Implementing Law Enforcement-Based Victim Services:
A Research Note on Considerations for Rural Communities

Elizabeth Tibaduiza (ORCID: 0000-0002-7671-0266)
Research Public Health Analyst
RTI International
Research Triangle Park, North Carolina
UNITED STATES OF AMERICA

Kelle Barrick (ORCID: 0000-0001-7955-509X)
Senior Research Criminologist
RTI International
Research Triangle Park, North Carolina
UNITED STATES OF AMERICA

Correspondence: Elizabeth Tibaduiza, etibaduiza@rti.org

Author Note

Abstract

Law enforcement's response to victims is pivotal in mitigating the significant and long-term physical, psychological, and financial consequences of victimization, and law enforcement agencies (LEAs) are increasingly dedicating personnel or programs focused on victims. For example, law enforcement-based victim services (LE-VS) specialists are LEA personnel whose primary responsibility is to focus on the rights and needs of victims. Recognizing the need to expand the use of LE-VS specialists, the Office for Victims of Crime developed the Law Enforcement-Based Victim Services (LEV) program to develop new or enhance existing victim services programs. There is a dearth of research on the outcomes and effectiveness of LEV programs or empirical evidence of best practices, and even less is known about LEV programs in rural areas. The current paper is part of a larger formative evaluation of LEV programs. Using surveys of 73 LEV programs and intensive data collection in a subset of 10 programs, we explored differences among LEV programs by rurality and identified promising practices for implementing victim services and considerations for rural communities. Results suggest that rural LE-VS specialists may be expected to have a broader set of skills and expertise than those in other communities to meet their job demands. Moreover, although all LE-VS specialists need to understand their community context, the implications for victim assistance are different in rural and urban communities.

Keywords: law enforcement-based victim services, rural communities, rural victimization, National Crime Victimization Survey (NCVS), effects of victimization

Introduction

Today, there is wide recognition that law enforcement's response to victims is pivotal in mitigating victimization's significant and long-term physical, psychological, and financial consequences (International Association of Chiefs of Police [IACP] & the Office for Victims of Crime [OVC], 2020). Despite the critical role that law enforcement plays in responding to and supporting victims of crime, many law enforcement agencies (LEAs) nationwide do not have personnel or programs dedicated to victims (Goodison, 2022). However, these types of programs are quickly expanding—the percentage of police departments and sheriff's offices with dedicated programs or personnel responsible for providing victim services doubled between 2013 (13%) (Warnken, 2018) and 2020 (27%) (Bureau of Justice Statistics [BJS], 2020). Notably, far more LEAs serving 100,000 or more residents have these dedicated victim services than agencies serving fewer than 100,000 residents. Among those that do, information about the nature and reach of provided services is limited.

Law enforcement-based victim services (LE-VS) specialists' role is unique among advocates and other helping professionals in the criminal legal system. LE-VS specialists are the only LEA personnel whose primary responsibility is to focus on victims' rights and needs, and they have access to LEA personnel, crime reports, and victims during crucial criminal legal system intersection points. They connect with and support victims soon after reports are made and help them exercise their statutory rights. Ensuring victims have access to LE-VS specialists who provide robust and ethical services is crucial to meeting their critical needs (safety, support, information, access, continuity, voice, and justice) (IACP & OVC, 2020; Tibaduiza et al., 2023). This support can also mitigate the harm felt by many victims when criminal investigations remain unsolved or never progress to prosecution.

Recognizing the value of LE-VS specialists, OVC developed the Law Enforcement-Based Victim Services (LEV) program to build and sustain LEAs' internal capacity to address the rights and needs of crime victims by funding LE-VS specialists to provide trauma-informed assistance to victims. Between 2018 and 2023, 80 LEV programs had been funded across the United States. The programs are located within urban, rural, and Tribal areas and are situated within state, county, and local LEAs and sheriff's offices. Agencies use the funds to hire LE-VS specialists, establish new victim services programs, or enhance existing victim services programs to fill identified gaps and needs. Another key objective is to form collaborative partnerships with community-based organizations to expand the resource network available to provide victims with the services they need. LEV personnel engage in both direct service provision and referral to external partners to meet a range of victim needs. LEAs have considerable latitude to implement their grants to fit the needs of their jurisdictions, which allows for smaller and rural agencies to implement a program that meets their needs (i.e., they are not bound to rules that only make sense for large, urban agencies). Implementing trauma-informed LEV services in rural areas presents unique opportunities and challenges. Few evaluations have assessed LEV

programs' outcomes and effectiveness or provided empirical evidence of best practices, and even less is known about LEV programs in rural areas.

Review of the Literature

The annual National Crime Victimization Survey (NCVS) captures characteristics of estimated nonfatal violent victimization (rape/sexual assault, personal robbery, aggravated assault, simple assault) and property victimization (burglary, trespassing, motor vehicle or other theft), reported and not reported to law enforcement, in the United States (BJS, n.d.). The NCVS provides a breakdown of victimization characteristics by Metropolitan Statistical Area (MSA) classification, which is defined as (BJS, n.d., Terms & Definitions):

> *"A population nucleus of 50,000 or more, generally consisting of a city and its immediate suburbs, along with adjacent communities having a high degree of economic and social integration with the nucleus. A principal city is the largest city in each MSA. Additional cities qualify if specified requirements are met concerning population size and employment."*

NCVS MSA categories include 'principal city within MSA', 'not part of principal city within MSA', and 'outside MSA'—the latter of which is generally considered to align with rural areas. Importantly, there is not one standard method to define rural and urban areas. Several methods have been developed, each with advantages and disadvantages, and are used to varying degrees (Bennett et al., 2019).

As shown in Table 1, in 2022, the rate of outside MSA violent victimization was 22.2 (per 1,000 persons) and 75.8 for property victimization (BJS, 2022).

Table 1

Rates of Victimization by MSA Classification, 2022

	Rate per 1,000 persons age 12 or older	
	Violent victimization	**Property victimization**
All	23.5	101.9
Principal city within MSA	29.6	150.2
Not part of principal city within MSA	19.9	75.7
Outside MSA	22.2	75.8

Additional characteristics of victimization outside an MSA include:

- The majority of violent (49.6%) and property (77.2%) victimization occurred at or near the victim's home.
- Offenders of a violent crime were most likely (40.6%) to be a well-known or casual acquaintance (property crime data unavailable).
- More victims of violent crime (51.6%) reported to police than victims of property crime (36.1%).
- Very few victims of violent (11.3%) or property (2.2%) crime used victim services.

Rural victimization research is often focused on intimate partner, domestic, and sexual violence, while there is significantly less on other crime types, such as human trafficking (Abraham & Ceccato, 2022), child maltreatment (Maguire-Jack & Kim, 2021), elder abuse (Fitzsimons et al., 2011), or agricultural crime (Lynn et al., 2023).

Rural victimization studies have identified several factors that appear to uniquely affect rural communities. For example, geographic isolation has been identified as a risk factor for victimization and a challenge to seeking help or leaving unsafe situations, which is exacerbated by transportation barriers and limited broadband infrastructure (Fritz et al, 2024; Peek-Asa et al., 2011; Youngson et al., 2021). These challenges are compounded for older adults and people with disabilities who are particularly vulnerable to isolation (Fitzsimons et al., 2011).

Studies suggest that rural communities' cultural values and norms are more traditional, religious, or patriarchal than urban areas (Eastman & Bunch, 2007; Fritz et al., 2024; Lynch & Logan, 2023; Terry, 2020; Youngson et al, 2021), which can create an environment in which victim blaming, social stigma toward victims, and acceptance of violence (particularly towards girls/women and the LGBTQIA+ community) is normalized (Eastman & Bunch, 2007; Fritz, 2024; Terry, 2020; Terry, 2024; Youngson et al., 2021). This culture may also validate the idea that victimization should be handled privately, which is intensified by the confidentiality concerns identified by victims in close-knit, smaller communities (Brossoie & Roberto, 2015; Fritz et al, 2024; Lynch & Logan, 2023; Youngson et al., 2021). Acquaintance density is typically greater in rural areas (Dudgeon & Evanson, 2014; Youngson et al, 2021), which can be a significant concern for victims who are considering seeking help, particularly when helping professionals (e.g., service providers, law enforcement) have an existing relationship with the victim, offender, or both (Fritz et al., 2024; Johnson et al., 2014; Youngson et al, 2021). Distrust toward government and negative perceptions toward and experiences with law enforcement are also common in rural communities and may impede help seeking (Fritz et al., 2024; Johnson et al., 2014; Lynch & Logan, 2023). In one study, victim advocacy professionals reported that law enforcement, judges, and health care providers in their rural areas lacked trauma-informed training, knowledge, and skills (Fritz et al., 2024).

Grossman et al. (2005) found that rural female victims had greater service needs but they were less likely to receive service referrals from law enforcement or social services. Despite increased need, rural communities often have limited services to support victims (Eastman & Bunch, 2007; Gillespie et al., 2019; Kim et al., 2024; Peek-Asa et al., 2011; Youngson et al., 2021; Yun et al., 2009), and law enforcement and service providers in rural areas often have less funding and fewer resources than urban counterparts (Eastman & Bunch, 2007; Fritz et al., 2024; Peer-Asa et al., 2011; Yun et al., 2009).

Service availability and accessibility barriers for emergency and long-term housing, transportation, childcare, and employment are common in (although not unique to) rural communities (Eastman & Bunch, 2007; Fritz et al., 2024; Kim et al., 2024). However, challenges accessing and providing culturally responsive services (e.g., bilingual staff, interpreters, immigration services) are reported more often by rural providers (Eastman & Bunch; Fritz, 2024; Kim et al., 2024; Yun et al., 2009). Culturally responsive and linguistically appropriate services are key components of trauma-informed care (Center for Substance Abuse Treatment, 2014).

Several studies recommend the implementation of coordinated and collaborative efforts (e.g., Coordinated Community Response) between key stakeholders to improve the response to rural victimization (Brossoie & Roberto, 2015; Edwards, 2015; Johnson et al., 2014; Kim et al., 2024; Youngson et al., 2021). These efforts should include survivor leadership and be tailored to communities' needs, as a uniform approach is unlikely to be successful (Edwards, 2015; Fritz et al., 2024; Lynch & Logan, 2023; Youngson et al., 2021). Training and education about victimization, trauma-informed principles, and victim assistance for professionals and the community is also recommended (Brossoie & Roberto, 2015; Fritz et al., 2024; Kim et al., 2024; Youngson et al, 2021).

Current Study

This paper is part of a larger study aimed at providing foundational knowledge of LEV programs and moving the victim services field closer to identifying best practices to provide victim-centered and trauma-informed assistance. The programs were granted flexibility in developing and implementing a program that best served their communities' needs. Given the unique position of rural communities and LEAs in implementing such programs, we paid special attention to their distinct experiences and needs. Using multiple methods, we explored differences among LEV programs by rurality and identified promising practices for implementing victim services and considerations for rural communities.

Study Design and Methods

The larger study involved conducting a formative evaluation of the LEV program. Formative evaluation occurs when a program is in the early stages of implementation and focuses on understanding the programs' individual components and activities, implementation

strategies, and intended outcomes. The LEV formative evaluation's overarching goal was to understand if victims' needs were being met and how LEV programs can help LEAs best serve victims. We collected data from all LEV grantees to develop an inventory of LEV program characteristics, which was followed by more in-depth data collection from a subset of sites.

All LEV programs were invited to complete a web-based survey comprised of several topic areas (e.g., staffing, collaboration, services). At least one person (e.g., LEV supervisors, LE-VS specialists) was asked to complete the survey on behalf of their LEV program. Of the 73 sites funded at the time, 68 (93%) completed the survey, 4 (5%) partially completed the survey, and 1 (1%) did not respond. The non-responding site also stopped participating as an LEV program, dropping the total number of sites to 72. To supplement the survey, data from the U.S. Census Bureau's 2015-2019 American Community Survey (ACS) 5-year estimates provided contextual information about the programs' jurisdictions.[1] One key ACS variable was rurality, which is delineated based on population density (U.S. Census Bureau, 2019). The ACS data include estimates for the proportion of a geographic area that is urban. We used this information to categorize LEV programs into: (1) 'all rural' (0% urban), (2) 'mostly rural' (up to 50% urban), or (3) 'mostly or all urban' (50% or more urban).

Of the 72 LEV sites, half were in rural communities: 17 (24%) 'all rural', 19 (26%) 'mostly rural', and 36 (50%) 'mostly or all urban'. Table 2 presents characteristics of the LEV programs' communities by rurality. The communities were similar in terms of age, educational attainment, and unemployment rates. However, variation was seen regarding racial and ethnic composition, primary language spoken at home, and poverty rates. For example, communities classified as 'all rural' had larger Native American or Alaska Native populations and higher rates of poverty than their less rural counterparts.

Following the survey, a subset of 10 LEV programs were invited to participate in a virtual interview and site visit. Using results from the survey, the 10 programs were purposively selected to ensure they were at the full operation stage of implementation and were diverse across relevant agency and programmatic characteristics, such as geographic region, agency size, agency type, urbanicity, program type (new or enhanced), program structure (supervisor type), and program size. One 90-minute virtual interview was conducted with key LEV program staff

---

[1] Because the LEV programs served jurisdictions at city, county, and state levels, the most appropriate geography for each site was selected (e.g., county-level ACS data was used for sheriffs' offices and city-level ACS data was used for local law enforcement agencies).

Table 2

Community Characteristics, by Rurality

Characteristic	All Rural (n=17)	Mostly Rural (n=19)	Mostly or All Urban (n=36)
	Mean	**Mean**	**Mean**
Median age	34.98	39.95	35.77
	Percent	**Percent**	**Percent**
Race			
White only	49.49	77.29	52.46
Black or African American only	10.60	9.74	19.77
Native American or Alaska Native only	20.18	0.60	0.79
Asian only	4.12	1.98	4.31
Hawaiian or Pacific Islander only	0.16	0.06	0.18
Other race only	1.44	0.15	0.29
Two or more races	3.06	1.99	2.95
Ethnicity			
Hispanic	15.81	8.21	19.24
Social and Economic characteristics			
High school degree or higher	86.31	88.83	86.81
Primary language spoken at home is not English	22.42	10.21	22.01
Poverty	24.71	13.85	16.99
Unemployment	5.06	3.23	3.84

(e.g., LEV supervisors, LE-VS specialists). The site visits included in-person interviews with LEV supervisors, LE-VS specialists, internal LEA partners, external partners, and victims who received LEV program assistance. In total, 10 sites (serving rural, suburban, and urban areas) participated in virtual interviews, and 9 participated in a site visit; 1 site declined to participate in the site visit due to higher priority needs within their community and scheduling difficulties. Four of the sites were mostly or all rural and six were mostly or all urban. In total, 153 interviews were conducted during the 9 site visits.

Virtual and on-site interviews were audio-recorded and transcribed via an automated transcription service. The transcripts were reviewed for accuracy, cleaned and edited, and then uploaded to QSR NVivo 12 (qualitative software) for coding and analysis. Our qualitative data analysis approach followed the flexible, in-depth coding method described by Deterding & Waters (2018). First, we linked *attribute codes* (e.g., site ID, LEA size, respondent type) to each

transcript, which allowed for coded excerpts to be queried by attribute. Flexible coding consists first of index coding and then analytic coding. *Index codes* comprised broad content areas (e.g., victim services, external partnerships) that were developed from the interview questions or identified by evaluation team members following the visits. Index coding applies these broad codes to large sections of text. The evaluation team initially coded a common set of transcripts to ensure consistent coding practices, and team meetings were used to resolve coding questions or issues. In the next stage, analysts reread the excerpts captured within an index code (e.g., victim services) and applied more detailed *analytic codes* (e.g., service planning, service types, direct versus referral services, challenges). Code reports were generated and analysts then developed detailed coding summaries, identifying common themes.

Findings

The survey responses were used to create profiles of program characteristics and explore variation by extent of rurality. As shown in Table 3, the program type, supervisory responsibility, LEV personnel availability, LEV personnel responsibilities, and service provision and referral varied by rurality. For example, more surveyed programs in 'all rural' jurisdictions used their grant funding to start a new LEV program than to enhance an existing program and had LEV staff report to a sworn officer rather than professional staff. Fewer 'all rural' programs had LEVS specialists available 24/7. As LEV programs need time to grow and evolve, rural programs' use of sworn supervisors (rather than professional) and limited staff availability likely reflects their status as new programs.

LEV personnel in 'all rural' areas reported having more types of programmatic responsibilities than their more urban counterparts. For example, personnel in rural programs were more likely to be responsible for things like programmatic grant management (60% 'all rural', 58% 'mostly rural', and 29% 'mostly or all urban' programs) and training internal/external personnel (80% 'all rural', 58% 'mostly rural', and 53% 'mostly or all urban' programs). Rural LEV personnel's broad responsibilities may be tied to the overall capacity of rural LEAs, which may not have other civilian staff tasked with grant management or training.

Most programs, regardless of rurality, had formalized external partnerships (e.g., with community service providers); the mean number ranged between 3 and 4. All LEV programs provided services directly and referred clients to external partners for additional services or assistance. 'All rural' programs had slightly fewer external partners and directly provided more types of services (mean=18) than their 'mostly rural' (mean=14) and 'mostly or all urban' (mean=15) counterparts. LEV personnel in rural communities may take on more direct service provision due to fewer resources and community partners.

Table 3

LEV Program Characteristics, by Rurality

	All Rural (n=17)		Mostly Rural (n=19)		Mostly or All Urban (n=36)	
	Freq	**% or mean**	**Freq**	**% or mean**	**Freq**	**% or mean**
Characteristic						
Program type						
New victim services program	15	88.2%	9	47.4%	17	47.2%
Enhance an existing program	2	11.8%	10	52.6%	19	52.8%
Supervisory responsibility						
Sworn Officer	13	76.5%	10	52.6%	20	57.1%
Professional Staff	3	17.6%	7	36.8%	15	42.9%
External Partner	1	5.9%	2	10.5%	0	0.0%
Availability of LEV personnel to respond to victims in crisis						
Any time, 24/7/365	5	33.3%	10	52.6%	14	43.8%
Monday-Friday during business hours	8	53.3%	4	21.1%	15	46.9%
Some availability outside business hours	2	13.3%	5	26.3%	3	9.4%
Responsibilities of LEV personnel [select all]						
Supervisory	6	40.0%	4	21.1%	12	35.3%
Seeking new funding	5	33.3%	6	31.6%	8	23.5%
Programmatic grant management	9	60.0%	11	57.9%	10	29.4%
Budgetary grant management	4	26.7%	4	21.1%	7	20.6%
Training of internal/external personnel	12	80.0%	11	57.9%	18	52.9%
None, no LEV personnel have any of the listed responsibilities	2	13.3%	3	15.8%	13	38.2%
Partnerships						
LEV program has formalized partnerships with external agencies, organizations, or entities	9	60.0%	13	72.2%	20	60.6%
Number of external partners	15	3.40	19	4.47	34	4.18
Service provision						
Number of service types referred	15	10.47	19	10.05	33	12.48
Number of service types provided directly	15	18.07	19	13.58	33	14.85

Our interviews with respondents revealed considerations and challenges within three topic areas: (1) community context, (2) rural LEV programs, and (3) crossover between rural and urban victim assistance.

Community Context

It is crucial for LEV program personnel to understand their community (i.e., jurisdictional) context, which encompasses many factors including the culture, legal system, geography, and community resources. These factors, which have implications for victimization and victim assistance, will often vary between rural and urban areas. One respondent reflected how growing up in a rural community was helpful preparation because they understood the "farm-oriented, small school districts, big families" rural community they were currently working in. This understanding provided awareness about the unique situations they may encounter and empathy for the people caught up in them. The respondent identified high levels of multi-generational poverty in their community, which likely resulted in families living in survival mode for long time periods. This awareness shaped how they approached situations in a trauma-informed way (e.g., nonjudgmental, recognizing extreme poverty as trauma):

> It's January, and there's two rooms in the house that are heated. And the ducklings and chicks are in the heated rooms, and the kids aren't where the priority is because [the animals] represent income and potential and a resource… And the kids will be fine. But we need to take care of the chicks and the ducklings because…I can sell them and make money… There's a learning experience, but there's also a reality of, when you go to those homes and talk to people who are at that level of survival, how do you convince them that having kids… wearing dirty diapers in unheated room isn't okay? Because it's what they know. Probably how they were raised. Almost certainly.

Community culture toward victimization was raised as a challenge by some respondents. One external partner said that providers and victims in their rural area were faced with a culture that tolerates (or even accepts) violence against women and minimizes the need for victim assistance. This partner called for "changing that narrative," and identified the need for community education: "I think there's a stigma with…victims sometimes that they don't deserve to have treatment or care or resources… I think even our citizens need a lot of awareness." This partner also shared that their local law enforcement and judicial system were viewed as a "big hurdle" due to the "good old boy network that's been around for years. [Offenders] know who to call. They know who to say, 'get these people off my back.' So, there's no punishment." Negative perceptions toward law enforcement and the legal system impact victims' willingness to report crime and help seeking. Based on respondents' reports, victims' experiences largely inform these perceptions. For example, one external partner explained that cyclical violence is not unusual in their "more rural community" and that law enforcement often grow frustrated revisiting the same location. However, victims become frustrated as well and perceive this as a

lack of action from law enforcement and are less likely to report future crimes. The partner relayed this belief from one of their clients: "[The victim] says, 'I'm done. I've called the police. They're not doing anything.'"

Respondents reported other challenges mostly unique to rural areas that impede victims' ability to seek help or access services . For example, small towns in large geographic areas with limited services to support victims (particularly specialized services like culturally specific resources) and lack of transportation, personal and public, results in a victim's isolation from needed assistance.

Rural LEV Programs

Some respondents described different considerations when planning for rural LEV services, such as variation in crime types and geography, which influence how cases are addressed, services that are needed, and staffing logistics. For example, LEV supervisors in a state LEA described their plans to expand into rural areas and that LE-VS specialists probably would encounter higher rates of crimes against children, which have different statutory requirements, require connection to specific partners (e.g., Child Advocacy Centers, Child Protection Services), and whose victims need specific services. Several respondents also noted that LE-VS specialists covering large rural areas may need specific resources, such as all-terrain vehicles to drive in remote areas during the winter. Some respondents also identified the expansiveness of their jurisdictions, with towns spread far apart, as a challenge. This requires LE-VS specialists to travel far lengths to see a victim in person, which can take a full day. One LEV supervisor recognized that LE-VS specialists' schedules and work expectations look different in rural areas compared to urban areas:

> Their schedules too are going to look a lot different because if they have court…that's a full day because they're so spread out… They could be traveling for hours just to get to court for a client. Our advocates [in urban areas]…can pack in a lot of things in a day. And realistically, in the [rural areas], they're going to be traveling a distance to meet with their clients or go to court or do anything that they have to do. So, they're going to be able to do less with their time just because they're going to be spending a lot of their time traveling.

One LE-VS specialist shared that their LEV program, located in "an enormous county," developed protocols to provide virtual assistance in emergency situations (e.g., helping a victim to file a protection order). They also developed relationships with other LEAs and service providers within the county that may be able to reach and assist a victim faster, until the LE-VS specialist arrives. This respondent also highlighted their coordination with a local Tribe and their police department because the county overlaps with their reservation. There are many jurisdictional complexities involving Tribal and local law enforcement, so identifying and developing relationships with local Tribes is essential and culturally responsive.

As noted, small communities may have limited resources to support victims. It is critical for LE-VS specialists working in small communities or counties with a variety of small communities to become familiar with the available resources and services and develop relationships with community-based providers to strengthen the service network available to victims. One LE-VS specialist working across a county shared a lesson learned in which they were informed by a local law enforcement officer that victims would need different gift cards because those provided were for a store that was not accessible. The LEV program was mindful after this to identify the types of stores located throughout their county before buying gift cards. Another LE-VS specialist found it helpful to be transparent about the resources available to victims locally, and to be aware of local events that can further limit options:

> Sometimes their options, for lack of a better term, suck, and that's just the bottom line. And I'll say that to them, 'Listen, I don't like these options I'm giving you...' But like I said, we are smaller communities... If we have a big event in town, we have no hotels, so people that are in need of housing, we don't have anything locally.

If resources are not available locally, LE-VS specialists may need to research and identify organizations outside of their area that can provide specific services (e.g., language access, culturally specific). Ultimately, it may be in the victim's best interest to help them relocate (if they want) due to safety concerns, service needs, or both. An external partner described helping a victim from another country and recognizing that the resources they had available did not meet their needs: "With the language barrier and translation, it's really difficult. But she was able to get connected with another program in a different state where she was safe and that they could actually meet her cultural needs."

One external partner identified the need for the LEV program to ensure their materials and services are linguistically accessible for the people in their community, not only in terms of languages available but also with consideration for reading level:

> There's also a lot of people in the community that might not have the ability to read or write… A lot of people don't feel comfortable sharing that piece of information. It's something that unfortunately carries a lot of shame for them… A lot of people may not say anything and just take [the pamphlet]… We do have a big Indigenous community in [County]. And I think sometimes that's overlooked... I don't know if there was ever a way to be more inclusive about having materials or a way to connect with people who speak…languages other than Spanish and English.

One LEV program shared an example of how rural victim assistance can be starkly different from urban areas. Although pet care is not a uniquely rural need, the LE-VS specialists in this county encountered situations needing to find care for farm and large animals. Because they require specialized care, options are limited and law enforcement have stepped in to help with care when none can be found:

One of the differences between working for city law enforcement versus a sheriff's office, I have learned, is that our deputies are keenly aware of the animal and livestock situation. [In one case], our deputy had gone out for over a week to this lady's house to hand feed those chickens. And then some of our deputies have been going out and feeding and watering horses and mucking out stalls because there's no assistance… You're not going to find that in cities. You might find it for feeding a cat but mucking out stalls and feeding horses and cows and goats—it was a very eye-opening experience for me.

The value of having LE-VS specialists was exemplified by an external partner who compared working with LE-VS specialists to volunteers who fulfilled a similar role in rural jurisdictions. Although the partner was appreciative for the volunteers, they recognized that they were not supported similarly as an LE-VS specialist is with training and financial resources:

I think volunteers don't get as much training and they're kind of just doing it when they can. Whereas when you're employed as an advocate, I think you really have a deep understanding of what your role is. You get more training, you're supported more, you're really valued. And I think you do better in your role responding to the trauma or responding to the victims or the families or what they need. It also helps that they have funds to use money to give cards for food or cab vouchers.

Crossover Between Rural and Urban Victim Assistance

Another theme that emerged was the value in urban-based LEV programs and LEAs developing relationships with victim advocates, service providers, or LEAs in close-by rural areas to facilitate referral to services and support for victims who live in those areas. One external provider praised the LE-VS specialist in the neighboring urban jurisdiction who reached out and formed a partnership to ensure that victims who lived in the partner's rural area could be referred quickly for ongoing, local assistance. This LE-VS specialist was equally appreciative for this partnership and highlighted the value in reciprocity (e.g., supporting each other's outreach events) to transform their relationship from referral-based to truly collaborative. This may not always be feasible given the limited capacity LE-VS specialists and LEA personnel operate under, in which case LEV programs should be prepared to assist victims they identify in their urban jurisdiction who either live in or need assistance relocating to rural areas. One external partner provided an example involving human trafficking, which may involve moving victims to different locations:

I had also seen a lot of overlap with labor and sex trafficking. And so, some of the individuals in [rural Town] that I had worked with to get back home to their families had been brought out to work in some of these farms and these fields [in urban/suburban area].

One urban-based LE-VS specialist assisted a victim who relocated to a rural area two hours away and continued to provide direct assistance while the victim's case was processed but also needed to research resources available in the victim's location.

Regional initiatives (e.g., a regional task force), in which urban and rural jurisdictions are involved, would likely benefit from cross-training so that collaborators from both jurisdiction types are mindful of potential differences (e.g., crime types, service needs and availability). One regional task force member described their colleagues' surprise when they identified that labor trafficking, which had not received much attention from the task force, was occurring in rural jurisdictions surrounding the main urban jurisdiction.

Conclusion

The LEV programs' communities were similar in terms of age, educational attainment, and unemployment rates. However, 'all rural' communities had larger Native American or Alaska Native populations and higher poverty rates than less rural communities. Comparing program characteristics by rurality highlighted that, relative to their counterparts, rural programs were primarily new (rather than enhanced), supervised by sworn staff (rather than a victim services professional), and available to serve victims only during traditional business hours. Although it is not uncommon for new LEV programs to rely on a sworn supervisor, the LE-VS specialists in these programs are left without professional mentorship and support for their specialized victim-centered role. Moreover, LEV personnel are tasked with more responsibilities and engage in more direct service provision. This suggests that rural LE-VS specialists may be expected to have a broader set of skills and expertise than those in other communities to meet their job demands. Although it is crucial for all LEV program personnel to understand their community context (e.g., culture, legal system, geography, and community resources), the implications for victim assistance are different in rural and urban areas. For example, serving large geographic areas and the need to maintain care for livestock create challenges specific to rural communities. Rural areas may also have fewer resources available locally, which may require special considerations, such as relocating a victim so they can access the services and assistance they need. It is also important to recognize that rural communities are often located close to urban areas, and there is value in developing relationships among rural and urban LEAs and service providers. Understanding how to effectively implement LEV programs in both rural and urban areas is essential to ensuring that victims receive high-quality, trauma-informed assistance, no matter where they live.

References

Abraham, J., & Ceccato, V. (2022). Crime and safety in rural areas: A systematic review of the English-language literature 1980–2020. *Journal of Rural Studies, 94,* 250–273. https://doi.org/10.1016/j.jrurstud.2022.05.010

Bennett, K. J., Borders, T. F., Holmes, G. M., Kozhimannil, K. B., & Ziller, E. (2019). What is rural? Challenges and implications of definitions that inadequately encompass rural people and places. *Health Affairs, 38*(12), 1985–1992. https://doi.org/10.1377/hlthaff.2019.00910

Brossoie, N., & Roberto, K. A. (2015). Community professionals' response to intimate partner violence against rural older women. *Journal of Elder Abuse & Neglect, 27*(4-5), 470–488. https://doi.org/10.1080/08946566.2015.1095664

Bureau of Justice Statistics. (n.d.). *NCVS dashboard, terms & definitions*. U.S. Department of Justice, Office of Justice Programs. https://ncvs.bjs.ojp.gov/terms#terms

Bureau of Justice Statistics. (2020). *Law Enforcement Management and Administrative Statistics (LEMAS)*. U.S. Department of Justice, Office of Justice Programs. Inter-university Consortium for Political and Social Research [distributor], 2023-03-07. https://doi.org/10.3886/ICPSR38651.v1

Bureau of Justice Statistics. (2022). *National Crime Victimization Survey, NCVS dashboard.* U.S. Department of Justice, Office of Justice Programs. https://ncvs.bjs.ojp.gov/single-year-comparison/characteristic

Center for Substance Abuse Treatment. (2014). *Trauma-informed care in behavioral health services.* Rockville (MD): Substance Abuse and Mental Health Services Administration (US); (Treatment Improvement Protocol (TIP) Series, No. 57.) https://www.ncbi.nlm.nih.gov/books/NBK207201/

Deterding, N. M., & Waters, M. C. (2018). Flexible coding of in-depth interviews: A twenty-first-century approach. *Sociological Methods & Research, 50(*2), 708–739. https://doi.org/10.1177/0049124118799377

Dudgeon, A., & Evanson, T. A. (2014). Intimate partner violence in rural U.S. areas: What every nurse should know. *American Journal of Nursing, 114*(5), 26–35. https://doi.org/10.1097/01.NAJ.0000446771.02202.35

Eastman, B. J., & Bunch, S. G. (2007). Providing services to survivors of domestic violence: A comparison of rural and urban service provider perceptions. *Journal of Interpersonal Violence, 22*(4), 465–473. https://doi.org/10.1177/0886260506296989

Edwards, K. M. (2015). Intimate partner violence and the rural–urban–suburban divide: Myth or reality? A critical review of the literature. *Trauma, Violence, & Abuse, 16*(3), 359–373. https://doi.org/10.1177/1524838014557289

Fitzsimons, N., Hagemeister, A., & Braun, E. (2011). Interpersonal violence against people with disabilities: Understanding the problem from a rural context. *Journal of Social Work in Disability & Rehabilitation, 10*(3), 166–188. https://doi.org/10.1080/1536710X.2011.596437

Fritz, A. H., Sheffield, E. C., Chastain, P. L., Henning-Smith, C., Lewis, V., & Kozhimannil, K. B. (2024). Intimate partner violence in rural communities: Perspectives from key informant interviews. *UMN Rural Health Research Center Policy Brief.* https://rhrc.umn.edu/wp-content/uploads/2024/03/UMN-Policy-Brief_Intimate-partner-violence_3.8.pdf

Goodison, S.E. (2022). *Local police departments personnel.* (2020). U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. NCJ 305187. https://bjs.ojp.gov/sites/g/files/xyckuh236/files/media/document/lpdp20.pdf

Grossman, S. F., Hinkley, S., Kawalski, A., & Mangrave, C. (2005). Rural versus urban victims of violence: The interplay of race and region. *Journal of Family Violence, 20*(2), 71–81. https://doi.org/10.1007/s10896-005-3170-y

International Association of Chiefs of Police and Office for Victims of Crime. (2020). *Introduction to the ELERV strategy: Enhancing Law Enforcement Response to Victims (ELERV) strategy* (Vol. 2nd ed). https://www.theiacp.org/sites/default/files/ELERV/00.%20Intro%20to%20ELERV-%20ELERV%20Foundational%20Document%20(links%20embedded).pdf

Johnson, M., McGrath, S. A., & Miller, M. H. (2014). Effective advocacy in rural domains: Applying an ecological model to understanding advocates' relationships. *Journal of Interpersonal Violence, 29*(12), 2192–2217. https://doi.org/10.1177/0886260513516862

Kim, J., Rizo, C. F., Wretman, C. J., Alzuru, C., Fulton, D., Lotz, L. M., Chesworth, B. R., Givens, A. D., & Macy, R. J. (2024). Understanding intimate partner violence service delivery for Latinx survivors in rural areas. *Violence against Women, 30*(9), 2227–2251. https://doi.org/10.1177/10778012221140136

Lynch, K. R., & Logan, T. K. (2023). Rural and urban/suburban victim professionals' perceptions of gender-based violence, victim challenges, and safety advice during the COVID-19 pandemic. *Violence against Women, 29*(5), 1060–1084. https://doi.org/10.1177/10778012221099987

Lynn, B., Osborne, D. L., & Edwards, B. (2023). Policing farm crime in the United States: A research note. *International Journal of Rural Criminology, 7(*2), 235–252. https://doi.org/10.18061/ijrc.v7i2.9234

Maguire-Jack, K., & Kim, H. (2021). Rural differences in child maltreatment reports, reporters, and service responses. *Children and Youth Services Review, 120,* 105792. https://doi.org/10.1016/j.childyouth.2020.105792

Peek-Asa, C., Wallis, A., Harland, K., Beyer, K., Dickey, P., & Saftlas, A. (2011). Rural disparity in domestic violence prevalence and access to resources. *Journal of Women's Health, 20*(11), 1743–1749. https://doi.org/10.1089/jwh.2011.2891

Tibaduiza, E., Barrick, K., Presler-Jur, P., Yu, L., Grossman, R., Brinton, J., Feeney, H., Rinderle, A., Young, A., & Alonso, J. (2023). *Enhancing response to victims: A formative evaluation of OVC's Law Enforcement-Based Victim Services (LEV) program: Final report*. U.S. Department of Justice, National Institute of Justice. https://nij.ojp.gov/library/publications/enhancing-response-victims-formative-evaluation-ovcs-law-enforcement-based-0

Terry, A. N. (2020). The architecture of rural life: The dangers of dense collective efficacy for at-risk girls. *Rural Sociology*, *85*(3), 780–805. https://doi.org/10.1111/ruso.12325

Terry, A. N. (2024). Rural culture and coercive sexual environments: A queer path from victimization to incarceration. *Critical Criminology, 31*(4), 1097–1111. https://doi.org/10.1007/s10612-024-09747-7

U.S. Census Bureau (2019). *Understanding and using American Community Survey data.* https://www.census.gov/content/dam/Census/library/publications/2019/acs/ACS_rural_handbook_2019_ch01.pdf

Warnken, H. (2018). *What does the data tell us about law enforcement-based victim services?* Police Chief Magazine. https://www.policechiefmagazine.org/what-does-the-data-tell-us/

Youngson, N., Saxton, M., Jaffe, P. G., Chiodo, D., Dawson, M., & Straatman, A. L. (2021). Challenges in risk assessment with rural domestic violence victims: Implications for practice. *Journal of Family Violence, 36*(5), 537–550. https://doi.org/10.1007/s10896-021-00248-7

Yun, I., Swindell, S., & Kercher, G. (2009). Victim services delivery: A comparison of rural and urban communities. *Southwest Journal of Criminal Justice, 6*(2), 145–162. https://silo.tips/download/victim-services-delivery-a-comparison-of-rural-and-urban-communities