IL Annual State Performance Report

Victim Assistance Formula Grant Program

Reporting Period: [Oct 1, 2020 to Sept 30, 2021]

This aggregated data is self-reported by the grantees and subgrantees in each state/territory.

OVC VOCA Assistance Funds				
	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI
Federal Award Amount	\$128,771,417.00	\$86,235,200.00	\$63,167,824.00	\$38,824,602.00
Total Amount of Subawards	\$106,853,733.00	\$24,529,511.00	\$0.00	\$0.00
Total Number of Subawards	102	64	0	0
Administrative Funds Amount	\$0.00	\$0.00	\$0.00	\$0.00
Training Funds Amount	\$0.00	\$0.00	\$0.00	\$0.00
Balance Remaining	\$21,917,684.00	\$61,705,689.00	\$63,167,824.00	\$38,824,602.00

Subgrantee Organization Type The total number of subgrants represents all subgrants funded across all federal awards active during the reporting period. The number is not unique as there are subgrantee organizations that are continuously funded from each federal award.					
Type of Organization	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI	
Government Agencies Only	32	19	0	0	
Corrections	0	0	0	0	
Courts	4	1	0	0	
Juvenile Justice	0	0	0	0	
Law Enforcement	3	4	0	0	
Prosecutor	14	11	0	0	
Other	11	3	0	0	
Nonprofit Organization Only	69	44	0	0	
Child Abuse Service organization (e.g., child advocacy center)	16	11	0	0	
Coalition (e.g., state domestic violence or sexual assault coalition)	3	0	0	0	
Domestic and Family Violence Organization	10	8	0	0	
Faith-based Organization	2	1	0	0	
Organization Provides Domestic and Family Violence and Sexual Assault Services	5	1	0	0	
Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse)	2	3	0	0	
Sexual Assault Services organization (e.g., rape crisis center)	0	0	0	0	
Multiservice agency	14	9	0	0	
Other	17	11	0	0	

Page 1 of 11 Last Modified Date: 12/30/2021

Federally Recognized Tribal Governments, Agencies, and Organizations Only	1	0	0	0
Child Abuse Service organization (e.g., child advocacy center)	0	0	0	0
Court	0	0	0	0
Domestic and Family Violence organization	1	0	0	0
Faith-based organization	0	0	0	0
Juvenile justice	0	0	0	0
Law Enforcement	0	0	0	0
Organization provides domestic and family violence and sexual assault services	0	0	0	0
Prosecutor	0	0	0	0
Sexual Assault Services organization (e.g., rape crisis center)	0	0	0	0
Other justice-based agency	0	0	0	0
Other agency that is NOT justice-based (e.g., human services, health, education)	0	0	0	0
Organization by and/or for a specific traditionally underserved community	0	0	0	0
Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse)	0	0	0	0
Other	0	0	0	0
Campus Organizations Only	0	1	0	0
Campus-based victims services	0	0	0	0
Law enforcement	0	0	0	0
Physical or mental health service program	0	0	0	0
Other	0	1	0	0
Total Number of Subawards	102	64	0	0

^{*}This number is not unique across fiscal years as there are subgrantee organizations that are funded from multiple federal awards.

Subaward Purpose A single SAR can select multiple purposes. Numbers are no	t unique			
	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI
A. Continue a VOCA-funded victim project funded in a previous year	77	35	0	0
B. Expand or enhance an existing project not funded by VOCA in the previous year	6	16	0	0
C. Start up a new victim services project	19	16	0	0
D. Start up a new Native American victim services project	0	0	0	0
E. Expand or enhance an existing Native American project	0	0	0	0

Page 2 of 11 Last Modified Date: 12/30/2021

VOCA and Match Funds A single SAR can select multiple service types. Numbers are not unique						
	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI		
A.INFORMATION & REFERRAL	83	62	0	0		
B.PERSONAL ADVOCACY/ACCOMPANIMENT	77	60	0	0		
C.EMOTIONAL SUPPORT OR SAFETY SERVICES	71	58	0	0		
D.SHELTER/HOUSING SERVICES	51	36	0	0		
E.CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE	78	47	0	0		
F. ASSISTANCE IN FILING COMPENSATION CLAIMS	96	64	0	0		

Priority and Underserved R	equirements			
Priority Area	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI
Child Abuse				
Total Amount	\$18,705,021.00	\$4,699,475.00	\$0.00	\$0.00
% of Total Federal Award	15.00 %	5.00 %		
Domestic and Family Violen	ce			
Total Amount	\$46,728,069.00	\$7,567,723.00	\$0.00	\$0.00
% of Total Federal Award	36.00 %	9.00 %		
Sexual Assault				
Total Amount	\$24,066,026.00	\$3,063,079.00	\$0.00	\$0.00
% of Total Federal Award	19.00 %	4.00 %		
Underserved				
Total Amount	\$17,323,923.00	\$9,198,234.00	\$0.00	\$0.00
% of Total Federal Award	13.00 %	11.00 %		

Budget and Staffing				
Staffing Information	2018-V2-GX-0070	2019-V2-GX-0024	2020-V2-GX-0017	2021-15POVC-21-GG-00624-ASSI
Total number of paid staff for all subgrantee victimization program and/or services	2162	904		
Number of staff hours funded through this VOCA award (plus match) for subgrantee's victimization programs and/or services	2395247	1048918		
Total number of volunteer staff supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services	4900	1151		
Number of volunteer hours supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services	304036	85149		

Page 3 of 11 Last Modified Date: 12/30/2021

AGGREGATED SUBGRANTEE PERFORMANCE MEASURE DATA

Victimization Type							
	Number of Subgrantees	Number of Individuals Who Actually Received Services Based on a Presenting Victimization					
Victimization Type	Indicating Intent to Serve This Victim Type	Quarter 1 Total	Quarter 2 Total	Quarter 3 Total	Quarter 4 Total	Per Quarter Average	
Adult Physical Assault (includes Aggravated and Simple Assault)	1	4388	3921	4007	3445	3940	
Adult Sexual Assault	73	5142	4331	4746	4353	4643	
Adults Sexually Abused/Assaulted as Children	51	1263	1336	1458	1372	1357	
Arson	43	134	87	42	68	82	
Bullying (Verbal, Cyber or Physical)	64	428	285	419	563	423	
Burglary	49	1011	1115	778	667	892	
Child Physical Abuse or Neglect	2	6197	5036	5880	5854	5741	
Child Pornography	41	281	149	197	161	197	
Child Sexual Abuse/Assault	1	9920	9983	11356	11082	10585	
Domestic and/or Family Violence	16	24922	24522	25761	25961	25291	
DUI/DWI Incidents	1	706	724	858	751	759	
Elder Abuse or Neglect	42	156	156	245	259	204	
Hate Crime: Racial/Religious/Gender/ Sexual Orientation/Other (Explanation Required)	48	127	98	107	121	113	
Human Trafficking: Labor	45	37	19	24	32	28	
Human Trafficking: Sex	58	57	142	155	62	104	
Identity Theft/Fraud/Financial Crime	40	683	634	442	357	529	
Kidnapping (non-custodial)	39	84	84	63	75	76	
Kidnapping (custodial)	40	136	34	83	26	69	
Mass Violence (Domestic/International)	30	30	15	32	48	31	
Other Vehicular Victimization (e.g., Hit and Run)	41	575	317	378	412	420	
Robbery	53	952	1089	903	1062	1001	
Stalking/Harassment	66	5789	5643	6157	5976	5891	
Survivors of Homicide Victims	2	1949	1765	2230	2446	2097	
Teen Dating Victimization	49	43	53	50	67	53	
Terrorism (Domestic/International)	22	5	2	3	4	3	
Other	20	5749	4677	6658	6159	5810	

Special Classifications of Individuals						
	Number of Individuals Self Reporting a Special Classification					
Special Classifications of Individuals	Quarter 1 Total	Quarter 2 Total	Quarter 3 Total	Quarter 4 Total	Per Quarter Average	
Deaf/Hard of Hearing	174	177	180	191	749	

Page 4 of 11 Last Modified Date: 12/30/2021

Homeless	663	617	697	650	2059
Immigrants/Refugees/Asylum Seekers	987	1253	1203	1098	3852
LGBTQ	1117	1207	1338	1295	3920
Veterans	227	258	271	312	970
Victims with Disabilities: Cognitive/ Physical /Mental	1778	1600	1854	1923	8462
Victims with Limited English Proficiency	3607	4077	4014	3640	16250
Other	25	16	253	241	1098

General Award Information		
Activities Conducted at the Subgrantee Level	Number	Percent
Total number of individuals who received services during the Fiscal Year.	222558	
Total number of anonymous contacts who received services during the Fiscal Year	6905	
Number of new individuals who received services from your state for the first time during the Fiscal Year.	114417	51.41 %
Of the clients who received services, how many presented with more than one type of victimization during the Fiscal Year?	43727	19.65 %
Number of individuals assisted with a victim compensation application during the Fiscal Year.	40005	

Demographics		
Demographic Characteristic of New Individuals Served	Number	Percent
Race/Ethinicity		
American Indian or Alaska Native	413	0.36 %
Asian	1639	1.43 %
Black or African American	28768	25.14 %
Hispanic or Latino	20402	17.83 %
Native Hawaiian or Other Pacific Islander	228	0.20 %
White Non-Latino or Caucasian	43746	38.23 %
Some Other Race	356	0.31 %
Multiple Races	2286	2.00 %
Not Reported	14911	13.03 %
Not Tracked	1668	1.46 %
Race/Ethnicity Total	114417	
Gender Identity		
Male	21859	19.10 %
Female	81717	71.42 %
Other	426	0.37 %
Not Reported	9079	7.94 %
Not Tracked	1336	1.17 %
Gender Total	114417	
Age		
Age 0- 12	17840	15.59 %
Age 13- 17	10097	8.82 %
Age 18- 24	11124	9.72 %

Page 5 of 11 Last Modified Date: 12/30/2021

Age 25- 59	55151	48.20 %
Age 60 and Older	5117	4.47 %
Not Reported	13681	11.96 %
Not Tracked	1407	1.23 %
Age Total	114417	

Service Area	# of Subgrantees That Provided Services in This	# of Individuals/Contacts Receiving Services	Specific Service	Frequency of Service
A. Information & Referral	Category 120	100054	Enter the number of times services were	
			provided in each subcategory. A1. Information about the criminal justice	
			process	10388
			A2. Information about victim rights, how to obtain notifications, etc.	8011
			A3. Referral to other victim service programs	2292
			A4. Referral to other services, supports, and resources (includes legal, medical, faith-based organizations, address confidentiality programs, etc.)	3192
B. Personal Advocacy/ Accompaniment	111	87852	Enter the number of times services were provided in each subcategory.	
			B1. Victim advocacy/accompaniment to emergency medical care	622
			B2. Victim advocacy/accompaniment to medical forensic exam	112
			B3. Law enforcement interview advocacy/accompaniment	345
			B4. Individual advocacy (e.g., assistance in applying for public benefits, return of personal property or effects)	21039
			B5. Performance of medical or nonmedical forensic exam or interview or medical evidence collection	549
			B6. Immigration assistance (e.g., special visas, continued presence application, and other immigration relief)	100
			B7. Intervention with employer, creditor, landlord, or academic institution	2816
			B8. Child or dependent care assistance (includes coordination of services)	422
			B9. Transportation assistance (includes coordination of services)	1432
			B10. Interpreter services	492
			Enter the number of times services were provided in each subcategory.	
			C1. Crisis intervention (in-person, includes safety planning, etc.)	4905
			C2. Hotline/crisis line counseling	11930
C. Emotional Support or Safety	109	80636	C3. On-scene crisis response (e.g., community crisis response)	161

Services			C4. Individual counseling	186795
			C5. Support groups (facilitated or peer)	30334
			C6. Other Therapy (traditional, cultural, or alternative healing; art, writing, or play therapy, etc.)	22070
			C7. Emergency financial assistance	1604
	71	3419	Enter the number of times services were provided in each subcategory.	0
D. Shelter/ Housing			D1. Emergency shelter or safe house	2650
Services			D2. Transitional housing	10701
			D3. Relocation assistance (includes assistance with obtaining housing)	2289
	96	103483	Enter the number of times services were provided in each subcategory.	0
			E1. Notification of criminal justice events	74082
			E2. Victim impact statement assistance	2219
			E3. Assistance with restitution	2453
			E4. Civil legal assistance in obtaining protection or restraining order	10871
E. Criminal/Civil Justice System			E5. Civil legal assistance with family law issues	32094
Assistance			E6. Other emergency justice-related assistance	45591
			E7. Immigration assistance	4942
			E8. Prosecution interview advocacy/accompaniment	9733
			E9. Law enforcement interview advocacy/accompaniment	3750
			E10. Criminal advocacy/accompaniment	64676
			E11. Other legal advice and/or counsel	6098

ANNUAL QUESTIONS

Grantee Annually Reported Questions				
Question/Option	Count			
Were any administrative and training funds used during the reporting period?				
Yes	1			
No	0			
Did the administrative funds support any education activities during the reporting period?				
Yes	0			
No	1			
Number of requests received for education activities during the reporting period.	0			
Number of people trained or attending education events during the reporting period.	0			
Number of events conducted during the reporting period.	0			
Did the grant support any coordination activities (e.g., with other service providers, law enforcement agencies) during period?	the reporting			
Yes	0			
No	1			

Page 7 of 11 Last Modified Date: 12/30/2021

Describe any program or educational materials developed during the reporting period.

N/A

Describe any planning or training events held during the reporting period.

The statewide VOCA conference was convened on July 14-15, 2021. The conference had 395 registrants and offered 44 breakout and 2 keynote sessions. Sessions focused on trauma informed care, underserved populations, unmet needs, and VOCA grant technical assistance. Sessions were well attended and the feedback for each session and the conference overall was very positive. In addition, we created an intensive 6-day Equity Institute for small cohorts that challenges participants to address victim resource inequities and barriers to accessing existing resources. The July and August cohorts were completed during this reporting period. The work of the OVC Vicarious Trauma Toolkit Cohort came to an end with a final convening and TA sessions to guide participants in their action plans to address vicarious trauma. Finding of the cohort were presented at two national conference; The National Center for Victims of Crime, 2021 National Training Institute, and the 2021 Virtual VOCA Assistance and Compensation Conference. All training was funded with OVC VOCA Discretionary Training Grant funds. No VOCA Victim Assistance funds were used.

Describe any program policies changed during the reporting period.

N/A

Describe any earned media coverage events/episodes during the reporting period.

N/A

Describe any coordinated responses/services for assisting crime victims during the reporting period.

N/A

Please discuss the major issues in your state that either assist or prevent victims from receiving assistance during the reporting period.

Major issues that prevent victims from receiving assistance during the reporting period include the following: Pandemic barriers include: Domestic violence agencies were closed and/or operating at limited capacity. Domestic violence and homeless shelters were required to impose social distancing restrictions, which reduced the number of available shelter beds; making it more difficult for victims to flee abusive relationships. Many hearings were done via Zoom, which created a problem for victims who did not have technology or access to technology. When the courthouses reopened, there was limited seating, and judges/attorneys were out sick due to COVID. Victims felt overwhelmed because they found themselves trying to balance the ramifications and consequences of what the pandemic created. For example, losing employment, working from home, remote learning for their children, and being financially unstable. Some services stopped for a period of time. These services included psychiatric evaluations, random drug testing, group therapy, mental health counseling, and housing assistance. Psychiatric and intensive mental health support for crime victims continues to be visibly absent. Other barriers during the grant period include: Many victims of violence required assistance with relocating to a safe geographic area as well as long-term stable housing. Unexpected expenses and barriers in the relocation process have increased. There are limited social service programs and housing opportunities available to these individuals, and some requirements disgualify individuals victims of crime. Grantees also reported increased mental health needs for the communities they serve. Many reported difficulty in meeting the increased demand for mental health services, which caused a long wait time for clients to receive services. Uncooperative families continue to be a challenge (i.e. not wanting children interviewed or seek counseling). The limitations of state and federal funding have posed challenges for victims to gain access to resources needed for food stability and prescription medications. Victims are limited to \$28 per day for one-time emergency food resources. An increase in the number of children being served over the last 3 years has forced a reduction in hours spent per child; which has reduced the quality of services provided. This increase, in some areas, ranges from 60% to 100%. Accessing pro bono attorneys is a struggle due to waiting lists and/or law firms not providing pro bono attorneys. The amount of pending cases within the State's Attorney Offices that are over a year old has risen dramatically. High turnover rates at agencies resulted in constant training, which created less qualified therapists to assist victims. When added to a hiring freeze, this created a shortage of qualified therapists, social workers, and counselors. Fear of police interactions are an issue for many black and brown communities. Systems to support victims, need to have more comprehensive supports instead of relying solely on police. Police do not have the proper training to support victims and can often further victimize or traumatize victims.

Please describe ways that your agency promoted the coordination of public and private efforts within the community to help crime victims during the reporting period.

Presentations and meetings with multi-disciplinary teams that were postponed, are now conducted via Zoom to ensure services to victims did not cease. Staff participated on a Sexual Assault Response Team (SART3). This team is working to streamline how sexual assault cases are handled in a variety of facets; schools, hospitals, police departments, local sexual assault counseling agencies, and court. Staff regularly participate on an elderly abuse multi-disciplinary team, collaborating with local Adult Protection Services (APS) to best address the needs of the elderly. Trauma Outreach Workers (TOWs) have been attending the Peace Academy through CP4P for training in trauma response and patient outreach skills. There are participants from various street outreach and violence intervention programs who attend Peace Academy, allowing programmatic team members to build relationships with representatives from various agencies serving the patient population. Grantee is a member of the Chicago Coalition for the Homeless; a youth homelessness task force, where they work together to address city and state policy, funding and other agenda items to reduce the harm and victimization experienced by young people in Chicago. The mission of this committee is to help the system be more expeditious in their response to connecting homeless young people to housing. This minimizes the intrusiveness of data collection, and matching needs to support services to youth. Grantees received training in trauma informed responses to youth impacted by violence. Handle with Care procedures were implemented, which involves formal collaborations between law enforcement and schools in order to connect youth to needed services in the community. Grantees have been working to build collaborative relationships with violence prevention and intervention programs, as well as organizations that serve individuals and communities impacted by violence. For example, a grantee s team strengthened their relationship with Chicago CRED for technical assistance and partnered with their clinical teams to train the Trauma Outreach Workers in Cognitive Behavioral Intervention protocol. This intervention is based on Cognitive Behavioral Therapy designed to be provided by paraprofessionals focusing on trauma specific services. A grantee created Choose Your Adventure: This program offers clients paid internships and structured work experience to improve their chances of securing permanent sustainable work upon completion. A grantee Advertised on

Page 8 of 11 Last Modified Date: 12/30/2021

Facebook via Facebook Contact Pages to increase outreach. Agencies advertised for the Blue Kids Campaign during April (child abuse prevention month), to help raise money for services. Grantees worked with Green Family Stores, Springfield Eastside Pride and News Channel 20 for Coats for Kids. A grantee formed a partnership with Global Gardens to provide fresh and nutritious food options to victims, their families, and the community. Provided prevention programs (P.S. Happy Bear and P.S. It s My Body) to school aged children either in person or virtually. Staff are a members of the Association of Police Social Services (APSS) aimed at the betterment of social services and resources for all clients. Staff worked with area police department to integrate Family Liaison Officers (detectives working with homicide survivors) into program staff s bi-monthly homicide roll calls. The unit director and unit managers worked with key personnel from suburban children s advocacy centers to develop a monthly suburban sexual assault roll call. Grantees continue to work with service providers both internally in their hospital system and externally in the community to build relationships and partnerships.

Please describe any notable activities at the grantee level during the reporting period that improved delivery of victim services.

DV prosecutors created a best-practice guide for handling intimate partner violence cases. Prosecutors worked with local service providers to compile a list of resources for victims of intimate partner violence. Police departments give copies of this list to victims when responding to a domestic situation. Victim Witness Managers networked with a UIC professor who developed a comprehensive, geographically based referral list. The professor made this list available to the unit, and specialists have provided referrals to victims using the list. There was an increased number of patients referred to the grantee during hospitalization for both inpatient and outpatient. This follow up uses a trigger list in the electronic medical system, which allows care management and social workers to alert the grantee team to patients who meet service criteria. Grantees created and implemented an educational advocacy program to address the disproportionate number of children their program serves who were adversely affected educationally. Through this program, staff and volunteers ensured children received the services listed in their IEP/504 plans, attended and participated in their classes, and had the necessary school supplies to thrive in school. A grantee developed an evaluation form to ensure that each attorney is providing the same level of investigation for all referrals/applications. The attorney s form includes a review of a criminal background check of the abuser, a review of any previous orders of protection filed against the abuser, sources of evidence, and determination if the applicant was or is a client of the grantee. This process helped ensure that every application is processed in a consistent manner and serves as a check against implicit bias in the screening process. Conducting online tele-therapy helped bring services to clients who live in rural areas that do not have access to transportation, disabilities that prevent them from leaving the home, or childcare issues. One grantee s website provides survivors with access to important information about the grantee including services and contact information. Since domestic violence victims may need to exit the site quickly, the grantee has added a Safety Exit button that appears on every page. In the event that the victim's abuser enters the room, the victim can easily click the button on the page and will immediately be routed to the Weather Channel website. Grantees have either purchased or upgraded their computer software to track clients, report on demographics, identify services needed (i.e. counseling) and the services clients are currently utilizing. Families were provided PPE supplies with the intention of increasing the safety for families to prevent catching COVID. Increase in funding for underserved victims has provided agencies with the resources to help limited English proficiency speaking victims, LGBTQ community, and victims in rural areas where services are scarce. Many grantees have hired Community Outreach Coordinators to help connect grantees to their community. Volunteers that work at some agencies have provided after school, tutoring support and/or childcare for parents who are in a therapy session or court. Employees underwent relaxation/coping skills training that are appropriate for children that come from different cultures. Forensic Interviewers (FI) participated in a 3-day Child Sex Trafficking Forensic Interview Training, to better equip them on interviewing children who are suspected of being trafficked. FI s also participated in the Krimes Against Kids conference to learn about Child Sex Trafficking, Sextortion, and Forensic Interviewing. Grantee attended the NOVA Crisis Response Team Training (CRT) for 3 days to allow team members to become trained and certified in the NOVA Crisis Response model. Grantee attended the 2 day International Grief Summit. This training included multiple presentations from a variety of providers within the trauma and grief research and mental health profession. This included the following presentations: Compassion Fatigue: Prevention for Professionals Who Work with Grief and Trauma; Traumatic Grief: Cognitive, Behavioral and Somatic Approaches; Reach Across Divides: Cultural & Difference Focused Practices in Grief Work. One program has grown to provide hospital-based coverage with outreach workers in addition to continuing seven-day-a-week behavioral health coverage. Expanding the hospital-based services to include outreach workers has increased their capacity to meet with individuals during their hospitalization. VOCA funds allowed grantees with increased program capacity to reach more individuals through case management and mental health supports. Funds support the development and quality of services provided, increase cross-system collaboration with partnering organizations, and added accessible civil legal services for the community they serve.

Please discuss each priority (i.e., child abuse, domestic assault, sexual assault, and underserved) in which VOCA funds have been used to assist crime victims during the reporting period

Child Abuse: P (3 y/o) was referred to the grantee due to P s mother walking in on P s father masturbating in front of P. During the intake, it was discovered that this incident had occurred more than once. Ps mother disclosed that she was a victim of DV; and she has tried to leave the relationship, but her partner has threatened to disclose her immigration status. P s mother reported that she has a 12 y/o son diagnosed with ADHD and presenting Autism symptoms whom she believes P s father is grooming to engage in aggressive behaviors. The grantee has met with P, her mother, and brother for clinical services both in English and Spanish. The grantee team has been working with P s mother in providing her a safe space to discuss her needs and process her experience of being in an abusive relationship. The grantee has been working with the children to provide a safe space in order to process their trauma, explore safe and healthy boundaries, and practice expressing emotions safely. Domestic Assault/Violence: R was married to her first husband for six years. Early on, he became abusive and the abuse escalated over the years. With the support of her family and friends. R ended the relationship and moved on. Her ex-husband did not go easily, but his contact and attempts to harass R faded. R married several years later. When her ex-husband learned of this, he restarted the harassment. She filed an Order of Protection, but her ex was never served, as he was able to dodge the service. Several months into the new marriage, R was the last to leave work, where her ex entered the business, beat her, shot her in the head, and stole her wedding ring. R survived the shooting; but her ex fled the state. Later he was located and brought back to be prosecuted. After surgery, R returned to the agency to receive services, including legal advocacy. The agency helped R file a Crime Victim's Compensation claim and was able to replace her ring. She received help and support in filing for disability and the criminal prosecution of her ex. Sexual Assault: C, a sexual assault survivor, had to overcome several victim blaming scenarios and stereotypes. The defense attorneys used everything they could to shift the focus from the illegal activities of their client, to any small action that the C should have done differently to deter the assault. C has held her head high and worked with prosecutors to educate people on rape culture and the way society promotes and encourages victim blaming in sexual assault. C paved the way to debunk myths and stereotypes of what a victim should do; all to bring her perpetrators to justice. Trauma Recovery Center: Z is a 6-year-old Black girl who was referred to the TRC due to surviving child sexual assault. Z was reported endorsing sexual problem behaviors, fighting with her brothers, and having trouble concentrating and staving on tasks at home and school. Z has attended 10 sessions and has worked on communicating needs effectively, avoiding

Page 9 of 11 Last Modified Date: 12/30/2021

conflict, and decreasing sexual problem behaviors. Z s sexual behaviors have decreased and no longer appear to be a concern. She has engaged in less fights with her brothers. She has been able to share her trauma with her mother in therapy. As agreed with both Z and her mother, Z will continue to work on safety-planning, managing anger, and processing trauma before continuing therapy with another therapist. Sessions have consisted of check-ins with her mother, which helped her mother incorporate behavioral interventions to reward positive behavior and punish negative behavior. Underserved Populations: H was a client with diminished capacity and impaired vision, who was the victim of financial exploitation and physical neglect by a caregiver. The caregiver drained over \$100,000 from H s resources, and then arranged for a reverse mortgage. When H s son discovered the theft, he petitioned to become H s guardian. The fraud/theft was investigated by Adult Protective Services. The grantee came into the probate guardianship case to pursue the thief on a Citation to Recover Assets. After years of litigation and discovery, it went to trial. On the third day of trial, the court persuaded the parties to settle, with the defendant paying \$1,000/month. But this didn t resolve the foreclosure. The grantee asserted the defense that the mortgage was void for undue influence and lack of capacity of the borrower. The lender litigated the foreclosure, filing two separate motions for summary judgment contending that the adjudication of incapacity was a year after the loan closing. H s doctor s provided notes that indicated H was incapacitated years prior to the loan. H passed away during the foreclosure litigation but, the grantee continued the case on behalf of her son. They finally resolved the foreclosure with the client s son paying a nominal amount in exchange for the release of a claimed \$167,000 mortgage lien.

Please briefly describe efforts taken to serve Victims of Federal crime during the reporting period.

Agencies have provided extensive trainings to identify human trafficking. Because of these trainings, three calls were made regarding the discovery of human trafficking. Prior to the training, there had been no calls. With more emphasis on human trafficking, many agencies entered MOU s with federal agencies. For example, each of the Child Advocacy Centers (CAC s) have signed MOU s with the FBI and Homeland Security to coordinate services for child victims. These partnerships allow grantees and the FBI to provide services to human trafficked victims beginning at the time they are removed from the trafficking situation. This ensures that if a victim is brought to the hospital, victims are treated and seen by team members which allows for a safe and private space for the FBI Victim Specialists to meet with the victim and coordinate ongoing coordination of care.

Please identify any emerging issues or notable trends affecting crime victim services in your state during the reporting period.

More male transgender victims have come forward seeking services. Recent anti-Asian crimes have affected communities negatively. Clients feel unsafe and terrified and do not know what to do if they become a victim or witness. As the only comprehensive DV/SA organization in Illinois that specializes in serving the Asian population, especially Asian immigrant survivors and victims, they receive calls from other states concerning this serious threat. There has been an increase of undocumented crime victims; however, these individuals are ineligible for different types of relief. COVID has increased the emotional, financial and psychological strain placed on families, especially in the African American and Hispanic communities. The Illinois State legislature passed a series of bills aimed at criminal justice reform. Two key pieces of legislation – one directed at bond reform and the other aimed at prison sentence relief – foretell profound consequence to victims and victim service. The impact of these bills in combination with existing victims rights legislation will require increased notification to victims. The state and national shortage of counselors has slowed the process of finding victims services in a timely fashion. A significant number of child victims under 3 y/o are yet to successfully reengage in Early Intervention (EI) services because they were too young to sit through telehealth sessions. Older child victims were not receiving their ancillary services during the school day due to remote learning and/or constant changes to hybrid and in-person school schedules. Difficulty finding employment has continued to be a barrier for victims. Finding employment resources when a victim has physical pain or limited mobility from trauma has been an ongoing challenge. Many of the employment resources available through community partners and social service organizations are jobs that are very physically involved. One grantee continues to have trouble identifying resources to assist individuals who are uninsured or underinsured with ongoing medical needs following index crime, including access to prescription medication or physical/occupational therapy services. This barrier extends to individuals who are not physically able to work due to injuries sustained during the index crime but, do not qualify for disability benefits. Many victims require continued access to behavioral health services, which include therapy and psychiatry services. Many individuals do not have quality insurance plans, and the wait times are long, impacting discharge from services and gaps in psychiatric medications. As judges and police officers are continuously appointed or hired, many do not understand DV s best practices, creating the need for continuous training, and increasing the risk of revictimization of victims. More families and/or victims are suffering from multi-victimization, especially family members that have experienced multiple family deaths due to homicide. Financial instability and limited financial resources available through grant funds or community resources continue to be barrier to meeting patient needs. Financial instability is a barrier to many domains of social needs. This includes housing (lack of affordable housing within Chicago city limits), transportation, food stability, and access to household and personal needs. With social distancing requiring many to stay in one place and heavily rely on technology, victims are at an elevated risk of technology abuse. Abusers often control and track victims phones and computers. Abusers may control online interactions to limit victims access to the outside world. Abusers can also access smart devices and manipulate victims homes from anywhere. There are more cases involving cyberstalking and cyberbullying. As people spend more time communicating digitality due to stay at home orders, these cyber methods became more common. Youth speak frequently about balancing boredom, anxiety about school and grades, illnesses, social isolation, and depression. As COVID restrictions lift, it is apparent that many clients and their families have been navigating the pandemic in crisis. The residual effects of isolation, grief and loss due to the pandemic/community violence, toxic home environments (i.e. poor living conditions, domestic violence) are emerging. Some areas have seen an increase in the amount of violent crime. One such area is the City of Peoria, where violence has continued to escalate with a significant increase of shootings and homicides. Gun violence has been on the rise with as many as three shootings per week. As of April 2021, the city was ranked as the 15th deadliest U.S. city and the 22nd most dangerous in the U.S., which is quite alarming given the sizes/populations of the other cities ranked near Peoria on these lists.

Please briefly outline any staffing retention issues that your victim assistance program has and why these issues may occur during the reporting period.

Page 10 of 11 Last Modified Date: 12/30/2021

Due to the pandemic, many barriers were encountered in staff retention, these include the following: Lack of technology to enable employees to work remotely. Growing pains of an expanded team and services during the pandemic forced staff into new roles during. Transitioning to in-person work came with learning and navigating new skills and challenges where additional support and supervision is needed. Employees not being allowed time for self-care has led to an increase in stress and burnout. This is an indicator for staff turnover. Staffing retention issues that are not (directly) related to pandemic, include the following: All grantees reported staffing issues such as turnover and difficulty with hiring and onboarding. These transitions always leave a gap with limited capacity to meet the needs of participants which results into an unbalanced workload for remaining staff. During the end of the current funding period, grantees reported department staff have experienced personal or familial hardships. With limited staff capacity for implementing the preferred quality of services for participants, lower salaries, 34% decrease in fringe benefits, intensity of the work and responsibilities, many staff have left for the private sector. Lack of applicants and qualified applicants for required job description. For example, in operating a 24-hour program, the biggest need is for PT staff who are willing to work weekends and evenings. This makes recruiting and hiring diverse team members who are members of the victims population and passionate about providing trauma-informed services more difficult than before.

Please explain your state process to publicize its victim assistance funding for services to victims of crime during the reporting period.

A state law for the creation and publication of grant funding opportunities was initiated in Illinois in 2014. The Grant Accountability and Transparency Act (GATA) provides for a centralized and systematized grant application process. All VOCA funds have been designated through either a competitive process as per GATA. Funding opportunities will be announced through a GATA Notice of Funding Opportunity which will be made public, along with an announcement, on the agency website. Funded programs will still be listed on the website. As of October 1, 2021, twelve VOCA programs were administered via the GATA process and nearly 180 new grant programs were implemented throughout Illinois with VOCA funds.

Please explain how your state is able to direct funding to new/underserved populations during the reporting period.

The ICJIA Ad Hoc Victim Services Committee, comprised of criminal justice and victim services professionals and members of the community, met in January 2017 to review crime and victimization trend data, information on current efforts, and data from funded programs. Participants included the executive directors of the major statewide victim service associations, including the coalitions against domestic violence and sexual assault, and individual agencies representing underserved communities, such as Mujeres Latinas en Accion, Arab American Family Services, and the Center on Halsted, a gay/lesbian/bi/transgender organization. The 12 priorities recommended for funding included: Promote Awareness and Access. Fund initiatives that raise public awareness of victim services. Increase funding for advocates and social workers within a variety of organizations to increase victim access to immediate services. Increase funding of services for underserved victims of crime. Address Core Needs. Increase funding to address fundamental needs of crime victims. Fund core direct services to victims of all crime types. Provide victim-centered and trauma-informed services. Encourage development and expansion of programs that address the impact of multiple victimization experiences. Promote multidisciplinary responses to victimization. Encourage trauma-informed and trauma-focused services for victims of crime. Fill Key Gaps Fund services that address long-term victim needs, such as counseling and mental health services. Support Programs that specifically address needs of individuals exposed to community violence. Implementation, Outcomes, Sustainability. Encourage the use of evidence-informed (or promising) and evidence-based practices and programming. Fund activities that encourage data collection and reporting, document victim outcomes, facilitate program evaluation, and increase knowledge of victimization and service provision in Illinois. With these priorities as guidance, program funding opportunities were developed and published. Targeted underserved populations through these funding opportunities have included underserved geographical areas of the state, including urban and rural areas, as well as victim populations, such as vulnerable populations, young men of color, and victims with mental health or substance abuse issues. The planning process for the 2022 Victim Services Planning Committee has begun, and the date of the meetings is now set for January 27, 2022.

Please explain how your program is able to respond to gaps in services during the reporting period.

Fund planning continues throughout the year in meetings of the ICJIA Victim Services Ad Hoc Committee, Budget Committee, and meetings with individual subgrantees. At the last ICJIA Victim Services Ad Hoc Committee meeting, participants were presented with information and data concerning gaps in service. The two priorities recommended concerning gaps in services included: Fund services that address long-term victim needs, such as counseling and mental health services. Support programs that specifically address needs of individuals exposed to community violence. The recommendation made by the Victim Services Ad Hoc Committee was applied in funding recommendations made by staff to the ICJIA Budget Committee. To address these gaps all VOCA-funded programs were encouraged to increase counseling services and mental health services. In December 2020, a Multi Victimization program was implemented through VOCA with 32 sites selected serving victims throughout the state. This program addresses victims of multiple victimizations through one program, either at one on-site program, or through partnerships. Partnership programs are mandated to include case coordinators and provide soft hand offs for all referrals. These programs follow an evidence-based trauma recovery model.

Please list and explain any outcome measure(s) that are reported to the governor, legislature, or other state entity during the reporting period.

N/A

Page 11 of 11 Last Modified Date: 12/30/2021