

# FLORIDA'S DOMESTIC VIOLENCE NEEDS ASSESSMENT FOR 2000



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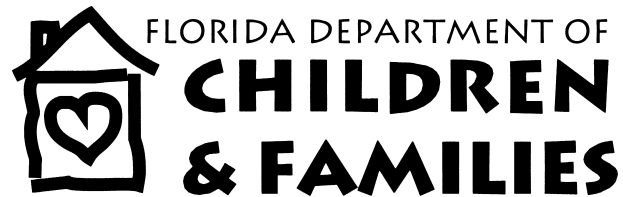
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# EXECUTIVE SUMMARY

In its role as certifying agency for domestic violence centers in Florida, the Department of Children and Families is mandated to consider “a current, statewide needs assessment” for domestic violence services.

Florida’s last statewide domestic violence needs assessment was conducted in 1996 (Maxwell, 1996). In October, 1999, the Department solicited proposals to update the previous needs assessment in order to determine:

- where domestic violence services (in terms of beds) are needed in the state; and
- what services or resources are needed by victims of domestic violence.

In March, 2000, the Department contracted with the Institute for Family Violence Studies at Florida State University to conduct this needs assessment. The contract stipulated the following data collection activities:

- survey the executive directors of Florida’s 38 existing certified domestic violence centers;
- survey a sample of family safety professionals, state attorneys, sheriffs, judges, health department staff, principals, and other human services providers that work with domestic violence victims;
- analyze geographic and demographic data relative to domestic violence shelter utilization; and
- conduct focus groups with battered women.

This needs assessment was to be completed by the summer of 2000.

## METHODS, ANALYSES, AND FINDINGS

*First*, prior needs assessments were reviewed. These included needs assessments conducted in Florida in 1986, 1994 and 1996, as well as domestic violence needs assessments done in Oregon (1998), Hawaii (1999), and Missouri (1999).

*Second*, geographic and demographic and domestic violence shelter data were analyzed. It was found that on average, north Florida had 8 shelter beds per 1,000 Florida Department of Law Enforcement (FDLE) Domestic Violence Crime Reports, whereas central Florida had 14 beds, and south Florida had 11 beds. Efficiency or utilization was also examined by taking the ratio of women actually sheltered during 1998-99 per 1,000 FDLE reports to beds per 1,000 FDLE reports. This calculation takes into account the variation in the number of available beds in shelters and resulted in ratios of 6.7 for north Florida, 5.3 for central Florida, and 4.9 for south Florida.

*Third*, a review of the current allocation formula for funds earmarked for domestic violence services was done. The current allocation formula used by the Florida Department of Children and Families gives weight to the following factors: number of marriage licenses (40%); number of females aged 18 and over (50%); and land area (10%). A revised allocation formula to be applied on a county basis suggests the following factors and weights be considered in allocating funds: number of marriage licenses (25%); number of children aged 0-17 (25%); number of women aged 18-44 (25%); estimated number of domestic violence cases (20%); and percent rural (rurality) (5%).

*Fourth*, surveys were utilized to measure respondents’ perceptions of the needs of adult victims and children who had experienced domestic violence. Needs were

assessed *both* of shelter residents and victims of domestic violence in the community (e.g., those not residing in shelters). Three instruments were devised: 1) justice system survey; 2) health and social services system survey; and 3) principals' survey. These tools were developed with input from domestic violence experts, focus groups, and Department of Children and Families staff. First and second mailings of the survey were done. Data in Table A indicate response rates by respondent group.

**TABLE A**  
*Response Rate by Respondent Group*

<i>Sample Group</i>	<i># Sent</i>	<i># Returned</i>	<i>% Return*</i>
Domestic Violence Centers & Florida Coalition Against Domestic Violence	40	28	70%
Governor's Task Force on Domestic Violence	20	11	58%
Justice System	327	94	29%
Health & Social Services System	110	67	64%
Principals	67	25	40%
<b><i>Total</i></b>	<b><i>564</i></b>	<b><i>233**</i></b>	<b><i>42%</i></b>

\* *Takes into account 13 undeliverable surveys*

\*\* *8 surveys were missing group identification*

Table B reflects the overall five highest and lowest rated unmet needs for groups of domestic violence victims:

**TABLE B**  
***5 Highest and 5 Lowest Rated Unmet Needs of Domestic Violence Victims***

**5 Highest Rated Unmet Needs (3=HIGH; 2=MEDIUM; 1=LOW)**

<b><i>Women in Domestic Violence Shelters</i></b>	
<b><i>Unmet Need</i></b>	<b><i>Mean</i></b>
permanent housing	2.59
transitional housing	2.49
transportation	2.38
legal help with custody	2.36
legal help with divorce	2.35
dental care	2.35

<b><i>Women in the Community</i></b>	
<b><i>Unmet Need</i></b>	<b><i>Mean</i></b>
permanent housing	2.63
child care	2.54
transitional housing	2.48
mental health care	2.48
legal help with custody	2.43

**5 Lowest Rated Unmet Needs (3=HIGH; 2=MEDIUM; 1=LOW)**

<b><i>Women in Domestic Violence Shelters</i></b>	
<b><i>Unmet Need</i></b>	<b><i>Mean</i></b>
help obtaining injunctions	1.65
clothing/personal items	1.65
food	1.72
prenatal care	1.73
victim assistance	1.78
household goods	1.78

<b><i>Women in the Community</i></b>	
<b><i>Unmet Need</i></b>	<b><i>Mean</i></b>
clothing/personal items	1.68
food	1.73
household goods	1.76
help obtaining injunctions	1.76
prenatal care	1.84

Table C shows the three highest rated unmet needs according to each respondent group.

**TABLE C**  
***3 Highest Rated Unmet Needs by Respondent Group***

<i><b>Respondent Group</b></i>	<i><b>Women in Shelters</b></i>	<i><b>Women in the Community</b></i>	<i><b>Children in Shelters</b></i>	<i><b>Children in the Community</b></i>
DV Center/ Florida Coalition Against Domestic Violence	dental care legal help divorce prescription help	prescription help dental care legal help divorce* legal help custody*	dental care schooling mental health care	mental health care dental care transportation
Governor's Task Force	transitional house transportation job training/ placement	other legal help transitional house permanent house	mental health care emergency medical care recreation	mental health care schooling addictions care
Justice System	permanent house cash transitional house	child care permanent house job training/ placement	mental health care transportation schooling	mental health care schooling transportation
Social/Health Services	permanent house transitional house child care	permanent house transitional house transportation	mental health care transportation dental care	mental health care schooling transportation
Principals			schooling transportation mental health care* dental care* support groups*	schooling support groups mental health care

\*tie

*Fifth*, two types of focus groups were analyzed for the purposes of this needs assessment: 1) face-to-face group meetings with residents of domestic violence shelters; and 2) conference calls with Florida Coalition Against Domestic Violence caucus group members. Focus groups were held between April and June, 2000, at domestic violence centers in northwest, north, central, and south Florida. At each focus group, residents who volunteered to participate were asked about their understanding of what services and resources are needed by persons who have experienced domestic violence. Between 6 and 15 residents participated in each focus group. Conference calls were also conducted with members of four caucuses of the Florida Coalition Against Domestic Violence: 1) Battered/Formerly Battered Women Caucus; 2) Child Advocates Caucus; 3) Women of Color Caucus; and 4) Lesbian/Bisexual/Transgendered Caucus. Between 2 and 6 members of each caucus participated in the conference calls.

Focus group observations were systematically documented in narrative form and then coded according to categories. Findings were classified under the headings of needs, barriers, concerns, and beliefs/perceptions, and categories that developed under these headings were housing, employment, health/safety, program/shelter, domestic violence system, and legal issues, personal needs, and community resources. Among the 711 coded responses, 197 or 28% mentioned health and safety issues. The next most frequently mentioned category was community resources (22%), followed by domestic violence system issues (19%).

*Examples of needs included:*

**Domestic Violence System Issues** (transitional help is needed after a woman leaves a shelter, children need support)

**Health and Safety Issues** (medical care, mental health treatment, dental care)

**Community Resources** (case coordination, training for Department of Children and Families workers)

*Examples of barriers included:*

**Housing Issues** (waiting periods for subsidized housing)

**Health and Safety Issues** (lack of emergency room response to victims, lack of dental care for dental emergencies)

**Community Resources** (lack of transportation, difficulty obtaining TANF)

*Examples of concerns included:*

**Health and Safety Issues** (mental health care for children witnessing violence, immigration concerns, same-sex violence issues)

**Community Resources** (need for agency/school staff to be better trained to deal with children experiencing domestic violence, lack of after school care, changes in TANF requirements)

**Program/shelter Issues** (staff insensitivity)

*Examples of beliefs/perceptions included:*

**Health and Safety Issues** (medical assessments are needed at intake)

**Community Resources** (domestic violence education is needed for teachers, doctors, lawyers, and day care workers)

**Program/shelter Issues** (some workers seem uncomfortable working with minority women, low pay for workers, workers should have victim perspective)

## RECOMMENDATIONS

The following recommendations are made based upon the analysis of prior domestic violence needs assessments and current geographic and demographic, survey, and focus group data:

- To determine where there is a geographic need for domestic violence shelter beds, the following relative factors should be considered: a) proportion of targeted population; b) proportion of existing beds; c) beds per 1,000 FDLE crime reports; and d) ratio of women sheltered to beds per 1,000 FDLE crime reports.
- To determine funding for domestic violence services, the following factors should be considered on a county basis: a) number of marriage licenses (25%); b) number of children (25%); c) number of women aged 18-44 (25%); d) FDLE estimate of domestic violence prevalence (20%); and e) rurality (5%).
- Expanded housing options for victims of domestic violence such as safe homes, the use of disaster shelters during non-eventful periods, and partnerships with motels, apartment complexes, assisted living facilities, and nursing homes that have unfilled units or beds, should continue to be explored. Public housing policies should be reexamined in terms of their impact on domestic violence victims, including the “one strike” policy for eviction or Section 8 (subsidized) termination.
- Mental health care – whether it be in the form of social or emotional support or counseling, needs to be accessible to victims of domestic violence. Collaboration should occur between the state’s mental health providers, professional associations, and domestic violence centers. The educational requirement for licensed mental health professionals to have at least one hour biannually of training on domestic violence should be strengthened and graduate programs in mental health fields should include content on domestic violence throughout their curricula.
- Domestic violence center staff should develop and utilize protocols for assessing residents who have injuries or indications of infectious diseases. Health care protocols should be developed in collaboration with local nursing or medical schools, residency programs, or county health departments. Florida, in conjunction with the Joint Commission on Accreditation of Healthcare Organizations, should mandate and monitor universal screening of patients for domestic violence. Interagency agreements of cooperation should be established between hospital emergency rooms and domestic violence centers to ensure screening, assessment, and service referrals of victims.
- A pilot project should be implemented whereby funding is made available for dental services to residents of domestic violence shelters. Volunteer dentists should also be recruited to provide dental care. Expansion of Medicaid coverage to adult domestic violence victims for dental work should be considered and Victim of Crime Act Compensation funds should be advertised as available to meet the acute dental needs of victims.
- There should be a continued emphasis on injunctive relief for domestic violence victims and access to emergency injunctions should be on a 7 day a week, 24 hour a day basis. Special consideration during hearings should be given to a non-violent parent with respect to residential arrangements, supervised child visitation, child support, and child custody. All justice professionals, including attorneys, should receive continuing education on domestic violence issues.
- Domestic violence centers should collaborate with state transportation experts, law enforcement, and social service agencies who deal with transportation

in an effort to develop plans for meeting transportation needs of domestic violence victims both in shelters and the community. Arrangements should be made for volunteer drivers, van or bus services for persons with disabilities, bus and taxi tokens, and legal or law enforcement assistance with car retrieval from the homes of domestic violence victims.

- Children's mental health services should be contracted for or sought from volunteer child therapists as needed.
- Teachers, counselors, and school administrators should be educated about the dynamics and impact of domestic violence on children.

- Interagency agreements should be established to solidify relationships between domestic violence centers and community agencies for special services such as translators, expert consultants, case management, etc.
- Staff from domestic violence centers and community-based service agencies should be cross trained. Liaisons from domestic violence centers who are familiar with community-based services should serve in a "case management" style function for those persons with needs apart from what domestic violence centers can provide but who are able to stay in shelters.



# BACKGROUND

The National Family Violence Survey and the National Crime Victimization Survey are two primary sources used to estimate the prevalence of intimate physical violence. They estimate that more than 2 million women are physically abused by their partners each year (Bachman & Saltzman, 1994; Straus & Gelles, 1990).

The U.S. Bureau of Justice Statistics suggests that the problem is even more widespread with more than 4 million victims of domestic violence annually.

While men (elderly men in particular) may also be the victims of domestic violence, they are less likely than women to sustain injuries, be killed by their partners, leave a batterer with children in their care, or seek refuge at shelters (Bachman & Saltzman, 1994; Kellerman & Mercy, 1992; Stets & Straus, 1990).

The U.S. Department of Justice (1998) found that women are 5 to 8 times more likely than men to be victimized by an intimate partner. In *Violence Against Women*, the U.S. Bureau of Justice Statistics estimated that 92% of all domestic violence incidents were committed by men against women.



## DOMESTIC VIOLENCE NEEDS ASSESSMENTS FROM OTHER STATES

### *Oregon*

In 1998, a domestic violence needs assessment was performed for the Oregon Governor's Council on Domestic Violence (Glick, Johnson, & Pham, 1998). The purpose of the assessment was to learn more about the scope of the domestic violence problem in Oregon, and to inform policies and programs aimed at reducing and preventing domestic violence. Over 1,800 women were interviewed by telephone and 365 agencies that provided health care, social services, counseling, services to special populations, criminal justice/legal services, and domestic violence services were mailed surveys.

### *Major Findings*

- 1) approximately 50% of all agencies lacked a designated domestic violence staff member or designated domestic violence budget
- 2) training was needed in numerous areas, including domestic violence protocols, stalking laws, sensitivity to victims, cultural sensitivity, restraining orders, crime victim's compensation, and community resources
- 3) health care agencies reported the greatest overall need for domestic violence training among all agencies responding to domestic violence in Oregon
- 4) a high percentage of all agencies reported being unaware of available services for victims, perpetrators, and children who witnessed domestic violence; the top three services that agencies did not know about were financial assistance for victims, lethality assessments for perpetrators, and supervised child visitation

- 5) there were inadequate services for victims with special characteristics such as those with disabilities, mental illness, non-English speaking persons, cultural/ethnic minorities, and females younger than 18
- 6) shelters noted that it was difficult to help victims with multiple problems, persons lacking job skills, and parents of older male children who were not permitted to stay in shelters

In the Oregon report, recommendations were made to increase public awareness of domestic violence through outreach, provide staff training, enhance support services, and educate young people about domestic violence.

## ***Hawaii***

In February 1999, the Violence Against Women Act (VAWA) State Planning Committee published a report outlining the prevailing issues regarding domestic violence and sexual assault in Hawaii (Department of the Attorney General, 1999). Information was gathered through a series of four meetings attended by the State Planning Committee, community members, criminal justice professionals, and various non-profit agency staff. Meetings were held in each of four counties and were open to the public.

## ***Major Findings***

- 1) lack of resources and budget cuts led to an inability to provide basic services to victims, particularly in rural areas; financial constraints reduced agencies' abilities to do effective outreach to special needs populations, including immigrant and non-English speaking women, homeless persons, and teens involved in violent relationships

- 2) education of both the community and professionals who came into contact with victims was cited as a major need across all counties
- 3) better coordination among service providers was needed in order to result in "seamless" service delivery
- 4) most providers identified the need for long-term transitional services that extended beyond the basic emergency services
- 5) increased staffing, personnel training, and cross training with substance abuse and mental health disciplines were needed

## ***Final Recommendations***

Overall, the priority areas chosen for grant funding were: services for immigrant women, case management services, on-scene crisis counselors, interagency training (including judges), outreach and community education regarding available services, continuing funding for basic services, law enforcement services (speedy, uniform response), research, stalking, culturally competent services, and adult domestic violence death review.

## *Missouri*

In October 1999, the Missouri Coalition Against Domestic Violence mailed questionnaires to executive directors and administrators of Coalition member programs providing direct services to battered women and their children. The questionnaire asked providers to rank areas of policy, legislation, and funding most important to them and the women and children they serve. Providers from residential shelters, outpatient, legal/court advocacy, victim advocacy, and batterer intervention programs completed the questionnaire.

## *Major Findings*

The overall rankings indicates that the highest ranked need was for funding to increase staff salaries and basic services. The second highest ranked need was for improved knowledge and sensitivity of prosecutors, law enforcement officers, and judges. Civil justice issues, such as lawyer availability and education, and knowledge and sensitivity of judges came third. A significant finding of this needs assessment, however, was that justice issues (criminal and civil justice systems) were consistently ranked second only to funding needs when looking across all types and locations of agencies surveyed. Other specific issues identified were increased education and vocational programs, services for victims with disabilities, and health/dental care for women without children.



# ASSESSING THE NEEDS OF DOMESTIC VIOLENCE VICTIMS IN FLORIDA

## DEFINITION OF DOMESTIC VIOLENCE

Domestic violence is defined in Florida Statutes (s. 39.902) as any assault, battery, sexual assault, sexual battery, or any criminal offense resulting in physical injury or death of one family or household member by another who is or was residing in the same single dwelling unit. Family or household member means spouses, former spouses, adults related by blood or marriage, persons who are presently residing together as if a family or who have resided together in the past as if a family, and persons who have a child in common regardless of whether they have been married or have resided together at any time.

## PREVALENCE OF DOMESTIC VIOLENCE

The Florida Department of Law Enforcement (FDLE) keeps statistics on domestic violence in Florida. In a report "Crime in Florida, Florida Uniform Crime Report" (<http://www.fdle.state.fl.us/FSAC/index.asp>), FDLE examined official domestic violence crime statistics for the period 1992 through 1998:

**TABLE 1**  
*Florida Domestic Violence Crime Reports 1992-1998*

<i>Year</i>	<i>Total</i>	<i>% Change</i>	<i>Rate per 100,000 Population</i>
1992	109,449		815.3
1993	112,585	2.9%	827.3
1994	119,930	6.5%	864.1
1995	131,152	9.4%	926.9
1996	132,704	1.2%	920.8
1997	136,382	2.8%	927.0
1998	133,345	-2.2%	888.9

In 1994 based on Uniform Crime Reports, the Federal Bureau of Investigation indicated that among all female murder victims, 30% were killed by their husbands or boyfriends. The Florida Statistical Abstract for 1997 reported that intimate partners committed 101 of the 161 (63%) domestic violence murders (distinguished from manslaughter) for that year. Similarly, the FDLE Crime Report for 1998 revealed that spouses or cohabitants committed 119 out of the 190 (63%) domestic violence criminal homicides. These patterns demonstrate the need for a response network in Florida that is vigilant in its efforts to prevent and remediate the consequences of domestic violence.

## DOMESTIC VIOLENCE NEEDS ASSESSMENTS

The Domestic Violence Needs Assessment for 2000 was conducted for the Florida Department of Children & Families under statutory requirement. It builds upon the findings of three prior needs assessments conducted in Florida:

- **1986 Domestic Violence Needs Assessment** conducted by the Refuge Information Network;
- **1994 Domestic Violence Needs Assessment** done by Perceptive Market Research under contract with the Florida Coalition Against Domestic Violence; and the
- **1996 Domestic Needs Assessment** done by the Institute for Family Violence Studies under contract with the Governor's Task Force on Domestic and Sexual Violence.

### **1986 Domestic Violence Needs Assessment**

The 1986 Domestic Violence Needs Assessment was conducted by the Refuge Information Network which became the Florida Coalition Against Domestic

Violence (FCADV). Their report concluded that efforts were needed to determine what domestic violence services were required to meet the demonstrated demand for services. The following recommendations were made:

- 1) law enforcement data be uniformly collected for each domestic violence case throughout the state;
- 2) assessments be completed on actual cases within shelters to determine need;
- 3) information be gathered on the disposition of cases not served by shelters due to lack of space;
- 4) determination be made of what services are needed in rural areas as well as other areas of the state where shelters were not located; and
- 5) a plan for safe homes and networks be developed to serve as conduits to the nearest established domestic violence shelter.

The 1986 report further outlined a statewide shelter service plan and provided for the Florida Department of Health & Rehabilitative Services (now the Department of Children and Families (DCF)) to coordinate the following functions for shelters: technical assistance and training, information & referral, comprehensive data collection, development of a directory of services, and completion of a need determination plan. The needs assessment also identified the need to provide shelter services to an additional 9,392 clients. These shelter services included shelter beds, extension of counseling services, increased efforts directed at community education, child care, and transportation. Finally, the need to provide adequate funding for current shelter services was discussed, including increasing state funding to 75% of the budget for each shelter, increasing local fundraising, and expanding volunteer efforts for shelters.

### ***1994 Domestic Violence Needs Assessment***

In 1994 FCADV contracted with Perceptive Market Research to determine where additional shelters should be placed, how the development of new shelters should be determined, and how new shelters should be certified. Perceptive Market Research also made recommendations for conducting a large scale needs assessment.

#### ***Key issues identified in the 1994 study included:***

- lack of shelter space (particularly in high-growth, densely populated areas)
- inadequate shelter facilities underserved rural areas
- understaffed domestic violence programs
- lack of specialized children's programming
- continual and burdensome fundraising efforts
- growth in demand for services
- competition for limited resources

#### ***Recommendations from the 1994 study included the following:***

- 1) maintain and heavily publicize the statewide 24 hour, toll-free domestic violence hotline
- 2) coordinate or consolidate hotline services in areas served by multiple centers or hotlines
- 3) establish satellite offices or "information sites" in areas where shelters did not exist
- 4) establish and/or expand outreach programs including group counseling, advocacy, community network and education in rural areas or in heavily populated areas to meet increasing demands for services

- 5) establish, when safety issues can be addressed, safe houses under the direction of existing centers
- 6) increase bed capacity at existing shelters for areas of greatest need based on population and geographic area
- 7) encourage centers to take the lead in educating the community and the criminal justice system regarding domestic violence issues

### ***1996 Domestic Violence Needs Assessment***

In 1996 the Governor's Task Force on Domestic and Sexual Violence used part of the state's allocation of Year One funding under the Violence Against Women Formula Grant (P.L. 103-322) to contract with the FCADV to conduct a needs assessment. The FCADV subcontracted with the Institute for Family Violence Studies at Florida State University to determine current funding needs, assess programming, and establish service priorities. Toward this end, 683 agencies were sent surveys and respondents included staff of domestic violence centers, law enforcement officers, hospital emergency room staff, state attorneys, and victim advocates in law enforcement agencies or state attorney offices. The overall response rate was 56%. Needs identified were reflected by organizational type and network needs were discussed.

#### ***Centers were asked to prioritize their five most critically needed services. These were:***

- supervised child visitation center
- monitored child exchange
- transitional housing
- transportation
- legal services

***General recommendations included:***

- 1) provision of transitional housing
- 2) expansion of services for children
- 3) improvement of technology to assist in data collection
- 4) creation of specific outreach programs for rural victims
- 5) enhancement of funding mechanisms to support the continuum of direct services to victims and children utilizing an ecosystemic approach
- 6) allowance of funding to be made across organizational type
- 7) identification of system-wide needs

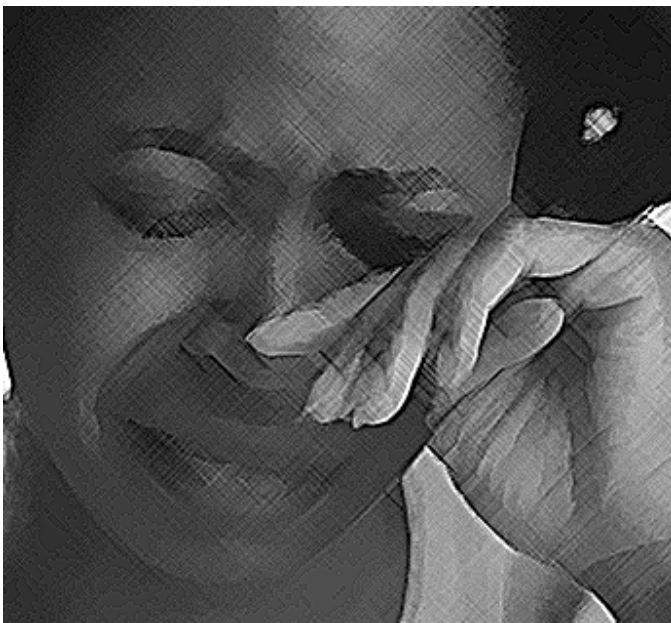
***System-wide recommendations in the 1996 report included:***

- 1) funding should be increased to support the continuum of services provided by Florida's certified domestic violence centers
- 2) specialized domestic violence services should be made available in rural areas of the state
- 3) a law enforcement domestic violence protocol should be implemented by every Florida law enforcement agency
- 4) a model for prosecution of domestic violence cases should be developed and implemented in each judicial circuit
- 5) data collection on domestic violence judicial issues should be refined and improved
- 6) hospital emergency room staff should adopt and utilize hospital emergency protocols to assist health care providers in identifying and assessing patients who may be victims of domestic violence
- 7) training on domestic violence should be provided to all professionals interacting with domestic violence victims and their children
- 8) training on domestic violence should be up-to-date and consistent in terms of content covered

# 2000 DOMESTIC VIOLENCE NEEDS ASSESSMENT

During the spring of 2000, the Institute for Family Violence Studies at Florida State University entered into a contract with the Florida Department of Children and Families (DCF) to update a statewide domestic violence needs assessment in Florida. Prior assessments conducted in Florida, as well as other states, focused on where services were needed, what types of services were needed, and what system wide changes were needed to enhance services access and delivery. For *Florida's Domestic Violence Needs Assessment for 2000*, it was decided that three sources of data would be used in order to address these same focus areas:

- 1) geographic and demographic reports;
- 2) key informant surveys; and
- 3) focus groups.



## I. GEOGRAPHIC AND DEMOGRAPHIC REPORTS

According to the 1998-1999 Florida Coalition Against Domestic Violence publication, "Florida Directory of Certified Domestic Violence Centers," and 1998-1999 Annual Report from Florida's Certified Domestic Violence Centers, there were 38 certified domestic centers (Appendix A) in Florida that had approximately 1,264 beds\*. These beds were located in 38 of Florida's 67 counties:

- |      |       |                                                         |
|------|-------|---------------------------------------------------------|
| 232  | (18%) | in north Florida (Districts 1, 2, 3, 4);                |
| 683* | (54%) | in central Florida (Districts 5, 6, 7, 12, 13, 14, 15); |
| 349  | (28%) | in south Florida (Districts 8, 9, 10, 11).              |

*\*Note that an exact bed count is difficult to make because some shelters use portables or set up additional cribs as needed. Also note that in District 6 a shelter listed beds as 100+ and this number was rounded to 100 for the purposes of this report.*

The location of the shelters and demographic statistics for each district in Florida are shown on maps on pages 27 through 41 of this report.

While some men were sheltered in domestic violence centers, the vast majority of residents were women between the ages of 18 and 44 and children. Table 2 shows the proportion of the target population in three regions of Florida and the corresponding proportion of domestic violence center beds. Although central Florida has a higher proportion of beds when compared to percent of population, ***this should not be interpreted to mean that it has an abundance (or even enough) beds to serve victims. Rather, relative comparisons can be made between regions in Florida with respect to proportion of shelter beds and target population.***

**TABLE 2**  
***Target Population\* and Domestic Violence Center Beds by Region***

<i>Region of Florida</i>	<i>Target Population of Children 0-17 &amp; Women 18-44</i>	<i>% of Target Population</i>	<i>Number of Domestic Violence Center Beds</i>	<i>% of Domestic Violence Center Beds</i>
North	1,299,463	21%	232	18%
Central	2,309,558	38%	683	54%
South	2,503,685	41%	349	28%
<b><i>Total</i></b>	<b><i>6,112,706</i></b>	<b><i>100%</i></b>	<b><i>1,264</i></b>	<b><i>100%</i></b>

*\*see GeoFacts Demographics Library-State Data  
<http://site.conway.com/ez/GetEZState.1.cfm?state=FL>*

There are numerous ways to examine need and the rate of use of domestic violence shelter beds. Table 3 shows the number of beds per district and the *number of days* of shelter provided *per bed*. The need for beds could be interpreted as being greater in those districts with higher numbers of days per bed; however, days per bed could also be a function of shelters' policies regarding length of stay. If FDLE domestic violence reports are assumed as a measure of the need for beds it appears half of the districts have less than 10 beds per 1,000 reports and half have 10 or more. The greatest discrepancy is seen between District 11 with 5 beds per 1,000 reports and District 15 with 24 beds.

<b>Districts with &lt;10 beds</b>	<b>Region</b>	<b>Note</b>
1, 2, 3	North Florida	3 of 4 districts in North Florida have less than 10 beds per 1,000 FDLE reports
6, 14	Central Florida	2 of 7 districts in Central Florida have less than 10 beds per 1,000 FDLE reports
10, 11	South Florida	2 of 4 districts in South Florida have less than 10 beds per 1,000 FDLE reports

The ratio of women actually sheltered to available beds (number of women 18-44 sheltered per 1,000 FDLE reports divided by beds per 1,000 reports) may be viewed as an efficiency measure—in other words,

considering the number of beds available, a higher ratio of women to beds indicates higher use of the beds. North Florida's ratio of women sheltered to beds was the highest (6.7), followed by Central Florida (5.3) and then South Florida (4.9).

**TABLE 3**  
*Use of Domestic Violence Center Beds Based on Need as Measured by FDLE Domestic Violence Crime Reports by Region/District*

<i>Region</i>	<i>District</i>	<i>Domestic Violence Center Beds</i>	<i>1998-1999 Days of Shelter Provided per Bed</i>	<i>Beds per 1,000 FDLE DV Reports (1998-1999)</i>	<i>Women (18-44) Sheltered per 1,000 FDLE DV Reports (1998-1999)</i>	<i>Ratio of Women Sheltered to Beds per 1,000 FDLE DV Reports</i>
North	1	36	149	7	48	6.9
North	2	39	194	7	55	7.9
North	3	46	172	8	43	5.4
North	4	111	266	11	72	6.5
<b><i>Regional Averages</i></b>		<b><i>58</i></b>	<b><i>195</i></b>	<b><i>8</i></b>	<b><i>55</i></b>	<b><i>6.7</i></b>
Central	5	106	233	17	97	8.8
Central	6	116	380*	9	50	5.6
Central	7	152	237	11	54	4.9
Central	12	44	192	10	70	7.0
Central	13	130	144	20	74	3.7
Central	14	50	133	7	28	4.0
Central	15	85	123	24	79	3.3
<b><i>Regional Averages</i></b>		<b><i>98</i></b>	<b><i>206</i></b>	<b><i>14</i></b>	<b><i>65</i></b>	<b><i>5.3</i></b>
South	8	128	162	17	88	5.2
South	9	60	194	14	71	5.1
South	10	54	242	6	29	4.8
South	11	107	261	5	22	4.4
<b><i>Regional Averages</i></b>		<b><i>87</i></b>	<b><i>215</i></b>	<b><i>11</i></b>	<b><i>53</i></b>	<b><i>4.9</i></b>

\*Note that an exact bed count is difficult to make because some shelters use portables or set up additional cribs as needed. Also note that in District 6 a shelter listed beds as 100+ and this number was rounded to 100 for the purposes of this report.

## ***Fund Allocation Methods***

Below is a review of two allocation methods based on geographic and demographic information shown on the district maps on pages 27-41 herein. Analyzing such information is one way to determine where additional “beds” are needed if funds are associated with beds or increased shelter capacity. This report is not intended to make recommendations on building improvements or expansions (note that a recent budget request for capital improvements for domestic violence shelters recently was approved and funds have been earmarked in the state’s budget for these improvements). Later in this report, an analysis of the two other methods of data collection—surveys and focus groups—will be discussed.

The current method that is used by the Department of Children and Families for distributing funds to domestic violence centers is as follows:

### ***Current Allocation Method***

During Fiscal Year 1999-2000, the Florida Department of Children and Families allocated funds for domestic violence services using the following formula:

Number of Marriage Licenses	=	40%
Number of Females Age 18+	=	50%
Land Area	=	10%
		<hr/>
		100%

It should be noted that a portion of money from the purchase of marriage licenses is by law earmarked for distribution to domestic violence centers. The current allocation method resulted in the distribution of \$15,365,085 for Fiscal Year 1999-2000 as shown in Appendix B.

## **Strengths of the Current Allocation Method**

Funds that are collected from the purchase of marriage licenses in a county for domestic violence services are given a relatively high weight in the formula.

Since women (versus men) disproportionately use the services of domestic violence centers, they are accounted for as a group in the formula.

Serving large geographic areas can be costly for domestic violence centers; land area is factored into the formula.

## **Limitations of the Current Allocation Method**

The formula does not take into account the number of children served by domestic violence centers.

Women aged 45 and over use disproportionately fewer domestic violence center services than women aged 18 to 44; by using females age 18 and over in the formula, the needs of those counties with a high proportion of older women will be inflated.

Land area is an incomplete measure of rurality; degree of rurality in a county or district may be associated with higher costs for domestic violence centers

## ***Revised Allocation Method***

The revised method below attempts to incorporate strengths of the current method and remedy its limitations. Attention was paid to the recommendations of prior needs assessments reports, along with a report titled, “Evaluation of Florida Coalition’s Against Domestic Violence Rural Initiative Project” (Institute on Family Violence Studies, 1999). These reports stress that the needs of rural area should not be overlooked. The revised allocation method uses additional data that indicate need, including percent rural (rural-

ity) and FDLE prevalence data (888.9 per 100,000 persons as shown in Table 1).

Number of Marriage Licenses	=	25%
Number of Children 0-17	=	25%
Number of Women 18-44	=	25%
Prevalence Estimate (FDLE Rate)	=	20%
Rurality	=	5%

*As an example*, Tables 4 and 5 show how 1999-2000 funds (\$15,365,087) would have been distributed by county and district using the revised allocation method. Note that when compared to the previous allocation methods, the revised allocation method would have resulted in a closer match between percent of funds and percent of population in the regions.

**TABLE 4**  
*Revised Method for Allocation of Funds by Region*

<i>Region in Florida</i>	<i>Target Population of Children 0-17 &amp; Women 18-44</i>	<i>% of Population</i>	<i>Number of Domestic Violence Center Beds</i>	<i>% of Domestic Violence Center Beds</i>	<i>Example of Funds Using Proposed Allocation Method</i>	<i>% of Funds</i>
North	1,299,463	21%	232	18%	3,429,144	22%
Central	2,309,558	38%	683	54%	6,138,529	40%
South	2,503,685	41%	349	28%	5,797,414	38%
<b>Total</b>	<b>6,112,706</b>	<b>100%</b>	<b>1,264</b>	<b>100%</b>	<b>15,365,087</b>	<b>100%</b>

**TABLE 5-1**  
**Example of Revised Allocation**  
**Formula (District 1)**

Note that all percentages (%) are proportions of state-wide totals.

<i>County</i>	<i>Rural</i>	<i>%</i>	<i>5% of \$</i>	<i>Under 18</i>	<i>%</i>	<i>25% of \$</i>	<i>Women 18-44</i>	<i>%</i>	<i>25% of \$</i>	<i>DV Estimate</i>	<i>%</i>	<i>20% of \$</i>	<i>Marriage Licenses</i>	<i>%</i>	<i>25% of \$</i>	<i>Total</i>
Escambia	14.7	0.44	3,357	74,846	2.26	86,732	59,544	2.13	81,750	2,599	1.95	59,823	3,404	2.14	82,349	314,011
Okaloosa	16.3	0.48	3,722	44,922	1.36	52,056	35,071	1.25	48,150	1,530	1.15	35,218	2,042	1.29	49,400	188,546
Santa Rosa	56.5	1.68	12,902	33,061	1.00	38,311	24,716	0.88	33,934	1,084	0.81	24,962	841	0.53	20,345	130,454
Walton	72.5	2.15	16,556	8,992	0.27	10,420	6,200	0.22	8,513	349	0.26	8,035	398	0.25	9,628	53,152
<b><i>District Total</i></b>		<b><i>4.75</i></b>	<b><i>36,537</i></b>	<b><i>161,821</i></b>	<b><i>4.89</i></b>	<b><i>187,519</i></b>	<b><i>125,531</i></b>	<b><i>4.48</i></b>	<b><i>172,347</i></b>	<b><i>5,562</i></b>	<b><i>4.17</i></b>	<b><i>128,038</i></b>	<b><i>6,685</i></b>	<b><i>4.21</i></b>	<b><i>161,722</i></b>	<b><i>686,163</i></b>

**TABLE 5-2**

**Example of Revised Allocation  
Formula (District 2)**

Note that all percentages (%) are proportions of statewide totals.

<i>County</i>	<i>Rural</i>	<i>%</i>	<i>5% of \$</i>	<i>Under 18</i>	<i>%</i>	<i>25% of \$</i>	<i>Women 18-44</i>	<i>%</i>	<i>25% of \$</i>	<i>DV Estimate</i>	<i>%</i>	<i>20% of \$</i>	<i>Marriage Licenses</i>	<i>%</i>	<i>25% of \$</i>	<i>Total</i>
Bay	17.6	0.52	4,019	38,139	1.15	44,196	29,060	1.04	39,898	1,335	1.00	30,724	1,992	1.25	48,190	167,027
Calhoun	100.0	2.97	22,835	3,285	0.10	3,807	2,206	0.08	3,029	112	0.08	2,585	118	0.07	2,855	35,110
Franklin	65.9	1.96	15,049	2,479	0.07	2,873	1,714	0.06	2,354	92	0.07	2,114	114	0.07	2,758	25,147
Gadsden	72.2	2.15	16,487	13,891	0.42	16,097	9,279	0.33	12,739	413	0.31	9,506	374	0.24	9,048	63,878
Gulf	64.9	1.93	14,820	1,453	0.04	1,684	2,447	0.09	3,360	129	0.10	2,968	151	0.10	3,653	26,486
Holmes	80.5	2.39	18,383	4,717	0.14	5,466	3,247	0.12	4,458	169	0.13	3,892	185	0.12	4,476	36,674
Jackson	77.3	2.30	17,652	11,705	0.35	13,564	8,431	0.30	11,575	415	0.31	9,542	466	0.29	11,273	63,607
Jefferson	73.6	2.19	16,807	3,887	0.12	4,504	2,381	0.09	3,269	120	0.09	2,771	225	0.14	5,443	32,794
Leon	19.5	0.58	4,453	50,987	1.54	59,084	56,689	2.03	77,830	1,945	1.46	44,776	2,181	1.37	52,763	238,905
Liberty	100.0	2.97	22,835	1,577	0.05	1,827	1,269	0.05	1,742	62	0.05	1,428	76	0.05	1,839	29,671
Madison	77.2	2.29	17,629	4,807	0.15	5,570	3,166	0.11	4,347	158	0.12	3,640	165	0.10	3,991	35,177
Taylor	53.4	1.59	12,194	5,444	0.16	6,309	3,519	0.13	4,831	170	0.13	3,922	208	0.13	5,032	32,288
Wakulla	100.0	2.97	22,835	5,850	0.18	6,779	3,802	0.14	5,219	190	0.14	4,369	210	0.13	5,080	44,283
Washington	75.3	2.24	17,195	5,354	0.16	6,204	3,422	0.12	4,698	187	0.14	4,313	230	0.14	5,464	37,975
<b>District Total</b>		<b>29.05</b>	<b>223,193</b>	<b>153,575</b>	<b>4.63</b>	<b>177,964</b>	<b>130,632</b>	<b>4.69</b>	<b>179,349</b>	<b>5,497</b>	<b>4.13</b>	<b>126,500</b>	<b>6,694</b>	<b>4.20</b>	<b>161,865</b>	<b>869,022</b>

**TABLE 5-3**  
**Example of Revised Allocation Formula**  
**(District 3)**

Note that all percentages (%) are proportions of state-wide totals.

<i>County</i>	<i>Rural</i>	<i>%</i>	<i>5% of \$</i>	<i>Under 18</i>	<i>%</i>	<i>25% of \$</i>	<i>Women 18-44</i>	<i>%</i>	<i>25% of \$</i>	<i>DV Estimate</i>	<i>%</i>	<i>20% of \$</i>	<i>Marriage Licenses</i>	<i>%</i>	<i>25% of \$</i>	<i>Total</i>
Alachua	27.2	0.81	6,211	44,522	1.34	51,592	51,989	1.86	71,378	1,791	1.34	41,222	1,908	1.20	46,158	216,562
Bradford	74.0	2.20	16,898	4,376	0.13	5,071	4,564	0.16	6,266	223	0.17	5,138	305	0.19	7,379	40,751
Columbia	60.5	1.80	13,815	15,539	0.47	18,007	9,758	0.35	13,398	492	0.37	11,315	717	0.45	17,346	73,881
Dixie	100.0	2.97	22,835	3,051	0.09	3,536	1,827	0.07	2,509	115	0.09	2,656	148	0.09	3,580	35,116
Gilchrist	100.0	2.97	22,835	3,571	0.11	4,138	2,622	0.09	3,600	126	0.09	2,900	128	0.08	3,097	36,570
Hamilton	100.0	2.97	22,835	3,738	0.11	4,332	2,369	0.08	3,252	115	0.09	2,638	155	0.10	3,750	36,807
Lafayette	100.0	2.97	22,835	1,509	0.05	1,749	1,079	0.04	1,481	57	0.04	1,319	73	0.05	1,766	29,151
Levy	100.0	2.97	22,835	8,238	0.25	9,546	5,502	0.20	7,554	300	0.22	6,908	246	0.15	5,951	52,795
Putnam	81.2	2.41	18,542	18,885	0.57	21,884	11,766	0.42	16,154	636	0.48	14,637	687	0.43	16,620	87,837
Suwannee	72.2	2.15	16,487	9,347	0.28	10,831	5,918	0.21	8,125	308	0.23	7,084	311	0.20	7,524	50,051
Union	100.0	2.97	22,835	3,319	0.10	3,846	2,336	0.08	3,207	113	0.08	2,592	83	0.05	2,008	34,489
<b><i>District Total</i></b>		<b><i>27.19</i></b>	<b><i>208,963</i></b>	<b><i>116,095</i></b>	<b><i>3.50</i></b>	<b><i>134,532</i></b>	<b><i>99,730</i></b>	<b><i>3.56</i></b>	<b><i>136,924</i></b>	<b><i>4,276</i></b>	<b><i>3.20</i></b>	<b><i>98,409</i></b>	<b><i>4,761</i></b>	<b><i>2.99</i></b>	<b><i>115,179</i></b>	<b><i>694,010</i></b>

**TABLE 5-4**  
**Example of Revised Allocation Formula**  
**(District 4)**

Note that all percentages (%) are proportions of state-wide totals.

<i>County</i>	<i>Rural</i>	<i>%</i>	<i>5% of \$</i>	<i>Under 18</i>	<i>%</i>	<i>25% of \$</i>	<i>Women 18-44</i>	<i>%</i>	<i>25% of \$</i>	<i>DV Estimate</i>	<i>%</i>	<i>20% of \$</i>	<i>Marriage Licenses</i>	<i>%</i>	<i>25% of \$</i>	<i>Total</i>
Baker	78.8	2.34	17,994	6,491	0.20	7,522	3,953	0.14	5,428	189	0.14	4,341	294	0.19	7,112	42,397
Clay	35.1	1.04	8,015	41,043	1.24	47,561	28,931	1.03	39,721	1,262	0.95	29,059	1,349	0.85	32,635	156,991
Duval	1.2	0.04	274	196,899	5.94	228,167	159,748	5.71	219,324	6,629	4.97	152,601	7,347	4.63	177,738	7778,105
Nassau	57.9	1.72	13,222	15,058	0.45	17,449	10,850	0.39	14,897	501	0.38	11,540	703	0.44	17,007	74,114
St. Johns	43.0	1.28	9,819	26,544	0.80	30,759	22,562	0.81	30,977	1,063	0.80	24,466	1,336	0.84	32,320	128,341
<b><i>District Total</i></b>		<b><i>6.42</i></b>	<b><i>49,324</i></b>	<b><i>286,035</i></b>	<b><i>8.63</i></b>	<b><i>331,458</i></b>	<b><i>226,044</i></b>	<b><i>8.08</i></b>	<b><i>310,347</i></b>	<b><i>9,644</i></b>	<b><i>7.24</i></b>	<b><i>222,007</i></b>	<b><i>11,029</i></b>	<b><i>6.96</i></b>	<b><i>266,812</i></b>	<b><i>1,179,949</i></b>