A Fund for Healing

VOCA Grants for Violence Reduction
Executive Summary

Foreword

Section 1: The Needs of Gun Violence Victims in America

Section 2: Overview of VOCA Victim Assistance Funds

Section 3: Directing VOCA Dollars to Gun Violence Victim Services

Conclusion

Appendix A: VOCA Victim Compensation Funding
Foreword

Everytown for Gun Safety Support Fund and Cities United are proud to present “A Fund for Healing: VOCA Grants for Violence Reduction,” a practical guide to getting much-needed resources into the communities most impacted by gun violence.

Keeping individuals, families, and communities safe, healthy, and hopeful requires an all-hands-on-deck approach. It also requires that we use every resource we have at our disposal. This report has identified an underutilized resource, VOCA victim assistance funding, and lays out recommendations for cities, hospitals, and community-based organizations to utilize this resource to help victims of gun violence heal and to stem the cycle of violence.

If deployed correctly, VOCA victim assistance funds will provide significant resources to support victims of gun violence by expanding current efforts, building new ones, and helping communities long impacted by gun violence to begin the healing process.

We are grateful to the community groups and individuals who helped us to develop this report. We look forward to working with them to increase funding for services to gun violence victims and we hope you will join us in our efforts.

Anthony Smith
Executive Director
Cities United

Michael-Sean Spence
Director, Policy and Implementation
Everytown for Gun Safety Support Fund
Executive Summary

Half of all gun homicides in the United States take place in just 127 cities.¹ Often, gun violence within these cities is concentrated in Black and Brown neighborhoods shaped by long-term underinvestment.² The high rates of gun violence in urban pockets impact residents and exacerbate their need for assistance services in the aftermath of gun violence.

Adequate funding is essential to providing robust, sustainable services to victims of gun violence. Local community-based organizations have been delivering these critical services for years, healing families and communities while preventing future gun violence.³ However, these local organizations are often under-resourced⁴ and require additional funding to expand and sustain their positive impact.

Since 2015, the federal government has allocated an annual average of $2.3 billion in Victims of Crime Act (VOCA) victim assistance funds to states and territories.⁵ But states routinely fail to spend up to a third of available funds even as gun violence victims and their communities are in desperate need of resources.⁶ This failure to invest in gun violence victim services is a missed opportunity by states to serve victims, interrupt the cycle of gun violence, and reduce gun violence overall.⁷

Everytown for Gun Safety Support Fund and Cities United have identified federal VOCA victim assistance grants as a bountiful but underutilized resource for gun violence intervention services. This report details plans of action for states, cities, hospitals, and community-based organizations to utilize this funding for communities impacted by gun violence. If followed, these recommendations would reverse the historical failure of states to dedicate VOCA victim assistance dollars to gun violence victim services and enable them to seize an opportunity to make our communities safer, healthier, and more hopeful.

Over the course of six months, Everytown and Cities United spoke with local organizations serving victims of gun violence about their experience with VOCA victim assistance funds. Some community-based organizations were unfamiliar with VOCA victim assistance funding as an available resource. Many that did know about the funds had difficulty obtaining them, while others did not have the capacity and infrastructure to comply with the grant requirements. Still others advocated for years in front of state administrators before obtaining funding.

We also spoke with VOCA state administrators, some of whom were implementing innovative grant programs to drive funding to gun violence victims. These grant programs should serve as models for the majority of states who have failed to utilize the funding to address the needs of gun violence victims.

Everytown and Cities United found that VOCA victim assistance funding can and should be utilized to support services to gun violence victims and to help stem cycles of violence. Among the gun violence intervention services eligible for victim assistance funding are:
- Hospital-based violence intervention programs;
- Street outreach programs such as Cure Violence; and
- Trauma recovery centers

Recommendations

Based on our research and conversations with local organizations and state administrators, Everytown and Cities United developed the following recommendations:

States should drive funding to gun violence victim services by:
- Dedicating at least 10 percent of their annual VOCA victim assistance allocation to gun violence victim services;
- Releasing targeted grant proposals to fund gun violence victim services; and
- Selecting a conduit or pass-through entity specializing in gun violence victim services to select grant recipients.

Cities and hospitals should drive VOCA victim assistance funds to gun violence victim services by:
- Applying for funding in equitable partnership with community-based groups to quickly connect victims to services while easing the administrative burden of grant compliance for community organizations.

Community-based organizations should access VOCA victim assistance funds by:
- Applying for VOCA funding independently;
- Applying for VOCA funding in equitable partnership with other similar organizations, cities, or hospitals; and
- Advocating for the above state and city recommendations.

By working collaboratively, states, cities, and community-based organizations can direct VOCA victim assistance funds to services that benefit gun violence victims, protect communities, and address America’s gun violence crisis.
Section 1: The Needs of Gun Violence Victims in America

America’s gun homicide rate is tragic and unique—it is 25 times higher than that of other high-income countries. Gun homicides in the United States disproportionately occur in cities, where the burden falls heaviest on Black and Brown communities that face structural disadvantages such as poverty, housing scarcity, and racial segregation. Gun homicide disproportionately affects Black Americans, who are 10 times more likely than white Americans to die by gun homicide. Young Black Americans are 18 times more likely than young white Americans to be victims of gun violence. Gun violence in any form—whether a person witnesses an act of gun violence, is threatened or wounded with a gun, or has someone they know or care for wounded or killed—leaves a lasting impact on individuals and communities.

1—Gun Violence Victims Require Assistance

Approximately, 73,330 people are shot and wounded by firearms every year in the United States. These individuals and their loved ones face a long process of physical and emotional healing. Victim assistance services support victims, their families, and their communities through that process by providing medical and mental health care, criminal justice and legal advocacy, housing accommodations, and case management. (See Section 2 for more on VOCA victim assistance funding as a resource for these services.)

2—Victims of Gun Violence Are at Increased Risk of Revictimization and Entry into a Cycle of Violence

Services to gun violence victims don’t just help individuals heal, they can also interrupt cycles of violence in communities. When an individual is victimized by or exposed to violence, the likelihood that they will be victimized again, resort to carrying a gun, or engage in retaliatory gun violence increases. The trauma of experiencing violence can change how individuals respond to threats and increase their fear and desire to protect themselves, increasing their likelihood of engaging in violence. Individuals who have been shot or know someone who was shot, are more likely to report using a weapon on someone or threatening someone with a weapon than individuals who have no history of victimization.

Below are examples of gun violence intervention programs that serve the needs of gun violence victims and work to reduce subsequent violence.

Hospital-based Violence Intervention Programs

Hospital-based violence intervention programs (HVIPs) engage violently injured patients during or soon after their hospital stay to interrupt the cycle of violence at a critical moment in the victims’ lives. HVIPs can be based in trauma centers, emergency rooms, or other medical centers. HVIPs work with patients and families for months after a violent injury to reduce the chance of retaliation and violent injury recurrence. Participants are connected to a culturally competent violence intervention professional who first meets with them at the hospital bedside and continues to meet with them in their homes and neighborhoods to help them access mental health counseling, education, employment counseling, and other local support services. Case studies and quasi-experimental evaluations suggest that HVIPs are associated with decreases in violence and crime, reinjury rates, and associated financial costs.
February 25, 2018, is a date that will always bring pain and strength to my heart. It is almost a year since I was shot in the back. My boyfriend was taking me home, and someone came out from a hidden place, stood behind the car and shot straight towards the car. The bullet went through the back light, back seat, passenger seat and in my back. In my body, the bullet hit my pericardium, diaphragm, spleen and stomach. It also collapsed my left lung. I went through surgery, hospital stay, hospital visits and recovery. I still go through trauma, anxiety, depression and physical pain. I also have the shattered bullet in my body. I was only 19. I am nothing like I was before. Sometimes I fight hard to try to go back to how I was.¹⁵

— Kathy, Gun Violence Survivor
Vital Services for Victims of Gun Violence

Medical Care
Medical care is the most immediate need for a victim of gun violence. There are approximately 313,517 criminal firearm assaults every year, which includes instances where an individual is shot, shot at, threatened, or robbed with a firearm, or where a firearm is used as a bludgeon. Each week, an average of 700 people lose their lives to gun violence, and 1,410 are treated in an emergency department for a nonfatal gunshot wound. Medical care may be long- or short-term and may include surgery, physical therapy, and occupational therapy.¹⁶

Criminal Justice and Legal Advocacy
Following an incident of gun violence, a victim may require urgent legal assistance and criminal justice advocacy. Criminal justice advocacy can include accompaniment to meetings and court appearances, preparation of witness impact statements, and reminders of court dates. A victim may also have intersecting legal issues that require an attorney specializing in housing, family, or immigration law.

Mental Health Care
Children and adults exposed to firearm violence have elevated rates of post-traumatic stress disorder (PTSD), increased risk for substance abuse, and increased risk for other psychological symptoms that can interfere with daily living.¹⁷

Case Management
A case manager can help victims access the above services and any other necessary assistance. Case managers ensure that services are responsive to a victim’s needs and align with a victim’s schedule, location, ability, language, and culture. Case managers working in systems of integrated care, through which case managers directly connect victims to service providers in the same location or network, can address victim needs most efficiently.

Housing Accommodations
After a crime, many victims feel unsafe in their home or neighborhood. Victims may fear retaliation and witness intimidation or may experience trauma associated with the location where a violent crime occurred. Shelter or long-term housing assistance to relocate to a confidential location may be necessary to protect a victim from a perpetrator. Relocation may also be essential for victims who are unable to live comfortably in their home because of a new disability. Finding accessible, affordable housing and changing residences while also recovering from a gun injury requires assistance.
Improving Victims’ Access to Services

Too few victims of violent crime, including victims of gun violence, have access to beneficial services.

Victims who report to the police receive services at higher rates: from 2000 to 2009, 14 percent of victims who reported to the police received services, while 4 percent of victims who did not report received services.

A smaller number of serious violent crime victims received services in 2009 than in 1993.

Rural residents receive services at somewhat higher rates: 12 percent of rural residents receive assistance, compared to 8 percent of those in urban areas.

Victims of serious intimate partner violence receive assistance at higher rates than victims of other violent crimes: 23 percent of intimate partner violence victims, compared to 8 percent of other serious violent crime victims.

From 1993 to 2009, 9 percent of victims of serious violent crime received assistance from a victim services agency.

Although men are more likely to be violently victimized, women are more likely to report receiving services: from 2000 to 2009, 15 percent of female victims received services, while 6 percent of male victims received services.
Street Outreach Programs
Street outreach programs utilize a public health approach to violence intervention, working to prevent gun violence and interrupt the spread of violence in communities. These programs utilize trained, culturally competent violence interrupters and outreach workers in communities that are routinely exposed to and impacted by gun violence and other forms of intentional interpersonal harm. They engage individuals who are at highest risk of becoming involved in gun violence, work with community members to de-escalate and mediate conflicts, and provide services to communities in the aftermath of violence. Street outreach evaluations reveal mixed impacts on gun/violence, with some sites experiencing significant improvements.

Trauma Recovery Centers
Trauma recovery centers differ from HVIPs in that they provide care only while the individual is hospitalized, but the two models can function in tandem. Trauma recovery centers were created to restore the mental and physical health of trauma victims who have been historically underserved by traditional mental health programs. The model was explicitly designed for survivors of violent crime and allows victims to access integrated services, including therapeutic and psychiatric care and case management.

A study of a trauma recovery center's impact found that compared to individuals who received standard care, individuals receiving care at a trauma recovery center had better mental and physical health outcomes. Victims were less likely to experience homelessness and more likely to be employed. Eighty-two percent of trauma recovery center patients had improved physical health. These are worthwhile ends in and of themselves and can also reduce the likelihood of revictimization.

Case Study: The TraRon Center, Washington, DC
The TraRon Center is an example of a gun violence victim service provider that supports communities impacted by gun violence. The center provides group sessions and peer-to-peer interactions for adults experiencing trauma related to gun violence, as well as a creative-arts summer camp and after-school programs for children impacted by gun violence. These programs help community members express their grief and develop solutions to community gun violence.

Gun Violence Victim Services Programs
There are many other successful program models that serve victims of gun violence while also disrupting the cycle of gun violence. Among the services offered in the aftermath of gun violence are: responding to a crime scene to assist family and community members; assisting victims in applying for victim compensation; providing information and referrals; providing mental health services; and canvassing neighborhoods to offer trauma services and support to communities.

These gun violence intervention programs need to be properly resourced to maintain and increase access to necessary services linked to reducing gun violence. States must increase funding to programs serving gun violence victims. The following sections will provide an overview of VOCA victim assistance funding and the program models that are eligible for victim assistance funding.
Section 2: Overview of VOCA Victim Assistance Funds

VOCA victim assistance funds are an underutilized resource to provide vital services to victims of gun violence. Communities in which gun violence is concentrated often face historical underinvestment and lack funding to provide services to victims. Advocates within these communities, many of whom have been personally impacted by gun violence, were among the first to call on states to resource gun violence victim services with VOCA funds.

1—VOCA Funding Streams
VOCA funding is federal funding sourced from the Crime Victims Fund, which is financed from federal criminal fines and fees, not tax dollars. VOCA funding finances the victim compensation grant program and the victim assistance grant program. This report will focus only on the victim assistance grant program as a means of funding gun violence intervention programs. For additional information about VOCA victim compensation, please refer to Appendix A.

2—Victim Assistance Programs
VOCA victim assistance grants fund programs that provide direct assistance to victims of crime. Each year, the federal Office of Victim Services, which oversees VOCA funds, allocates VOCA victim assistance funding to states and territories based on population size. Each state and territory is then responsible for granting the funding to public agencies and nonprofit organizations (e.g., state or city government agencies and community-based service providers) that provide direct assistance to victims of crime.

Beginning in 2000, Congress issued a cap on annual appropriations from VOCA’s victim assistance funding source, the Crime Victims Fund. In 2015, Congress raised the cap, and more money became available for states to fund victim assistance programs. Since the 2015 cap increase, states have received substantially higher VOCA victim assistance allocations. In fiscal year 2014, the total victim assistance allocations to all states and territories was $455,789,902. Between fiscal years 2015 and 2019, the average total allocation to all states and territories was over $2.3 billion. See graph 1 on next page.

However, states have had difficulty spending the entirety of their VOCA victim assistance allowances. A 2019 audit by the US Office of the Inspector General examining distribution of VOCA funds found that as of February 2018, states collectively had nearly $599 million remaining of their fiscal year 2015 victim assistance allocations. The audit also found that as of April 2019, 12 states had failed to draw down any of their fiscal year 2017 victim assistance funds, and all states had a collective balance of 80 percent of their fiscal year 2017 victim assistance funds. If states do not spend down their annual allocation within four years, the funds are returned to the Crime Victims Fund.
3—States Are Responsible for Allocating Funding to Victim Assistance Providers

The governor of each state and territory designates a state agency as the VOCA state administering agency (SAA). SAAs have latitude to designate a “conduit” or “pass-through” entity to select VOCA victim assistance recipients in accordance with federal VOCA rules. The SAA or its conduit allocates funding by releasing requests for proposals (also called requests for applications, notices of funding availability, or other similar names) to which applicants seeking funding must respond with a proposed program plan and budget.

SAAs or their conduits have broad discretion to allocate VOCA victim assistance funding. Federal rules require that states prioritize grants of at least 10 percent of their victim assistance funds to each of the following categories: (1) victims of sexual assault; (2) victims of domestic abuse; (3) victims of child abuse; and (4) victims of crime who have been previously underserved. States have the discretion to choose what victim categories or populations should be categorized as underserved. The remaining 60 percent of victim assistance funding may be granted to organizations of each state’s choosing that comply with federal VOCA eligibility rules.
4—VOCA Victim Assistance Eligibility Requirements

Organizations operated by public agencies, nonprofit organizations, or a combination of both, and that provide direct services to crime victims, are eligible for VOCA victim assistance grants. A public agency is operated by the state or city government. Examples of public agencies include state or city agencies, police departments, and district attorneys’ offices, among others. A public agency or nonprofit organization that receives VOCA victim assistance funding is commonly referred to as a “subrecipient.”

Establishing eligibility for VOCA victim assistance funds and managing compliance with the funding can be complex for smaller organizations without an established infrastructure for grant administration. Table 1 on the following page details the eligibility and administrative requirements for these grants. Section 3 of this report details how community-based organizations can most effectively prepare for management of these grants.

Victim assistance grants must support specific direct assistance to victims of crime. VOCA defines direct assistance as assistance that:

• responds to the emotional, psychological, or physical needs of crime victims;
• assists victims with stabilizing their lives after victimization;
• assists victims with understanding and participating in the criminal justice system; or
• restores a measure of security and safety for the victim.

Table 2 on page 15 includes examples of the types of victim assistance that are eligible for VOCA victim assistance grants.

VOCA also details assistance and expenses that cannot be funded by victim assistance grants. Among these “unallowable costs” are: lobbying, research and studies, investigation and prosecution of criminal activities, fundraising, capital expenses, and medical care.
Federal Rules for Eligibility

 Victim Eligibility
VOCA defines a “victim of crime” as a person who has suffered physical, sexual, financial, or emotional harm as a result of the commission of a crime. The impacted person need not be the primary victim.

A program that serves victims with a history of criminal behavior or convictions can qualify for victim assistance funding.  

Table 1

Subrecipient Eligibility 53

- Must be a public agency or nonprofit organization
- Must provide free services to crime victims (the types of services are limited; see Table 2)
- Must demonstrate a record of providing effective services to crime victims
- Must match 20% of total cost of VOCA project (cash or in-kind) 54
- Must utilize volunteers 55
- Must maintain records of personnel, materials, equipment, space, and volunteer services
- Must promote coordinated efforts to aid crime victims (i.e., participate in task forces, commissions, working groups, coalitions)
- Must help victims apply for VOCA compensation benefits
- Must comply with federal rules regulating grants (e.g., daily time and attendance records, client files, job descriptions, contracts, and other records for auditing purposes)
- Must maintain civil rights statistics on victims served 56
- Must comply with federal reporting requirements and any additional state criteria and reporting requirements
<table>
<thead>
<tr>
<th>Types of Assistance Eligible for VOCA Victim Assistance Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental health counseling and care</strong></td>
</tr>
<tr>
<td>• Outpatient therapy/counseling by a licensed or certified professional</td>
</tr>
<tr>
<td><strong>Peer-to-peer support</strong></td>
</tr>
<tr>
<td>• Opportunities for victims to meet other victims, share their experiences, and provide support to one another</td>
</tr>
<tr>
<td><strong>Facilitation of participation in criminal justice and other public proceedings arising from a crime</strong></td>
</tr>
<tr>
<td>• Advocacy on behalf of the victim</td>
</tr>
<tr>
<td>• Court and other, related accompaniment</td>
</tr>
<tr>
<td>• Notifications to the victim regarding key proceedings</td>
</tr>
<tr>
<td>• Assistance with victim impact statements</td>
</tr>
<tr>
<td><strong>Personal advocacy and emotional support</strong></td>
</tr>
<tr>
<td>• Assisting the victim to assess impact of the crime</td>
</tr>
<tr>
<td>• Identifying the victim's needs</td>
</tr>
<tr>
<td>• Case management</td>
</tr>
<tr>
<td>• Information, referrals, advocacy, and follow-up contact for continued services as needed</td>
</tr>
<tr>
<td>• Traditional, cultural, and/or alternative therapy/healing</td>
</tr>
<tr>
<td><strong>Immediate emotional, psychological, and physical health of the victim</strong></td>
</tr>
<tr>
<td>• Crisis intervention</td>
</tr>
<tr>
<td>• Emergency food, shelter, clothing, and transportation</td>
</tr>
<tr>
<td>• Repairs necessary to ensure the victim's safety (window, door, or lock replacement)</td>
</tr>
<tr>
<td>• Hotline counseling</td>
</tr>
<tr>
<td>• Safety planning</td>
</tr>
<tr>
<td>• Legal assistance to ensure the health and safety of the victim (e.g., criminal justice, family, immigration, housing)</td>
</tr>
<tr>
<td><strong>Legal assistance</strong></td>
</tr>
<tr>
<td>• To protect the safety, privacy, or other interests of the victim in criminal proceedings</td>
</tr>
<tr>
<td>• Actions reasonably necessary as a direct result of victimization</td>
</tr>
<tr>
<td><strong>Forensic interviews</strong></td>
</tr>
<tr>
<td>• To obtain information about the crime and assess the safety of the victim</td>
</tr>
<tr>
<td>• To assess the need for medical or mental health care</td>
</tr>
<tr>
<td><strong>Transportation</strong></td>
</tr>
<tr>
<td>• To and from services</td>
</tr>
<tr>
<td>• To and from criminal proceedings related to victimization</td>
</tr>
<tr>
<td><strong>Public awareness</strong></td>
</tr>
<tr>
<td>• Public awareness and education presentations in schools, community centers, and other public forums that are designed to inform crime victims of rights and services and provide them with referrals to services</td>
</tr>
<tr>
<td><strong>Transitional housing</strong></td>
</tr>
<tr>
<td>• For victims who cannot return to their previous housing as a result of their victimization</td>
</tr>
<tr>
<td><strong>Relocation</strong></td>
</tr>
<tr>
<td>• When necessary for the safety and well-being of the victim</td>
</tr>
<tr>
<td><strong>Forensic medical evidence collection examinations</strong></td>
</tr>
<tr>
<td>• To analyze DNA evidence following a crime</td>
</tr>
</tbody>
</table>
Section 3: Directing VOCA Dollars to Gun Violence Victim Services

Across the country, hospitals and community-based organizations are providing services to gun violence crime victims. These services are eligible for VOCA victim assistance grants, and states would benefit from using these grants to bolster and expand existing services to meet the needs of gun violence victims. States received over $2.25 billion in VOCA victim assistance grants in 2019 but have generally struggled to efficiently spend down their victim assistance funding. A 2019 federal audit of state spending found that, in aggregate, states had failed to spend 37 percent of 2016 victim assistance allocations. Left unspent, these 2016 allocations expired, the funds were required to be returned to the federal government, and states missed an enormous opportunity to fund critical gun violence intervention programs.

Dedicating VOCA victim assistance grants to gun violence intervention programs will be novel in many states. This section is intended to be a roadmap for states, cities, hospitals, and local community groups to impactfully and equitably drive VOCA funding to gun violence victim services. It demonstrates that gun violence intervention programs are VOCA-eligible and outlines plans to direct VOCA victim assistance funding to gun violence victims.

1—Gun Violence Intervention Programs Are Eligible for VOCA Victim Assistance Grants

Table 3 on the following page shows how four broad categories of gun violence service providers qualify for VOCA victim assistance funds. The categories in Table 3 on the following page are not the only gun violence intervention programs eligible that qualify for VOCA victim assistance funding. Many organization models that provide direct services to crime victims are eligible. The following section discusses how states, cities, hospitals, and local organizations should work collaboratively to navigate VOCA victim assistance funding requirements and drive VOCA victim assistance dollars to vital services for gun violence victims.

2—Collaborating on the State, City, and Local Levels to Successfully Unlock VOCA Funding

States should utilize these federal resources to fund collaborative and equitable partnerships between cities, hospitals, and community-based organizations operating in the Black and Brown communities most impacted by daily gun violence. By promoting these partnerships, states can ensure that organizations with a history of effective service provision can successfully access and manage the funding.

State Spending of Victim Assistance Allocations in 2016

- 37% Failed to spend
- 63% Spent
### Table 3

<table>
<thead>
<tr>
<th>Gun Violence Intervention Programs That Are VOCA-Eligible</th>
<th>Hospital-based Violence Intervention Programs</th>
<th>Street Outreach Programs</th>
<th>Trauma Recovery Centers</th>
<th>Gun Violence Victim Services</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immediate emotional, psychological, and physical health of the victim</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
</tr>
<tr>
<td>Crisis intervention</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Safety Planning</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Addressing physical and mental health</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal advocacy and emotional support</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
</tr>
<tr>
<td>Case management</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information, referrals, follow-up</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Identifying victim needs</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Assessing impact of crime on victim</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mental health counseling</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Outpatient therapy</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May provide outpatient therapy</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Peer-to-peer support</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
<td>⬤</td>
</tr>
<tr>
<td>Peer counseling</td>
<td>⬤</td>
<td>⬤</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public awareness</td>
<td>⬤</td>
<td>⬤</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Educating shooting victims, their families, and the community about the cycle of violence</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engaging with communities disproportionately impacted by gun violence before and after violence occurs</td>
<td>⬤</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
A. State Recommendations:

States Should Direct Funding to Services for Gun Violence Victims. State administering agencies determine how VOCA victim assistance funds are distributed and to whom the funding is granted. States should ensure that the reserves of VOCA victim assistance funding are directed to gun violence victims by (1) committing at least 10 percent of VOCA victim assistance funding to gun violence victim assistance programs; (2) creating targeted grant programs to fund gun violence intervention services; and (3) designating a conduit or pass-through entity specializing in gun violence to select funding recipients serving to the needs of gun violence victims.

States Should Commit at Least 10 Percent of VOCA Victim Assistance Funding to Gun Violence Victim Assistance Programs. States are not spending down their annual VOCA victim assistance allocations and have VOCA victim assistance reserves that could be utilized to fund services for gun violence victims. If all 50 states committed ten percent of their 2019 VOCA victim assistance funds to gun violence victim services, they could unlock $225 million for victims of gun violence.

The following states receive the highest VOCA victim assistance funding. These states also contain large cities with high rates of violent crime, including gun violence. In 2019, if these states had dedicated 10 percent of assistance funding to gun violence victim services, the amount available would have been:

- **$26.6 million** in California
- **$19.3 million** in Texas
- **$13.2 million** in New York
- **$14.3 million** in Florida
- **$8.6 million** in Pennsylvania

These examples demonstrate the impact of dedicating even ten percent of VOCA victim assistance grants to gun violence victim services. However, each state should assess whether dedicating in excess of 10 percent is necessary to adequately resource gun violence intervention work and reduce the impact of gun violence in the state.

States Should Create Targeted Requests for Proposals to Fund Services in Black and Brown Communities Disproportionately Impacted by Gun Violence. States should design requests for proposals designating a portion of available VOCA victim assistance funds to services for victims of gun violence. States should create grant programs to specifically fund hospital-based violence intervention programs, trauma recovery centers, and services to Black and Brown communities most impacted by gun violence. States should also require cities and hospitals to propose projects in partnership with local community-based organizations. States should ensure that proposals include fair allocation to community-based organizations and reflect the expertise of these organizations.

While utilizing VOCA victim assistance grants to fund violence intervention services is not widespread, several states have implemented such innovative VOCA victim assistance grant programs. These proposals should be publicized widely, and the states should conduct intentional outreach to gun violence intervention organizations to ensure those who are experienced and eligible know when and how to apply. State administrators should also consider providing technical assistance to organizations during the application process and as organizations adapt to compliance with grant funding requirements.
States Should Designate a Conduit or Pass-through Organization Familiar with the Needs of Gun Violence Victims to Select VOCA Victim Assistance Recipients.

Federal law permits state administering agencies to designate a conduit or pass-through entity to select and manage VOCA victim assistance grants to public agencies and nonprofit organizations. For example, in Illinois, the VOCA state administering agency is the Illinois Criminal Justice Information Authority (ICJIA). ICJIA has selected conduits through which to pass funding for services to victims of domestic violence, victims of sexual assault, and victims of child abuse. These conduits, the Illinois Coalition Against Domestic Violence, the Illinois Coalition Against Sexual Assault, and Children's Advocacy Centers of Illinois, each receive a large portion of VOCA victim assistance funding which they then grant to public agencies and nonprofit organizations. The conduits are experts in the field of services they fund and use their expertise to determine where to direct VOCA victim assistance. To best address the needs of victims in Black and Brown communities disproportionately impacted by gun violence, states can select a conduit representative of these communities with a history of grant management experience and of working in equitable partnership with community-based organizations. By designating a conduit or statewide entity familiar with gun violence victim services, states will ensure that VOCA victim assistance grants are granted to those organizations providing the most impactful services.

B. City Recommendations:

Cities Should Partner with Community-Based Organizations Already Serving Gun Violence Victims. City agencies are eligible for VOCA victim assistance funds and are in an ideal position to manage the administrative requirements imposed by the federal VOCA rules. Unlike smaller or newly formed community-based organizations, cities have an infrastructure and record of service so they can readily apply for VOCA victim assistance and manage grant compliance. Cities should utilize their position and capacity to assist community-based organizations that have been working with victims of gun violence.

Cities should partner with community-based gun violence intervention groups to implement VOCA-eligible victim assistance programs. Cities are ideal partners to community-based gun violence intervention organizations that are eligible for funding but may not have the capacity to manage the grant. Community-based organizations will contribute their knowledge of communities, their established relationships, and their local leadership to the partnership, and cities will contribute their established grant management infrastructure. Cities are already utilizing VOCA victim assistance funding to resource, among other things, advocates within district attorneys' offices and child advocacy centers.

A city should undertake this partnership by jointly applying for VOCA victim assistance funds with one or more community-based organizations. A city agency should be the primary grant recipient, responsible for the application and compliance process, while the community-based organization(s) should act as contractor, utilizing the shared VOCA funds to support and expand their staff and services to gun violence victims.

In partnering with community-based organizations, cities must commit to equitable relationships, which includes fair compensation, clear lines of communication and delineation of responsibility, and joint decision-making.

City and university hospitals should apply for funding for hospital-based violence intervention programs. Like city agencies, city and university hospitals should partner with local gun violence intervention organizations to form VOCA-funded hospital-based violence intervention programs or trauma recovery centers. Hospitals are able to manage grant applications and compliance while also providing medical and mental health care to gun violence victims. In the case of hospital-based violence intervention programs, hospitals should directly hire violence prevention professionals to provide intensive case management at the hospital and in the victim's community. In hospital-linked violence intervention programs, partner organizations receive VOCA victim assistance funding to provide crisis intervention and culturally competent case management at the hospital and in the victim's community.
**State Case Studies**

**Connecticut**
In 2019, the Connecticut state administering agency released a $2 million VOCA victim assistance grant specifically for services to “urban populations most impacted by crime,” including racial or ethnic minorities and male victims of color in the cities of Bridgeport and Hartford. The grant was intended to enhance existing services provided by community-based agencies in Bridgeport and Hartford.

**New Jersey**
In 2019, New Jersey created the New Jersey Hospital-Based Violence Intervention Program (NJHVIP). NJHVIP will be funded entirely from VOCA victim assistance dollars. In January 2020, the state released $18 million to fund nine HVIPs and required that all sites consist of partnerships between a medical facility and one or more community-based organizations. The NJHVIP grant program enables a hospital or other eligible medical facility to be the “lead applicant” that manages the grant application, compliance, and reporting. Community-based partners can then focus on providing services without having to take on additional VOCA administrative responsibilities. Notably, the grant program requires an “equitable partnership between a medical institution and community-based organization,” which includes an equitable allocation of financial resources to the community-based organization.

**Illinois**
Illinois’ Trauma Recovery Center Grant funds two Level I Trauma Centers to provide coordinated clinical and case management services for victims of violent crime and their families. These evidence-based programs follow the Trauma Recovery Center (TRC) model created by Dr. Alicia Boccellari. TRCs provide a variety of victim services, including mental health counseling, financial and housing support, access to primary care, and legal advocacy. In 2018, Illinois made $2.2 million available and granted the funding in equal amounts to two medical centers serving the Chicago metropolitan area.
C. Community-Based Organization Recommendations:

Community-Based Organizations Should Apply for Funding Independently or in Partnership with Other Organizations. While community-based organizations may benefit from partnerships with city agencies and hospitals, these organizations should also apply for VOCA victim assistance grants on their own or in coalition with other local organizations. The below best practice recommendations are sourced from conversations with community-based organizations throughout the country who have applied for or received VOCA victim assistance funding.86

Advocate for funding with the state VOCA administering agency as well as local and state officials.87 Organizations providing assistance to gun violence victims should conduct coordinated outreach and advocacy to the state administering agency and other officials regarding the need for services to gun violence victims. States may need to be educated about the needs of gun violence victims and about the services eligible for VOCA victim assistance funding. Organizations should advocate for targeted requests for proposals to gun violence victims, for a conduit or pass-through entity with knowledge of gun violence intervention to select grant recipients, and for the administering agency to include gun violence organizations and victims in its strategic planning for fund disbursement.

Emphasize VOCA-eligible services when applying for funding. Organizations should feel empowered to apply for VOCA victim assistance funds even if not every service they provide is VOCA-eligible. Organizations should emphasize their VOCA-eligible services when applying for funding, clearly stating how they serve victims of crime, the need for their services, the impact of their services, and how the funding will be utilized to support or expand VOCA-eligible services.

Support proposals with data and evidence. VOCA victim assistance administrators seek to fund evidence-based services.88 Organizations should submit grant proposals that not only highlight their services, but also link these services to available research or data that demonstrates that their service model is likely to positively impact victims and communities.

Prepare for VOCA compliance before a Request for Proposal release. VOCA victim assistance funding recipients must comply with state and federal rules. Rather than rush to comply with these rules during the application phase, applicants should familiarize themselves with the process in advance. For example, the organization should be prepared to maintain financial disbursement records, staff time sheets, client files, job descriptions, and other documentation that may be required during an audit, in addition to any documentation required by the state.91 To learn more about the application process, organizations should attend pre-bid conferences hosted by the state administering agency or speak with VOCA grant recipients in their region.

Optimize organizational capacity for compliance with reporting requirements. Organizations should have a plan in place for fiscal and programmatic reporting requirements. Organizations must be able to track the number of clients served, the types of services provided, and the demographics of clients served. Additionally, organizations must be able to track the hours their staff and volunteers dedicate to VOCA-funded services. Some organizations may opt to track this data with spreadsheets, while others may invest resources in a client and/or staff tracking system. Organizations should engage in capacity-building training if possible.

Partner with the community to strengthen applications and organizational infrastructure. Organizations without expertise in grant proposal writing or grant reporting may look to outside partners for assistance. Local universities, graduate students, or nonprofit organizations may be available to assist organizations in drafting grants, developing internal policies and procedures, creating templates for data tracking, and evaluating the impact of services. Organizations may also partner with larger organizations providing similar or intersecting services. These larger organizations may have more experience applying for and managing grants and can be a great resource to smaller or newer organizations. Larger organizations must commit to an equitable partnership for this working relationship to be effective.

The above recommendations are not exhaustive. States, cities, and community-based organizations should work in coalition to identify creative and efficient mechanisms to drive VOCA victim assistance dollars to gun violence intervention services.
Case Study: Temple University Hospital
In Philadelphia, Temple University Hospital was awarded VOCA victim assistance funds to create a crisis response team to coordinate services to communities impacted by gun violence throughout the city. Services providers include in-hospital responders, case managers, victim advocates, and behavioral therapists. Temple University Hospital applied for the funding with a local community-based organization that was already providing coordinated services to communities impacted by gun violence in Philadelphia. The hospital serves as the primary VOCA recipient, submitting grant reports and ensuring compliance, while sharing the funds with its community partner organization to ensure integrated service delivery within the hospital and community.85
Case Study: Hartford Communities That Care, Hartford, CT

Hartford Communities That Care supports youth and families that have been adversely affected by homicides, nonfatal shootings, and domestic violence. Andrew Woods, the Executive Director of Hartford Communities that Care first applied for VOCA victim assistance funding in 2016, but his application was rejected. The Connecticut VOCA administering agency informed Woods that his funding request was too high for the services he proposed to provide. Woods realized that OVS did not grasp the investment required to engage with and sustain relationships with communities who may mistrust local systems and organizations.

Although Woods was frustrated with the rejection, he was committed to receiving VOCA funding. With the goal of directing funding earmarked for underserved populations to victims of color and victims of gun violence, Woods began educating state and local officials, about gun violence and its disproportionate and devastating impact on boys and men of color.

Woods’s advocacy was incredibly successful. In January 2019, the Chief Justice of the state supreme court appointed Woods to the Advisory Council for Victims of Crime, which meets several times per year to make recommendations to improve services to crime victims. Woods was also instrumental in the March 2019, grant Connecticut released for “urban populations most impacted by crime.”

In July 2019, Hartford Communities That Care was awarded VOCA victim assistance funds. Woods received the entire funding amount he requested, $694,421, and is using the funding to support a hospital-based violence intervention program in Hartford, Connecticut.
Case Study: Louis D. Brown Peace Institute, Dorchester, MA

The Louis D. Brown Peace Institute (“Peace Institute”) first applied for VOCA victim assistance funding around the time of its founding in 1994. At that time, the Peace Institute was partnering with schools to teach a curriculum centered around supporting individuals and communities impacted by homicide and equip teachers with the tools to discuss murder, trauma, grief and loss—which all of their students were experiencing. The Peace Institute’s request for VOCA victim assistance funding was denied because the school program was not considered a direct service for VOCA victim assistance purposes.

Over the next twenty years, The Peace Institute expanded their service model. The Boston Police Department, City of Boston and other agencies began referring survivors of homicide victims, in the immediate aftermath of a homicide, to the Peace Institute for support and services. The Peace Institute partnered with the Boston Public Health Commission to form Survivors Outreach Services (SOS), which provides coordinated services to survivors throughout the Boston metropolitan region.

In 2014, the Peace Institute obtained victim assistance funding by altering their application strategy. Rather than weighting their proposal in descriptions of their services, the Peace Institute’s 2014 proposal relied heavily on research and evidence-informed support. The organization cited to the Center for Disease Control’s Framework for Violence Prevention and detailed how their service model complied with CDC recommendation that interventions are needed at multiple levels to interrupt cycles of violence.

Since 2014, the Peace Institute has received VOCA victim assistance funding every grant cycle and has positioned itself as a state leader in services to survivors of homicide victims. In 2019, the Peace Institute received $925,831 in VOCA victim assistance funds.
Case Study: Kansas City Mothers in Charge, Kansas City, MO

Kansas City Mothers in Charge (KCMIC) works to reduce violent crime through prevention and intervention while also offering support and guidance to the families of homicide victims. When KCMIC applied for victim assistance funding in 2017, KCMIC had only one full-time staff member and a part-time administrative coordinator. As an organization, KCMIC was just three years old. At the time, KCMIC tracked client information and service delivery on paper. KCMIC was aware that there were many improvements that could be made in regards to tracking client information and service delivery, such as purchasing client database software. KCMIC was also aware that it needed to expand its program staff to assist with service delivery.

KCMIC did not receive VOCA funding in 2017, but was determined to qualify for funding in the future. From 2017 to 2019, KCMIC doubled its staff, including hiring an Outreach Specialist. In 2019, to bolster its capacity and organizational infrastructure, KCMIC contracted with the Midwest Center for Nonprofit Leadership, an outreach unit of the University of Missouri-Kansas City, to assist KCMIC in producing their first administrative policy and procedure manual. In addition, KCMIC researched client database software and identified one that specialized in victim service tracking. KCMIC reviewed state VOCA victim assistance regulations to ensure that their policy and procedure manual, their client database choice, and programmatic reports would be VOCA-compliant. The new policy and procedure manual and client database will streamline the organization’s work, and prepare KCMIC for successful compliance with VOCA grant requirements.

KCMIC plans to apply for VOCA victim assistance funds in the 2021 funding cycle and is confident that the organization will have the capacity and infrastructure to submit a successful application and to comply with all grant requirements.
Conclusion

VOCA victim assistance grants are a plentiful and largely untapped funding source for gun violence victim services, including hospital-based violence intervention programs, street outreach programs, and trauma recovery centers. States, cities, and community-based organizations have unique opportunities to drive VOCA victim assistance funding to these and other gun violence victim services.

Gun violence in the United States impacts the lives of millions. Resourcing solutions to the nation’s gun violence crisis is essential. By directing funding to gun violence victim services via VOCA victim assistance grants, states and cities will be investing in their communities and preventing future gun violence.
Appendix A: VOCA Victim Compensation Funding

VOCA victim compensation funding is used for direct reimbursement to or on behalf of crime victims for crime-related expenses such as medical costs, funeral and burial costs, mental health counseling, and lost wages or loss of support. Like VOCA victim assistance funding, VOCA victim compensation fund is administered by the Office for Victims of Crime and sourced from the Crime Victims Fund. The Office for Victims of Crime grants each state and territory a specific amount based on the amount spent on compensation in past years.

Compensation plays a unique role in helping gun violence survivors. Gun violence victimization can be very expensive, with victims requiring assistance to pay for crime-scene cleanup, funeral costs, medical expenses, and relocation. Many victims may need dependent care to participate in the criminal justice system, economic support due to missing work, and mental health services to cope with the trauma of gun violence.

The Office for Victims of Crime does not collect data on how gun violence victims receive compensation. However, compensation information for homicides and assaults can help us understand the importance of compensation to victims. The majority of homicides in the US are committed with a gun. About one-quarter of aggravated assaults are committed with a firearm. Victims of assault and homicide received higher compensation payments than the average crime victim.

- 84 percent of the payments for funeral and burial costs went to homicide victims.
- 74 percent of all payments for crime-scene cleanup went to homicide and assault victims, including 41 percent to homicide victims.
- 68 percent of all payments for economic support went to homicide and assault victims.
- Homicide victims receive 57 percent of all funding for dependent care.
- Assault victims receive 71 percent of all funding for medical and dental care and 34 percent of all funding for mental health care.
- Assault victims receive 63 percent of all funding for relocation.

Challenges and Barriers
VOCA is a payer of last resort, so families must first use other sources, including health and life insurance, before VOCA will pay. Reimbursement also requires receipts, but many individuals may not be able to afford to wait for reimbursement or may lose receipts in the chaos and confusion following the serious injury or death of a loved one.

Although state regulations vary, VOCA will not pay out any funds if the victim is determined to be culpable in their own injury or death. Victims with past criminal convictions are also not eligible for funding in some states. Most programs require confirmation that the crime was reported to law enforcement within a certain time window and that the victim is cooperating with law enforcement. The Bureau of Justice Statistics estimates that in 2015, only 47 percent of violent victimizations were reported to police.
Acknowledgements

We are grateful to the following experts for their comments and valuable feedback that contributed to making this report accurate, comprehensive, and precise:

**Growing Kings**  
Birmingham, AL

**Hartford Communities That Care**  
Hartford, CT

**The Health Alliance for Violence Intervention (HAVI)**

**Kansas City Mothers in Charge**  
Kansas City, MO

**Louis D. Brown Peace Institute**  
Dorchester, MA

**Metropolitan Family Services**  
Chicago, IL

**Philadelphia Ceasefire**  
Philadelphia, PA

**The TraRon Center**  
Washington, DC

**New Jersey Office of the Attorney General**  
**Division of Criminal Justice**

**Nadia Chait**  
The Coalition for Behavioral Health  
New York, NY

**Marla Davis-Bellamy**  
Temple University  
Philadelphia, PA

**Sunny Schnitzer**  
Deputy Chief of Staff for Public Safety, Office of the Mayor  
Baltimore, MD
Everytown for Gun Safety Support Fund seeks to improve our understanding of the causes of gun violence and the means to reduce it—by conducting groundbreaking original research, developing evidence-based policies, and communicating this knowledge to the American public. Learn more at everytownresearch.org.

Cities United is a national network of mayors focused on making sure all our children grow up in communities that are safe, healthy and hopeful. Cities United mayors are committed to reducing the homicide and shooting rates of young Black men and boys ages 14-24 by 50% by the year 2025. Moreover, Cities United is committed to restoring hope to these communities and building pathways to justice, employment, education and increased opportunities for residents. Cities United is a project of the Tides Center. For more information visit citiesunited.org.


10. Centers for Disease Control and Prevention, National Center for Injury Prevention and Control, Web-based Injury Statistics Query and Reporting System (WISQARS) Fatal Injury Reports. A yearly average was developed using five years of most recent available data: 2013 to 2017. Analysis includes gun deaths by race among all ages, non-Hispanic only, and homicide including legal intervention.


14. While we acknowledge that those who have personally experienced gun violence may use different terms, including “survivor,” in this report we will use the term “victim” because this is the language used in the Victims of Crime Act.


22. “Key Components of Hospital-based Violence Intervention Programs.”


32. This term will be broadly applied to programs that support victims of gun violence and gun homicides and communities impacted by gun violence.


38. 28 CFR 94.102.


41. OVC Formula Grant Allocations Archive, https://www.ovc.gov/grants/formula_archive.html


47. 28 CFR 94.103(c).

48. 28 CFR 94.104(a).

49. 28 CFR 94.104(b)-(c).

50. 28 CFR 94.104(c).

51. 34 USC 20103(b)(1)(A). Faith-based and neighborhood programs are also eligible for VOCA victim assistance funds so long as these programs comply with applicable federal law. 28 CFR 94.112(a).

52. 28 CFR 94.111-18.

53. The director of the Office for Victim Services may waive the match requirement. 28 CFR 94.118 (b)(3).

54. This requirement may be waived by the chief executive of the state. 34 USC 20103(b)(1)(C); 28 CFR 94.113.

55. Civil rights statistics are the race, national origin, sex, age, and disability of victims served. This recordkeeping requirement is waived for services such as telephone counseling, where requesting the information from a victim may be inappropriate or offensive. Office for Victims of Crime, “Guidelines for Crime Victim Assistance Grants,” Section IV(B)(ii).

56. See 28 CFR 94.102(1)-(4).

57. 28 CFR 94.119.

58. 28 CFR 94.122. For a comprehensive list of allowable and unallowable uses of VOCA victim assistance funds, see 28 CFR 94.119-122.


62. This term will be broadly applied to programs that support victims of gun violence and gun homicides and communities impacted by gun violence.

63. A 2019 audit by the US Office of the Inspector General examining challenges in administering VOCA funds found that as of February 2018, states collectively had nearly $599 million remaining of their fiscal year 2016 victim assistance allocations. The audit also found that as of April 2019, 12 states had failed to draw down any of their fiscal year 2017 victim assistance funds and all states had a collective balance of 80 percent of their fiscal year 2017 victim assistance funds. Office of the Inspector General, “Review of the Office of Justice Programs’ Efforts.”

64. Office for Victims of Crime, “OVC Formula Chart.”


68. Office for Victims of Crime, “OVC Formula Chart.”

69. Office for Victims of Crime, “OVC Formula Chart.”

70. For example, the Office of the Controller in Philadelphia estimates that if the city invested $30,000 per homicide in evidence-based violence reduction strategies, the city could decrease homicides by 10 percent annually. This would require a $43 million investment over five years or, for comparison, 10 percent of the entire state’s annual VOCA victim assistance allocation for 2019. Rebecca Rhyner, “Report on the Economic Impact of Homicides,” Philadelphia Office of the Controller, October 23, 2019, https://controller.phila.gov/philadelphia-audits/economic-impact-of-homicides/.


74. NJHVIP allocates an additional $2 million to a training and technical assistance provider who will train and consult with the demonstration sites and develop a toolkit for sites and policymakers seeking to replicate the HVIP model. NJ Law and Public Safety Office, “Notice of Availability.”


78. 28 CFR 94.103(c).


82. Children's Advocacy Centers of Illinois. https://www.childrensadvocacycentersofillinois.org/


94. Office for Victims of Crime, “OVC Fact Sheet.”

95. Federal Bureau of Investigation, Uniform Crime Reporting, Five-year average developed from five years of most recent available data: 2013-2017. Includes only aggravated assaults for which weapon information was available.

96. Federal Bureau of Investigation, Uniform Crime Reporting, Five-year average developed from five years of most recent available data: 2013-2017. Includes only aggravated assaults for which weapon information was available.


