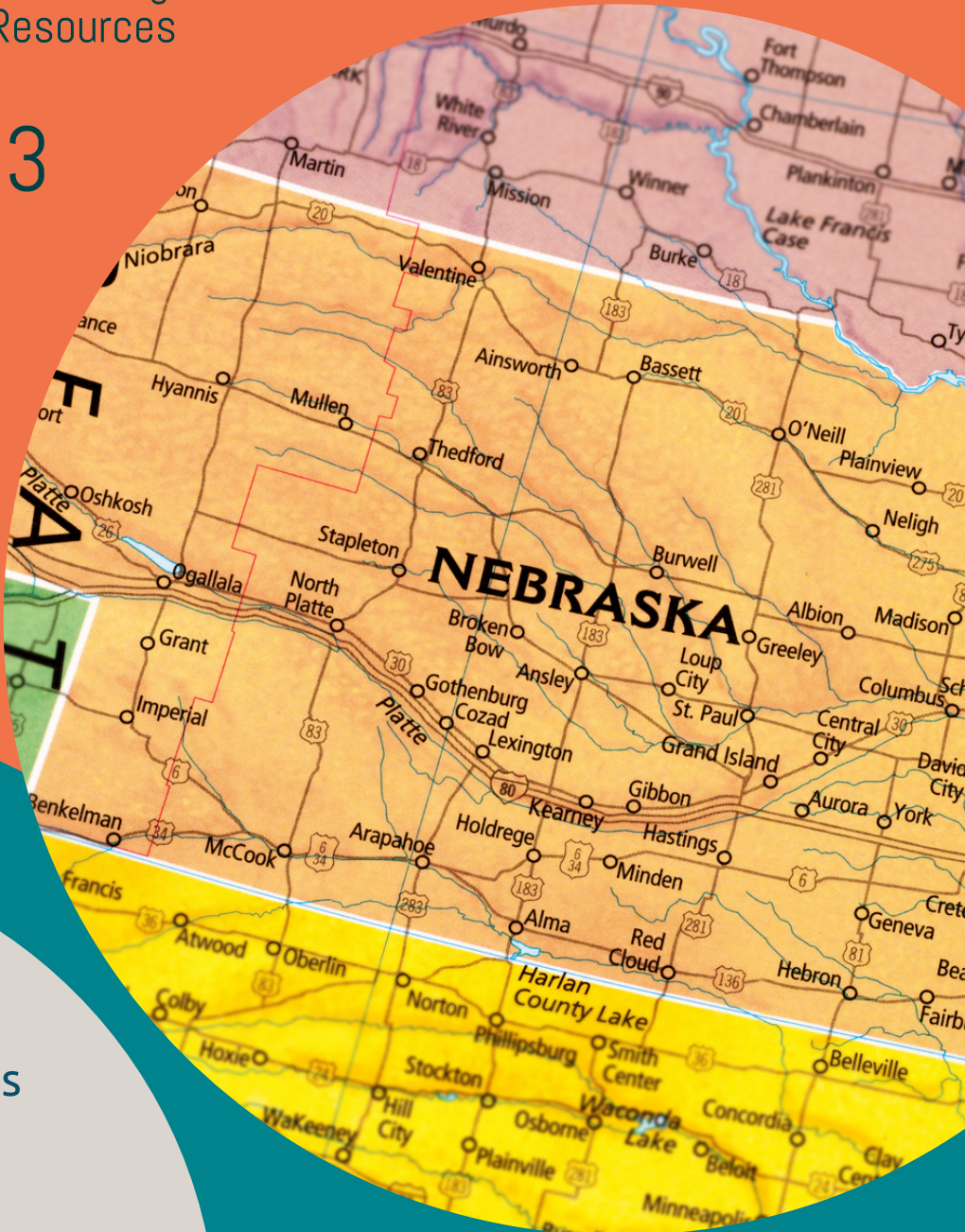


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Nebraska's Intimate Partner & Sexual Violence Response Community

A Needs Assessment Concerning Allocation of American Rescue Plan Resources

June 2023



Commissioned by



NEBRASKA COALITION
TO END SEXUAL AND DOMESTIC VIOLENCE

Developed by



hti labs

Suggested citation:

HTI Labs. (2023). Nebraska's Intimate Partner & Sexual Violence Response Community: A Needs Assessment Concerning Allocation of American Rescue Plan Resources. htilabs.org

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This project was supported by grant log No. ACF-PI-FVPSA-21-02 and ACF-PI-FVPSA-21-03 awarded by the administering office for the Administration for Children and Family Services, U.S. Department of Health and Human Services. The opinions, findings, conclusions, and recommendations expressed in this publication / program / exhibition are those of the author(s) and do not necessarily reflect the views of the state or the U.S. Department of Health and Human Services

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Acknowledgements

We would first like to acknowledge the survivors of intimate partner & sexual violence throughout our state, with whom the goals of this project are concerned. Thank you to the many members of Nebraska's intimate partner & sexual violence response community who spent their time and energy discussing their experiences as part of this effort, without your input this project would not be possible. Internally, we would like to thank Lauren DeLuca for her role in the design of the public-facing version of this report. Additionally, we would like to thank Sarah Crowley for her support as a research intern throughout the stages of this project. Lastly, we express our appreciation to the Nebraska Coalition to End Sexual & Domestic Violence for tasking us with this important work.

Executive Summary

This report acts as a needs assessment of Nebraska's intimate partner & sexual violence response community concerning the allocation of American Rescue Plan Act resources. This section offers a top-level executive summary of the project and its findings.



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Background & Goal of the Project:

As a component of the American Rescue Plan Act of 2021, Nebraska was granted funding directed at improving our community's ability to serve survivors of intimate partner & sexual violence. The current project's primary goal is to present an assessment of our response community's current landscape to inform & justify decision making surrounding allocation of these funds.

Approach & Components

This project employed three primary components:



1. Review of Existing Literature

A review of literature concerning the relationship between COVID-19 & intimate partner & sexual violence was conducted to inform the current project's design, scope, and anticipated findings.



2. Development of Community Questionnaire & Data Collection

With the project's goals in mind, an open-ended and online-facilitated questionnaire was developed & administered to practitioners throughout our state. In total, 53 practitioners from agencies across Nebraska participated in the questionnaire. Existing local resources representing the viewpoints of Nebraska practitioners & survivors were also incorporated during this component.



3. Analysis of Response Data & Development of Recommendations

Lastly, response data and other forms of community input were assessed for salient themes and commonly expressed sentiments concerning the current state of our community's ability to effectively serve survivors. Recommendations regarding priority areas for funding allocation were developed with respect to the needs expressed by our community.

Findings

Findings: Nebraska's Current Landscape of Intimate Partner & Sexual Violence Response

Interested in learning more?
These findings are discussed in detail starting on page 17.

[READ MORE >](#)

Exacerbated Experiences & Compromised Needs of Survivors

Pandemic-induced impacts have sharpened survivors' experiences with violence & contributed to a landscape with heightened barriers to accessing select forms of support, largely due to financial constraints.

95% of all practitioners & 100% of Coalition network program staff expressed this view.

Common sentiments comprising this view included:

- Exacerbated experiences & compromised needs of survivors
- Heightened salience for specific service types - particularly housing, mental health, and economic stability needs

Barriers to Maintaining & Supporting Staff

The ability to maintain staff with capacity to effectively respond to survivors' needs is nearing a critical breaking point in the current landscape.

85% of all practitioners & 95% of Coalition network program staff expressed this view.

Common sentiments comprising this view included:

- Inability to attract & maintain staff
- Burnout

Deficiencies in Funding & Material Support

Solutions targeting funding inadequacies & frustrations were pointed to as the most impactful avenue for maintaining & improving our state's capacity to serve survivors. In short, practitioners expressed worry concerning a very real possibility of organizational shut down, describing a looming sense of anxiety regarding our community's ability to continue to exist due to funding constraints. As one director describes:

"AGAIN, with looming cuts, we will not be able to continue at our current capacity. Staff layoffs will likely happen, survivors will have to be turned away when we don't have enough money."

- Director of a Southeastern Nebraska Advocacy Center

74% of all practitioners & 95% of Coalition network program staff expressed this view.

Common sentiments comprising this view included:

- Funding surrounding staffing & general overhead
- Problematic existing funding streams
- Funding targeted at alleviating exacerbated service needs

Conclusions & Recommendations

Interested in learning more?

These conclusions & recommendations are discussed in detail starting on page 31.

[READ MORE](#)

Support Staffing & Operational Capacity of Nebraska's Network of Service Providers

A host of pandemic-related issues including inability to offer remotely competitive wages & benefits, increases in burnout associated with this line of work, and cuts in existing funding have culminated in a landscape where agency leaders are fearful for their organization's ability to maintain basic levels of operations going forward. Funds should be made immediately available to agencies for personnel expenses (wage & benefits increases), staff expansion, and bolstering of agencies' access to flexible funds and financial reserves.

Avenues for Implementation:

- Allow for a broad set of funding applications & targeted improvement areas
- Ensure administrative overhead is non-burdensome

Mitigate Costs of Priority Service Areas: Housing, Mental Health & Economic Stability

Economic impacts caused by the pandemic have complicated the ability to connect survivors with services, particularly those associated with significant financial costs or survivors' financial independence more generally. Specifically, housing, mental health, and economic independence needs have significantly increased while the ability for service providers to assist in these areas has been compromised. Priority should be given to efforts that employ cost mitigation targeting financial barriers associated with these service areas.

Avenues for Implementation:

- Facilitate higher rates of agency cash on hand to mitigate emergency housing & mental health service needs
- Emphasize services geared toward securing economic security

Establish Mechanisms for Long-Term & Sustainable Support

Factors complicating the role of Nebraska's intimate partner & sexual violence response community will continue to pose future risks. To account for this, current resources should be applied in ways which seek to optimize long-term support.

Avenues for Implementation:

- Prioritize fund allocation with long-lasting effects, such as experienced staff retention initiatives
- Consider post-allocation sustainability assessments

Additional Considerations

The current project's primary goal was to inform the allocation of American Rescue Plan Act-originating resources toward our state's intimate partner & sexual violence response community. Given this, most recommendations resulting from this project sought to operate within the scope of these funding sources. Beyond allocation of current resources, though, this project shed light on areas for improvement that may be addressed in other ways & in different contexts.

Spotlights for Community Consideration:

- Pursue community establishment of long-term housing solutions
- Consider stipend-facilitated forms of staff support alongside agency funding increases
- Allocate an appropriate proportion of internal resources to return-yielding investment vehicles capable of supporting priority areas over time

Method & Analytic Approach

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Analytic Plan

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This section outlines the data relied upon and analytic plan utilized within the current project. The first subsection elaborates on the data collected to facilitate assessment of Nebraska's current intimate partner & sexual violence response community. The second subsection describes the project's approach to thematic analysis of this data.

Data Used

This project involved a combination of novel survey response data as well as existing local documentation representing the views of those working within Nebraska's intimate partner & sexual violence response community.

Novel survey response data was collected through an online questionnaire developed with the goals of the current project in mind. Responses from practitioners across the state were collected from Thursday March 14th through Friday April 7th, 2023. In total, 53 practitioners from agencies across Nebraska submitted responses to the questionnaire. Of those, 14 respondents were excluded from analyses as a result of not substantively engaging with the questionnaire (i.e., skipping most or all the questions apart from demographic information). Responses represented the viewpoints of practitioners working across a range of facets of Nebraska's intimate partner & sexual violence response community. Namely, respondents included in analyses were comprised of member agencies of the Nebraska Coalition to End Sexual and Domestic Violence (56%), social service providers and homeless youth programs (23%), the Coalition itself (8%), local health departments & health care coalitions (5%), representatives from Tribes as well & other population-specific organizations assisting underserved communities (5%), and other agency types (3%). Respondents represented a wide variety of specific roles, such as victim advocates, executive directors, community coordinators, forensic nurses, trainers & programmers, and attorneys, among others. Data collected through the questionnaire represents rich responses to a series of open-ended questions concerning the current landscape of Nebraska's intimate partner & sexual violence response community. On average, respondents took about 52 minutes responding to the questionnaire. The survey mechanism utilized for this project is available for review in the report's appendix.

Analytic Plan

Thematic analysis of survey response data occurred in three primary phases. First, individual sets of responses were iterated over and ascribed many tags representing expressions of highly specific sentiments, resulting in combinations of 33 unique tags attributed to each response. As a second step, responses were again iterated over to consolidate tags that were different phrasings of a shared underlying sentiment. For instance, calls for increasing flexibility of funding streams were consolidated with calls for decreasing the narrowness of funding streams. This consolidation of overlapping sentiments resulted in combinations of 20 unique tags attributed to each response. As a third step, prominent sentiments (i.e., those expressed by the majority or plurality of respondents) were organized into broader themes

METHODS & ANALYTIC APPROACH

comprised of varying numbers of sub-themes. This resulted in a schema involving three major themes comprised of 7 sub-themes. Lastly, responses were reviewed an additional time to identify any missed instances of expressions that may fit into this final thematic schema. This codebook was used as the primary framework for analyses. In addition to survey response data, the current project leveraged positions and statements in existing materials expressed by members of Nebraska's intimate partner & sexual violence response community.

A Review of the Literature: COVID-19 and Intimate Partner & Sexual Violence

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COVID-19 has had significant impacts on intimate partner & sexual violence, both in terms of survivors' experiences as well as communities' abilities to respond to these forms of violence. In the most general sense, COVID-19 has ushered in persisting changes to the landscape in which these forms of violence take place, impacting how and to what degree violence occurs as well as how practitioners working in this space must navigate. This literature review synthesizes current findings and discourses surrounding the relationship between COVID-19 and intimate partner & sexual violence as they relate to the goals of the current project.



Escalation of Victimization Experiences

COVID-19 escalated the prevalence of many forms of intimate partner violence victimization and has had significant impacts on the context surrounding the ways in which it occurs, facilitating new modes of violence and exacerbating existing ones.

Prevalence

The prevalence of intimate partner violence has heightened in response to the impacts felt by COVID-19. More specifically, the increased prevalence of these forms of violence is associated both with COVID-19 mitigation efforts and with the exacerbation of societal risk factors associated with victimization such as isolation, economic insecurity, and lack of resources.

The COVID-19 pandemic triggered several response efforts aimed at deterring the spread and impact of the disease. Response efforts included quarantines, shelter-in-place orders, travel restrictions, stay-at-home orders, in-person school cancellations, and other forms of social isolation measures. One common theme among response efforts of this type is the potential for an increased amount of time spent at home as well as changing dynamics in home life more generally. There is a varied body of emerging evidence suggesting that response efforts of these sorts have resulted in or coincided with increased rates of intimate partner violence victimization across a number of jurisdictions and contexts (Boserup, McKenny & Elkbuli, 2020; Bullinger, Carr & Packham, 2020; Kofman & Garfin, 2020; Piquero et al., 2020; McCrary & Sanga, 2021, 2020; Miller, Segal & Spencer, 2020; Thiel et al., 2022; Xue et al., 2020).

Relatedly, the link between COVID-19 and heightened rates of victimization is evident in the pandemic's creation of social conditions that are closely associated with and often facilitate interpersonal violence. Factors such as increased drug and alcohol abuse, isolation, resource and housing inefficiencies, and economic insecurity through job loss or instability have all contributed to an environment where the risk of these forms of violence is heightened (Ragavan et al., 2022, Wood et al., 2022, Xue et al., 2020). Moreira & da Costa (2020) summarize this narrative based on a review of relevant literature:

[...] emergencies, like the Covid-19 pandemic, can influence and further exacerbate those factors precipitating episodes of IPV. Situations that increase stress on the relationship and dynamics based on control, isolation, and manipulation of the victims, restricting their capability to protect themselves and their access to help, appear to be significant factors in the perpetuation of violence. (Moreira & da Costa, 2020)

It is worth noting that the relationship between the impacts of COVID-19 and sexual violence prevalence is less clear, with trends in sexual violence prevalence throughout the pandemic varying across contexts and studies (Thiel et al., 2022). Still, survivors' experiences with sexual violence have undoubtedly been impacted because of the pandemic, a theme that is discussed in the following sections.

Context & Form

Beyond resulting in increases in prevalence, COVID-19 has created new contexts surrounding how these forms of violence are facilitated, clearing the way for new modes of violence, and in some ways exacerbating existing ones.

One particularly salient theme exhibited across contexts is the emphasis on coercion and control understood to be utilized by offenders throughout the pandemic. While aspects of coercion and control have contributed to intimate partner and sexual violence before the onset of COVID-19, current findings suggest that offenders have used the pandemic to their advantage in hopes of establishing more coercive and controlling environments where survivors are unable to leave (Ragavan et al., 2022; Xue et al., 2020). To illustrate, Ragavan et al. (2022) recount the perspective of one service provider:

One thing that we heard a lot in the beginning was partners using COVID in a way to keep the survivor at home, or just saying, "Well, you wouldn't want to get COVID. You wouldn't want to expose yourself. You wouldn't want to expose our child. You can't leave the house." That almost just fueled a little bit of isolation. (Ragavan et al., 2022)

In terms of new forms of violence, pandemic-induced factors have been linked to increases in first-time or novel instances of victimization. Relying on intimate partner violence-related 911 call data from cities across the United States, McCrary & Sangra (2021) report:

Lockdown is especially likely to have led to episodes of first-time abuse: the increase from neighborhoods with no recent history of violence was roughly double the increase from neighborhoods with a recent history of violence. (McCrary & Sangra, 2021)

Increases in the severity of interpersonal violence have also been observed throughout the onset of the COVID-19 pandemic, with survivors reporting their experiences with victimization worsening through the pandemic's onset (Jetelina, 2021). Changes surrounding the ways in which these forms of violence have been facilitated throughout the pandemic's onset have been found to be especially salient for historically marginalized demographic

groups. Commenting on the results of one statewide survey concerning the relationship between the pandemic and intimate partner violence, Peitzmeier et al. (2022) conclude:

New or increased IPV is disproportionately concentrated in specific sub-groups, including individuals who were transgender or non-binary, sexual minorities, disabled, younger, or less educated [...] non-Black people of color, especially Native American individuals, appeared to have the highest prevalence of new or escalated IPV. These historically marginalized populations may be especially vulnerable and face compounded risks to new or increased IPV exposure during the COVID-19 crisis. (Peitzmeier et al., 2022)

Complications to Effective Response

Despite indications of rising prevalence and severity, effective responses to intimate partner and sexual violence victimization were stunted because of COVID-19. These impediments to effective response were felt throughout the response community, from those working in the criminal justice space, to direct advocates and service providers, to other community members such as health care professionals. Overall, effective responses to these forms of violence were inhibited as a result of the introduction of barriers to effective service provision, impediments to survivors' ability to seek services, as well as a landscape that introduced significant changes in service needs.

Barriers to Service Provision

Throughout the pandemic, community members' efforts to provide effective responses to violence were compromised due to a myriad of COVID-related factors. Within the context of criminal justice response, factors such as judicial backlog and motivations to avoid overcrowding of justice systems played a role in influencing response (Hawks, Woolhandler & McCormick 2020; Miller et al., 2020; Godfrey et al., 2021). Advocates and direct service providers faced other obstacles surrounding adapting to changing landscapes introduced by the pandemic. Specific examples of obstacles encountered included the suspension of core services, specifically those occurring in person (Engleton et al, 2022). Relatedly, exacerbation of rates of occupational stress and staff burnout have been identified as factors complicating responders' ability to effectively respond to the needs of survivors (Leroux et al., 2022; Wood et al., 2022). In their review of existing research, Leroux et al. (2022) conclude:

All articles published since the pandemic discuss the ways that the pandemic is impacting agencies and practitioners, with respect to the ways that the nature of the work has changed and intensified resulting in occupational stress and interpersonal tensions, as well as the ways that staff are taking on the brunt of the mismatch between demand for services and capacity for transitioning to offering distance. (Leroux et al., 2022)

Impediments to Service Seeking

Beyond making effective service provision difficult, COVID-related factors introduced new and heightened hurdles to survivors' efforts to seek out services, such as concerns about exposing oneself to COVID-19 and factors related to heightened levels of control abusers exhibited throughout the pandemic.

Offenders' emphasis on coercion and control exhibited throughout the pandemic as well as survivors' prioritizing COVID-specific health concerns have been identified as mechanisms in which the pandemic has compromised the feasibility of service seeking (Moreira & da Costa, 2020; North, 2020; Xue et al., 2020). This impact can be seen when considering plummeting rates of select forms of service-seeking exhibited throughout the pandemic, such as intimate partner and sexual violence survivors' utilization of emergency department services (Muldoon et al., 2021). Summarizing this sentiment Moreira & da Costa note:

[...] victims may abstain from using these services for fear of catching the virus. This same fear can be extended to seeking health care in the context of abuse, and victims may feel that they should not put more strain on an already overwhelmed health system. (Moreira & da Costa, 2020)

Changing Service Needs

COVID-19 also compromised the ability of survivors to effectively connect with services by introducing new modes of service needs and changing the priority levels of existing service types. One especially salient impact on the service needs of survivors has been the increased utility of remote or virtual services (Engleton et al., 2022; Emuze, 2020). Beyond the shift to virtual services in response to COVID-related concerns, certain forms of already existing service needs became hyper-critical. Notably, assessments have identified the material needs of survivors such as financial needs, housing needs, and transportation needs, as being exacerbated as a result of the pandemic (Engleton et al., 2022; Ragavan et al., 2022; Wood et al., 2021; Wood et al., 2022). Additionally, service providers have

acknowledged a broadening of their roles in response to new service needs of survivors, particularly in the form of fielding COVID-related questions posed by survivors (Engleton et al., 2022).

Mitigation Efforts

As members of the intimate partner and sexual violence response community have begun to understand the dynamics that COVID-related factors introduced, a range of efforts have been undertaken to understand and address the complications that COVID-19 has ushered in. Many efforts so far have enjoyed levels of success in terms of helping to reduce barriers, but understanding the current landscape remains an ongoing effort, both for practitioners & researchers alike.

Backdrop of Urgency & Adaption to New Forms of Services

Mitigation attempts and attempts to adapt to the changing landscape of service provision are generally understood to have been undertaken with a sense of urgency, with little possibility for adequate preparation or transitions (Leroux et al., 2022; Moreira & da Costa, 2020; Montesanti, 2021). While success has been found in many contexts, these efforts have introduced new sets of complications that response community members must continue to address. Adoption of remote or virtual service provision has been cited as experiencing both logistical and substantive difficulties (Cortis et al., 2021; Moreira & da Costa, 2020; Tseng et al., 2021; Wood et al., 2022). Logistically, assessments of virtual services point to technological issues, such as computer & internet complications, and the related need for more technical support for staff. Substantively, assessments have identified difficulties in providing the same quality of care as would typically be provided through in-person service provision. Speaking to substantive difficulties associated with virtual service provisions, Tseng et al. (2021) remark:

Remote service delivery is emotionally taxing in new ways. Our data additionally show that delivering these services over remote connections created new emotional strains on consultants. At issue was the emotional labor of providing reassurance to clients amidst circumstances challenging for both parties. [...] Providing this type of reassurance, however, was uniquely challenging in the remote setting. Consultants lacked many of the empathetic cues they would have used in-person to convey warmth. As one consultant articulated: If a client is becoming distressed during the in-person appointment, there are things we can do to show empathy, and show we care. And give them that breathing space, and respond. We can do things like offer tissues, offer water, and be a more reassuring presence. Over the phone, remotely, that's a lot harder. (Tseng et al., 2021)

Other complications associated with virtual service provision include concerns surrounding ensuring trauma-informed standards, ensuring the ability for survivors to disclose experiences efficiently, and ensuring survivor safety while they engage in service-seeking (Ghidei et al., 2022; Moreira & da Costa, 2020). Generally, then, adaptations of new modes of service provision, particularly virtual and remote services, are continuing to be fine-tuned and improved upon throughout the changes introduced by COVID-19.

Ongoing Assessment of the Landscape

As the intimate partner and sexual violence response community continues to adapt to this new landscape, a still-emerging collection of needs assessments and other analyses have been conducted to provide ongoing guidance regarding agenda development and resource allocation aimed at facilitating effective system response. Across contexts, identified community needs in these types of assessments tend to call for increased resources & focused service areas. More specifically, community assessments of this sort have identified the need for increased financial support for service providers, and relatedly, the need for improved staff retention for agencies in the response community (Cruz et al., 2021; Wood et al., 2022). In terms of identifying new priorities for focus areas, assessments point to the utility of establishing resources that satisfy the changing needs of survivors identified throughout the pandemic (Mantler et al., 2022). Needs assessments specific to Nebraska have begun to draw similar conclusions (Kreuzberg et al., 2021). Given the recently available American Rescue Plan Act-related funding directed toward bolstering response efforts to intimate partner and sexual violence, the current project seeks to improve our understanding of the current needs of survivors and responders in our state and ultimately inform decisions surrounding allocation of these resources.

Findings: Nebraska's Current Landscape of Intimate Partner & Sexual Violence Response

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Exacerbated Experiences & Compromised Needs of Survivors

Expressed by 100% of Coalition Member Agency Staff & 95% of All Respondents

COVID-related impacts have sharpened survivors' experiences with violence & contributed to a landscape with heightened barriers to accessing select forms of support, largely due to financial constraints.

Practitioners described COVID-19 as ushering in factors that exacerbated survivors' experiences with violence and compromised their ability to access select service types. Specifically, COVID-related impacts such as increased time spent isolated at home, stressors related to employment and financial insecurity, and corresponding increases in substance abuse were pointed to as facilitating more dire instances of violence and more instances of violence overall. The culmination of these factors for many practitioners, then, were increased case loads comprised of more dire situations.

In terms of responding to survivor needs, the overarching economic instability introduced by COVID-19 was identified as the most devastating aspect of the pandemic. Persisting increases in cost of rent, transportation costs, employment insecurity, and inflation overall were cited as contributing to increased needs of survivors while simultaneously compromising service accessibility, largely due to financial limitations. Virtually all practitioners recounted this perfect storm-like scenario within the context of housing. Increases in costs of living compromised the ability for survivors to leave their abuser due to inability to secure affordable housing independently. At the same time, the ability for practitioners to connect these survivors who would benefit from emergency or transitional housing support was compromised due to cost and availability of housing overall.

"Our numbers spiked [when] the pandemic began and have not gone down since. We served more individuals in just the last half of 2022 than we served in all of 2019."

- Director of an Eastern Nebraska Advocacy Center

"No one left their homes for a good year and that abuse didn't stop, it just increased."

- Nebraska Department of Health & Human Services Staff

"Client needs have a sense of urgency that is higher since the pandemic as EVERYTHING is a crisis in new ways."

- Director of a Central Nebraska Advocacy Center

"The pandemic isolated domestic violence survivors even more than they already were - leaving them with little option to get away from their abuse and seek services. [...] Loneliness, depression, mental health, substance abuse, etc., grew exponentially during the shut down period."

- Director of an Southeastern Advocacy Center

"The pandemic created urgency in places where it didn't exist before. The need is so great. One client didn't even disclose she had been sexually assaulted the night before because "it wasn't the most important thing in my life right now." Finding housing, knowing how she was going to pay her bills, following through on supervision with her child who had been removed, etc. were a bigger priority. That's heartbreaking!"

- Director of a Western Nebraska Advocacy Center

"The financial/economic concerns have always been a barrier, but are now huge. Victims lost jobs/hours cut during the pandemic and they have not been able to regain their footing. Initially funding to support rent was available and that has now gone away. For victims they feel stuck and unable to leave."

- Director of an Eastern Nebraska Advocacy Center

"With a lack of affordable housing and increasing costs for food, utilities, and basic needs, some clients find that their current situation is more secure than the unknown."

- Director of an Eastern Nebraska Advocacy Center

"As we see our client numbers begin to increase again after COVID the need for shelter is a challenge with limited shelter options and limited motel dollars. Hotel costs are also up. We all are over our projected motel budgets due to funding cuts [...] Available shelter across the state continues to be an issue."

- Director of an Eastern Nebraska Advocacy Center

Heightened Salience for Specific Service Types

When discussing exacerbated experiences & needs of survivors, 100% of Coalition member agency staff described a heightened salience for specific service types in the current landscape. Three specific service types emerged as especially salient, namely, housing (96% of Coalition member agency staff), economic stability & employment (91% of Coalition member agency staff), and mental health & substance abuse (73% of Coalition member agency staff). Across contexts, the pandemic's economic impacts underpinned the exacerbation of these service needs. In general, practitioners pointed to the various ways the pandemic has strained the economy as compromising the provision of needed services, particularly those that are associated with financial costs. As one practitioner recounted: —————→

"Changes to the economy that aligned with the pandemic have continued to be an ever-growing strain on already limited finances. Everything has increased in cost, from hotel stays to gas/mileage to insurance to licensing for services like Zoom, all while decreases in corporate support and cuts to funds at the private, state, and federal level make it increasingly difficult to maintain basic services."

- Director of an Eastern Nebraska Advocacy Center

Economic effects of the pandemic were felt both in terms of the ways in which rising costs limited service providers' ability to support survivors as well as the degree to which survivors needed services to begin with. In particular, survivors' need for housing support (both emergency & transitional) was described as having been amplified as a result of the economic impacts of the pandemic. Practitioners described increases in the number of survivors who were unable to leave their abuser due to the inability to independently secure housing. Coupled with a decline in agencies' ability to supplement housing costs through support services, survivors were described as having limited options available. As two Coalition member agency staff members describe:

"The financial/economic concerns have always been a barrier, but are now huge. Victims lost jobs/hours cut during the pandemic and they have not been able to regain their footing. Initially funding to support rent was available and that has now gone away. For victims they feel stuck and unable to leave."

- Director of an Eastern Nebraska Advocacy Center

"My biggest obstacle currently is finding available and affordable housing for survivors who are fleeing or relocating. It's causing our program to access our shelter outlook and provide more extended shelter stays due to housing taking much longer to find. What is available, costs have almost doubled in monthly rent yet income ratios do not reflect that for those considered low income."

- Nebraska Domestic Violence Engagement Coordinator and Victim Advocate

FINDINGS: NEBRASKA'S CURRENT LANDSCAPE EXACERBATED EXPERIENCES & COMPROMISED NEEDS OF SURVIVORS

While all Coalition member agency staff expressed concerns over increased salience of specific service types, one notable difference emerged with regard to mental health services when considering the views expressed by practitioners working in metropolitan areas versus those operating in non-metropolitan and comparatively more rural areas of the state.[1] When discussing the increased salience of service needs introduced by the pandemic, 86% of Coalition member agency staff working in non-metro areas cited mental health & substance abuse service needs as exacerbated by the pandemic compared to just 57% of Coalition member agency staff working in metropolitan areas. Staff working in less urban areas often pointed to strained costs of operation as compromising their ability attract specialized staff to their locales who can provide mental health or substance abuse-directed services. As one practitioner describes:

"Mental health needs are extremely lacking in our service area [...] Our agency is able to provide effective services to survivors, however if survivors need expanded services or specialized services it can be difficult to meet those needs, partially due to our rural area and partially due to lack of funding and staff."

- Director of a Western Nebraska Advocacy Center

Across contexts, then, the economic impacts felt because of the pandemic compromised the ability of advocates to provide survivors with services they need, as well as resulted in heightened salience of survivors' needs. These impacts were described as most salient within the areas of housing, economic stability, and mental health & substance abuse. As one practitioner summarized:

"Survivors do not need new programs, they need it to be easier to access existing programs."

- Director of an Eastern Nebraska Advocacy Center

[1] We rely on the Rural-Urban Continuum codes employed by the United States Department of Agriculture's (USDA) Economic Research Service (ERS). In this context, "metropolitan" refer to agencies based out of zip codes within metropolitan counties, while non-metropolitan refers to agencies based in smaller communities adjacent to metropolitan areas as well rural areas. For more information on the ERS' Rural-Urban Continuum codes, see: ["USDA Economic Research Service – Rural-Urban Continuum Codes"](#).

Increased Volume & Sharpened Context

64% of Coalition member agency staff discussed the ways in which the pandemic introduced factors contributing to heightened victimization rates and intensified experiences with victimization. Pandemic-induced impacts such as increased time spent at home, general social isolation, and heightened experiences with economic insecurity were all pointed to as facilitating new instances of violence & influencing the way violence was carried out. For most Coalition member agency staff, these impacts have been evident in the higher rates of survivors in crisis situations seeking services. As one director of an advocacy agency notes: →

"Our numbers spiked during the pandemic [...] and have not gone down since. We served more individuals in just the last half of 2022 than we served in all of 2019, and regularly we have clients sitting in our waiting room because all 6 of our walk in service rooms are occupied and all on shift advocates are with clients."

- Director of an Eastern Nebraska Advocacy Center

Practitioners recounted the ways in which pandemic-induced impacts such as isolation and economic insecurity were leveraged by abusers. Specifically, practitioners identified these factors as contributing to an environment where control and manipulation was easier to achieve and helpseeking was compromised. As two practitioners describe:

"COVID 19 created an additional layer of isolation and made it more dangerous for those living with an abusive partner or in a home where there is abuse. The isolation made them more vulnerable. We are now seeing the impact."

- Director of a Western Nebraska Advocacy Center

"Often times victims of domestic violence are already very isolated, while victims of sexual assault rely heavily on family and/or friends. The pandemic isolated domestic violence survivors even more than they already were - leaving them with little option to get away from their abuse and seek services. For victims of sexual assault, the pandemic created isolation as well, only from their closest support systems."

- Director of a Southeastern Nebraska Advocacy Agency



FINDINGS: NEBRASKA'S CURRENT LANDSCAPE EXACERBATED EXPERIENCES & COMPROMISED NEEDS OF SURVIVORS

Practitioners described the ways in which pandemic-induced impacts particularly affected communities where these forms of isolation and economic insecurity were already prominent. Specifically, groups who may already be insulated from the general community due to factors surrounding language and recent immigration status were identified as being especially impacted by the social and economic impacts of the pandemic. As one director of an advocacy agency notes:

"We are continuing to see an increase in requests for assistance from Middle Eastern, North African, South Asian survivors, primarily refugees. They are extremely isolated, economically dependent on their abusive partner, and experiencing extreme levels of violence. [...] The isolation of the pandemic has exacerbated already challenging dynamics."

- Director of an Eastern Nebraska Advocacy Center

Barriers to Maintaining & Supporting Staff

Expressed by 95% of Coalition Member Agency Staff & 85% of All Respondents

The ability to maintain staff with capacity to effectively respond to survivors' needs is nearing a critical breaking point in the current landscape.

The vast majority of practitioners pointed to fundamental issues surrounding the ability to maintain and support an effective response staff in the current COVID-affected landscape. While overextended staff is not a uniquely recent issue within the context of intimate partner and sexual violence response, practitioners identified a range of current staffing-related issues contributing to anxiety surrounding an anticipated collapse in the response community's ability to effectively serve survivors. The inability to attract & retain staff, funding available for staff compensation, and COVID-induced burnout were the primary factors identified as contributing to this looming sense of anxiety and fear for the response system's future efficacy. Unsurprisingly, these factors were often described as largely overlapping & interrelated. For instance, a typical account of an advocacy center's staffing efforts describes difficulties in advertising available positions as desirable due to an inability to offer competitive wages coupled with the emotionally-intensive nature of the role.

"The pandemic created an issue in all communities of being able to hire and retain skilled and qualified staff."

- Staff Member at an Eastern Nebraska Service Provider

"We have staffing challenges in the sense that our wages struggle to be competitive in any way. We have to use revenue from our second-hand store to increase wages to \$15/hr which still doesn't appeal to quality applicants."

- Director of a Southeastern Nebraska Advocacy Center

"The greatest factor has been financial for us. I have had 2 staff that have told me they love this work, but they are not making enough money to cover their daycare costs and can get hired at another business for more money."

- Director of a Eastern Nebraska Advocacy Center

"We have a local work ethic camp that is starting people at \$28/hour with full health benefits and retirement program. Meanwhile, we are starting people at \$18/hour without full health benefits or any retirement. Needless, to say most we interview end up taking a position with the work ethic camp."

- Staff Member at a Nebraska Advocacy Center

"Given we have been short staffed for such a long period of time, staff are burned out. Given the structure of my organization, I cannot give my staff an 'incentive bonus' since it cannot also be given to the rest of the agency staff."

- Staff Member at an Eastern Nebraska Service Provider

"The fear of staff turnover is ongoing and a huge stress."

- Director of a Southeastern Nebraska Advocacy Center

"Three years of 'COVID' world has created more burnout in staff - more expectations with same payrates, same benefits, etc."

- Director of a Central Nebraska Advocacy Center

"Team members are burning out. We need to be able to pay them more so they're not forced to work two jobs in order to pay their bills or leave for a job outside the nonprofit sector where they can make more. Losing team members means losing their knowledge and experience, which enhance the quality of services we can provide to survivors."

- Director of a Central Nebraska Advocacy Center

"Staffing retention and challenges are huge. We do not pay our staff at competitive wages resulting in them leaving. We can't enhance benefits. I thought about doing a health stipend, but we have no funding with everything getting cut. If we don't have staff and we have to lay off staff there will be no services to seek out."

- Director of a Northeastern Nebraska Advocacy Center

Inability to Attract & Maintain Staff

When discussing issues surrounding staffing since the pandemic's start, 95% of Coalition member agency staff discussed a host of interrelated issues surrounding their agency's ability to attract and maintain a staff capable of adequately responding to the needs of survivors. The economic impacts of the pandemic along with corresponding budget cuts were cited as underpinning the recent difficulties regarding staffing. As one Coalition member agency staff summarized of their agency: —————→

"[...] the pandemic created an issue in all communities of being able to hire and retain skilled and qualified staff."

- Director of a Southeastern Nebraska Advocacy Agency

Not surprisingly, then, all practitioners pointed to inadequacies in staff-targeted funding when discussing obstacles to maintain a robust and effective team. Practitioners identified shortcomings related to staff-targeted funding both in terms of direct wages as well as indirect benefits, such as health care, flexibility in scheduling time off, and case load. Summarizing their assessment of the current landscape, one advocacy agency director expressed their anxiety for the future, given current staffing issues:

"Staffing retention and challenges are huge. We do not pay our staff at competitive wages resulting in them leaving. We can't enhance benefits. I thought about doing a health stipend, but we have no funding with everything getting cut. If we don't have staff and we have to lay off staff there will be no services to seek out."

- Director of a Northeastern Nebraska Advocacy Agency

Burnout

Related to discussions surrounding ability to attract and maintain staff, staff burnout was a prominent theme expressed by practitioners. When speaking about staffing, 86% of Coalition member agency staff discussed the presence and role of burnout. Burnout was attributed to variety of pandemic-related factors, including expansions in case load, reduction in staff size, inability to take scheduled time off or time off to support sick family members, and stressors felt by staff members surrounding their own economic instability. Coalition member agency staff also pointed to an expansion of roles and expected knowledge for many positions as contributing to burnout. More specifically, Coalition member agency staff described new sets of expectations regarding their ability to offer medical advice related to their clients' navigation of the pandemic. Speaking to their agency's experience with burnout overall, one agency director notes: →

"As a director I have felt all of this. For the last couple of years, staff coverage has been a struggle, from COVID/Illness quarantine, to stress and staff burnout. I have had 1 person leave and was able to work with another who talked to me about leaving due to the low pay and family struggling with the increased cost of living. Trying hard to keep staff, provide 24/7 coverage and keep morale up."

- Director of a Southeastern Nebraska Advocacy Agency

Coupled with broader issues surrounding deficiencies in staff-targeted funding, the themes of burnout described by Coalition member agency staff likely play an exacerbating role in barring agencies from maintaining effective number of quality staff.

Deficiencies in Funding & Material Support

Expressed by 95% of Coalition Member Agency Staff & 74% of All Respondents

Solutions targeting funding inadequacies & frustrations were pointed to as the most impactful avenue for maintaining & improving our state's capacity to serve survivors.

Nearly all advocates pointed to inadequate levels in available funding as compromising their agency's ability to meet basic survivor needs. Issues surrounding adequate funding were expressed as intertwined with the other major themes expressed by practitioners, namely, compromised ability to offer services & the ability to maintain an adequate staff. While limited operating budgets were not expressed as an entirely new hurdle, practitioners recounted how COVID-19's inflationary impacts have stretched existing budgets beyond their limits. Additionally, practitioners identified limitations & issues of usability surrounding existing funding streams, citing overly narrow scopes of funding sources & burdens of funding administration. These factors were noted as occurring alongside other forms of budget cuts, particularly those stemming from resources made available through the Victims of Crime Act (VOCA). When funding was discussed outside the context of maintaining basic staffing capacity, identified target areas corresponded to exacerbated service needs identified elsewhere in responses (i.e., those compromised as a result of the economic impacts of COVID-19, such as housing). Without reinvigoration of funding streams, many agency's leadership expressed anticipated lay offs and deterioration of their agency's ability to continue to effectively serve survivors in the future.

"Costs have sky-rocketed since COVID, both for operating expenses, including personnel, as well as financial assistance needed by those we serve. While we have had some COVID funds to assist with some added expenses caused by the pandemic our regular funding has not increased at the same rate. We also struggle with maintaining a full staff as being competitive with wages and benefits is not possible without increased funding."

- Staff Member at a Nebraska Advocacy Center

"We have no funding to pay our staff. If we get cut 40% in VOCA we will have to layoff staff. We have no funding to pay for benefits, coaching, retention, competitive pay, anything to support our current staff. All costs are increasing. We need more cleaning supplies. We need gas for staff and clients to get to work/school. We need application fees for housing, rent, deposits. Clients have higher needs with mental health and medical advocacy and transportation. We need more money for shelter."

- Director of a Northeastern Nebraska Advocacy Center

"AGAIN, with looming cuts, we will not be able to continue at our current capacity. Staff layoffs will likely happen, survivors will have to be turned away when we don't have enough money."

- Director of a Southeastern Nebraska Advocacy Center

"The grants seem much more difficult to manage and the urgency in everything has increased. My staff is experiencing burn out and I worry that this will only increase if I have to cut staff."

- Director of an Eastern Nebraska Advocacy Center

"I consistently work 50+ hours a week. I am at capacity. I do not want something that is going to cause more work for me, more reporting, more regulations."

- Director of an Eastern Nebraska Advocacy Center

"It seems that with each funding stream comes more and more administrative and reporting requirements. Keeping up with all the red tape in turn means less time with the actual survivors."

- Staff Member at a Nebraska Advocacy Center

Funding Surrounding Staffing & General Overhead

When discussing deficiencies in funding and material support, 100% of Coalition member agency staff pointed to shortcomings in funding directed toward staffing and general operating costs. Pandemic-induced increases in costs of operations, often cooccurring with decreases in funding sources, were cited as the primary factors driving inadequacies in funding for staff and general overhead. As one practitioner describes:

"Costs have sky-rocketed since COVID, both for operating expenses, including personnel, as well as financial assistance needed by those we serve. While we have had some COVID funds to assist with some added expenses caused by the pandemic our regular funding has not increased at the same rate."

- Staff Member at a Nebraska Advocacy Center

Many practitioners described deficiencies in funding as being further exacerbated by looming budget cuts, notably Victims of Crime Act (VOCA)-originating funding. In an environment where existing resources are weakened due to rising costs and sources of funding are removed altogether, many practitioners expressed a strong sense of anxiety concerning their organization's immediate future. One agency director describes their situation by noting:

"Our program is doing good work, but we are over capacity at this time. Part of the reason is because of pending VOCA cuts. We can't fill an open position now and will likely have to reduce our staffing even further July 1. We already needed more money to provide pay increases, etc. to be competitive with other employers in our area."

- Director of a Western Nebraska Advocacy Center

Unsurprisingly, then, strengthening funding directed at staffing was near-universally pointed to as the most impactful solution to staffing issues. Holding a statewide perspective, a Coalition staff member summarizes this sentiment succinctly:

"I believe most programs would benefit from a budgetary increase to allow them to pay their staff competitive wages and provide health insurance and other benefits. I also think that programs need to create a flexible schedule for their staff to help reduce burnout."

- Staff Member at the Nebraska Coalition to End Sexual and Domestic Violence

Problematic Existing Funding Streams

Beyond inadequacies in funding amounts, frustrations surrounding logistical constraints of existing funding sources were a prominent theme discussed within the context of funding more broadly. 62% of Coalition member agency staff pointing to issues such as funding rigidity and administrative burden when discussing funding.

Funding rigidity and over narrowness of scope was one commonly expressed component of this sentiment. Generally speaking, practitioners described the utility of funding sources as being compromised due to being overly restrictive in terms of how and for what purpose they may be used. As one practitioner describes: →

"The last thing that needs to be done is to further split out funding based on populations! All areas across the state have different populations/amounts of underserved populations [...] No one process or 'formula' is going to work with every community."

- Staff Member at an Eastern Nebraska Advocacy Agency

The division of funding across victimization types (i.e., physical intimate partner violence versus sexual violence) was often alluded to as unhelpful and in some cases detrimental. Practitioners noted this division as non-useful in many contexts, citing the degree to which these experiences overlap for the clients they serve. As one practitioner describes:

"I think funding can stop being split out between DV, SA, Stalking and Human Trafficking. any person who presents with DV has at least an 80% chance, which is low, chance of also having SA. They just don't present with that initially."

- Staff Member at an Eastern Nebraska Advocacy Center

FINDINGS: NEBRASKA'S CURRENT LANDSCAPE

DEFICIENCIES IN FUNDING & MATERIAL SUPPORT

Administrative burden associated with existing funding streams was also a salient theme when practitioners discussed deficiencies in funding. Overall, Coalition member agency staff described the reporting and administrative tasks associated with disparate funding sources as taking away from leadership and staff's ability to substantively engage in their work and serve clients. Several practitioners speak to this point in various ways:

"It seems that with each funding stream comes more and more administrative and reporting requirements. Keeping up with all the red tape in turn means less time with the actual survivors. If these things could be streamlined somehow with a minimum of reporting requirements."

- Staff Member at a Nebraska Advocacy Center

"I will tell you the time my staff spend completing extra time sheets and me having to review, approve and submit, IS NOT A GOOD USE OF TIME. I know to those outside of the day-to-day stuff (a.k.a. funders assume this is not a big deal) however, this takes up a good 8 hours of a day or more."

- Staff Member at an Eastern Nebraska Advocacy Agency

"Funding is more and more burdensome: programs desperately need funds but every new funding has more and more admin and reporting options."

- Staff Member at a Southeastern Nebraska Advocacy Agency

"Our network leaders are showing incredible signs of burnout, turnover and frankly, we need funding that is NOT administratively burdensome."

- Staff Member at a Central Nebraska Advocacy Agency

Taken together, sentiments expressed surrounding funding describe a landscape where rising costs, cuts in funding, and administrative burden have culminated in agencies being on the verge of being unable to continue to operate at basic capacity.

Funding Targeted at Alleviating Exacerbated Service Needs

When discussing funding, 57% of Coalition member agency staff described the need for funding targeting select service types. Most often, staff highlighted the need for funding targeting housing services (both emergency & transitional) as well as funding targeting mental health services. Intuitively, these service types correspond to those that identified as having been exacerbated by way of the pandemic. Speaking to this point, one social service provider notes:

"Additional funding and resources can truly help to establish a connection within the housing community that is willing to work with survivors to help them transition to a new stage in their lives [...] Funding would be beyond helpful if it were focused on the issue of limited housing availability for victims of domestic violence [...] More money can provide more housing for the clients that so desperately need it."

- Eastern Nebraska Social Service Provider

It is worth noting that calls for funding targeting specific service types were underpinned by the economic impacts felt as a result of the pandemic. Practitioners pointed to lack of financial resources as the preventing connecting survivors with services, particularly those associated with substantial costs, such as housing and counseling.

Discussion & Recommendations

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Support Staffing & Operational Capacity of Nebraska's Network of Service Providers

Nebraska's network of service providers requires immediate-term financial & material support to maintain effective levels of staffing and operational capacity. To address this priority area, funds should be made immediately available to agencies for personnel expenses (wage & benefits increases), staff expansion, and bolstering of agencies' flexible funds and financial reserves.

Why is this a priority area?

A host of pandemic-related issues including inability to offer remotely competitive wages & benefits, increases in burnout associated with this work, and cuts in existing funding have culminated in a landscape where agency leaders are fearful for their organization's ability to maintain basic levels of operations going forward.

Considerations for Implementation



Allow for a Broad Set of Funding Applications & Targeted Improvement Areas

Funds made available to agencies should intentionally be directed toward a wide range of goals surrounding forms of staff support (increases in wages, benefits, and other forms of support) as well as varied avenues for bolstering overall operational capacity. These efforts should emphasize a top-down funding allocation approach, where recipients should be given discretion in terms of how best these resources may be allocated in their agency's context. Relatedly, expectations for improvement areas should be anticipated to be varied across agencies. Collectively, improvements in these areas should be treated as successful applications of funding: 1) Increases in personnel expenses (wages, benefits, stipends, etc.), 2) increases in staff size, 3) increases in amount of flexible/discretionary funds, 4) increases in financial reserves.



Ensure Administrative Overhead is Non-Burdensome

Funding allocated to agencies should involve minimal administrative & reporting burden for recipient agencies. In practice, this should be achieved in a twofold fashion. First, accessing available funding should involve very little time or effort in terms of demonstrating need & articulating a proposal for use of funding. The current project has established an underlying sense of need for agencies across our state. Second, subsequent reporting requirements following funding allocation should involve a relatively low number of straightforward metrics speaking to the improvement areas outlined above. Since each agency's application of funding will be unique based on their discretion, the relevant improvement areas should be expected to be unique to individual agencies.

Mitigate Costs of Priority Service Areas: Housing, Mental Health & Economic Stability

The pandemic's economic impacts underpinned the exacerbation of a specific set of service needs, particularly housing, mental health, and services geared toward employment & economic stability. Mitigating barriers to these resources, then, should be prioritized.

Why is this a priority area?

Economic impacts felt as result of the pandemic have complicated the ability to connect survivors with select service types, particularly those associated with significant financial costs or survivors' financial independence more generally. Specifically, housing, mental health, and employment & economic independence needs have significantly heightened while the ability for service providers to assist in these areas has been compromised. As one example, a common narrative described by practitioners involved rising rates of survivors wanting to leave their living situation occurring alongside spikes in economic insecurity, resulting in increased instances of survivors being unable to leave their abuser. To the extent that funding is allocated toward specific service types, then, priority should be given to efforts that employ cost mitigation targeting financial barriers of connecting survivors with housing, mental health needs, or assistance establishing financial independence.

Considerations for Implementation



Facilitate Higher Rates of Agency Cash on Hand to Mitigate Emergency Housing & Mental Health Service Needs

Practitioners often cited the inability to connect survivors with emergency housing, such as a hotel stay for a night, pointing to rising costs of these services alongside decreases in available financial resources. Relatedly, practitioners cited cost barriers in terms of being able to pay for counseling services for survivors following victimization. Being able to quickly connect survivors with short-term housing solutions & mental health services following emergency situations is crucial for the safety of survivors, especially in areas where survivor-focused shelters or mental health services may be scarce. To address these issues, funding designed to be spent in a discretionary manner for survivors' stays in short-term housing solutions, such as in hotels, as well as access to mental health services, such as counseling, should be considered.



Emphasize Services Geared Toward Securing Economic Security

Given that practitioners pointed to the pandemic's economic impacts as underpinning the exacerbation of these service needs, priority should be given to connecting survivors with modes of establishing economic security & financial independence. Efforts toward this end may involve direct service provision through assistance in securing economic security (e.g., preparing for job seeking or development of new skillsets) or may involve partnering with local employers and employment agencies as referral partners.

Establish Mechanisms for Ongoing & Sustainable Support

Factors complicating the role of Nebraska's intimate partner & sexual violence response community will continue to pose future risks. To account for this, portions of current resources should be used to establish mechanisms that can facilitate ongoing & sustainable sources of funding for agencies going forward.

Why is this a priority area?

Factors associated with the current landscape identified throughout this project are unlikely to be effectively addressed by a onetime solution. Rather, the issues pointed to by practitioners (i.e., exacerbated survivors' needs, particularly regarding costly housing & mental health services, as well as agencies' ability to maintain effective staffing) will be intrinsic to effective response efforts in the future. In other words, mitigating costs of essential services for survivors and being able to pay staff a reasonable wage are aspects of a robust response community that require consistent attention and upkeep, not a single surge in resources. While the severity of the current landscape warrants a swift injection of some funds directly into agencies' budgets to mitigate the worst outcomes in the immediate-term, use of current resources should also strive to leverage a portion of current resources toward addressing these issues in the long term.

Considerations for Implementation



Prioritize Fund Allocation with Long-Lasting Effects

Prioritizing the allocation of current resources toward applications with long-lasting effects will help to maximize the impact of current resources. As one example, a particularly salient theme expressed by practitioners was the significant cost associated with staff turnover. Practitioners pointed to high rates of wasted time and money associated with onboarding new staff who ultimately do not stay with the agency. Prioritizing long-term staff retention, then, is one clear avenue for implementing changes with long-lasting effects, both in terms of avoiding repeated instances of wasted time and money associated with turnover, as well as in terms of reaping the benefits of experienced staff.



Consider Post-Allocation Sustainability Assessments

Future efforts to evaluate the impact of these resources, and future evaluation efforts more generally, should strive to operate through a lens of sustainability. More specifically, evaluations of these sorts should seek to assess where the capacity of our state's response community is headed, based on current trends. Prioritizing sustainability in these types of evaluations will identify issues capable of compromising capacity with more time to preventively adapt.

Additional Considerations

The current project's primary goal was to inform the allocation of American Rescue Plan Act-originating resources toward our state's intimate partner & sexual violence response community. Given this, most recommendations resulting from this project sought to operate within the scope of these funding sources. Beyond allocation of current resources, though, this project shed light on areas for improvement that may be addressed in other ways & in different contexts.

Spotlights for Community Consideration



Pursue Establishment of Long-Term Housing Services

Housing services (both emergency and transitional) warrant consideration through a long-term lens. Community members should seek to catalyze efforts to develop long-term solutions to the current inaccessibility of housing for survivors. In practice, this may involve development of an actionable plan for establishment of new shelter options for survivors with appropriate community buy-in. Additionally, this may involve initiatives seeking to establish new modes of housing-targeted resources for survivors, such as through the establishment of new grant opportunities focusing on survivors' housing needs. One particularly timely opportunity relevant to this approach can be seen in the current [Legislative Resolution 150](#) - Interim study to examine the gap in services such as emergency shelters and transitional housing for individuals experiencing domestic violence and human trafficking (LR150). This resolution was introduced to the Nebraska legislature in May 2023 and calls for an interim study to examine the gap in services such as emergency shelters and transitional housing for individuals experiencing domestic violence and human trafficking in Nebraska. Given the overlap of that effort & this project, stakeholders should leverage the findings of this report toward that effort.



Allocate an Appropriate Proportion of Current Resources to Return-Yielding Investment Vehicles Designed to Support Priority Areas Over Time

Leveraging portions of agency portfolios toward return-yielding investment vehicles will help to facilitate sustainable approaches to addressing identified priority areas going forward. Fiscal decision makers should refer to the Coalition's established investment policy or other agreed upon approaches for determining the appropriate details surrounding an investment of this sort. For further context surrounding this approach, the National Council of Nonprofits "[Investment Policies for Nonprofits](#)" provides a useful collection of relevant materials.



Consider Alternative Forms of Stipend-Facilitated Staff Support Alongside Agency Funding Increases

Beyond injection of funding to agency budgets, current issues surrounding staffing capacity may be mitigated through more direct forms of allocation, such as those facilitated through direct stipends relying on resources outside of American Rescue Plan Act-originating resources. As one example, Nebraska's Department of Health and Human Services recently leveraged Coronavirus Response and Relief Supplemental Appropriations Act (CRRSA) money toward the creation of The Workforce Recognition Stipend.[2] This Stipend allowed for individuals working in Nebraska's child care workforce to access sums of money similar to a bonus in recognition for their role in this sector. An analogous recognition stipend directed toward those working in Nebraska's intimate partner and sexual violence response community would help to support staff who have continued this work throughout the pandemic.

[2] For more information surrounding this example Workforce Recognition Stipend, see Nebraska's DHHS' documentation "[FAQs for the Workforce Recognition Stipend and Student Loan Repayment Programs](#)".

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Appendix

Survey Mechanism

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Survey Mechanism

Nebraska's DV/SA Response Community:

A Needs Assessment Concerning Allocation of American Rescue Plan Resources

Purpose of Questionnaire

The purpose of this questionnaire is to gather input from individuals who are involved or associated with Nebraska's domestic violence & sexual assault (DV/SA) response community. More specifically, we're interested in learning about your perspective concerning how our state's response community can be strengthened after the impacts and changing landscapes introduced by COVID-19.

This questionnaire is one component of a broader research project being conducted to inform the allocation of American Rescue Plan resources directed at domestic violence & sexual assault. Your responses here today will ultimately contribute to decisions surrounding how grant dollars will be used to improve the ability of our state's DV/SA response community.

If you are involved or associated with our state's DV/SA response community, we would greatly value your insight as it would help us to improve our community's ability to serve survivors.

Throughout the questionnaire, we will not ask for your name or identify your response with you individually in any way. Your answers will be combined with responses from others and reviewed as a group.

Given the purpose of this project, some of the questions are fairly detailed. Please anticipate allowing yourself about 20 to 30 minutes to complete the survey. If you feel a particular question is not relevant to you, feel free to skip it. That said, please try to answer each question with as much detail as possible. Again, your input is greatly appreciated and will help our community make important decisions surrounding resource allocation & agenda setting, and ultimately improve our ability to serve survivors.

Relationship to Nebraska's DV/SA Community

In this section, we hope to learn a little bit about how you fit into Nebraska's DV/SA response community.

1. What agency do you work with?
2. Does your work encounter or support survivors of sexual assault or domestic violence (directly or indirectly)? What is your role?
3. How long have you been working in a capacity related to sexual or domestic violence?

Complications of Effective Response

Across contexts, effective responses to DV/SA have been complicated as a result of factors related to the pandemic & the current environment. The following questions seek to learn more about how complications unfolded in our own community, based on your own experiences and your role within Nebraska's DV/SA response community overall.

4. How would you describe your current ability to offer effective services to survivors of domestic violence and/or sexual assault?
5. How have you seen factors related to the pandemic impact your ability to effectively provide services to survivors? To what degree have these factors continued to persist or evolve?
6. How has the pandemic impacted your service provision within the context of domestic violence versus sexual assault?

Obstacles to Service Seeking

7. Currently, what do you see as the most significant barrier or impediment to survivors' efforts of service-seeking?
8. What new or exacerbated barriers to service-seeking have survivors faced as a result of the pandemic? To what degree have these factors continued to persist or evolve?
9. How has the pandemic impacted barriers to service-seeking experienced by survivors within the context of domestic violence versus sexual assault?
10. Currently, what do you see as the most significant unmet needs of survivors?
11. What changes in survivors' needs have you observed as a result of the pandemic? To what degree have these factors continued to persist or evolve?
12. How has the pandemic impacted survivors' needs within the context of domestic violence versus sexual assault?

Forms of Adaptation

In response to factors related to the pandemic and the current landscape, many agencies & individuals in DV/SA response communities have tried to adapt in various ways to ensure continued access to services for survivors. The following questions seek to learn more about the various forms of adaptation that have occurred in our community in response to factors related to the pandemic & the current environment, based on your own experiences and your role within Nebraska's DV/SA response community overall.

Shift to Virtual/Remote Services

13. To what degree have you experienced an emphasis on virtual or remote services in your own agency?
14. What successes have you experienced with regard to the recent emphasis on virtual or remote services?
15. What complications or difficulties have you experienced with regard to the recent emphasis on virtual or remote services? What might help to resolve these complications?

APPENDIX

16. How have your experiences with implementing virtual or remote services differed between working with survivors of domestic violence versus sexual assault?

Other Forms of Service Adaption

17. Beyond shifts to virtual or remote delivery, in what other ways have your services adapted to factors related to the pandemic?
18. What successes have you experienced with these efforts to adapt? What has worked well?
19. What complications or difficulties have you experienced with these efforts to adapt?
20. How have these efforts to adapt service provision to factors related to the pandemic differed between working with survivors of domestic violence versus sexual assault?

Personal Adaptations to Changing Landscapes

21. Consider your own personal experiences of navigating recent changing landscapes. How have factors related to the pandemic impacted your ability to respond to survivors? For example, many practitioners across contexts have reported complications stemming from increases in personal & occupational stress, interpersonal tensions, burnout, and difficulties maintaining staff.
22. Thinking about these factors affecting your role and experiences specifically, what has worked well for you in terms of continuing to respond to survivors effectively in the current landscape? What hasn't worked well?

Broader Agency/Organizational Adaptations to Changing Landscapes

23. Thinking about your agency or organization overall, to what degree have broader organizational changes been made in response to factors related to the pandemic?
24. What's worked well about these broader organizational adaptations? What hasn't worked well?

Current Avenues for Improvement

Beyond gaining an in-depth understanding of current obstacles faced by Nebraska's DV/SA response community, the current questionnaire is intended to facilitate informed decision-making regarding the future allocation of resources and agenda-setting within Nebraska's DV/SA response community. That said, the following questions seek to learn more about your sense of what ought to be prioritized to improve Nebraska's DV/SA response efforts, with special attention paid to factors related to the pandemic & the current environment.

Policy/Agenda Priorities

25. Thinking about your role individually, what policies or processes could be implemented or modified to best support you in continuing to serve survivors in the current landscape?
26. Thinking about our community's response to domestic violence and sexual assault overall, what focus areas, policies, or processes should be emphasized to better serve survivors in the current landscape? Please be as specific as possible.

APPENDIX

Resource Allocation & Funding Priorities

27. Thinking about your role individually, how could additional resources or funding be used to best support you in continuing to serve survivors in the current landscape?
28. Consider our community's response to domestic violence and sexual assault violence overall. Where best could additional resources or funding be allocated to improve our ability to serve survivors in the current landscape? This could involve funding specific tangible efforts or focusing resources toward a broader issue area. Please be as specific as possible.

Meaningful Partnerships

29. What sort of agencies or institutions could the DV/SA response community benefit from establishing stronger partnerships with, given the factors related to the pandemic & the current landscape? In an ideal world, what would those partnerships look like?
30. Thinking specifically about local health departments and healthcare providers, what sort of improvements could be surrounding these agencies' relationships and partnerships with the DV/SA response community?

Non-Priority Areas

31. Thinking about your role individually, what potential forms of support would you view as not especially helpful in the current landscape?
32. Thinking about our community's response to DV/SA overall, what are some examples of non-priority areas for future agendas and resource allocation? In other words, what in your opinion would not be a good use of time or resources in supporting survivors in the current landscape?

Underserved Populations

Note: By "Underserved Populations", we are referring to populations who face barriers in accessing and using victim services, and includes populations underserved because of geographic location, religion, sexual orientation, gender identity, underserved racial and ethnic populations, and populations underserved because of special needs including language barriers, disabilities, immigration status, and age. Individuals with criminal histories due to victimization and individuals with substance use disorders and mental health issues are also included in this definition.

33. Which underserved populations have been most significantly affected by factors related to the pandemic & factors associated with the current landscape? In what ways have the survivors of these communities been impacted?
34. How could changes to policy priorities or resource allocation be leveraged to address the needs of DV/SA survivors within Nebraska's underserved populations?