

# Supporting Crime Survivors by Investing in Trauma Recovery Centers:

## Findings from a National Survey





## Executive Summary

The evidence-based Trauma Recovery Center (TRC) model was developed in 2001 to help crime survivors in communities most impacted by violence recover from the many negative consequences of victimization. TRCs provide emergency support and assistance to stabilize clients in immediate crisis, and ongoing clinical mental health care and case management to help survivors heal from trauma. TRCs have been shown to improve outcomes for survivors and promote public safety by breaking cycles of crime. Today, over 50 TRCs across the US are implementing the model in a variety of settings to meet the needs of diverse crime survivor populations.

### **This brief summarizes key findings from a national survey of TRCs, including:**

- TRCs are a vital resource for underserved survivors, and are achieving the goal of serving survivors of violent crime who often are not reached by other victim service providers.
- Still, too many victims don't get help, and the need for TRCs exceeds current capacity.
- TRCs need stable and sustainable funding to meet survivors' needs.

Policymakers at the federal, state, and local levels can take action to better serve survivors of violence by strengthening support of, and collaboration with, TRCs.

# Introduction

People who survive violence, including both people victimized directly and the family members of survivors and homicide victims, often face devastating, lifelong consequences from trauma. Unaddressed trauma from violence can lead to costly consequences for both the victim and their family and community, including employment and housing instability, addiction and other mental health challenges, and revictimization. These consequences fall disproportionately on communities most impacted by violence, particularly among people who are young, Black, brown, and/or low-income earners.<sup>1</sup> Early intervention and comprehensive care for survivors of violent crime prevents long-term negative consequences, transforms lives, and keeps communities safer.

Developed in 2001, the evidence-based Trauma Recovery Center (TRC) model is designed to provide emergency support, clinical care, and wraparound case management to help survivors in communities most impacted by violence stabilize in moments of crisis, heal from trauma, and address their needs in the wake of victimization. TRCs use a trauma-informed and coordinated approach to overcome the barriers to service many victims face, and tailor services to meet the specific needs and goals of each client. TRCs engage in assertive outreach to meet survivors where they are, physically and emotionally, and a multidisciplinary staff provides psychotherapy, clinical case management, and comprehensive services including crisis intervention, medication management, legal advocacy, assistance with filing police reports, and support accessing victim compensation funds. TRCs offer a wide range of services, and provide case management in coordination and collaboration with other community providers. This approach avoids duplicative service provision, and gives survivors access to the care and services they need under one roof without having to navigate the barriers – and sometimes retraumatization – associated with seeking each resource individually.

Research shows that TRCs are an effective strategy to improve outcomes for survivors. As a result, the TRC network has grown significantly in recent years. As of fall 2023, 51 TRCs are serving thousands of survivors across 12 states, each adopting an organizational structure and range of service offerings that meet the needs of the diverse client bases they serve.

The Alliance for Safety and Justice partnered with the Marron Institute at New York University to conduct the first nationwide survey of TRCs, capturing both how TRCs are operating and information on the thousands of survivors they serve each year.<sup>2</sup> These survey results show:

- **TRCs Are a Vital Resource for Underserved Survivors**
  - TRCs are achieving the goal of serving survivors of violent crime who often are not reached by other victim service providers.
  - TRC serve victims of some of the most traumatic crimes; the most frequent include domestic violence, physical assault, sexual assault, and gun violence. A majority of survey respondents reported that at least a quarter of their clients have experienced gun violence, and many TRC clients are survivors of multiple types of victimization.
- **Still, Too Many Victims Don't Get Help**
  - The need for TRCs exceeds current capacity. More than half of TRCs are running a waitlist because they do not have sufficient funding to immediately serve all survivors who seek their support.
- **TRCs Need Stable and Sustainable Funding to Meet Survivors' Needs**
  - TRCs play a key role in the victim services and violence prevention landscape, filling existing gaps and coordinating care with many other service organizations.
  - TRC leaders are concerned about funding instability and uncertainty, and express fears that they will need to reduce or end services as a result.

Policymakers can play a key role in ensuring that more survivors of violence are able to access TRCs to heal from trauma and address their many needs in the wake of victimization. This brief outlines federal, state, and local policy recommendations to improve funding practices and more fully incorporate TRCs in strategies to serve survivors of violence across the country.



# Key Survey Findings

## 1. TRCs Are a Vital Resource for Underserved Survivors

Violence causes trauma and other wide-ranging consequences for survivors and their families and communities. Victims of violence suffer from trauma and anxiety, physical injury and other health issues, trouble sleeping, stress in their relationships, difficulty engaging with work or school, increased risk of contact with the justice system, and job loss and housing instability. Survivors of violence are also more likely to experience revictimization, compounding the harm that they have already experienced.<sup>3</sup>

*The evidence-based TRC model is designed to interrupt cycles of violence by providing critical healing services and wraparound support free of charge to survivors who face the greatest barriers to accessing traditional victim services.<sup>4</sup>*

This includes engaging with survivors wherever they are, including in their homes or in the community, and providing individualized clinical mental healthcare, case management and service coordination, and a wide variety of supports to help them address whatever challenges they are facing in the wake of their victimization. Research shows that TRCs improve outcomes for survivors,<sup>5</sup> including:

- **Increasing access to care and treatment and reducing disparities in underserved communities.**
- **Reducing negative impacts of trauma and improving health and wellness.**
- **Improving quality of life, such as housing stability and engagement with work.**
- **Reducing the risk of additional violent injury.<sup>6</sup>**

Simply put, for a survivor, engaging with a TRC can mean the difference between deep and sustained instability due to the harmful impact of unhealed trauma, and accessing the support they need to find or maintain employment and housing, repair critical relationships with loved ones, and begin their healing journey.

*Survey data show that TRCs are achieving the goal of serving survivors who often are not reached by other victim service providers. TRC clients are disproportionately younger adults and Black and Latino people, and they face many overlapping barriers to receiving help. These include:*

- **Economic barriers:** Over half are considered working poor, a third are unemployed, and many have a disability that limits their ability to work.
- **Linguistic barriers:** Many TRC clients have limited or no English proficiency.
- **Housing instability:** Many TRC clients are unhoused or unstably housed.
- **Mental health barriers:** A vast majority of TRC clients have PTSD, depression, and/or other mental and behavioral health challenges.

Clients engage with TRCs due to a wide range of traumatic victimization experiences. Survey respondents reported that the most common experiences among their clients include domestic violence, physical assault, sexual assault, and gun violence. Over half of survey respondents reported that at least a quarter of their clients have experienced gun violence, and a few TRCs have caseloads where the vast majority of clients are victims of gun violence.

*TRCs also play a key role in the victim services and violence prevention landscape, filling existing gaps and coordinating care with many other service organizations.<sup>7</sup>* Survey respondents indicated that TRCs offer unique and culturally competent services, increase the efficiency of service provision and coordination across providers, and generally reduce clients' reliance on social services. Addressing victims' needs in coordination with other community-based providers to help survivors heal from trauma is critical for preventing revictimization<sup>8</sup> and breaking cycles of violence.

## 2. Still, Too Many Victims Don't Get Help

Too many survivors do not get the help they need to recover from the trauma of victimization. According to a national survey of crime survivors, three in four victims report that they never received counseling or mental health support to help them recover. About half of victims who did not get the support they needed reported that they did not know how to access support, emphasizing the importance of assertive outreach and culturally relevant care.<sup>9</sup>

A recent analysis estimated that communities need one TRC per 100,000 people to adequately meet the needs of survivors.<sup>10</sup> While the number of TRCs has grown to over 50 nationwide since the first TRC was founded in 2001, there are still far too few to meet survivors' needs. Thirty-six states still do not have a single existing or planned TRC.

Even in places where TRCs exist, most do not have the capacity to fully meet their communities' needs. Survey respondents shared that more than half of TRCs have a waitlist because they do not have sufficient funding to immediately serve all survivors who need treatment and support. Additionally, respondents from several TRCs shared that additional funding would allow them to provide services to youth and children, who are not currently included in their client populations.

## 3. TRCs Need Stable and Sustainable Funding to Meet Survivors' Needs

Investments in TRCs are investments in healing and public safety. Research shows that the TRC model is more cost effective than other modalities,<sup>11</sup> and access to sustained resources allows TRCs to serve their clients. TRCs require an annual budget of approximately \$1.1 million to fully implement the model by employing a multidisciplinary staff that includes psychiatrists, psychologists, social workers, administrative staff, and other outreach workers and counselors as needed. Survey data show that on average, TRCs have about 11 full-time staff and four part-time staff. Many TRCs are newer, and survey data show that three in four have been operating for five years or fewer.

One of the biggest challenges for existing TRCs is securing sufficient and sustainable funding streams that allow them to more fully address victims' unmet needs. Because TRCs offer a wide range of care and supports, and use a flexible and responsive service model, they face unique challenges navigating government grant structures that are often designed for more limited and inflexible service provision. Survey respondents reported that TRCs are funded through a variety of channels: most receive federal funds passed through the state (very few receive direct federal funding),<sup>12</sup> about half receive state funding, about half receive funding from philanthropy and private donors, and a smaller number receive resources from local governments. Despite this diversified mix of funding sources, respondents shared widespread concern about limited funding availability:

- Over a third of TRCs reported having to reduce services in 2022 due to insufficient funds.
- Seven in ten TRCs reported that they were not sure if they would be able to maintain their current level of service over the next five years, and two in ten predicted they would not be able to maintain their current level of service.
- Over nine in ten TRCs reported being "somewhat concerned" or "very concerned" that they would have to limit clients served or services offered in the future due to funding limitations.
- Survey respondents also indicated urgent priorities they would advance with additional funding, including emergency funds and other types of support for clients, and expanding clinical counseling and case management services. Growing TRCs' assertive outreach capacity also emerged as a pressing priority for additional funding.

Dedicated funding is also required to open and support new TRCs in areas where victims currently have no access to trauma recovery services. Communities across the country have successfully leveraged federal, state, and local resources to open new TRCs to meet the needs of survivors. New TRCs can also benefit from support as they open their doors. The National Alliance for Trauma Recovery Centers (NATRC) is a member organization that provides technical assistance and training to new and existing TRCs, including facilitating cross-state learning communities and supporting TRCs with model fidelity.



## Policy Recommendations

Policymakers at the federal, state, and local levels have a role to play in better meeting survivors' needs by increasing their access to TRC services. These recommendations describe strategies to stabilize and enhance funding for TRCs, and more fully incorporate TRCs as key partners in supporting survivors of violence in communities across the country.

### Recommendations for federal leaders and policymakers:

- **Stabilize the Victims of Crime Act (VOCA) Crime Victims Funds (CVF) fund and make funds more accessible to TRCs.** VOCA assistance grants are a primary source of support for TRCs, but CVF volatility means that many TRCs risk being unable to make payroll when the fund dips. Deposits into the CVF have been rising annually since the VOCA Fix Act passed in 2021, but they are still dramatically below recent obligation caps and allocations, and without action from Congress, VOCA-funded organizations are bracing for 40 percent cuts to available funding. Allocating supplemental resources to offset declines in the CVF would ensure that victim service providers such as TRCs are able to stay afloat.
- **Establish a targeted funding stream for TRCs and offer technical assistance for applying for funds.** TRCs face multiple barriers accessing existing federal funding streams, including VOCA and other funding sources dedicated to safety and mental health. These include burdensome application and reporting requirements, narrow eligibility criteria, reimbursement-based payments, and matching fund requirements, and very few TRCs currently receive federal funds directly. A dedicated grant funding stream designed to support the TRC model could address this gap by providing support for the wide range of wraparound services TRCs offer, resources to cover staff training and overhead costs, and unrestricted funding to allow TRCs to meet emerging needs. Offering technical assistance with the application and grant management process could ensure that the grant is accessible to community-based organizations.
- **Recognize TRCs under the Community Violence Intervention and Prevention Initiative (CVIPI).** Recognizing TRCs as an evidence-based strategy under CVIPI within the Department of Justice's Office of Justice Programs would allow TRCs to be explicitly included in a key federal funding stream, complement other public safety strategies, and connect crime victims with supportive TRC services.
- **Issue a directive that states include addressing survivors' PTSD in their plans governing the use of SAMHSA substance abuse block grants and state opioid and stimulant block grants.** Currently, SAMHSA does not recognize PTSD as a general purpose for spending under their programs. This clarification will allow victim service providers treating PTSD, including TRCs, to access these funds.



## Recommendations for state leaders and policymakers:

- *Establish dedicated accessible funding streams for TRCs.* Several states, including Arizona, California, Illinois, Iowa, Michigan, and Ohio have approved dedicated funding streams to support TRCs. Specifying adherence to the NATRC model, and including funds for technical assistance support, can help TRCs meet all the requirements. Additionally, states can allocate resources for TRCs to pass through to survivors as flexible emergency funds to help them achieve stability in moments of crisis.
- *Evaluate existing funding streams for victim service providers and address access barriers that TRCs and other community-based providers may face.* TRC services can support violence prevention and intervention efforts and increase public safety, in addition to providing mental healthcare, case management, and support with legal and administrative matters such as applying for victim compensation. Narrow eligibility requirements, overly prescriptive funding use guidelines, and burdensome application and reporting requirements can prevent TRCs from participating in existing grant programs and complementing other health, safety, and social service providers.
- *Recognize TRCs as key partners in ensuring civil protections for survivors.* A growing number of states are creating and strengthening civil protections for survivors, including housing, employment, and nondiscrimination protections. Ensuring that TRCs are covered in existing confidentiality protections for victim service providers increases their ability to support survivors in exercising their civil rights and protections in the wake of victimization.
- *Ensure that TRCs are included on resource and referral lists for crime survivors.* Many states offer lists of organizations, agencies, and services designed to support survivors of crime and violence. Adding existing TRCs to those lists, and updating them when new TRCs open, will allow survivors to choose the services that best meet their needs and access the full range of benefits and supports that TRCs offer.

## Recommendations for local leaders and policymakers:

- *Establish dedicated accessible funding streams for TRCs.* Several local governments, including Austin, Cuyahoga County (Ohio), New Orleans, and New York City, have approved dedicated funding streams to support TRCs. Specifying adherence to the NATRC model, and including funds for technical assistance support, can help TRCs meet all the requirements.
- *Support partnership between TRCs and other agencies and organizations providing services to survivors.* TRCs hold multiple partnerships and actively coordinate care across a wide range of service providers. Working with TRCs to understand the needs of their clients can result in formal collaboration, including colocation, with other types of services including legal assistance and other types of medical care.
- *Ensure that first responders are aware of local TRCs and that TRCs are included on resource and referral lists.* TRCs receive clients through several pathways, including referrals from first responders and other professionals who encounter victims of crime. Ensuring that all professionals who work with survivors are aware of TRC services will increase access for victims and collaboration across providers.

## Endnotes

- 1 Alliance for Safety and Justice. (2022). *Crime Survivors Speak: National Survey of Victims' Views of Safety and Justice*. Accessed from: <https://allianceforsafetyandjustice.org/wp-content/uploads/2022/09/Alliance-for-Safety-and-Justice-Crime-Survivors-Speak-September-2022.pdf>
- 2 For a more detailed overview of survey methodology and findings, see Sandy Felkey Mullins and Angela Hawken. (2023). *Trauma Recovery Centers in the United States*. Available at SSRN: <https://ssrn.com/abstract=4568018>
- 3 Alliance for Safety and Justice. (2022). *Crime Survivors Speak: National Survey of Victims' Views of Safety and Justice*. Accessed from: <https://allianceforsafetyandjustice.org/wp-content/uploads/2022/09/Alliance-for-Safety-and-Justice-Crime-Survivors-Speak-September-2022.pdf>
- 4 University of California San Francisco Trauma Recovery Center. (2016). *Trauma Recovery Center Manual*. Accessed from: <https://nationalallianceoftraumarecoverycenters.org/resources/uscf-trc-manual>
- 5 National Alliance of Trauma Recovery Centers. (2020). *Trauma Recovery Centers: Addressing the Needs of Underserved Crime Survivors*. Accessed from: <https://allianceforsafetyandjustice.org/wp-content/uploads/2020/10/TRAUMA-RECOVERY-CENTERSAddressing-the-Needs-of-Underserved-Crime-Survivors.pdf>
- 6 Natasha M. Simske, et. al. (2022). Victims of Crime Recovery Program Decreases Risk for New Mental Illness. *Journal of Mental Health and Clinical Psychology*. 6(1): 3-10
- 7 See, for example, The Health Alliance for Violence Intervention and National Alliance of Trauma Recovery Centers. (2023). *Keys to Collaboration between Hospital-based Violence Intervention Programs and Trauma Recovery Centers*.
- 8 Natasha M. Simske, et. al. (2022). Victims of Crime Recovery Program Decreases Risk for New Mental Illness. *Journal of Mental Health and Clinical Psychology*. 6(1): 3-10
- 9 Alliance for Safety and Justice. (2022). *Crime Survivors Speak: National Survey of Victims' Views of Safety and Justice*. Accessed from: <https://allianceforsafetyandjustice.org/wp-content/uploads/2022/09/Alliance-for-Safety-and-Justice-Crime-Survivors-Speak-September-2022.pdf>
- 10 Alliance for Safety and Justice. (2022). *Scaling Safety*. Accessed from: <https://allianceforsafetyandjustice.org/wp-content/uploads/2022/07/Alliance-for-Safety-and-Justice-Scaling-Safety-Report-July-2022.pdf>
- 11 The TRC model costs 34% less than usual care. Source: Alicia Boccellari and Robert Okin. (2005). *Trauma Recovery Center: Transforming Trauma Services in the Public Sector*. Status Report to the State of California Victim Compensation Program.
- 12 Victims of Crime Act (VOCA) funding is the largest federal source of funds to support victim services. Source: [OVC Formula Chart](https://ovc.ojp.gov/funding/fy-2023-voca-assistance-allocation.pdf), accessed from: <https://ovc.ojp.gov/funding/fy-2023-voca-assistance-allocation.pdf>



The Alliance for Safety and Justice (ASJ) is a multi-state public safety organization that aims to replace over-incarceration with more effective public safety solutions rooted in crime prevention, community health, rehabilitation, and support for crime victims. ASJ partners with state leaders and advocates to achieve safety and justice reforms through advocacy, organizing, coalition building, research, and communications.

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