoNet
DOMESTIC VIOLENCE CLIENTS

Gender Identity
The vast majority (85%) of domestic violence clients in 2022 identified as female, followed by clients who identified as male (15%), and a small portion of clients who identified as transgender, non-binary, or other gender identities (<1%). 99.6% of clients reported their gender identity; however, not all clients may feel comfortable disclosing their true gender identity for a multitude of reasons. Research on reports of gender-based violence tells us that violence against people who identify as men54 or as members of the LGBTQ+55 community is likely underreported due to gender stereotypes and poor data collection practices.

Sexual Orientation
Only adult clients above the age of 18 (41,365 of total clients) are asked about their sexual orientation. While some clients may not report sexual orientation, 81% of adult clients receiving services in 2022 shared their sexual orientation at intake. The majority of clients who disclosed their sexual orientation information identified as heterosexual or straight (76%). In total, 5% of clients reporting identified as members of the LGBTQ+ community. Similar to gender identity, while the reporting on the sexual orientation of clients is high, it must also be considered that people may not be entirely truthful in these disclosures out of fear of repercussions or not being out yet.
Known Gender Identity of IL DV Provider Clients in 2022
Unknown 185

- 85% (40,824) Female
- 15% (7271) Male
- <1% (211) Transgender, Gender Non-conforming, Other

Source: InfoNet

Known Sexual Orientation of IL DV Provider Clients in 2022
Unknown 7911

- Heterosexual/Straight 31,492 (94%)
- Bisexual 1209 (4%)
- Homosexual/Gay/Lesbian 515 (2%)
- Other 146 (<1%)
- Queer 92 (<1%)

Source: InfoNet
Age
One of the highest reported demographic categories is age, with 99% of all clients reporting their age in 2022. About 84% of clients were adults aged 18 or older. Most adult clients range from 18–39 years of age. Specifically, the largest plurality of clients was between 30–39 years of age (33%), followed by those between 18 – 29 years of age making up (31%) of clients, and those between 40–49 (20%). The remaining 16% identified themselves as being age 50 or older.

Of the 48,828 total clients served in 2022, roughly 17%, or 7,463, were minor children, ranging from infants to those 17 years of age.

Race
At intake, clients self-report their race and may select as many race categories as they identify with. 98% of clients reported their race in 2022. Just under half of clients identified as White (49%), followed by Black/African American (29%), mixed race (3%), Asian (2%), MENA (1%), and American Indian or Alaska Native (1%). Clients who identified as Native Hawaiian, Pacific Islander, and South Asian made up less than 1%. Clients identifying as Hispanic/Latino totaled 11,203 individuals, or 23%, of all clients. Compared to the state population of Illinois, Black/African American, Hispanic/Latino, and American Indian or Alaska Native populations are all overrepresented in the domestic violence services client population. As discussed in the homicide and gun violence section of this report, where people of color were also heavily overrepresented, there are many factors that influence the disproportionate population of survivors of color among service providers. Communities of color face more risk factors for experiencing violence and may have less access to support from social networks, in many cases due to systemic oppression, underinvestment, and disinvestment in minority communities. These totals may also reflect that survivors of color feel safe accessing services from domestic violence service providers.
Known Ages of IL DV Provider Clients in 2022

Unknown 292

![Age Distribution Chart]

Source: InfoNet

Racial Identity of the IL DV Provider Clients in 2022.

Unknown 2% (1035)

- **White**: 49% (23,673)
- **Black/African American**: 29% (13,864)
- **Mixed Race**: 3% (1586)
- **Asian**: 2% (1071)
- **MENA (Middle East & North Africa)**: 1% (562)
- **American Indian/Alaska Native**: 1% (525)
- **Native Hawaiian/Other Pacific Islander**: <1% (132)
- **South Asian**: <1% (92)

Note: The categories are not mutually exclusive. For example, one survivor may be represented in the Black and Hispanic categories.

Source: InfoNet
**Marital Status**

In 2022, 93% of clients reported their marital status. Almost half reported being single 49%, 28% reported being married, 11% divorced, 2% legally separated, 2% widowed, and 1% common law married. As reported in the Illinois Domestic Violence Hotline section of this report, many survivors seeking services or contacting the Illinois Domestic Violence Hotline report the person causing harm is an ex-intimate partner and they are no longer in the relationship. During the course of seeking services, some clients may be seeking legal assistance to pursue a divorce or may reconcile with the person causing harm. The totals reflected in the graph on the following page are reported at intake.

**Education**

To establish a broader understanding of clients seeking domestic violence services, education status is also collected at intake. As with all other demographic information, this information is self-reported. In 2022, about 87% of all clients seeking services reported their education status. Just under half of clients had a high school diploma or less 45% (36,160), approximately 25% had some college, and 17% indicated they had a college degree or more. Roughly 13% of education status was unknown among clients.
Known Marital Status of IL DV Provider Clients in 2022

Unknown 2990

- Widowed: 745
- Legally Separated: 991
- Common Law: 248
- Divorced: 4639
- Married: 11,667
- Single: 20,085

Source: InfoNet

Known Education Status of IL DV Provider Clients in 2022

Unknown 5205

- No High School: 1896
- Some High School: 4776
- GED: 484
- High School Grad: 11,455
- Some College: 10,386
- College Grad or More: 7163

Source: InfoNet
Minor Clients
Among minor clients who reported their educational age, the largest plurality was in elementary school, making up about 40% of child clients, with the second largest group at 27% being too young to be in school. This means that over half of minor clients that had their age reported were under middle school age. Minor clients include anyone under the age of 18, that is 17 and younger.

Parental Status
In 2022, 89% of clients reported their parental status to providers and 1602 clients reported being pregnant. 64% of clients reported having children and 25% reported not having any children. Most clients who reported having children had one or two. The number of clients with more than two children decreases as the number of children increases. This data strongly suggests that more than half of all clients seeking services have at least one child; however, this does not indicate whether the client has custody of the child or that the child is also receiving services. Service totals for children receiving gender-based violence services are reported in other sections of this report.
### Known School Age of Child IL DV Provider Clients in 2022

**Unknown 468**

- **Not of School Age**: 1882
- **Preschool**: 563
- **K–5**: 2811
- **Middle School (6–8)**: 994
- **High School (9–12)**: 734

*Source: InfoNet*

### Number of Children Belonging to IL DV Provider Clients in 2022

- **1**: 8863
- **2**: 8345
- **3**: 5362
- **4**: 2492
- **5**: 932
- **6**: 341
- **7**: 133
- **8+**: 102

*Source: InfoNet*
Additional Needs

4,296 clients in 2022 needed non-English language services in 44 known languages from domestic violence service providers. About 23% of clients reported some kind of language or additional need in 2022. Outside of language access, these included having developmental disabilities, hearing impairments, and mobility aids. Research on gender-based violence has established that people with disabilities are at higher risk for experiencing domestic violence and also face higher barriers to accessing services. The presence of such varied needs demonstrates why it is essential that providers have proper training and funding to meet the needs of all survivors.

DCFS Involvement & Custody

2022 saw lower numbers of clients involved with the Illinois Department of Child and Family Services (DCFS) than years prior. In 2022, 478 clients had investigations for child abuse and 848 had open cases with DCFS at intake. In most cases of reported DCFS involvement, the client had current custody of their child or children, with 72 clients reporting DCFS having custody of their child or children. In 2022, 14% of clients reported having joint custody of their child or children with the person causing harm. This is followed by reports of relatives having custody of the client’s child or children, DCFS having custody, and just the offender having custody. Sharing custody of a child post-separation with the person causing harm can be a complicated and stressful dynamic for survivor-parents to manage. These figures suggest that many survivors are navigating this challenge and need unique supports to do so safely.
**IL DV Providers Child Clients’ Involvement with DCFS Over Time**

- **DCFS Custody**
  - 2020: 95
  - 2021: 97
  - 2022: 72

- **Open Investigations**
  - 2020: 513
  - 2021: 506
  - 2022: 478

- **DCFS Case Open**
  - 2020: 716
  - 2021: 848
  - 2022: 918

Source: InfoNet

**Known Custody Status of IL DV Provider Clients’ Children in 2022**

- **Unknown**: 413
- **Offender has Custody**: 40
- **Client/Offender Joint Custody**: 999
- **Other Relative has Custody**: 92
- **DCFS Custody**: 72
- **Client has Custody**: 5847

Source: InfoNet
Child Custody Challenges After Separation

Erika* is a White woman who is a survivor of domestic violence. She experienced verbal, emotional, financial, and physical abuse at the hands of her ex-husband who regularly left loaded guns laying around their home and kicked their dog to punish her. During the course of their marriage, he fervently sought to hurt Erika through his treatment of their young daughter, terrorizing their toddler with demeaning words and veiled threats. When her three-year old said, “Mommy, we can just leave,” Erika knew that she had to get out, but leaving wasn’t easy.

After filing for divorce, her ex-husband’s behavior grew more frightening than ever. Erika filed for an order of protection and fled their home with her daughter, certain that they would have been killed had they stayed. Her ex maintained possession of his firearms by lying to the judge, saying he sold them in compliance with the order of protection, leaving her in continued fear of lethal violence. As her divorce case proceeded, she found that the judge treated her abuse history with disregard and gave unsupervised parenting time to her ex-husband, even with his cruel treatment towards their daughter.

She told The Network,

“I wish he hit me more, I wish I was black and blue, because then people would have believed me and my daughter.”
Erika now dreads the days when she has to send her daughter to stay with her ex, where she knows she will be neglected and endangered in his care. To add insult to injury, her ex regularly files motions in their domestic relations case to allege that Erika is engaged in “parental alienation” which has dragged the case out for years and slowly drained her entire life’s savings, and maxed out her credit cards, to pay legal fees. After two failed DCFS reports were filed by her daughter’s doctor and counselor, Erika has begun to feel hopeless.

“It makes me feel like I should have stayed – now I only get my daughter half the time and I’m not there to protect her. I’m just waiting for that phone call that my child is missing – then maybe someone would care.”

*All names changed for anonymity*
SEXUAL VIOLENCE CLIENTS

Data in this section, as with the domestic violence clients section above, comes from InfoNet. It is important to note, as with all other demographic client data, survivors are self-reporting this information. Data may be skewed given the clients perceived safety concerns in reporting identifying information about themselves, their gender or sexual identity for a host of reasons including perceived biases or lived experiences.

Gender Identity
The vast majority of sexual violence clients identified as female (85%), with 11% identifying as male, 3% as transgender, gender-queer, non-binary, or other. 99% of clients reported their gender identity. Research on reports of gender-based violence tells us that violence against people who identify as men or as members of the LGBTQ+ community are likely underreported due to gender stereotypes and poor data collection practices.

Sexual Orientation
58% of all clients receiving sexual violence services disclosed their sexual orientation. This reporting rate is lower than others like gender and age because child clients are not asked for sexual orientation information. Of the adult clients who responded, 46% of clients identified as straight, and 12% reported an LGBTQ+ identity. This reflects the disproportionate impact of sexual violence on LGBTQ+ identifying individuals compared to the population of Illinois residents who identify as LGBTQ+, who are estimated to only make up about 5% of the Illinois population. Child advocacy centers who serve children impacted by sexual violence are not among the organizations who enter data into InfoNet and are therefore not represented in these totals.
Gender Identity of IL SV Provider Clients in 2022
Unknown 1% (175)

- 85% 9400 Female
- 11% 1245 Male
- 3% 285 Transgender, Gender Non-conforming, Other

Source: InfoNet

Known Sexual Orientation of IL SV Provider Clients in 2022
Unknown 4681

- Heterosexual/Straight 5136
- Bisexual 701
- Homosexual/Gay/Lesbian 242
- Queer 140
- Other 205

Source: InfoNet
Age
All but 1% of the sexual violence clients reported their age to service providers. The vast majority of clients receiving sexual violence services are between 10-19 years of age.

Racial Identity
92% of clients working with providers reported their race and ethnicity. More than half of clients identified as white (56%), with 18% identifying as Black/African American, 4% as mixed race, 2% as Asian, 1% as American Indian or Alaska Native, and 1% as MENA. Native Hawaiian or other Pacific Islander and South Asian identities were reported by less than 1% of clients. 2,403 or 22% of clients identified as Hispanic. As discussed in other sections of this report where people of color were also heavily overrepresented, there are many factors that influence the disproportionate population of survivors of color among service providers. Communities of color face more risk factors for experiencing violence and may have less access to support from social networks, in many cases due to systemic failure underinvestment and disinvestment in minority communities. These totals may also reflect that survivors of color feel safe accessing services from domestic violence service providers.
**Known Ages of IL SV Provider Clients in 2022**

*Unknown 106*

![Bar chart showing ages of IL SV provider clients in 2022.]

*Source: InfoNet*

**Racial Identity of IL SV Provider Clients in 2022**

*Unknown 8% (840)*

- **White** 56% (6192)
- **Black/African American** 18% (2048)
- **Mixed Race** 4% (457)
- **Asian** 2% (168)
- **MENA (Middle East & North Africa)** 1% (117)
- **American Indian/Alaska Native** 1% (67)
- **Native Hawaiian/Other Pacific Islander** <1% (20)
- **South Asian** <1% (10)

*Note: The categories are not mutually exclusive.*

For example, one survivor may be represented in the Black and Hispanic categories.

*Source: InfoNet*
Marital Status
Since the majority of sexual violence clients are below the age of 19, only 67% of clients reported their marital status. Of those reporting, 52% reported as single, 9% as married, and 4% as divorced, with legally separated and widowed making up 1% of clients each. Less than 1% reported being common law married.

Additional Needs
560 clients reported having limited English and received services in 9 non-English languages from sexual violence service providers in 2022. Clients expressed additional needs outside of language access including being hard of hearing, having developmental and emotional disabilities, and other physical disabilities. Research on gender-based violence has established that people with disabilities are at higher risk for experiencing domestic violence and also face higher barriers to accessing services. The presence of such varied needs demonstrates why it is essential that providers have proper training and funding to meet the needs of all survivors.
**TYPES OF VIOLENCE REPORTED**

**Domestic Violence Clients**

Emotional and physical violence were reported as the top primary presenting issues by clients when seeking domestic violence services in 2022. Among clients who reported physical abuse experiences, examples of severe physical abuse are highlighted in the chart below. 706 clients reported being attacked with a knife or shot at by a gun and 3,192 were threatened with a gun or knife. The most common physical abuse was the client being pushed, grabbed, or shoved.

In 2022, 4 adult shelter clients were marked as leaving the program due to their death. The cause of death is not recorded, so it is unclear if these deaths were the result of homicide by intimate partner violence or unrelated external circumstances, such as illness or old age. Clients are only indicated as having passed away when the provider knows of the client’s death. An additional 175 adults and children were marked as disappeared, meaning they did not return to the service provider and have lost contact.

**Known Primary Presenting Issue Indicated by IL DV Provider Clients in 2022**

Unknown 69

Emotional Domestic Violence 20,054

Physical Domestic Violence 20,051

Sexual Domestic Violence 1191

Source: InfoNet
Severity of Physical Abuse Reported by IL DV Provider Clients in 2022

- Beat up victim: 3665
- (Tried to) Hit victim with something: 4515
- Kicked/bit/hit victim with fist: 5455
- Pushed/grabbed/shoved victim: 9857
- Slapped victim: 5071
- Strangled Victim: 4703
- Threatened victim with knife/gun: 3192
- Threw something at victim: 5672
- Used knife or fired a gun: 760

Source: InfoNet
Sexual Violence Clients
All but .3% of sexual violence clients reported the kind of abuse they experienced to their service providers. Adult sexual assault or abuse was the most common kind of abuse reported among clients, closely followed by child sexual assault or abuse.

Known Primary Presenting Issues for IL SV Provider Clients in 2022
Unknown 33

Source: InfoNet
05
Survivor Needs
Assessing survivor needs is an essential first step in determining whether or not the survivors are receiving adequate, supportive services.

Data for the following section comes directly from the Illinois Domestic Violence Hotline (Hotline) and documents the frequency and type of services that were requested by callers.

SHELTER, TRANSITIONAL, AND AFFORDABLE HOUSING

Homelessness and domestic violence are interlinked. Studies have shown that, of the mothers and children who report being homeless, 80% had experienced domestic violence at some point. In 2022, with the overall 15% increase in calls to the Illinois Domestic Violence Hotline, there was also an unprecedented number of requests related to housing. As more survivors begin to identify the need to flee violence and seek a life of independence and freedom, housing is the most common need expressed from survivors across all measures.

Contacts to IL DV Hotline from IL & Chicago Requesting Domestic Violence Shelter (2017–2022)

Note: Totals for IL also include Chicago totals
Source: InfoNet
In 2022, the Illinois Domestic Violence Hotline received a record high number of requests for domestic violence shelters, with 34% of all contacts requesting shelter.

The request for shelter is constant, with a 33% increase in domestic violence shelter requests across Illinois compared to 2021. This request for shelter is also the leading request in Chicago specifically, with 32.5% of callers requesting domestic violence shelter, an overall 19% increase for requests in shelter coming from Chicago compared to 2021. In addition to contacts from survivors of gender-based violence needing shelter, there were 361 requests from individuals experiencing general homelessness in need of shelter in 2022.64

Shelter requests from Chicago have remained relatively consistent over the last six years, hovering between 3,271 and 4,187 requests annually. Over the same course of time, requests for shelter outside of Chicago have been on a clear upward trend. While the need for shelter remains constant in Chicago, this trend demonstrates the growing need for shelter in the rest of the state.

In many cases, Victim Information and Resource Advocates (VIRAs) are able to connect the callers with shelters directly to have the intake process completed. The Hotline also keeps track of total statewide bed and crib availability, discussed in the housing services section of the report.

Other than shelter requests, access to affordable and transitional housing is also one of the most requested services from callers, landing at the 10th most requested services from callers, landing at the 10th most requested service across the state, occurring in 2.5% of all contacts.65 This is also the 7th most requested service from callers in Chicago, making up 3% of all Chicago contacts.66 Access to safe and accommodating housing is the initial step to a survivor’s quest for independence and freedom from a life of violence.
Hotline requests for affordable and transitional housing have continued to increase over the last six years with a small decline in 2020. Unlike with shelter, where need is clearly growing outside of Chicago, the need for affordable and transitional housing has increased within and outside of the city, with 897 individuals requesting this statewide and 397 individuals requesting these services from Chicago in 2022.
ILLINOIS DOMESTIC VIOLENCE HOTLINE STORY

The Need for Shelter

The top need each day in 2022 from callers to the Illinois Domestic Violence Hotline was access to emergency domestic violence shelter. Hotline staff, known as Victim Resource and Information Advocates (VIRAs), regularly monitor what shelters in every region of the state have available beds and assist survivors in searching for a safe place to stay.

This is one story, of many, that VIRAs shared for this report.

“I received a call from a survivor looking for shelter and transportation resources because she was in domestic violence situation and needed to get away from her abuser. The survivor was currently at a police station and had filed a police report against her abuser but needed a safe place to stay since he was the landlord of the apartment they shared. I gave her the run down on possible shelter space in and around her area and explained what to expect from the shelter intake process. Luckily, I was able to find a shelter near the survivor’s area and connected her with the shelter for a possible intake. When the survivor called back and confirmed she had been accepted at shelter, I assisted her with an Uber ride to the safe location.”
INFORMATION & SAFETY PLANNING

The Illinois Domestic Hotline serves as an information hub for a variety of callers, including survivors who may be seeking resources for the first time. Information is the second-highest service requested from callers across the state. With a quarter of all contacts seeking general information and safety planning in 2022, this request had a 31% increase from 2021. The growth in requests for information reflects the need for the Hotline to serve as a comprehensive source of local resources regarding domestic violence and gender-based violence services.69

While 61% of all callers to the Hotline were survivors themselves, a large makeup of calls come from concerned friends, family, or others looking for ways to intervene in an abusive situation. In large part, these callers reach out to understand their options and the resources available through gender-based violence service providers.70

Safety planning is one of the key tools used in helping survivors reduce their risk of harm as they navigate their violent relationship, including while maintaining the relationship or attempting to leave the relationship. Victim Information and Resource Advocates (VIRAs) not only conduct safety planning with survivors but can also provide it for concerned friends and family looking for resources. If a third party to the survivor is calling, VIRAs assist them on how to walk a survivor through safety planning and can make referral to direct services if and when the survivor is ready to leave. General information and safety planning is also the second highest requested service from callers in Chicago, making up 24% of requests from the city.71 Access to information such as safety planning for survivors is one of the most critical and tangible outcomes for all callers looking for services.

The Illinois Domestic Violence Hotline serves as a central information hub and referral network for providers as well as survivors and their loved ones. The third most common request from callers is administrative support. These calls predominately come from service providers checking in with the Hotline to confirm what referrals VIRAs can make, and what programs and services are available.72
ILLINOIS DOMESTIC VIOLENCE HOTLINE STORY

Safety Planning with Callers

The Illinois Domestic Violence Hotline provides information and safety planning resources to thousands of callers each year.

This is one story, of many, that VIRAs shared for this report.

"I received a call from someone whose friend was experiencing domestic violence in her marriage. The caller lived in another state and wanted to know how to support her friend who had recently relocated to Illinois. The survivor had recently been diagnosed with a terminal illness and moved with her husband and children several hours away from family and friends. The friend calling reported that the victim had been enduring physical, verbal, and emotional abuse for years and, for the first time, the survivor was showing signs of wanting to leave and get help. I explained the importance of allowing the survivor to decide when and how to leave the situation and proceeded to give the friend instructions on safety planning to share with her friend. We also discussed the protections that Illinois law gives when a survivor takes their children to a shelter. The caller was encouraged to share the Illinois Domestic Hotline with the survivor as an initial first step to identifying resources."

Survivor Needs
LEGAL SERVICES

While legal advocacy services are some of the highest received services by clients working with gender-based violence providers, which is discussed in later sections of this report,

In 2022, call requests for legal advocacy on orders of protection declined by 20% compared to 2021 totals.

Legal advocacy includes both criminal and civil orders of protection. These call requests make up just under 10% of total contacts to the Hotline and can include topics such as where to file an order of protection, how to connect with advocates to assist in navigating this process, or what protections are included in an order of protection.73
This decline was also seen from Chicago callers, with a 31% decline from 2021 to 2022 in legal advocacy for orders of protection calls. In Chicago, legal advocacy for orders of protection totaled 13% of contacts in 2022. Although these requests have declined significantly compared to years prior, legal advocacy for orders of protection continues to be the fourth most requested service from callers in Illinois for 2022 and the third most requested service for callers in Chicago.74

Other legal services requests include categories such as civil legal representation (1090 requests), immigration assistance (79 requests), criminal legal representation (32 requests), and other legal advocacy needs (241 requests).

Survivor trauma and barriers to overcoming their situation can be compounded when simultaneously confronted with immigration status concerns. With the influx of migrants to Chicago and Illinois from South America and Ukraine in 2022, there was a 32% increase from 2021 in requests for immigration assistance.75 While callers can express a variety of legal services needs in one call, we expect immigration requests to continue to increase throughout 2023 as outreach and support services related to domestic violence prevention and training are happening in partnership with the city of Chicago during the time of publication.
The UVisa Backlog

Aditi* is an Indian immigrant to the United States and a survivor of sexual violence. Three days after the incident in her home, when she had gathered her courage and come to terms with what had happened, she contacted the police. At the hospital, she completed an evidence collection kit with the support of a medical advocate. “I was so scared while it was happening,” she told The Network. “You have to remove your clothing and they check every inch of your body.”

The incident completely destabilized her life, snowballing to impact work, school, home, and her status as an immigrant. The person who assaulted Aditi was her shift leader, and after she filed her police report, she was fired and could not keep up with payments for school and rent. She spent several months homeless and reliant on her immigrant community for support, bouncing from an acquaintance’s apartment to a hotel paid for by her new boss. Though she was grateful for the good graces of others, she emphasized how precarious it feels to be in the position of needing help from others, pointing to the fact that her immigrant community also included the boss that fired her in the first place. In response to these stressors and the traumatic event that caused them, Aditi has struggled with feelings of suicidal ideation and depression.

Nine months after enduring the invasive evidence collection process, her kit has yet to be processed and her criminal case has been unable to move forward. Without her place in school, her immigration status is at risk of expiring. Aditi’s legal aid attorney submitted a U-Visa certification application to the suburban police department handling her case, but at the time of her interview, had not received a response after waiting for several weeks. Reflecting on the backlogs holding up her case and endangering her legal status as an immigrant, she expressed intense frustration. “When I shout with anger, they tell me to be patient. I feel very trapped, it’s like the authorities here aren’t working at all to protect me.”

*All names changed for anonymity
The Waitlist Problem
Crystal* is a mixed-race woman and survivor of domestic violence. After experiencing complex abuse as a child, Crystal went on to be verbally, emotionally, and financially abused by an ex-boyfriend who is a former law enforcement officer. Over the years, she struggled with depression and suicidal ideation and saw therapists who did not specialize in gender-based violence. Recently, Crystal began seeking mental healthcare to meet her unique needs; unfortunately, she has been met with waitlists around every corner.

After calling a dozen organizations, Crystal learned that each had at least a six-month to one-year waitlist. Crystal added her name to each organization with the hope of receiving services. After 6 months, Crystal connected with a domestic violence service provider who recommended she join their support group program, as their individual counseling program still had a six-month waitlist. “It wasn’t really a good fit,” she told The Network, “There was so much storytelling from others which felt traumatic for me.” When the support group ended, Crystal waited another six months before being paired with a counselor to work one on one. She really connected with her counselor, but the program had a set six-month limit. “It was really difficult to lose her because I feel like she was one person who truly saw and understood me. Right now, I don’t even have a therapist. I needed more time.” Since exiting the counseling program, Crystal has joined yet another waitlist for trauma therapy services that is expected to be at least six months long.

*All names changed for anonymity
COUNSELING & ADVOCACY SERVICES

A fundamental part of a survivor processing and healing from their experience is access to comprehensive and consistent counseling and mental health services. In 2022, there was a 74% increase in calls requesting domestic violence support groups and a 12% decrease in calls requesting counseling and advocacy services from 2021.\(^76\) This change in requests can be attributed to wait lists many service providers have been experiencing in offering these services. As discussed elsewhere in this report, counseling is the second largest service received by clients across Illinois.

Direct service providers working with children and families report wait times for counseling and mental services can at least 1-3 months. In some cases, these service providers will refer clients to partner organizations to ensure they are provided these services sooner. In other cases, providers do not offer waitlists, to prevent survivors from waiting for services that may open up with other organizations. This, in turn, can lead to survivors and their families seeking non-gender-based violence-specific counseling and therapy services.

This same trend is exhibited in Chicago caller requests, with a 71.3% increase in domestic violence support groups from 2021 and a decrease in counseling and advocacy requests by 19% from 2021.\(^77\) While some survivors appreciate being able to meet individuals with similar lived experiences and collectively heal and reflect, others prefer a more tailored counseling experience where there is privacy for them and their families.

Other services Hotline callers can be connected to include grief counseling and sexual assault counseling. Sexual assault counseling includes having a VIRA connect callers to sexual assault counseling advocates for tailored counseling and advocacy needs. In 2022, there were 47 Hotline callers requesting this service.\(^78\) Grief counseling includes call requests seeking these specific services, in some cases, callers may have lost someone due to domestic violence and are calling the Hotline for referral services.
CHILDREN & TEEN SERVICES

When parenting survivors leave a violent relationship, they are concerned about their children’s safety in addition to their own well-being. Throughout the relationship, children can be used as a means of coercion by the person causing harm and, in some cases, children may have witnessed or experienced the violence directly. These callers reach out for services for their teens or children after experiencing domestic violence, community violence, or if they are in need of assistance dealing with the custodial parent who was causing harm.

In 2022, calls to the Hotline had a 106% increase in children’s services requests (245 requests) from 2021.79 Other child-related services requested included assistance in navigating supervised child visitation or safe exchange programs with the person who caused harm (13 requests), as well as teen-specific services (31 requests). Children’s services requests predominantly came from Chicago (116 requests) which saw a 170% increase in calls with children’s services requests in 2022. These calls from Chicago accounted for 47% of statewide calls related to children’s services.

FINANCIAL SERVICES

As survivors continue to navigate a post pandemic world with social safety nets funded through government programs such as Unemployment and Medicaid, cutting back their levels of funding and enforcing stricter guidelines, the fastest growing calls to the Illinois Domestic Violence Hotline have been public benefits and financial support requests with a 475% increase in calls since 2021. These calls can include information requests such as where to apply for Link and TANF benefits, food and clothing pantries, information on Crime Victims Compensation Funds and general financial assistance programs.

More than 750 individuals called with public benefits and financial requests across the state with almost 200 of those coming from Chicago.80

There is a consistent need for financial resources for all survivors to break the cycle of violence and gain independence. The launch of the Survivor Crisis Fund amid the pandemic and its continuation going into 2023 may be contributing to the increase in calls as survivors learn of these new avenues for financial assistance.
OTHER SERVICE NEEDS

The Hotline calls and services covered in this section are not exhaustive of all the requests for services the Hotline receives and the referrals it offers. They are intended to highlight some of the most sought-after services throughout the year. However, other important services available include medical advocacy and partner abuse intervention program (PAIP) referrals.

Callers requesting these services may make up a smaller percent of all contacts, but these service referrals can have lasting consequences for both survivors and their families. Medical advocacy callers made up 53 total requests in Illinois last year, including referrals to the nearest doctor, hospital, immediate care, or medical safety planning for healthcare services the person causing harm may not want the individual having access too.

Partner abuse intervention programs can be instrumental in helping individuals causing harm to break the cycle of abuse they are causing. The programs also offer techniques and approaches to dealing with emotions especially for those people causing harm who may also experienced violence at some point in their lives.

In 2022, there were 144 callers requesting information to participate in these programs. While the majority of PAIP participants are either court mandated to participate, or are referred to services by the Illinois Department of Child and Family Services, some may be voluntarily looking to participate to put a stop to the harm they are causing.
Partner Abuse Intervention Program: Beliefs & Skills for Domestic Peace

CENTER FOR ADVANCING DOMESTIC PEACE

Population Served:
Individuals who have harmed an intimate partner. Referrals come from criminal and civil courts, parole, child welfare, the domestic violence Hotline, other agencies, family members, and a few individuals who self-refer.

Program Description
The Center for Advancing Domestic Peace employs a strengths-based, trauma-informed, accountability intervention through its partner abuse intervention (PAI) program. The intervention first requires a comprehensive intake assessment to determine if the individual referred meet program criteria. If so, there is an orientation followed by 24 consecutive, 2-hour, weekly group sessions plus one individual session at the series’ midpoint. Sessions are co-facilitated by highly trained staff, who utilize a comprehensive curriculum, created in consultation with our victim services partners and developed in accordance with IDHS requirements. Services are available to all people regardless of race, gender, sexual orientation, religion, or disability status and are offered in English and Spanish. The program will celebrate its 20th anniversary in 2023.

2022 CLIENTS

<table>
<thead>
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<th>636 clients served in 2022</th>
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<tbody>
<tr>
<td>65.5% completion rate*</td>
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<tr>
<td>40–49% identified as Black</td>
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<tr>
<td>20–29% identified as Hispanic/Latinx</td>
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<tr>
<td>20–29% identified as White</td>
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<td>0–9% identified as Native American</td>
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<td>0–9% identified as Asian or Pacific Islander</td>
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<td>0–9% identified as Male</td>
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<tr>
<td>20–29% identified as Female</td>
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<tr>
<td>0–9% identified as Transgender</td>
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<td>0–9% identified as Middle Eastern</td>
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“I try my best, because this program has been a lifesaving tool... I am forever grateful to this program.”

“I learn so much about myself here. Look at yourself. When you speak about your wife and what she’s done... you miss the point. She isn’t the reason you’re here. It’s about you, your beliefs, your thoughts, your feeling... I learned we’ve got to work on ourselves every day.”

- PAIP Participants

*Note that individuals who are terminated often return and complete the program later
06

Housing Systems Response to Gender-Based Violence
When a survivor reaches out to a system for help, they deserve to be met with a trauma-informed response and good faith effort to meet their needs.

Four key systems in Illinois that frequently interface with survivors of gender-based violence (GBV) include the housing systems, human services systems including both public government programs and non-for-profits, the legal system, and the legislative system.

Data in the following four sections was collected from a wide range of sources, including GBV service providers, local housing authorities, law enforcement agencies, stakeholders in the criminal legal system, and from voting records of the Illinois General Assembly and explores how these systems responded to survivors in need.

Although securing safe and affordable housing can be a complex endeavor, there are a variety of programs and policies the federal government has enacted to add housing protections for survivors. The Violence Against Women’s Act (VAWA) is a federal law which provides housing protections for people applying for or living in units subsidized by the federal government and who have experienced domestic violence, dating violence, sexual assault, or stalking, regardless of sex, gender identity, or sexual orientation. VAWA protections are expansive and include the right to receive notice of your rights under the law, bifurcate your lease, emergency transfer your subsidy, and be protected from evictions related to gender-based violence. All federally administered housing programs are required to follow VAWA protections for survivors of gender-based violence. If a covered housing provider does not comply with VAWA’s emergency transfer, eviction, or anti-retaliation protections or its requirements regarding confidentiality, documentation, or notification of rights, then survivors can file a complaint through the U.S. Department of Housing and Urban Development (HUD) Office of Fair Housing and Equal Opportunity.
Chicago Housing Authority

Chicago Housing Authority is the largest Public Housing Authority in the state. Each year, they house an average of 2,400 families who come off the waitlist through federal programs such as the Housing Choice Voucher Program, Public Housing Program, Project Based Voucher Program, and now the Emergency Housing Voucher Program. While these programs have similar requirements and are all required to comply with VAWA and its protections, it is important to understand the ways in which each program has limitations, including the types of housing that may be included for each program:

Housing Choice Vouchers (HVCs)

HCVs are the federal government’s primary tenant-based housing assistance program to assist low-income families in renting on the private market through portable rental subsidies that are administered by PHAs.

Project-Based Vouchers (PBVs)

(PBVs) are part of a PHAs HCV program, but they start off as project-based subsidies at housing developments most often owned by a private owner and selected for assistance by the PHA. After one year, if a tenant is in good standing, the tenant can request to receive an HCV and, once they vacate their unit, a new tenant can receive the PBV assistance at the unit that was vacated.

Emergency Housing Vouchers (EHVs)

(EHVs) are a recent addition to PHA housing programs, which were created to support families experiencing homelessness, at risk of homelessness, or those fleeing domestic violence, dating violence, sexual assault, or stalking. These vouchers are largely subject to the same structure, rules, and regulations governing the HCV program, although some requirements were waived to streamline voucher issuance and meet the needs of the eligible populations.

Public Housing Programs

Public Housing Programs offer affordable housing (either based on a tenant’s income or a flat rate) through site-based units that are government owned and often government operated and managed. Public housing is a site-based subsidy, which means that if a tenant loses or abandons the subsidy, they will not be able to transfer it to another property.
For some of its programs, including some PBV and Public Housing Programs, CHA allows applicants to identify whether they are a survivor of domestic violence and, if so, they will receive a preference on the waitlist.90

Currently, only CHA’s Public Housing and PBV Programs are open for application, with applicants deciding which programs and buildings they would like to apply to. CHA’s HCV Program waitlist has not been open since 2014, when it was opened on a lottery basis.91 Even if the HCV Program were currently open, it does not create a preference for survivors of domestic violence, meaning that it is likely that survivors added to the waitlist would face years of waiting prior to being given a HCV.92

Project-Based Vouchers

In 2022, there were 33 applicants who identified that they were survivors of domestic violence (this may include families with children or individual persons) housed through Project Based Vouchers with CHA, and 2,471 who remained on the waitlist with a domestic violence preference. For these 33 individuals, they waited an average of 989 days to be housed or approximately 2.7 years to receive this housing.

Having survivors wait for extended time periods for permanent affordable housing creates an environment where they remain in unsafe situations longer and may continue to suffer ongoing gender-based violence during this time. This lengthy average wait time for those that identify a domestic violence preference in the PBV Program illustrates how difficult it can be for survivors to reach safe housing—which is often a primary barrier to leaving a harmful relationship—but it is significantly less than the general waitlist for CHA housing. For many of its properties, CHA reports a wait time of over 25 years for applicants applying to the waitlist.93
Public Housing Program

For its Public Housing Program, CHA assigns survivors of domestic violence with a second ranking preference, out of a total of five preference categories. Survivors of domestic violence applying to the Public Housing Program can self-identify and request a preference when they submit their application.

In 2022, CHA housed 47 applicants with a domestic violence preference through Public Housing Programs, with the average wait time totaling 1,177 days to be housed or approximately 3.6 years.

AVERAGE WAIT TIME

1177 days
to be housed or approximately 3.6 years

At the time this information was requested in 2022, the Public Housing waitlist last year was reported to have 2,241 applicants with a domestic violence preference. Similar to the PBV Program, the long wait list times for Public Housing Programs prevent CHA housing options from being an immediate safety solution or housing remedy for survivors fleeing gender-based violence.
Emergency Housing Vouchers

During the pandemic, the federal government made 70,000 Emergency Housing Vouchers (EHV) available to help house those experiencing homelessness. These EHVs created a new subsidized housing pathway for many vulnerable communities, which was a welcome addition to other housing programs administered by Public Housing Authorities (PHAs). While the EHVs are administered by PHAs, the Department of Housing and Urban Development (HUD) required PHAs to partner with Continuums of Care (CoCs), and in some cases Victim Services Providers (VSPs), to design referral processes and help coordinate housing and services funding for those experiencing homelessness.

The addition of long-term subsidized housing options was critical to housing more survivors during this time, but the referral pathways for these vouchers did not always focus on survivor populations or on smaller communities. In Illinois, there are 105 PHAs throughout the state and EHVs were allocated based on a formula that considered community need, PHA capacity, and geographic diversity. At the time of this report’s publication, 16 Illinois PHAs report awarding 2,108 EHVs with the median number of days from granting the EHV to issuance of a lease takes about 105 days. For states with similar populations, like Pennsylvania and Ohio, these medians are also comparable, taking 102 and 99 days respectively.
Emergency Housing Vouchers are intended to prevent homelessness and specifically name survivors of domestic violence, dating violence, sexual assault, or stalking as an eligible population. Similar to Housing Choice Vouchers, provided through HUD, EHV’s have income-limit requirements and citizenship requirements that survivors must meet in order to receive assistance. Although some PHAs have EVHs set aside for survivors, not all PHAs prioritize survivors for this program, nor did they collect data on the total number of gender-based violence survivors served. For future housing programs to be successful in meeting the needs of survivors of gender-based violence, VSPs and community partnerships need to be a leading voice in establishing referral networks.

Champaign County Housing Authority is connected to both their local Continuum of Care and a local gender-based violence service provider, intended to be a seamless referral process for survivors. In 2021, they reported having 113 Emergency Housing Vouchers, with 20 set aside for survivors of gender-based violence, or 18% of their total allocated vouchers. CCHA began receiving referrals in July 2021 and reported housing 16 survivors of gender-based violence through the Emergency Housing Voucher, with no data available for 2020 or 2022.
Harmful Housing Policies

Once a survivor identifies a safe and affordable unit, gender-based violence can continue to affect their housing stability, especially if the person causing harm engages in criminal activity, property damage, noise disturbances, or threats of harm at the survivor’s new location. Additionally, people causing harm often take action to destroy a survivor’s economic resources, making survivors less able to move and more likely to experience housing instability. The Hotline sees the effects of this intersection between gender-based violence and housing through the thousands of calls received each year from survivors that need shelter or resources to flee a dangerous situation.

Adding to the adverse effect that gender-based violence has on survivors’ long-term housing options, there are unintended harmful policies created in our communities in the form of Crime-Fee (or nuisance) Ordinances (CFOs).

CFOs are local laws that penalize tenants and landlords for criminal or disorderly activity that happens at a property, often leading to unfair adverse consequences for survivors caused by the person causing harm.

The specifications of each ordinance may vary but the majority of these ordinances include provisions such as mandatory criminal background checks for tenants, eviction of residents involved in criminal activity, and regular property inspections.

Survivors of gender-based violence are often disproportionately affected by CFOs because they need to contact emergency services or law enforcement with greater frequency than the general population. These ordinances can also further limit housing opportunities for survivors with criminal records perpetuating housing discrimination and hindering their ability to find stable housing. The Network has assisted survivors experiencing adverse effects from CFOs, including survivors who were threatened with eviction or whose properties had been flagged with law enforcement in such a way that the police would no longer respond to calls from the survivor’s home.

In 2015, Illinois enacted Public Act 99-441 to limit the effects of crime-free ordinances on survivors of domestic and sexual violence. This public act states that municipalities and counties may not enforce ordinances that
penalize tenants or housing providers from calling the police due to domestic or sexual violence.\textsuperscript{105} This law also prohibits enforcement if police are called on behalf of an individual who experiences domestic or sexual violence.\textsuperscript{106} If a municipality is found to be in violation of this state law, individuals may file a civil lawsuit invalidating the ordinance allowing for compensatory damages and attorney’s fees.\textsuperscript{107}

The 2022 Violence Against Women Reauthorization also included protections for the right to report crime in your home.\textsuperscript{108} Although VAWA generally applies to all federally-subsidized properties, this protection is more expansive and applies to any city, county, or state, that receives \textit{Community Development Block Grant Funding (CDBG)}.\textsuperscript{109} HUD keeps an active list of grantees who receive CDBG funding on its website. Under the new protection, CDBG grantees cannot penalize landlords, tenants, or others who seek emergency assistance or help from law enforcement or penalize requests for assistance with actual or threatened fees, eviction, refusal to renew a tenancy, among others.\textsuperscript{110}

Despite the Illinois law and VAWA’s expanded protections, more municipalities in Illinois continue to expand or enact CFOs, which contain harmful policies for survivors. For example, DeKalb amended its CFO in October of 2022, which penalizes landlords based on a single incident of alleged unlawful activity occurring on a rental property.\textsuperscript{111} Even though there are carve-out exceptions for survivors of domestic or sexual violence, survivors often end up affected by CFOs because of conduct by the person harming them (e.g., trespass, property damage, disorderly conduct). Many survivors are also afraid to call for emergency assistance or law enforcement because they cannot guarantee whether they will be believed about the violence they are experiencing and, with many ordinances only allowing one violation, they cannot risk being found in violation of the ordinance and losing their home. Additionally, it can be difficult for law enforcement to identify and for survivors to disclose domestic violence on the scene, meaning that some conduct may not be categorized as domestic violence (and therefore falling within the carve-outs of the ordinance) and that survivors will bear the adverse consequences created by the ordinance.\textsuperscript{112}

To address the ongoing adverse effects of CFOs in Illinois, The Network conducted a training on CFOs in January of 2023 to educate gender-based violence advocates and tenants on their rights related to these ordinances.
As part of The Network’s advocacy priorities, the Housing Advocacy department has also engaged in administrative advocacy with the goal of showing elected officials the harmful effects of these ordinances in DeKalb and in Barrington, where a new ordinance was recently passed to go into effect in 2024.

In 2019, when crime-free ordinances began to increase across the state, Jenna Prochaska at Loyola University’s School of Law Beazley Institute for Health Law and Policy, in partnership with Loyola’s Center for Urban Research and Learning, began tracking these ordinances. Along with Jenna and her team, as of publication, The Network has mapped 75 municipalities with known crime-free ordinances across Illinois, 37 of which include a domestic violence carve-out and 38 of which have no carve-outs.

If your community has a CFO and you would like to advocate for its removal, visit The Network’s website for a Template Advocacy Letter.
Crime Free Ordinances in Illinois as of 2022

AS OF 2022, AT LEAST
75 Municipalities in Illinois have a CFO

WITH
Less Than Half have a carve out to protect survivors of domestic violence
### Municipalities with a CFO

<table>
<thead>
<tr>
<th>Bellwood</th>
<th>Freeport</th>
<th>Peoria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Berkeley</td>
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<td>Phoenix</td>
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<td>Harvey</td>
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<td>Schaumburg</td>
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<td>Hoffman Estates</td>
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<td>Lynwood</td>
<td>South Holland</td>
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<td>Steger</td>
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<td>Mundelein</td>
<td>Streamwood</td>
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<td>Oak Forest</td>
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<td>Elk Grove Village</td>
<td>Oak Lawn</td>
<td></td>
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<tr>
<td>Elmwood Park</td>
<td>O’Fallon</td>
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### Municipalities with a DV Carve Out

<table>
<thead>
<tr>
<th>Addison</th>
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<th>Round Lake Beach</th>
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</thead>
<tbody>
<tr>
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<td>Schaumburg</td>
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<td>Markham</td>
<td>Skokie</td>
</tr>
<tr>
<td>Aurora</td>
<td>Midlothian</td>
<td>Thornton</td>
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<tr>
<td>Batavia</td>
<td>Moline</td>
<td>Tinley Park</td>
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<tr>
<td>Chicago Heights</td>
<td>Mount Prospect</td>
<td>Villa Park</td>
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<tr>
<td>Country Club Hills</td>
<td>Niles</td>
<td>Westchester</td>
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<td>Evanston</td>
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<td>Wheeling</td>
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<td>Fairview Heights</td>
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<td>Worth</td>
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<td>Flossmoor</td>
<td>Palatine</td>
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<tr>
<td>Forest Park</td>
<td>Park Forest</td>
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<tr>
<td>Galesburg</td>
<td>Rantoul</td>
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<tr>
<td>Glenwood</td>
<td>Richton Park</td>
<td></td>
</tr>
<tr>
<td>Hillside</td>
<td>Rolling Meadows</td>
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</tbody>
</table>
Human Services Responses to Gender-Based Violence
The following section of the report relies on data from InfoNet which reflects the work of domestic and sexual violence service providers.

A small number of clients may have multiple cases with a single service provider and one client likely receives several kinds of services. For example, a survivor may receive emergency shelter, in-person counseling services, and legal advocacy services across the span of one year and be reflected in the totals for each service area. When information is recorded as unknown, unreported, or unassigned by a provider, this means the data was not systematically collected the client declined to provide information, the data entered was unknown, no information was entered, or was missing.

Generally, “gender-based violence service providers” is an umbrella term used to include both domestic violence and sexual violence services. However, in this section we will be including data reporting totals for providers who, in some cases only provide domestic violence services, only provide sexual violence services, and some providers who offer both types of services. Sexual violence service provider data collected in this section are composed of both rape crisis centers, defined by the Illinois Department of Human Services and the Illinois Coalition Against Sexual Assault, and from dual service providers who offer both domestic violence and sexual violence services. However, dual service programs determine which primary area of need the survivor comes in with and will categorize the client as being either a domestic violence or sexual violence client.

Providing both sexual violence and domestic violence services can provide its own set of challenges, including the gender-based violence community’s overall struggle to keep up with work force demands. For programs that provide both domestic violence and sexual violence services, their work force may need to be cross trained in sexual violence and domestic violence services which can make the hiring process more challenging to ensure clients receive proper services.
OVERVIEW OF DOMESTIC & SEXUAL VIOLENCE SERVICES

The abuse a survivor experiences can affect every aspect of their and their family’s life including housing, economic opportunity, mental and physical well-being, and more. These are all needs a survivor must have met in order to fully break the cycle of abuse and lead them to independence and healing.

Gender-based violence direct service providers are best equipped to respond to and understand survivors’ and their family needs. Program offerings include wraparound trauma-informed services ranging from housing, counseling, mental and physical health services, legal services, economic empowerment, case management, and more.

In 2022, gender-based violence services providers managed 48,828 client cases involving 41,365 adults and 7,463 children. Sexual violence service providers served a total of 11,105 survivors with 10,076 being the survivors themselves and 1,029 being significant others to the survivors.
Domestic Violence Clients

While statewide totals for domestic violence services cases are on an upward trend from previous years, totals have not yet reached comparable levels to pre-COVID service totals. Multiple factors may be impacting these totals; however, workforce constraints and returning to in-person services post pandemic have been an adjustment for service providers, employees, and survivors.

The following sections of this report will take a closer look at the variety of services survivors need and gender-based service programs offer, in order to break free from the cycle of abuse, beginning with when a survivor may seek housing support and how they get there.

Transportation Services

In emergency situations when a survivor’s window of time to leave is limited, access to means of transportation is vital to survivor safety and is the initial step in their journey to freedom. In 2022, the Illinois Domestic Violence Hotline provided 798 Uber rides to adults and children across the state, almost all of which were emergency requests for transportation to a shelter, hotel, or a friend or family's home for safe housing. Other requests included transportation to court to obtain an order of protection or access medical care.

Source: InfoNet

- **798** UBER RIDES provided in 2022
- **810** ADULTS
- **438** CHILDREN
- **12** PETS
People who cause harm often use tactics to isolate survivors and their families from their nearest support systems. In many cases, this includes taking them across state lines so that, when the survivor is ready to leave, they may need to travel for hours just to reach their nearest friend or family member.

Transportation needs and survivorship are inextricably linked. Survivors may have been restricted from accessing a car, obtaining a driver’s license, and often have limited financial resources for accessing other transportation means. Access to transportation is especially important for obtaining and maintaining employment, which is fundamental to financial independence.

In 2022, gender-based violence programs provided a total of 5,484 adults and children transportation services. Many of these requests include transportation to other support areas including job interviews, medical visits, and follow-up court hearings to ensure orders of protection remain effective.

While access to reliable, accessible, and cost-effective transportation is a key component of reaching independence and self-sufficiency, this is a service area that is typically underfunded and underutilized.
Uber Rides Provided through IL DV Hotline in 2022

- **Total Rides**
- **Total Adults**
- **Total Children**

<table>
<thead>
<tr>
<th>Month</th>
<th>Total Rides</th>
<th>Total Adults</th>
<th>Total Children</th>
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<td>25</td>
<td>12</td>
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<tr>
<td>February</td>
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<td>March</td>
<td>52</td>
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<td>April</td>
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<td>12</td>
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<td>May</td>
<td>66</td>
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</tr>
<tr>
<td>June</td>
<td>67</td>
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<td>July</td>
<td>85</td>
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<td>August</td>
<td>70</td>
<td>42</td>
<td>12</td>
</tr>
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<td>September</td>
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<td>October</td>
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<td>November</td>
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</tr>
<tr>
<td>December</td>
<td>84</td>
<td>44</td>
<td>44</td>
</tr>
</tbody>
</table>

Source: IL DV Hotline
ILLINOIS DOMESTIC VIOLENCE HOTLINE STORY

Emergency Transportation

The Illinois Domestic Violence Hotline provides hundreds of Uber rides to safety for callers each year. Hotline staff, known as Victim Resource and Information Advocates (VIRAs), coordinate this essential transportation and ensure that survivors have access to the information and resources they need exactly when they need it most.

This is one story, of many, that VIRAs shared for this report.

“An urgent call came into the Hotline from a victim of domestic violence, who stated her boyfriend had taken her and her children to a motel over an hour away from where they lived and something did not feel right to her. She shared that he had previously abused her in many different ways and she was scared for her and her children’s lives. She called the Hotline looking for safety. I asked the survivor for their location and used Google Maps to find a restaurant around 200 ft from the motel, then asked if she was able to run to that restaurant for safety while Hotline staff looked for a domestic violence shelter with availability.

By the time the caller made it safely to the restaurant, I had found space for her and her children. The survivor was immediately linked to the shelter for an intake. Later, the survivor called back to let us know that they were accepted at the shelter and we proceeded to coordinate an Uber ride to get them to safety. I stayed on the call for the duration of her ride. As we talked, we developed a safety plan and the survivor said that the Hotline helped her family get out of a ‘possible tragedy’ happening that day.”
Survivor’s With Pet Needs

Plans and logistics to leave an abusive relationship can be complicated further when pets are involved and being used as a means of coercion by the person causing harm. They may exploit the emotional bond between a survivor and their pet, using threats or actual harm to manipulate and control the survivor’s decision to leave.

Hesitancy to leave a pet behind due to threats and coercion, coupled with the lack of pet-friendly resources or shelters, can make it exceedingly challenging for survivors to seek safety and escape the cycle of abuse. The critical need for pet-accessible support is evident from survivor stories, encompassing not only pet-friendly shelters but also resources which allow for the transportation and accommodation including pets.

During the pandemic, Chicago’s Department of Family and Support Services provided funds from PetSmart to the Illinois Domestic Violence Hotline. These funds were used to provide Uber rides and pet resources including food, litter, beds, and toys for survivors and their companions. However, because these funds were provided to the city of Chicago, these funds were limited to serving survivors within city limits.
In 2022, there were 59 contacts to the Hotline from survivors requesting shelter for themselves and their pets in order to leave an abusive relationship. There were also 21 calls to the Hotline in which the survivor indicated their pet was a service animal. In total, the Hotline provided 12 Uber rides to survivors with pets to ensure they arrived to safety with accommodation including their pets.

Recognizing the importance of survivor support includes pet services that facilitate safe transportation and temporary accommodation for pets continue to grow. These efforts aim to remove barriers that survivors face when attempting to leave abusive situations, ensuring the safety and well-being of both humans and their cherished animal companions. As of the publication of this report, The Network has recently merged with a Safe Haven Network to expand the existing pet services currently offered, beyond the city of Chicago.
ILLINOIS DOMESTIC VIOLENCE HOTLINE STORY

Pet Safety as Part of Survivor Safety

The IL DV Hotline staff, known as Victim Resource and Information Advocates (VIRAs), understand that having a safe place to stay often means finding a place that accepts pets in addition to survivors and their children.

This is one story, of many, that VIRAs shared for this report.

"I received a call from a woman seeking transportation and housing for herself and her emotional support pet, a dog. The caller explained that she was at the courthouse, where she had obtained an order of protection (OP) against her boyfriend, who she was living with, and she needed transportation home to get her dog and then to shelter for both of them. The survivor was not sure if the abuser was back at the apartment, so we took time to make a safety plan, including making a physical copy of her OP at the courthouse before returning home. I explained that there was no space at domestic violence shelters currently to accommodate her and her dog; however, she qualified for the temporary hotel program via the PetSmart Pet Grant the Illinois Domestic Violence Hotline received.

The caller took her OP and called the police, who confirmed they would meet her outside of her apartment. The Hotline then provided her with an Uber ride back to her apartment. When she called back, the survivor was distressed, because the abuser had locked her out of the apartment with the dog inside. The landlord was not available to help her access her dog and the police were unable to help her, even with a sole possession of the dog clearly written on the OP. I provided transportation services to get the caller safely back to the hotel and offered to link the caller to The Network’s Director of Housing Advocacy for support to get her apartment unlocked and retrieve her dog. A week later, I coordinated another Uber ride to reunite the caller with her dog."
Shelter, Transitional, & Affordable Housing Services
Access to safe, affordable, and accessible housing for the survivor and their family is one of the largest barriers to leaving and staying away from a person causing harm. Emergency shelter provided by gender-based violence programs is one of the few immediate resources available to access safe housing for survivors, and these programs are often at capacity due to the high level of need. As highlighted elsewhere in this report, the need for emergency housing to flee gender-based violence is reflected in requests to the Illinois Domestic Violence Hotline for housing, with a third of callers requesting domestic violence shelter.\textsuperscript{113}

IL DV Provider Clients Who Received Housing Services in 2022

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Number of Provider Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transitional Housing</td>
<td>1485</td>
</tr>
<tr>
<td>Off-Site Shelter</td>
<td>1870</td>
</tr>
<tr>
<td>Housing Advocacy</td>
<td>4778</td>
</tr>
<tr>
<td>On-Site Shelter</td>
<td>5553</td>
</tr>
</tbody>
</table>

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals. Source: InfoNet

In 2022, shelter was a primary service provided to clients with a total of 6,934 adults and children receiving on and off-site shelter through gender-based service providers, an increase of 5% from 2021. While these totals have not reached pre-pandemic levels, the trend in total clients served suggests providers are on their way to meeting if not exceeding 2019 totals in 2023.

Shelters play a pivotal role in ensuring survivors and their children not only have an immediate resource to access safety but also receive holistic services and support to recover and rebuild from the violence that they have experienced. In order to meet survivor needs, shelter providers assess the survivor and their dependents and provide case management based on the survivor needs.
IL DV Provider On & Off Shelter Clients in IL in 2022

Sources: InfoNet

IL DV Provider Adult & Child Clients Receiving On or Off-Site Shelter Over Time

Sources: InfoNet
While overall shelter service counts continue to trend upward for the third year in a row, the need for housing advocacy continues to grow at an even higher rate. Housing advocacy can include, but is not limited to, services such as helping a client break a lease, looking for funding to cover rent, assessing housing options that may need to be ADA compliant, and overall helping them find longer term housing options.

The total number of clients served with housing advocacy was a slight increase of 4% from 2021; however, comparing 2022 to pre-pandemic 2019 there was a 30% increase in clients served through housing advocacy. This reflects how important housing advocacy is to both short and long-term safety solutions for survivors, and a valuable tool for service providers.

The total number of hours spent with clients on Housing Advocacy has far outpaced the number of clients served and this has been a continuing trend over the last three years. From 2019 to 2022, there was a 108% increase in the total number of hours advocates spent on Housing Advocacy. This was a massive jump from pre-pandemic to post-pandemic. In 2019, advocates spent an average of 1.98 hours per client served, and in 2022, advocates spent an average of 3.16 hours on housing advocacy per client.

The increase in time spent on housing advocacy suggests client services related to housing have become more complex and time consuming as survivors face housing barriers, experience housing discrimination or retaliation, and weigh their short-term and long-term housing options. This is also reflected in the average number of days survivors spend in shelter pre and post pandemic. In 2022, the average number of days in shelter had grown to 55 days from 2019’s 52 day average.

These totals suggest that shelter stays have grown longer and may continue to increase, leading to capacity issues for programs and their employees. When survivors stay in shelter longer, it prevents other survivors from fleeing dangerous situations, exposing them to the risk of further violence. Longer shelter stays also contribute to increased time advocates spend on exploring other housing solutions when shelter is not available.
IL DV Providers Housing Advocacy Services Over Time

- Number of Clients
- Hours of Service

Source: InfoNet

Average Number of Days of Shelter Received by IL DV Provider Clients Over Time

Source: InfoNet
Turn Aways

The growing rate of shelter turn aways is likely related, in part, to the growing length of shelter stays. In 2022, there were 6,187 adults and children turned away from domestic violence shelters, a 36% increase from 2021 turn aways. However, these totals are not yet at pre-pandemic levels. One of the lowest turn away pre-pandemic years was 2017, reaching 6,997 turn aways, a 13% difference from 2022 totals.

6,187 adults & children turned away from shelter in 2022

36% increase from 2021 turn aways

Total Number of Survivors Turned Away from IL DV Provider Shelters by Region Overtime

Source: InfoNet
Survivors seek shelter as a safe space when they have no other safe options. Days when programs are at capacity and are forced to turn away survivors can be incredibly difficult for shelter staff because they understand that there are few other emergency housing options for survivors. As shelter unavailability rises, the number of times an individual tries to get into a shelter increases. When shelter programs are at capacity, survivors may return to the shelter more than once trying to access safety, meaning that the numbers reported in this section may be duplicated to reflect one individual trying to enter various shelters.
Turn Aways by Region
In many regions, there are only one or two shelter beds available at a time (some of which may be limited to serving specific populations, such as male survivors with children), which means that a survivor with more than one child will get turned away. Survivors may also be fleeing with young children in need of a crib and there is a similar shortage of cribs, especially in Chicago. In 2022, while Chicago’s overall turn away totals decreased from years prior, a total of 546 children were turned away, outpacing 423 adults turned away, which is likely supported by the limited availability of overall beds and individual cribs.

Looking at turn away rates over the last three years, the Central, Southern, and Northern regions are all on an upward trend post-pandemic. The Northern and Central regions seem to be back to pre-pandemic turn away levels with 541 and 755 turn aways respectively reported in 2022. The Southern region has continued to fluctuate pre and post-pandemic with 144 turn aways reported in 2022 and 246 turn aways reported in 2019. As with other forms of data collection, staff constraints may lead to underreporting on turn away totals.

In 2022, the region with the highest number of turn aways was the Suburbs, which has continued to be the trend over the last six years. This is due to lack of shelter capacity with approximately 163+ beds for the entire suburban region.
Total Number of Survivors Turned Away from IL DV Provider Shelters by Region Over Time

Source: InfoNet
Bed Availability

The consistent need for shelter is also reflected in the Illinois Domestic Violence Hotline call totals. There are multiple days and sometimes weeks at a time when there are no shelter beds and cribs available. In 2022 in Chicago, there were a total of 96 days without beds and cribs across the city. There was a total of 199 days without cribs and 88 days without beds, meaning shelters in the city struggled to keep up with the demand of not only providing shelter for adults but most commonly for children.

As bed and crib counts diminish, requests for shelter increase. In August 2022, there were 23 days (about 3 and a half weeks) without cribs available and 16 days (about 2 and a half weeks) without beds available. Calls requesting shelter soared to approximately 450 calls for the month of August. Individuals may call and check in daily to inquire about availability or in some cases may even try to get into a shelter in another region.

88 days WITHOUT beds
199 days WITHOUT cribs
Contacts to IL DV Hotline from Chicago Requesting Domestic Violence Shelter Compared to Days without Beds or Cribs in Chicago in 2022

As discussed in other sections of this report, the variety of housing options, lack of resources and barriers to entry for housing services make navigating some of these transitional, affordable and long-term housing solutions challenging for both survivors and advocates.
Population Served:
The program predominantly serves Dupage County, but will refer and assist survivors from anywhere in the state. This is important given that survivors sometimes need to go out of county for safety purposes.

Program Description
ADA-accessible, 41-bed facility for single adults and adults parenting children, including CORE (Creating Our Resilience and Empowerment) Life Skills Programming. Staff on site and available for support 24/7 and 365 days/year, providing daily workshops, case management, and meeting all personal needs (food, toiletries, etc.) for residents throughout their stay. Families get their own room & single adults share bedroom space. Individual and group counseling for all impacted by DV – tailored to meet the individualized needs of adults, children, and teens. The Emergency Hotline also offers support for victims and intake, information for their family, friends, concerned relatives, etc. 24 hours/day, 7 days/week, 365 days/year. The average length of stay is 31 nights. Clients along with their advocates come up with a target date which is different for every client. Some leave before or after their assigned target date. Clients often report that our program helped them reach safety, end the cycle of domestic violence, feel alive again and helped them reach goals that they never thought they could.

2022 CLIENTS

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>176</td>
<td>clients served in 2022</td>
</tr>
<tr>
<td>20–29%</td>
<td>identified as Male</td>
</tr>
<tr>
<td>70–79%</td>
<td>identified as Female</td>
</tr>
<tr>
<td>50–59%</td>
<td>Black</td>
</tr>
<tr>
<td>20–29%</td>
<td>White</td>
</tr>
<tr>
<td>10–19%</td>
<td>Hispanic/Latinx</td>
</tr>
<tr>
<td>0–9%</td>
<td>Native American</td>
</tr>
<tr>
<td>0–9%</td>
<td>Asian or Pacific Islander</td>
</tr>
<tr>
<td>0–9%</td>
<td>Middle Eastern</td>
</tr>
<tr>
<td>40–49%</td>
<td>under 12</td>
</tr>
<tr>
<td>0–9%</td>
<td>ages 12–17</td>
</tr>
<tr>
<td>0–9%</td>
<td>ages 18–24</td>
</tr>
<tr>
<td>20–29%</td>
<td>ages 25–34</td>
</tr>
<tr>
<td>10–19%</td>
<td>ages 35–44</td>
</tr>
<tr>
<td>0–9%</td>
<td>ages 45–54</td>
</tr>
<tr>
<td>0–9%</td>
<td>ages 55–64</td>
</tr>
</tbody>
</table>
07 Survivor Story

The Need for Shelter for All

Nathan* is a Black man and a survivor of domestic violence. He experienced emotional, verbal, financial, and extreme physical abuse at the hands of his wife, who often weaponized gender stereotypes to have him arrested after incidents of abuse. Over time, Nathan lost multiple jobs, as his wife routinely harassed his supervisors, leaving him financially dependent on her and isolated from his community. “That’s why it took so long to leave,” he told The Network, “I didn’t even have money for bus fare.”

Escalating violence made Nathan fear for his life, so he sought help at a hospital emergency room. For six days and six nights, Nathan called every domestic violence resource the hospital social worker could provide, but no one had room for a single, male survivor. “I started to think, ‘I know that we fought, but at least I had a bed.’ Maybe she was right when she would say, ‘No one will help you.’”

On the seventh day, when Nathan had all but given up, he learned that a domestic violence shelter had room for him. At shelter, Nathan has begun to connect with a wide range of services but emphasized that access to shelter is only the first step in overcoming many challenges that still lie ahead in rebuilding an independent life.

*All names changed for anonymity
Counseling and Therapy Services
Survivors experience a greater risk of post-traumatic stress disorder, depression, and anxiety and express how necessary counseling and therapy services are to continue their healing process. As with most survivors, they have layered life experiences that contribute to their need for mental health services, and in 2022, 618 clients, or 1.5% of all domestic violence services clients also reported being veterans.

In 2022, 19,780 clients received telephone-based counseling services and 18,464 received in-person counseling services. The use of counseling services was more common by telephone during 2020 and 2021 but grew closer to the in-person counseling services use in 2022.

Direct service providers offer a full range of services including evaluations for adults and their children, art therapy, as well as parenting services, which include training and coaching on how adults may parent their children. While some providers offer counseling and therapy through traditional means, there is also room for creativity in programming and services to have survivors express and process their lived experiences through other methods.

19,780 received telephone-based counseling
18,464 received in-person counseling
IL DV Provider Clients Who Received Counseling & Therapy Services in 2022

- Art Therapy: 199
- Group Therapy: 271
- Individual Therapy: 1674
- Evaluation/Assessment: 1818
- Parental Services: 1861
- Adult Group Counseling: 4065
- In-Person Counseling: 18,464
- Telephone Counseling: 19,780

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals.
Source: InfoNet

Use of Telephone and In-Person Counseling Services by IL DV Provider Clients Over Time

- Telephone Counseling
- In-Person Counseling

Year
- 2020: 21,522 (Telephone), 16,685 (In-Person)
- 2021: 21,652 (Telephone), 17,417 (In-Person)
- 2022: 19,780 (Telephone), 18,464 (In-Person)

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals.
Source: InfoNet
Voices & Faces Project
A GLOBAL ORGANIZATION, BASED IN CHICAGO.

Program Description
The Voices & Faces Project was created to bring the names, faces, and testimonies of survivors of gender-based violence to the attention of the public, mainly through their signature writing program, The Stories We Tell, an immersive, two-day testimonial writing workshop for survivors of sexual violence, intimate partner violence, and trafficking. Their mission is to change minds, hearts, and public policies through the power of personal testimony and storytelling. Survivors not only learn skills for sharing their stories with the public but also access the healing power of creative expression.

Program Reach
Our Stories, Our Power, and Our Movement: Using survivor narrative to address human trafficking and commercial sexual exploitation
Interactive Workshop at the National Center for Youth Law

Founder, Anne K. Ream, presented Story Changes Everything: How Survivor Narratives Are Changing the Movement to End Commercial Sexual Exploitation as the keynote speaker at The Laura Bush Institute 2022 Human Trafficking Conference

2022 TRAINING IMPACT

<table>
<thead>
<tr>
<th>Workshop</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>75 survivor participants The Stories We Tell Writing Workshop</td>
<td></td>
</tr>
<tr>
<td>15 survivor participants Up Next Advanced Writing Workshop</td>
<td></td>
</tr>
<tr>
<td>40+ survivor participants Creating Change: Testimony &amp; Strategic Storytelling Training</td>
<td></td>
</tr>
</tbody>
</table>

To read poetry from Voices and Faces Project artists, visit: voicesandfaces.org/poetry
Children & Teen Services

Traditional advice for going through a divorce is to never say a bad thing about the other parent. I wish we taught people how to talk about parents as complicated people instead. After the divorce, the kids and I did family counseling together, which really helped us to talk about what happened. Of course, my kids continue to see and love their father, even when he disappoints them, so I’ve done my best to teach them critical thinking skills and encourage their self-esteem, confidence, and emotional regulation. I hope that helps them manage what they continue to see and hear.”

Jennifer*

Witnessing violence and parental separation at a young age can be traumatic and may leave children feeling isolated and overwhelmed. Through gender-violence based services providers, not only do survivors receive counseling and therapy services but their children can too.

In 2022, children received a variety of services from domestic violence service providers, including participating in childcare, individual and family counseling, as well as supervised visitation and safe exchange programs. Through safe exchange programs, survivors are able to stay removed from interacting with the person who caused harm, while program employees monitor or facilitate the exchange of children with the other parental figure.

Supervised visitation is also another avenue for children to maintain contact with their other parental figure, without requiring the survivor to be involved. In 2022, of the clients who reported detailed information about parenting time to their service provider, 74% of children receiving services were not allowed visitation with their other parental figure, 9% of children were allowed supervised visitation, and 17% of children receiving services were allowed unsupervised visitation with their other parental figure.

These services assist survivors in feeling supported during a tumultuous time where they may be transitioning to being single parents for the foreseeable future. In many cases, survivors have voiced how their children’s healing through this process is just as important to their individual healing.

“When I connected with a domestic violence service provider, I asked for help talking to my kids about what was happening. I had child specialist appointment and it was absolutely great. I’m so glad kids have access to social and emotional learning resources these days, because my girls are the queens of boundaries.”

Alyssa*
**IL DV Provider Clients Who Received Children’s Services in 2022**

- Safe Exchange: 72
- Supervised Visitation: 169
- Child Care: 820
- Group Children’s Counseling: 1656
- Family Counseling: 1714
- Individual Children’s Counseling: 4760

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals. Source: InfoNet

**Visitation Status with Parent Causing Harm for IL DV Provider Clients’ Children in 2022**

- No Visitation Allowed: 7369
- Supervised Visitation: 877
- Unsupervised Visitation: 1739

Source: InfoNet
Economic & Empowerment Services

A vast majority of survivors experience some form of financial abuse as part of their survivorship.

94%–99% of domestic violence survivors have experienced economic abuse experts estimate\textsuperscript{16}

A familiar tactic of individuals causing harm is to control financial resources so that survivors can maintain reliant on them. Often, survivors have been stopped from working or detained from educational opportunities placing a limitation on their ability to gain and maintain employment.

Although domestic violence can happen to anyone, the majority of clients, 55%, reported being unemployed or underemployed in 2022. 36% of survivors reported being employed full-time and 9% of survivors’ employment status was unknown.

<table>
<thead>
<tr>
<th>Employment Status IL DV Provider Clients in 2022</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unknown 9% (3826)</td>
<td></td>
</tr>
<tr>
<td>Not Employed</td>
<td>16,552 (40%)</td>
</tr>
<tr>
<td>Full-Time</td>
<td>14,893 (36%)</td>
</tr>
<tr>
<td>Part-Time</td>
<td>6094 (15%)</td>
</tr>
</tbody>
</table>

Source: InfoNet
These numbers underscore the importance of economic empowerment programs and services to support survivors in gaining and maintaining their independence. In 2022, domestic violence service providers offered clients services like cash assistance through economic assistance programs, life skills and conflict resolution training, and educational and employment assistance programs. These trainings are concrete tools to ensure the long-term success of the survivor as it relates to future employment and job opportunities. Economic assistance was provided to 4,916 individuals, largely through cash assistance.

This total only reflects a small 3% increase from last year’s economic assistance totals, even as contacts to the Hotline suggest economic assistance programs are in high demand. This economic assistance demand is also reflected in the decrease in survivors reporting unemployment benefits. From 2021 to 2022 there was a 98% decrease in the total number of survivors reporting unemployment benefits.

During the pandemic, unemployment benefits were supplemented with increased Federal benefits but these benefits were a time-limited resource. This explains why, from 2021 to 2022, there was a massive decrease in the number of survivors receiving unemployment benefits. These survivors are now in need of other forms of supplemental income through other measures, which can be reflected in the number of calls received by the Illinois Domestic Violence Hotline, showing an increase in economic assistance requests.
Only 2% of clients reported receiving TANF benefits, also known as Temporary Assistance for Needy Families, in 2022. Much like Medicaid, SNAP, or Link benefits, these programs are dependent on family size and income levels. With the average monthly income of less than $500 a month being reported by 14,025 domestic violence clients in 2022, it is clear that not all families who are eligible for these programs are receiving them. This may be related to administrative burdens for survivors to file, or perhaps more likely, a failure of the state and federal programs to properly screen applicants for survivorship and extend them the full range of eligible benefits.

The average monthly income reported by 14,025 domestic violence clients in 2022 was less than $500.
In 2022, 44% of all survivors working with providers reported some form of earned income and 23% of survivors reported no financial resources earned or otherwise. 12% of client data on primary source of income is unknown. Earned income can also be obtained through non-employment-related methods such as alimony or child support and the fourth largest form of income was through Social Security Income (SSI) or Social Security Disability (SSDI), with 8% of survivors reported receiving these forms of income.

Income can also be supplemented through non-cash benefit programs such as food stamps, also known as Link cards, through the Illinois Department of Human Services. 39% of all clients report having access to these benefits and 5% (1954 clients) report receiving Special Supplemental Nutrition of WIC benefits for those with children under the age of 5.

In comparison, the Illinois Department of Human Services only reported 32 WIC recipients disclosing their survivorship in 2022. This reflects a severe issue of state agencies underreporting survivorship for a host of reasons including but not limited to survivors not feeling comfortable disclosing or the agency not collecting this information. These benefits can help offset the financial burden many single adults face when parenting children through the separation due to domestic violence and should continue to be used and expanded upon as an added safety net for survivors.

**Sexual Violence Clients**

In 2022, 39% of clients receiving services reported not being employed, 17% reported being full time employed and 10% reported being part time employment. As reflected in the demographics section of this report, the vast majority of sexual violence clients are minors with the second largest category being young adults between the ages of 18-24, which may explain the low reporting rate for employment status.

**Known Employment Status IL SV Provider Clients in 2022**

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Percentage</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Employed</td>
<td>39%</td>
<td>4310</td>
</tr>
<tr>
<td>Full-Time</td>
<td>17%</td>
<td>1852</td>
</tr>
<tr>
<td>Part-Time</td>
<td>10%</td>
<td>1077</td>
</tr>
</tbody>
</table>

*Source: InfoNet*
Population Served:
The program predominantly serves the Chicago and Cook County area, but will refer and assist survivors from anywhere in the state.

Program Description
The program is for survivors to be able to access affordable and culturally-competent medical services. Clients are connected to the agencies that can provide medical services to clients irrespective of their language needs or visa status, and maintain confidentiality. Thanks to the program, clients have been able to access COVID-19 vaccination and diagnostic services, flu shots, and address concerns like a routine health check and address specific needs. Services include: Medical Advocacy, Mental Health Counseling, Health Clinic, Community Health Outreach and Awareness, Cross-Sector Collaboration (i.e. Partnership with community violence organizations), and Reproductive Healthcare.

2022 CLIENTS

<table>
<thead>
<tr>
<th>Gender / Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latinx</td>
<td>0–9%</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>30–39%</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>0–9%</td>
</tr>
<tr>
<td>Black</td>
<td>30–39%</td>
</tr>
<tr>
<td>White</td>
<td>10–19%</td>
</tr>
<tr>
<td>18–24</td>
<td>30–39%</td>
</tr>
<tr>
<td>25–34</td>
<td>0–9%</td>
</tr>
<tr>
<td>35–44</td>
<td>30–39%</td>
</tr>
<tr>
<td>45–54</td>
<td>10–19%</td>
</tr>
<tr>
<td>55–64</td>
<td>0–9%</td>
</tr>
</tbody>
</table>
Medical & Health Services

Although survivors most frequently report emotional abuse, physical abuse is the second most common form of abuse reported. Medical care data is an optional category collected at intake for survivors receiving services. In 2022, 12,587 individuals disclosed medical information to their service providers. Of these individuals, 17% reported being seen by a healthcare provider at intake.

In many cases, when physical violence is present, serious or lasting injury can occur. In 2022, 477 clients reported needing admission to the hospital and 1,685 reported going to the emergency due to injuries sustained. A total of 2,158 survivors reported being seen by a healthcare provider after a domestic violence incident. These are likely substantial undercounts, given that this information is not mandatory for providers to collect.

IL DV Provider Clients Receiving Health Services Over Time

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals.
Source: InfoNet
Health Insurance Coverage of IL DV Provider Clients Over Time

- Medicaid Health Insurance
  - 2020: 16,400
  - 2021: 17,700
  - 2022: 17,938

- Private Health Insurance
  - 2020: 8,600
  - 2021: 8,700
  - 2022: 8,552

- No Health Insurance
  - 2020: 6,400
  - 2021: 6,000
  - 2022: 5,585

- Medicare Health Insurance
  - 2020: 2,100
  - 2021: 2,200
  - 2022: 2,268

- State Children’s Health Insurance
  - 2020: 1,600
  - 2021: 1,700
  - 2022: 1,579

- Veteran’s Administration Med Services
  - 2020: 0
  - 2021: 169
  - 2022: 159

Source: InfoNet

Known Health Insurance Status of IL DV Provider Clients in 2022

Unknown: 7004

Medicaid Health Insurance: 17,938
Private Health Insurance: 8,552
No Health Insurance: 5,585
State Children’s Health Insurance: 1,579
Medicare Health Insurance: 2,268
Veteran’s Administration Med Services: 159

Source: InfoNet
The most common form of medical coverage survivors report to providers is Medicaid, with 50% of survivors reporting coverage in 2022. There was an increase in the total number of individuals reporting Medicaid coverage from 2020 to 2022 as the number of clients reporting no health insurance decreased. This decline in individuals with no insurance and an increase in Medicaid coverage may be due to a new law passed in 2022 in Illinois allowing undocumented individuals over the age of 52 to access Medicaid coverage. Throughout the pandemic and into 2022, there was also a halt of Federal Medicaid requirements to show proof of income in order to be eligible for Medicaid. These two policies may provide more context to explain the overall decrease in uninsured clients and increase in Medicaid coverage in 2022.

While medical coverage is necessary for clients to receive off-site medical services, this insurance coverage is also needed for wraparound services such as substance abuse treatment. Decades of research has consistently found that being abused by an intimate partner is associated with increased risks for substance use and other health concerns. In 2022, 394 individuals received substance abuse services, reporting a decline from 2021 levels where 512 individuals received substance abuse services.

Substance use coercion is a known tactic used by people causing harm and due to internal and community stigma, many survivors may hesitate to come forward.

Survivors of gender-based violence are also at risk of self-medicating as a coping mechanism. Substance abuse services and early intervention can be preventative for long term health.
Legal Services

Although not all survivors decide to pursue the legal system when leaving a domestically violent situation, it is important that survivors understand their rights and options and feel supported through this process. Both civil and criminal orders of protection serve as tools to prevent future violence by the person who caused harm and, in some cases, may act to hold them accountable for their actions.

In 2022, 23,292 clients received civil legal advocacy services related to orders of protection. This includes consultations as well as court appearances, with advocates and attorneys reporting 9,410 court appearances in 2022.

These services can also include safety planning and interpretation services while obtaining an order of protection. While orders of protection were intentionally created to be comprehensive of survivor needs, many survivors need assistance in the process as they may not be aware of all the legal remedies they are eligible to request an order of protection. Remedies available to survivors include options such as the exclusive possession of a residence, the removal of firearms, decision-making authority over a dependent, and more.

IL DV Provider Clients Who Received Civil & Criminal Legal Services in 2022

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Number of Clients</th>
</tr>
</thead>
<tbody>
<tr>
<td>IDVA Legal Services/Attorney</td>
<td>417</td>
</tr>
<tr>
<td>Legal Services/Attorney - Type 2</td>
<td>468</td>
</tr>
<tr>
<td>DV Court Orientation</td>
<td>522</td>
</tr>
<tr>
<td>Group IDVA Advocacy</td>
<td>675</td>
</tr>
<tr>
<td>Legal Services/Attorney</td>
<td>1536</td>
</tr>
<tr>
<td>Criminal Legal Advocacy/Obtain OP</td>
<td>2181</td>
</tr>
<tr>
<td>Criminal Legal Advocacy/Charges</td>
<td>5244</td>
</tr>
<tr>
<td>Legal Advocacy/Advocate</td>
<td>7062</td>
</tr>
<tr>
<td>Civil Legal Advocacy/OP</td>
<td>23,292</td>
</tr>
</tbody>
</table>

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals.

Source: InfoNet
Hospitals as Points of Intervention

Valerie* is a Black woman who is a survivor of domestic violence. She experienced physical, emotional, financial, and sexual abuse at the hands of her husband, whom she is now separated from. As with many domestic violence relationships, there was no violence in the beginning, but after the birth of their first child, Valerie’s ex began to exhibit more abusive behaviors. His mockery and emotional abuse caused her to begin self-harming. “When this person who was supposed to care about me started laughing at me, that really hurt,” she told The Network, “So I started hurting myself.”

Valerie decided to leave the relationship after her ex attempted to stab her. In the lead-up to this incident, she had multiple visits to the emergency room due to other injuries including a dislocated shoulder, broken bones, and mental health struggles. Valerie had not wanted to get the police involved in the past, because she wanted her children to have their father in their lives. She reached out to her family for help, but was met with blame instead. She knew she could not turn to her ex’s family, because they were often participants in her abuse, gaslighting, attacking, and stealing from her over the course of her relationship. After the life-threatening incident, she decided to call the police who made an arrest, but he broke back into the home after his release.

Though Valerie paid rent at her apartment, her ex’s name was on the lease. With no family in town to turn to, when Valerie left, she and her children became homeless. They bounced between domestic violence and general homeless shelters for an extended period of time. Now, she and her children are participating in a transitional housing program and connected with domestic violence services to meet their needs and process their experiences. Had Valerie been connected with domestic violence resources during her earlier medical treatments, instead of exclusively law enforcement, she may have been able to access safe shelter more directly when she decided to leave.

*All names changed for anonymity
Sexual Violence Clients

Although domestic violence providers serve a majority of domestic violence clients, many of these providers offer sexual violence services as well. Survivors of domestic violence may also experience sexual violence as part of their survivorship, and because of this, there may be a small overlap between the total number of clients served by domestic violence and sexual violence organizations. The totals reflected in this section of the report include any client receiving services categorized in InfoNet as sexual violence services.

**In 2022, sexual violence services were provided to 11,105 individuals with 10,076 being the survivors themselves and 1,029 being significant others to the survivors.**

The highest service reported in 2022 was advocacy services for victims and their significant others, with a total of 7,303 individuals or 65.8% of clients receiving advocacy services.

Sexual violence advocacy services include civil and criminal justice services, defined as individual advocacy with law enforcement, the civil or criminal court systems, advice regarding victim civil options including court appearances, and civil no-contact orders. Medical advocacy is also available, including individual advocacy related to medical procedures both at the hospital or medical care facility and during follow-up care.
Advocacy Services

The most common advocacy service received by clients in 2022 was general services, with 4,685 individuals, or 42% of survivors working with providers. General advocacy services may include individual advocacy on behalf of survivors and their significant other(s) with school personnel, social service agencies, child protective services, housing, homeless services, drug and alcohol treatment agencies, adult education programs, unemployment services, mental health agencies, disability service providers, and other service providers.

When survivors of sexual violence decide to pursue justice through the civil or criminal legal system, advocates are there to support them inside and outside of the courtroom. In 2022, sexual violence advocates reported making 2,779 court appearances with survivors. These totals reflect both civil and criminal cases.

IL SV Provider Clients Who Received Advocacy Services in 2022

- Civil Justice: 1787
- Criminal Justice: 2572
- Medical: 3003
- General: 4675

Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals. Source: InfoNet
Medical & Health Services
In many cases, sexual violence survivors need immediate and or follow-up medical attention. In 2022, 25% of survivors, or 2,484 individuals reported seeking medical attention after an incident of sexual violence, an estimated 8%, or 785 individuals reported being treated for injuries and 67 individuals required hospital admission. Many survivors may have evidence collection kits completed outside of the emergency room and instead opt for services in Federally Qualified Healthcare Centers and rape crisis centers for accessibility and privacy away from hospitals. 17.7% of individuals working with providers or 1,787 individuals had evidence collection kits completed and 1,214 individuals or 12% of survivors were seen by a sexual assault nurse examiner (SANE).

These numbers reflect the importance of medical advocacy as it relates to sexual violence. In 2022, 3,003 survivors, or 30% of individuals working with providers received medical advocacy. Medical advocacy allows survivors to be supported during the most vulnerable time, know their medical options, and be surrounded by specialized professionals such as SANEs who understand the variety of sexual violence survivor needs.

Counseling Services
While general advocacy services are the largest single advocacy service used by survivors of sexual violence, counseling services are the largest service category for survivors. In 2022, 57.8% of all individuals, or 5,819 survivors receiving services through a provider reported using counseling services. Counseling services offered include in-person, telephone, group counseling, and family counseling with the most frequently used services being in-person and telephone counseling.

These totals reflect the need for emotional and mental healing for survivors of sexual violence. Through counseling services, survivors are able to process and verbalize the traumatic events that have occurred to them and find coping mechanisms to recover from their experiences.

Insurance Status
While sexual violence survivors interact with the healthcare system frequently and state law requires standards of care for their services, insurance status for clients receiving services is vastly underreported. In 2022, insurance status was unknown for 49% of all clients receiving sexual violence services. Of those reporting insurance information 23% received coverage through Medicaid, 18% reported having private insurance, 7% reported having no insurance, and 3% were receiving Medicare.
**Known Health Insurance Status of IL SV Provider Clients in 2022**

**Unknown 5445**

- **Medicaid Health Insurance**: 2589
- **Private Health Insurance**: 1994
- **No Health Insurance**: 770
- **Medicare Health Insurance**: 307

*Source: InfoNet*

**IL SV Provider Clients Who Received Counseling Services in 2022**

- **In-Person**: 4663
- **Telephone**: 4327
- **Group**: 552
- **Family**: 178

*Note: One client may receive multiple kinds of services and therefore be represented in multiple service totals.*

*Source: InfoNet*
Many survivors actively seek out, or involuntarily become involved with, the legal system due to their experiences of abuse.

The state’s legal system has enormous power to impact survivors’ lives, making thoughtful analysis of the legal system’s response to survivors’ needs a critical component of the advocacy community’s work.

The following section includes data regarding arrests, firearm confiscations, and order of protection notifications conducted by law enforcement; charges, convictions, and sentences in criminal cases prosecuted by the State’s Attorney’s Office; filings in civil order of protection cases by petitioners; child welfare involvement and custody outcomes for families facing domestic violence; and the voices of survivors who have been criminalized by our legal system.
Law Enforcement Responses

Law enforcement officers have the authority to make arrests, confiscate firearms, and provide notification of civil orders of protection (a process called “service” or “short form notification”) when necessary. The following section includes data from the Chicago Police Department (CPD) as well as data from five municipal police departments and five county sheriff’s offices across Illinois’ rural, suburban, and urban communities regarding these activities.

If you or a survivor you know is experiencing gender-based violence and interacting with police not the right fit for their needs, consider consulting the Creative Interventions Toolkit, collaboratively developed by Mimi Kim to connect survivors to practical, community-based solutions to violence.
CHICAGO ARRESTS, FIREARM CONFISCATION, AND SHORT FORM NOTIFICATION

Arrests
According to the CPD, there were 5,768 arrests related to gender-based violence (GBV) in 2022, including domestic violence, sexual violence, and stalking arrests. This is a 16% decrease in arrests from 2020, while calls for service have decreased by 12% in the same period. This means...

only 3%

GBV CALLS RESULTED IN ARREST
and the rate of GBV arrests has fallen faster than the rate of GBV calls over time

While not all survivors contact the police seeking an arrest, this figure is remarkably low and almost certainly reflects that some survivors who turn to law enforcement for help are being left behind.
Trend in CPD Gender Based Violence Arrests Over Time

![Graph showing trend in CPD gender-based violence arrests over time]

Source: CPD

Trends in CPD Gender Based Violence Calls Compared to Arrests Over Time

![Graph showing trends in CPD gender-based violence calls compared to arrests over time]

Source: CPD
FOIDs & Firearms

CPD also reported data on the revocation of FOID cards and firearms in non-criminal incidents. These totals include cases where FOIDs and firearms were recovered while serving an order of protection or when responding to a domestic violence incident. Non-domestic cases likely include service of other civil protective orders, like stalking no-contact orders. All totals are for non-criminal incidents and exclude FOID and firearm recovery associated with criminal cases.

In 2022, CPD recovered 563 FOID cards for domestic violence reasons. The majority of FOID recoveries (55%) in Chicago are domestic violence related, but this was a 7% decrease from 2021, even as total FOID revocation increased by 20%.

Proportion of CPD FOID Recovery Related to Domestic Violence in 2022

Source: CPD

CPD FOID Recovery Over Time

Source: CPD
The same pattern is reflected in the number of incident reports filed by law enforcement reporting firearm recovery related to domestic violence, which make up the majority of (55%) of all non-criminal firearm recoveries. Total firearm recovery increased in 2022 by 20%, but recoveries related to domestic violence were down by 7%. There appears to have been one incident where firearms were removed without confiscating the owner’s FOID card.

**Proportion of CPD Firearm Recovery Incidents Related to Domestic Violence in 2022**

![Proportion Chart]

**Source:** CPD

**CPD Incident Reports of Firearm Recovery Over Time**

![Incident Reports Chart]

**Source:** CPD
The chart below compares the number of domestic violence related shootings in the city of Chicago to the number of firearms recovered by CPD related to domestic violence over time. While the two seem intuitively connected, there is not enough data at this time to determine the extent to which one may influence the other. For example, firearm recovery decreased in 2022, as shootings increased, suggesting that fewer firearm recoveries may lead to more shooting incidents. But in 2021, shootings increased by 24% even as firearm recovery increased by 66% from 2020, suggesting that the two may not be as directly related as the 2022 totals might suggest. This topic is an area for future research to explore and inform gun violence harm reduction strategies.

**CPD Firearm Recovery for Non-Criminal Domestic Violence Reasons Compared to Chicago Domestic Violence Shootings Over Time**

- **Firearm Homicides**
- **Non-Fatal Shootings**
- **Firearm Recoveries**

<table>
<thead>
<tr>
<th>Year</th>
<th>Firearm Homicides</th>
<th>Non-Fatal Shootings</th>
<th>Firearm Recoveries</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>48</td>
<td>31</td>
<td>364</td>
</tr>
<tr>
<td>2021</td>
<td>71</td>
<td>27</td>
<td>605</td>
</tr>
<tr>
<td>2022</td>
<td>99</td>
<td>36</td>
<td>564</td>
</tr>
</tbody>
</table>

Source: CPD
Short Form Notification

Primary responsibility for serving orders of protection (OPs) in Chicago falls on the Cook County Sheriff’s Office (CCSO); however, CPD officers can conduct “short form notification” for OPs during the course of their work. For example, if a respondent on an OP who has not been served by CCSO is stopped by a CPD officer due to reckless driving, the CPD officer can see that service is needed in the LEADS system and choose to provide short form notification of the OP during the traffic stop.

In 2022, CPD officers provided short-form notification on 62 OPs, a 7% increase from the 58 short-formed in 2021. These made up the majority of civil protective orders served by the department, with 25 being non-domestic violence related. These non-domestic violence related orders may be stalking, no-contact orders, or civil no-contact orders.

Proportion of Civil Protective Orders Short Form Served by CPD in 2022

Source: CPD
STATEWIDE SNAPSHOT ARRESTS & FIREARM CONFISCATION

The Illinois State Police (ISP) is responsible for Firearm Owner Identification (FOID) card revocations. The number of FOID cards revoked expressly for gender-based violence related charges is not publicly available, but domestic violence is known to be a common reason for revocation. When a FOID cardholder becomes ineligible to possess firearms, it is their responsibility to mail their FOID card to the ISP for the duration of the prohibition period. Firearms owned by that former FOID cardholder must be appropriately removed from that person’s possession as well, which might include selling or transferring the firearms to someone else. Firearm disposition records are self-attestation forms that document where firearms belonging to a former FOID cardholder are for the duration of their firearm prohibition and should be submitted when the FOID card is mailed to ISP.

In 2022, 13,677 FOID cards were returned to ISP, but only 7,512 firearm disposition records were submitted to account for where those FOID cardholders’ firearms went upon becoming ineligible to possess them.

This means that 6,165 people, or 45%, of ineligible FOID holders’ firearms are unaccounted for.

This is valuable progress from 2021, when this figure was 60%, but represents a significant threat to any survivors of gender-based violence whose person causing them harm is still armed, as risk of domestic violence homicide increases 500% when a firearm is in the home.
In domestic violence cases, the presence of a gun in the home increases the risk of homicide by 500%. Thousands of guns unaccounted for presents a high risk for survivors across the state.
The following map documents the number of firearms confiscated in each locality related to domestic violence over time.

Trends vary significantly by community and all have significantly lower totals than the city of Chicago. Notably in both the statewide and Chicago-specific data, these FOID and firearm revocation totals only capture activities of legally owned firearms.

Taskforce Profile
Seeing a dangerous void in FOID enforcement, Cook County Sheriff Thomas Dart created a special unit, the Gun Suppression Team, in 2013 dedicated to retrieving FOID cards and firearms from individuals who had not complied with revocation laws. Since then, the unit has retrieved more than 3,400 FOID cards and more than 1,000 firearms and secured the safe transfer of thousands of more firearms from individuals who have had their FOID cards revoked. The unit has worked more than 7,100 cases in total. The Sheriff’s Office’s primary jurisdiction is unincorporated areas of the county, but the unit also enforces the revocation law in other parts of the county.
Statewide Snapshot of Firearms & FOIDs Removed by Law Enforcement Due to Domestic Violence in 2022

Outside of the city of Chicago and Cook County, most localities remove very few FOID cards and firearms related to domestic violence.

Source: Freedom of Information Act responses from each municipality and county law enforcement agency
Data regarding domestic violence related arrests across the state of Illinois are published on a two-year delay by the Illinois State Police (ISP) in their *Crime in Illinois Annual Uniform Crime Report*.¹²⁰

Given this, The Network submitted Freedom of Information Act requests to five municipality police departments and five county sheriff’s offices across the state to capture a contemporary snapshot of gender-based violence arrest patterns across a variety of rural, suburban, and urban communities in Illinois. Trends vary by community.
Statewide Snapshot of Domestic and Sexual Violence Arrests by Law Enforcement in 2022

Arrests by law enforcement regarding domestic and sexual violence vary by year and community.

Source: Freedom of Information Act responses from each municipality and county law enforcement agency
IL Provider Data on Police Charges for Domestic and Sexual Violence Clients

Data Source & Limitations
Data regarding domestic violence police charges across the state of Illinois are published on a two-year delay by the Illinois State Police (ISP) in their *Crime in Illinois Annual Uniform Crime Report*. Data entered into InfoNet by domestic and sexual violence service providers offers a more contemporary snapshot of police charges related to gender-based violence, with important caveats. Providers are not required to collect data on police charges from clients, and as such, the response rate for police involvement questions is low and the results are not representative of all clients in the state. For these reasons, the totals here are likely substantially underreporting the experiences of police involvement among clients. The experiences of survivors who are not connected to a service provider are not represented in the following section.

In 2022, 3,034, or 6% of all domestic violence clients, reported that they contacted police and filed a report about an incident of domestic violence.

It is likely that reports to police are underreported by clients to service providers who are not providing services related to the legal system. For example, clients receiving legal advocacy services have a strong incentive to tell their advocate if they made a report to the police, because it is relevant to the services they are receiving but may not think to tell their domestic violence counselor or shelter advocate.

Of those reports recorded by providers, 1,771 of those people causing harm received a total of 2,744 police charges, including 708 felonies, 1,949 misdemeanors, and 87 charges which were unidentified. Ultimately, this means that just over half (58%) of reports resulted in police charges, and of those charged, about three-quarters (71%) were misdemeanors. The police charges were wide-ranging, with Domestic Battery (1,250) being the most common charge, followed by Violations of Orders of Protection (485). The chart below outlines all police charges reported by domestic violence clients to their providers in 2022.
<table>
<thead>
<tr>
<th>POLICE CHARGE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic Battery</td>
<td>1250</td>
</tr>
<tr>
<td>Violation of Order of Protection</td>
<td>485</td>
</tr>
<tr>
<td>Other Charge</td>
<td>194</td>
</tr>
<tr>
<td>Aggravated Domestic Battery</td>
<td>139</td>
</tr>
<tr>
<td>Criminal Damage to Property</td>
<td>107</td>
</tr>
<tr>
<td>Battery</td>
<td>53</td>
</tr>
<tr>
<td>Assault</td>
<td>50</td>
</tr>
<tr>
<td>Aggravated Assault</td>
<td>42</td>
</tr>
<tr>
<td>Aggravated Battery</td>
<td>39</td>
</tr>
<tr>
<td>Criminal Trespass to Residence</td>
<td>38</td>
</tr>
<tr>
<td>Interfering with Report of Domestic Violence</td>
<td>29</td>
</tr>
<tr>
<td>Disorderly Conduct: Act to Alarm of Disturb</td>
<td>27</td>
</tr>
<tr>
<td>Unlawful Restraint</td>
<td>27</td>
</tr>
<tr>
<td>Harassment by Telephone</td>
<td>24</td>
</tr>
<tr>
<td>Aggravated Battery of Child</td>
<td>21</td>
</tr>
<tr>
<td>Aggravated Battery: Great Bodily Harm</td>
<td>17</td>
</tr>
<tr>
<td>Home Invasion</td>
<td>17</td>
</tr>
<tr>
<td>Aggravated Battery: Deadly Weapon</td>
<td>15</td>
</tr>
<tr>
<td>Predatory Criminal Sexual Assault of Child</td>
<td>11</td>
</tr>
<tr>
<td>Obstructing Justice</td>
<td>10</td>
</tr>
<tr>
<td>Unlawful Use of Weapons</td>
<td>10</td>
</tr>
</tbody>
</table>

Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here.
Source: InfoNet
1,870, or 17% of all sexual violence services clients, reported to their provider that they filed a police report. As with domestic violence clients, this is likely underreported based on the nature of services being received. Of those, 177 people causing harm were charged, resulting in 158 felony and 19 misdemeanor police charges. Though this data is not representative, it is notable that even though sexual violence clients reported to law enforcement three times more often than domestic violence clients as a population (17% compared to 6%), their reports resulted in five times fewer charges on a rate basis, with only 9.5% of sexual violence reports being charged, compared to 58% among domestic violence clients. This aligns with the Chicago-specific findings of Too Little, Too Late? The CPD’s Response to Sex Crimes 2010-2019 Report issued by the Chicago Alliance Against Sexual Exploitation (CAASE) that only 3 – 6% of sexual assaults in the city lead to intervention from law enforcement.121

To read more about this issue, scan the QR Code to view CAASE’s report.
Of those police charges, we know that Predatory Criminal Sexual Assault of a Child (22) was the most common charge, followed by Aggravated Criminal Sexual Assault (16). The chart below outlines all non-confidential police charges reported by sexual violence clients to their providers in 2022.

**Police Charges in the Arrest of IL SV Provider Clients’ Abusers in 2022**

<table>
<thead>
<tr>
<th>POLICE CHARGE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predatory Criminal Sexual Assault of Child</td>
<td>22</td>
</tr>
<tr>
<td>Aggravated Sexual Assault</td>
<td>16</td>
</tr>
<tr>
<td>Criminal Sexual Assault: Force</td>
<td>15</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Abuse</td>
<td>13</td>
</tr>
</tbody>
</table>

Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here.
Source: InfoNet
Civil & Criminal Court Responses

The civil and criminal legal systems are two tools available to survivors seeking protection, remuneration, or accountability from the person causing them harm.

**Civil Cases use a lower “preponderance of the evidence”** standard for decision making and include cases like orders of protection, divorce, and parentage. These cases may have outcomes like fines or restrictions on certain freedoms, for example, where someone can go and whom they can interact with.

**Criminal cases use a higher “beyond a reasonable doubt”** standard for making determinations on cases that violate criminal law like domestic battery. Criminal cases may result in incarceration, in addition to the outcomes available in civil court.

Depending on what a survivor’s priorities, resources, and available evidence are, they may choose to engage with none, one, or both of these systems.
CRIMINAL CASES

There are two ways a survivor may seek to initiate a criminal case in Illinois. If a person causing harm has been arrested and charged by the police, a criminal court case may then be created by the State’s Attorney’s Office (SAO), which can reflect the same or altered charges. If the person causing harm has not been arrested yet, but a police report has been filed, the survivor can also seek charges directly from the SAO, who will also request a warrant for arrest at the time SAO charges are filed. Typically, these cases only proceed if the survivor, who is called the complaining witness (CW) in the criminal process, wants to move forward with the case; however, there are circumstances where a criminal case may move forward without the survivor’s consent or participation. Given this, it is important to note that not all survivors who are CWs in a criminal case have sought out and desired the outcomes of the criminal process.

Data Source & Limitations

Information about felony criminal cases involving domestic and sexual violence is available on the Cook County State’s Attorney’s website and is highlighted in this section of the report; however, as of publication, The Network has not received a response to our Freedom of Information request for data on screening, charging, convicting, and sentencing of misdemeanor cases. Data entered into InfoNet by domestic and sexual violence service providers offers a contemporary snapshot of criminal charges and case progressions related to gender-based violence, with important caveats. Providers are not required to collect data on criminal cases from clients and as such, the response rate for prosecution questions is low and the results are not representative of all clients in the state. For these reasons, the totals here are likely substantially underreporting the experiences of prosecution involvement among clients. The experiences of survivors who are not connected to a service provider are not represented in the following section.
Domestic Violence Criminal Cases

According to InfoNet in 2022, domestic violence clients reported that 1,494 cases (49% of cases reported by police) were charged by the SAO, involving 2,600 charges total. This likely under represents the actual experience of all clients in the state. Of those SAO charges, the most common charge was Domestic Battery (1,104) followed by Violations of Orders of Protection (524), similar to police charges.

Cases that are eligible for felony charges in Cook County go through an additional review process by the SAO before felony charges can be filed called “felony review.” During this process, the SAO may review all evidence collected by the police department during the investigation, re-interview the victim and witnesses, and ultimately decide whether or not to charge the case as a felony.

Of the domestic violence cases that specifically went through the Cook County felony review process, 461 were approved and 51 were rejected, a 90% approval rate, up from 89% in 2021. In many cases, law enforcement may perceive a case to have limited evidence and will choose not to refer them to the State’s Attorney’s Office for felony review. This informal process of screening creates another barrier for cases to be considered by the SAO.
### Total State’s Attorney Charges in the Criminal Cases of IL DV Provider Clients’ Abusers in 2022

<table>
<thead>
<tr>
<th>SAO Charge</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic Battery</td>
<td>1104</td>
</tr>
<tr>
<td>Violation of Order of Protection</td>
<td>524</td>
</tr>
<tr>
<td>Other Charge</td>
<td>175</td>
</tr>
<tr>
<td>Aggravated Domestic Battery</td>
<td>140</td>
</tr>
<tr>
<td>Criminal Damage to Property</td>
<td>100</td>
</tr>
<tr>
<td>Battery</td>
<td>54</td>
</tr>
<tr>
<td>Aggravated Battery</td>
<td>44</td>
</tr>
<tr>
<td>Aggravated Assault</td>
<td>33</td>
</tr>
<tr>
<td>Assault</td>
<td>32</td>
</tr>
<tr>
<td>Interfering with Report of Domestic Violence</td>
<td>32</td>
</tr>
<tr>
<td>Criminal Trespass to Residence</td>
<td>31</td>
</tr>
<tr>
<td>Unlawful Restraint</td>
<td>31</td>
</tr>
<tr>
<td>Aggravated Battery: Great Bodily Harm</td>
<td>25</td>
</tr>
<tr>
<td>Disorderly Conduct: Act to Alarm of Disturb</td>
<td>24</td>
</tr>
<tr>
<td>Aggravated Battery of Child</td>
<td>20</td>
</tr>
<tr>
<td>Harassment by Telephone</td>
<td>18</td>
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<tr>
<td>Home Invasion</td>
<td>15</td>
</tr>
<tr>
<td>Aggravated Battery: Deadly Weapon</td>
<td>14</td>
</tr>
<tr>
<td>Predatory Criminal Sexual Assault of Child</td>
<td>13</td>
</tr>
<tr>
<td>Aggravated Battery: Victim &gt; 59</td>
<td>11</td>
</tr>
</tbody>
</table>

Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here.
Source: InfoNet
While likely underreported, it is still notable that only 24 police charges and 18 SAO charges known to providers were entered as Telephone Harassment. This reflects a frustration expressed by providers that it is almost impossible to pursue accountability through the criminal legal system when a person causing harm engages in pervasive, life-altering digital and telephone harassment.

"Digital harassment has become worse and worse for survivors, and it feels like the state is not willing to do the discovery necessary to pursue these cases. I acknowledge that the process is complex, but it's not impossible. Companies like Meta are creating carve-outs in their policies for this very reason and our legal system isn't changing its response."

- Anonymous Legal Aid Attorney & Focus Group Participant

Of the charges entered by the SAO and reported to providers, 1,620 had known charge outcomes in 2022. The most common outcome was a guilty plea to the original charge (547), followed by dismissal for reasons other than want of prosecution, the victim not appearing, or dismissal in lieu of fines (480). Of 1,691 charges with known sentences, the most common sentence for people charged with domestic violence crimes was a fine (365), followed by time in jail (268). It is likely that fine-based sentences are being paired with other sentences, but The Network does not have data that coalesces all sentences on a single case to verify how often fines are the only sentence versus fines as part of a larger combined sentence.

According to the Cook County SAO, following the felony review process, 487 felony domestic violence cases were charged and 69 were not charged, an 88% charge rate up from 86% in 2021. Of those, 312 of those cases were convicted and 34 (10%) did not result in conviction, a 90% conviction rate down from 91% in 2021.124

While this data is not representative of all clients or all survivor experiences, it seems that many domestic violence survivors seeking services do not believe that the criminal legal system is the right tool to meet their needs. For those who sought accountability through the criminal process, they were likely disappointed to be among the half of clients whose police reports did not result in charges, or among the smaller pool who persevered through a complex and long-lasting criminal case, only to have the person who caused them harm be sentenced to a financial penalty. The Network believes that survivors deserve a range of robust, functional options for seeking safety and accountability that align with their needs and value systems. For survivors turning to our criminal legal system, there appear to have been barriers to justice in many cases in 2022.
### Charge Outcomes for Criminal Cases of IL DV Provider
**Client’s Abusers in 2022**

<table>
<thead>
<tr>
<th>OUTCOME TYPE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pled Guilty, Original Charge</td>
<td>547</td>
</tr>
<tr>
<td>Dismissed, Other Reason</td>
<td>480</td>
</tr>
<tr>
<td>Dismissed, Want of Prosecution</td>
<td>138</td>
</tr>
<tr>
<td>Pled Guilty, Lesser Charge</td>
<td>113</td>
</tr>
<tr>
<td>Charges Dropped</td>
<td>105</td>
</tr>
<tr>
<td>Convicted</td>
<td>80</td>
</tr>
<tr>
<td>Stricken on Leave</td>
<td>53</td>
</tr>
<tr>
<td>Convicted, Lesser Charge</td>
<td>13</td>
</tr>
<tr>
<td>Acquitted</td>
<td>11</td>
</tr>
<tr>
<td>Dismissed, Victim Didn’t Show</td>
<td>11</td>
</tr>
<tr>
<td>Other, Unknown</td>
<td>69</td>
</tr>
</tbody>
</table>

### Sentence Type for Criminal Cases of IL DV Provider
**Client’s Abusers in 2022**

<table>
<thead>
<tr>
<th>SENTENCE TYPE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fines</td>
<td>365</td>
</tr>
<tr>
<td>Jail</td>
<td>268</td>
</tr>
<tr>
<td>Probation</td>
<td>241</td>
</tr>
<tr>
<td>Other</td>
<td>216</td>
</tr>
<tr>
<td>Conditional Discharge</td>
<td>198</td>
</tr>
<tr>
<td>Mandated Counseling</td>
<td>181</td>
</tr>
<tr>
<td>Prison</td>
<td>104</td>
</tr>
<tr>
<td>Supervision</td>
<td>93</td>
</tr>
<tr>
<td>Restitution</td>
<td>25</td>
</tr>
</tbody>
</table>

*Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here. Chart Sources: InfoNet*
Sexual Violence Criminal Cases

Among sexual violence services clients in 2022, 320 cases, 17% of all reports to law enforcement, were charged by the SAO, resulting in 755 charges. As with domestic violence providers, sexual violence providers are not required to capture data on criminal cases and as a result, these totals are likely an underestimation. Of those SAO charge totals recorded by providers, the most common was Predatory Criminal Sexual Assault of a Child (130 charges, 17%), followed by Criminal Sexual Assault Involving Force (73 charges, 10%).

Among sexual violence cases that went to felony review in Cook County, 517 were approved, 331 were rejected, and 131 were referred to continued investigations. This 61% approval rate is a substantial decrease from 2021’s 71% approval rate.\textsuperscript{125}
# State’s Attorney Charges in the Criminal Cases of IL SV Provider Clients’ Abusers in 2022

<table>
<thead>
<tr>
<th>STATE ATTORNEY CHARGES</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predatory Criminal Sexual Assault of Child</td>
<td>130</td>
</tr>
<tr>
<td>Criminal Sexual Assault: Force</td>
<td>73</td>
</tr>
<tr>
<td>Child Pornography</td>
<td>55</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Abuse</td>
<td>49</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Assault</td>
<td>35</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Abuse: Victim &lt;13, Accused &gt; 16</td>
<td>30</td>
</tr>
<tr>
<td>Predatory Criminal Sexual Assault of Child: Accused &gt; 16</td>
<td>26</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Abuse: Victim 13, between 16, Accused is 5 or more years older</td>
<td>25</td>
</tr>
<tr>
<td>Criminal Sexual Abuse</td>
<td>21</td>
</tr>
<tr>
<td>Aggravated Criminal Sexual Abuse: Victim &lt; 18, Accused is Family Member</td>
<td>19</td>
</tr>
<tr>
<td>Other Charge</td>
<td>18</td>
</tr>
<tr>
<td>Battery</td>
<td>17</td>
</tr>
<tr>
<td>Criminal Sexual Assault: Force</td>
<td>16</td>
</tr>
<tr>
<td>Domestic Battery</td>
<td>15</td>
</tr>
<tr>
<td>Home Invasion</td>
<td>15</td>
</tr>
<tr>
<td>Unlawful Restraint</td>
<td>15</td>
</tr>
<tr>
<td>Criminal Sexual Assault: Family Member &lt; 18</td>
<td>14</td>
</tr>
<tr>
<td>Aggravated Battery</td>
<td>13</td>
</tr>
<tr>
<td>Exploitation of Child</td>
<td>13</td>
</tr>
<tr>
<td>Aggravated Domestic Battery</td>
<td>11</td>
</tr>
<tr>
<td>Custodial Sexual Misconduct</td>
<td>4</td>
</tr>
<tr>
<td>Criminal Trespass to Residence</td>
<td>2</td>
</tr>
<tr>
<td>Disorderly Conduct/Act to Alarm or Disturb</td>
<td>1</td>
</tr>
</tbody>
</table>

Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here. Source: InfoNet
Of the charges entered by the SAO and reported to providers, 361 had known charge outcomes in 2022. The most common outcome was a dismissal for reasons other than want of prosecution, the victim not appearing, or dismissal in lieu of fines (131 charges, 36% of known outcomes), followed by guilty plea to the original charge (74 charges, 21% of known outcomes).

Of the 195 charges with known sentences, the most common sentence for people charged with sexual violence crimes was time in prison (98 sentences; half of all known sentences), followed by probation (30 sentences, 15% of known sentences).

According to the Cook County SAO, following the felony review process, 533 felony cases were charged and 564 were not charged, a 49% charge rate, down 4% since in 2021. Of those, 442 cases were convicted and 73 (10%) did not result in conviction, maintaining a comparable conviction rate to 2021 of 85.8%.

More than half of all sexual violence survivors in Cook County who came forward to tell their story to the SAO and seek accountability through the criminal legal system had their case rejected, suggesting the felony review process inconsistently facilitates a sense of justice for survivors who seek it through the criminal legal system.

"Over the course of the last few years, the Cook County State's Attorney’s office has seen effective and qualified prosecutors who are passionate about solving sexual violence crimes leave the office. This inability to maintain staffing levels and talent means victims are not finding the justice they are asking for in this process."

- Anonymous rape crisis center provider
## Charge Outcomes for Criminal Cases of IL SV Provider
*Client’s Abusers in 2022*

<table>
<thead>
<tr>
<th>OUTCOME TYPE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dismissed, Other Reason</td>
<td>547</td>
</tr>
<tr>
<td>Pled Guilty, Original Charge</td>
<td>480</td>
</tr>
<tr>
<td>Dismissed, Want of Prosecution</td>
<td>138</td>
</tr>
<tr>
<td>Convicted</td>
<td>113</td>
</tr>
<tr>
<td>Pled Guilty, Lesser Charge</td>
<td>105</td>
</tr>
<tr>
<td>Dismissed, Want of Prosecution Convicted</td>
<td>80</td>
</tr>
<tr>
<td>Acquitted</td>
<td>53</td>
</tr>
<tr>
<td>Charges Dropped</td>
<td>13</td>
</tr>
<tr>
<td>Unknown</td>
<td>11</td>
</tr>
</tbody>
</table>

## Sentence Type for Criminal Cases of IL SV Provider
*Client’s Abusers in 2022*

<table>
<thead>
<tr>
<th>OUTCOME TYPE</th>
<th>COUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prison</td>
<td>98</td>
</tr>
<tr>
<td>Probation</td>
<td>30</td>
</tr>
<tr>
<td>Jail</td>
<td>20</td>
</tr>
<tr>
<td>Conditional Discharge</td>
<td>10</td>
</tr>
<tr>
<td>Probation: Sex Offender</td>
<td>10</td>
</tr>
</tbody>
</table>

*Note: Some less frequent charges are withheld by InfoNet for confidentiality and are not included here.*
*Source: InfoNet*
CRIMINALIZED SURVIVORS

"For my first mistake, and for being scared, I was sentenced to 50 years in IDOC... None of my mitigation was ever used or seen by my sentencing judge. Keeping people incarcerated in less than humane conditions is not justice. Decade after decade of incarceration brings more hurt, not healing."
- Angela* who is a currently incarcerated survivor

In worst case scenarios, some survivors are not only disappointed by the criminal legal system but are actively criminalized for their survivorship. Criminalized survivors may be prosecuted for actions taken in self-defense, under duress or coercion, or under “accountability” theories that punish the survivor for the behavior of the person causing them harm. They also may engage in criminalized behavior as a response to trauma, like illicit drug use, that results in incarceration. Research regarding criminalized survivors and their experiences is very limited, especially at the state level, which renders an already vulnerable population nearly invisible.

"I was locked up for 6 months because he forced me to do things I didn’t want to do."
- Iyana* (a formerly incarcerated survivor)
In 2021, the Women’s Justice Institute published a groundbreaking report called *Redefining the Narrative* that informed by powerful survivor stories and collaborative stakeholder work, compiled Illinois-specific statistics and recommendations to better support criminalized survivors in a first step to address the lack of research available. “The chronic lack of gender-specific data on women incarcerated for violent offenses and under accountability laws is obscuring the impact of gender-based violence on violent convictions and lengthy prison sentences among women,” the report concluded.

"Now everything I need is a struggle. I’m still dealing with the trauma of what happened, I wake up in the middle of the night and have panic attacks... I’m currently completing classes as part of deferred prosecution, but until that is done, the criminal case shows up on my background checks. I just lost a job because of this, which makes it all the harder to save and move out of shelter. It’s hard enough for a man to seek help, but it’s almost impossible when also dealing with the legal system.”

- Nathan* (a formerly incarcerated survivor)

The second essential source of information comes directly from interviews and surveys of criminalized survivors themselves. For this report, The Network interviewed three formerly incarcerated survivors of gender-based violence who have returned to their communities and received three survey responses from survivors currently incarcerated at Logan Women’s Correctional Center in Lincoln, Illinois. Their stories shed light on the challenges survivors face that lead to incarceration, the impact incarceration itself, and how it continues to shape their lives after release.

Together, here is what the research and voices of survivors tell us.
Barriers to Getting Help Before Incarceration

Studies on survivors of domestic violence have identified dozens of barriers to leaving violent relationships and accessing supportive services. These barriers include, but are not limited to, social and geographic isolation and distrust of law enforcement which were prominent among the criminalized survivors who spoke with The Network.

Survivors facing social isolation are often cut off from key people in their support network, people whom they would typically turn to for emotional or logistical support when faced with a problem.

"She started looking through my phone and deleting my contacts. Soon my circle of friends and family had narrowed to just 3 people... it was suffocating."
- Nathan*

For others, social isolation was created or exacerbated by geographic isolation in rural communities.

"I was unable to get help. I am an only child so there was no help from my siblings. My parents were dead. Plus, in [the 1980s], there was no help available from other sources... We lived way out in the country with no neighbors."
- June*

An additional barrier that emerged from discussions was distrust in law enforcement to safely intervene and support a survivor, which was informed by many different factors. For one survivor, the leader of local law enforcement was known to be a perpetrator of domestic violence himself.

“I already knew I could not rely on the police. My sheriff was beating his own wife and girlfriend and had been arrested for this. He eventually went to prison for breaking into his ex-wife's home."
- June*
For another, distrust of the police was a cultural norm in her childhood home.

“No, the police were never called. That was called snitching in my household, and it wasn’t acceptable.”
- Angela*

For survivors who face repeated criminalization, their future relationship to law enforcement can be jeopardized because some officers perceive them as criminals.

“You’re marked for life,”
- Zoe* (told The Network regarding her negative experiences with law enforcement after her first arrest as a teenager)

Without adequate support to access safety, many of these survivors were left in increasingly dangerous situations that ultimately impacted their trajectory towards incarceration.
Incarcerated Survivors in Illinois

Over 90% of women in prison are survivors of gender-based violence or other abuse

The population of women in Illinois prisons has dramatically expanded in the last 40 years, increasing 776% between 1980 and 2014, which outpaced the national growth rate. This was influenced by many factors including the reality that women are disciplined 2–3 times more often than their male counterparts, extending their time in incarceration, and the fact that the proportion of women incarcerated for parole violations in Illinois more than doubled between 1989 and 2019, returning many women to the carceral system.

"The abuse went in waves. He would get mad, go ballistic, cool off, and then get mad again."
- June* (a currently incarcerated survivor)

"The violence sounded like being degraded and being denied my self-worth."
- Angela*

"Violence looks scary, it’s aggressive, it’s disrespectful, it’s loud, it’s ugly..."
- Emma* (a currently incarcerated survivor)
Among the prison population in Illinois, African American women are heavily overrepresented, making up 53% of women in Illinois Department of Corrections (IDOC) custody. Fortunately, there was a promising downward trend African American women’s admissions into IDOC custody in 2018 compared to 2014.131

“I went to jail at 18 years-old while 6 to 7 months pregnant.”
- Emma*

“I never considered that I’d been trafficked but once the realization hit me and I accepted it, it turned me into a very fierce advocate. I’ve been continually incarcerated since I was 18 years old. Being incarcerated and away from my sisters, brothers, nieces, nephews, and my son has been the hardest.”
- Angela*

Of the women in Illinois prisons, the Women’s Justice Institute report noted, “80% of women in prison are mothers, and the majority of them are the custodial parent of young children.”132 Separation from their children during the course of incarceration not only negatively impacts the survivor’s wellbeing, but also has complicated and negative impacts on their children. Research suggests that children whose parent(s) are incarcerated face social, emotional, and learning challenges, economic instability, and are more likely to become involved in the carceral system themselves.133

One strategy to reduce these harms and keep the families of incarcerated survivors connected is the Reunification Ride Program coordinated by Moms United Against Violence and Incarceration, Nehemiah Trinity Rising, and the Women’s Justice Institute. The rides bring children from the Chicago area to the Logan Women’s Correctional Facility on a monthly schedule to visit their moms, providing not only transportation, but also crafting supplies, photos, and donations to facilitate visits. The program is 100% donation based.

“As a survivor, I want those still experiencing abuse to know that they can … choose themselves and their happiness first, that they’re priceless and worthy of more.”
- Emma*

*All names changed for anonymity
The Women’s Justice Institute works toward the decarceration of women, while also addressing harm reduction and improving outcomes for women and children. While much of the work centers around advocacy, legislative work, prison assessments, and providing gender-responsive, trauma-informed trainings, there are also many initiatives. A few of these initiatives include:

**Look At Me**

Each October, in honor of Domestic Violence Awareness Month, the WJI and the Illinois Department of Corrections work together to amplify the voices of criminalized survivors of gender-based violence. The survivors write and perform plays and poems about their own experiences, which the WJI records and broadcasts to the public. In addition, the WJI holds an art contest for incarcerated survivors to produce paintings, drawing, sculptures, origami, and other artwork that expresses what it means to be a survivor. In 2022, over 60 survivors in three facilities participated in either the Look At Me performance or art competition.

**Reclamation Circles**

Each month, impacted circle keepers from the WJI gather together with 25 impacted women to reclaim their futures. The participants share their experiences, often about gender-based violence, and their hopes and plans for the future. In addition, after each circle participants hear from service providers about programs and opportunities that may interest them. Lunch is also catered by a company created and owned by formerly incarcerated women. In the weeks after participating in a circle, each woman meets with a WJI Reclamation Specialist to create a Reclamation Plan for her future. Circles are generally full for several months in advance. In 2023, WJI hopes to create 100 Reclamation Plans.
Reunification Ride:
The Reunification Ride is a community-driven effort, organized by Moms United Against Violence and Incarceration, Nehemiah Trinity Rising, and the Women’s Justice Institute, with legal support to families when needed provided by Ascend Justice. Approximately 9 times a year, the Reunification Ride charters a bus to bring children and their caregivers to visit mothers incarcerated at Logan Correctional Center. The program is driven by the incredible mothers, children, and families who fight to be together. Since restarting the program in July of 2022, the Reunification Ride has facilitated a total of 419 visits for 173 participants.

Women’s Reentry Initiative:
WJI has joined with partners to provide women who need support addressing substance use issues and are returning to Cook County from jail or prison with individualized, comprehensive reentry services. Women create plans to address substance use disorders through inpatient or outpatient recovery programs. Then, working with a WJI care coordinator, participants address needs related to mental health, sex trafficking survivor services, safety planning, transportation, domestic violence assistance, and much more.

Other Programs
In addition, the Women’s Justice Institute organizes programs like a Mother’s Day program for women at Cook County Jail, where mothers record and mail a video of them reading a book for their children. For the December holidays, the WJI collects photos from families of people in women’s prisons and mails them to the incarcerated loved ones. In 2022, over 200 women received photos.
CIVIL CASES

Another tool available to survivors of gender-based violence is our civil legal system, which includes domestic relations (DR) cases like divorce, establishing parentage, and determining parenting time, and domestic violence (DV) cases like the issuance of protective orders, including orders of protection (OPs) for survivors of domestic violence, civil no-contact orders (CNCOs) for survivors of sexual violence, and stalking no-contact orders (SNCOs) for survivors of stalking without a qualifying domestic relationship. While domestic relations cases are often a part of survivors’ lives, The Network is not aware of any data that tracks the number of survivors who have been involved in DR cases in Illinois.

Given that a petitioner must identify as a survivor of gender-based violence to access a protective order, data on protective order filings are very valuable to understanding how survivors engage with the civil legal system as a resource. Unfortunately, the Administrative Office of the Illinois Courts (AOIC) does not make data about the filings of protective orders public and is not considered a Freedom of Information (FOIA) eligible entity. Therefore, the only data available on protective orders is limited to what domestic violence clients report to their providers, specifically regarding domestic violence orders of protection, and is recorded through the InfoNet system. This data does not capture anything about the specific remedies that petitioners request or which are granted, nor does it shed light on the experiences of petitioners who are not connected to supportive services who may be among the most vulnerable survivors in the state. Additionally, this data is collected on a voluntary basis by providers and may therefore be incomplete.
Orders of Protection

According to InfoNet data from domestic violence service providers, 15,951 orders of protection (OPs) were filed in 2022 by 14,616 survivors.

16,884
TOTAL ACTIVE ORDER OF PROTECTIONS
in Illinois in 2022

In total, there were 16,884 active OPs in Illinois in 2022, including OPs filed in previous years that remained active in 2022. This reflects an upward, but stagnating, trend in OP filings post-pandemic. Illinois has yet to see comparable filing totals to the pre-COVID era which hovered in the low 18,000 range for three years prior to the pandemic. The persistent gap in filings, seen in the figure below, suggests that there may be facets of the post-COVID OP filing process that are not meeting survivor needs.

The number of survivors who file OPs is routinely lower than the total number of OPs filed because some survivors may file more than one order of protection. Of the OPs filed in 2022 that were known to domestic violence service providers, 13,245 (83%) were granted, 1,476 (9%) were denied, and 1,150 (7%) were recorded as status pending. These totals suggest that judges overwhelmingly find petitioners working with domestic violence providers to be credible, good faith actors who file OP petitions based on legitimate fear for their safety.

Order of Protection Filings by IL DV Providers Over Time

Source: InfoNet
Given that these totals come directly from service providers, it is likely that they over represent granted OPs, compared to all petitions filed in the state, because having a legal advocate or legal aid attorney often strengthens the quality of a survivor’s petition. Anecdotally, providers based in domestic violence courthouses across the state report that the vast majority of OP petitioners are “pro se” which means they are filing without the assistance of an attorney. For pro se litigants without an attorney or advocate, there may be a higher chance of having an OP denied, if they fail to understand and fill out the complex court paperwork correctly.

Orders of protection are largely filed in civil court but can be filed in conjunction with a criminal case, if desired by the complaining witness (CW). Having an OP filed with a criminal case can be advantageous to the survivor for several reasons, including that OPs filed in criminal court are automatically issued, do not require the survivor to regularly attend court dates, and last for the duration of the criminal case in addition to the final order length. If an OP is filed in civil court, and the survivor later pursues criminal charges related to the same incident of violence, the civil OP can be transferred into the criminal case. Court procedures for this process can vary, which may create administrative burdens or confusion for the survivor.

During the pandemic, survivors accessed the State’s Attorney’s Office (SAO) through a remote screening process by phone, often leaving voicemails, which created delays in the process of filing charges while staff attempted to reconnect with the caller. Providers have reported that, as a result, many survivors interested in criminal charges sought civil orders of protection for their immediate safety and had charges filed later. As of 2022, the SAO has moved back to a fully in-person charge screening process where survivors must come to an in-person meeting, while avenues for pursuing civil OPs have remained open to remote participants.

In 2022, 12,567 OPs known to providers (92%) were filed in civil court, compared to 1,081 OPs (8%) that were filed in criminal court. The impact of the pandemic is visible here; in the three years before COVID-19, 11% of OPs were filed in criminal court, but in the three years since the pandemic began, only 8% of OPs have been filed in criminal court.

Survivors’ reliance on the criminal legal system has shifted since the pandemic. Obtaining a civil Order of Protection has become much more accessible through e-filing, advocates assisting with remote filing, and extended civil court hours. On the contrary, obtaining a criminal Order of Protection requires survivors to spend a full day at the DV Courthouse, which is often predicated on them accessing resources like transportation and childcare.”

- Anonymous legal advocacy service provider quote
Status of OPs Filed by IL DV Provider Clients in 2022

- Grant: 13,245
- Denied: 1476
- Pending: 1150

Forums for Order of Protection Filing by IL DV Provider Clients Over Time

- Civil
- Criminal
- Unknown

Source: InfoNet
DCFS Responses

Survivors of gender-based violence may also become involved with the child welfare system. Survivors of gender-based violence first come into contact with the Illinois Department of Child and Family Services following a call to the state’s child abuse and neglect hotline. Under such circumstances, the allegations of abuse or neglect may include intimate partner violence alone or both intimate partner violence and direct physical abuse or neglect of a child. In most cases when domestic violence is present, survivors themselves are investigated under the allegation of creating an “environment injurious” due to the presence of domestic violence in the home. In fact, most investigations are filed under the mother’s name, who are more likely to be the victims of domestic violence.

According to DCFS’s administrative rules, “environment injurious means that a child’s environment creates a likelihood of harm to the child’s health, physical well-being, or welfare and that the likely harm to the child is the result of a blatant disregard of parent or caretaker responsibilities.” Domestic violence is the second of several specifically named environments that “may but not by themselves” create an injurious environment, in addition to substance abuse and mental health struggles. The part of the administrative rule regarding environment injurious and domestic violence is designated as Part B of the allegation.

Allegation 60, Part B states,

“An incident of past or current domestic violence may qualify for an allegation of environment injurious if the domestic violence creates a real, significant, and imminent risk of moderate to severe harm to the child’s health, physical well-being, or welfare, and the parent or caregiver has failed to exercise reasonable precautionary measures to prevent or mitigate the risk of harm to the child. Domestic violence is also referred to as “intimate partner violence.” The adult victim of domestic violence, who is the non-offending parent or caregiver, is presumed to not be neglectful or to have created an environment injurious to the child so long as he or she has exercised precautionary measures to prevent or mitigate the real, significant, and imminent risk of moderate to severe harm to the child.”
Environment injurious allegations for domestic violence are referred to as Allegation 60 B in the charts and writing below. For survivors facing a child welfare investigation for Allegation 60 B, the process may feel surprising, intrusive, or unsafe and potentially result in being deemed a neglectful parent in addition to the devastating removal of their child or children from their care.\(^{135}\)

**37,242**

**OCCURRENCES OF ALLEGATION 60 B**

in DCFS investigations in 2022

In 2022, there were 72,155 occurrences of Allegation 60 in DCFS investigations, 52%, or 37,242 of which were for domestic violence. Of these Allegations 60 B, 63% (23,645 allegations) were the only allegation of wrongdoing in the child welfare case.\(^{136}\)

This means that for well over half of families being investigated for Allegation 60 B, the only alleged act of wrongdoing is surviving domestic violence.

15,209 Allegations 60 B were indicated in 2022, part of a three-year decrease in indicated findings since 2020.\(^{137}\) Indicated findings reflect that an investigator has determined that there was credible evidence that a child was abused or neglected.\(^{138}\) This is likely related to a peak in indicated findings during the pandemic, during which time families were unable to leave their homes, potentially leading to more frequent abuse due to the increased time in close proximity, or escalated violence due to additional COVID stressors like job loss. As parents return to in-person work and children to in-person classrooms, fewer incidents may occur, leading to fewer indicated findings.

Notably, when compared to all Allegation 60 cases in 2022, Allegation 60 B cases are slightly more likely to result in indicated findings, with domestic violence allegations being indicated 41% of the time compared to 36% of all environment injurious allegations.\(^{130}\) This could be related to any number of factors, including the nature of available evidence in domestic violence related cases or conscious and unconscious bias against survivors.
As indications for Allegation 60 B have decreased in the last three years, there has also been a downward trend in the number of children removed by DCFS. In 2022, 1,116 children were removed from parents whose only allegation of wrongdoing was experiencing domestic violence, a 22% decrease from 2021.139

Family separation is traumatic and can have devastating impacts on children even long after the separation has occurred. Separation is stressful, and this stress can have pronounced psychological and physical health consequences for children, including sleep loss and a greater risk for depression and substance abuse disorders.140 Additionally, these problems can lead to worse life outcomes, such as an increased risk of teen pregnancy, poverty, and interactions with the criminal justice system.141

**Count of DCFS Indicated Allegations 60 B Over Time**

<table>
<thead>
<tr>
<th>Year</th>
<th>Count of Allegations</th>
</tr>
</thead>
<tbody>
<tr>
<td>2020</td>
<td>19,555</td>
</tr>
<tr>
<td>2021</td>
<td>17,331</td>
</tr>
<tr>
<td>2022</td>
<td>15,209</td>
</tr>
</tbody>
</table>

*Source: DCFS*

**Number of Children Removed by DCFS in Cases with Only Allegation 60 or Allegation 60 B Over Time**

- **Allegation 60**
  - 2020: 3,011
  - 2021: 2,634
  - 2022: 2,076

- **Allegation 60 B**
  - 2020: 1,727
  - 2021: 1,435
  - 2022: 1,116

*Source: DCFS*
Among the children removed from parents whose only allegation of wrongdoing was Allegation 60 B, children of color are disproportionately impacted by family separation.

In 2022, 62% of these children were White, while 36% were Black or African American, more than double their general population size in Illinois of 14.7%. 1% of the children removed had an unknown race, according to DCFS.

Research has consistently shown that racial biases are common and, in some cases, frequent at every step of the child welfare process. These biases disproportionately impact Native and African American children, who are at the highest risk of being indicated for maltreatment and moved out of their homes. A combination of factors, such as the vague definitions for maltreatment and subjectivity of human decision-making, coupled with existing racial biases have exacerbated these disproportionate impacts, which institutions are now trying to work to combat.

<table>
<thead>
<tr>
<th>Race/Region</th>
<th>Percentage</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>62%</td>
<td>693</td>
</tr>
<tr>
<td>Black/African American</td>
<td>36%</td>
<td>406</td>
</tr>
<tr>
<td>Unknown</td>
<td>1%</td>
<td>9</td>
</tr>
<tr>
<td>Asian</td>
<td>1%</td>
<td>7</td>
</tr>
<tr>
<td>Native American/Alaskan Native</td>
<td>&lt;1%</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: DCFS

In order to better support families experiencing domestic violence while keeping adult and child survivors safe, domestic violence agencies are partnering with DCFS as part of the Domestic Violence Co-Location Program (DVCLP). The DVCLP places domestic violence advocates, employed by partner domestic violence agencies, in DCFS offices to help build the capacity of child welfare workers around domestic violence, support and engage all members of the family, including the person using violence and coercive control, and link the families to concrete supports and services. At the time of this report, the DVCLP is operating in four DCFS offices in collaboration with A Safe Place, Remedy Renewing Lives, Family Rescue, and Sara’s Inn. The Network: Advocating Against Domestic Violence, the Illinois Coalition Against Domestic Violence, and Ascend Justice are also partners that support the operations of the DVCLP.
Family Defense Program
ASCEND JUSTICE

Population Served
The program provides advice and brief services to clients throughout Illinois and direct representation in Cook County, with limited exceptions.

Program Description
Ascend Justice’s Family Defense program empowers families impacted by the child welfare system through legal services related to ongoing DCFS investigations for child abuse or neglect, including advocacy regarding safety plans and intact services. The Family Defense program further provides brief services and representation in administrative expungement appeals of DCFS indicated findings. In 2022, the Family Defense program provided services for 27 survivors of domestic violence.

Participant Feedback

“I have read the [DCFS expungement appeal decision] over and over and over. I can’t put into words the relief I feel. I’ve carried this for so long that the stress and anxiety became a part of who I was. I can’t thank you enough. I apply so much of what was went over for the trial to my everyday life and it is truly changing the world around me for the better. I just can’t thank you enough for how amazing you did, the time and effort you put into myself and this case. I am so grateful and will always pray God blesses everything you touch, everything you pursue, every step you take. *deep sigh* THANK YOU.”

“I’m singing, dancing and crying all at once. You are an angel. I don’t know what I would have done without you and your office. This is the best Christmas, Thanksgiving, Halloween, and Easter gift I could ever have received. My boys are going to be so happy as well. . . The world needs to know how amazing you are. I wish you happiness, endless love, and all the blessings”
Incarcerated Survivor Program
ASCEND JUSTICE

Population Served
The program provides advice and brief services to clients throughout Illinois and direct representation in Cook County, with limited exceptions.

Program Description
The criminal legal system often targets survivors and perpetuates the harm they have already experienced, resulting in additional harm to their children and families. Ascend Justice’s Incarcerated Survivors program provides civil legal services to survivors of gender-based violence who are currently or formerly incarcerated. This includes advice, brief services, and representation to promote the relationships between our clients and their children. In 2022, the Incarcerated Survivors Project opened cases for over 100 survivors, achieving over 200 legal outcomes for those survivors. The most common legal issues were related to allocation of parenting time, divorce, guardianship, family defense, orders of protection, and mitigation for cases of criminalized survivors.

There are approximately 70 Incarcerated Survivors on the waitlist

Participant Feedback

"It was important for me to get my divorce for many reasons, but ultimately I was being held down to someone that was not beneficial or healthy for me or my children to have in our lives anymore. They were detrimental to our future and it was in our best interest. SO thankful for you guys! . . . I feel free, I feel hopeful for me and my children’s future, we are no longer held captive by the darkness of my ex-husband. . . . I now have so much more hope for the future!"
09

Legislative and Advocacy Opportunities to Address Survivor Needs
Call to Action

As part of our annual report it is important to underscore the key opportunities allies and community members can engage in to strengthen safety nets for survivors of gender-based violence. The following section outlines larger advocacy goals organizations, stakeholders and community members can take part in to bring forth a collective action of change. Due to The Network's ongoing work surrounding firearm-involved domestic violence, at the time of publication The Network has been advocating for Statewide legislation which would strengthen firearm relief in orders of protection where the survivor has reported the threat and presence of a firearm. Some takeaways from this data report have been consolidated into organizing and advocacy opportunities.

ENGAGING IN CRIME FREE ORDINANCE EDUCATION AND PREVENTION

Crime Free Ordinances (CFOs) continue to be enacted and expanded throughout Illinois, and the enforcement of these ordinances has the effect of pushing survivors out of entire communities. CFOs create a second carceral system of enforcement in communities because they are intended to police communities outside of the law enforcement system by using surveillance, civil penalties, and eviction to force people out of their homes. Advocates can focus on the shared goal of keeping communities safe and alternatives to CFOs, including better partnerships with service providers and other community organizations for community members that are experiencing harm, and other ways to hold housing providers accountable for poor maintenance of their properties (e.g., an anonymous report line, inspections of properties, training and resources).
Advocates can also highlight that CFOs have the unintended consequences of isolating survivors, making them afraid to contact law enforcement or emergency services, and creating situations where they need to choose between their safety and their housing.

CFOs are enacted by public bodies, which are covered by the Freedom of Information Act in Illinois. As such, advocates in areas with a CFO can make a request for information about how the ordinance is affecting the survivors that they work with. In making these requests, The Network would recommend asking for data about how the ordinance is being enforced (e.g., which activity is being considered a violation), training materials used by the municipality to train housing providers on the ordinance, and any specific policies or procedures that the municipality has created to ensure that incidents of domestic or sexual violence are not being considered a violation of the ordinance.

While the primary goal should be preventing or repealing CFOs in our communities, there are a number of other advocacy steps that advocates can take on the way to addressing how CFOs harm survivors in our communities. Some action items include educating public officials on the harmful effects of CFOs on survivors of gender-based violence, improving training for housing providers in the community on gender-based violence and fair housing, and creating resources and community partnerships to inform survivor tenants of their housing rights. Safe housing is an essential part of reaching safety for many survivors and working these outcomes into an organization’s larger mission can be helpful in creating long-term change in a community.

**ADVOCACY IN FUNDING GENDER-BASED VIOLENCE PROVIDERS**

In 2022, as the total number of survivors seeking services increased to almost meet pre-pandemic totals, budget advocacy became increasingly important. Advocates engaged in educational outreach and budget advocacy at the city level continue to meet the increased demand. Outreach to elected officials and their staff was conducted to ensure gender-based violence providers continued to receive the levels of funding they required from the city, resulting in $25 million in new funding, most of which came from the American Rescue Plan Act. While these funds continue to be allocated and expended by service providers, there is continued advocacy required to ensure these funds are not limited to one-time ARPA funds. Improvements to the funding process are also needed, as providers contracting with the city reported substantial delays in accessing the funds they had been promised, even while completing burdensome monthly reports for services they had not received payment for.
This budget victory underscores the value of advocacy, engaging community members, and outreach to elected officials to sustain and increase funding levels over time. As advocates engage in expressing their support for public funding of these services, The Network encourages individuals to attend Chicago city budget town halls and engage in budget conversations with their elected officials. In 2022, through The Network’s online platform, 46 advocates participated in advocacy efforts totaling 80 connections with Alderpeople. Continuing to advocate and educate the public and stakeholders on the value and importance of funding direct service providers will continue to be a critical part of ensuring survivors are prioritized in public health, safety, prevention, and education conversations.

In 2022, domestic violence state levels of funding were kept intact after a critical investment was made by the state in 2021. However, as of the publication of this report, direct service providers have now been confronted with federal cuts. In 2023, Victim of Crime Act (VOCA) cuts have impacted gender-based violence service providers. Specifically, the sexual violence direct service community experienced a $9.5 million cut in funding from the state in any prior fiscal year.

While the effects of these cuts will vary based on the provider and the types of services they offer, including whether or not they are a dual-service provider, we will not fully expect to see the implications of these cuts to providers until 2024 and beyond.

Scan the QR to view Advocacy Sign Ups.
2022–2023 General Assembly Legislative Victories

**HB 2775**
Created discrimination protections for tenants, requiring landlords to not turn applicants away based on source of income including their participation in emergency housing assistance (EHA).

These protections enable survivors to seek or maintain their housing while utilizing public benefits, rental assistance, and other economic supports.

**HB 3988**
Created the Missing and Murdered Women’s Task Force to examine and provide recommendations to the General Assembly on the systemic causes behind violence that Chicago women and girls experience.

The gender-based violence community composes a large part of participants in this working group.

**HB 5525**
Created a commission to make recommendations related to children of incarcerated parents.

This commission will follow in the steps of the previous Task Force for Children of Incarcerated Parents to convene stakeholders, conduct research, and make recommendations to the General Assembly.

**HB 3667**
Established permanent options which allowed for virtual hearings and video conferencing for orders of protection to be filled remotely.

These services were crucial for survivors seeking these orders during the pandemic and continue to make the courts more accessible for survivors looking to pursue the criminal legal system.
10

General Recommendations
Gender based violence service providers have also reported recruitment challenges due in part to budget restraints but also workforce availability. These challenges further threaten their ability to keep up with the increased demand for services our data reflects survivors are incredibly reliant on. Stabilizing the workforce for gender based violence service providers is essential to survivor safety.

While data is not publicly available on the number of survivors who return to the field to work as staff, this is known anecdotally amongst the community as many survivors return to work in the gender-based violence services as a method of healing from their survivorship and serving others.
Increasing the competitiveness of these positions in the job market is vital to address workforce needs; however, expanding the pipeline to the gender-based violence field as a career is also required. This includes ensuring all stakeholders, such as service providers, community leaders, elected officials, educators, and training programs promote these career opportunities in educational programs as well as in job training and workforce development programs focused on client services. High need areas, in particular, such as therapy and counseling and case management should be emphasized.

Providing a clear pathway from training to gender-based violence services is pivotal to addressing workforce concerns systemically.

PRIORITIZE NON-CARCERAL SOLUTIONS

As has been discussed in previous sections of this report, there are vast areas of needed improvement to the current carceral systems and criminal legal system as it relates to survivors and specifically, criminalized survivors. Our current carceral system and criminal legal systems do not provide systemic solutions to address the cycle of violence and provide restorative and rehabilitative alternatives for the individuals who have been harmed and have caused harm.

The Network promotes the establishment and expansion of non-carceral solutions that allow for families to stay intact and offer community-based wrap-around services. While current community-based and corresponsive models to address gender-based violence and community violence are still being built up and expanded on, it is important to continue to lean on these models to promote them to stakeholders across all sectors.

Addressing the root causes of systemic violence is also a fundamental part of prioritizing non-carceral solutions.

As gender-based service providers, emphasizing and expanding programs such as prevention education, teen dating violence, counseling and therapy services, and partner abuse intervention programs are essential.
IMPROVE DATA COLLECTION

Data collection from gender-based service providers should continue to be expanded and improved upon. While the vast majority of providers use Infonet as a data collection platform, The Network encourages providers to collect information even on non-essential or required categories. Providers that do not participate in the use of a platform for data collection should explore options such as Infonet to capture and report on client services and programs.

This data collection serves as the foundation of advocacy and systemic change when providers are able to easily identify and recognize survivor needs in both a quantitative and qualitative manner.

Data accessibility from external stakeholders is an area of vast opportunity for improvement. Data reporting on survivorship and survivor needs are rarely collected when optional and are increasingly difficult to access. Although, much of the data included in this report was obtained through Freedom of Information Act (FOIA) requests, some of the most crucial entities that collect data on survivors and their needs, especially the court system, are not subject to FOIA. This includes the Administrative Office of the Illinois Courts (AOIC). Orders of protection are specifically designed to be comprehensive of survivor needs as they pursue the criminal legal system; however, there is no publicly available data reflecting which remedies survivors are requesting and which of those are being granted in the process. Standardizing data collection is also an area of opportunity to ensure public entities such as law enforcement and emergency call centers are using standardized definitions and reporting methods to track requests related to domestic violence and sexual violence. While databases use data tracking methods such as UCR codes for law enforcement, the use of these platforms is largely optional, making large scale data collection and analysis cumbersome and inaccessible.
Appendix & Endnotes
Appendix A
Complete List of InfoNet Domestic Violence Service Providers

<table>
<thead>
<tr>
<th>Service Provider</th>
<th>Location</th>
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<tbody>
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<td>A Safe Place - Counseling &amp; Advocacy</td>
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<td>A Safe Place (DHS ARPA Housing)</td>
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<td>A Safe Place (Emergency &amp; Transitional Housing)</td>
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<td>A Safe Place (Rapid Rehousing)</td>
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<td>Between Friends</td>
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<td>Center for the Prevention of Abuse (Pekin Satellite)</td>
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Appendix B
Complete List of InfoNet Sexual Violence Service Providers

- A Safe Place (Betty Toser Program)
- A Safe Place (Court)
- A Safe Place (DHS ARPA Housing)
- A Safe Place (Emergency & Transitional Housing)
- A Safe Place (Family Visitation Center)
- A Safe Place (CJIA Direct - VAWA SASP HST)
- A Safe Place (CJIA Expanded Crisis Response)
- A Safe Place (La Paloma Program)
- A Safe Place (Multi-Victimization Program)
- A Safe Place (Mundelein Satellite)
- A Safe Place (Rapid Rehousing)
- A Safe Place (RISE Program)
- A Safe Place (Safe Youth)
- A Safe Place (Shelter)
- A Safe Place (VOCA Transitional Housing)
- A Safe Place (Zion – Supportive Housing)
- A Safe Place (Zion Satellite)
- Anew
- Anixter Center
- Apna Ghar, Inc.
- Apna Ghar, Inc. (Skokie satellite)
- Apna Ghar, Inc. (South Side Connections (South Side Satellite Office))
- Apna Ghar, Inc. (Swedish Covenant Hospital)
- Arab American Family Services DV Program
- Ascend Justice
- Bastal DV Program at HAS
- Between Friends
- Between Friends (Rolling Meadows Satellite)
- Cairo Women’s Shelter
- Cairo Women’s Shelter (Hardin Satellite)
- Cairo Women’s Shelter (Massac Satellite)
- Cairo Women’s Shelter (Pope Satellite)
- Cairo Women’s Shelter (Pulaski Satellite)
- Cairo Women’s Shelter (Union Satellite)
- CAWC
- CAWC (Greenhouse)
- CAWC (Haymarket)
- CAWC (HCIP)
- Center for the Prevention of Abuse
- - Center for the Prevention of Abuse (Pekin Satellite)
- - Center on Halsted - Anti-Violence Project
- - Centro Romero DV Program
- - Chicago Alliance Against Sexual Exploitation
- - Community Crisis Center DV Program
- - Countering DV / Neville House
- - Courage Connection
- - Courage Connection – Evans
- - Courage Connection – Forbes
- - Courage Connection – UPS
- - Courage Connection (Ford County Satellite)
- - Courage Connection (HUD RRH-DV)
- - Courage Connection (Piatt County Satellite)
- - Courage Connection (Rantoul satellite)
- - Crisis Center for South Suburbia
- - Crisis Center Foundation
- - Crosspoint Human Services DV Program
- - Dove, Inc.
- - Evanston YWCA
- - Evanston YWCA (Longer Term Housing Program)
- - Family Rescue
- - Family Rescue (Legal Advocacy Program)
- - Family Rescue (New Heights Apartment Program)
- - Family Rescue (Ridgeland Program)
- - Family Rescue (Rosenthal Program)
- - Family Rescue Community Outreach Program
- - Family Resources, Inc. DV Program
- - Family Shelter Service
- - Family Shelter Service (Community)
- - Family Shelter Service (Courthouse)
- - Family Shelter Service (Downers Grove)
- - Family Shelter Service (Glen Ellyn Shelter)
- - Family Shelter Service (Naperville Shelter)
- - Freedom House DV Program
- - Fulton-Mason Crisis Service
- - Guardian Angel Home/ Groundwork DV
- - Harbor House
- - Harbor House (Washtenaw Satellite)
- - Heartland Human Care Services DV Program
- - HOPE DV Program
- - HOPE of East Central IL
- - HOPE of East Central IL (Paris Satellite)
- - Howard Area Community Center
- - Korean American Women in Need
- - Legal Aid Chicago
- - Life Span DV Program
- - Mercer County Family Crisis Center, DV Program
- - Metropolitan Family Services
- - Metropolitan Family Services – DVCAP
- - Metropolitan Family Services (Calumet Center)
- - Metropolitan Family Services (DV Southeast)
- - Metropolitan Family Services (DV Southwest)
- - Metropolitan Family Services (Englewood)
- - Metropolitan Family Services (Legal Aid Bureau)
- - Metropolitan Family Services (North Center)
- - Mujeres Latinas en Accion
- - Mujeres Latinas en Accion (Brighton Park)
- - Mujeres Latinas en Accion (Chicago CAC Satellite)
- - Mujeres Latinas en Accion (North Riverside Satellite)
- - Mujeres Latinas en Accion (Supervised Visits)
- - Mutual Ground, Inc. DV Program
- - Mutual Ground, Inc. DV Program (Batavia Satellite)
- - Mutual Ground, Inc. DV Program (Hesed Satellite)
- - Mutual Ground, Inc. DV Program (Yorkville Satellite)
- - Neapolitan
- - Oasis Womens Center
- - Polish American Association
- - QUANADA DV Program
- - Remedies
- - Riverview Center DV Program
- - Riverview Center DV Program (Mt. Carroll Satellite)
- - Safe Harbor Family Crisis Center
- - Safe Journeys DV Program
- - Safe Passage, Inc.
- - Sarah’s Inn
- - Schwab Rehabilitation Hospital DV Program
- - Sojourn Shelter and Services
- - Sojourn Shelter and Services (Christian County)
- - Sojourn Shelter and Services (Logan County)
- - Sojourn Shelter and Services (Menard County)
- - Sojourn Shelter and Services (Montgomery County)
- - Stopping Woman Abuse Now
- - Survivor Empowerment Center – DV
- - SWAN (Carmi Satellite)
- - SWAN (Effingham Satellite)
- - SWAN (Mt. Vernon Satellite)
- - SWAN (Salem Satellite)
- - SWAN (Vandalia Satellite)
- - Swedish Pathways
- - Swedish Pathways (Northshore Legacy Pathways)
- - The Hana Center DV Program
- - The Pillars DV Program
- - The Resurrection Project DV Program
- - Turning Point (DV Program)
- - Universal Family Connections DV Program
- - Violence Prevention Ctr of SW Il
- - VOICES DV Program
- - WINGS
- - WIRC – Victim Services DV Program
- - YWCA of the Sauk Valley DV Program

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Appendix C
Cook County Department of Public Health Codes & Rules for EMS Data

Child Abuse and Neglect
- Categorical syndrome definition based on the Center for Disease Control and Prevention's Suspected and Confirmed Child Abuse and Neglect v1 definition for ESSENCE. A NEMSIS v3 or v2 record is labeled as a suspected child abuse or neglect incident if one or more of the following are true:
  - Patient age (E06.14, E06.15; ePatient.15, ePatient.16) is less than or equal to 17 years of age AND one or more of the following are true:
  - The record matches the criteria of the CDC Sexual Violence V3 syndrome.
  - Cause of Injury (E10_01) is 9520: Child battering (E967.0)
  - Cause of Injury (eInjury.01) indicates any of the following ICD-10 codes (sub-codes included): T74.02, T74.12, T74.22, T74.32, T74.4, T74.52, T74.62, T74.92, T76.02, T76.12, T76.22, T76.32, T76.52, T76.62, T76.92, Y07.1, Y07.4, Y07.5, Y07.6, Y07.9, Z04.42, Z04.72, Z04.81, Z04.82.
  - Provider impressions (eSituation.11, eSituation.12) indicate any of the following ICD-10 codes (sub-codes included): T74.02, T74.12, T74.22, T74.32, T74.4, T74.52, T74.62, T74.92, T76.02, T76.12, T76.22, T76.32, T76.52, T76.62, T76.92, Z04.42, Z04.82, Z04.81, Z04.82.
  - Chief/secondary complaint (E09_05, E09_08; eSituation.04) contain the following keywords or phrases (including common misspellings and variants) (negative phrases are excluded, e.g., "denies rape", "did not force sex"): "abandon", "abandonment", "neglect".
  - Chief/secondary complaint (E09_05, E09_08; eSituation.04) or narrative (E13_01; eNarrative.01) contain the following keywords or phrases (including common misspellings and variants) (negative phrases are excluded, e.g., "denies rape", "did not force sex"): "sexual assault", "sexually abused", "forced sex", "abandoned child", "child abuse", "physical abuse", "molest", "child neglect".
  - Calls that are canceled prior to arrival at scene, canceled on scene (no patient contact or found), or are on standby (no services or support provided) are excluded.

Intimate Partner Violence
- Categorical syndrome definition based on the Center for Disease Control and Prevention's Intimate Partner Violence v2 definition for ESSENCE. A NEMSIS v3 or v2 record is labeled as an intimate partner violence incident if one or more of the following are true:
  - Chief/secondary complaint (E09_05, E09_08; eSituation.04) or narrative (E13_01; eNarrative.01) contain the following keywords or phrases (including common misspellings and variants): "domestic assault", "domestic violence", "partner violence".
  - Chief/secondary complaint (E09_05, E09_08; eSituation.04) contain "dv".
  - Chief/secondary complaint (E09_05, E09_08; eSituation.04) or narrative (E13_01; eNarrative.01) contain the following keywords or phrases (including common misspellings and variants): "boyfriend", "ex-boyfriend", "bf", "girlfriend", "ex-girlfriend", "gf", "partner", "ex-partner", "husband", "ex-husband", "wife", "ex-wife", "significant other", "friend with benefits", "spouse" AND one or more of the following are true:
- The record matches the criteria of the CDC Sexual Violence V3 syndrome.

- Cause of Injury (E1Injury.01) indicates any of the following ICD-10 codes (sub-codes included): O9A.3, O9A.4, T74.11, T74.21, T74.31, T74.91, T76.11, T76.21, T76.31, T76.91, X94, X95, X99, Y00, Y01, Y02, Y03, Y04, Y07, Y08, Y09, Z65.8.

- Provider impressions (eSituation.11, eSituation.12) indicate any of the following ICD-10 codes (sub-codes included): O9A.3, O9A.4, T74.11, T74.21, T74.31, T74.91, T76.11, T76.21, T76.31, T76.91, Z65.8.

- Chief/secondary complaint (E09_05, E09_08; eSituation.04) or narrative (E13_01; eNarrative.01) contain the following keywords or phrases (including common misspellings and variants; negative phrases are excluded): "altercation", "assault", "attacked", "battery", "beat", "choked by", "fear", "fight", "forced her", "forced miscarriage", "homicide", "kick", "kill", "physical abuse", "poisoned", "punch", "pushed", "rape", "sane exam", "sexual contact", "sexually abusive", "shove", "slam", "slap", "stalked", "strangle", "he suffocated her".

- Calls that are canceled prior to arrival at scene, canceled on scene (no patient contact or found), or are on standby (no services or support provided) are excluded.

**Sexual Violence**

- Categorical syndrome definition based on the Center for Disease Control and Prevention’s Sexual Violence definition for ESSENCE, which is intended to detect incidents involving sexual violence.

- A NEMSIS v3 or v2 record is labeled as sexual violence if one or more of the following are true:
  - Cause of Injury (E10_01) is 9620 - "Rape (E960.1)"
  - Provider’s primary impression (E09_15) is 1715: 959.90 - "Sexual assault/rape"
  - Provider’s secondary impression (E09_16) is 1850: 959.90 - "Sexual assault/rape"

- Provider impressions (eSituation.11, eSituation.12) indicate any of the following ICD-10 codes (sub codes included): T74.2, T74.51, T74.52, T76.2, T76.51, T76.52, Z04.41, Z04.42, Z56.81.

- Chief/secondary complaint (E09_05, E09_08; eSituation.04) or narrative (E13_01; eNarrative.01) contain the following keywords or phrases (including common misspellings and variants) (negative phrases are excluded, e.g., "denies rape", "did not force sex"): "sexual assault", "sexually abused", "forced sex", "SAFE examination", "SART kit", "SANE testing".

- Calls that are canceled prior to arrival at scene, canceled on scene (no patient contact or found), or are on standby (no services or support provided) are excluded.”
Endnotes


10. Note: The Network submits a FOIA request for “total domestic violence related homicides and shootings in Chicago for the last three years” annually. Totals from previous years’ reports may vary slightly, as CPD updates their records based on investigative findings.

11. Note: Domestic violence related homicides are defined by CPD as having a motive description of “CHILD ABUSE” or “GENERAL DOMESTIC,” or by a domestic relationship between victim and offender.

12. Note: Domestic violence related non-fatal shootings are defined by a case report with domestic incident motive or cause code or by a domestic indicator.

13. Ibid.


16. Note: The Gun Violence Archive assigns a shooting incident the “domestic violence” code when police determine that a case involved domestic violence, which occurs between members of a family or intimate partners.


20. Author analysis of GVA database https://www.gunviolencearchive.org/query

21. ISP FOIA application dashboard data, April 2023.


25. Hotline


27. Author analysis of 311 Freedom of Information request data, April 2023.

29. Ibid.
30. Ibid.
31. Ibid.
35. Author analysis of Illinois Domestic Violence Hotline Data obtained through the internal database, iCarol, April 2023.
36. Ibid.
37. Ibid.
38. Ibid.
39. Ibid.
40. Ibid.
41. Ibid.
42. Ibid.
43. Ibid.
44. Ibid.
45. Ibid.
46. Ibid.
49. Author analysis of Illinois Domestic Violence Hotline Data obtained through the internal database, iCarol, April 2023.
52. Note: Some minor clients are entered as adults if they were directly impacted by DV, e.g. teen dating violence. A small portion of clients may have more than one case.
53. There may be some overlap between domestic violence and sexual violence client totals.
63. Author analysis of Illinois Domestic Violence Hotline Data obtained through the internal database, iCarol, April 2023.
64. Ibid.
65. Ibid.
66. Ibid.
67. Ibid.
68. Ibid.
69. Ibid.
70. Ibid.
71. Ibid.
72. Ibid.
73. Ibid.
74. Ibid.
75. Ibid.
76. Ibid.
77. Ibid.
78. Ibid.
79. Ibid.
80. Ibid.
82. Note: VAWA has many protections and, in addition to those listed here, the 2022 reauthorization included anti-retaliation provisions and a protection of the right to report crime in your home. See 34 U.S.C. § 12494; 34 U.S.C. § 12495. Although these protections were passed and in effect under the reauthorization, covered federal programs have not yet issued regulations or detailed subregulatory guidance about how these protections will be implemented.
83. 34 U.S.C. § 12491(a)(3) (defining many specifically listed covered programs and “any other Federal housing programs providing affordable housing to low- and moderate-income persons by means of restricted rents or rental assistance, or more generally providing affordable housing opportunities, as identified by the appropriate agency through regulations, notices, or any other means.”).


100. Charlene K. Baker, Cook, Sarah L., Norris, Fran H., "Domestic Violence and Housing Problems: A Contextual Analysis of Women’s Help-seeking, Received Informal Support, and Formal System Response,” Violence Against Women 9, no. 7 (2003): 754-783 (finding that 38% of the women surveyed had experienced homelessness and other housing instability).


107. Act of August 21, 2015, Pub. Act 99-0441. see also 55 ILCS 5/5-1005.10(c); 65 ILCS 5/1-2-1.5(c).

108. 34 U.S.C.§ 12495


110. 34 U.S.C. § 12495(b).

111. DeKalb, Ill., Ordinance 2022-051, Section 10.10 (2022) (“A single violation of any of the provisions hereof shall be deemed a serious violation and material non-compliance with the lease”).

112. DeKalb, Ill., Ordinance 2022-051, Section 10.10 (2022) (“Violation of any of the above provisions shall be a material and irreparable violation of the lease and good cause for termination of the tenancy; provided, however, a Tenant shall not be retaliated against nor evicted when merely a victim of unlawful activity, but the Tenant shall be strictly and vicariously liable and responsible for the unlawful activity of the Tenant’s guests, any member of the Tenant’s household, and any person under the Tenant’s control.”)

113. Author analysis of Illinois Domestic Violence Hotline Data obtained through the internal database, iCarol, April 2023.

114. Ibid.


118. Note: These totals are the total number of incidents where firearms were recovered and not the total number of firearms recovered.


123. Author analysis of Cook County State’s Attorney’s Office Felony Dashboard, April 2023.

124. Ibid.

125. Ibid.

126. Ibid.


128. Ibid.


131. Ibid.

132. Ibid.


134. 325 ILCS 5/3


136. Author analysis of Department of Child and Family Services Freedom of Information request data, April 2023.

137. Ibid.


139. Ibid.


141. Ibid.

142. Author analysis of Department of Child and Family Services Freedom of Information request data, April 2023.


145. Ibid.

146. Ibid.

147. 5 ILCS 140/2(a).