

DOMESTIC VIOLENCE TRENDS IN ILLINOIS: VICTIMIZATION CHARACTERISTICS, HELP- SEEKING, AND SERVICE UTILIZATION



ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY
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Abstract: Domestic violence is a national public health issue that both federal and state funding work to address. Researchers analyzed data collected via InfoNet, a statewide case management and data reporting system used by domestic violence agencies across Illinois, and other state administrative data, to identify trends among those who have been harmed by domestic violence. Researchers found shifts in the number and characteristics of clients served, including an increase in clients who are veterans, older adults, and those who shared child custody with the offender. However, further research is needed to fully understand the unique needs of these client groups and how funding shifts may impact services in Illinois.

Introduction

Domestic violence (DV) is a persistent public health issue across the United States. The Centers for Disease Control estimates approximately 36 percent of women and 34 percent of men across the country have been harmed by an intimate partner in their lifetime.¹ In Illinois, these estimates are slightly higher for women (42 percent) and lower for men (26 percent).² National rates of interpersonal violence indicate over 2 million women and 1 million men in Illinois have experienced DV in their lifetimes.³ A [2016 ICJIA Illinois victim needs assessment](#) found of those who reported being a prior victim of a crime (N= 815), 30 percent had experienced DV.⁴ Of victims who had experienced DV, 43 percent reported that victimization experience impacted them the most over any other victimization experience in their lives.

Defining Domestic Violence

The National Network to End Domestic Violence defines DV as a pattern of physical, sexual, emotional, economic, or psychological abuse committed by a partner with the intent of exerting power and control over the victim.⁵ Several states and the U.S. Office on Violence

Against Women define DV as occurring only among intimate partners.⁶ In Illinois, DV is more broadly defined to include abusive relationships between intimate partners, other family and household relationships, and even personal caretakers.⁷

Potential Needs of Domestic Violence Victims

DV can result in a myriad of adverse victim outcomes, and victims who are exposed to repeated violence over time are at greater risk of adverse outcomes.⁸ Victims often experience short and long-term physical injuries (e.g., fractures, internal organ damage, head trauma, pain, fatigue, tension headaches).⁹ Some victims may sustain a traumatic brain injury or disability as a result of physical violence.¹⁰ Overall the consequences of DV on physical health have been associated with poorer health outcomes, chronic pain, and increased mortality.¹¹

Illinois Domestic Violence Act

750 ILCS 60

"Abuse" is defined as physical abuse, harassment, intimidation of a dependent, interference with personal liberty or willful deprivation, but does not include reasonable direction of a minor child by a parent or person in loco parentis.

"Family or household members" is defined as 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...in the case of a high-risk adult with disabilities. "Family or household members" includes any person who has the responsibility for a high-risk adult as a result of a family relationship or voluntarily assumed responsibility for all or a portion of the care of a high-risk adult with disabilities, or by express or implied contract, or by court order.

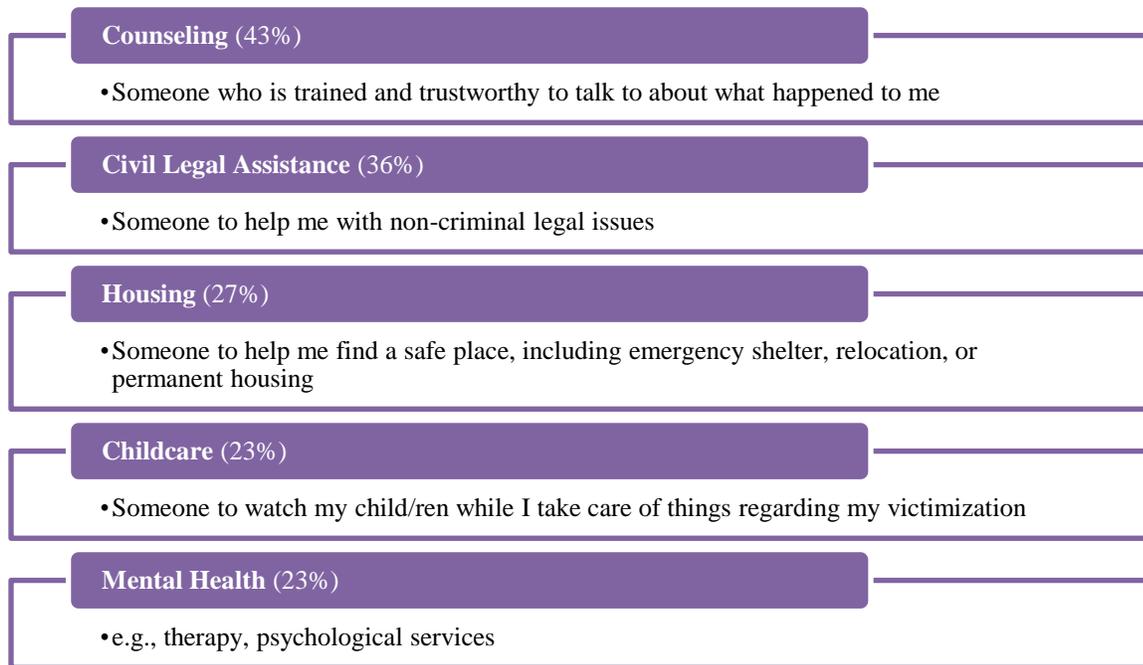
Victims of DV often experience a variety of psychosocial impacts after experiencing violence, including anxiety, depression, and other PTSD symptoms. These symptoms, including an inability to trust others, emotional detachment, sleep disturbances, flashbacks, and suicidal behavior, can negatively impact their day-to-day lives.¹² Isolation from social networks, strained relationships with health providers and employers, and homelessness also occur.¹³

The physical and mental impacts of DV often have corresponding economic impacts for the victim. Control tactics perpetrated by DV offenders often impede the victim's capacity to find and sustain employment. These tactics may include workplace harassment, distracting them from their job, or forcing the victim to miss work.¹⁴ DV offenders may also control the finances and bank accounts in the relationship.¹⁵ Taken together, these economic impacts perpetuate control through a dependence on the offender and may impede victims from leaving their abusers due to a lack of sufficient resources or financial prospects. The financial insecurity, mounting medical costs resulting from injury, and alienation from family, friends, or mental health professionals can result in victims experiencing homelessness.¹⁶

Meeting Domestic Violence Victims' Needs

Following victimization, individuals may seek help from either formal or informal support sources. Formal support sources include medical and mental health professionals, law enforcement, and victim service providers. Informal support sources are comprised of family members, significant others, or friends. Victims of DV are most likely to seek help from informal sources.¹⁷ However, research suggests that some DV victims also need formal support services. ICJIA's 2016 victim needs assessment indicated victims of DV were most in need of counseling and civil legal assistance (*Figure 1*).¹⁸

Figure 1
Illinois Survey of Victim Service Needs (n= 107)



Source: Aeffect, 2016

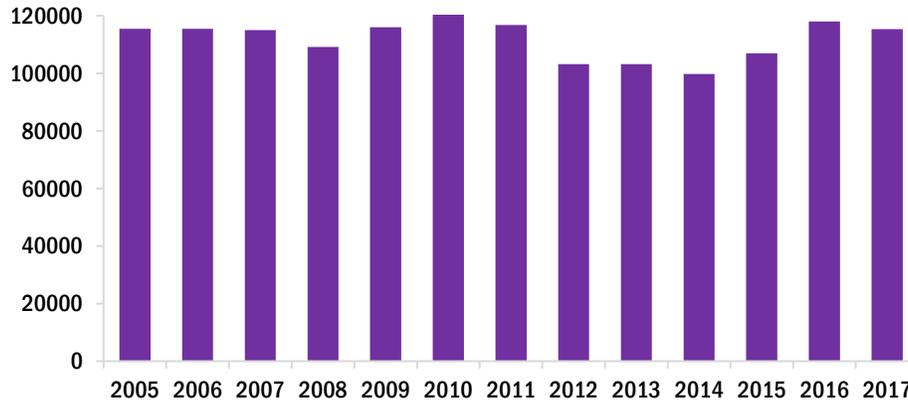
Victims of violent crimes are more likely to indicate a need for formal support as a result of their victimization.¹⁹ Services to meet these needs, such as civil legal advocacy to obtain an order of protection or counseling to address emotional impacts of DV, are provided by specialized victim service providers. Research suggests that most victims of interpersonal crimes, such as DV, perceive victim service provider support to be helpful.²⁰

Some victims do not need or want help from formal support sources. Research conducted with crime victims in Pennsylvania and Illinois suggests that approximately half of victims do not express a need for help from formal support sources following their victimization.²¹ Some victims feel equipped to cope with the victimization on their own or have a strong informal support network upon which they can rely.²²

Domestic Violence Victimization Trends in Illinois

The number of DV offenses reported to law enforcement have fluctuated over the past 10 years, but increased in recent years (*Figure 2*). However, national estimates on the percentage of DV incidents reported to police decreased from 52 percent in 2016 to 47 percent in 2017,²³ suggesting metrics on reporting to police are an undercount of DV incidents that occur.

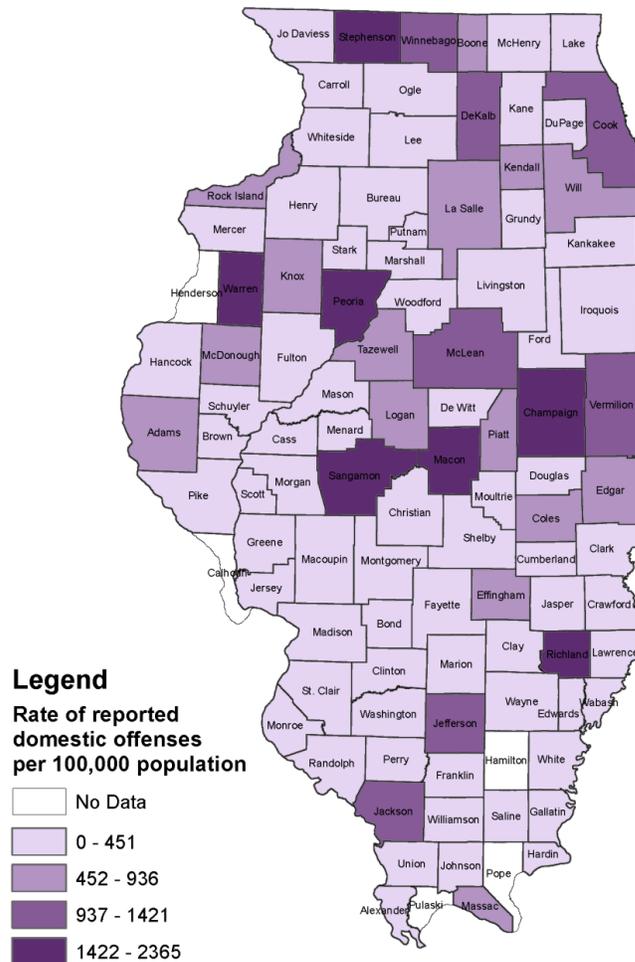
Figure 2
Illinois Domestic Violence Offenses Reported to Law Enforcement, CY 2005-2017



Source: Illinois Uniform Crime Reports

Rates of reported domestic offenses in 2017 were substantially higher than average²⁴ in the mostly urban counties of Champaign, Macon, Peoria, Richland, Sangamon, Stephenson, and Warren (*Map 1*). Richland is the only county located in the southern region of the state; and Warren County, located in the central region, had the highest rate of reported domestic offenses. A substantially higher than average rate also was seen in the City of Chicago, located in Cook County and comprising 21 percent of the state's population. However, the rate lowered when reported offenses and population for all of Cook County were taken into account.

Map 1 Rate of Domestic Violence Offenses Reported to Law Enforcement by County, CY 2017



Source: Illinois Uniform Crime Reports

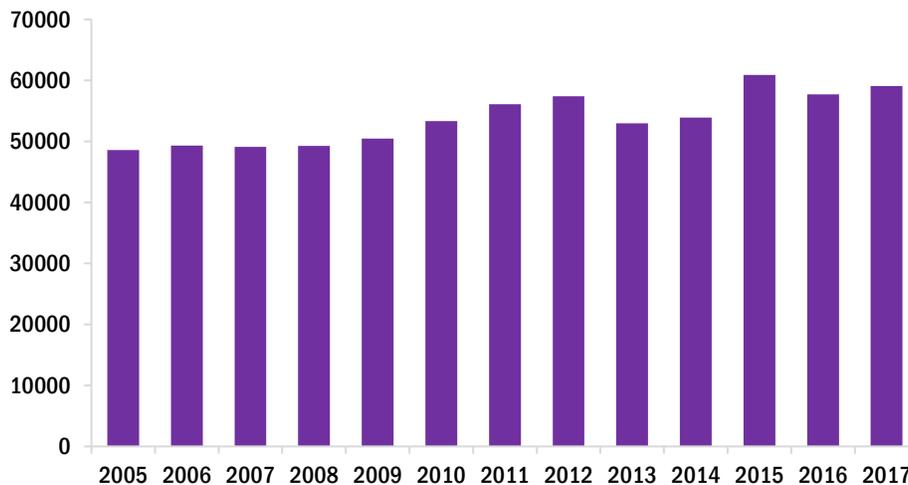
Another indicator of DV in Illinois is the number of orders of protection filed in county courts. Orders of protection are filed with the court and restrict an offender from continuing threats and abuse. Protection orders require the respondent (offender) to stay away from the petitioner (victim), and may require other actions deemed necessary by the court to protect the petitioner.²⁵ There are three types of orders of protection:

- **Emergency:** Granted immediately after judge approval for 14-21 days, plenary order hearing set at time of approval.
- **Interim:** Granted by judge after respondent has been served or if attempts to serve respondent have been made for up to 30 days.

- **Plenary:** After hearing with both petitioner and respondent, or if the respondent does not show, order will be granted for fixed period of time not to exceed 2 years. Plenary OPs can be renewed indefinitely under certain circumstances specified in [ILCS 750 60/220 \(b\)](#).

Like the number of reported offenses to law enforcement, orders of protection also have fluctuated over the past 10 years, but have been higher in recent years (*Figure 3*).

Figure 3
Illinois Orders of Protection Filed CY 2005-2017



Source: Administrative Office of the Illinois Courts

Trends in Domestic Violence Services in Illinois

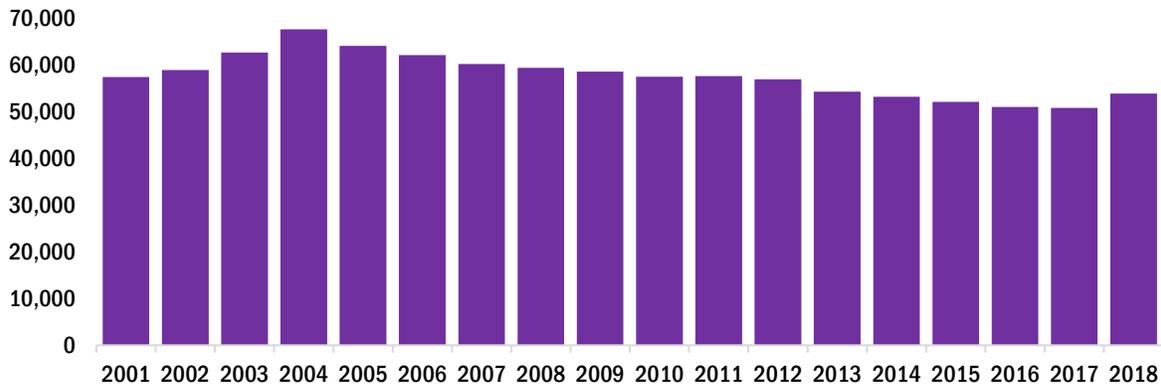
ICJIA’s InfoNet online case management and data collection system contains data on Illinois domestic violence victims who have received services. Client information includes gender, race, ethnicity, age at the time of first service contact, education, employment, and special client needs or disabilities. Service information includes contacts, duration, and type of service obtained by the client, including individual and group counseling, phone counseling, criminal and civil advocacy, transportation, and childcare.²⁶

Most DV service agencies in Illinois use InfoNet, including over 50 members of the [Illinois Coalition Against Domestic Violence \(ICADV\)](#), an organization that works to eliminate DV in Illinois.²⁷ These agencies may offer shelter or other safe housing, 24-hour crisis hotline, information and referral, counseling, advocacy (legal and medical), transportation, outreach, and community education.²⁸

Number of Victims Served

From 2001 to 2018, Illinois DV agencies served nearly 800,000 adults and children, at an average of 57,684 clients per year (*Figure 4*). For the past 10 years, there has been a slight decline in the number of clients; however, in 2018, agencies saw a 6-percent increase in clients served.

Figure 4
Clients Served by Illinois Domestic Violence Agencies, 2001-2018

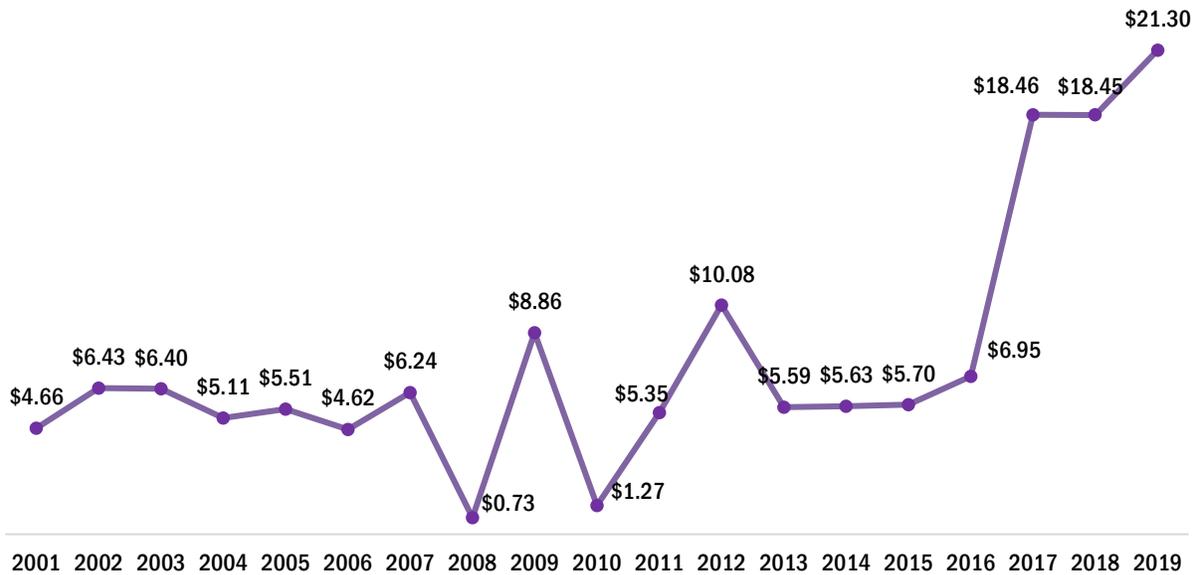


Source: ICJIA InfoNet, 134 DV agencies including satellite offices

Two major sources of funding for DV agencies in Illinois are the U.S. Department of Justice’s [Violence Against Women Act](#) (VAWA) and [Victim of Crime Act](#) (VOCA) programs, both of which are under the purview of Congress. VOCA funds support direct service efforts that respond to the emotional, psychological, or physical needs of crime victims; assist victims in stabilizing their lives after victimization; help victims understand and participate in the criminal justice system; or restore a measure of security and safety for the victim. VAWA funds are intended to promote a coordinated, multidisciplinary approach to enhancing victim advocacy and improving the criminal justice system’s response to violent crimes against women through the development and improvement of effective law enforcement and prosecution strategies and advocacy and services. Congress establishes the amount of funding awarded to states and territories, and the funds are administered by state administering agencies (SAA; i.e., ICJIA) using a population-based formula. The SAA then subgrants this funding to eligible public agencies and nonprofit organizations to fund direct services to crime victims and support administrative activities. ICJIA awards these funds to ICADV, which establishes and monitors subgrants to agencies charged with meeting service needs of DV victims.

From state fiscal years 2001 to 2007, Illinois VAWA and VOCA funding remained stable for ICADV agencies as formula grants shifted based on what was federally allocated for victim services to all state and territories (*Figure 5*). Following 2008, the year of the national financial crisis, funding for these agencies became more variable until SFY 2013.

Figure 5
Combined Illinois VOCA/VAWA Awards for Domestic Violence in Millions, SFY 2001-2019



Source: ICJIA Federal and State Grants Unit Administrative Records

Federal VOCA funding awarded to Illinois quadrupled in 2016 when Congress raised the amount of money available to states for victim services.²⁹ Funding to DV agencies across the state increased by 266 percent between SFY 2016 and SFY 2017. The timing of this funding increase corresponded with the above-noted increase in clients served.

Number of Client Contacts and Hours Receiving Services

InfoNet also tracks information about the number of contacts (i.e., how many times a client received services) and hours of service clients have with providers (i.e., the number of hours in services). Some clients may only need one contact to get the support they need, while other clients’ needs may extend over multiple contacts. Looking at contacts and hours together, these two points of data show the amount of services that a client received, providing a broad picture of service delivery and intensity. In 2018, coinciding with an increase in total clients, a 6.2-percent increase was seen in number of contacts per client, or one more contact per adult client was made than in the previous year. This increase was only for adult clients (*Table 1*).

Table 1
Comparison of Contacts and Hours Per Domestic Violence Client, 2017-2018

Client Type	Contacts Per Client		Hours Per Client	
	2017	2018	2017	2018
Adult	15.20	16.35	10.54	10.85
Child	14.82	14.71	14.01	13.07

Source: ICJIA InfoNet, 134 DV agencies including satellite offices

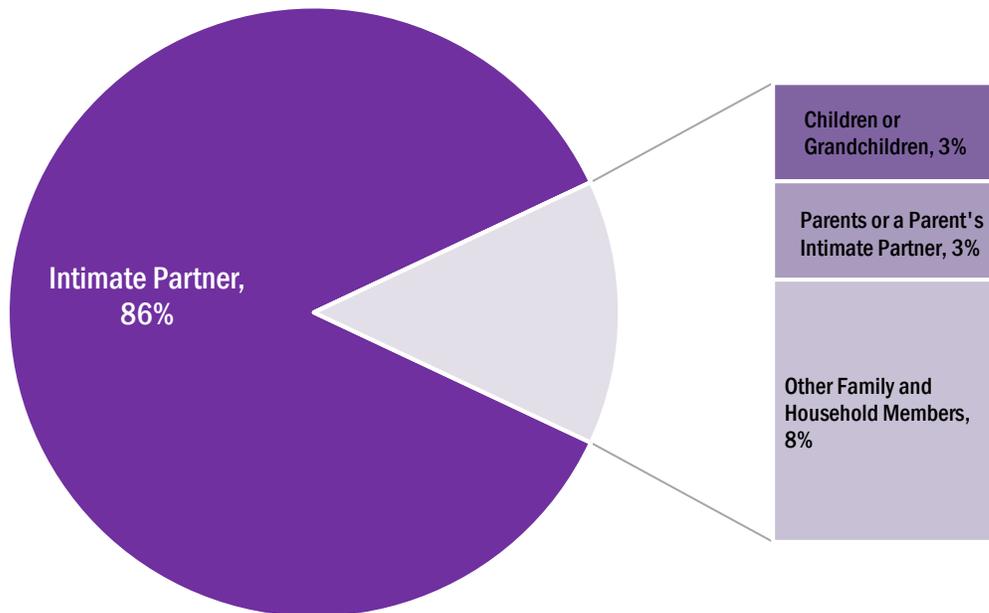
The number of hours per client who received services increased by 1.18 percent and again was only for adult clients; while the number of hours per child client who received services decreased by 1 hour in 2018. While it would be interesting to explore shifts in the types of services received and by whom to better understand how services to clients have changed, these questions are best explored with individual-level data and the present article is focused on broader statewide trends.³⁰

Characteristics of Domestic Violence Clients Served in Illinois

Offender Relationship to Victim

As mentioned, Illinois' Domestic Violence Act (IDVA)³¹ broadly defines DV to include multiple types of relationships, while other states and the U.S. Office on Violence Against Women define DV as occurring only among intimate partners.³² InfoNet data on victim/offender relationships show most clients seek help because of violence committed by their intimate partner, however 14 percent of clients sought help for violence stemming from other family/household relationships in 2018 (*Figure 6*). These clients included victims who experienced abuse committed by their own children or grandchildren (3 percent), their parents or a parent's intimate partner (3 percent), or other family and household members (8 percent).

Figure 6
Offender Relationship to Victim, 2018

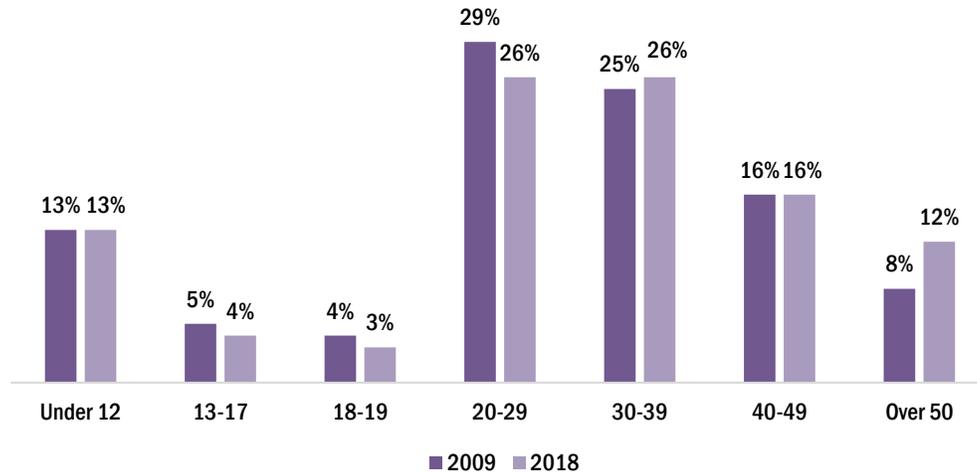


Source: ICJIA InfoNet, 134 DV agencies including satellite offices

Client Age at Intake

Client help-seeking remained relatively constant across most age groups over the past 10 years, however changes in the percentage of clients were noted among clients ages 20-29 and over the age of 50 (*Figure 7*). The average age at intake of adult clients who received services in 2018 was 36.5 years old.

Figure 7
Changes in Age of Domestic Violence Clients, 2009-2018



Source: ICJIA InfoNet, 134 DV agencies including satellite offices

There has been a gradual 3-percent decrease in the number of clients seeking services who are ages 20-29, while during the same period there was a 4-percent increase in the number of clients who were over the age of 50. These older clients were the only age groups growing during the 10+ year decline in overall clients and in 2018, clients who were age 60 or older made up 4 percent of clients who sought services, doubling their portion of the client pool since 2009.

Client Race/Ethnicity

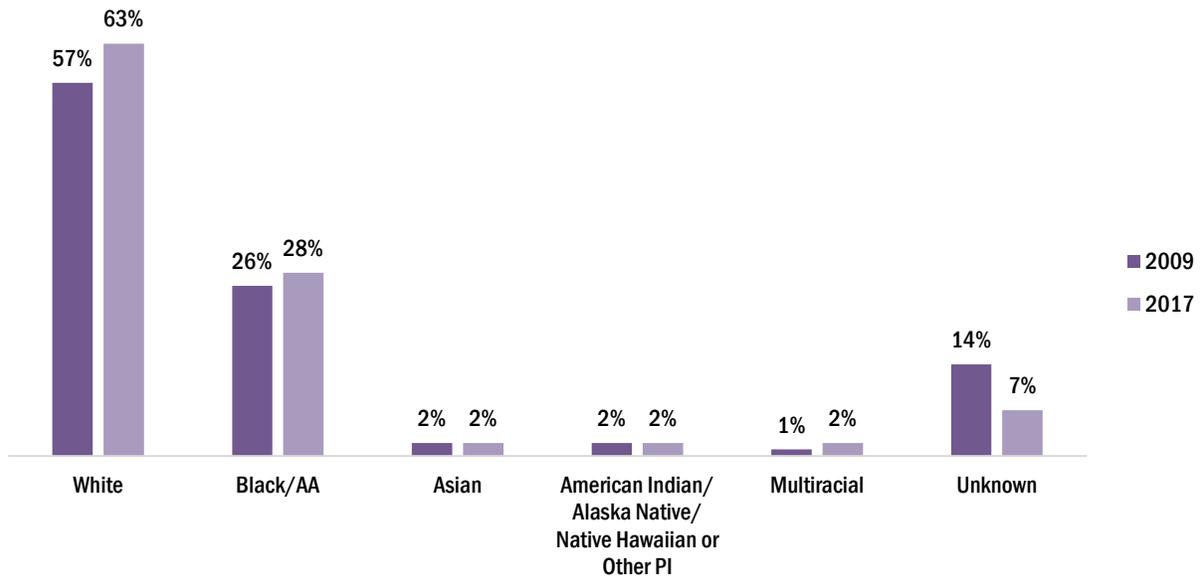
The racial/ethnic composition of people seeking domestic violence services in Illinois has slightly changed. InfoNet collects race and ethnicity separately, thus we will first present trends for ethnicity, followed by race.

In the past three years, InfoNet data showed a 5-percent increase in the number of clients identifying their ethnicity as Hispanic/Latinx, for a total of 22 percent of all clients in 2018 (though 5 percent of all clients were reported as Unknown with regard to Hispanic/Latinx ethnicity so this may be an undercount).³³ The Hispanic/Latinx population of the state of Illinois grew by nearly 2 percent from 2010 to 2017, remaining at 17 percent in 2018.³⁴ Thus, clients who are Hispanic are over-represented compared to the population make-up, and the increase in the population does not fully account for the observed increase.

Data collection on the self-identified races of clients has improved; the percentage of clients listed as *Unknown* dropped from 23 percent in 2005 to just 7 percent in 2018. Data system changes made in both 2008 and 2018 to improve race/ethnicity drop-down options may have contributed to the decrease (*Figure 8*).

Looking at trends between those years (for comparable data, 2009-2017), these data suggest that the proportion of clients identifying their race as Black/African-American remained nearly the same (26-28 percent). American Indian, Alaska Native, and Native Hawaiian clients also remained the same at 2 percent (*Figure 8*), however there was an increase in the Native American population in Illinois, whereby the American Indian population in Illinois doubled between 2010 and 2017, which is not reflected in clients who are receiving services from a DV agency.

Figure 8
Changes in Race of Domestic Violence Clients, 2009-2017

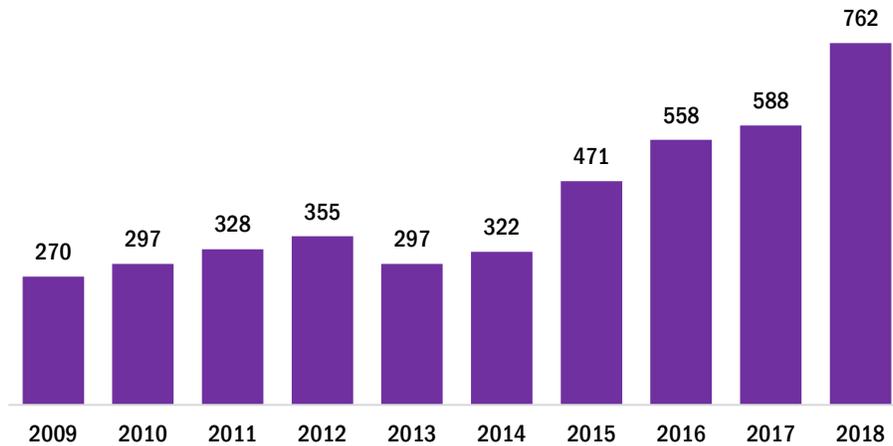


Source: ICJIA InfoNet, 134 DV agencies including satellite offices

Veteran Clients

There has been a marked increase in the number of DV clients who have veteran status (*Figure 9*). Looking back to 2009 after the veteran status data field was added, the numbers have increased steadily from 270 to 714 clients who identified as veterans in 2018. This increase may be due in part to U.S. veterans returning after 17 years of war in the Middle East and other regions.³⁵ The National Center for Veterans Analysis and Statistics project has noted an increase in the number of female veterans and a decrease of male veterans that they predict will continue over the next thirty years (+0.6% and -2.2%, respectively).³⁶ A recent study suggested the rate of domestic violence among women veterans is close to 29 percent (past-year incidence),³⁷ which is higher than that experienced by the general population of women (24 percent). Some researchers attributed the higher rate to elevated risk factors of pre-existing trauma and trauma sustained during military service.³⁸

Figure 9
Veteran Domestic Violence Clients Served in Illinois, 2009-2018



Source: ICJIA InfoNet, 134 DV agencies including satellite offices

Child Exposure to Domestic Violence

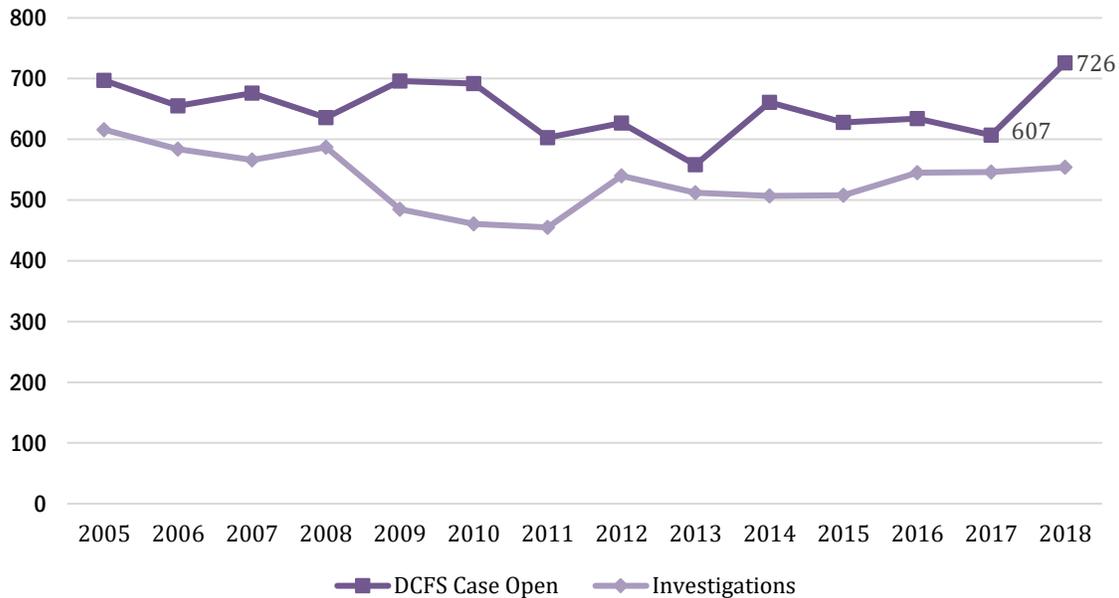
In 2018, adult DV clients reported having over 41,700 children, a 5-percent increase from the previous year, and that 8,661 of them received services from a domestic violence provider in Illinois.

In focus groups held during a 2016 Illinois victim needs assessment service providers raised concerns about offenders who use children in common (e.g., custody disputes in court, violence during shared custody exchanges) to continue to perpetrate violence.³⁹ According to Illinois statute, custody issues or “parental responsibility/decision-making, and parenting time”⁴⁰ are determined with consideration of multiple factors, including “the physical violence or threat of physical violence by the child’s parent directed against the child or other member of the child’s household.” While most victims who sought services from an Illinois DV agency had custody of their children (79 percent), in 2018 there was 20-percent increase in clients who shared joint custody with the offender. This may pose unique safety risks for the victim and their children as research indicates abusive partners perpetuated abuse against their partners by using their children, including continually discrediting and speaking poorly of the partner to the children, directing verbal abuse at the partner during custody exchanges, and teaching children to make abuse allegations against the victim/partner.⁴¹ While many court systems use formal evaluations to determine custody and assess allegations of DV, further work is needed to develop specialized DV tools and questionnaires.⁴²

InfoNet also collects information about the number of clients who have interactions with the Department of Children and Family Services (DFCS). Over the past 20 years, both the number of

DCFS investigations and open cases have fluctuated (*Figure 10*). However, after a few years of relative decline, InfoNet data showed a 20-percent increase in open DCFS client cases in 2018.

Figure 10
Clients Reporting DCFS Involvement



Source: ICJIA InfoNet, 134 DV agencies including satellite offices

More research is needed to determine whether more clients with open cases are seeking services, whether there has been a shift in DCFS investigation practices for domestic violence in the home, or whether or not there continues to be an increase in future years. Exploring what is driving this increase and how the characteristics of clients with an open case, including the types of violence experienced and custody status, differ from other clients with children would be of particular interest.

Conclusion and Implications for Practice and Research

Administrative data on DV offenses and orders of protection have shown a slight incline in the past few years. InfoNet data indicate an increase in clients seeking help for DV services, with specific increases for older adults, individuals who are Hispanic/Latinx, and veterans. Further analysis of these increases and characteristic trends over time within InfoNet illuminate recommendations for practice and research, which may require additional resources and training.

Explore Whether Funding Shifts Impact Service Availability and Who is Served

The number of DV clients obtaining services in 2018 increased by 6 percent, corresponding with a 266-percent increase in federal VOCA funding. Future exploration is needed to see how, if at all, funding shifts impacted who was served and types of services received. To better understand

victim need and service availability to inform funders, research is needed to understand how services for certain populations, such as adults and children or different race/ethnicity groups, have changed over time. Future research can examine victim help-seeking by comparing the characteristics of those who do not seek help to those who seek help from a DV service agency or those who report DV offenses to law enforcement to inform strategies to improve service awareness and access. Such research may illuminate barriers to help-seeking and inform how to better equip providers and strengthen pathways to support services.

Increase Capacity of Domestic Violence Providers to Meet the Needs of Older Victims

While victims aged 50 years or older comprised a small portion of those served in 2018, their numbers have gradually increased over time. Older adults often do not report or seek help, but their reasons for doing so may be more complex.⁴³ This may be due in part to fear of reporting a close family member or caregiver, or fear that reporting a caregiver will lead to a loss of independence or even their homes.⁴⁴ Adults over the age of 65 may be particularly vulnerable because of their decreased likelihood of reporting and the fact that they may be less likely to be believed due to others' perceptions of them as less competent.⁴⁵

To address the needs of older victims, service providers may require additional specialized training or collaboration with organizations that serve and advocate for the older population. Agencies serving older adults who may be potential trainers or collaborators can be found through [Illinois Department on Aging's Adult Protective Services Program](#), which is locally coordinated through [44 provider agencies](#). Additionally, given the barriers to help-seeking experienced by older adults, DV providers may also explore how awareness and outreach efforts might reduce stigma and fear among older adults of seeking help.

Fund and Increase Access to Culturally-Specific Services

In Illinois, both Hispanic/Latinx and Black clients were overrepresented among those who sought DV services compared to their representation in the general population. With an increasing number of Hispanic/Latinx clients seeking help, the need for culturally specific services is crucial. State and local organizations should consider ways to increase access to and adapt services to meet the specific needs of these victims. Funders may consider enhancing or supporting existing and new programs that can meet the needs of clients from different backgrounds and cultures. DV agencies may consider creating meaningful partnerships with organizations created by and for cultural communities at the local, state, and national levels to build stronger referral networks, develop collaborative projects, and identify cross-training opportunities.⁴⁶ Funders and providers should also ensure meaningful access by offering informational materials in Spanish and hiring bilingual and bicultural staff.

Equip Agencies to Respond to the Unique Needs of Veteran Clients

An increasing number of DV victims who are veterans have sought help from service agencies over the past decade. DV victims who are veterans may have unique needs given the past

exposure to trauma and close-knit group dynamics of military life. The potentially co-occurring relationships between DV and PTSD, substance use, traumatic brain injury, depression, and other negative health outcomes may require a service approach that accesses providers specialized in these related areas to best meet the needs of veteran clients.⁴⁷ Research on the needs of women veterans clients found that they preferred individual counseling centered on physical safety and coping with mental health symptoms.⁴⁸ Providers may explore partnerships with state and national organizations for training and other services to meet a range of veteran DV victims' needs.

Examine How the Needs and Experiences of Clients with Children May Differ

InfoNet data for 2018 revealed a 20-percent increase in clients who share child custody with their offender and 20-percent increase in DCFS involvement among DV clients with children in the last year. Research indicates clients who share custody with the offender may have unique safety risks; further work is needed to discover how the needs of these clients may differ and how their experiences of DV may impact custody and DCFS involvement in Illinois.⁴⁹ One area for further exploration is the Illinois court systems' use of formal evaluations to determine custody and assess allegations of DV. Future research can explore what types of tools are used to assess DV, the reliability and validity for the DV population, and how, if at all, these tools and questionnaires can be enhanced to be more attune to the dynamics of DV.⁵⁰ Indeed, research suggests that such evaluations or tools need to assess further the nuances of DV, including the types of abuse used, the prevalence and pattern of the abuse, and the primary perpetrator.⁵¹

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²⁵ Illinois Attorney General. (2019). *Advocating for women*. Retrieved from <http://www.illinoisattorneygeneral.gov/women/ordersofprotection.html>

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³⁰ These questions are best explored at the individual-level, which require additional approvals both from local providers, who are the sole owners of their data, and from our Institutional Review Board.

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⁴⁰ In 2016, the terms “custody” and “supervision” were replaced in Illinois statute with “parental responsibilities” and “parenting time.” See 750 ILCS 5/600

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