Victim Services Commission Study

Statewide Listening Sessions Report

Final Report

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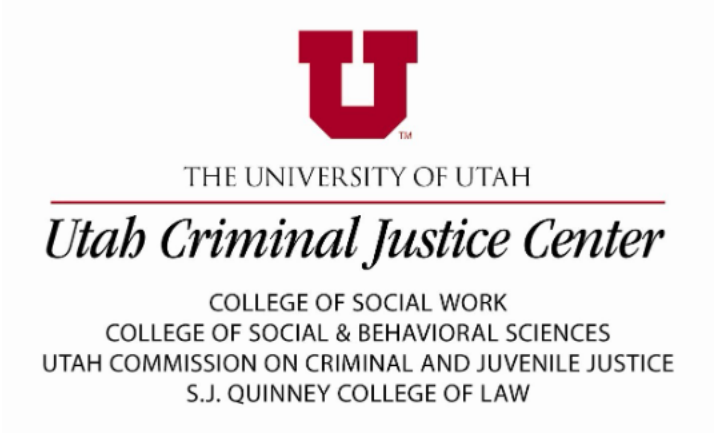

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INTRODUCTION

As requested by the Utah Department of Criminal Justice (DOCJ), the Utah Criminal Justice Center (UCJC) conducted a comprehensive evaluation of the Victim Services Commission (VSC) across six research activities. This report presents the purpose, methods, and results for the statewide listening sessions, which comprise part of the landscape analysis. Specifically, this report presents findings from analyses of data collected during listening sessions held in 2025 exploring the perspectives of community members with respect to the response to, and services for, crime victims in Utah. The sessions focused on identifying problems and solutions related to accessibility and adequacy of services, barriers to meeting victims' needs, and the geographic context that impacts crime victim response and service delivery.

Results

In collaboration with the Utah Office for Victims of Crime and the Utah Department of Health and Human Services, UCJC conducted 17 listening sessions throughout the State. This included at least one session in each judicial district (n=12), to which all entities within a community that have some role in working with crime victims were invited. Attendees include community- and system-based advocates, program administrators, mental health providers, social service agencies, coalition members, legal service providers, law enforcement, health care providers, Children's Justice Centers, and others. Additional sessions focused on the following groups: system-based advocates, law enforcement, prosecutors, judges, tribal leaders, and Spanish speakers (n=6). One session was conducted at the 2025 Utah Crime Victims Conference. Additionally, the research team conducted ten interviews with victims and interested parties who were unable to attend the listening sessions. During sessions, information was solicited on strengths and weaknesses in the response to crime victims across the State, including those related to the victim services system. To protect the anonymity participants, sessions were not recorded; instead, one individual was assigned to take notes at every session. Notes were entered into ATLAS.ti and coded by the research team. In the following sections, the term 'participant' refers to any individual who attended a listening session or individual interview. The themes presented below reflect broad perceptions among community members of current responses to crime victimization and services and factors that impact victims based on geography, crime type, and victim characteristics. This report is intended to capture the experience of community members (such as community- and system-based providers, social service providers and criminal justice agencies) when working with victims[1].

[1] The perspectives of state agencies tasked with administering victim services and responding to crime are presented in the *Victim Services Commission Study: Structure and Membership of the Commission Report.*

ACCESSIBILITY OF SERVICES

Across all eight districts, participants highlighted the difficulty individuals encounter when seeking services. In part, this was because most people are unfamiliar with victim service systems; locating those systems can be difficult in times of trauma, crisis, or instability. This difficulty was exacerbated by the fact that, in most communities, services are not coordinated. As such, victims were required to navigate multiple systems to get help. Often, victims have multiple needs as the result of a crime and negotiate a range of service providers, including those related to housing, transportation, civil legal services, and childcare. Those systems, however, also experience constraints in terms of accessibility, which means that crime victims may be in competition with the larger population for limited resources.

Participants indicated that a victim's experience seeking assistance can vary widely, depending on which agency is responsible for making referrals. For example, some victims first talk with an advocate when they are reporting to law enforcement and are referred to system-based advocates. In 2023, Utah allocated funding to ensure there was at least one system-based advocate in every county, which greatly increased access. However, system-based advocates noted that the training, supervisory structure, and referral processes vary widely across law enforcement agencies. As such, one participant indicated that, "*every law enforcement/prosecutor office works differently so service access and quality differs."* Across community- and system-based providers, participants indicated that lack of collaboration between providers meant that victims could "*fall through the cracks*" and not gain access to all available services. The lack of coordination was perceived to be cumulative in its impact on victims:

> *Stabilization is hard when bouncing from resource to resource. People get lost and lose contact. Lose ability to access services.*

Broadly, participants indicated that services are technically available in most parts of the state, but inaccessible to the degree that they are limited in scope, fragmented, or not fully resourced[2]. Across the state, participants felt that limited resources meant their agencies were "*only serving people in crisis*" and focused on emergency needs rather than long-term health and well-being. The focus on emergency needs meant that other important and related services—such as prevention and offender treatment—did not get the attention that participants felt they deserved.

Capacity of Victim Service Providers

For many victim service providers, a primary factor limiting service accessibility is agency funding, both in terms of overall funding and restrictions with respect to how monies can be spent. With recent reductions in the amount of federal funds available through the Victims of Crime Act (commonly called the "VOCA cliff"[3]), agencies had fewer funds to provide services accompanied by higher costs and increased demand due to population growth. That

2 Many of these limitations stem from declining federal funding, as well as requirements around eligibility and other factors, attendant to federal funding and over which the state has no control.
3 While recent declines in VOCA funding presented an immediate crisis to victim service agencies, there was broad concern with the levels federal funding available across programs (VAWA, FVPSA, SASP, etc).

meant service providers might have to limit their hours of operation, number of victims seen, or the range of services provided. Community-based providers described operating "*on a shoestring*" and participants expressed concern about the pressing need to "*sustain funding for existing services*." The funds referred to include declining VOCA funds as well as state allocations, made in 2023, that were set to expire in 2025. Providers described the difficulties of keeping their organizations running in the face of economic uncertainty and wanted the State to help address this issue:

> *Population growth in northern Utah/southern Idaho will put pressure on existing services. Strong programs exist and must be scaled to meet the needs of survivors and demand from growth in population. [The state should] invest in strong programs to grow and develop to attain [a] "bigger bang for your buck."*

While some programs relied less on state and federal funding (the amounts ranged from 45% to 80% of a program's budget that came from those sources), those additional sources were often, themselves, unstable:

> *We are 80% government funded. Not ideal. It takes time to establish relationships, reputation. But not all funders give year after year. A constant effort to find resources, make communities aware of your organization.*

Organizations that were able to develop strong fundraising campaigns noted that doing so required "a big investment" and lamented that the publicly available funds typically prohibited fund raising and other activities[4]. Staff positions related to fundraising had to be paid from unrestricted monies, which was not seen as feasible for smaller agencies.

Limited, unstable, and restricted funding further constrained service accessibility because of the impact on staffing. The lack of ongoing, stable and flexible funding meant that service providers encountered difficulties in recruiting and maintaining staff, because they could not offer "*competitive pay*" or guarantee long-term employment. This resulted in high rates of staff turnover, negatively impacting both the quantity and quality of services and interagency collaboration:

> *The collaboration between community- and system- advocates can usually work really well but it struggles when there is high turnover.*

High rates of staff turnover, for both victim service agencies and criminal justice partners, meant staff had to devote substantial resources to establishing and maintaining interagency relationships. While this was described as an essential component of providing accessible and high-quality services, that type of administrative and capacity building work is often not an allowable cost, or is very restricted, in federal grants.

Difficulties hiring and retaining staff were especially acute among community-based providers, who did not have access to the benefit packages available to system-based advocates:

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[4] Federal funding, the primary monies that funded victim services in Utah until recently, typically restrict activities related to fundraising and capacity-building.

Just look at the difference in benefits between being and advocate in the system and the nonprofit sector. Health care, retirement, nonprofits should be able to have the same kind of benefits as system-based employees. The law should be adjusted to include nonprofits as eligible for Utah state retirement and insurance.

Particularly in rural communities, community-based agencies felt that the accessibility of services was limited by existing funding models[5], which tend to be siloed by crime type and victim characteristics. In rural areas of the state, however, there was often a single agency that was called upon to provide services to all victims, which required extensive training and flexible service models. When asked what they wished state leadership knew about running a victim service agency, one provider said:

[The work] is busy, it's intermittent, services are very broad. [We] work with people across a range of experiences (fire, murder, domestic violence, sexual assault). Victim services function better like that rather than siloed and it is frustrating when funding sources force that separation.

Rural communities were also more likely to experience concerns that victims encountered when agencies were tasked with covering a wide geographic area. For example, victims of sexual assault must report the incident to law enforcement or an approved advocate to qualify for Crime Victim Compensation. However, not all communities have a rape crisis center with a physical location[6]. In those instances:

The disclosure must happen with an approved person, usually in rape recovery centers. Sometimes it is a burden to disclose if the rape recovery center is not local.

Similarly, it was not always feasible for victims of domestic violence to relocate to another community in order to access emergency shelter. This was especially true if the nearest shelter was more than one hour away, creating problems with work, transportation, and school. While there are limited funds to house victims in motels, doing so isolates them from support services and may create a safety risk:

Victims [who live] further out cannot logistically go to shelter [because of] school for kids, they have a job. If [it is] safe, we can put them in a hotel but we cannot do that forever. [For our shelter,] the furthest away town is four hours.

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[5] Some of this fragmentation is a product of federal funding requirements.

[6] In Utah, victims must report a criminal incident to law enforcement or another investigative agency, and cooperate with the investigation, in order to be eligible for Crime Victim's Compensation (Utah Code Annotated 75E-5-3). Victims of sexual assault, however, do not have to report to an investigative entity and can instead report to a victim advocate (can be an advocacy services provider, a criminal justice system advocate, or a nongovernment organization victim advocate). The advocate then completes a questionnaire provided by the Utah Office for Victims of Crime, regarding the assault. Victims who have suffered strangulation in the course of interpersonal violence are not required to cooperate with the investigation to qualify for compensation. Instead, they can simply report to law enforcement or seek medical care immediately after the strangulation occurs.

Across communities, the capacity of victim service agencies to provide robust crisis services was enhanced by the presence of other crisis providers, particularly for those victims with acute crisis or mental health concerns. Participants endorsed the importance of crisis response services, such as the Mobile Crisis Outreach Team (MCOT) and receiving centers, as an important part supporting victims of crime. These services filled critical gaps, as one participant shared, "*crises don't happen during business hours. Please don't let MCOT ever go away."* As evident in this quote, the accessibility of services for victims depends on agencies that are outside of the victim service providers' purview and may be funded without consideration of victims' needs.

Collaboration and Coordination

Participants indicated that the quality and accessibility of services improved when there was strong collaboration across responders, including community- and system-based advocates, health care providers, social service agencies, and criminal justice providers. This collaboration allowed agencies to avoid competing with other victim-serving entities, as when domestic violence shelters communicated with the local continuums of care, which are established to address homelessness. Collaboration also enhanced the capacity of small agencies and many of those providers described that the statewide coalitions had taken on work that used to fall to executive directors. This meant those directors did not need to devote as many resources to legislative advocacy, training on new laws, or public outreach and education. Participants wanted the state to develop initiatives to incentivize and reward collaboration:

> *The collaboration and coordination piece is really key. No one entity can manage the needs of survivors in our communities. How do we as a state endorse best practice that fosters and cultivates those relationships?*

The Children's Justice Centers (CJCs) were frequently described as one model for adequately funding and administering victim services. One participant noted the ways that CJCs improved the services and response to victims, even in the context of limited resources:

> *CJCs have really mastered the multi-disciplinary team approach and wraparound. There are limited resources like any provider but having all of the resources connected has enhanced care and recovery.*

Another participant indicated that this degree of collaboration was only possible because state law mandated resources and accountability in creating the CJCs; that level of support was not currently available for other forms of victim services. In some parts of the state, participants also identified the Lethality Assessment Protocol (LAP) as an initiative that improved coordination, communication, and collegiality between entities responding to victims of crime. Victim service providers noted that LAP implementation included additional training for law enforcement, leading to increases in the number of officers who responded to victims with a trauma-informed approach:

> *LAP deserves credit as a conduit for collaboration and problem solving together.*

VICTIM-SPECIFIC BARRIERS

Barriers Related to Victim Characteristics

Across listening sessions, participants indicated that even though services exist across the state, not all victims can access them. Systemic, linguistic, and resource-related barriers prevented some individuals from receiving support, even in cases where they lived geographically close to service providers. Across the state, a primary barrier to accessing victim services was the limited availability of interpreters and translated materials. This particularly impacted Spanish speakers, immigrants, and refugees; in the case of the latter two, barriers existed both in terms of communication and lack of familiarity with crime and social systems in the United States. While most communities had some access to interpreters, particularly in the criminal justice system, participants described frequent disruptions to those services that included long wait times to reach interpreters, being disconnected while waiting, and the limited number of interpreters available for some languages. One participant shared:

> *Officers often rely on the language line through dispatch. . .experienced long wait times, over an hour just to be disconnected. . .Languages that are not written languages are the biggest challenges because even Google Translate is out.*

In some cases, individuals relied on family members or friends to communicate with service providers, although this created concerns related to confidentiality.

While there were robust and coordinated services for victims of child abuse, older youth were sometimes caught between adult- and child-serving systems. For example, domestic violence shelters are typically limited in the services they can provide to youth, even if the youth are parents themselves:

> *[We] cannot take them in shelter if not 18 but we can do advocacy. We had a 16-year-old client who has a baby but cannot come into shelter because shelters are not licensed to provide care to [people] under [18 years old] without parent here.*

Problems accessing appropriate services disproportionately impacted individuals who had difficulty meeting their needs even prior to victimization, including older adults, persons with disabilities, persons experiencing homelessness, persons living in polygamist communities, and LGBTQ+ individuals. Participants described these individuals as having both an elevated risk of victimization and heightened difficulties locating appropriate services in the aftermath of a crime. Participants felt that existing services were not designed for, or tailored to, some populations, who might need specific types of assistance related to communication, mobility, family structure, and financial stability.

Barriers Related to Victimization Type

When discussing differences in victims' experience across crime type, participants identified multiple populations that were underrepresented with respect to available funding, services, and resources for training and education. For example, there were inadequate resources for addressing abuse against the elderly. One participant, from northern Utah, said her agency heard about increases in the number of financial crimes targeting vulnerable older adults. However, victim service agencies struggled to identify and connect with these victims.

Furthermore, advocates did not feel they had sufficient training to provide the range of services and referrals that a victim of financial crimes might need. Providers working with victims of domestic violence and sexual assault often referred victims of elder abuse to other agencies; however, they did not feel there were sufficient service providers to address the need:

> *[There are] not a lot of elder services. . . [There is] one APS (adult protective services) person for 4 counties.*

Service providers also struggled to connect with, and provide adequate services to, victims of trafficking. One respondent noted that resources for trafficking were "*scarce unless the case involves intimate partner violence*." Participants also felt that many individuals that work with victims did not have sufficient training to screen for, identify, and recognize that trafficking was occurring. Services were also limited for trafficking victims because they often presented to providers needing support, such as housing, long after the actual crime. This meant they may not be eligible for emergency shelter, particularly when programs were at capacity:

> *Trafficking struggle is housing. If incident happened a long time ago it can be hard to get another shelter to help. Hard to find therapist who is specialized with trafficking.*

Service providers indicated that they lacked the capacity and funding to provide long-term therapeutic services to address complex trauma, which was particularly important for victims of trafficking and sexual assault. Access to therapeutic support was further limited by the fact that some communities had few clinicians overall and possibly none with the topical and cultural specialization to work with victims of sexual assault and trafficking. In cases where there was a poor fit between the victims' needs and the experience of available clinicians, victims reported feeling misunderstood and disengaged from treatment, leaving them without long-term, sustainable support.

While domestic violence services tended to receive more funding than other crime types, participants nonetheless described the existing resources as inadequate to meet the needs that victims presented with. Because domestic violence often results in a loss of housing, victims had long- and short-term needs related to shelter and housing. Service providers described problems addressing these needs, starting with shelter capacity. Providers said there were often *"bottlenecks"* in emergency shelters due to a lack of long-term affordable housing, which meant there were no places to move victims to. System-based providers often struggled to find a shelter with the capacity to take a victim to whom they were trying to make a referral as the result of a LAP. This difficulty was amplified by long waitlists for subsidized housing, with one provider indicating that there was no county in Utah where those lists were shorter than two years. Victims experienced issues with background and credit checks that made them ineligible for some housing placements and created problems when they sought options in the open rental market. Many communities had limited services for both emergency and routine transportation (e.g., a lack of working vans or public transit), which meant victims struggled to move between shelter, employment, school, and court proceedings. Providers felt that domestic violence victims, because they were often financially and legally involved with the person who committed the crime, were embedded in complex legal systems that their abusers used as "*tools of control.*"

Victimization, Co-occurring Needs and the Service Cascade

Participants identified that victims with pre-existing behavioral health needs experienced additional difficulties accessing appropriate support after a crime, in part due to the impact of crime on psychological symptoms. Treatment for substance use disorders was particularly difficult to obtain; however, providers noted that the lack of treatment complicated victim's recovery. This was particularly true when programs had to limit services, such as the number of days a victim could stay in shelter, due to issues with capacity:

> *If a domestic violence victim comes in with substance abuse, they have 30 days to get clean, find a job, etc., but this is unlikely to happen.*

Treatment was typically cost prohibitive for those without insurance or significant financial means. In rural communities, availability was limited by the lack of providers and the fact that most individuals could only access services when the court ordered and paid for them; this meant that victims were less likely than perpetrators to receive treatment. Victims either had to travel to get services or go without treatment. In one rural community, participants described that:

> *Substance use disorder treatment is limited, [there are] random Alcoholics Anonymous [groups], but mostly treatment is court-ordered, only one rehab in town, and it is self-pay. Have to go elsewhere.*

In urban areas, where there are more providers for both mental health and substance use, victims encountered the "service cascade," wherein they were having multi-step interactions between health and social service providers, victim service agencies, and criminal justice entities. For all victims, this increased the chances that they would get "lost" as they attempted to move between systems. This problem was greatly enhanced for victims with a pre-existing mental health diagnosis. One participant noted:

> *If you have a diagnosis, you are at a disadvantage. For severe cases it is hard to describe what happened, and as a result get passed over.*

The trauma experienced in the wake of victimization may prevent victims from clearly articulating their experiences, particularly when they are asked to do so repeatedly. This can result in not being identified as eligible for services or assistance because they cannot meet the evidentiary or narrative requirements of providers or administrators. Many agencies require victims to file, or obtain, official police reports to qualify for benefits or services, such as crime victim reparations, protective orders, or legal services. In cases where victims were seeking multiple services, the differing application and qualification processes became an additional barrier. One participant noted:

> *Everyone is different; there is no consistency in how things are done. This creates a lot of barriers and victims getting moved from one service to the next, people get lost in the weeds, and more barriers are created.*

Additionally, participants noted the need for services for youth who demonstrated problematic sexual behavior, although stigma and funding were significant barrier as *"it is hard to find counties that will fund this."*

ACCESSIBILITY FOR TRIBAL VICTIMS

Participants emphasized that Native and Indigenous communities across Utah experience distinct and compounding barriers when attempting to access victim services. These challenges stem from jurisdictional complexity, limited-service infrastructure, cultural barriers when working with non-Native providers, and geographic isolation. Combined, these factors create a service landscape that is fundamentally different from that of non-tribal communities.

Jurisdictional Complexity and Reporting Barriers

Participants consistently described how overlapping tribal, county, state, and federal authority created confusion about where and how to report crimes, who had investigative responsibility, and what happened after a report is made. As one participant explained, offenses occurring near reservation boundaries create jurisdictional issues that *"make it difficult to report under Indian law."* These jurisdictional layers can result in delayed investigations, unclear designation of responsible parties, and cases falling through administrative gaps. This complexity contributed to a broader lack of reliable case tracking and inconsistent communication across systems, reinforcing the need for improved tribal–state coordination. This was particularly true in cases involving missing people and interpersonal violence. Participants noted a desire to strengthen tribal and state coordination for investigating missing and murdered indigenous relatives (MMIR). In some tribal communities, there were no tribal or nearby non-tribal law enforcement agencies. This meant that victims might not get a law enforcement response for hours or even days, which was a disincentive for reporting at all. In cases where law enforcement and the courts were involved, participants noted that those convicted of abuse rarely received treatment.

Limited Tribal Victim Services Infrastructure

Across listening sessions, participants highlighted the near absence of formal victim services within many tribal communities. Most tribes did not have dedicated victim advocates, shelters, or crisis response teams. As a result, families often relied on informal networks to seek help or locate missing relatives. One participant described this reality: *"Tribal members have to do the work by word of mouth...very grassroots; it goes unrecognized."* Without local advocates, tribal members may not have access to culturally relevant services but only from non-Native agencies that may be geographically distant. Tribal leaders indicated that community members in leadership positions often functioned as impromptu crisis responders in areas where formalized culturally relevant services did not exist. Participants noted that Native victims may feel uncomfortable or unwelcome in nearby towns, especially where negative perceptions of Native communities persist.

Cultural Relevance and Mistrust of Non-Native Providers

Participants stressed that cultural relevance is not an optional enhancement but a core requirement for effective victim services. Many non-Native providers lack training in tribal social norms, community dynamics, or the historical context shaping Native experiences with government systems. As one participant shared:

> *Providers that do not understand dynamics or social and economic norms of life on the reservation creates problems in care.*

Even when non-Native agencies have received training, participants noted that such training often applies to only one tribe and does not translate across the diverse cultural practices of other tribal nations. This mismatch can lead to misunderstanding, re-traumatization, or reluctance to seek help. Creating and maintaining victim service agencies that could provide culturally grounded, trauma-responsive services was identified as a critical need.

Geographic Isolation and Resource Scarcity

Geographic distance, limited transportation, and sparse law enforcement presence further restricted access to the criminal justice and victim service agencies that do exist. Participants described long travel times to reach shelters, SANE exams, or mental health providers. These barriers were intensified by weather, limited public transit, and the absence of nearby service hubs. These conditions also affected emergency response times and the availability of follow-up care. The combination of isolation and limited infrastructure meant that even when services technically exist, they were often functionally inaccessible.

Need for State Support Paired with Tribal Autonomy

Participants emphasized that increased state support is necessary to increase the safety and well-being of tribal members impacted by crime. Across the state, tribes said that support was needed to fund services, train criminal justice providers, and develop coordinated responses[7]. There was strong endorsement for support that respected tribal sovereignty and community autonomy. Participants noted that effective solutions required collaboration that centered tribal expertise, acknowledged historical context, and invested in building tribal victim services infrastructure rather than relying solely on non-Native agencies.

[7] Some training and technical assistance and support for tribal entities that applying for funding is available through state agencies and coalitions.

REGIONAL ANALYSIS

Participants from rural service areas described distinct challenges when responding to service requests outside their communities. This issue was pronounced in rural counties near Salt Lake City, where providers are asked to absorb demand after urban providers reach capacity. Communities near public lands and national parks described large population increases from tourism, which resulted in a seasonal demand for victim services that was not well reflected in state-level crime data. In some of these areas, park rangers and the law enforcement officers housed within land management agencies were commonly the first responders after a crime occurred. This required victim service agencies to collaborate with a range of first responders to ensure that victims had access to services. Across rural listening sessions, service providers described that they regularly perform duties beyond their formal roles to meet community needs. For example, staff at a domestic violence agency in one county often act as first responders to major car crashes and other community emergencies.

Community geography and the built environment were cited as critical factors when operating in rural areas. One participant, based in rural northern Utah, indicated that agencies should be resourced with consideration of local geography: *"the mountain ranges determine service provision, not [judicial] district lines."* This was particularly relevant in the winter, when weather conditions restricted service accessibility. Additionally, participants described the influence of community culture in rural areas, which can operate as a barrier to service provision. Participants referenced generational reluctance to discussing issues around victimization, leading to a general hesitation around prevention and education. In many communities, there was profound stigma, and lack of training around needs, when considering plural families.

Across communities, participants endorsed the need for increased state level support and funding, while maintaining community autonomy. Service providers wanted additional resources that would facilitate their inclusion in decision-making regarding the response to crime victimization. One participant, working in the Salt Lake area, noted:

> *There is power in that collaboration, but we are the experts in our areas and need to be able to problem solve, make effective decisions, collaborate with other nonprofit victim service providers. But that requires more work from us to engage in community partnerships. [We] need a balance between support for collaboration and autonomy. We do not want a system that is all governmental because it presents barriers for survivors who need and want alternatives.*

THE CRIMINAL JUSTICE RESPONSE

Both community- and system-based victim service providers, and individuals working in the criminal justice system, identified concerns with how that system responds to victims. In part, this was described as a problem of communication, with one judge characterizing the factors that lead to victims declining to participate in prosecution:

> *When there is a breakdown in victim participation it is due to the breakdown of communication in the front end of the initial communication with victims. Front-end explanation of what the hearings are and what they mean. Explaining realistic outcomes with real expectations. Victims will leave court feeling that expectations are unmet due to lack of communication of what the hearing is truly for, well in advance, so they know what is coming and can plan for it.*

Criminal justice partners suggested that victim advocates, both community- and system-based, receive enhanced and ongoing education on court processes, the law, and the factors that shape what judges can and should do. There was also widespread endorsement, across criminal justice entities, about the positive impact that advocates have on both victim and criminal justice outcomes. Advocates were described as an essential piece of improving victim satisfaction with the criminal justice system, keeping victims safe, and meeting needs that other criminal justice partners were ill-equipped to address. Participants described the negative impacts on victims when providers were unavailable, because it limited options in terms of services and safety planning and was associated with less satisfaction in the criminal justice system:

> *We have a significant interest in public confidence in the judiciary to maintain its authority to affect public safety and the rule of law is sustained with it. When we have many leaving the criminal justice system unsatisfied with [that system], that removes its power. When we have more education on the criminal justice system then [victims] leave more satisfied as they have a better understanding of what it is.*

Even with the presence of advocates, many respondents expressed concern that the criminal justice system was not designed to meet the needs of victims. In those cases, the processes set up to protect the due process rights of defendants were at odds with the well-being of victims. For example, adult and even child victims can be compelled to testify for a case to proceed. Respondents echoed concerns expressed by advocates, wherein the system was set up so that defendants could "use" it against victims:

> *The defendant always holds the 'trump card' of forcing a victim to testify, especially at preliminary hearing but ultimately at a jury trial. This action can be used as a weapon against victims.*

In some cases, prosecutors or judges were described as lacking sufficient training to have trauma-informed interactions with victims. This was attributed to high caseloads, and high turnover, in victim-related crime prosecution. There were also concerns expressed related to the tension between punishment and rehabilitation, as it related to victim safety. In those

instances, viewing defendant behavior through a medical lens meant that the system was not always attentive to victim safety. One prosecutor described this phenomenon with respect to protective order violations:

> *That [rehabilitative focus] makes a lot of sense for drug-related offenses, but the attitude has bled into victim-related crimes. When talking about drug-related offenses, relapse is a part of the process of healing and people are not punished for it. In the context of protective orders, the culture is changing to see violations of protective orders or committing another domestic violence offense, judges see it as a relapse. Many don't even file a new case for the new offense. Violations against the victim are not taken seriously.*

While prosecutors were generally trying to behave in accord with a victim's wishes, they also expressed concern that the system was influenced by processes unrelated to victims. This included political pressure, wherein the desire to prosecute cases as a matter of public safety was at odds with the victim's well-being:

> *I have to meet victims where they are, rather than where I want them to be. Sometimes that means dismissing a case. My superiors do not like that outcome.*

Other difficulties for victims were specific to the court in which a case was heard. For example, many domestic violence cases are heard in justice court; however, victims do not have the same rights and resources in justice court as they do in district court. Furthermore, participants described a need for more education on the dynamics of domestic violence at the justice court level. Combined, these factors meant that victims might not be notified of proceedings, might not receive support from an advocate, and therefore may disengage from the process. This was described as problematic because:

> *Victims don't feel they have the same support system and don't participate in court processes. If they don't have a relationship with a victim advocate, there is a high volume of case dismissal and then the case is back in court later as another offense happens*.

Victims whose case was heard in the juvenile court could only be ordered limited restitution, due to state laws intended to minimize harm to juveniles. Such laws capped the amount awarded to $4,000, although damages could be much larger. While Crime Victim's Compensation was an option for some victims to cover costs, those monies were not available to victims of property crime. For a victim who lost their car as the result of a crime, the inability to replace that vehicle posed a threat to employment, childcare, and housing stability. Similarly, in cases where the offender died during the criminal event, no restitution could be ordered, leaving Crime Victim Compensation as the only recourse. However, limits on available awards (up to $50,000, depending on circumstances) were not always adequate to cover the impact on victims. Broadly, participants wanted additional funding sources to "*make victims whole*" when restitution and compensation were not adequate to do so[8].

[8] Limits on CVC claims are intended to ensure access to limited available monies. In order to increase those amounts, without running out of money, the State would need to identify additional funding sources.

Focus group participants from law enforcement described the overwhelming impact of LAP, which added duties and time to their job without additional resources. LAP also increased the number of victims referred to services, which strained those providers' capacity. In that case, law enforcement was concerned when referring victims to providers that may not have the ability to provide services like shelter. While all respondents endorsed the positive impact of victim advocates, there were concerns that system-based advocates were sometimes agency employees that were "*moonlighting*" as advocates. In those cases, both officers and system-based advocates were concerned that the advocate did not have the training or sufficient time to adequately address victim's needs. One agency indicated that advocates needed to be higher in the chain of command to influence the way officers interacted with victims. In another agency, advocates were housed in the prosecutor's office and shared with other responders; this structure reduced problems with communication and service provision as a victim's case moved through the criminal justice system.

CONCLUSION AND RECOMMENDATIONS

Overall, participant perspectives on Utah's victim response systems revealed significant regional variation, persistent barriers in service accessibility, and uneven coordination across responders. Where the response was working, that was typically attributed to systems that combined state and local partners to facilitate collaboration and resources. Communities strongly endorsed the commitment of local service providers to victims; nonetheless, there were ongoing challenges that prevented victims from receiving timely, adequate, and culturally responsive support. Across districts, providers described barriers within, and external to, victim services systems—such as transportation, childcare, housing instability, limited staffing, and inconsistent interagency coordination—that impacted the community's ability to fully support victims.

Participants also highlighted population-specific gaps in service accessibility, including limited language access for immigrant and refugee communities, insufficient services for older adults and individuals with disabilities, and a shortage of specialized clinicians for human trafficking, sexual assault, substance use disorders, and co-occurring mental health needs. Rural communities faced additional constraints related to geographical features, limited provider capacity, and seasonal population fluctuations.

Tribal participants described distinct and systemic barriers rooted in jurisdictional complexity, lack of tribal victim-services infrastructure, cultural mismatch with non-Native providers, and inadequate state-level coordination. These challenges contribute to gaps in reporting, case tracking, and response, specifically for Missing and Murdered Indigenous Relatives (MMIR).

Across all conversations, participants emphasized the need for flexible emergency assistance, initiatives to support stronger cross-system collaboration, and sustainable funding that supported both statewide consistency and community-specific autonomy.

Based on this analysis, the State of Utah should consider the following recommendations with respect to how the response to crime victims is resourced.[9]

1. Enhance, stabilize, and coordinate available funding to ensure victim services are accessible, adequate, and relevant.

    1.1. Some portion of funding for victim service providers should be predictable over time and allocated based on a formula that is developed in conjunction with funders and service providers. Because federal funding has restrictions related to purpose and allocation, over which the state has no control, state dollars should be used to supplement limited federal funding and also to address gaps in services attendant to federal funding restrictions.

    1.2. In conjunction with both funders and service providers, develop a set of core services that spans the breadth of victimization type. The State should commit to ensuring these core services are available in all communities. Allocation of state and federal funding should focus on ensuring the accessibility of those services across Utah. State

[9] The recommendations are not intended to apply to any single agency. Rather, they suggest strategies to improve outcomes for victims by facilitating coordination across all state-level entities tasked with administering funds for, or responding to, victims of crime.

funds should be allocated in a manner that addresses gaps in services attendant to federal funding priorities and restrictions. Examples of such services have been identified in other documents in this study, including the *Literature Review*.

1.3. Funding should be allocated in a way that focuses on the long-term well-being of victim service providers and service availability. This includes the ability to recruit, hire and retain qualified staff. Because federal funding is unpredictable, and contains restrictions over which the State has no control, state funds should be used to enhance program capacity.

1.4. Funding should be allocated in a manner that accounts for factors that increase demand for services, such as changes in crime rates and population growth and new referral processes like the Lethality Assessment Protocol. Data should be collected, and regularly reviewed, to ensure funding decisions are based on timely information.

1.5. Funding should be allocated in a way that accounts for local barriers to addressing victims' needs, including: availability of mental health providers, public transportation, affordable housing, community culture, and geography. This could include collaboration with professional organizations, such as the Utah chapter of the National Association of Social Workers, to increase training in therapeutic modalities with demonstrated effectiveness for improving victim well-being (see *Literature Review*).

1.6. Where possible, administrative processes should seek to reduce funding silos that create barriers—based on population, type of victimization, or need—to agencies' capacity to meet victims' needs.

1.7. Reduce the administrative burden on victim service providers by streamlining and integrating grant application and reporting processes. This could include a single application process for all state and federal funds, longer grant cycles, and noncompetitive awards for providers with responsibility for core services. Over the past five years, state agencies have been working to do this with federal funds; those efforts should be ongoing. Such changes should continue to preserve processes for responding to issues like deobligation or mismanagement of funds (see, for example, California, in the *State Administration and Funding of the Response to Crime Victimization Report*).

1.8. Provide additional funds specifically intended for broad public outreach, education, and prevention. This would increase the likelihood that victims encounter a "no wrong door" approach when seeking services. This could also increase the capacity of friends and family to support victims.

2. Use state infrastructure to enhance local communities' engagement with, and support of, improved responses to crime victims.

2.1. Support the development of coordinated response models for all types of victimization. This could include the development of model protocols, funding for coordinator positions, and funding that prioritizes coordinated responses and training.

2.2. Collaborate with local and tribal entities, such as the criminal justice coordinating councils, to develop local infrastructure for coordination, collaboration, and funding of the response to victims. The Children's Justice Program provides a model for this type of state and local partnership.

2.3. Collaborate with tribal leadership and Restoring Ancestral Winds to develop local, culturally relevant victim services for tribal members. The state and coalitions currently provide technical assistance to enhance tribal entities' capacity to apply for grant funding; however, some communities lack the infrastructure to administer funds in the event they were awarded. Technical assistance should include resources to support building and sustaining tribal-based victim service providers.

3. Improve the criminal justice system response to victims.

3.1. Ensure system-based advocates are organizationally located to maximize their influence on how the system interacts with victims. This could include being located in prosecutors' offices, with the ability to work across the criminal justice process. It could also include ensuring that system-based advocates are positioned within a law enforcement agency's chain of command, such as reporting to an assistant chief of police.

3.2. Ensure that lower-level courts have sufficient resources so that victim advocates are widely available.

3.3. Revise crime victim rights legislation to strengthen protections for victims whose case is in a lower-level court.

3.4. Improve law enforcement's capacity to provide the Utah Office for Victims of Crime with needed information to facilitate quicker processing of compensation claims.

3.5. Seek to minimize processes that put the needs of victims at odds with the rights and rehabilitation of defendants. For example, develop funds that can assist victims in cases where restitution is limited. This could include development of a dedicated funding stream to enhance the amount of monies available, per claim, through Crime Victims Compensation.