Healing Through Art

Interview with Kent Miller, Victim Outreach Advocate, Tribal Victim Services, Prairie Band Potawatomi Nation

The Prairie Band Potawatomi Nation Tribal Victim Services (TVS), located in northeastern Kansas, serves victims of crime who are enrolled members of federally recognized tribes.

Kent Miller has served as TVS’s victim outreach advocate since 2010. Mr. Miller helps Native American victims of crime navigate the criminal justice system and helps them locate and access resources to meet immediate needs in the aftermath of a crime. He also offers information and support in recovering from the traumatic physical, financial, emotional, and spiritual effects individuals and families often suffer as a result of crime. Mr. Miller facilitates several weekly Healing Through Art workshops for children, adult women survivors, and service providers; plans are being made to establish a group to support children placed in foster homes and their families.

What Is Healing Through Art?

The premise of Healing Through Art is different from traditional art therapy in that no interpretive efforts are made to find a deeper meaning in what a person creates in the workshop. The participants are repeatedly told that “there is no right or wrong way to do art” and “all art is beautiful.” It is a completely nonjudgmental form of creativity wherein participants are allowed to make their own decisions about how and what they will create. In doing so, people are allowed to make choices and be creative in ways they have not been able to...

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Click here to access previous issues of OVC News & Program Updates on topics such as responding to mass casualties, terrorist attacks, and serving children exposed to violence.

MESSAGE FROM THE DIRECTOR

Welcome to the fall issue of OVC News & Program Updates, which features an array of information about innovative programs, important new regulations, upcoming research relevant to your work, and practical resources. This issue highlights recent efforts to expand and enhance services to victims of assault and survivors of homicide victims, and includes profiles that underscore how a victim’s steps toward recovery may take unexpected turns, with inspiring results.

Our cover story features the Prairie Band Potawatomi Nation in Kansas, which encourages crime victims to channel the healing power of art into their lives, ultimately expressing hope for the future. “Voices of Victims” profiles a wife and mother who, after suffering the loss of both her husband and son to homicide, became a committed activist and advocate for other survivors.

We’re pleased to report progress toward expanding services to victims whose circumstances often challenge our best intentions, such as breaking the cycle of violence that often entraps victims, particularly urban youth. Read how OVC is supporting a national network to train frontline hospital workers in assessing emotional trauma and intervening to prevent retaliatory violence among young victims. In addition, the goal of curbing sexual violence in corrections facilities has advanced with the release of DOJ’s landmark rule-setting national standards in response to the Prison Rape Elimination Act—an advance with implications for the entire field.

Vision 21, OVC’s strategic initiative to transform victim services in this century, reaffirmed the importance of research in improving services to all victims. To that end, one of the articles in this issue discusses OVC’s new research initiatives, which will include a comprehensive survey of victim-serving agencies. We’d like to hear your ideas about this exciting research as well as any other questions or comments you may have. Stay in touch!

—Joye Frost, Acting Director
Office for Victims of Crime

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previously in their own lives. It also affords victims the opportunity to express feelings or emotions that perhaps they couldn’t easily express verbally or in writing. By allowing them time to focus only on themselves and their emotions, they have the opportunity to work on their own issues, make their own choices, and speak with their own voice. The power to do this through art is amazing, and it is astounding how much people are able to express without saying a word.

Who do you serve in both the larger Tribal Victim Services program and the Healing Through Art program?

Our TVS program serves members of any of the federally recognized tribes residing within a seven-county area. The Healing Through Art program is open to any of the victims we serve within that area. We also offer workshops for children who are in the tribes’ foster care and group home systems that are run by the tribe, and workshops for people who provide services to the tribal community. Service providers don’t have to be tribal members to attend.

How was the program developed?

My supervisor and I attended leadership training at A Window Between Worlds in Venice Beach, California. They have been running a Healing Through Art program for the past 20 years and have worked with survivors of domestic abuse in shelters specifically. Through the leadership training, my supervisor and I became certified to facilitate groups for both women and children and have modified the format somewhat for use in a tribal community setting.

How is it different from other individual/group therapy?

It differs from art therapy in that there are no specific guidelines for what people create. We may have an outline for a workshop, but the participants aren’t locked into that outline and can create something entirely different without any judgment. The entire program allows people to express themselves however they want. They aren’t obligated to explain their art or even participate in the workshop if they don’t want to. They can make all of the choices in what to create and how to create it. It is not part of a treatment plan and is totally voluntary in nature. Sometimes the art that doesn’t follow the instructions can be the most powerful in the end. The freedom to make art without any specific boundaries can allow for stunning creativity and can open channels we didn’t know existed. I think some of the hesitancy we hear, such as “I’m not an artist,” really means “I don’t know what might come out if I pick this up,” which is part of an effort to keep the hurt locked away.

Why is this program so successful in your community?

It can be successful in any community if given the opportunity. Without sounding stereotypical, Native people are more creative and have a greater appreciation for the beauty of art and expression through art in general. We have used art in the form of beadwork, quillwork, pottery, painting, textiles, and others as expressions of love, hurt, pride, esteem, and honor for thousands of years. I think that is why there is such an acceptance of its use as a healing tool. The act of making something, particularly something beautiful and useful, is powerful. We put a part of ourselves in what we make, then allow it to be what it is. For example, sand painting is used in healing ceremonies by the Navajo people and has been for millennia. It was not meant to be artwork that is kept and hung on the wall, but is actually destroyed after the ceremony is concluded. Many families hold a feast and giveaway near the memorial of a loved one’s death. For a whole year after the loved one dies, the family makes art to be given away—items such as beadwork, blankets, or shawls. The family experiences healing in making these items, and the emotion and esteem they hold for their loved one is being put into that art. We’ve taken this basic premise of making art to express emotion, grieve, grow, and heal.

How has your program improved victims’ lives and healing?

The program is most successful in helping children. They don’t always find it easy to express feelings in words, and often the emotions they hold in come out in the most amazing and unexpected ways. The workshops are a venue that allows children to express their emotions without embarrassment or fear of judgment from their peers. In addition, simply having the opportunity and control to make choices about what materials or colors they use can empower participants who haven’t been able to make any choices for themselves in the past.

Success stories:

I think our best success story is the Community Story Tree Project.¹ Having so many people from the community participate and put so much energy and emotion into the project brought it to life. For example, one tribal member said that working on the panel helped her to bring closure to some of the memories of her childhood. She said that her mother had experienced horrible abuse at the hands of her stepfather. She talked about how she protected her younger siblings when her stepfather became angry and how she was able to finally put an end to the abuse by escaping from him. For her, the project in and of itself was a healing experience. For me, seeing all of these separate panels come together to make this beautiful piece of art is amazing.

¹See Community Story Tree Project on next page.
While touring a victim services program facility during a leadership training in California, Rebekah Jones and I were inspired by an extraordinary mural we saw hanging on one of the office walls. Seeing this mural encouraged us to create a similar project in our own community.

After procuring 72 12-inch x 12-inch canvas panels from an art supplier and tracing the image of a tree on the canvases, our TVS program sent an invitation to employees of the Prairie Band Potawatomi Nation asking for people to participate in this unique project. The project was advertised as a creation that would ultimately represent the community’s hopes and dreams for tribal families. The invitation was sent to survivors, children, service providers, professionals, elders, tribal leaders, and a cross-section of community members, asking them to take part in the project.

Many of the people who took panels repeatedly expressed that they had never painted anything previously. They were assured that they were not alone in expressing that feeling, and we shared with them the essential spirit of our program: “there is no right or wrong way to do art” and “all art is beautiful.”

Many of the prospective artists came to the Prairie Band TVS studio each week to use the various materials, mediums, and supplies that were available for them to complete their panels. Other participants took panels home to work on them in their own time and with their own unique materials. People used every medium imaginable in completing their panels, including acrylic and oil paints, collage (using images from magazines and photographic images), tissue paper, puffy paints, glitter, sequins, beans, paper mache, screws, pipe cleaners, hot glue guns, and even tree bark.

The completed panels were collected and were initially displayed randomly on the studio wall, with titles and statements explaining what the symbols and images represented. They were later assembled in order on the wall until the last panels were submitted to the Prairie Band studio, and the tree was finally complete.

The panels convey many messages to the viewers: some clearly exemplify the pain and suffering that the participants felt and sometimes still feel from their experiences; others call for an end to the violence and disruption caused by abuse that is unfortunately so prevalent within our tribal communities. Other images seem to reach out and touch you in a way that is oddly indescribable; you are being allowed a glimpse into the artist’s world of emotions and are somehow briefly privy to the expanse of their experiences. Others openly express a vision of true hope for the future and call out for the powers of love, hope, and understanding to prevail against the darkness.

Parts of this story were originally published in the Spring 2012 edition of the Unified Solutions Tribal Community Development Group, Inc.’s Training & Technical Assistance Update and are reproduced with permission.
Julia Dunkins is no stranger to homicide. In 1969, her husband of 3 years was killed in Washington, DC. At the age of 18, Mrs. Dunkins was left to raise their 6-month-old son alone.

“Being a young widow was far from easy, and the grief I experienced was far too difficult to cope with. Where I’m from, people did not just sit around and mope, they had to continue on with life to the best of their abilities.”

Survivors of homicide may find support from a variety of sources such as family, friends, grief and loss counselors, and mental health professionals. For Mrs. Dunkins, this support came in the form of faith-based service.

“My next door neighbor told me about a meeting at the church that catered to mothers and wives. At first I was hesitant, but I later realized that there was no harm in being helped. After going to the meetings a few times I was grateful just to be able to talk and learn about resources.”

Then, 24 years later, tragedy struck Mrs. Dunkins’ life again.

“The year of 1993, I thought that this could not ever happen again. Not true; my only child was murdered. I did not care about living.”

Following this tragedy, Mrs. Dunkins found support from system-based victim assistance.

“After leaving the crime scene, my daughter-in-law and I went downtown to the Metropolitan Police Department (MPDC) headquarters. There was a sign outside the door that read ‘Crime Victims Assistance Program Homicide Support Group.’ That program shows and tells survivors of homicide that the next steps have to be done by the survivors themselves.”

In the same year as her son’s murder, Mrs. Dunkins cofounded a nonprofit organization named Survivors of Homicide. She holds monthly support groups, conducts sensitivity training, hosts holiday parties for families of homicide victims, and advocates for and supports families to help with their immediate needs after a homicide. She is also an active member of the DC Homicide Coalition, which has gained the respect of local law enforcement and victim services agencies.

In August 2008, Mrs. Dunkins heard gunshots and saw the apparent attacker’s vehicle racing away. She called 911 and ran to assist the two young men who were shot; one of the victims was dead, but she was able to support the survivor until help arrived. She was able to have a tremendous positive impact on the victim by testifying at the trial and helping to obtain a conviction.

“Stepping out of my grief to try and make it better for the victims that go through this every second of their lives, and holding my grief on the sideline is, sometimes, very hard. The will to go into a courtroom with a client and hear the details about a homicide; it hits me all over again. I found out, ‘What would life be without purpose?’ I heal every time there is justice done on behalf of a homicide victim. I wish that someone could be there for every person during the time of violence.”

The Victims’ Voices column is a recurring feature of OVC News & Program Updates. Let us know if you or someone you know would like to share a story with the field about the journey from crime victimization. Our hope is that hearing directly from victims themselves will educate and inspire others. Victims’ Voices contributors may choose to remain anonymous. Contact William Petty at William.Petty@usdoj.gov for more information.
In May 2012, the U.S. Department of Justice (DOJ) released a final rule to prevent, detect, and respond to sexual abuse in confinement facilities in accordance with the Prison Rape Elimination Act of 2003 (PREA). This landmark rule sets National Standards aimed at protecting inmates on the federal, state, and local levels in four categories of facilities: adult prisons and jails, lockups, community confinement facilities, and juvenile facilities.

The passage of PREA and the DOJ final rule present many implications across the entire criminal justice system, including the victim services field. The implications for the victim services field can be categorized into two sections: National Standards and the National Prison Rape Elimination Commission’s (PREC’s) recommendations.

**National Standards**

Under the National Standards, victim advocates and providers should become familiar with two of the general provisions, Responsive Planning and Reporting, which are summarized below. These are only two of the major provisions, and the Office for Victims of Crime (OVC) encourages readers to review all of the National Standards to see how they might impact work in the field of victim services. Click here to read the Executive Summary.

**Responsive Planning**

- § 115.21 Evidence protocol and forensic medical examinations.
- The investigating agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on- or off-site, without financial cost, where evidentiarily or medically appropriate. Such exams shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners.

**PREA Final Rule and Implications for Victim Service Providers**

The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or qualified agency staff member.

As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

**Reporting**

- § 115.53 Inmate access to outside confidential support services.
- The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations, and for persons detained solely for civil immigration purposes, immigrant services agencies.

**PREC Recommendations**

The second area of impact emanates from recommendations made by PREC. PREA established PREC to recommend a set of standards to the Attorney General. PREC’s report was published in June 2009, and it included many recommendations for the Attorney General, DOJ, and Congress. The recommendations for DOJ include, “The Commission recommends that the Department of Justice remove the barrier to Victims of Crime Act funding for treatment and rehabilitative services to incarcerated victims of sexual abuse.” OVC is currently working on revising the Victims of Crime Act guidelines to remove this barrier, but the revision has not been finalized at this time. If approved, each individual state victim assistance program will have the option to decide whether to provide assistance to offenders who are victims of sexual assault in correctional settings.

Additional guidance, policies, and procedures are forthcoming. For additional information on PREA, contact the National PREA Resource Center, which serves as the national resource for online and direct support, training, technical assistance, and research to assist professionals in combating sexual abuse in confinement.

**Additional Information**

- Read the U.S. Department of Justice press release on the final rule.
- Read the final rule.
- Read the Executive Summary.
- Read the Presidential Memorandum.

**It Starts With You:**

Victim Advocates and the New Federal Standards to Stop Prisoner Rape

View the PowerPoint slides from this Webinar, led by a panel of experts, to learn how advocates can use the standards as a tool to develop and expand their work with survivors.

This Webinar was held on September 27, 2012
Anthony, a 21-year-old African-American man, was shot in the face by an unknown assailant during a robbery. Anthony was fortunate to recover from his physical injuries, but in the weeks after the shooting he found himself unable to sleep because of nightmares, terrified to leave the house, and unable to connect with his family and friends. Because of these distressing symptoms, Anthony contemplated retaliation, putting himself at risk for reinjury or arrest.

Anthony’s story is not unusual. Young African-American and Latino men are more likely to become victims of violence than young men of other races or ethnicities. Although these individuals receive medical care in emergency rooms after they are injured, hospital personnel often are not equipped to attend to the emotional wounds of the psychological trauma. As a result, many of these young people suffer symptoms of posttraumatic stress disorder (the same disorder seen in returning war veterans)—nightmares, flashbacks, emotional numbing, and depression. When symptoms are not addressed, these individuals are at heightened risk for retaliation, which could lead to reinjury, incarceration, or death.

In an effort to heal the wounds of psychological trauma and prevent involvement with the criminal justice system, the Office for Victims of Crime funded the National Network of Hospital-based Violence Intervention Programs (NNHVIP) to work on a project called Understanding the Impact of Trauma on Victims’ Recovery & Progress. NNHVIP is a network of 19 hospital-based programs that intervene with victims of violence. The headquarters are in Philadelphia and the network is a collaborative effort with Drexel University, Children’s Hospital of Philadelphia, and the University of Pennsylvania. Through OVC funding, NNHVIP is working with member programs across the country to implement trauma-informed practices. The goal is to equip frontline providers—outreach workers, social workers, and case managers—to understand the impact that trauma has on the bodies and minds of young people and to give these providers the skills to assess and intervene to heal the wounds of trauma. The project provides and disseminates the following:

- Technical assistance to build trauma-informed programs.
- Online training in trauma theory and practice.
- Cross-site visits where program providers learn from one another about best practices in preventing and treating trauma.
- An annual national conference to build skills and provide networking opportunities around trauma-informed care.

In the future, NNHVIP will work to build similar skills for partners in criminal justice, behavioral health, and child welfare who interface with young victims of urban violence. The ultimate goal of the project is to ensure that all providers who touch the lives of young victims will be able to provide the most effective care.

Advancing the Victims Field Through Statistics, Research, and Evaluation

By Keely McCarthy and Debra Whitcomb, Visiting Fellows, Office for Victims of Crime

Bureau of Justice Statistics (BJS) Director Jim Lynch and National Institute of Justice (NIJ) Director John Laub shared their visions for enhancing knowledge about crime victims and victimization with Office for Victims of Crime (OVC) fellows Keely McCarthy and Debra Whitcomb.

A common theme in both visions is a sincere desire to hear from the field. Directors Lynch and Laub are asking the following questions: “What do you want to know?”, “What kind of information is important for your work?”, and “What do we hope to know 5 years from now?” They are developing different, yet complementary, ways to gather input from victim service providers to help shape their respective agendas.

Share Your Thoughts With BJS

BJS Director Lynch is also asking, “What do we already know about crime victims and victimization?”, “What can we learn from data we have access to?”, and “What questions will require new data collection strategies?” Looking forward, he envisions creating a “system of victim statistics” from multiple sources.

Central to this mission is the National Crime Victimization Survey (NCVS), which was launched in 1972 and adapted over the years in response to emerging needs of the field and the changing nature of victimization. One adaptation is an identity theft supplement that was introduced in 2008 to address the demand for more information about this emerging type of victimization.

Analyses of NCVS data have addressed a wide range of questions and illuminated trends about victimization at the national level. For example, special reports have been published on topics as diverse as use of victim services by violent crime victims, violence in the workplace, and indicators of school crime and safety. Director Lynch anticipates that findings from OVC’s Vision 21 initiative will suggest additional questions that should be explored.

BJS is exploring the feasibility of a system of police administrative records (National Crime Statistics Exchange) that would build on the FBI’s National Incident-Based Reporting System to provide detailed case-level information on victims of crimes that have been reported to the police. This system would be based on a sample of police organizations and would include information on the actions taken by the police in response to the victimization.

OVC and BJS are collaborating on a new survey of victim-serving agencies to learn more about their structure, funding, client population, services, and information systems. For the first time, OVC will have a comprehensive, national snapshot of victim service providers, their needs, and the challenges they face. When more is known about the agencies’ management information systems, BJS hopes to identify additional questions that might be explored through collection and analysis of routine administrative data.

NIJ Partners With the Victims Field

OVC is partnering with NIJ on two research initiatives that are important to the victims field, particularly those who work with sexual assault victims. First, OVC and NIJ are working together to support the use of telemedicine to provide access to forensic medical expertise for health care providers who respond to sexual assault victims in rural or tribal communities, military or correctional settings, or other areas lacking forensic medical resources. A national center will be established to provide technical assistance in four pilot sites that will test the use of audiovisual technology to provide 24-hour live access to expert Sexual Assault Nurse Examiners and other forensic medical examiners. The process will be evaluated and documented to encourage replication nationwide.

The second joint initiative is a partnership among researchers, police, prosecutors, victim advocates, and lab directors in Wayne County (Detroit), Michigan, and Harris County (Houston), Texas, to study several difficult issues that arise for victims in the context of testing sexual assault kits. One issue is whether or not victims should be informed if their kits are being tested many years after the incident and, if so, how victims should be approached with this information. The end product of this research will be protocols to guide decisions about testing priorities and information-sharing strategies.

These two initiatives exemplify the concept of translational criminology, a cornerstone of NIJ Director Laub’s philosophy for the agency. In his vision, ideas and information would flow both ways between researchers and practitioners: “Scientists discover new tools and ideas for use in the field and evaluate their impact. In turn, practitioners offer novel observations from the field that stimulate basic scientific investigations.”

Director Laub is particularly interested in how scientific discoveries are used to inform practice and policy. As he points out, “It is not just about finding the evidence that something works; it is figuring out how to implement the evidence in real world practice settings and to understand why it works.” Furthermore, “Without robust dissemination efforts, NIJ’s research will not be used the way it was intended—to inform criminal justice policy and practice.” Ultimately, he envisions creating a “What Works” clearinghouse for victims’ issues.

In fact, if both directors’ visions come to fruition, there would be a comprehensive system of victim statistics along with a clearinghouse of effective programs and practices. The victims field would see tremendous advances in basic knowledge about crime victimization and awareness of the most promising interventions to protect and support victims throughout their journey in the criminal justice system.

OVC is a “pipeline” to the victims field for BJS and NIJ. Do you have questions about victimization, victim characteristics, victims’ responses, or justice system interventions? Do you need more information about programs or practices in your work with victims? Please share your questions with us at OVC and we will pass them along to our colleagues at BJS and NIJ.

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Intensive Case Management for Family Members of Homicide Victims

By William H. Petty, Ph.D., Visiting Fellow, Office for Victims of Crime

The Federal Bureau of Investigation’s Uniform Crime Report states that there were an estimated 14,748 murders in the United States in 2010. More disturbing, this estimate does not include individuals whose lives were lost due to manslaughter, driving under the influence, vehicular homicide, negligence, or when the cause of death is eventually determined to be accidental. During the months and years following the death of their loved ones, surviving family members experience a wide range of needs. Community resources for these family members vary in quality and comprehensiveness across the United States. Many types of victim service agencies and professionals indicate they provide services to family members of homicide victims; however, these services are often limited to assistance with crime victims’ compensation claims, case status updates, victim impact statements, and other criminal justice-related activities. Although these services are often critically important to survivors, all too often they do not address the complex needs experienced by families, including families with children and adolescents. In 2008 and 2009, the Office for Victims of Crime (OVC) funded three projects designed to identify and develop promising and sustainable family-focused interventions for family members of homicide victims. These projects received funding through the Intensive Case Management for Family Members of Homicide Victims initiative to develop and pilot promising practices in both rural and urban settings.

Violent Loss Response Team: Cleveland, Ohio

In 2008, OVC awarded funding to Cleveland’s homicide response collaborative initiative, the Violent Loss Response Team (VLRT). VLRT combines the resources of mental health providers, law enforcement, victim witness services, and specialized grief counseling services to support surviving family members immediately after a homicide and into longer term counseling. Following a homicide, law enforcement investigators contact the Mental Health Services’ Crisis Team Hotline to make a referral; the hotline is available 24 hours a day, 7 days a week. The Crisis Team contacts the VLRT on-call manager and provides pertinent details about the incident. VLRT immediately contacts the identified surviving family members in person and/or by telephone.

VLRT staff members provide a wide array of services, depending on the family’s needs and choices. These services include helping law enforcement make the initial death notification, providing crisis intervention and intensive case management services, funeral planning, media management, assistance with basic needs (food, clothing, new housing), advocacy with the coroner’s office and homicide detectives, and providing assistance with the complex systems that many of these families will need to deal with (e.g., Social Security, Department of Children and Family Services, victims of crime compensation applications). These services are provided at no cost to the family, are mostly provided in the family’s home, and are available 24 hours a day. Once families have moved through the immediate crisis, VLRT works to transition them to an experienced and specialized provider of grief counseling services. Since its inception 4 years ago, VLRT has provided services to more than 1,200 friends and family members of Cleveland’s 318 homicide victims. VLRT also provides technical assistance to other cities in the region, including Chicago.

National Crime Victims Research Center: The Lowcountry of South Carolina

In the South Carolina Lowcountry, the National Crime Victims (Research and Treatment) Center (NCVC) serves as a rural site for intensive case management. A division of the Department of Psychiatry and Behavioral Science at the Medical University of South Carolina, NCVC received OVC funding in 2009 and partners with 39 local agencies representing law enforcement, victim assistance, mental health, prosecutors and court systems, coroners’ offices, and others. This project is an expansion of existing programs that have provided intensive, direct mental health services to family members of homicide victims in the Charleston Tri-County area for the past 11 years. Through this project, NCVC provides comprehensive services (including support groups and individual trauma-focused treatment) using an outreach service delivery model in the community or via telemedicine. This initiative allowed NCVC to expand service delivery within very rural communities and to develop several tools for victim advocates and survivors to guide their work in assisting survivors. Products developed include Needs Assessment for Survivors of Homicide (NASH)—Victim Advocate and Clinician Versions, Community-Based Outreach Manual for Clinicians, and Guidebook for Survivors of Homicide. OVC is currently reviewing these publications for possible dissemination to the field through the OVC Web site.

NCVC’s specialized services for survivors of homicide are unique because NCVC focuses on survivors residing in rural areas through its Community-Based (CB) Outreach Delivery Approach. The CB Outreach Model was developed to target populations such as ethnic minorities and rural survivors who often do not receive needed services following exposure to trauma. Survivors residing in rural areas face a number of augmented barriers (including mental health disparities) because many rural survivors do not know where to go to seek help, and the places they often go first (e.g., faith communities) may not be adequately trained to provide appropriate help or referrals. The CB Outreach Model of service delivery provides an alternative to traditional office-based services by taking mental health services directly to the client. This approach brings victim services into communities (e.g., homes, schools, churches) to better meet the needs of traditionally underserved populations.

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Office of Victim Assistance: New Hampshire

The State of New Hampshire is unique in that it is one of only a handful of states where all homicide cases, with the exception of vehicular homicides, are prosecuted out of the Attorney General’s Office. Since 1987, advocates from the Office of Victim Witness Assistance (OVWA) have been on call 24 hours a day so they can respond immediately to every homicide scene to deliver death notifications (in coordination with state police) and meet the urgent emotional and/or physical needs of the families of homicide victims. These advocates continue to provide survivors with intensive support services throughout the criminal justice process. OVWA received OVC funding to expand and institutionalize the existing program in 2009.

With input from survivors, OVWA conducted an intensive case management evaluation/needs assessment to identify gaps in service provision and to determine program areas that need to be enhanced or improved. A major gap was the lack of mental health clinicians who were willing and able to provide trauma-informed mental health assessments, counseling, and support groups for survivors in rural areas. In response, OVWA created a small, specialized Network of Homicide/Trauma-Informed Mental Health Providers (the Network), with an emphasis on building the capacity of providers to serve victims in rural communities. In collaboration with local victim/witness and crisis center advocates, OVWA identified a list of recommended providers who were then invited to participate in the Network. In addition, OVWA contracted with another organization to develop a 4-day core curriculum designed to enhance providers’ understanding of the psychological impact of homicide, how best to work with survivors, and how to help re-establish the critical features of safety, predictability, and control in the lives of survivors.

Network providers signed a memorandum of understanding with OVWA in which they agreed to attend the core curriculum training, to provide trauma-informed services to survivors for a minimum of 2 years, to accept reduced payment from the Victims’ Compensation Program, and to attend ongoing trainings so they can continue to enhance their skills in working with survivors. In exchange, OVWA committed to provide the Network with the curriculum training and ongoing trainings at no charge, to provide free continuing education unit credits, and to refer survivors to the Network providers. OVWA now has a referral list of 27 trained therapists, with more than half in rural communities, who are providing much-needed trauma-informed services to survivors.

The three projects described above are designed to enhance, evaluate, and institutionalize existing, promising direct-service interventions in partnership with other community agencies and the survivors they serve. In addition, they will work with OVC to develop technical assistance resources so they can assist other communities that want to expand their services for families of homicide victims. Each project is exploring available resources so they can achieve sustainability after OVC funding ends. The grantees funded under this project were also instrumental in providing guidance to OVC in the development of one of the newest OVC Training and Technical Assistance Center trainings, Serving Survivors of Homicide Victims, which is available through the OVC TTAC Trainings Catalog.


2Victim advocates and mental health service providers perform needs assessments and case management. Only mental health clinicians provide mental health therapy.

OVC discretionary grants are used to fund national-scope demonstration projects and training and technical assistance delivery to enhance the professional expertise of victim service providers. Demonstration projects, such as Intensive Case Management for Family Members of Homicide Victims, are awarded to states, units of local government, tribal communities, individuals, educational institutions, and private nonprofit organizations to identify and implement promising practices, models, and programs.
Tribute to Irina Romashkan

On Thursday, July 19, 2012, Irina Romashkan, a respected and beloved member of the Office for Victims of Crime (OVC) family, passed away at age 53. She is survived by her loving husband and childhood sweetheart, Sergei; daughter, Katya; and granddaughter, Sophie. Irina’s life was celebrated on Wednesday, July 25, 2012, by her family, friends, and colleagues at a service in Alexandria, Virginia.

Irina joined OVC in March 2010 as the Communication Specialist, with the goal of moving OVC’s online presence forward in its publication and product development, dissemination, and outreach. From the first day she arrived at OVC, Irina’s drive and passion were apparent, and she wasted no time beginning her mission to relaunch OVC’s Web site. This passion was evident to everyone she worked with throughout her time at OVC. “From the moment Irina arrived in OVC, she championed OVC’s communication and outreach efforts. She embraced our mission to position OVC on the cutting edge when it comes to outreach efforts—including revamping our Web site, releasing a new electronic newsletter, and incorporating the use of social media into our outreach strategy—just to mention a few of the projects she spearheaded. I only wish Irina was here to see the fruits of her labor realized, including mobile Web pages, an award-winning newsletter, and the recent departmental approval for the use of social media. This will forever be Irina’s legacy to OVC,” said Pamela Leupen, OVC’s Deputy Director.

Prior to joining OVC, Irina served as a senior project specialist for the International Association of Chiefs of Police (IACP) where she worked on a variety of projects, including the Enhancing Law Enforcement Response to Victims initiative. “IACP was saddened to learn of the death of our former employee and colleague—Irina. Her legacy here at IACP is an enduring one. To her team members here, she brought an intense desire to achieve, a wonderful sense of humor, and an uncanny ability to argue points she believed in until we all listened and understood,” said John Firman, IACP’s Research Center Director.

While dedicated to her work, her family was always most important in her life. “I worked with Irina for more than 10 years. The memories I hold dearest are our conversations about our families, remembering how extremely proud she was of her daughter and her granddaughter. She seemed always surprised by the fondness we expressed for her, while always gracious, funny, and kind,” said Elaine Deck, IACP’s Senior Program Manager for the Smaller & Tribal Agency Program.

Irina will be warmly remembered and her vibrancy will be greatly missed by all who were fortunate enough to know and work with her. OVC’s Acting Director Joyce Frost put it so well: “Irina’s work did not just touch that of OVC; her professionalism and dedicated work has helped countless victim service providers and, ultimately, crime victims in this country. We miss her gentle smile and quiet competence every day.”

Resources

Publications

OVC HELP Series for Crime Victims

The OVC HELP Brochure Series provides a resource for victims of crime and the victim service providers who work with them every day. Each brochure defines a type of victimization (such as homicide and assault), discusses what to do if you are a victim of this crime, and provides resources for more information and assistance on where to go for help.

Homicide
Assault


With funding from OVC, the National Sheriffs’ Association, Justice Solutions, and the National Organization of Parents Of Murdered Children, Inc., created this publication that identifies and discusses how law enforcement agencies can develop protocols to best serve survivors of homicide during cold case investigations.

A Multimedia Program To Improve Criminal Justice System Participation and Reduce Distress Among Physically Injured Crime Victims (April 2006)

This multimedia program offers victims an educational DVD, brochure, and bulletin for use during their hospitalization for crime-related injuries. The program provides victims of violent crime with information about emotional responses to victimization, elements of medical followup, physical rehabilitation processes, and the criminal justice system.

OVC HELP for Victim Service Providers Web Forum

OVC developed this resource as an online tool for victim service providers and allied professionals to share ideas, suggestions, and recommendations concerning promising practices, best practices,

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and victim issues. Guest hosts lead online discussions on various topics, including victim services in urban high-crime neighborhoods and working with victims of gang violence. Each topic includes a link to the transcript.

- Victim Services in Urban High Crime Neighborhoods
- Working with Victims of Gang Violence

**Trainings**

**Serving Survivors of Homicide Victims**

In this training, victim advocates and allied professionals learn about emotional and psychological responses to homicide, ways to build resilience, how to make a proper death notification, how to prepare survivors to navigate the legal system, and other interventions to support survivors of homicide. Your organization can request this training in your community through the Training by Request program.

**Supporting Children Living with Grief and Trauma: A Multidisciplinary Approach**

This training is designed for victim advocates who want to develop knowledge and skills to provide appropriate services for children who are experiencing grief and trauma as a result of violence. You will examine how children perceive death, how they process grief and trauma, and how you can recognize the signs of grief and trauma in children and support their recovery. Using a multidisciplinary team approach, victim service providers, mental health professionals, and law enforcement can improve existing services and create new opportunities to support children living with grief. Your organization can request this training in your community through the Training by Request program.

**2012 APEX Award for Excellence**

We are pleased to announce that OVC News & Program Updates won the 2012 APEX (Awards for Publication Excellence) Award for Excellence for the Electronic Newsletters category. The APEX Award for Excellence is given to those entries whose ability to communicate positions them as the best in the field.

The Awards for Publication Excellence is an annual competition for publishers, editors, writers, and designers who create print, Web, electronic, and social media. APEX awards are based on excellence in graphic design, editorial content, and the success of the entry in achieving overall communications effectiveness and excellence. In all, there were almost 3,400 entries in 130 different categories in the 2012 competition.

**13th National Indian Nations Conference**

Strength from Within: Rekindling Tribal Traditions to Assist Victims of Crime

December 6–8, 2012
Agua Caliente Reservation, California

Register now.

**ABOUT THE OFFICE FOR VICTIMS OF CRIME**

The Office for Victims of Crime is one of six components within the Office of Justice Programs, U.S. Department of Justice.

Led by Acting Director Joye E. Frost, OVC is committed to enhancing the Nation’s capacity to assist crime victims and to providing leadership in changing attitudes, policies, and practices to promote justice and healing for all victims of crime.

Established in 1988 through an amendment to the Victims of Crime Act of 1984, OVC is charged by Congress with administering the Crime Victims Fund. Through OVC, the Fund supports a broad array of programs and services that focus on helping victims in the immediate aftermath of crime and continuing to support them as they rebuild their lives. Millions of dollars are invested annually in victim compensation and assistance in every U.S. state and territory, as well as for training, technical assistance, and other capacity-building programs designed to enhance service providers’ ability to support victims of crime in communities across the Nation.

For more information, visit [www.ovc.gov](http://www.ovc.gov).

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