

TN Annual State Performance Report

Victim Assistance Formula Grant Program

Reporting Period: [Oct 1, 2018 to Sept 30, 2019]

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

| OVC VOCA Assistance Funds | | | | |
|------------------------------------|------------------------|------------------------|------------------------|------------------------|
| | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
| Federal Award Amount | \$44,979,475.00 | \$37,516,765.00 | \$67,791,613.00 | \$46,055,649.00 |
| Total Amount of Subawards | \$40,003,766.00 | \$45,669,716.00 | \$0.00 | \$0.00 |
| Total Number of Subawards | 242 | 182 | 0 | 0 |
| Administrative Funds Amount | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Training Funds Amount | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Balance Remaining | \$4,975,709.00 | (\$8,152,951.00) | \$67,791,613.00 | \$46,055,649.00 |

| Subgrantee Organization Type | | | | |
|---|------------------------|------------------------|------------------------|------------------------|
| <small>The total number of subgrants represents all subgrants funded across all federal awards active during the reporting period. The number is not unique as there are subgrantee organizations that are continuously funded from each federal award.</small> | | | | |
| Type of Organization | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
| Government Agencies Only | 65 | 55 | 0 | 0 |
| Corrections | 1 | 1 | 0 | 0 |
| Courts | 4 | 2 | 0 | 0 |
| Juvenile Justice | 0 | 0 | 0 | 0 |
| Law Enforcement | 11 | 8 | 0 | 0 |
| Prosecutor | 28 | 30 | 0 | 0 |
| Other | 21 | 14 | 0 | 0 |
| Nonprofit Organization Only | 172 | 123 | 0 | 0 |
| Child Abuse Service organization (e.g., child advocacy center) | 40 | 33 | 0 | 0 |
| Coalition (e.g., state domestic violence or sexual assault coalition) | 2 | 1 | 0 | 0 |
| Domestic and Family Violence Organization | 36 | 22 | 0 | 0 |
| Faith-based Organization | 4 | 2 | 0 | 0 |
| Organization Provides Domestic and Family Violence and Sexual Assault Services | 26 | 18 | 0 | 0 |
| Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse) | 7 | 6 | 0 | 0 |

Office for Victims of Crime - Performance Measurement Tool (PMT)

| | | | | |
|--|------------|------------|----------|----------|
| Sexual Assault Services organization (e.g., rape crisis center) | 5 | 5 | 0 | 0 |
| Multiservice agency | 29 | 16 | 0 | 0 |
| Other | 23 | 20 | 0 | 0 |
| Federally Recognized Tribal Governments, Agencies, and Organizations Only | 0 | 0 | 0 | 0 |
| Child Abuse Service organization (e.g., child advocacy center) | 0 | 0 | 0 | 0 |
| Court | 0 | 0 | 0 | 0 |
| Domestic and Family Violence organization | 0 | 0 | 0 | 0 |
| Faith-based organization | 0 | 0 | 0 | 0 |
| Juvenile justice | 0 | 0 | 0 | 0 |
| Law Enforcement | 0 | 0 | 0 | 0 |
| Organization provides domestic and family violence and sexual assault services | 0 | 0 | 0 | 0 |
| Prosecutor | 0 | 0 | 0 | 0 |
| Sexual Assault Services organization (e.g., rape crisis center) | 0 | 0 | 0 | 0 |
| Other justice-based agency | 0 | 0 | 0 | 0 |
| Other agency that is NOT justice-based (e.g., human services, health, education) | 0 | 0 | 0 | 0 |
| Organization by and/or for a specific traditionally underserved community | 0 | 0 | 0 | 0 |
| Organization by and/or for underserved victims of crime (e.g., drunk driving, homicide, elder abuse) | 0 | 0 | 0 | 0 |
| Other | 0 | 0 | 0 | 0 |
| Campus Organizations Only | 5 | 4 | 0 | 0 |
| Campus-based victims services | 2 | 2 | 0 | 0 |
| Law enforcement | 0 | 0 | 0 | 0 |
| Physical or mental health service program | 0 | 0 | 0 | 0 |
| Other | 3 | 2 | 0 | 0 |
| Total Number of Subawards | 242 | 182 | 0 | 0 |

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

| Subaward Purpose | | | | |
|---|------------------------|------------------------|------------------------|------------------------|
| A single SAR can select multiple purposes. Numbers are not unique | | | | |
| | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
| | | | | |

Office for Victims of Crime - Performance Measurement Tool (PMT)

| | | | | |
|--|-----|-----|---|---|
| A. Continue a VOCA-funded victim project funded in a previous year | 156 | 148 | 0 | 0 |
| B. Expand or enhance an existing project not funded by VOCA in the previous year | 31 | 4 | 0 | 0 |
| C. Start up a new victim services project | 61 | 30 | 0 | 0 |
| D. Start up a new Native American victim services project | 0 | 0 | 0 | 0 |
| E. Expand or enhance an existing Native American project | 0 | 0 | 0 | 0 |

VOCA and Match Funds

A single SAR can select multiple service types. Numbers are not unique

| | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
|---|-----------------|-----------------|-----------------|-----------------|
| A.INFORMATION & REFERRAL | 200 | 172 | 0 | 0 |
| B.PERSONAL ADVOCACY/ACCOMPANIMENT | 160 | 128 | 0 | 0 |
| C.EMOTIONAL SUPPORT OR SAFETY SERVICES | 157 | 140 | 0 | 0 |
| D.SHELTER/HOUSING SERVICES | 66 | 52 | 0 | 0 |
| E.CRIMINAL/CIVIL JUSTICE SYSTEM ASSISTANCE | 151 | 134 | 0 | 0 |
| F. ASSISTANCE IN FILING COMPENSATION CLAIMS | 236 | 181 | 0 | 0 |

Priority and Underserved Requirements

| Priority Area | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
|-------------------------------------|-----------------|-----------------|-----------------|-----------------|
| Child Abuse | | | | |
| Total Amount | \$8,599,400.00 | \$11,807,979.00 | \$0.00 | \$0.00 |
| % of Total Federal Award | 19.00 % | 31.00 % | | |
| Domestic and Family Violence | | | | |
| Total Amount | \$15,796,795.00 | \$18,389,472.00 | \$0.00 | \$0.00 |
| % of Total Federal Award | 35.00 % | 49.00 % | | |
| Sexual Assault | | | | |
| Total Amount | \$5,155,477.00 | \$5,876,568.00 | \$0.00 | \$0.00 |
| % of Total Federal Award | 11.00 % | 16.00 % | | |
| Underserved | | | | |
| Total Amount | \$10,345,050.00 | \$9,492,165.00 | \$0.00 | \$0.00 |
| % of Total Federal Award | 23.00 % | 25.00 % | | |

Budget and Staffing

| Staffing Information | 2016-VA-GX-0053 | 2017-VA-GX-0051 | 2018-V2-GX-0024 | 2019-V2-GX-0043 |
|----------------------|-----------------|-----------------|-----------------|-----------------|
|----------------------|-----------------|-----------------|-----------------|-----------------|

Office for Victims of Crime - Performance Measurement Tool (PMT)

| | | | | |
|---|---------|---------|--|--|
| Total number of paid staff for all subgrantee victimization program and/or services | 2011 | 1744 | | |
| Number of staff hours funded through this VOCA award (plus match) for subgrantee's victimization programs and/or services | 1834334 | 1600910 | | |
| Total number of volunteer staff supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services | 12164 | 4125 | | |
| Number of volunteer hours supporting the work of this VOCA award (plus match) for subgrantee's victimization programs and/or services | 212429 | 166826 | | |

AGGREGATED SUBGRANTEE PERFORMANCE MEASURE DATA

| Victimization Type | | | | | | |
|--|---|--|-----------------|-----------------|-----------------|---------------------|
| Victimization Type | Number of Subgrantees Indicating Intent to Serve This Victim Type | Number of Individuals Who Actually Received Services Based on a Presenting Victimization | | | | |
| | | Quarter 1 Total | Quarter 2 Total | Quarter 3 Total | Quarter 4 Total | Per Quarter Average |
| Adult Physical Assault (includes Aggravated and Simple Assault) | 154 | 2744 | 2464 | 2597 | 3283 | 2772 |
| Adult Sexual Assault | 195 | 1590 | 1828 | 1937 | 2052 | 1851 |
| Adults Sexually Abused/Assaulted as Children | 147 | 603 | 691 | 694 | 662 | 662 |
| Arson | 64 | 39 | 74 | 88 | 41 | 60 |
| Bullying (Verbal, Cyber or Physical) | 90 | 1099 | 1178 | 1488 | 1100 | 1216 |
| Burglary | 91 | 543 | 626 | 654 | 685 | 627 |
| Child Physical Abuse or Neglect | 10 | 2195 | 2677 | 3106 | 3264 | 2810 |
| Child Pornography | 105 | 63 | 74 | 97 | 74 | 77 |
| Child Sexual Abuse/Assault | 7 | 3555 | 3787 | 4352 | 4559 | 4063 |
| Domestic and/or Family Violence | 44 | 14375 | 16580 | 17039 | 18039 | 16508 |
| DUI/DWI Incidents | 2 | 211 | 220 | 339 | 239 | 252 |
| Elder Abuse or Neglect | 4 | 658 | 728 | 1049 | 1669 | 1026 |
| Hate Crime: Racial/Religious/Gender/ Sexual Orientation/Other (Explanation Required) | 64 | 18 | 35 | 36 | 30 | 29 |
| Human Trafficking: Labor | 64 | 8 | 15 | 13 | 19 | 13 |
| Human Trafficking: Sex | 2 | 164 | 155 | 198 | 179 | 174 |
| Identity Theft/Fraud/Financial Crime | 73 | 310 | 402 | 396 | 444 | 388 |

Office for Victims of Crime - Performance Measurement Tool (PMT)

| | | | | | | |
|---|-----|------|------|------|------|------|
| Kidnapping (non-custodial) | 76 | 82 | 103 | 99 | 143 | 106 |
| Kidnapping (custodial) | 56 | 22 | 22 | 33 | 24 | 25 |
| Mass Violence (Domestic/International) | 2 | 16 | 12 | 48 | 24 | 25 |
| Other Vehicular Victimization (e.g., Hit and Run) | 75 | 119 | 144 | 275 | 169 | 176 |
| Robbery | 92 | 600 | 576 | 587 | 644 | 601 |
| Stalking/Harassment | 183 | 1389 | 1243 | 1538 | 1716 | 1471 |
| Survivors of Homicide Victims | 110 | 449 | 548 | 583 | 549 | 532 |
| Teen Dating Victimization | 108 | 57 | 65 | 44 | 70 | 59 |
| Terrorism (Domestic/International) | 40 | 8 | 6 | 7 | 10 | 7 |
| Other | 7 | 2826 | 4293 | 4918 | 5392 | 4357 |

Special Classifications of Individuals

| Special Classifications of Individuals | Number of Individuals Self Reporting a Special Classification | | | | |
|---|---|-----------------|-----------------|-----------------|---------------------|
| | Quarter 1 Total | Quarter 2 Total | Quarter 3 Total | Quarter 4 Total | Per Quarter Average |
| Deaf/Hard of Hearing | 103 | 112 | 115 | 95 | 340 |
| Homeless | 1123 | 1065 | 1222 | 1398 | 3369 |
| Immigrants/Refugees/Asylum Seekers | 976 | 1069 | 1151 | 1211 | 3061 |
| LGBTQ | 327 | 396 | 423 | 434 | 846 |
| Veterans | 223 | 239 | 320 | 273 | 684 |
| Victims with Disabilities: Cognitive/Physical /Mental | 1997 | 1920 | 2187 | 2528 | 6172 |
| Victims with Limited English Proficiency | 1005 | 1079 | 1225 | 1230 | 3412 |
| Other | 657 | 827 | 614 | 919 | 1089 |

General Award Information

| Activities Conducted at the Subgrantee Level | Number | Percent |
|---|--------|---------|
| Total number of individuals who received services during the Fiscal Year. | 116666 | |
| Total number of anonymous contacts who received services during the Fiscal Year | 19458 | |
| Number of new individuals who received services from your state for the first time during the Fiscal Year. | 85644 | 73.41 % |
| Of the clients who received services, how many presented with more than one type of victimization during the Fiscal Year? | 25429 | 21.80 % |
| Number of individuals assisted with a victim compensation application during the Fiscal Year. | 6152 | |

Demographics

| Demographic Characteristic of New Individuals Served | Number | Percent |
|--|--------|---------|
| Race/Ethnicity | | |
| American Indian or Alaska Native | 184 | 0.21 % |

Office for Victims of Crime - Performance Measurement Tool (PMT)

| | | |
|---|-------|--------------|
| Asian | 436 | 0.51 % |
| Black or African American | 21927 | 25.60 % |
| Hispanic or Latino | 6330 | 7.39 % |
| Native Hawaiian or Other Pacific Islander | 62 | 0.07 % |
| White Non-Latino or Caucasian | 47196 | 55.11 % |
| Some Other Race | 649 | 0.76 % |
| Multiple Races | 1334 | 1.56 % |
| Not Reported | 6418 | 7.49 % |
| Not Tracked | 1108 | 1.29 % |
| Race/Ethnicity Total | | 85644 |
| Gender Identity | | |
| Male | 22213 | 25.94 % |
| Female | 59208 | 69.13 % |
| Other | 115 | 0.13 % |
| Not Reported | 3365 | 3.93 % |
| Not Tracked | 743 | 0.87 % |
| Gender Total | | 85644 |
| Age | | |
| Age 0- 12 | 13426 | 15.68 % |
| Age 13- 17 | 6987 | 8.16 % |
| Age 18- 24 | 9193 | 10.73 % |
| Age 25- 59 | 41466 | 48.42 % |
| Age 60 and Older | 6450 | 7.53 % |
| Not Reported | 5176 | 6.04 % |
| Not Tracked | 2946 | 3.44 % |
| Age Total | | 85644 |

| Direct Services | | | | |
|---------------------------|--|--|--|----------------------|
| Service Area | # of Subgrantees That Provided Services in This Category | # of Individuals/Contacts Receiving Services | Specific Service | Frequency of Service |
| A. Information & Referral | 161 | 89123 | Enter the number of times services were provided in each subcategory. | 0 |
| | | | A1. Information about the criminal justice process | 63745 |
| | | | A2. Information about victim rights, how to obtain notifications, etc. | 67442 |
| | | | A3. Referral to other victim service programs | 41040 |

Office for Victims of Crime - Performance Measurement Tool (PMT)

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|---|-----|-------|--|-------|
| | | | A4. Referral to other services, supports, and resources (includes legal, medical, faith-based organizations, address confidentiality programs, etc.) | 52391 |
| B. Personal Advocacy/ Accompaniment | 119 | 33673 | Enter the number of times services were provided in each subcategory. | 0 |
| | | | B1. Victim advocacy/accompaniment to emergency medical care | 1334 |
| | | | B2. Victim advocacy/accompaniment to medical forensic exam | 1645 |
| | | | B3. Law enforcement interview advocacy/accompaniment | 5744 |
| | | | B4. Individual advocacy (e.g., assistance in applying for public benefits, return of personal property or effects) | 46658 |
| | | | B5. Performance of medical or nonmedical forensic exam or interview or medical evidence collection | 3143 |
| | | | B6. Immigration assistance (e.g., special visas, continued presence application, and other immigration relief) | 2299 |
| | | | B7. Intervention with employer, creditor, landlord, or academic institution | 7731 |
| | | | B8. Child or dependent care assistance (includes coordination of services) | 4147 |
| | | | B9. Transportation assistance (includes coordination of services) | 45796 |
| | | | B10. Interpreter services | 6560 |
| C. Emotional Support or Safety Services | 141 | 79531 | Enter the number of times services were provided in each subcategory. | 0 |
| | | | C1. Crisis intervention (in-person, includes safety planning, etc.) | 79450 |
| | | | C2. Hotline/crisis line counseling | 41770 |
| | | | C3. On-scene crisis response (e.g., community crisis response) | 856 |
| | | | C4. Individual counseling | 75207 |
| | | | C5. Support groups (facilitated or peer) | 24314 |
| | | | C6. Other Therapy (traditional, cultural, or alternative healing; art, writing, or play therapy, etc.) | 30519 |
| | | | C7. Emergency financial assistance | 12913 |
| D. Shelter/ Housing Services | 58 | 6426 | Enter the number of times services were provided in each subcategory. | 0 |
| | | | D1. Emergency shelter or safe house | 95449 |
| | | | D2. Transitional housing | 15151 |

| | | | | |
|--|-------|-------|---|-------|
| | | | D3. Relocation assistance (includes assistance with obtaining housing) | 2085 |
| E. Criminal/ Civil Justice System Assistance | 127 | 41088 | Enter the number of times services were provided in each subcategory. | 0 |
| | | | E1. Notification of criminal justice events | 30460 |
| | | | E2. Victim impact statement assistance | 4898 |
| | | | E3. Assistance with restitution | 2262 |
| | | | E4. Civil legal assistance in obtaining protection or restraining order | 22328 |
| | | | E5. Civil legal assistance with family law issues | 6203 |
| | | | E6. Other emergency justice-related assistance | 16864 |
| | | | E7. Immigration assistance | 1185 |
| | | | E8. Prosecution interview advocacy/accompaniment | 10738 |
| | | | E9. Law enforcement interview advocacy/accompaniment | 4215 |
| | | | E10. Criminal advocacy/accompaniment | 18140 |
| E11. Other legal advice and/or counsel | 15976 | | | |

ANNUAL QUESTIONS

Grantee Annually Reported Questions

| Question/Option | Count |
|--|-------|
| Were any administrative and training funds used during the reporting period? | |
| Yes | 1 |
| No | 0 |
| Did the administrative funds support any education activities during the reporting period? | |
| Yes | 0 |
| No | 1 |
| Number of requests received for education activities during the reporting period. | 0 |
| Number of people trained or attending education events during the reporting period. | 0 |
| Number of events conducted during the reporting period. | 0 |
| Did the grant support any coordination activities (e.g., with other service providers, law enforcement agencies) during the reporting period? | |
| Yes | 0 |
| No | 1 |
| Describe any program or educational materials developed during the reporting period. | |
| N/A | |

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

N/A

Describe any program policies changed during the reporting period.

The state of Tennessee does not allow program policy changes.

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

Domestic and Sexual Violence Program (DVP) We had 9 earned media coverage during the grant year that includes news print, tv interviews and radio spots. We have been able to engage the media during awareness months, our opening of our new SAFE room, and unfortunately through intimate partner crimes that have occurred in the community- i.e. March 2019 when a beloved employee of a local restaurant was killed by her husband. We have also been able to capture media releases around additional funding and fundraising opportunities – giving us the opportunity to continue creating awareness around our services and impact in the community. In addition to earned media we have found social media to be a positive outlet to release information and news stories to raise awareness around the important issues and implications of intimate partner violence. We are continuing to see an increase number of followers to our social media outlets and increased analytics in tracking through Facebook media. Helen Ross McNabb Center – Family Crisis Center The Helen Ross McNabb Center has a good working relationship with local media. The Family Crisis Center (FCC) has received media coverage several times over the last year. Local news sources reached out to us to discuss healthy relationships, domestic violence and services available. The following list contains some of the media coverage we received: Dec. 21, 2018: Domestic violence counselors: holiday stressors can escalate abusive behavior <https://www.wate.com/news/local-news/domestic-violence-counselors-holiday-stressors-can-escalate-abusive-behavior/amp/>

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

AGAPE Agape participates in the Coordinate Entry System to assist victims of domestic violence with housing. Agape attends the Individual CE, Family CE and Domestic Violence CE meetings. The purpose of these meetings is to discuss and address the barriers individuals and families face with homelessness and collectively provide solutions. Agape also participates in the Continuum of Care monthly meetings. This initiative facilitates projects that help end homelessness in Nashville. By participating in these meetings, Agape is promoting initiatives that assist victims of crime through collaboration with other agencies. Agape Court Advocates also coordinate services with the Family Safety Center and the Jeanne Crowe Advocacy Center by writing Orders of Protection at the Family Safety Center. Agape Court Advocates provide these services during the hours that Jeanne Crowe Advocacy Center is not in operations. By offering these services, Agape Court Advocates are providing services to victims of crime in coordination with the Office of Family Safety. Partnership for Families, Children and Adults Prominent examples of coordinated response/services within my community to assist victims of crime revolve around DART/SART and LAP activities. The following are ways that VSS has promoted and helped to coordinate these efforts: Victim Support Services (VSS) coordinates the Domestic Assault Response Team (DART) and the Sexual Assault Response Team SART which are multidisciplinary teams that partner together to provide interagency, coordinated responses to domestic assault and sexual assault that make survivors' needs a priority, hold offenders accountable, and promote public safety. The cooperative partnerships formed by DART and SART serve to validate survivors' concerns, inform survivors of available options for addressing their concerns, and improve service accessibility for diverse populations. The team model improves cross-discipline communication and enables survivors to provide feedback on their cases. The DART and SART efforts improve criminal justice response and create a more compassionate and streamlined response, service providers intervene in a way that speaks to the context of each survivor's circumstance and respects the unique roles of the different professionals involved in responding to sexual assault. Key victimization services providers including, but not limited to, the courts, law enforcement, health and human services organizations, etc. are all critical partners to the DART and the SART. The forums provide an opportunity for community partners to provide valuable input regarding systemic needs, create opportunities for stronger coordination and collaboration, and address gaps in services for stronger policies. Primary objectives: Educate the criminal justice system and community to raise awareness of domestic and sexual assault decrease survivor blaming, and increase offender accountability. Build relationships with individual responders to domestic and sexual assault Identify valuable community resources and avoid duplication of services Share information, knowledge, and expertise among team members Reduce further trauma to domestic and sexual assault survivors and mitigate the effect of the violence on survivors and their families Review data to assess the effectiveness of the team DART/SART Received an OVW Planning grant which focused on the following outcomes: The resulting community based initiatives were: Victimless Prosecution and an Offender Docket Enhancing the safety of high-risk-for-lethality victims and their children. Ensuring appropriate containment of high-risk offenders. Facilitating local community-oriented policing initiatives. Providing specialized training locally --including on strangulation, stalking, and lethality VSS is also a primary partner with the coordinated Lethality Assessment Program response. Partnership in conjunction with our local Family Justice Center, has adopted Maryland Networks Lethality Assessment Program model. Local law enforcement now has access to a separate 24/7 hotline that they utilize to offer survivors of intimate partner domestic violence immediate access to services upon the scene of abuse. VSS provides the shelter component of the program which offers a minimum 24 hour safety cool-down period to allow the situation to de-escalate. since leaving the relationship is proven to be the most life-threatening time. This

provides a definite temporary emergency respite option for those who may not want to reside in their unsafe home where the incident just occurred. It also aids with outreach efforts, by allowing law enforcement to offer information on services provided by VSS, the Family Justice Center, and other victimization partners. Frontier Health Domestic Violence - During this fiscal year, the Kingsport Police Department began using the Lethality Assessment Program. This has been very successful so far

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

Catholic Charities of East Tennessee Samaritan Place has identified a major issue preventing victims from receiving assistance as the lack of funding and employees within Adult Protective Services. Samaritan Place has several clients who lived in abusive situations; however, a case never was opened by APS. Clients do not feel comfortable with calling the police in situations like this, or they did contact police and not enough evidence was found to create a case. Samaritan Place works closely with APS throughout the referral and intake process to make it easier on the client in crisis. Such current hostility has created an environment of fear and distrust between the local community and law enforcement. Such barriers could potentially have a negative influence on reporting of crimes due to fear of enforcement from participating law enforcement agencies. Sexual Assault Center- SAFE Clinic and Counseling Issues around the lack of access to basic needs make it difficult for some victims to receive assistance that is continuous and impactful. When a victim is focused on basic needs such as shelter, housing, safety, and food, it can make it difficult to address the trauma of their victimization and engage with service providers including advocates, therapists, law enforcement, sexual-violence related health care that includes medical legal exams, and medication. The demand for housing and emergency shelter is outpacing its limited availability. Resources are particularly sparse in the surrounding counties. Transportation is another barrier. SAC s advocates are strategic when scheduling appointments when public or private transportation is unavailable. In addition to basic needs, first responders and service providers lacking expertise and support around trauma-informed response may unknowingly re-traumatize victims which may decrease or halt engagement. Advocates continue to report instances of overt and covert victim blaming. A recent instance of victim blaming involved victim/survivor who had experienced multiple sexual assaults. The first assault occurred when the client was sixteen years old. The investigation process further traumatized her and she did not feel like she was believed. At the age of 18, the client experienced a gruesome assault at the hands of the same perpetrator. The client did not want to report because of what happened when she was younger. Lastly, the resources that are intended to help victims and survivors of sexual assault can be hard to access. As more services are available, more individuals are seeking help in need of therapy, advocacy, and forensic examinations. The increased demand and lack of additional resources impacts wait times particularly for outpatient therapy. Transportation – despite having LYFT concierge, clients without transportation and/or adequate finances are unable to access transportation. Childcare – adult clients with children have difficulty finding childcare for their underage children to be able to maintain scheduled sessions. Again, without adequate finances and/or availability, it is difficult to secure childcare. Stigmatization/shame/self-blame – Along with being a survivor of sexual crime comes symptoms of shame, self-blame, guilt and fear of stigmatization. These areas affect the majority of SAC clients with some specific focus on men. In society, our boys are raised not to be victims of anything, especially sexual assault. Our societal views also cause barriers for males seeking treatment due to the perception if a male has an unwanted sexual assault it is viewed as experience despite the lack of consent. Legal/immigration status – despite our consistent growth with the Hispanic communities, there is a fear for anyone of this population to seek public assistance of any kind for fear of ICE and/or other authorities. Sexual Minorities – Despite SAC current outreach success with this population, statistically sexual minorities are more likely to experience violence whether it be at home, school or general society. (I can obtain stats if needed) African American/Black – Again, despite SAC successful outreach, this population historically does not seek assistance outside of the home and/or religious institutions. With the general victim blaming of society, exacerbated by survivors not being believed, this population has been conditioned not to seek outside help. Avalon Center For Avalon Center s VOCA activities we have seen issues in the following two areas the formation and sustainability of SARTs and the development and implementation of Transitional Housing. SARTS Morgan, Van Buren, Bledsoe Counties The common thread between these counties is that they do not have hospital facilities. (Bledsoe does but they refuse to do Sexual Assault exams and send all sexual assault victims to Cumberland County). We have been diligently working on forming sexual assault teams that only include Law Enforcement and District Attor

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

AGAPE Agape participates in the Coordinate Entry System to assist victims of domestic violence with housing. Agape attends the Individual CE, Family CE and Domestic Violence CE meetings. The purpose of these meetings is to discuss and address the barriers individuals and families face with homelessness and collectively provide solutions. Agape also participates in the Continuum of Care monthly meetings. This initiative facilitates projects that help end homelessness in Nashville. By participating in these meetings, Agape is promoting initiatives that assist victims of crime through collaboration with other agencies. Agape Court Advocates also coordinate services with the Family Safety Center and the Jeanne Crowe Advocacy Center by writing Orders of Protection at the Family Safety Center. Agape Court Advocates provide these services during the hours that Jeanne Crowe Advocacy Center is not in operations. By offering these services, Agape Court Advocates are providing services to victims of crime in coordination with the Office of Family Safety. Partnership for Families. Children and Adults Prominent

examples of coordinated response/services within my community to assist victims of crime revolve around DART/SART and LAP activities. The following are ways that VSS has promoted and helped to coordinate these efforts: Victim Support Services (VSS) coordinates the Domestic Assault Response Team (DART) and the Sexual Assault Response Team SART which are multidisciplinary teams that partner together to provide interagency, coordinated responses to domestic assault and sexual assault that make survivors' needs a priority, hold offenders accountable, and promote public safety. The cooperative partnerships formed by DART and SART serve to validate survivors' concerns, inform survivors of available options for addressing their concerns, and improve service accessibility for diverse populations. The team model improves cross-discipline communication and enables survivors to provide feedback on their cases. The DART and SART efforts improve criminal justice response and create a more compassionate and streamlined response, service providers intervene in a way that speaks to the context of each survivor's circumstance and respects the unique roles of the different professionals involved in responding to sexual assault. Key victimization services providers including, but not limited to, the courts, law enforcement, health and human services organizations, etc. are all critical partners to the DART and the SART. The forums provide an opportunity for community partners to provide valuable input regarding systemic needs, create opportunities for stronger coordination and collaboration, and address gaps in services for stronger policies. Primary objectives: Educate the criminal justice system and community to raise awareness of domestic and sexual assault decrease survivor blaming, and increase offender accountability. Build relationships with individual responders to domestic and sexual assault Identify valuable community resources and avoid duplication of services Share information, knowledge, and expertise among team members Reduce further trauma to domestic and sexual assault survivors and mitigate the effect of the violence on survivors and their families Review data to assess the effectiveness of the team DART/SART Received an OVW Planning grant which focused on the following outcomes: The resulting community based initiatives were: Victimless Prosecution and an Offender Docket Enhancing the safety of high-risk-for-lethality victims and their children. Ensuring appropriate containment of high-risk offenders. Facilitating local community-oriented policing initiatives. Providing specialized training locally --including on strangulation, stalking, and lethality VSS is also a primary partner with the coordinated Lethality Assessment Program response. Partnership in conjunction with our local Family Justice Center, has adopted Maryland Networks Lethality Assessment Program model. Local law enforcement now has access to a separate 24/7 hotline that they utilize to offer survivors of intimate partner domestic violence immediate access to services upon the scene of abuse. VSS provides the shelter component of the program which offers a minimum 24 hour safety cool-down period to allow the situation to de-escalate, since leaving the relationship is proven to be the most life-threatening time. This provides a definite temporary emergency respite option for those who may not want to reside in their unsafe home where the incident just occurred. It also aids with outreach efforts, by allowing law enforcement to offer information on services provided by VSS, the Family Justice Center, and other victimization partners. Frontier Health Domestic Violence - During this fiscal year, the Kingsport Police Department began using the Lethality Assessment Program. This has been very successful so far

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

CASA of Dickson County CASA of Dickson County offers monthly continuing education opportunities for Volunteers and Staff, such as: End Slavery – Trafficking 101 in May 2019 and Youth Substance Abuse in Dickson County in October 2019 with Dickson Drug Free Coalition; ACE s Trauma Informed Approach in Clarksville, TN; Self Care with the Elementary Social Worker for Dickson County Board of Education in September 2019, facilitated by other local victim service organizations and CASA of Dickson County. Case Management The result of VOCA S collection analysis indicates that the population we serve has enhanced their skills of handling crisis situations which can result in decreasing and prevention of future victimization. By offering victims information and the support in the form of victim advocacy, the victim s knowledge base is enhanced about their legal rights, how to remain safe and decrease episodes of future victimization. Advocates attend monthly providers meetings regarding available community resources that can be utilized to assist the population that VOCA serves. Our Advocates completed 21 hours of training on Crimes against Women, 13 hours of training on Aging and a webinars. Frontier Health The most notable improvement in service delivery to victims has been the opening of the Family Justice Centers in both Washington and Sullivan counties. Although the Washington County center has been open several years and Sullivan County for a little over a year, it took some time to build a reputation for consistent quality services. The community has now come to know and trust the FJC s to be the place to find victims services in the area. We work as a team with both centers to provide trauma informed care to all victims of family violence and sexual assault. The next key improvement is the implementation of LAP with the two police departments within our shelter service areas. City of Johnson City (Johnson City/Washington County Family Justice Center) The creation of our SART protocol and the James H. Quillen VA Medical Center s SAR protocol have been huge accomplishments in victim service delivery. The SART protocol was established – advocates respond 24/7 to sexual assaults reported to hospitals, police, and/or to their sexual assault crisis hotline. The same advocates respond to the VA whenever a sexual assault is reported at their hospital, or the victim discloses they are a veteran. Anderson County Government Working with our law enforcement officers to get better information to us concerning the where about of the victims has greatly improved. This past month we had an 81.4% rate of getting our victims into court, mainly due to the fact that our officers have gotten the needed information to us. The officers have begun to be quite diligent at handing out our pamphlets to those who are victims and securing written statements from the victim and witnesses. Family and Children s Services Family & Children s Service now employs six bilingual (some of which are bicultural) clinicians who are co-located in three partner agencies to meet culturally specific needs and reduce

barriers related to language, community trust and perceptions, and transportation. Family & Children s Service continues to use a Trauma Informed Care approach to service delivery across the agency. This means that whoever the client encounters within the agency will connect with the client in a trauma informed manner, lessening the chance of re-victimization. As stated in previous years, the clinicians receive on-going trauma related professional development to further hone their skills and best serve victims of crime. One of the guiding principles of Trauma Informed Care is to foster empowerment, voice, and choice. Our clinicians and staff ensure that clients strengths are recognized and that their experiences are validated. This solidifies the foundation of safe and secure rapport building which is the vehicle to help, hope, and healing. It also fosters a greater understanding and building of the clients resilience. In an effort to acknowledge the heaviness of the work, we have provided trainings and opportunities for staff to focus on self-care and discussions on the impact of vicarious trauma. We strongly encourage daily self-care management and check-ins among team members, realizing that the clinician is their own most powerful tool. To provide quality care, the clinician must take care of themselves as well.

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

Domestic Violence Change is Possible, Inc. (CHIPS) CHIPS was contacted by another local DV shelter. The advocate had a client that did not feel safe in their service area because of the location proximity to the abuser. CHIPS was able to offer shelter to the client. The client sustained major damage to their facial bone structure during an attack. Reconstructive surgery was done while the client was in the shelter program. Advocates transported the client to all medical appointments and offered emotional support during this very difficult process. CHIPS worked with the hospital and advocated to get medical expenses lowered and free medications. Victims Compensation was filed to offer compensation to the client for lost wages and medical bills. Once the client was well enough, they began searching for and obtained employment. Soon after, permanent housing was obtained. CHIPS continues to offer follow up services. Lawrence County Government The General Sessions Victim Witness Coordinator worked with a domestic violence victim who falls under the special classification of the LGBTQ. Her initial victimization includes domestic assault, vandalism, aggravated assault, and theft perpetrated by her wife. Initial contact was made in court with the victim, and at that point she disclosed that perpetrator had been coming by her home. The victim reported that she had called 911, but when the officer arrived they did not have a copy of conditional bond and the police officer who responded informed the victim there was no conditional bond and they couldn t do anything for her. The victim witness coordinator secured a copy of the bond conditions and gave it to law enforcement, and the victim. At the second court date the victim supplied a log to the victim witness coordinator of the defendants contact and called law enforcement to take a report and arrest the defendant for aggravated stalking and violation of conditional bond. The victim was referred to the local domestic violence shelter for services. The victim was very apprehensive to testify and the victim witness coordinator supported the victim and encouraged her to follow through with the case. The victim through support from the victim witness coordinator testified at the preliminary hearing which helped progress this case to Circuit Court. Community Health of East TN Victim met offender a couple of years ago in her home country of Russia. Victim continued to follow her new friend on social media for the year. Life in Russia was not easy for Victim due to being a single female in an extremely male dominated community. Victim found herself hoping for something different. Her financial situation was nearly impossible; she was trying to live on what would be equivocal to 500 American dollars per month. Before long, Offender asked Victim to join him in his new home in America as his fianc . Victim was so caught up in the idea of marrying Offender and coming to America that she gave little thought to the fact she knew very little about him. Victim arrived in Tennessee in early 2018, and married Offender shortly after arriving. She was shocked to find that Offender was completely immersed in a very conservative Orthodox congregation. She was expected to conform to her husband s religion which included her complete obedience to her husband in order to gain God s blessings. This was very similar to the teachings in the community that she grew up in Russia. This segued into a very unhealthy relationship. Offender controlled everything about Katerina s life. He did not allow her to speak to Americans, attend other churches, obtain a driver s license, or get a job. He withheld her passport, and forbade her to speak in her native Russian language. When Katerina began to resist these impositions, the abuse became physical. Offender intimidated her until she was careful not to step outside the home without his approval. Finally, Victim managed to enroll in an ESL (English as a Second Language) class being offered at a local church near their apartment. These classes were held while Surge was at work. She began building a relationship with her English Teacher. One day, she disclosed to her English Teacher what was going on in her marriage. Teacher referred Victim to our program, and she came into shelter the same day that she was referred. Victim had very low level of English and was so afraid. Even though she had been in America for nearly a year, she had experienced little outside the four walls of an apartment she shared with her husband. Since coming to shelter, Victim a says that for the first time she feels safe and enabled to study for her driving permit, look for employment, and learn English. Many obstacles are still present but she is free from her abuser. Victim has a support system from her English teacher who has introduced her to a nearby Russian Community where she is finding resources to put her life back together. She has received case

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

21st Judicial District Attorneys General Office Periodically, State cases get transferred and are taken over by Federal Law Enforcement and/or Prosecutors. When this happens, we prepare and help transition the crime victim(s) as they are referred to and transferred to the appropriate Federal Agency handling the case. Additionally, occasionally, federal crime victim(s) may not know how to contact Federal crime victim resources and contact our agency for assistance. Once again, we assist them in locating the appropriate Federal Agency. Luckily, we continue to have contact with the victims due to the pending case within our county. Once the federal case has concluded, we resume our pending case. End Slavery Tennessee We work directly with law enforcement, TBI, FBI and other agencies to identify and serve Victims of Federal crime and ensure that they are getting wrap-around treatment and services. We assist the victims through the legal process, advocate on their behalf and address any physical or mental health needs due to their victimization.

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

VOCA sub-recipients were also surveyed on this question. Responses included the following issues or emerging trends: Knoxville- Knox County Community Action Committee As Rise Above Crime has continued to provide victim services to individuals, the most notable trend that our program is seeing is financial exploitation and fraud. We are finding that this type of mistreatment most often stems from substance misuse by a trusted person, and the misuse of the substance is often the driving factor behind the financial exploitation of the vulnerable adult, causing them to seek victim services. Another notable trend that has started emerging is the amount of scams by strangers. The Rise Above Crime program is providing victim services to those that are falling victim to numerous different telemarketing scams, online dating scams, and charity scams. Additionally, an emerging issue in the community would be the amount of phone scams involving individuals claiming to be from the Knox County Sheriff's Office or the Knoxville Police Department. Once the call is answered by a potential victim, they are advised that a warrant will be issued for their arrest if they do not provide requested information such as a date of birth and/or social security number. These types of scams are occurring at an alarming rate. Our case management staff works with each victim to determine the best resources available to them that will assist the client in overcoming this type of elder abuse. 21st Judicial District Attorney General's Office A major trend in our district is the increase in homicide cases due to overdose deaths related to fentanyl. Tennessee legislators have determined that these deaths are considered second degree murder; however, proving the elements of the crime can prove to be challenging. This is affecting victims in our district because they do not understand the challenges with taking a case to trial and the possibility of a defendant being acquitted by a jury. Community Coalition against Human Trafficking Gaining access to services and supports for undocumented immigrants has become increasingly difficult. The CCAHT has also encountered ongoing issues with victims of human trafficking being charged with other crimes such as prostitution, drug possession, etc. that create additional barriers/challenges in victims recovery and contribute to the shame/stigma associated with the experience of trafficking victimization. Even when law enforcement officers do stings to identify victims of human trafficking, there are rarely any victims identified due to extenuating factors that prevent them from being labeled as victims. In addition, we have found that most of our clients do not qualify for victims compensation due to the nature of how these cases are prosecuted or pursued by law enforcement and defense attorneys. We all know their victimization is sexual in nature, but the application and process do not recognize this. Because of the nature of compound victimization, very few of them have reported major assaults within the required time frame (which also disqualifies them from obtaining the assistance). We are also seeing a lack of intention with law enforcement and the judicial system to prosecute crimes as trafficking (for example, solicitation of prostitution of a minor for a mother who was trafficking her daughter). We are not sure why we are seeing this reluctance to enhance the potential charges. Family and Children's Services We continue to meet clients who identify being shot at and/or witnessing a shooting as a part of their victim type profile. This trend appears to be consistent with the overall increase in violence within Davidson County. We also consistently see client reports of violations of orders of protection. In addition, there has been an increase in victims identifying robbery as the primary victimization type, particularly those victims within the Hispanic/Latino communities. Clients have also identified being unaware of their victims rights in the past and unaware of some of the programs that would have benefitted their recovery initially. They have expressed gratitude for being made aware of their rights and the services that will support them through their crises. Community Health of East TN We are noticing a trend in the number of immigrant survivors we are serving. We are receiving many immigrant referrals from the Knox County Justice Center due to domestic violence shelters in the Knoxville area being continually full. We are able to provide physical safety for these survivors and make provisions for their basic needs; however, communication can prove to be difficult for ESL survivors, as well as setting them up for long-term success through employment and permanent housing. We utilize a language line to be able to communicate to them and networking with resources including ESL teachers and other immigrant assistant programs. Child Advocacy Center of 9th District

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

18. ue to insufficient salary, insufficient benefits, and/or heavy workload). Community Health of East TN Although, our staff retention has improved from recent years, we are still having issues with retaining staff. The VOCA salary enhancement has been helpful; however, our agency s benefits have not improved. The single medical insurance plan is reasonable, but the family plan is very expensive. Some of our staff have sought out other insurance plans such and Tennessee Cover Kids to help cover their families, while their spouses are left without insurance due to not being able to afford the family insurance plan. Four of our staff currently work part-time jobs in addition to working full-time in our program in order to make ends meet. The longest period of time that a current staff member has worked in the program has just been just over three years. Two staff has worked in the program two years and another two staff have been with the program for just over one year. Our newest staff was hired in September and we currently have one vacant position. YWCA Nashville Staff retention and turnover is something the YWCA of Nashville & Middle Tennessee monitors very closely. The organization was able to recently increase salaries and wages for many of our positions in an effort to stay competitive, as well as increase compensation for the PRN role so that staff callouts and other coverage issues can be handled in a more streamlined manner. While this has been beneficial, we continue as an organization to develop strategies for dealing with turnover. One cause of turnover in our entry-level positions is that employees use the YWCA as a stepping stone to other career opportunities. To boost retention in these instances, the YWCA is committed to promoting from within whenever possible so that our employees at every level can see the opportunities for advancement. In this same vein, a DV Specialist II title has been created with a slight wage increase and added leadership opportunities. To combat heavy workloads associated with this work, we continue to increase staff size at every opportunity and keep leadership engaged with staff at the office level. The nature of this work also leads to a high level of staff burnout due to vicarious trauma and lack of self-care by employees. The YWCA of Nashville & Middle Tennessee is committed to creating a culture of compassion and self-care in which our employees feel supported and capable of processing difficult experiences and complex emotions. We also conduct staff retreats, optional events, self-care check-ins, and other morale boosting activities, all as an effort to stem burnout and allow the organization to maintain more long-term employees.

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

With completion of the annual strategic planning process for allocation of funds, OCJP distributes a public notification of funding intent through our website, and then canvases the state for both local and state level submitted projects that appear to be a fit for the program models that have been determined to meet the needs of Tennessee. In addition, we send out the information about open solicitations to listserv and currently funded programs to share the information statewide.

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

OCJP, through its network of criminal justice professionals, victim services professionals and key stakeholders, is continually seeking to direct funding to new/underserved populations. During the reporting period, OCJP had an open solicitation for culturally specific and underserved populations, with the purpose to reach victim who may not have access to services, 6 agencies were funded under this solicitation to serve new/underserved populations.

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

Scott County Government Before this program, victims of domestic violence felt lost in the court system. This program has allowed for victims to have a designated victim witness coordinator to guide them through the entire criminal prosecution process. Also, Scott County has now started Domestic Violence Court, a specialty court within the General Sessions docket, to increase offender accountability. Council for Alcohol and Drug Abuse Services Due to the majority of our clients having experienced trauma prior to or as a result of their substance abuse issues, we saw that we were meeting the co-occurring and substance abuse treatment needs, however, were seeing recidivism and high relapse due to inability to effectively meet and address trauma needs. Due to not having the appropriate programming, training, and staffing in place, we were unable to provide the needed trauma-informed groups and activities to improve recognition and coping skills in this area. Since our programming has been implemented, we have seen clients better able to develop coping skills and confidence of staying clean. We have also found more openness to discussing issues they may have been reluctant to bring to the surface prior to programming. Community Coalition against Human Trafficking Until November 2018 when CCAHT launched our safe house specifically dedicated to serving adult survivors of trafficking who identify as female, housing had been a significant service gap in our community. Thanks to continued funding from OCJP, CCAHT will grow our capacity and triple bed space in 2020 to better meet the needs of the survivors we serve and continue to fill this gap in our community. In addition to offering in-house safe shelter, we also provide a safe place for individuals to go through community partners so that they can receive more individualized treatment when applicable. The CCAHT is also responding to gaps in services for trafficked minors in our service area, having added a Director of Youth Services to our staff in 2019. This has allowed us the opportunity to enhance specialized services for minors in our service area, including the addition of a preventive curriculum for youth labeled as high risk for trafficking. Another barrier has been access to appropriate and effective mental health services in a timely manner. To address this, CCAHT added a staff therapist to our team in 2019 who is able to go to our clients – both residential and community based – to provide specialized therapy, thus enhancing accessibility to specialized treatment that some clients may not have otherwise had access to.

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

OCJP requires agencies to obtain and track outcomes as part of their VOCA contract. The outcomes are monitored by the agencies and evaluated for project improvement. Outcomes are shared with key stakeholder groups at planning meetings and in the OCJP annual report, which is available online for review.